



Instruction sheet

Completing the identification form for Registered Co-operatives

Identification and Verification

Anti-Money Laundering & Counter-Terrorism Financing laws require BWA Managed Investments (BWAMI) to establish the identity of its clients (and other persons associated with a client's account). To do this, you need to complete the attached form and this instruction sheet will assist you in doing so.

Verifying the information

All documents are required to be verified by completing sections 2 and 3 of the form.

What do I need to complete?

The below table provides you with a guide to which sections you need to complete as identified by a solid dot (●) and also provides a brief explanation of each of the sections.

How do I get a document certified?

To be correctly certified, we need the document(s) to be certified as 'True copy of the original document' and signed by:

- a Justice of the Peace
- a solicitor
- a police officer
- a magistrate
- a Notary Public (for the purposes of the Statutory Declaration Regulations 1993)
- an employee of Australia Post (with two or more years of continuous service)
- a financial adviser (provided they have two or more years of continuous service)
- an accountant (provided they hold a current membership to a professional accounting body)
- an Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955)
- an officer of a bank, building society, credit union or finance company provided they have two or more years of continuous service.

The party certifying the ID document(s) will also need to state what position they hold and sign and date the document(s). If the certification does not appear on the document(s), you may be asked to send in new certified documents. There are additional persons who can certify documents. A full list of the persons who can certify documents is available from our forms library at bwami.com.au.

Section	
1	Registered Co-operative Identification Procedure
1.1	General Information ●
1.2	Address Information ●
2	Registered Co-operative Verification Procedure ●
3	Record of Verification Procedure ●



Identification Form Registered Co-Operative

GUIDE TO COMPLETING THIS FORM.

This form is for Registered Co-operatives and accompanies the Australian Companies application form.

Complete all applicable sections of this form in BLOCK LETTERS.

SECTION 1: REGISTERED CO-OPERATIVE IDENTIFICATION PROCEDURE

1.1 GENERAL INFORMATION

Full name of Registered Co-operative

Provide ID number issued by relevant registration body (if any)

Full name of the following (or equivalent in each case):

	Full given name(s)	Surname
Chairman	<input type="text"/>	<input type="text"/>
Secretary	<input type="text"/>	<input type="text"/>
Treasurer	<input type="text"/>	<input type="text"/>

Complete a separate Individual ID Form for each individual unless an Individual ID Form has already been provided for the individual.

1.2 ADDRESS INFORMATION (select and provide ONE of the following)

Provide the address of the registered office of the Cooperative. If there is no registered office, provide the principal place of operations.

Registered office

Address (PO Box, RMB, C/- or similar are NOT acceptable)

Street

Suburb

State

Postcode

Country

If a registered office is provided go to Section 2.

Principal place of operations

Address (PO Box, RMB, C/- or similar are NOT acceptable)

Street

Suburb

State

Postcode

Country

If a principal place of operations is provided go to Section 2.

SECTION 2: REGISTERED CO-OPERATIVE VERIFICATION PROCEDURE

Information to be verified:

- Full name of the Registered Co-operative
- ID number issued by relevant registration body (if any).

Tick ✓	Verification options (select one or more of the following options used to verify the Registered Co-operative)
<input type="checkbox"/>	Information provided by the State or Territory body responsible for the registration of the Co-operative.
<input type="checkbox"/>	An original, certified copy or certified extract of any register maintained by the Co-operative.
<input type="checkbox"/>	An original, certified copy or certified extract of the minutes of meeting of the Co-operative.

IMPORTANT NOTE:

- Complete the Record of Verification Procedure in Section 3
- Ensure that a separate Individual ID Form has been completed for each Chairman, Treasurer and Secretary (or equivalent roles) of the Registered Co-operative
- You may wish to attach copies of the ID documentation used to verify the Registered Co-operative

SECTION 3: RECORD OF VERIFICATION PROCEDURE

ID document details	Document 1	Document 2 (if required)
Verified from	<input type="checkbox"/> Performed search <input type="checkbox"/> Original <input type="checkbox"/> Certified Copy	<input type="checkbox"/> Performed search <input type="checkbox"/> Original <input type="checkbox"/> Certified Copy
Document Issuer/Website	<input type="text"/>	<input type="text"/>
Document type	<input type="text"/>	<input type="text"/>
Issue date	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Search date	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>

By completing and signing this Record of Verification Procedure I declare that:

- an identity verification procedure has been completed in accordance with the AML/CTF Rules, in the capacity of an AFSL holder or their authorised representative
- a separate Individual ID Form has been completed for each Chairman, Treasurer and Secretary (or equivalent roles) of the Registered Co-operative.

AFS Licensee Name	<input type="text"/>	AFSL No.	<input type="text"/>
Representative/Employee Name	<input type="text"/>	Phone No.	<input type="text"/>
Signature	<input type="text"/>	Date verification completed	<input type="text"/>