# Investor Identification Form

Praemium Australia Limited ABN 92 117 611 784 AFS Licence Number 297956 (Praemium)



### Important information

Praemium must comply with the Anti-Money Laundering and Counter-Terrorism Financing laws ('the AML Legislation'), which requires us to, among other things, establish your identity.

This form is provided to collect the necessary customer information as required by the AML Legislation to establish your identity. For your application to be processed by Praemium, you must ensure that this form as well as your application form is completed and forwarded to us.

By completing this investor identification form and providing us with information to establish your identity, you acknowledge and agree:

- this information will be used by Praemium Australia Limited to establish your identity for the purposes of the AML Legislation;
- Praemium Australia Limited will neither be responsible nor liable to you or any other person for any loss suffered where transactions are delayed, blocked, frozen or where Praemium declines to process a transaction or ceases to provide you with a product or service, in circumstances where Praemium is unable to establish your identity or where Praemium reasonably believes you are a Proscribed Person<sup>1</sup>.

### When completing this form

Depending on your investor type, Praemium may require supporting identification/verification documentation to establish your identity.

Where such identification/verification documentation is required, an originally certified copy is required. An abbreviated list of the various people that can certify documents is provided on the next page with an extended list of certifiers available on our website www.praemium.com.au

#### Will documents in a language other than English be accepted?

Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator. An accredited translator is any person who is currently accredited by the National Accreditation Authority for Translators and Interpreters Ltd (NAATI) at the level of Professional Translator or above.

### Which sections of this form apply to me?

The matrix below highlights the section of this form that are applicable to each investor type. Please ensure that you read the section applicable to you and where relevant attach an originally certified copy of the document before sending it to Praemium.

1. A 'Proscribed Person' means any person or entity who Praemium reasonably believes to be (i) in breach of the laws of any jurisdiction regarding economic or trade sanctions, or laws prohibiting money laundering or terrorism financing, or (ii) on a list of persons with whom dealings are proscribed by Australian laws or the laws of another recognised jurisdiction. A 'Proscribed Person' includes any person or entity who Praemium reasonably believes to act on behalf, or for the benefit of, a person or entity referred to in (i) and/or (ii).

Investor Type <sup>2</sup>	Section							
	A	В	С	D	E	F	G	Н
Individual(s) & Sole Traders	~	>						
<u>Trust</u> Individual(s) acting as a Trustee(s) of a Trust or Superannuation Fund	~	>		~				
Domestic (Australian) Company	~		~					
<u>Trust</u> Domestic (Australian) Company acting as a Corporate Trustee of a Trust or Superannuation Fund	~		>	~				
Government Body	~				>			
Partnership	~					>		
Association	~						~	
Registered Co-operative	~							~
Foreign Company <sup>3</sup>		-	-					
Foreign Company acting as a Corporate Trustee(s) of a Trust <sup>3</sup>								

2. Please see page 3 of this Investor Identification Form for a description of each investor type.

3. Please contact us to request the Foreign Corporate Entity form. Email support@praemium.com.au.

# **Certifying AML documents**

An originally certified copy is a copy of a document that has been certified as a true copy of an original document.

To obtain an originally certified copy, present the original AML document and a photocopy of that document to one of the people listed below. The person certifying the document will need to include the following information on the photocopy:

- "I certify that this is a true copy of the original document"; and
- ▶ the certifier's:
  - full name
  - occupation, qualification, position or registration number (if any), which makes them eligible to certify documents;
- the date the document was signed and the certifier's signature.

If this certification does not appear, you may be asked for new certified documents.

#### Who can certify AML documents

#### OCCUPATIONS

- A person who, under a law in force in an Australian State or Territory, is currently licensed or registered to practise in the following occupations:
  - Dentist
  - Legal practitioner
  - Medical practitioner
  - Pharmacist

### OTHER PERSONS

- Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public
- An officer with, or authorised representative of, a holder of an Australian financial services licence, having 2 or more years of continuous service with one or more licensees
- Bank officer with 2 or more continuous years of service
- Building society officer with 2 or more years of continuous service
- Credit union officer with 2 or more years of continuous service
- Employee of the Commonwealth who is:
   in a country or place outside Australia; and
  - authorised under paragraph 3(c) of the Consular Fees Act 1955; and
  - exercising his or her function in that place
- Justice of the Peace
- Member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising Accountants or the National Institute of Accountants
- Minister of religion registered under Subdivision A of Division 1 of Part IV of the Marriage Act 1961
- ► Notary public
- Permanent employee of the Australian Postal Corporation with 2 or more years of continuous service who is employed in an office supplying postal services to the public
- Permanent employee of:
  - the Commonwealth or a Commonwealth authority; or
  - a State or Territory or a State or Territory authority; or
  - a local government authority;

with 2 or more years of continuous service

- Police officer
- Sheriff
- Sheriff's officer
- Teacher employed on a full-time basis at a school or tertiary education institution

Type of investor	Description
Individual(s) & Sole Traders	Investing in your personal capacity – that is, not as a company, trust, partnership, etc. This can include individuals investing on behalf of a person under the age of 18. Sole Trader describes a business that is owned and controlled by one person, although the business may employ people.
<u>Trust</u> Individual(s) acting as a Trustee(s) of a Trust or Superannuation Fund	Investing in your personal capacity as a trustee on behalf of another. (In this case, the trustee is not a company). A trust will in most circumstances be established pursuant to a trust deed with the intention of holding income or property on behalf and for the benefit of another (who may or may not include the trustee). Trusts can include: Superannuation funds (including self managed superannuation funds) Family trusts Deceased estate Managed investment scheme (registered or unregistered) Charitable trust Testamentary trust
Domestic (Australian) Company	Company incorporated in Australia, including:
	<ul> <li>Proprietary company (ending with 'Pty Ltd')</li> <li>Public company (ending with 'Ltd')</li> <li>Companies limited by guarantee (used primarily by non-profit organisations)</li> <li>Listed company (listed on a securities exchange in Australia such as the ASX)</li> </ul>
<u>Trust</u> Domestic (Australian) Company acting as a Trustee of a Trust or Superannuation Fund	Company incorporated in Australia, acting in the capacity of trustee on behalf of another (for example, ABC Pty Ltd as trustee for the XYZ self-managed superannuation fund). A trust will in most circumstances be established pursuant to a trust deed with the intention of holding income or property on behalf and for the benefit of another (who may or may not include the trustee). Trusts can include: Superannuation funds (including self managed superannuation funds) Family trusts Deceased estate Managed investment scheme (registered or unregistered) Charitable trust Testamentary trust
Partnership	Formally established pursuant to a partnership agreement/deed. If you are investing 'jointly' (and not pursuant to a formal partnership agreement) then see 'Individual(s)' section above.
Association	<ul> <li>Incorporated Association is registered by the State or Territory in which the association is based.</li> <li>Features include:</li> <li>Appointment of a public officer and committee</li> <li>Profits, if any, can only be used to promote non-profit objectives</li> <li>Unincorporated Association does not have a legal identity and cannot hold assets in its own name. It must appoint individuals as trustees, who own the assets but hold them for the benefit of the association.</li> </ul>
Registered Co-operative	Registered Co-operative is a democratic structure owned and controlled by the people it serves, who join together for a common benefit. It is a separate legal entity (registered under the relevant State or Territory legislation) with the general aim of providing services for its members rather than making profits.
Government Body	Government Body is a legal entity that is owned or controlled by Federal, State or Local Government. Examples include Universities, Local Councils, and Statutory Agencies.
Foreign Company <sup>1</sup>	Company incorporated in a foreign jurisdiction.
Foreign Company acting as a Corporate Trustee(s) of a Trust <sup>1</sup>	Company incorporated in a foreign jurisdiction, acting in the capacity of a trustee on behalf of another. A trust will in most circumstances be established pursuant to a trust deed with the intention of holding income or property on behalf and for the benefit of another (who may or may not include the trustee). Trusts can include: Family trusts Deceased estate Managed investment scheme (registered or unregistered) Charitable trust Testamentary trust Pension scheme/Retirement fund

1. Please contact us to request the Foreign Corporate Entity form. Email support@praemium.com.au.

# Section A. Politically Exposed Person All investors must complete this section.

SECTION A1
Are you or any of the beneficial owners a politically exposed person?
Yes No
A 'Politically exposed person' (PEP) is defined as an individual:
(1) who holds a prominent public position or function in a government body or an international organisation, including:
Head of State or head of a country or government; or
government minister or equivalent senior politician; or
senior government official; or
• Judge of the High Court of Australia, the Federal Court of Australia or a Supreme Court of a State or Territory, or a Judge
of a court of equivalent seniority in a foreign country or international organisation; or
• governor of a central bank or any other position that has comparable influence to the Governor of the Reserve Bank of
Australia; or
<ul> <li>senior foreign representative, ambassador, or high commissioner; or</li> </ul>
high-ranking member of the armed forces; or
• board chair, chief executive, or chief financial officer of, or any other position that has comparable influence in, any State
enterprise or international organisation; and
(2) who is an immediate family member of a person referred to in the above paragraph, including:
a spouse; or
a de facto partner; or
a child and a child's spouse or de facto partner; or
a parent; and
(3) who is a close associate of a person referred to in paragraph (1) , which means any individual who is known (having regard to
information that is public or readily available) to have:
<ul> <li>joint beneficial ownership of a legal entity or legal arrangement with that person; or</li> </ul>
• sole beneficial ownership of a legal entity or legal arrangement that is known to exist for the benefit of that person.
If YES, please identify which investor/beneficial owner is the politically exposed person and the type of politically exposed person:

Full given name(s)	Full given name(s)
Surname	Surname
Domestic PEP Foreign PEP International Organisation PEP	Domestic PEP Foreign PEP International Organisation PEP
Domestic PEP means a politically exposed person of an Australian gover	rnment body.
Foreign PEP means a politically exposed person of a government body o	f a foreign country.
International organisation PEP means a politically exposed person of an	international organisation.

This is the end of Section A. Please submit this form together with the completed application form.

# Section B. Individual(s), Sole Trader(s) and Individual(s) acting as a Trustee(s) of a Trust or Superannuation Fund

# **SECTION B1** Individual (Investor 1/Trustee 1) Full given name(s) Address details Residential street address (PO Box is not acceptable) Surname Date of birth (dd/mm/yyyy) / Suburb State Postcode Country (if not Australia) Individual (Investor 2/Trustee 2) if applicable Full given name(s) Address details Residential street address (PO Box is not acceptable) Surname Date of birth (dd/mm/yyyy) / Suburb / State Postcode Country (if not Australia) Individual (Investor 3/Trustee 3) if applicable Full given name(s) Address details Residential street address (PO Box is not acceptable) Surname Date of birth (dd/mm/yyyy) Suburb Postcode State Country (if not Australia) Individual(s) that are not sole trader(s) - This is the end of Section B. Please submit this form together with the completed application form.

Individual(s) that are not sole trader(s) – This is the end of Section B. Please submit this form together with the completed application form. Individual(s) acting as sole trader(s) – Proceed to Section B2.

Individual(s) acting as a Trustee(s) – Proceed to Section D – Trusts or Superannuation Funds. If there are more than three trustees of a trust or superannuation fund, please provide details on a separate sheet and attach to this form.

## **SECTION B2**

COMPLETE THIS SECTION B2 IF INVESTOR 1 IS A SOLE TRADER.

If more than one individual is a sole trader, please provide details on a separate sheet for those individuals and attach to this form.

#### Full business name (if any)

ABN (if any)	Principal place of business (if any)			
	Street address (PO Box is not acceptable)			
	Suburb			
	State Postcode			
	Country (if not Australia)			

This is the end of Section B. Please submit this form together with the completed application form.

Praemium will perform the verification procedure to establish your identity. However, if we cannot access the information to complete this procedure, we may ask you to provide us with further information set out below.

#### Part I - Acceptable primary ID documents

Select **ONE** valid option from this section only:

- Australian State/Territory driver's licence containing a photograph of the person
- Australian passport (a passport that has expired within the preceding 2 years is acceptable)
- Card issued under a State or Territory for the purpose of proving a person's age containing a photograph of the person
- Foreign passport or similar travel document containing a photograph and the signature of the person\*

#### Part II - Acceptable secondary ID documents

Should only be presented if the individual does not own a document from Part I.

Select **ONE** valid option from this section:

- Australian birth certificate
- Australian citizenship certificate
- Pension card issued by Centrelink
- Health card issued by Centrelink

AND ONE valid option from this section:

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

- 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.
- 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)
- 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 the school

#### Part III - Acceptable foreign ID documents

Should only be presented if the individual  $\underline{\text{does not}}$  own a document from Part I.

**BOTH** documents from this section must be presented:

- Foreign driver's licence that contains a photograph of the person in whose name it is issued and the individual's date of birth\*
- 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. An accredited translator is any person who is currently accredited by the National Accreditation Authority for Translators and Interpreters Ltd (NAATI) at the level of Professional Translator or above.

# Section C. Australian Company

If you are:

a) a Domestic (Australian) Company, complete this Section C; or

b) a Domestic (Australian) Company acting as a Corporate Trustee of a Trust/Superannuation Fund, complete this Section C as well as Section D.

SECTION C1	
GENERAL INFORMATION	
Full name as registered by ASIC	
Principal place of business (if any)	Registered office address
Street address (PO Box is not acceptable)	Street address (PO Box is not acceptable)
Suburb	Suburb
State Postcode	State Postcode
Country (if not Australia)	Country (if not Australia)
SECTION C2	
REGULATORY/LISTING DETAILS	
Please select $\checkmark$ and provide ONE of the following (if applicable):	
Regulated company (licensed by an Regulator name	;
Australian Commonwealth, State or Territory statutory regulator) Licence details	·
, , , , , ,	
Australian listed company         Name of market/exchange	
Majority-owned subsidiary of an Australian listed company name	•
Australian listed company	
Name of market/exchange	
None of the above	
Please go to Section C3	
SECTION C3	
COMPANY TYPE	
Please select  and provide ONE of the following:	
<b>Proprietary ("Pty Ltd")</b> – please provide Director(s)	<b>Public</b> – no further information is required. Please submit this
details (in Section C4) and the shareholder details (in Section C5) if applicable	form together with the completed application form. If you are a Public Company acting as Corporate Trustee, Proceed to Section

D – Trusts or Superannuation Funds.

SECTION C4	
DIRECTOR(S) (only needs to be completed for proprietary companies)	
This section does NOT need to be completed for public and listed compan	ies.
How many directors are there? Provide details for each	) director.
Director 1	
Full given name(s)	Address details of Director 1
	Residential street address (PO Box is not acceptable)
Surname	
Date of birth (dd/mm/yyyy)	
	Suburb
	State Postcode
	Country (if not Australia)
Director 2	
Full given name(s)	Address details of Director 2
	Residential street address (PO Box is not acceptable)
Surname	
Date of birth (dd/mm/yyyy)	
	Suburb
	State Postcode
	Country (if not Australia)
Director 3	
Full given name(s)	Address details of Director 3
Surname	Residential street address (PO Box is not acceptable)
Date of birth (dd/mm/yyyy)	
	Suburb
	State Postcode
	Country (if not Australia)
Director 4	Address datails of Disaster /
Full given name(s)	Address details of Director 4
Surname	Residential street address (PO Box is not acceptable)
Date of birth (dd/mm/yyyy)	
	Suburb
	State Postcode
	Country (if not Australia)
If there are more directors, provide details on a separate sheet and attach	ed to this form.
Regulated company (as selected in Section C2) – no further information is	s required.
Regulated company (as selected in Section C2) acting as a Corporate Tru	stee – Proceed to Section D – Trusts or Superannuation Funds.
Proprietary company that is not regulated – please provide Shareholder of	letails in Section C5.
Proprietary company that is not regulated and acting as a Corporate True to Section D.	stee – Please provide shareholder details in Section C5 and then proceed

# **SECTION C5**

SHAREHOLDERS (only needs to be completed for proprietary companies that are not regulated companies as selected in Section C2).

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

## Shareholder 1

Full given name(s)

Surname

#### Address details of Shareholder 1

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

# Shareholder 2

Full given name(s)

Surname

## Address details of Shareholder 2

Address details of Shareholder 3

Residential street address (PO Box is not acceptable)		
Suburb		
State	Postcode	
Country (if not Australia)		

# Shareholder 3

Full given name(s)

Surname

Residential street address (PO Box is not acceptable)				
Suburb				
State	Postcode			
Country (if not Australia)				

# This is the end of Section C. Please submit this form together with the completed application form. If you are a Domestic

(Australian) Company acting as a Corporate Trustee of a Trust or Superannuation Fund, also complete and submit Section D. Praemium will perform the verification procedure to establish your identity. However, if we cannot access the information to complete

this procedure, we may ask you to provide us with further information.

# Section D. Trusts or Superannuation Funds

If you are:

- a) an Individual(s) acting as a Trustee(s) of a Trust or Superannuation Fund, complete this Section D as well as Section B.
- b) a Domestic (Australian) Company acting as a Corporate Trustee of a Trust or Superannuation Fund, complete this Section D as well as Section C.

	npany acting as a corporate musice of a musicor superannuation rund, t	omptete	ins Section D as well as Section C.
SECTION D1			
GENERAL INFORMATION			
Full name of Trust or Super	annuation Fund		
Full business name (if any)			
Country whore Trust establi	ichad		
Country where Trust establi	Isneu		
SECTION D2			
TYPE OF TRUST			
Please select ✔ ONE of the	following and provide the detail requested:		
Regulated trust	Provide name of the regulator (e.g. ASIC, APRA)		
			Please submit this Section D, together with the completed
	Provide the trust's ABN or registration/licensing details	$\rightarrow$	application form. If you are: ▶ an Individual acting as
			Trustee of a Trust or
Government superannuation fund	Provide name of the legislation establishing the fund		Superannuation Fund, also complete and submit
		->	Section B; OR
Registered managed	Provide Australian Registered Scheme Number (ARSN)		<ul> <li>a Domestic (Australian)</li> <li>Company acting as a</li> </ul>
investment scheme		$\rightarrow$	Corporate Trustee of a Trust or Superannuation Fund,
			also complete and submit Section C.
Other trust type (e.g. Self Managed	Please specify Trust description (e.g. family discretionary or unit trust, testamentary trust, charitable, estate, SMSF)		
Superannuation Fund)			
	Provide the trust's ABN or registration/licensing details (if any).		
	Provide full name of Settlor (unless the material asset contribution to the trust by the settlor at the time the trust is established is less	$\rightarrow$	Complete Section D3 and D4 and provide the documents
	than \$10,000 or the settlor is deceased).		requested on page 12 of this Investor Identification Form.
	Full given name(s)		
	Surname		

# SECTION D3

# **BENEFICIARY DETAILS**

Provide beneficiary details only if "Other trust type" is selected in Section D2. Do NOT complete if the trust is a regulated trust, government superannuation fund or a registered managed investment scheme.
Do the terms of the trust identify the beneficiaries by reference to membership of a class?

Yes	Provide details of the membership class(es) (e.g. unit holders, family members of a named person, charitable purpose)	
No	How many beneficiaries are there? Provide details of each beneficiaries below.	Go to Section D4

# **Beneficiary 1**

Full give	n name(s)
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## Address details of Beneficiary 1

	Residential street address (PO Box is not acceptable)
Surname	
Date of birth (dd/mm/yyyy)	
	Suburb
	State Postcode
	Country (if not Australia)

# Beneficiary 2

Full given name(s)

Surname

Date of bir

Address	details	of	Beneficiary	12

	Residential street address (PO Box is not acceptable)
<b>h</b> (dd/mm/yyyy)	
/	Suburb
	State Postcode
	Country (if not Australia)

# **Beneficiary 3**

Full given name(s)

Surname

Date of birth (dd/mm/yyyy)

/ /

# **Beneficiary 4**

Full given name(s)

Surname

Date of birth (dd/mm/yyyy)

/ /

# Address details of Beneficiary 3

Residential street address (PO Box is not acceptable)		
Suburb		
State	Postcode	
Country (if not Austra	alia)	

# Address details of Beneficiary 4

Residential street address (PO Box is not acceptable)		
Suburb		
State	Postcode	
Country (if not Australia)		

If there are more than four beneficiaries, please provide details on a separate sheet and attach to this form.

# SECTION D4

Provide trustee details only if "Other trust type" is Do NOT complete if the trust is a regulated trust, g	selected in Section D2. Jovernment superannuation fund or a registered managed investment scheme.		
How many trustees are there?	Provide full name and address of all trustees below unless this information has already been provided for all trustees in Section B or Section C.		
Trustee 1	Residential address if an individual trustee OR company registered		
Full given name(s) or Company name	office address (PO Box is NOT acceptable)		
Surname			
	Suburb		
	State Postcode		
	Country (if not Australia)		
Trustee 2	Residential address if an individual trustee OR company registered		
Full given name(s) or Company name	office address (PO Box is NOT acceptable)		
Surname			
	Suburb		
	State Postcode		
	Country (if not Australia)		
Trustee 3	Desidential address if an individual trustee OD company registered		
Full given name(s) or Company name	Residential address if an individual trustee OR company registered office address (PO Box is NOT acceptable)		
Surname			
	Suburb		
	State Postcode		
	Country (if not Australia)		
Trustee 4	Residential address if an individual trustee OR company registered		
Full given name(s) or Company name	office address (PO Box is NOT acceptable)		
Surname			
	Suburb		
	State Postcode		
If there are more trustees, please provide details or and attach to this form.	n a separate sheet Country (if not Australia)		

#### Trust verification procedure

For a regulated trust, government superannuation fund or a registered managed investment scheme (as selected in Section D2), Praemium will perform the Trust verification procedure. However, if we cannot access the information to complete this procedure we may ask you to provide us with further information.

If "Other trust type" is selected in Section D2, you will need to provide us with ONE of the following (please 🗸):



A letter from a solicitor or qualified accountant that confirms the name of the trust.

An original or certified copy or certified extract of the trust deed.

This is the end of Section D. Please submit this form, together with the completed application form. If you are:

- an Individual acting as Trustee of a Trust or Superannuation Fund, also complete and submit Section B; OR
- a Domestic (Australian) Company acting as a Corporate Trustee of a Trust or Superannuation Fund, also complete and submit Section C.

# Section E. Government Body

# **SECTION E1 GENERAL INFORMATION** Full name of Government Body Principal place of operations Street address (PO Box is not acceptable) Suburb Postcode State Country **SECTION E2 GOVERNMENT INFORMATION** Please select 🗸 only ONE of the following categories below and provide the information requested. Commonwealth of Australia Government Body Please specify the State or Territory Australian State or Territory Government Body Please specify Foreign Country Foreign Country Government Body

This is the end of Section E. Please submit this form together with the completed application form. Praemium will perform the verification procedure to establish your identity. However, if we cannot access the information to complete this procedure, we may ask you to provide us with further information.

# Section F. Partnerships

SECTION F1
GENERAL INFORMATION
Full name of Partnership
Registered business name of Partnership (if any)
Country where Partnership established
SECTION F2

# TYPE OF PARTNERSHIP

 ${\sf Please \ select} \ \checkmark \ {\sf only \ ONE \ of \ the \ following \ partnership \ types \ and \ provide \ the \ information \ requested.}$ 

Is the partnership regulated by a professional association?	
Yes	No
Provide the name of the association	How many partners are there?
Provide membership details (eg membership number)	partners.
If you selected Yes, go to Section F3 and provide the details for <u>one</u> partner only.	

#### **SECTION F3**

#### PARTNERSHIP DETAILS

If the partnership IS regulated by a professional association (as selected in Section F2), provide the details for <u>one</u> partner only. If the partnership is NOT regulated by a professional association (as selected in Section F2), provide the details for <u>all</u> partners of the partnership.

#### Partner 1

Full given name(s)	Address details of Pa	rtner 1	
	Residential street a	ddress (PO Box is not acceptable)	
Surname			
Date of birth			
/ /	Suburb		
	State	Postcode	
	Country (if not Austr	ralia)	
Partner 2			
Full given name(s)	Address details of Pa	rtner 2	
	Residential street a	ddress (PO Box is not acceptable)	
Surname			
			_

Date of birth (dd/mm/yyyy)

# Partner 3

Full given name(s)	Address details of Partner 3	
	Residential street address (PO Box is not acceptable)	
Surname		
Date of birth (dd/mm/yyyy)		
	Suburb	
	State Postcode	
	Country (if not Australia)	

Suburb

Country (if not Australia)

State

Postcode

If the partnership is NOT regulated by a professional association and there are more than three partners, provide details on a separate sheet and attach to this form.

#### Please read "Partnership verification procedure" below and provide us with the documents requested.

# Partnership verification procedure.

You will need to provide us with one document from Part I and one form Part II (if the partnership is regulated by a professional association) as shown below (please -).

### Part I - Acceptable ID documents (to verify partnership name)

- An original, a certified copy or certified extract of the partnership agreement
- 🗌 A certified copy or a certified extract of minutes of a partnership meeting
- An original current membership certificate (or equivalent) of a professional association
- igsquirin Membership details independently sourced from the relevant professional association
- $\square$  A search of the relevant ASIC or other regulator's database
- A notice issued by the Australian Taxation Office within the last 12 months eg Notice of Assessment. Block out the TFN before scanning, copying or storing this document.
- An original or certified copy or a certificate of registration of business name issued by a government or government agency in Australia

# Part II – Acceptable ID documents (to verify membership of a professional association)

An original current membership certificate (or equivalent)

 $\Box$  Membership details independently sourced from the relevant professional association

# This is the end of Section F. Please submit this form together with the completed application form.

# Section G. Associations

SECTION G1	
GENERAL INFORMATION	
Full name of Association	
Provide an ID number issued on incorporation (e.g. An ACN) (if a	any)
Details of the following (or equivalent in each case):	
1. Chairman	
Full given name(s)	Address details of Chairman
	Residential street address (PO Box is not acceptable)
Surname	
Date of birth (dd/mm/yyyy)	
	Suburb
	State Postcode
	Country (if not Australia)
2. Secretary	
Full given name(s)	Address details of Secretary
	Residential street address (PO Box is not acceptable)
Surname	
Date of birth (dd/mm/yyyy)	
	Suburb State Postcode
	Country (if not Australia)
3. Treasurer	
Full given name(s)	Address details of Treasurer
	Residential street address (PO Box is not acceptable)
Surname	
Date of birth (dd/mm/yyyy)	Suburb
1 1	State Postcode
	Country (if not Australia)
SECTION G2	
ASSOCIATION TYPE	

Please select  $\checkmark$  ONE of the following:

Incorporated Association – please proceed to Section G3

Unincorporated Association – please proceed to Section G4

### **SECTION G3**

#### INCORPORATED ASSOCIATION

Please select < and provide details for ONE of the following three options:

Principal place of administration	Registered office
Street address (PO Box is not acceptable)	Street address (PO Box is not acceptable)
Suburb	- Suburb
State Postcode	- State Postcode
Country	Country
Name & residential address of the public officer (or president/	/secretary/treasurer if there is no public officer)

#### Full given name(s) or officer (if applicable)

Surname

Pne	ition
1 03	

Street address (PO Box is not acceptable)	
Postcode	

Please read "Association verification procedure" below. You do not need to complete Section G4.

# **SECTION G4**

#### INCORPORATED ASSOCIATION

#### Principal place of administration

Street address (PO Box is not acceptable)	
Suburb	
State	Postcode
Country	

Individual Member Identification Procedure

Details of the member who is signing on behalf of the Association.

SL	ırn	ar	ne

Full given names

Date of birth (dd/mm/yyyy)

#### **Residential address**

Street address (PO Box is not acceptable)		
Suburb		
State	Postcode	
Country		

Please read "Association verification procedure" below and provide us with the documents requested for an Unincorporated Association.

## Association verification procedure

If you are an "Incorporated Association" (as selected in Section G2 of this form), Praemium will perform the Association verification procedure. However, if we cannot access the information to complete this procedure you will need to provide us with an originally certified copy or certified extract of the Constitution or Rules of the association.

If you are an "Unincorporated Association" (as selected in Section G2 of this form), you will need to provide us with an originally certified copy or certified extract of the Constitution or Rules of the association for Praemium to perform the Association verification procedure.

This is the end of Section G. Please submit this form together with the completed application form.

# Section H. Registered Co-operative

SECTION H1	
GENERAL INFORMATION	
Full name of registered co-operative	
Provide ID number issued by relevant registration body (if any)	
Details of the following (or equivalent in each case):	
1. Chairman	
Full given name(s)	Address details of Chairman
	Residential street address (PO Box is not acceptable)
Surname	
Date of birth (dd/mm/yyyy)	
	Suburb
	State Postcode
	Country (if not Australia)
2. Secretary	
Full given name(s)	Address details of Secretary
	Residential street address (PO Box is not acceptable)
Surname	· · · · · · · · · · · · · · · · · · ·
Date of birth (dd/mm/yyyy)	
	Suburb
	State Postcode
	Country (if not Australia)
3. Treasurer	
Full given name(s)	Address details of Treasurer
	Residential street address (PO Box is not acceptable)
Surname	
Date of birth (dd/mm/yyyy)	
	Suburb State Postcode
	State Postcode
	Country (if not Australia)

Go to Section H2.

# **SECTION H2**

#### ADDRESS INFORMATION

Please select  $\checkmark\,$  and provide details for ONE of the following three options:

Principal place of operations	Registered office
Street address (PO Box is not acceptable)	Street address (PO Box is not acceptable)
Suburb	Suburb
State Postcode	State Postcode
Country (if not Australia)	Country (if not Australia)
Name & Residential address of the public officer (or preside	ent, secretary or treasurer if there is no public officer)
Full given name(s) or officer (if applicable)	

	Street address (PO Box is not acceptable)
Surname	
Position	Suburb
	State Postcode
	Country (if not Australia)

# Registered Co-operative identification procedure

Praemium will perform the Registered Co-operative identification procedure. However, if we cannot access the information to complete this procedure you will need to provide us with an originally certified copy or certified extract of the register maintained by the co-operative.

This is the end of Section H. Please submit this form together with the completed application form.