



Trust Identification Form and Verification Form

Guide to completing this form.

Complete the following in CAPITAL LETTERS. Where indicated, please mark boxes with a tick (✓).

Section 1 (all parts) – all trusts.

Section 2 (all parts) – unregulated trusts

AND select and complete one of the following sections for ONLY ONE of the trustees:

Section 3 (applicable parts) – selected trustee is an Individual.

Section 4 (applicable parts) – selected trustee is an Australian Company.

Only send the completed sections of this form with the application form. Contact your licensee if you have any queries.

SECTION 1: TRUST DETAILS

1.1 GENERAL INFORMATION

Full name of trust

Full business name (if any)

Country where trust established

Are you a charity? Yes No

Principal trust activity

1.2 TYPE OF TRUST (select only one of the following trust types and provide the information requested)

Registered managed investment scheme

Provide Australian Registered Scheme Number (ARSN)

Regulated trust (eg an SMSF)

Provide name of the regulator (eg ASIC, APRA, ATO)

Provide the trust's ABN or registration / licensing details

Government superannuation fund

Provide name of the legislation establishing the fund

Other trust type (unregulated trust)

Trust description (eg family, unit, charitable, estate)

SECTION 2: OTHER TRUST TYPES

2.1 BENEFICIARY DETAILS (only complete if 'Other trust type' is selected in section 1.2 above)

Do NOT complete if the trust is a registered managed investment scheme, regulated trust (eg SMSF) or government superannuation fund.

Do the terms of the trust identify the beneficiaries by reference to membership of a class?

Yes Provide details of the membership class/es (eg unit holders, family members of named person, charitable purpose)

(Go to Section 2.2)

No How many beneficiaries are there? Provide full name of each beneficiary below.

1

Full given name(s)

Surname

2

Full given name(s)

Surname

3

Full given name(s)

Surname

4

Full given name(s)

Surname

5

Full given name(s)

Surname

6

Full given name(s)

Surname

If there are more beneficiaries, provide details on a separate sheet.

2.2 TRUSTEE DETAILS (only complete if 'Other trust type' is selected in section 1.2 above)

Do NOT complete if the trust is a registered managed investment scheme, regulated trust (eg SMSF) or government superannuation fund.

How many trustees are there? Provide full name and address of each trustee below.

Trustee 1

Full given name(s) or company name

Surname

Residential address if an individual trustee or company registered office address (PO Box is NOT acceptable)

Address

Suburb

State

Postcode

Country

2.2 TRUSTEE DETAILS (CONTINUED) (only complete if 'Other trust type' is selected in section 1.2 above)

Trustee 2

Full given name(s) or company name

Surname

Residential address if an individual trustee or company registered office address (PO Box is NOT acceptable)

Address

Suburb

State

Postcode

Country

Trustee 3

Full given name(s) or company name

Surname

Residential address if an individual trustee or company registered office address (PO Box is NOT acceptable)

Address

Suburb

State

Postcode

Country

Trustee 4

Full given name(s) or company name

Surname

Residential address if an individual trustee or company registered office address (PO Box is NOT acceptable)

Address

Suburb

State

Postcode

Country

Trustee 5

Full given name(s) or company name

Surname

Residential address if an individual trustee or company registered office address (PO Box is NOT acceptable)

Address

Suburb

State

Postcode

Country

2.2 TRUSTEE DETAILS (CONTINUED) (only complete if 'Other trust type' is selected in section 1.2 above)

Trustee 6

Full given name(s) or company name

Surname

Residential address if an individual trustee or company registered office address (PO Box is NOT acceptable)

Address

Suburb

State

Postcode

Country

If there are more trustees, provide details on a separate sheet.

SECTION 3: INDIVIDUAL DETAILS (to be completed if selected trustee is an individual)

Full given name(s)

Surname

Date of birth

Residential address (PO Box is NOT acceptable). Only provide address details if not provided in Section 2.2 above.

Address

Suburb

State

Postcode

Country

If the trust is a registered managed investment scheme, regulated trust (eg SMSF) or government superannuation fund, the form is now COMPLETE.

SECTION 4: AUSTRALIAN COMPANY DETAILS (TO BE COMPLETED IF SELECTED TRUSTEE IS AN AUSTRALIAN COMPANY)

4.1 GENERAL INFORMATION

Full name as registered by ASIC

ACN

Are you a charity? Yes No

Principal business activity

Registered office address (PO Box is NOT acceptable)

Address

Suburb

State

Postcode

Country

4.1 GENERAL INFORMATION (CONTINUED)

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

Address

Suburb

State

Postcode

Country

4.2 REGULATORY/LISTING DETAILS (select if any of the following categories apply to the company and provide the information requested)

Regulated company (licensed by an Australian Commonwealth, State or Territory statutory regulator)

Regulator name

Licence details

Australian listed company

Name of market / exchange

Majority-owned subsidiary of an Australian listed company

Australian listed company name

Name of market / exchange

4.3 COMPANY TYPE (select only ONE of the following categories)

Public

Proprietary Go to Section 4.4 below.

4.4 DIRECTORS (ONLY NEEDS TO BE COMPLETED FOR PROPRIETARY COMPANIES)

This section does NOT need to be completed for Australian public and listed companies.

How many directors are there? Provide full name and address of each director below.

Director 1

Full given name(s)

Surname

Residential address (PO Box is NOT acceptable)

Address

Suburb

State

Postcode

Country

Director 2

Full given name(s)

Surname

Residential address (PO Box is NOT acceptable)

Address

Suburb

State

Postcode

Country

4.4 DIRECTORS (CONTINUED) (ONLY NEEDS TO BE COMPLETED FOR PROPRIETARY COMPANIES)

Director 3

Full given name(s)

Surname

Residential address (PO Box is NOT acceptable)

Address

Suburb

State

Postcode

Country

Director 4

Full given name(s)

Surname

Residential address (PO Box is NOT acceptable)

Address

Suburb

State

Postcode

Country

If there are more directors, provide details on a separate sheet.

For all proprietary companies, continue to Section 4.5 on following page.

4.5 SHAREHOLDERS (only needs to be completed for proprietary companies that are not regulated companies as selected in Section 4.2)

Provide details of **ALL individuals** who are the ultimate beneficial owners through one or more shareholdings of more than 25% of the company's issued capital.

Shareholder 1

Full given name(s)

Surname

Residential address (PO Box is NOT acceptable)

Address

Suburb

State

Postcode

Country

Shareholder 2

Full given name(s)

Surname

Residential address (PO Box is NOT acceptable)

Address

Suburb

State

Postcode

Country

Shareholder 3

Full given name(s)

Surname

Residential address (PO Box is NOT acceptable)

Address

Suburb

State

Postcode

Country

SECTION 5A: TRUST VERIFICATION PROCEDURE

For a registered managed investment scheme, regulated trust (eg SMSF) or government superannuation fund (as selected in 1.2), verify:

- The full name of the trust
- That the trust is a registered managed investment scheme, regulated trust or government superannuation fund, as applicable.

Tick ✓	Verification options (select one of the following options used to verify the Trust)
<input type="checkbox"/>	Perform a search of the ASIC, ATO or relevant regulator's website (eg 'Super Fund Lookup' at www.abn.business.gov.au)
<input type="checkbox"/>	A copy or relevant extract of the legislation establishing the government superannuation fund sourced from a government website
<input type="checkbox"/>	An original certified copy of the Trust Deed

If 'Other trust type' is selected in section 1.2 above, verify:

- The full name of the trust

Tick ✓	Verification options (select one of the following options used to verify the Trust)
<input type="checkbox"/>	A notice issued by the Australian Taxation Office within the last 12 months (eg a Notice of Assessment). Block out the TFN before scanning, copying or storing this document
<input type="checkbox"/>	A letter from a solicitor or qualified accountant that confirms the name of the trust
<input type="checkbox"/>	An original or certified copy or certified extract of the trust deed

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

SECTION 5B: RECORD OF VERIFICATION PROCEDURE

IMPORTANT:

- **Complete** the ID Document Details below,
- **Retain** the original certified copies of relevant ID documents for at least 7 years from the date the account is closed

ID DOCUMENT DETAILS

Verified from	<input type="checkbox"/> Performed search	<input type="checkbox"/> Original	<input type="checkbox"/> Certified Copy
Document Issuer/Website	<input type="text"/>		
Issue date/Search date	<input type="text"/> / <input type="text"/> / <input type="text"/>		
Accredited English Translation	<input type="checkbox"/> N/A	<input type="checkbox"/> Sighted	

SECTION 5C: FINANCIAL PLANNER DETAILS – identification and verification conducted by:

Date verified / /

Financial Planner's Name

Phone No.

AFS Licensee Name

AFSL No.

Complete ONLY ONE of the following sections, as required, to collect the additional information about the identity of ONLY ONE of the trustees:

- **Section 6 (applicable parts)** – where the selected trustee is an Individual.
- **Section 7 (applicable parts)** – where the selected trustee is an Australian Company

SECTION 6A: INDIVIDUAL TRUSTEE VERIFICATION PROCEDURE

Verify the **Trustee's** full name; and **EITHER** their date of birth **OR** residential address.

→ Complete Part I (or if the trustee does not own a document from Part I, then complete either Part II or III).

Part 1 Acceptable primary ID documents	
Tick ✓	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 two 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 ¹
Part 2 Acceptable secondary ID documents – should only be completed if the individual does not own a document from Part I	
Tick ✓	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 ✓	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. Block out the TFN before scanning, copying or storing this document
<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)
Part 3 Acceptable foreign ID documents – should only be completed if the individual does not own a document from Part I	
Tick ✓	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 ¹
<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 ¹

¹ Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator.

SECTION 6B: RECORD OF VERIFICATION PROCEDURE

IMPORTANT:

- **Complete** the ID Document Details below
- **Retain** the original certified copies of relevant ID documents for at least 7 years from the date the account is closed.

ID document details	Document 1	Document 2
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	<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"/>
Expiry date	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
Document Number	<input type="text"/>	<input type="text"/>
Accredited English Translation	<input type="checkbox"/> N/A <input type="checkbox"/> Sighted	<input type="checkbox"/> N/A <input type="checkbox"/> Sighted

If the selected trustee is an individual, the form is now **COMPLETE**. Receipt of a completed form will constitute your agreement as a reporting entity that you have completed the identification and verification process for the purposes of Anti-Money Laundering and Counter-Terrorism Financing laws.

SECTION 7A: AUSTRALIAN COMPANY TRUSTEE VERIFICATION PROCEDURE

Standard verification procedure

If 'Other trust type' is selected in Section 1.2 above, verify:

- The full name of the trustee company as registered by ASIC
- Whether the trustee company is registered as a proprietary or a public company
- The ACN issued to the trustee company.

Tick ✓	Verification options (select one of the following options used to verify the Company)
<input type="checkbox"/>	Perform a search of the relevant ASIC database
<input type="checkbox"/>	If the ASIC database is not reasonably available, an original or certified copy of the certification of registration issued by ASIC.

Alternative verification procedure

For a company which is an Australian listed company, a majority owned subsidiary of an Australian listed company or is a regulated company (ie licensed by an Australian Commonwealth, State or Territory statutory regulator).

If 'Other trust type' is selected in Section 1.2 above, verify:

- That the trustee company is an Australian listed company (if applicable)
- That the trustee company is a majority owned subsidiary of an Australian listed company (if applicable)
- That the trustee company is a regulated company (if applicable).

Tick ✓	Verification options (select one of the following options used to verify the Company)
<input type="checkbox"/>	Perform a search of the relevant market/exchange
<input type="checkbox"/>	Perform a search of the relevant ASIC database
<input type="checkbox"/>	Perform a search of the licence or other records of the relevant Commonwealth, State or Territory statutory regulator.
<input type="checkbox"/>	A public document issued by the relevant company

SECTION 7B: RECORD OF VERIFICATION PROCEDURE

IMPORTANT:

- **Complete** the ID Document Details below,
- **Retain** the original certified copies of relevant ID documents for at least 7 years from the date the account is closed

ID document details	
Verified from	<input type="checkbox"/> Performed search <input type="checkbox"/> Original <input type="checkbox"/> Certified Copy
Document Issuer/Website	<input type="text"/>
Public Document Type	<input type="text"/>
Issue date/Search date	<input type="text"/> / <input type="text"/> / <input type="text"/>

If the selected trustee is an Australian company, the form is now COMPLETE. Receipt of a completed form will constitute your agreement as a reporting entity that you have completed the identification and verification process for the purposes of Anti-Money Laundering and Counter-Terrorism Financing laws.