

ACCOUNT OPENING FORM

ACCOUNT OPENING AND AUTHORITY FOR COMPANIES, PARTNERSHIPS,
TRUSTS AND OTHER ENTITIES

Australia and New Zealand Banking Group Limited, Fiji Branch



Customer number New customer Existing customer

Legal name of Entity

Select Entity type:

- Incorporated Association and Unincorporated Association (Club / Society / Lodge)
- Partnership
- Trust
- Government Body and Intergovernmental Organisation (Embassy / Consulate / Diplomatic Organisation)
- Non-Government Organisation (Social and Charitable Organisation)
- Company
- Multilateral Organisation
- Other (please specify)

Country of Establishment

Registration/Incorporation Number

Nature of business/activities

Physical address of Entity

Street

Suburb

City

Country

Postcode

Postal address of Entity (if different)

Street

P.O. Box

Suburb

City

Country

Postcode

Business contact details

Phone number

Mobile number

Email address

Parent or ultimate owner of Entity Local Foreign

Names of the parent companies or names of the natural persons who ultimately own or control the Entity are required.

Names of parent companies or natural persons

<input type="text"/>	<input type="checkbox"/>
<input type="text"/>	<input type="checkbox"/>
<input type="text"/>	<input type="checkbox"/>
<input type="text"/>	<input type="checkbox"/>

Customer identification and verification completed and copies of ID documents retained

ACCOUNT OPENING FORM

Australia and New Zealand Banking Group Limited, Fiji Branch

Listed in stock exchange Yes No

Name of stock exchange

Stock code

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Majority stakeholder(s) (For subsidiaries of publicly listed stock exchange companies)

Company name

% ownership

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

ACCOUNT INFORMATION

Account number

Branch number

<input type="text"/>	<input type="text"/>
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Account name

Account type

(e.g. Cheque, Savings)

Currency type

(e.g. FJD, USD, AUD)

<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

WAYS TO BANK

ANZ Internet Banking* ANZ Pacific App ANZ Transactive Cheque book

Address to appear on cheques as: Physical address Postal address

Cheque book size 25 50 100 200

Collection details (if applicable) will be collected from branch send by mail

<input type="text"/>

STATEMENT BY CUSTOMER(S)

I am/we are not commonly known by any name(s) other than shown in this document.

I am/we are carrying on business under the business name(s)

I am/we are also commonly known as

The Account is held in trust for the beneficiaries named in the Trust Deed

The Account is not held in trust

<input type="text"/>
<input type="text"/>

ACCOUNT OPENING FORM

Australia and New Zealand Banking Group Limited, Fiji Branch

PRIVACY ACKNOWLEDGEMENT

Information you provide to Australia and New Zealand Banking Group Limited, Fiji Branch (**ANZ**) will be kept strictly confidential and will be securely held by ANZ and/or by any ANZ Group Member which term includes ANZ's head office and its branches, agents, representative offices, regional offices or affiliates, or any related corporation of ANZ anywhere in the world (**ANZ Group Member**).

ANZ will collect and use some of your information, including details about your transactions, your financial conditions, your account relationship with ANZ and /or your accounts(s) (herein collectively referred to as **Information**).

ANZ may, to the extent permitted by law, collect your Information:

- to assist in providing Information about a product or service;
- to consider your request for a product or service;
- to enable ANZ to provide a product or service;
- to tell you about other products or services that may be of interest to you;
- to perform other administrative and operational tasks (including risk management, systems development and testing, credit scoring, staff training and market or customer satisfaction research);
- to prevent and investigate any fraud or crime (or a suspected fraud or crime); and
- as required by relevant laws, regulations and external payments systems, whether inside or outside the country where you live or where your account is held.

If you do not provide some or all of the information requested, ANZ may be unable to provide you with a product or service.

Disclosures by ANZ

To the extent permitted by law, by applying for a product or service, you agree that ANZ may use and disclose your Information to:

- you, co-borrowers, your agents, authorised signatories, or customers you are an authorised signatory for;
- your parents or guardians — if you're under 18 years old;
- guarantors of any money you owe us;
- brokers, custodians and other parties who introduced you to ANZ, are acting on your behalf, or are otherwise financially advising you;
- any ANZ Group Member;
- any service provider, agent or contractor which ANZ or any ANZ Group Member engages to carry out or assist its banking functions, activities and services — for example, mail houses, market research companies, cloud-service providers or data analysis companies;
- marketing companies;
- supervisors and advisors of our schemes;
- any credit reporting company or debt recovery agencies;
- regulatory bodies, government agencies, law enforcement bodies, taxation authorities and courts whether inside or outside the country where you live or where your account is held;
- other parties ANZ is authorised or required to disclose information to by law of the country where you live or where your account is held or by law of another country;
- any reputable companies or organisations we have a continuing relationship with — including those we jointly offer products and services with, or anyone who offers loyalty programmes or services related to our accounts, products, or services;
- other banks and financial institutions — if required when you send money from your account or receive money into it, to confirm or investigate the transaction, and for verification and investigation of such transactions;
- your authorised agents or your executor, administrator or legal representative;
- any person where in ANZ's view, disclosures are necessary or desirable for the purpose of allowing ANZ to perform its duties and exercise its powers and rights under the Terms and Conditions;
- any person or entity assisting us to investigate any concerns or complaints or manage any legal action; and
- any other person or organisation as allowed by applicable law.

You agree and acknowledge that any ANZ Group Member may, to the extent permitted by law, transfer any Information to any party referred to above to whom it is authorised to disclose the Information even though that party's principal place of business is outside the country where you live or where your account is held or that such information will be collected, held, processed or used by such party in whole or in part outside the country where you live or where your account is held.

To the extent permitted by law, you may access your Information by enquiring at any ANZ branch and you may also request that it be corrected. A fee may be payable if you ask us to do this.

ACCOUNT OPENING FORM

Australia and New Zealand Banking Group Limited, Fiji Branch

AUTHORITY DECLARATIONS BY ACCOUNT HOLDER(S)

To: Australia and New Zealand Banking Group Limited, Fiji Branch, (Bank)

1. I/we hereby request the Bank to open an Account in the name set out above.

2. In the case of a company or other business:

I/we certify that a resolution was passed in accordance with the Customer's constitution on

and that it has been recorded in the minute book of the Customer for an Account to be opened with the Bank at its branch situated at:

3. I/we confirm that I/we have authorised:

Any 1 signatory; or

Any 2 signatories, or;

Other (please specify)

to act fully and effectively in all dealings, matters and transactions (including withdrawals) in respect of the Account with the Bank.

4. I/we agree to be bound by this authority and the terms and conditions which govern the Account listed in this document notified by the Bank from time to time (**Terms and Conditions**).

5. This authority is to remain in force and the Bank may rely on this authority in all dealings, matters and transactions between me/us and the Bank in respect of the Account, subject to any changes to the authority notified to the Bank in writing by me/us, or until written revocation of the authority by me/us is given to the Bank.

6. All previous authorities relating to the matters mentioned above are hereby superseded except as regards to any liabilities not yet determined and instruments drawn or executed thereunder but not yet presented and/or paid.

7. In the case of a partnership or joint trustee Account, I/we declare that we shall be jointly and severally responsible to the Bank for any liability incurred or to be incurred in respect of or arising from the above mentioned Account or any of the documents, acts, matters herein mentioned and such liability shall be payable to the Bank on written demand. If any one of us dies, the Bank will treat the balance of the Account as owned by the surviving Account holder(s), unless the Bank is required or permitted to do otherwise by law. Further this authority shall bind our respective executors, administrators, legal personal representatives and all persons, claiming from or under all documents, acts, matters done or executed under this authority before the Bank receives notice revoking this authority.

8. In the case of a company or other business, I/we declare that:

(a) the Customer is currently actively trading, is solvent, and is not in the process of being liquidated or dissolved;

(b) until written notice to the contrary is given to the Bank by the Board of Directors or the equivalent governing body of the Customer, the Bank is authorised to take lawful instructions from the authorised signatories of the Customer to open further accounts in any permitted currency in the name of the Customer;

(c) that the Bank is authorised to honour and comply with any instructions signed by the authorised signatories in accordance with the signature mandate, and such instructions duly signed by the authorised signatories shall be a sufficient authority and legally bind the Customer in all dealings, matters and transactions with the Bank, and the Customer is legally liable for all such instructions given by the authorised signatories; and

(d) a copy of this authorisation signed by an authorised representative of the Customer with the official seal of the Customer affixed (if applicable), shall as between the Bank and the Customer be conclusive evidence of the instructions and the Customer's acceptance of the terms and conditions set out in this authority.

9. All information on this form and any identification document provided with this document is true and correct.

10. I/we have read, understood and agree to the matters specified in this declaration.

11. Where this declaration is signed by two or more people, it is given by each individually.

ACCOUNT OPENING FORM

Australia and New Zealand Banking Group Limited, Fiji Branch

Signatory 1

Date of birth

Full residential address (Do not provide a PO Box or in-care-of address)

Employment date

Signatory 2

Date of birth

Full residential address (Do not provide a PO Box or in-care-of address)

Employment date

ACCOUNT OPENING FORM

Australia and New Zealand Banking Group Limited, Fiji Branch

Signatory 3

Date of birth

Full residential address (Do not provide a PO Box or in-care-of address)

Employment date

Signatory 4

Date of birth

Full residential address (Do not provide a PO Box or in-care-of address)

Employment date

ACCOUNT OPENING FORM

Australia and New Zealand Banking Group Limited, Fiji Branch

Signatory 5

First name

Middle name(s) (if applicable)

Surname

Date of birth

Place of birth (town and country)

Nationality/Citizenship(s)

Tax Identification Number

Full residential address (Do not provide a PO Box or in-care-of address)

Street

Suburb

City

Country Postcode

Phone number

Mobile number

Email address

Employment date

Employer name

Employer address

Office/Title

Signature

Bank use only

Signatory Customer Number

Signatory 6

First name

Middle name(s) (if applicable)

Surname

Date of birth

Place of birth (town and country)

Nationality/Citizenship(s)

Tax Identification Number

Full residential address (Do not provide a PO Box or in-care-of address)

Street

Suburb

City

Country Postcode

Phone number

Mobile number

Email address

Employment date

Employer name

Employer address

Office/Title

Signature

Bank use only

Signatory Customer Number

BANK USE ONLY

Received by

Reviewed by

Date received

Date reviewed

ACCOUNT OPENING FORM

Australia and New Zealand Banking Group Limited, Fiji Branch

Special Instructions:

- In the case of a company, two directors or a director plus company secretary must sign.
- In the case of a partnership, all partners must sign.
- In the case of trust, all trustees must sign.

COMPANY WITHOUT SEAL

Dated this day of 20

SIGNED for and on behalf of **by**

Signature of Director

Signature of Director/Secretary

Name of Director

Name of Director/Secretary

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COMPANY WITH SEAL

Dated this day of 20

THE COMMON SEAL of

was affixed in accordance with its Articles of Association in the presence of:*

Signature of Director

Signature of Director/Secretary

Name of Director

Name of Director/Secretary

*Care should be taken to ensure the seal is affixed and attested in accordance with the company's Articles of Association.

ACCOUNT OPENING FORM

Australia and New Zealand Banking Group Limited, Fiji Branch

PARTNERSHIP

Dated this day of 20

EXECUTED by the PARTNERS OF

Signature

Name of Partner

Signature

Name of Partner

Signature

Name of Partner

Signature

Name of Partner

Signature

Name of Partner

Signature

Name of Partner

ACCOUNT OPENING FORM

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TRUST

Dated this day of 20

EXECUTED by the TRUSTEES OF

Signature

Name of Trustee

Signature

Name of Trustee

Signature

Name of Trustee

Signature

Name of Trustee