

Identification and Verification Reference



This form may be lodged with Uniting Financial Services or posted to:
Uniting Financial Services
REPLY PAID 2178
SYDNEY SOUTH NSW 1234



Helpful hints for completing this application:

- This form must be completed for all new applicants and signatories (including attorneys appointed under a Power of Attorney by an applicant), and must be signed by an 'authorised certifier' in Step 4. Additional applicants not yet identified by Uniting Financial Services must each complete a separate copy of the Individuals Identification and Verification Reference form which can be found on our website: www.unitingfinancial.com.au
- In order for the identification document certification to be accepted, the certifier must sight the original document and also certify the copy as being a true and correct image of the original. If there are multiple pages to the document, each page must be certified and signed by the certifier. The certifier of the identification document(s) must also complete their details in Step 4 of this form. The applicant must then attach the certified copies to this document and provide them to Uniting Financial Services (via mail or in person).
- **Facsimile or emailed copies are not acceptable.**

TO VERIFY A PARTNERSHIP

Acceptable ID Documents (select one of the following)

- Original, a certified copy or certified extract of the partnership agreement. *
- Certified copy or certified extract of minutes of a partnership meeting. *
- Original current membership certificate (or equivalent) of a professional association. *
- Membership details independently sourced from relevant professional association. *
- Notice issued by Australian Taxation Office within last 12 months e.g. Notice of Assessment.
- Original or certified copy of a certificate of registration of business name issued by a government or government agency in Australia.*

TO VERIFY MEMBERSHIP OF ASSOCIATION - Acceptable ID

Documents (select one of the following)

- Information provided by ASIC or by State, Territory or overseas body responsible for incorporation of the association, e.g. certificate of incorporation (where applicable). *
- Constitution or rules of association or a certified copy or certified extract of constitution or rules of the association. *
- Minutes of meeting of association or certified copy or certified extract of any minutes of meeting of association (stating appointed office bearers and detailing the nominated signatories for bank accounts signed by an office bearer). *

*Documents written in a language other than English must be accompanied by an English translation prepared by an accredited translator.

At least one partner and association signatory needs to be fully identified in Step 3, including all individuals with 25% or more of ownership. Additional applicants can find a separate copy of the Individual Identification & Verification Reference form on our website: www.unitingfinancial.com.au

Please provide any of:

OPTION 1

AT LEAST ONE Primary Identification Document (photo identification)

Primary Identification Document – Photo Identification

Please provide CERTIFIED COPIES of AT LEAST ONE of the following forms of photo identification:

- Driver's licence - front and back to be provided showing current address
- Passport
- Proof of Age/Photo card (Government issued)

By providing certified copies of any of the above, no further documentation is required.

OR

OPTION 2

TWO Primary Identification Documents (non-photo)

Primary Identification Document – Non-photo Identification

Please provide CERTIFIED COPIES of the following forms of non-photo identification:

- Citizenship certificate
- Birth certificate (if international, please provide a certified English translated copy)
- Pension card

By providing TWO certified copies of any of the above, no further documentation is required. Alternatively, provide ONE certified copy of any of the above PLUS ONE certified copy of a Secondary Identification Document.

OR

OPTION 3

ONE Primary Identification Document (non-photo) PLUS ONE Secondary Identification Document (non-photo).

Secondary Identification Document

Please provide ONE CERTIFIED COPY of any Primary Identification Document – non-photo identification plus ONE CERTIFIED COPY of any of the following forms of non-photo identification:

- Marriage certificate
- Utilities notice
- Council rates notice
- Bank/credit card statement
- Letter from school Principal (for minors)



Need help or have a question?

Call us on **1300 133 673**

Visit us at unitingfinancial.com.au

Email us at contactus@unitingfinancial.com.au

PARTNERSHIP DETAILS ON NEXT PAGE ▶

STEP 1 PART A – PARTNERSHIP DETAILS

TO BE COMPLETED FOR ALL PARTNERSHIPS

Full name of partnership

Full business name (if any)

ABN

Registered office address (PO Box is not acceptable)

Principal place of business (PO Box is not acceptable)

Country where the partnership was established?

Country of tax residency?

How many partners are there?

Partner 1

Full name

Owns 25% or more

General Partner

Limited Partner

Residential address (PO Box is not acceptable)

Partner 2

Full name

Owns 25% or more

General Partner

Limited Partner

Residential address (PO Box is not acceptable)

Partner 3

Full name

Owns 25% or more

General Partner

Limited Partner

Residential address (PO Box is not acceptable)

Partner 4

Full name

Owns 25% or more

General Partner

Limited Partner

Residential address (PO Box is not acceptable)

STEP 1 PART B – PARTNERSHIP BENEFICIAL OWNERS

TO BE COMPLETED FOR ALL PARTNERSHIPS.

Beneficial Owners

Provide details of any individual (natural person) who ultimately owns or controls (directly or indirectly) the partnership. For a partnership, this would be direct or indirect ownership of 25% or more of the shares in the partnership or control of 25% or more of the shares (e.g. through voting rights). If there is no such individual in this position, then it will be an individual who is responsible for the strategic or financial decision of the partnership because of the position they hold, e.g. managing partner.

A. Are there any beneficial owners who own 25% or more of the partnership, directly or indirectly?

Yes – please provide details of individuals below No

OR

B. Are there individuals entitled (either directly or indirectly) to exercise 25% or more of the voting rights of the partnership?

Yes – please provide details of individuals below

No – please provide details of any individuals who are responsible for the strategic or financial decisions of the partnership (i.e. the individual who exercises primary control because of the position they hold, e.g. Managing Partner or senior managing official)

Details of Beneficial Owner 1

Title Surname Given name(s)

Other name (if any) Date of birth / / Gender Male Female Other

Full residential address (PO Box is not acceptable)

Tax Residency Information (Please provide all countries where you are a resident for tax purposes and Tax Identification Number (TIN) for each country of tax residency)

Countries of Tax Residency	Tax Identification Number (TIN)
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Details of Beneficial Owner 2

Title Surname Given name(s)

Other name (if any) Date of birth / / Gender Male Female Other

Full residential address (PO Box is not acceptable)

Tax Residency Information (Please provide all countries where you are a resident for tax purposes and Tax Identification Number (TIN) for each country of tax residency)

Countries of Tax Residency	Tax Identification Number (TIN)
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

At least one partner needs to be fully identified in all of Step 3. Additional applicants can find a separate copy of the Individuals Identification & Verification Reference form on our website: www.unitingfinancial.com.au

ASSOCIATION DETAILS ON NEXT PAGE ►

STEP 2 PART A – ASSOCIATION DETAILS

TO BE COMPLETED FOR ALL ASSOCIATIONS

Type of association

Incorporated Unincorporated

Full name of association

Full business name (if any)

ABN

<input type="text"/>	<input type="text"/>
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Registered office address (PO Box is not acceptable)

Principal place of business / administration (PO Box is not acceptable)

Country where the association was established

Name of Registration Body

Identification Number of Registration Body

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Full name(s) of the following (or equivalent in each case)

Title of Chairperson

Full Given Name(s)

Surname

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Title of Secretary

Full Given Name(s)

Surname

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Title of Treasurer

Full Given Name(s)

Surname

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Tax Residency Details

The Association is only a tax resident of Australia

OR

The Association has no residency for tax purposes and its country of effective management or jurisdiction in which its principal/registered office is located in:

Provide full name and residential address of the public officer below (or chairman, secretary or treasurer if there is no public officer).

Full name

Residential address (PO Box is not acceptable)

Date of birth

Gender

 / /

Male Female Other

This Public Officer is only a tax resident in Australia

STEP 2 PART B – ASSOCIATION BENEFICIAL OWNERS

TO BE COMPLETED FOR ALL ASSOCIATIONS.

Beneficial Owners

Provide the details of any individual who would be entitled to 25% or more of the property of the association if it were dissolved. Where there are no such individuals, or there is doubt as to whether the individuals exercise control through their entitlement, provide the details of any individuals who exercise control (directly or indirectly) through:

- Ultimate authority to make financial and operating decisions on a day to day basis or voting rights of 25% or more; or
- Authority to control the decisions and operations of the association through a power of veto.

A. Are there any beneficial owners who are entitled to 25% or more of the association, directly or indirectly?

Yes – please provide details of individuals below No

OR

B. Are there individuals entitled (either directly or indirectly) to exercise 25% or more of the voting rights of the association?

Yes – please provide details of individuals below

No – please provide details of any individuals who are responsible for the strategic or financial decisions of the partnership (i.e. the individual who exercises primary control because of the position they hold, e.g. senior managing official)

Details of Beneficial Owner 1

Title Surname Given name(s)

Other name (if any) Date of birth / / Gender Male Female Other

Full residential address (PO Box is not acceptable)

Tax Residency Information (Please provide all countries where you are a resident for tax purposes and Tax Identification Number (TIN) for each country of tax residency)

Countries of Tax Residency	Tax Identification Number (TIN)
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Details of Beneficial Owner 2

Title Surname Given name(s)

Other name (if any) Date of birth / / Gender Male Female Other

Full residential address (PO Box is not acceptable)

Tax Residency Information (Please provide all countries where you are a resident for tax purposes and Tax Identification Number (TIN) for each country of tax residency)

Countries of Tax Residency	Tax Identification Number (TIN)
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

At least one signatory needs to be fully identified in all of Section 3. Additional applicants can find a separate copy of the Individuals Identification & Verification Reference form on our website: www.unitingfinancial.com.au

INDIVIDUAL DETAILS ON NEXT PAGE ►

STEP 3 PART A – INDIVIDUAL DETAILS

At least one partner and association signatory needs to be fully identified in all of Step 3. Additional applicants and signatories can find a separate copy of the Individuals Identification & Verification Reference form on our website: www.unitingfinancial.com.au

Title	Given names	Surname	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Occupation	Gender	Date of birth	
<input type="text"/>	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other	<input type="text"/> / <input type="text"/> / <input type="text"/>	
Nationality	Do you have multiple citizenships?		
<input type="text"/>	Citizenship 2 <input type="text"/>		
	Citizenship 3 <input type="text"/>		
Are you a resident of Australia for tax purposes?			
<input type="checkbox"/> Yes <input type="checkbox"/> No Specify country of residence for tax purposes: <input type="text"/>			
Residential address	Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Postal address (if different from above)	Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Telephone	Mobile	Fax	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Email			
<input type="text"/>			

STEP 3 PART B – POLITICALLY EXPOSED PERSON*

Are you or any immediate family members (e.g. parent, step-parent, child, step-child, adopted child, spouse, sibling, step-sibling or adopted sibling) or close associates (individuals who are closely connected either socially or professionally) a Politically Exposed Person (PEP)?

Yes (Please specify position e.g. Politician/Diplomat) No (If "No" please go to Step 3 Part C)

By signing this form you confirm that you have, or you will, inform any member of your family referred to above of the information about him or her provided by you in this application form.



* A **Politically Exposed Person (PEP)** is someone who is entrusted with and/or performs prominent public functions, for example:

- Heads of state or government, senior politicians, cabinet ministers;
- Influential functionaries in nationalised industries and government administration;
- Senior judges;
- Senior political party functionaries;
- Senior and/or influential officials, functionaries and military leaders and people with similar functions in international or supranational organisations;
- Members of ruling royal families;
- Senior and/or influential representatives of religious organisations (e.g. If these functions are connected with political, judicial, military or administrative responsibilities).

To be signed in the presence of the authorised certifier.

SIGN HERE

Print full name

Date / /

DECLARATION OF INDIVIDUAL ON NEXT PAGE ▶

STEP 3 PART C – DECLARATION

This declaration is to be signed by the nominated representative identified in Step 3.

PRIVACY

We are collecting your personal information to identify you in accordance with the Anti-Money Laundering and Counter Terrorism Funding Act 2006 (Cth.). For more information about how we collect and handle personal information, including how you can access, or seek correction of, your information or contact us with any feedback, you can view and obtain our Privacy Policy from our website: www.unitingfinancial.com.au

COLLECTION, USE AND DISCLOSURE OF PERSONAL INFORMATION

Information is collected from you to administer and manage your investments and if some or all the information is not collected then it may not be possible to administer your investment. We may use your personal information to provide you with information and marketing material about other products and services provided by Uniting Financial Services. We do not provide your information to any other organisation without your consent, other than those organisations that provide administrative or other services as part of the operation of our business.

MARKETING OPTIONS

From time to time, we may contact you to notify you about, or seek feedback on, our products and services. If you don't want us to contact you, or to receive communication items, simply tick here:

No, I/we do not wish to be contacted with marketing material.

SIGNATURE OF APPLICANT/SIGNATORY

- You consent to the collection, use and disclosure of personal information as detailed in the Privacy Policy, Financial Services Guide, Product Disclosure Statement and the Product Information Brochure.
- You understand and acknowledge that the law requires you to provide true and correct information and state all names by which you are commonly known.
- You understand that the law prohibits the use of false names and the giving, use or production of false or misleading information or documents in connection with the provision of financial services and making, possession or use of a false document in connection with an identification procedure.
- You have obtained consent of any individual(s) whose personal information is provided in the application and they have authorised the collection, use or exchange of their information in accordance with Privacy Policy.
- You certify that you are authorised by, and have the consent of the organisation and all beneficial owners to provide information on their behalf and they have confirmed to you that the information provided about them is true and correct. You confirm you have made them aware that this information and information relating to the account may be provided to the tax authorities.
- You undertake to provide Uniting Financial Services with such additional information or documentation as Uniting Financial Services may request at any future time to ensure compliance with the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (Cth.).
- You declare that the details as shown on this form are complete and correct and that you will advise Uniting Financial Services if these details change.

To be signed in the presence of the authorised certifier.

SIGN HERE

Print full name

Position

Date / /

AUTHORISED CERTIFIER DETAILS ON NEXT PAGE

STEP 4 – DETAILS OF AUTHORISED CERTIFIER

LIST OF AUTHORISED CERTIFIERS - MUST BE COMPLETED BY AN INDIVIDUAL CURRENTLY SERVING AS:

- Justice of the Peace;
- Person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia as a legal practitioner;
- Judge of a court;
- Magistrate;
- Chief Executive Officer of a Commonwealth Court;
- Registrar or Deputy Registrar of a court;
- Notary Public (for the purposes of the Statutory Declaration Regulations (1993));
- Police officer;
- Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public;
- Permanent employee of the Australian Postal Corporation with two or more years continuous service who is employed in an office supplying postal services to the public;
- Australian consular officer or an Australian diplomatic officer;
- Officer with two or more continuous years of service with one or more financial institutions;
- Finance company officer with two or more continuous years of service with one or more finance companies;
- Officer with, or authorised representative of, a holder of an Australian Financial Services Licence, having two or more continuous years of service with one or more licences; and
- Member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with two or more years of continuous membership.



ALL supporting documents attached to this application must:

- Include the applicant's name;
- Be written in English; and
- Be certified as a true and correct copy of the original by the authorised certifier.

If you are unable to provide identification documentation to satisfy these requirements, please contact one of our Uniting Financial Services team members on **1300 133 673**.

Title	Given names	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>
Residential address		
<input type="text"/>		
Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>
Telephone	Category/occupation of authorised certifier	
<input type="text"/>	<input type="text"/>	

To be signed by the authorised certifier

SIGN HERE

Print full name

Date / /



APPLICATION CHECKLIST

- Have you signed Step 3 Part C - Authorisation?
- Has the authorised certifier completed their details in Step 4?
- Has the authorised certifier signed each copy/ies of identification documents?
- Have you attached your certified identification documents to this form?
- Have you provided copies of the front and back of your driver's license?

Financial services are provided by The Uniting Church (NSW) Trust Association Limited ACN 000 022 480, ABN 89 725 654 978, AFSL 292186 ("UCTAL") and by The Uniting Church in Australia Property Trust (NSW) ABN 77 005 284 605 ("UCAPT") (together and separately "Uniting Financial Services"), for The Uniting Church in Australia, Synod of NSW and the ACT ("Synod"), under s.911A Corporations Act 2001 (Cth.) authorisation and pursuant to APRA Banking Exemption No. 1 of 2017 and ASIC Regulatory Guide 87 and ASIC Corporations (Charitable Investment Fundraising) Instrument 2016/813 exemptions. Uniting Financial Services® is a registered trademark of UCTAL used with permission by UCAPT. None of The Uniting Church in Australia, UCAPT and UCTAL is prudentially supervised by APRA. Therefore, investments with and contributions to these Uniting Church organisations will not receive the benefit of the financial claims scheme or the depositor protection provisions in the Banking Act 1959 (Cth.). All financial services and products are designed for investors who wish to promote the religious and charitable purposes of Uniting Financial Services and The Uniting Church in Australia and for whom profit considerations are not of primary importance in their decision to invest.