

GUIDE TO COMPLETING THIS FORM

- > Complete this form using **black pen** – print in clear **CAPITAL LETTERS**.
- > Once completed, follow the instructions on the back page to return your form to Advance.
- > Questions? Call our Customer Relations team on **1800 819 935** or email **investorservices@advance.com.au**.

To comply with our obligations under the *Anti-Money Laundering (AML) and Counter Terrorism Financing (CTF) Act 2006*, Advance customers must now complete a Customer Identification Form in addition to the application form.

This Customer Identification Form is to be completed for product applications relating to domestic and foreign companies only. Customer Identification Forms for other entity types can be downloaded from **advance.com.au** or can be obtained from our Customer Relations team on **1800 819 935**.

Please follow the instructions provided.

Applications received without a completed Customer Identification Form and any necessary supporting documentation, from customers who are required to be identified, cannot be processed.

PLEASE NOTE THIS FORM CANNOT BE FAXED OR EMAILED.

Who should complete this Customer Identification Form

If you are an Australian or foreign company investing in a new Advance product.

Important information for investors

- > If you are lodging your product application form through a financial adviser, please contact your financial adviser for further information.
- > If you are lodging your product application form as a **direct investor** (without a financial adviser), you will need to complete **Section 1 or 2** of the Customer Identification Form only, and attach certified copies of your identity document(s). Please use the **checklist** provided below.

Checklist for direct investor

Before you send the Customer Identification Form, ensure that you have correctly completed all items on the **checklist** below. Ensuring that all information and documentation is provided will assist in a smooth application process.

This **checklist** section of this form is provided for your records and is not required by Advance to process your application.

- > Complete **ALL** applicable fields in **Section 1 or 2** of the Customer Identification Form using the instructions provided.
- > The following documents must be mailed to Advance:
 - completed Customer Identification Form
 - certified copies of your identification document(s) where required, and
 - product application form with any applicable documentation.

How to certify your documents

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

To certify a document, take the original document and a photocopy to one of the people listed in the categories below and ask them to certify that the photocopy is a true and correct copy of the original document. That person will need to print their name, date and the capacity in which they are signing (eg postal agent, Justice of the Peace). Sample wording is provided below.

I, [full name], as [category of persons as listed below], certify that this [name of document] is a true and correct copy of the original [signature and date].

Who can certify copies of documents

Legal	<ul style="list-style-type: none"> > a solicitor or barrister (that is, a 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 (however described)) > a judge of a court > a magistrate > a chief executive officer of a Commonwealth court > a registrar or deputy registrar of a court > a notary public
JP	> a Justice of the Peace
Police	> a police officer
Accountant	> a member of the Institute of Chartered Accountants in Australia, Certified Practising Accountants Australia or the National Institute of Accountants with two or more years of continuous membership
Post office	<ul style="list-style-type: none"> > an agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public > a permanent employee of the Australian Postal Corporation with two or more years of continuous service who is employed in an office supplying postal services to the public
Diplomatic service	<ul style="list-style-type: none"> > an Australian consular officer > an Australian diplomatic officer (within the meaning of the <i>Consular Fees Act 1985</i>)
Financial corporations (bank, building society, credit union)	<ul style="list-style-type: none"> > an officer with two or more continuous years of service with one or more financial institutions (for the purposes of the <i>Statutory Declaration Regulations 1993</i>) > a finance company officer with two or more continuous years of service with one or more finance companies (for the purposes of the <i>Statutory Declaration Regulations 1993</i>) > an 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 licensees.



Important information for financial advisers

Advance will also accept identification from a correctly completed Investment and Financial Services Council/Financial Planning Association (FSC/FPA) identification form.

When using this Customer Identification Form, please complete **Sections 1 or 2 and 3.**

INSTRUCTIONS

> Complete all parts of one of the following:

- Australian companies – Section 1
- Foreign companies – Section 2

1: AUSTRALIAN COMPANIES

To be completed if company is an Australian company.

1A: COMPANY DETAILS

1.1 General information

Full name as registered by ASIC

Business/Trading as name(s) (if any)

Australian Company Number (ACN)

Registered office address (PO Box is **not** acceptable)

State Postcode

Principal place of business (PO Box is **not** acceptable)

State Postcode

Is the Company a tax resident of any other country outside of Australia?

- No
- Yes

If yes, please refer to section Foreign Tax Residency Information for further information.

Country of Tax Residency

Tax Identification Number (TIN)* OR TIN not applicable reason (see reason above)

- Reason 1
- Reason 2
- Reason 3

Country of Tax Residency

Tax Identification Number (TIN)* OR TIN not applicable reason (see reason above)

- Reason 1
- Reason 2
- Reason 3

1.2 Regulatory/listing details

Cross X	Select the following categories which apply to the company and provide the information requested.	
<input type="checkbox"/>	Regulated company <i>(licensed by an Australian Commonwealth, state or territory statutory regulator)</i>	Regulator name <input type="text"/> Licence details <input type="text"/>
<input type="checkbox"/>	Australian listed company	Name of market/exchange <input type="text"/>
<input type="checkbox"/>	Majority-owned subsidiary of an Australian listed company	Australian listed company name <input type="text"/> Name of market/exchange <input type="text"/>

1.3 Company type

Cross X	Select ONE only of the following categories.	
<input type="checkbox"/>	Public	➤ Go to Section 1.B
<input type="checkbox"/>	Proprietary	➤ Go to Section 1.4 below

1.4 Directors

- > To be completed for proprietary companies.
- > This section does **not** need to be completed for public and listed companies.

How many directors are there?

Provide full name of each director 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

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

- If the company is a regulated company (see selected in Section 1.2 above), go to Section 1B**
- For all other proprietary companies continue to Section 1.5 below**



1.5 Beneficial Ownership

1.5A Shareholder Beneficial Owner

Provide details of all individuals who ultimately own 25% or more of the company's issued capital (through direct or indirect shareholdings).

1 SHAREHOLDER 1									
Full given name(s)									
Surname									
Alternate name(s) (if any)									
Date of birth									
Registered office address (PO Box if not acceptable)									
State					Postcode				
Country, if not Australia									

Is Shareholder 1 a tax resident of any other country outside of Australia?
 No Yes

If yes, please refer to section Foreign Tax Residency Information for further information.

Country of Tax Residency

Tax Identification Number (TIN)* OR TIN not applicable reason (see reason above)

Reason 1 Reason 2 Reason 3

Country of Tax Residency

Tax Identification Number (TIN)* OR TIN not applicable reason (see reason above)

Reason 1 Reason 2 Reason 3

2 SHAREHOLDER 2									
Full given name(s)									
Surname									
Alternate name(s) (if any)									
Date of birth									
Registered office address (PO Box if not acceptable)									
State					Postcode				
Country, if not Australia									

Is Shareholder 2 a tax resident of any other country outside of Australia?
 No Yes

If yes, please refer to section Foreign Tax Residency Information for further information.

Country of Tax Residency

Tax Identification Number (TIN)* OR TIN not applicable reason (see reason above)

Reason 1 Reason 2 Reason 3

Country of Tax Residency

Tax Identification Number (TIN)* OR TIN not applicable reason (see reason above)

Reason 1 Reason 2 Reason 3

3 SHAREHOLDER 3									
Full given name(s)									
Surname									
Alternate name(s) (if any)									
Date of birth									
Registered office address (PO Box if not acceptable)									
State					Postcode				
Country, if not Australia									

Is Shareholder 3 a tax resident of any other country outside of Australia?
 No Yes

If yes, please refer to section Foreign Tax Residency Information for further information.

Country of Tax Residency

Tax Identification Number (TIN)* OR TIN not applicable reason (see reason above)

Reason 1 Reason 2 Reason 3

Country of Tax Residency

Tax Identification Number (TIN)* OR TIN not applicable reason (see reason above)

Reason 1 Reason 2 Reason 3



4 SHAREHOLDER 4	
Full given name(s)	
Surname	
Alternate name(s) (if any)	
Date of birth	
Registered office address (PO Box if not acceptable)	
	State Postcode
Country, if not Australia	

Is Shareholder 4 a tax resident of any other country outside of Australia?
 No Yes

If yes, please refer to section Foreign Tax Residency Information for further information.

Country of Tax Residency

Tax Identification Number (TIN)* OR TIN not applicable reason (see reason above)

Reason 1 Reason 2 Reason 3

Country of Tax Residency

Tax Identification Number (TIN)* OR TIN not applicable reason (see reason above)

Reason 1 Reason 2 Reason 3

1.5B Other beneficial owners or controlling parties

If there are no individuals who meet the requirement of 1.5A, provide the names of the individuals who directly or indirectly control* the company.

* Includes exercising control through the capacity to determine decisions about financial or operating policies; or by means of trusts, agreements, arrangements, understanding & practices; voting rights of 25% or more; or power of veto. If no such person can be identified then the most senior managing official/s of the company (such as the managing director or directors who are authorised to sign on the company's behalf).

BENEFICIAL OWNER

Full given name(s)	
<input type="text"/>	
Surname	
<input type="text"/>	
Alternate name(s) (if any)	
<input type="text"/>	
Date of birth	
Registered office address (PO Box if not acceptable)	
	State Postcode
Country, if not Australia	

Is the Beneficial Owner a tax resident of any other country outside of Australia?

No Yes

If yes, please refer to section Foreign Tax Residency Information for further information.

Country of Tax Residency

Tax Identification Number (TIN)* OR TIN not applicable reason (see reason above)

Reason 1 Reason 2 Reason 3

Country of Tax Residency

Tax Identification Number (TIN)* OR TIN not applicable reason (see reason above)

Reason 1 Reason 2 Reason 3

1B: VERIFICATION PROCEDURE – AUSTRALIAN COMPANY

- > Complete either Part A or Part B to tell us what document you are sending us or the verification method Advance should perform.
- > Contact us if you are unable to provide the required documents.
- > **If instructed to provide certified copies of documents**, please refer to the 'How to certify your documents' section for information on how to do this.

PART A – ACCEPTABLE DOCUMENT

Cross X	Verification options: Select ONE of the following options used to verify the company
<input type="checkbox"/>	Certified copy of the certification of registration issued by ASIC.
<input type="checkbox"/>	Perform a search of the relevant database (Advance to perform for direct customers).

OR

PART B – ALTERNATIVE ACCEPTABLE DOCUMENT

For a company which is an Australian listed company or majority owned subsidiary of an Australian listed company, or is a regulated company (ie licensed by an Australian, Commonwealth, state or territory statutory authority)

Cross X	Verification options: Select ONE of the following options used to verify the company.
<input type="checkbox"/>	Public document issued by the relevant company.
<input type="checkbox"/>	Perform a search of the relevant market/exchange (Advance to perform for direct customers).
<input type="checkbox"/>	Perform a search of the relevant database (Advance to perform for direct customers).
<input type="checkbox"/>	Perform a search of the licence or other records of the relevant Commonwealth, state or territory statutory regulator (Advance to perform for direct customers).



1C: BENEFICIAL OWNERSHIP VERIFICATION PROCEDURE

For each of the Beneficial Owner shareholders and other Beneficial Owners specified in section 1.5 Beneficial Ownership please send us certified copies which show the beneficial owners full name, date of birth and residential address.

- > Send certified copies of one document from Part A.
- > If you cannot send us a certified document from Part A, then you must select ONE document from Part B AND ONE document from Part C.
- > Contact us if you are unable to provide a document from Part A or from Part B and Part C.
- > **Do not send original documents, only certified copies.** Please refer to 'How to certify your documents' section for more information.

PART A – ACCEPTABLE PRIMARY ID DOCUMENTS

Cross X	Select ONE valid option from this section only
<input type="checkbox"/>	Certified copy of an Australian State/Territory driver's licence containing a photograph of the person.
<input type="checkbox"/>	Certified copy of an Australian passport (a passport that has expired within the preceding two years is acceptable).
<input type="checkbox"/>	Certified copy of a 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"/>	Certified copy of a foreign passport or similar travel document containing a photograph and the signature of the person.*

OR

PART B – ACCEPTABLE SECONDARY ID DOCUMENTS

Should only be completed if you do not send a certified copy of a document from Part A or Part C

Cross X	Select ONE valid option from this section
<input type="checkbox"/>	Certified copy of an Australian birth certificate
<input type="checkbox"/>	Certified copy of an Australian citizenship certificate
<input type="checkbox"/>	Certified copy of a Pension card issued by Centrelink
<input type="checkbox"/>	Certified copy of a Health card issued by Centrelink

AND

Cross X	ONE valid option from this section
<input type="checkbox"/>	Certified copy of 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"/>	Certified copy of 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"/>	Certified copy of a document issued by a local government body or utilities provider within the preceding three 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).
<input type="checkbox"/>	If under the age of 18, certified copy of a notice that was issued to the individual by a school principal within the preceding three months; and contains the name and residential address; and records the period of time that the individual attended that school.

OR

PART C – ACCEPTABLE FOREIGN ID DOCUMENTS

Should only be completed if you do not send a certified copy of a document from Part A or B

Cross X	BOTH documents from this section must be presented
<input type="checkbox"/>	Certified copy of a Foreign driver's licence* that contains a photograph of you and your date of birth.
<input type="checkbox"/>	Certified copy of a National ID card* issued by a foreign government containing your photograph and your signature.

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

1D: SOURCE OF FUNDS/WEALTH (MUST COMPLETE)

PART A – SOURCE OF FUNDS

<input type="checkbox"/> Commission	<input type="checkbox"/> Bonus
<input type="checkbox"/> Business income/earnings	<input type="checkbox"/> Business profits
<input type="checkbox"/> Investment income/earnings	<input type="checkbox"/> Corporate investments earnings
<input type="checkbox"/> Rental income	<input type="checkbox"/> Superannuation/Pension
<input type="checkbox"/> Loan	<input type="checkbox"/> Insurance payment
<input type="checkbox"/> Compensation payment	<input type="checkbox"/> Sale of assets
<input type="checkbox"/> Liquidation of assets	<input type="checkbox"/> Mergers and acquisitions
<input type="checkbox"/> Controlled money account	<input type="checkbox"/> Gift/Donation
<input type="checkbox"/> Tax refund	
<input type="checkbox"/> Additional source (provide source)	<input style="width: 100%;" type="text"/>

AND

PART B – PRIMARY SOURCE OF WEALTH

<input type="checkbox"/> Business income/earnings	<input type="checkbox"/> Business profits
<input type="checkbox"/> Investment income/earnings	<input type="checkbox"/> Corporate investment/earnings
<input type="checkbox"/> Rental income	<input type="checkbox"/> Insurance payment
<input type="checkbox"/> Compensation payment	<input type="checkbox"/> Owns real estate/property
<input type="checkbox"/> Sale of assets	<input type="checkbox"/> Liquidation of assets
<input type="checkbox"/> Mergers and acquisitions	<input type="checkbox"/> Controlled money account
<input type="checkbox"/> Gift/Donation	
<input type="checkbox"/> Additional source (provide source)	<input style="width: 100%;" type="text"/>



3 Full given name(s)
Surname

4 Full given name(s)
Surname

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

- If the company is a regulated company (as selected in Section 2.4 above), go to Section 2B
- For all other private, proprietary or other companies continue to Section 2.7 below

2.7 Beneficial Ownership

2.7A Shareholder Beneficial Owner

To be completed for all companies which are not Public Listed companies, majority owned by an Australian Public Listed company or companies (Regulated).

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

1 SHAREHOLDER 1	
Full given name(s)	
Surname	
Alternate name(s) (if any)	
Date of birth	
Registered office address (PO Box if not acceptable)	
State	Postcode
Country, if not Australia	

Is Shareholder 1 a tax resident of any other country outside of Australia?
 No Yes

If yes, please refer to section Foreign Tax Residency Information for further information.

Country of Tax Residency

Tax Identification Number (TIN)* OR TIN not applicable reason (see reason above)

Reason 1 Reason 2 Reason 3

Country of Tax Residency

Tax Identification Number (TIN)* OR TIN not applicable reason (see reason above)

Reason 1 Reason 2 Reason 3

2 SHAREHOLDER 2	
Full given name(s)	
Surname	
Alternate name(s) (if any)	
Date of birth	
Registered office address (PO Box if not acceptable)	
State	Postcode
Country, if not Australia	

Is Shareholder 2 a tax resident of any other country outside of Australia?
 No Yes

If yes, please refer to section Foreign Tax Residency Information for further information.

Country of Tax Residency

Tax Identification Number (TIN)* OR TIN not applicable reason (see reason above)

Reason 1 Reason 2 Reason 3

Country of Tax Residency

Tax Identification Number (TIN)* OR TIN not applicable reason (see reason above)

Reason 1 Reason 2 Reason 3

3 SHAREHOLDER 3	
Full given name(s)	
Surname	
Alternate name(s) (if any)	
Date of birth	
Registered office address (PO Box if not acceptable)	
State	Postcode
Country, if not Australia	

Is Shareholder 3 a tax resident of any other country outside of Australia?
 No Yes

If yes, please refer to section Foreign Tax Residency Information for further information.

Country of Tax Residency



Tax Identification Number (TIN)* OR TIN not applicable reason (see reason above)

Reason 1 Reason 2 Reason 3

Country of Tax Residency

Tax Identification Number (TIN)* OR TIN not applicable reason (see reason above)

Reason 1 Reason 2 Reason 3

4 SHAREHOLDER 4
Full given name(s)
Surname
Alternate name(s) (if any)
Date of birth
Registered office address (PO Box if not acceptable)
State Postcode
Country, if not Australia

Is Shareholder 4 a tax resident of any other country outside of Australia?
 No Yes

If yes, please refer to section Foreign Tax Residency Information for further information.

Country of Tax Residency

Tax Identification Number (TIN)* OR TIN not applicable reason (see reason above)

Reason 1 Reason 2 Reason 3

Country of Tax Residency

Tax Identification Number (TIN)* OR TIN not applicable reason (see reason above)

Reason 1 Reason 2 Reason 3

2.7B Other beneficial owners or controlling parties

To be completed for all companies which are not Public Listed companies, majority owned by an Australian Public Listed company or companies (Regulated).

* Includes exercising control through the capacity to determine decisions about financial or operating policies; or by means of trusts, agreements, arrangements, understanding & practices; voting rights of 25% or more; or power of veto. If no such person can be identified then the most senior managing official/s of the company (such as the managing director or directors who are authorised to sign on the company's behalf).

BENEFICIAL OWNER

Full given name(s)

Surname

Alternate name(s) (if any)

Date of birth

Registered office address (PO Box if **not** acceptable)

State Postcode
Country, if not Australia

Is the Beneficial Owner a tax resident of any other country outside of Australia?

No Yes

If yes, please refer to section Foreign Tax Residency Information for further information.

Country of Tax Residency

Tax Identification Number (TIN)* OR TIN not applicable reason (see reason above)

Reason 1 Reason 2 Reason 3

Country of Tax Residency

Tax Identification Number (TIN)* OR TIN not applicable reason (see reason above)

Reason 1 Reason 2 Reason 3

2B: VERIFICATION PROCEDURE – FOREIGN COMPANY

- > Complete Part A, Part B or Part C to tell us what documents you are sending us or the verification method Advance should perform.
- > Contact us if you are unable to provide the required documents.
- > **Do not send original documents, only certified copies.** Please refer to the 'How to certify your documents' section for information on how to do this.

PART A – ACCEPTABLE ID DOCUMENTS*

For a foreign company registered with ASIC

Cross X	Verification option: Select this option if the foreign company is registered with ASIC
<input type="checkbox"/>	A certified copy of the certification of registration issued by ASIC or by the relevant foreign registration body.
<input type="checkbox"/>	A disclosure certificate from the company given by an individual acting as agent of the company where the agent has been verified. Contact Customer Relations team for more information.
<input type="checkbox"/>	Perform a search of the relevant foreign registration body (Advance to perform for direct customers).



OR

PART B – ACCEPTABLE ID DOCUMENTS* OR A FOREIGN COMPANY NOT REGISTERED WITH ASIC

Cross X	Verification option: Select this option if the foreign company is not registered with ASIC
<input type="checkbox"/>	A certified copy of the certification of registration issued by the relevant foreign registration body.
<input type="checkbox"/>	A disclosure certificate from the company given by an individual acting as agent of the company where the agent has been verified. Contact Customer Relations team for more information.
<input type="checkbox"/>	Perform a search of the relevant foreign registration body (Advance to perform for direct customers).

OR

PART C – ACCEPTABLE ID DOCUMENTS*

For a listed company, a majority owned subsidiary of an Australian listed company or a regulated company

Cross X	Verification option
<input type="checkbox"/>	A public document issued by the relevant company.
<input type="checkbox"/>	Perform a search of the relevant financial market (Advance to perform for direct customers).
<input type="checkbox"/>	Perform a search of the relevant ASIC database (Advance to perform for direct customers).
<input type="checkbox"/>	Perform a search of the licence or other records of the relevant Commonwealth, state or territory statutory regulator (Advance to perform for direct customers).

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

2C: BENEFICIAL OWNERSHIP VERIFICATION PROCEDURE

For each of the Beneficial Owner shareholders and other Beneficial Owners specified in section 2.7 Beneficial Ownership please send us certified copies which show the beneficial owners full name, date of birth and residential address.

- > Send certified copies of one document from Part A.
- > If you cannot send us a certified document from Part A, then you must select ONE document from Part B AND ONE document from Part C.
- > Contact us if you are unable to provide a document from Part A or from Part B and Part C.
- > **Do not send original documents, only certified copies.** Please refer to 'How to certify your documents' section for more information.

PART A – ACCEPTABLE PRIMARY ID DOCUMENTS

Cross X	Select ONE valid option from this section only
<input type="checkbox"/>	Certified copy of an Australian State/Territory driver's licence containing a photograph of the person.
<input type="checkbox"/>	Certified copy of an Australian passport (a passport that has expired within the preceding two years is acceptable).
<input type="checkbox"/>	Certified copy of a 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"/>	Certified copy of a foreign passport or similar travel document containing a photograph and the signature of the person.*

OR

PART B – ACCEPTABLE SECONDARY ID DOCUMENTS

Should only be completed if you do not send a certified copy of a document from Part A or Part C

Cross X	Select ONE valid option from this section
<input type="checkbox"/>	Certified copy of an Australian birth certificate
<input type="checkbox"/>	Certified copy of an Australian citizenship certificate
<input type="checkbox"/>	Certified copy of a Pension card issued by Centrelink
<input type="checkbox"/>	Certified copy of a Health card issued by Centrelink

AND

Cross X	ONE valid option from this section
<input type="checkbox"/>	Certified copy of 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"/>	Certified copy of 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"/>	Certified copy of a document issued by a local government body or utilities provider within the preceding three 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).
<input type="checkbox"/>	If under the age of 18, certified copy of a notice that was issued to the individual by a school principal within the preceding three months; and contains the name and residential address; and records the period of time that the individual attended that school.

OR

PART C – ACCEPTABLE FOREIGN ID DOCUMENTS

Should only be completed if you do not send a certified copy of a document from Part A or B

Cross X	BOTH documents from this section must be presented
<input type="checkbox"/>	Certified copy of a Foreign driver's licence* that contains a photograph of you and your date of birth.
<input type="checkbox"/>	Certified copy of a National ID card* issued by a foreign government containing your photograph and your signature.

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



DEC | X | AD 10591

2D: SOURCE OF FUNDS/WEALTH (MUST COMPLETE)

PART A – SOURCE OF FUNDS

<input type="checkbox"/> Commission	<input type="checkbox"/> Bonus
<input type="checkbox"/> Business income/earnings	<input type="checkbox"/> Business profits
<input type="checkbox"/> Investment income/earnings	<input type="checkbox"/> Corporate investments earnings
<input type="checkbox"/> Rental income	<input type="checkbox"/> Superannuation/Pension
<input type="checkbox"/> Loan	<input type="checkbox"/> Insurance payment
<input type="checkbox"/> Compensation payment	<input type="checkbox"/> Sale of assets
<input type="checkbox"/> Liquidation of assets	<input type="checkbox"/> Mergers and acquisitions
<input type="checkbox"/> Controlled money account	<input type="checkbox"/> Gift/Donation
<input type="checkbox"/> Tax refund	
<input type="checkbox"/> Additional source (provide source)	
<input type="text"/>	

AND

PART B – PRIMARY SOURCE OF WEALTH

<input type="checkbox"/> Business income/earnings	<input type="checkbox"/> Business profits
<input type="checkbox"/> Investment income/earnings	<input type="checkbox"/> Corporate investment/earnings
<input type="checkbox"/> Rental income	<input type="checkbox"/> Insurance payment
<input type="checkbox"/> Compensation payment	<input type="checkbox"/> Owns real estate/property
<input type="checkbox"/> Sale of assets	<input type="checkbox"/> Liquidation of assets
<input type="checkbox"/> Merges and acquisitions	<input type="checkbox"/> Controlled money account
<input type="checkbox"/> Gift/Donation	
<input type="checkbox"/> Additional source (provide source)	
<input type="text"/>	

3: FINANCIAL ADVISER USE ONLY

- > **Option 1** – Financial advisers can complete Section 3B as outlined below. Please ensure that you indicate which document(s) you have sighted or which search was performed as set out in Section 1B or Section 2B of this form. Enclose the completed verification procedure with your client's product Application Form and mail to Advance. **This method is preferred by Advance.**

OR

- > **Option 2** – Financial advisers can send Advance copies of the documents received from the client with this completed Customer Identification Form and the product Application Form. Documents must be provided in line with Section 1B or Section 2B of this form.

VERIFICATION REQUIREMENTS FOR DOMESTIC AND FOREIGN COMPANIES

1. Domestic company verification procedure

Standard verification procedure

Verify:

- > the full name of the company as registered by ASIC
- > whether the company is registered as a proprietary or a public company
- > the ACN issued to the company.

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).

Verify that the company is:

- > an Australian listed company (if applicable)
- > a majority owned subsidiary of an Australian listed company (if applicable)
- > a regulated company (if applicable).

2. Foreign companies verification procedure

Standard verification procedure – for foreign companies registered with ASIC

Verify:

- > the full name of the company as registered by ASIC
- > the ARBN issued to the company
- > whether it is registered by a foreign registration body and, if so, whether it is registered as a private company or a public company.

Standard verification procedure – for foreign companies NOT registered with ASIC

Verify:

- > the full name of the company
- > whether it is registered by a foreign registration body and if so
 - whether it is registered as a private company or a public company
- > the identification number issued to the company.



3B: RECORD OF VERIFICATION PROCEDURES

ID document details	Document 1										
Verified from	<input type="checkbox"/> Performed search <input type="checkbox"/> Original <input type="checkbox"/> Certified copy										
Document issuer/website											
Public document type											
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3C: FINANCIAL ADVISER DETAILS

Identification and verification conducted by:

Date verified (dd/mm/yyyy)

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Financial Adviser's name

AFS licensee name

AFSL number

--	--	--	--	--	--	--	--	--	--

Phone number

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FOREIGN TAX RESIDENCY INFORMATION

If the Individual or Entity is a tax resident of any other country outside of Australia, please indicate the country(ies) in which they are a resident for tax purposes and each country's associated Tax Identification Number (TIN).

If a 'TIN' is not available, please specify one of the following reasons against the appropriate country:

Reason 1: Foreign TIN not issued by this country

Reason 2: Individual is under age (applies to individuals only)

Reason 3: Foreign TIN pending issue by the country's tax authority

* A Foreign TIN is an identifying number or equivalent issued by the Individual or Entity country of tax residency that is used for tax purposes.

Note: If the Individual or Entity has more than 2 countries in which they are a tax resident, please photocopy the relevant section to provide more details.

OUR REPORTING OBLIGATIONS

We are required to identify tax residents of a country(ies) other than Australia in order to meet account information reporting requirements under local and international laws.

If at any time after account opening, information in our possession suggests that you, the entity and/or any individual who holds ownership and/or control in the entity of 25% or more (Controlling Person/Beneficial Owner) may be a tax resident of a country(ies) other than Australia, you may be contacted to provide further information on your foreign tax status and/or the foreign tax status of the entity and/or any Controlling Person/Beneficial Owner. Failure to respond may lead to certain reporting requirements applying to the account.

By completing this application you certify that if at any time there is a change to the foreign tax status details for you, the entity and/or any controlling persons/beneficial owner, you will inform the bank. You also certify that if at any time there is a change of a controlling person/s/beneficial owner/s in your entity, you will inform the bank.

A controlling person/beneficial owner refers to the individual(s) that directly or indirectly owns a legal interest in the entity of 25% or more and/or exercises actual effective control over the entity, whether from an economic or other perspective such as through voting rights. In addition, in the case of a trust, a controlling person/beneficial owner includes the settlor(s), trustee(s), appointer(s), protector(s), beneficiary(ies) or classes of beneficiaries and in the case of an entity other than a trust, the term includes persons in equivalent or similar positions.

SEND THIS COMPLETED FORM TO:

By Post: Advance Asset Management
 GPO Box B87
 Perth WA 6838

FOR FURTHER ASSISTANCE CONTACT:

CUSTOMER RELATIONS

1800 819 935

FAX

02 9274 5211

EMAIL ADDRESS

investorservices@advance.com.au

INTERNET ADDRESS

advance.com.au

ADVANCE

ASSET MANAGEMENT



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