

# Customer identification checklist

## A. Customer - Individual

### A1. Personal information

Full name (include middle names) \_\_\_\_\_

Date of birth \_\_\_\_\_

Residential address \_\_\_\_\_

Any other names known by \_\_\_\_\_

### A2. Documentation to verify information in A1 - satisfy *either* Option 1 or Option 2

#### OPTION 1 Primary photographic documentation - ONE of the following: Please tick

Drivers Licence (photographic)	State		Number		Expiry		<input type="checkbox"/>
Passport (not expired by more than two years)	Country		Number		Expiry		<input type="checkbox"/>
State or Territory officially issued identification card	Card type			Issued by			<input type="checkbox"/>
	Number			Expiry			<input type="checkbox"/>
National Identity card (photographic)	State		Number		Expiry		<input type="checkbox"/>
Other	Details						<input type="checkbox"/>

#### OPTION 2 Primary non-photographic documentation: Please tick

##### (a) ONE of the following:

Birth certificate \_\_\_\_\_

Citizenship certificate \_\_\_\_\_

Pension card or Health Care card issued by Centrelink \_\_\_\_\_

##### (b) AND at least ONE of the following:

Financial Benefits Statement issued by Commonwealth, a State or a Territory within the last 12 months \_\_\_\_\_

Income Tax Assessment Notice issued by the Australian Tax Office within the last 12 months \_\_\_\_\_

Rates or Utility Notice issued by a local government body or utilities provider within the last 3 months \_\_\_\_\_

Individual under 18 years of age ONLY: a notice issued by a school principal within the last three months which states the individual's name, residential address and how long the individual has attended the school \_\_\_\_\_

**B. Transaction - Information**

Location of asset being purchased with the loan (if any) \_\_\_\_\_

Address of the security property (if any) \_\_\_\_\_

Source of Funds for repayment of investment (provide A/C details) \_\_\_\_\_

**C. Customer - Company (Pty & Ltd, but not listed companies)****Please tick**

Complete the names of ALL directors in the spaces below

Name 1 \_\_\_\_\_

Name 2 \_\_\_\_\_

Name 3 \_\_\_\_\_

*If more space is required, use a blank page and attach*

Collect information and verify the identity of at least ONE director on a separate Customer Identification Checklist (Parts A1, A2, E and F)

Collect the transaction information as per Part B above

Complete the personal information for ALL shareholders owning more than 25% of the company (no need to verify) in the spaces below

	Full name	Date of birth	Address	Other names
1				
2				
3				

*AND collect the following (no need to verify)*

Full Name of Company as registered by ASIC \_\_\_\_\_

ACN issued to the Company \_\_\_\_\_

Full Address of the Company's registered office \_\_\_\_\_

Full Address of the Company's principal place of business \_\_\_\_\_

**D. Customer - Trust****Please tick**

Complete the names of all trustee(s) in the spaces below

Name 1 \_\_\_\_\_

Name 2 \_\_\_\_\_

Name 3 \_\_\_\_\_

*If more space is required, use a blank page and attach*

If the trustee(s) is an individual, complete a separate Customer Identification Checklist for EACH trustee (Parts A1, A2, E and F).

If the trustee(s) is a company, collect information as per Part C (no need to verify)

In respect to each entity having the power to change the trustee, complete the following information for each

	Full name	Date of birth	Address	Other names
1				
2				
3				

If more space is required, use a blank page and attach

Collect the transaction information as per part B above

**AND** collect the following (no need to verify)

Full name of trust \_\_\_\_\_

Type of trust (eg unit, discretionary, hybrid) \_\_\_\_\_

Unless the trust is widely held (10 or more unit holders), the full name of each beneficiary or a description of the class of the beneficiaries of the trust: \_\_\_\_\_

if more space is required then attach additional pages

## E. Identification checks (individuals only)

Please tick

The documentation provided is current or within acceptable time frames

All photographic identification is a "reasonable likeness" to the individual

Nothing in my dealings with the customer have raised any suspicions concerning the proposed transaction

Face to face verification of the customer was carried out by me

Face to face verification was not possible (certified copy of original documentation required)

### Reason

(If Option 2 used) verification against primary photographic documentation was not possible

### Reason

## F. Signatures

Referrer name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**MFAA or FBAA Member** FBAA  MFAA  FBAA / MFAA No: \_\_\_\_\_

### Australian Credit Licence Confirmation

Name of Licence Holder or Registered Entity: \_\_\_\_\_ ACL/ Reg No: \_\_\_\_\_

If you are an Authorised Credit Representative (ACR) of the above Licensee/Registered Entity you must complete below, or provide proof of appointment:

Full name of ACR: \_\_\_\_\_ ACR No: \_\_\_\_\_