

Dear Member,

Welcome and thank you for your interest in banking with Bank First. Proudly Member-owned, we were founded to support those who support others in the community.

To proceed, can you please complete the attached forms:

- **Partnership Application** – please ensure all signatories for this account complete and sign the relevant sections.
- **Proving your Identity** – to comply with Australian regulatory requirements, we need each account holder and signatory to the account to complete and sign the form, along with a certified copy of their identification documents. You can find a list of acceptable certifiers on the Proving your Identity form.
- **Proving your Identity (Non Individual)** – a copy of the Partnership Agreement must be certified using this form. If you do not have a Partnership Agreement please fill out the attached **Disclosure Certificate for Partnerships** form.
- **\$50 Non-Individual Account Establishment Fee.**

Once completed, please return the form (postage free) to:

Bank First  
Reply Paid 338  
Camberwell VIC 3124

It is important that you view and consider our Financial Services Guide (FSG) and Terms and Conditions before applying for any products. Our FSG outlines the financial services we provide, remuneration we receive or pay for providing these services and information on our dispute resolution. These documents are also available on our website at [bankfirst.com.au/disclosure-documents](https://bankfirst.com.au/disclosure-documents).

Bank First offers a range of financial services to meet your every need. If you require any further information or assistance, please call one of our friendly Member Service Consultants on **1300 654 822** or visit [bankfirst.com.au](https://bankfirst.com.au).

Regards,

**The Bank First Team**

MS788 020824

## A. Partnership Information

Member Number

Full Name of Partnership

Registered Business Name

Country in which the Partnership was established

Australian Business Number (ABN)

Telephone

Fax

Main Trading Address

Postal Address

Email Address

Nature of business activities

Intended purpose of Membership

Everyday Business Banking

Investment

Other – please specify

Is this entity a resident for tax purposes of another country Yes

No

If you ticked Yes, please ensure the [Self Certification - Overseas Residency for Tax Purposes form](#) is also completed

## B. Ownership & Control

Australia's Anti-Money Laundering & Counter Terrorist Financing laws require Bank First to collect and verify information about the beneficial ownership and control of its non-individual customers. A beneficial owner is any individual who owns or controls 25% or more of a legal entity.

'Ownership' means ownership (either directly or indirectly) of 25% or more of an entity. 'Control' includes as a result of, or by means of, trusts, agreements, understandings and practices, whether or not having legal or equitable force and whether or not based on legal or equitable rights, and includes exercising control through the capacity to determine decisions about financial and operating policies.

## C. Beneficial Ownership

Other than the Partners/Signatories listed on this form, does any individual own or control through one or more (direct or indirect) shareholding of 25% or more of the entity. Yes No

If yes, please provide a Beneficial Ownership and Control form completed and signed by each Beneficial Owner.

## D. Nominated Representative

Please nominate a representative to act on the Partnership's behalf at Bank meetings.

## E. Consent for Electronic Verification of Identity

The AML/CTF Act requires Bank First to verify your identity prior to banking with us. To verify your identity electronically, the Bank requires your consent for us to provide personal details including your name, address and date of birth to one of our credit reporting bodies including Vix Verify or Equifax who will match those details against those held on their database. The Bank will then receive an overall assessment from the credit reporting body of the matching data which will be used solely for the purpose of verifying your identity, in accordance with the AML/CTF Act. The Bank may also contact the issuer or official record holder (directly or via an approved third party) to verify document details using the Government's Document Verification Service (DVS).

An alternative means of verifying your identity is available using a documentation-based procedure if you choose not to consent to Electronic Verification.

Please tick the box below confirming your authority and consent to electronic verification of your identity:

**Partner 1** Yes

**Partner 2** Yes

## F. Partner Details

### Partner 1

Member Number

Partner 1 is authorised to operate this account as a signatory Yes No

Title: Mr Mrs Miss Ms Mx Date of Birth

Full Name: Surname Given Names

Occupation

Residential Address State Postcode

Postal Address State Postcode  
(if different from above)

Email Address

Telephone: Home Work Mobile

% Ownership of the partnership

Are you a permanent resident of Australia? Yes No

Are you a citizen of any country other than Australia? Yes No If yes, please list all countries of citizenship

Are you a resident for tax purposes of another country? Yes No If yes, please state all countries where tax is payable

**If you ticked Yes, please ensure the [Self Certification - Overseas Residency for Tax Purposes form](#) is also completed**

Are you a Politically Exposed Person? Yes  No  **Note:** Please refer to the definition of a Politically Exposed Person on the final page of this form.

### Partner 2

Member Number

Partner 2 is authorised to operate this account as a signatory Yes No

Title: Mr Mrs Miss Ms Mx Date of Birth

Full Name: Surname Given Names

Occupation

Residential Address State Postcode

Postal Address State Postcode  
(if different from above)

Email Address

Telephone: Home Work Mobile

% Ownership of the partnership

Are you a permanent resident of Australia? Yes No

Are you a citizen of any country other than Australia? Yes No If yes, please list all countries of citizenship

Are you a resident for tax purposes of another country? Yes No If yes, please state all countries where tax is payable

**If you ticked Yes, please ensure the [Self Certification - Overseas Residency for Tax Purposes form](#) is also completed**

Are you a Politically Exposed Person? Yes  No  **Note:** Please refer to the definition of a Politically Exposed Person on the final page of this form.

## G. Account Services

Please select how you would like to operate this account: One to sign Two to sign

**Note:** where two or more signatories are required to operate an account, some access channels may not be available.

We would like the following services attached to this account: Visa Debit Card Barcode Banking

Card required for: **Partner 1** **Partner 2** **Signatory 3** **Signatory 4**

## H. Initial Deposit

A minimum of \$50 is required to cover the Non-Individual Account Establishment Fee. \$

**How to pay:**

Debit my existing Bank First account. Member Number Account Number (e.g. S1, S2 etc)

Cheque (please include with your application)

Visa or MasterCard (If you select this option, the Bank will contact you for your details)

## I. Signatory(ies) Details

### Signatory 1 (Non-partner)

#### Member Number (for office use only)

Title: Mr Mrs Miss Ms Mx Date of Birth

Full Name: Surname Given Names

Occupation

Residential Address State Postcode

Postal Address (if different from above) State Postcode

Email Address

Telephone: Home Work Mobile

Are you a permanent resident of Australia? Yes No

Are you a citizen of any country other than Australia? Yes No If yes, please list all countries of citizenship

Are you a resident for tax purposes of another country? Yes No If yes, please state all countries where tax is payable

**If you ticked Yes, please ensure the [Self Certification - Overseas Residency for Tax Purposes form](#) is also completed**

Are you a Politically Exposed Person? Yes No **Note:** Please refer to the definition of a Politically Exposed Person on the final page of this form.

### Signatory 2 (Non-partner)

#### Member Number (for office use only)

Title: Mr Mrs Miss Ms Mx Date of Birth

Full Name: Surname Given Names

Occupation

Residential Address State Postcode

Postal Address (if different from above) State Postcode

Email Address

Telephone: Home Work Mobile

Are you a permanent resident of Australia? Yes No

Are you a citizen of any country other than Australia? Yes No If yes, please list all countries of citizenship

Are you a resident for tax purposes of another country? Yes No If yes, please state all countries where tax is payable

**If you ticked Yes, please ensure the [Self Certification - Overseas Residency for Tax Purposes form](#) is also completed**

Are you a Politically Exposed Person? Yes No **Note:** Please refer to the definition of a Politically Exposed Person on the final page of this form.

## J. Consent for Electronic Verification of Identity

The AML/CTF Act requires Bank First to verify your identity prior to banking with us. To verify your identity electronically, the Bank requires your consent for us to provide personal details including your name, address and date of birth to one of our credit reporting bodies including Vix Verify or Equifax who will match those details against those held on their database. The Bank will then receive an overall assessment from the credit reporting body of the matching data which will be used solely for the purpose of verifying your identity, in accordance with the AML/CTF Act. The Bank may also contact the issuer or official record holder (directly or via an approved third party) to verify document details using the Government's Document Verification Service (DVS).

An alternative means of verifying your identity is available using a documentation-based procedure if you choose not to consent to Electronic Verification. Please tick the box below confirming your authority and consent to electronic verification of your identity:

**Signatory 1** Yes **Signatory 2** Yes

## K. Tax File Number (only if ABN not quoted)

Collection of TFN information is authorised and its use and disclosure are strictly regulated by the tax laws and the Privacy Act. It is not an offence if you choose not to quote your TFN, but if you do not, tax may be taken out of your interest. If you quote your TFN no tax will be taken out of the interest paid on your deposit accounts.

Tax File Number (TFN)

## L. Declaration & Signature

**Note:** This application must be signed by at least two partners and all signatories

I declare that the details on this form to be true and correct and acknowledge that the Bank will collect information (including personal information) from me as required by the Anti-Money Laundering and Counter Terrorism Financing (AML/CTF) Act 2006 (Cth) and that it may take steps to verify the information it has collected. I understand that it is an offence under the AML/CTF Act to make a false or misleading statement.

I agree that I have read, understood and agree to Bank First Privacy Policy specifically the manner which we may collect use and store your personal information. I declare the details on this form to be true and correct.

**Partner 1  
Signature**

**Date**

**Partner 2  
Signature**

**Date**

**Signatory 1  
Signature**

**Date**

**Signatory 2  
Signature**

**Date**

## M. Important Information About Your Privacy

### What information can be used and disclosed?

The Privacy Act allows **Victoria Teachers Limited trading as Bank First** ('we', 'us', 'our') ACN **087 651 769** to use and disclose personal information we collect about you for the primary purpose for which it was collected and for related secondary purposes that you would reasonably expect.

### When and why do we collect information?

Before, during or after the provision of our products and services to you, we may collect your personal information for the purpose of providing products and services to you and managing our business.

Some laws require us to obtain personal information about you before we provide you with particular products or services or process particular transactions in which you are involved – e.g. laws relating to anti-money laundering and counter-terrorism financing, consumer credit, taxation and real property transactions.

If you do not provide us with the personal information that we request, we may not be able to consider your application for credit or provide other products and services.

### Who can give or collect information?

For the purpose of providing products and services to you and managing our business, we may give your personal information to:

- external service providers to us, such as organisations which we use to verify your identity, payment systems operators, mailing houses and research consultants
- insurers and re-insurers, where insurance is provided in connection with our services to you
- superannuation funds, where superannuation services are provided to you
- debt collecting agencies, if you have not repaid a loan as required
- our professional advisors, such as accountants, lawyers and auditors
- your representative, for example, lawyer, mortgage broker, financial advisor or attorney, as authorised by you, or
- government and regulatory authorities, if required or authorised by law.

### Disclosure to overseas recipients

We may disclose your personal information to overseas recipients. The countries in which such recipients are likely to be located include the United States of America, the United Kingdom and countries within Europe.

However, if we do disclose information to overseas recipients, we will do so on the basis that the information will be used only for the purposes set out in this document.

### Personal information about third parties

You represent that, if at any time you supply us with personal information about another person (for example a referee), you are authorised to do so; and you agree to inform that person about who we are, how to contact us, how to obtain our Privacy Policy, and that we will use and disclose their personal information for the purposes set out in this Permission and that they can gain access to that information.

### Security, privacy policy, and marketing preferences

#### Security

We take all reasonable steps to ensure that all your personal information held by us (on our website or otherwise), is protected from misuse, interference and loss, and from unauthorised access, disclosure or modification.

#### Privacy Policy

Our Privacy Policy, located on our website at [bankfirst.com.au](http://bankfirst.com.au), provides additional information about how we handle your personal information. It explains how you can ask for access to personal information we hold about you and seek correction of that information. It also explains how you can complain about a breach of the Privacy Act or the Privacy (Credit Reporting) Code, and how we will deal with your complaint. We will give you a copy of our Privacy Policy on request.

#### Marketing preferences

We may use information about you to inform you about products and services, including those of third parties, unless you ask us not to. We may do so even if you are on the Do Not Call Register, unless you ask us not to.

#### Consumer Data Right

The Consumer Data Right gives you the right to:

- access some of the data (including personal information) held about you by us and by other data holders ('CDR Data')
- consent to an accredited third party accessing your CDR Data held by us, and
- consent to us accessing your CDR Data held by another data holder.

We have a policy about our management of CDR Data which is available through our website. You can also get an electronic or hard copy from us on request.

© Copyright exists in this document

## N. Politically Exposed Person Definition

A Politically Exposed Person is an individual or immediate family member, or close associate of the individual who holds, or has held a prominent public position either domestically or internationally in a government body or an international organisation. For example heads of state, country or government, senior politicians, government or political party officials, judicial or military officials, senior foreign representative, ambassador or high commissioner, central bank governor, directors or senior executives of any state enterprise or of international organisations. With regard to the above definition, do you believe yourself, a member of your immediate family or a close associate, to be a Politically Exposed Person?

Refer to the Financial Services Guide (FSG) and Terms and Conditions brochures available at our branches, on our website [bankfirst.com.au](http://bankfirst.com.au) or by contacting us on **1300 654 822**. These documents should be considered before acquiring a product.

## Information for the applicant

### Why do I have to prove my identity?

Bank First is required by law to verify an individual's identity prior to providing access to its products and services. It is an offence under the Anti-Money Laundering and Counter Terrorism Financing Act (Cth) 2006 to provide false or misleading information about your identity.

### When do I use this form?

This form must be completed if you are applying to become a Member or signatory to an account held with Bank First but are unable to attend one of our branches in person.

### What is the purpose of this form?

This form has two purposes. Firstly, it provides you with a choice of documents that you can use to prove your identity. Secondly, where you are unable to present the original documents at one of our branches you must arrange for copies of the documents to be certified. Information and instructions for Certifiers are overleaf.

### What documents can I use?

The easiest way to prove your identity is by providing a certified copy of a valid **passport or driver licence**. If your driver licence does not show your current address, you will be required to provide an additional document showing your current address.

If you do not have a current passport or driver licence, you can provide a certified copy of one document from List A and one document from List B.

**List A** (any one of the following)

- Birth certificate.
- Citizenship certificate.

**List B** (any one of the following)

- Pension card.
- A notice issued by a local government or utilities provider within the previous 3 months which must show **both** your name and current address.
- A notice issued by the Australian Tax Office within the previous 12 months which must show **both** your name and current address.
- A notice issued by the Commonwealth, State or Territory within the previous 12 months which must show **both** your name and current address.

### I am under 18, what documents can I use?

You can provide a certified copy of a valid **passport or learner permit**. If your learner permit does not show your current address, you will be required to provide an additional document showing your current address. If you don't have either of these documents you must provide your **birth certificate and any one of the following**;

- Medicare card.
- A notice issued by a School Principal within the previous 12 months which must show your name and current address.
- A card or notice issued by the Commonwealth, State or Territory which must show both your name and address (e.g. Baby Bonus or Family Tax Benefit).

### What if I don't have any of the documents listed?

Please contact one of our friendly Member Service Consultants on **1300 654 822** to discuss alternative documents you can use. You can also visit a branch located in Hawthorn East or Moonee Ponds.

### What am I required to do with my documents?

You must take a copy of each identification document and provide both the original and the copy to a suitable Certifier (see list overleaf). The Certifier must certify the copied documents as shown in the example and also complete the form overleaf. The completed form and the certified copies of your identification documents should then be forwarded to Bank First. This form and the certified copies of your documents cannot be faxed to the Bank.

## What are suitable categories of Certifiers?

Please note that documents can only be certified by a person on this list.

1. Legal Practitioner.
2. Full Time Teacher.
3. Medical Practitioner or Dentist.
4. Nurse.
5. Justice of the Peace.
6. Police Officer.
7. Pharmacist.
8. Officer, Employee or authorised representative of an Australian Financial Services Licensee (2 or more years continuous service, e.g. Bank Manager, Financial Planner).
9. Accountant (2 or more years membership with Institute of Chartered Accountants, CPA Australia or National Institute of Accountants).
10. Permanent employee of Australia Post (2 or more years continuous service and employed in a post office) or Australia Post agent who is in charge of a post office.

## Information for the Certifier

### How to certify documents

The Certifier must check that the copies they are certifying have been made from the original documents. They must then add the following statement and information to each page of the copied document:

**I certify that this is a true copy of the original which I have sighted.**

Name:

Signed:

Date:

Certifier Type:

Registration Number (if applicable):

#### Example:

I certify that this is a true copy of the original which I have sighted.

Date dd/mm/yyyy

Name John Smith

Signed *J Smith*

Certifier Type Police Officer

Registration Number (if applicable) 123456

### The Certifier must complete the following sections

#### Details of the person whose documents are being certified

Title: Mr Mrs Miss Ms Mx

Full Name: Surname Given names

Residential Address  
(PO Box not acceptable) Postcode

Date of Birth

#### Certifier's contact details

In some cases, Bank First may need to contact the Certifier. For this reason, the Certifier is required to provide their contact details.

Title: Mr Mrs Miss Ms Mx

Full Name: Surname Given names

Business or Residential Address  
(PO Box not acceptable) Postcode

Occupation Category of Certifier Daytime contact number

#### Certifier's signature

It is an offence under the Anti-Money Laundering and Counter Terrorism Financing Act 2006 (Cth) to give false and misleading information. I have examined the original documents and I have certified each copy accordingly.

Certifier's signature

Date



Please send your completed form back by one of the following methods:  
Email: [info@bankfirst.com.au](mailto:info@bankfirst.com.au)  
Mail: **Bank First Reply Paid 338 Camberwell VIC 3124**

This certificate must be completed by a Partner and may be relied upon for the purpose of verifying information about the Partnership only where the information is not otherwise reasonably available from other sources such as a Partnership Agreement. Should you require further assistance, please contact a Member Service Consultant on **1300 654 822**.

### A. Partnership Information

Full Name of Partnership		
Country in which the Partnership was established		
Registered Business Name		
Telephone		Fax
Registered Office Address		
Principal Place of Administration		
Postal Address	State	Postcode
Email Address		
Nature of business		

### B. Name of the Partners

Please state Full Name of each of the Partners:

Partner 1

Partner 2

Partner 3

### C. Signature

The Partnership mentioned herein declares that the details in this document are true and accurate.

<b>Signature</b>	<b>FullName</b>
<b>Date</b>	

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Please complete all sections and certify copies of documents as per the example below. Should you require assistance please call a friendly Member Service Consultant on **1300 654 822**.

### A. Categories of Certifiers

Please note that we will accept documents certified by a person on this list

- |                                     |  |
|-------------------------------------|--|
| 1. Legal Practitioner.              | 7. Pharmacist  |
| 2. Full Time Teacher.               | 8. Officer, Employee or authorised representative of an Australian Financial Services Licensee (2 or more years continuous service, e.g. Bank Manager, Financial Planner). |
| 3. Medical Practitioner or Dentist. | 9. Accountant (2 or more years membership with Institute of Chartered Accountants, CPA Australia or National Institute of Accountants).                                    |
| 4. Nurse.                           | 10. Permanent employee of Australia Post (2 or more years continuous service and employed in a post office) or Australia Post agent who is in charge of a post office.     |
| 5. Justice of the Peace.            |  |
| 6. Police Officer.                  |  |

### B. Certifier's Details

Title: Mr Mrs Miss Ms Mx Category of Certifier  
Insert relevant number (see list above)

Full Name: Surname Given Names

Address State Postcode  
(PO Box not acceptable)

Email Address

Daytime Telephone Number

Occupation

### C. Documents Certified

Copy of the original documents must be certified and the Certifier (see list above) must have signed the originals. These copies referred to as 'Certified Documents', must be attached to this form and forwarded to Bank First. Photocopies or faxes of certified documents are not accepted.

Documents must be certified and attached as follows:

This is to certify that this is a true copy of the original which I have sighted.

Date  
 Name  
 Signed  
 Certifier Category (see list above)  
 Registration Number (if applicable)

**Example:**

This is to certify that this is a true copy of the original which I have sighted.

Date dd / mm / yyyy  
 Name John Smith  
 Signed John Smith  
 Certifier Category Police Officer  
 Registration Number (if applicable) 123456

**Type of Document**

## D. Certifier Statement

It is an offence under the Anti-Money Laundering and Counter Terrorism Financing Act 2006 (Cth) to give false and misleading information.

**I have examined the original documents listed above and I have certified each copy accordingly.**

**Certifier's Signature**

**Date**

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