

GUIDE TO COMPLETING THIS FORM

- Complete one form for each individual. Complete all applicable sections of this form in BLOCK LETTERS.
- Contact your broker/solicitor if you have any queries.

SECTION 1A: PERSONAL DETAILS

Surname

Date of birth

Full given name(s)

Residential address (PO Box is NOT acceptable)

Street

Suburb

State

Postcode

Country

COMPLETE THIS PART IF INDIVIDUAL IS A SOLE TRADER

Full Business Name (if any)

ABN (if any)

Principal place of business (if any) (PO Box is NOT acceptable)

Street

Suburb

State

Postcode

Country

SECTION 1B: VERIFICATION PROCEDURE

Verify the **individual's** full name, and **EITHER** their date of birth **OR** residential address

- Complete Part 1 (or if the individual does not own a document from Part 1, then complete either Part II or III)
- Contact your licensee if the individual is unable to provide the required documents.

PART I – ACCEPTABLE PRIMARY ID DOCUMENTS

Tick <input type="checkbox"/>	Select ONE valid option from this section only
<input type="checkbox"/>	Australian State / Territory driver's licence containing a photograph of the person
<input type="checkbox"/>	Australian passport (a passport that has expired within the preceding 2 years is acceptable)
<input type="checkbox"/>	Card issued under a State or Territory for the purpose of proving a person's age containing a photograph of the person
<input type="checkbox"/>	Foreign passport or similar travel document containing a photograph and the signature of the person*.

PART II – ACCEPTABLE SECONDARY ID DOCUMENTS – should only be completed if the individual does not own a document from Part I

Tick <input type="checkbox"/>	Select ONE valid option from this section
<input type="checkbox"/>	Australian birth certificate.
<input type="checkbox"/>	Australian citizenship certificate
<input type="checkbox"/>	Pension card issued by Centrelink
<input type="checkbox"/>	Health card issued by Centrelink.
Tick <input type="checkbox"/>	AND ONE valid option from this section
<input type="checkbox"/>	A document issued by the Commonwealth or a State or Territory within the preceding 12 months that records the provision of financial benefits to the individual and which contains the individual's name and residential address.
<input type="checkbox"/>	A document issued by the Australian Taxation Office within the preceding 12 months that records a debt payable by the individual to the Commonwealth (or by the Commonwealth to the individual), which contains the individual's name and residential address. <i>Block out the TFN before scanning, copying or storing this document.</i>
<input type="checkbox"/>	A document issued by a local government body or utilities provider within the preceding 3 months which records the provision of services to that address or to that person (the document must contain the individual's name and residential address).
<input type="checkbox"/>	If under the age of 18, a notice that: was issued to the individual by a school principal within the preceding 3 months; and contains the name and residential address; and records the period of time that the individual attended that school.

PART III – ACCEPTABLE FOREIGN ID DOCUMENTS – should only be completed if the individual does not own a document from part 1

Tick <input type="checkbox"/>	BOTH documents from this section must be presented
<input type="checkbox"/>	Foreign driver's licence that contains a photograph of the person in whose name it issued and the individual's date of birth.*
<input type="checkbox"/>	National ID card issued by a foreign government containing a photograph and a signature of the person in whose name the card was issued*.

*Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator.

SECTION 1C: RECORD OF VERIFICATION PROCEDURE

IMPORTANT:

- **Attach** a legible copy of the ID documentation used to verify the trust (and any required translation).

ID DOCUMENT DETAILS	Document 1	Document 2
Verified From	<input type="checkbox"/> Original <input type="checkbox"/> Certified copy	<input type="checkbox"/> Original <input type="checkbox"/> Certified copy
Document Issuer		
Issue date		
Expiry date		
Document number		
Accredited English translation	<input type="checkbox"/> N/A <input type="checkbox"/> Sighted	<input type="checkbox"/> N/A <input type="checkbox"/> Sighted

SECTION 1D: IDENTIFYING OFFICER DETAILS – identification and verification conducted by:

I certify that I have sighted the original document/s and this is a true copy of the original.

Date Verified (dd/mm/yyyy)

Solicitor/Mortgage Broker name

Phone No.

FBAA or MIAA accreditation attached (if not already provided, for Mortgage brokers only)