

# ANZ TERM DEPOSIT APPLICATION FORM



This application form is to be used when applying for an ANZ Term Deposit via an authorised ANZ Intermediary (your adviser) and serves as acceptance of funds from individuals, trusts & super funds (including self-managed).

Intermediary

Intermediary reference number

Internal Account Number (Star, Trading Account No. - Broker use only)

Adviser Full Name

Adviser Email Address

Adviser Phone Number

## 1. ACCOUNT DETAILS

Account Name

## 2. TYPE OF ACCOUNT

Individual  Joint  Trust  Super Fund (Including Self Managed)

**Note:** for Individual and Joint accounts go straight to Section 5

## 3. CUSTOMER DETAILS FOR TRUST/SUPERANNUATION FUND

Full Name of Trust/Superannuation Fund

Registration Number (e.g. ABN, ARSN)

Country in which the Trust /Superannuation Fund was established

Purpose for seeking banking service

Type of Trust / Superannuation Fund (e.g. Discretionary Trust, Regulated Trust, Self Managed Super Fund or other - please specify)

Principal Place of Business Address

TFN

Registered Office Address (if different from above)

Trustee

Industry/Nature of Business

For corporate Trustee enter full details in Section 4

For individual Trustee enter full details in Section 5

Full Name of Settlor of Trust (excluding Regulated Trusts)

### 3.a. DETAILS OF BENEFICIARIES

For Trusts, except Regulated Trusts (refer definition in Appendix C), all named beneficiaries and classes of beneficiaries must be listed. ANZ require the full name of each beneficiary in existence, or where beneficiary (classes) are defined, the description of the class(es).

An example of a class of Beneficiaries is 'all children of John Smith'

Title

Title

Full Name

Full Name

Residential Address (Street Name and Number, PO Box is not acceptable)

Residential Address (Street Name and Number, PO Box is not acceptable)

Suburb

State

Suburb

State

Postcode

Country

Postcode

Country

Date of Birth

Date of Birth

Class of Beneficiary

Class of Beneficiary

# ANZ TERM DEPOSIT APPLICATION FORM

Title

Full Name

Residential Address (Street Name and Number, PO Box is not acceptable)

Suburb  State

Postcode  Country

Date of Birth

Class of Beneficiary

Title

Full Name

Residential Address (Street Name and Number, PO Box is not acceptable)

Suburb  State

Postcode  Country

Date of Birth

Class of Beneficiary

### 3.b. BENEFICIAL OWNERS OF UNREGULATED TRUSTS (Refer definition in Appendix C)

Provide the details of the individual(s) who exercise direct or indirect control over the trust arrangement. This will include the following individuals:

- The appointer or protector
- Any other individual who can appoint/remove trustees or add/ remove beneficiaries
- Trustees who have discretion over how to distribute trust property (or where the trustee is a company, the individuals who own or control the trustee, including through a chain of ownership or control)
- Any individual who can direct or veto the decisions of the trustee(s).

Complete section 4.a. for a company trustee of a Self-Managed Super Fund (Regulated Trust).

Title

Full Name

Residential Address (Street Name and Number, PO Box is not acceptable)

Suburb  State

Postcode  Country

Date of Birth

Occupation

Country of Citizenship

Other Country of Citizenship (if applicable)

Title

Full Name

Residential Address (Street Name and Number, PO Box is not acceptable)

Suburb  State

Postcode  Country

Date of Birth

Occupation

Country of Citizenship

Other Country of Citizenship (if applicable)

### 4. CORPORATE TRUSTEE DETAILS

For Trusts, all Trustees must be listed. Please provide details for any entity that is a trustee. Where there is more than 1 company, please attach and complete another copy of this page.

Full Name of Company

Country in which the Company was established

Purpose for seeking banking service

Type of Company (Private/Public)

Full Business/Trading name (if applicable)

ACN of Company

ABN/ARBN/Company Registration Number

# ANZ TERM DEPOSIT APPLICATION FORM

Principal place of Business Address

Registered Office Address (if different from above)

TFN

Industry/Nature of Business

## 4.a. DETAILS OF BENEFICIAL OWNER(S) OR SENIOR MANAGING OFFICIAL

Appendix A lists accepted verification documents.

### Beneficial Owners (for companies, associations and co-operatives)

Provide the details of any individual who ultimately owns (directly or indirectly) 25% or more of the entity or organisation (for a company, this means 25% or more of the issued share capital).

Where there are no such individuals, or you have doubt as to whether the individuals exercise control through their ownership, provide the details of any individuals who exercise control (directly or indirectly) through:

- the ultimate authority to make financial and operating decisions on a day-to-day basis;
- voting rights of 25% or more;
- authority to control decisions and operations through a power of veto; **or**
- for co-operatives and associations, entitlement to on dissolution to 25% or more of the property of the co-operative and association

An individual will have control if they hold the relevant rights or powers directly, or indirectly through a chain of ownership or by means of trusts, agreements, arrangements, understanding and practices.

### Senior Managing Official

If a beneficial owner cannot be determined, then provide the details of an individual who makes or participates in key decisions or can significantly affect the entity or organisation's financial standing (e.g. CEO, CFO, COO, President, Treasurer, Secretary, Chairman, Managing Director).

Beneficial owner(s) or senior managing official are required to provide acceptable identification documents and linking documents (if applicable), where they have not previously been identified by ANZ.

**This section does not need to be completed by account holders who are Individuals, Sole Traders and Regulated Trusts (except for a company trustee of a Self-Managed Super Fund).**

Beneficial Owner

Senior Managing Official

Title

Full Name

Residential Address (Street Name and Number, PO Box is not acceptable)

Suburb

State

Postcode

Country

Date of birth

Occupation

Country of Citizenship

Other Country of Citizenship (if applicable)

Beneficial Owner

Title

Full Name

Residential Address (Street Name and Number, PO Box is not acceptable)

Suburb

State

Postcode

Country

Date of birth

Occupation

Country of Citizenship

Other Country of Citizenship (if applicable)

# ANZ TERM DEPOSIT APPLICATION FORM

Beneficial Owner

Title

Full Name

Residential Address (Street Name and Number, PO Box is not acceptable)

Suburb  State

Postcode  Country

Date of Birth

Occupation

Country of Citizenship

Other Country of Citizenship (if applicable)

Beneficial Owner

Title

Full Name

Residential Address (Street Name and Number, PO Box is not acceptable)

Suburb  State

Postcode  Country

Date of Birth

Occupation

Country of Citizenship

Other Country of Citizenship (if applicable)

## 5. PERSONAL DETAILS

For Trusts all Trustees must be listed. Please provide personal details for an individual, trustee, custodian or company director (both signing and non-signing director). Where there are more than 4 trustees, directors, applicants or signatories, please attach and complete another copy of this page.

You should include the Tax File Number (TFN) of each applicant signing Collection of TFN's is authorised by the Australian Taxation Office. It is not compulsory to quote a TFN however if you choose not to, you will be charged withholding tax at the highest rate.

**Note:** refer to Appendix B for instructions on who should complete US resident/citizen details.

Trustee     Director     Applicant     Signatory

Title  
 Mr     Mrs     Ms     Miss     Other

Last Name

Given Name/s

Residential Address

Suburb  State

Postcode  Country

Are you a US Resident for tax purposes or a US citizen?    Yes  No

Country of Citizenship

Gender  
 Male     Female

Date of Birth

Position Held

Occupation

TFN

Other Country of Citizenship (if applicable)

# ANZ TERM DEPOSIT APPLICATION FORM

Trustee     Director     Applicant     Signatory

Title  
 Mr    Mrs    Ms    Miss    Other

Last Name

Given Name/s

Residential Address

Suburb       State

Are you a US Resident for tax purposes or a US citizen?    Yes  No

Country of Citizenship

Gender  
 Male    Female

Date of Birth

Position Held

Occupation

Postcode       Country

TFN

Other Country of Citizenship (if applicable)

Trustee     Director     Applicant     Signatory

Title  
 Mr    Mrs    Ms    Miss    Other

Last Name

Given Name/s

Residential Address

Suburb       State

Are you a US Resident for tax purposes or a US citizen?    Yes  No

Country of Citizenship

Gender  
 Male    Female

Date of Birth

Position Held

Occupation

Postcode       Country

TFN

Other Country of Citizenship (if applicable)

Trustee     Director     Applicant     Signatory

Title  
 Mr    Mrs    Ms    Miss    Other

Last Name

Given Name/s

Residential Address

Suburb       State

Are you a US Resident for tax purposes or a US citizen?    Yes  No

Country of Citizenship

Gender  
 Male    Female

Date of Birth

Position Held

Occupation

Postcode       Country

TFN

Other Country of Citizenship (if applicable)

# ANZ TERM DEPOSIT APPLICATION FORM

## 6. ACCOUNT POSTAL ADDRESS

Address

Suburb  State  Postcode  Country

Please note all statements and notices will be sent to this address

## 7. INVESTMENT DETAILS

Amount  Investment Term

Customer Rate  % p.a. Commission  % p.a.

Please note, at the end of the investment term, if you have not told us what you want to do with your funds, we will reinvest them in the same type of ANZ Term Deposit. In this case, the interest rate applicable to your new ANZ Term Deposit may be lower or higher than the interest rate on your maturing ANZ Term Deposit. You can contact your Adviser at maturity of your ANZ Term Deposit to confirm interest rates that will apply upon reinvestment.

### Annual Interest Payments

For investment terms greater than 12 months interest will be paid annually to your nominated account

BSB  Account

## 8. DECLARATION & AUTHORITY

References to ANZ in this clause means Australia and New Zealand Banking Group Limited.

### Collection, use and disclosure of personal information

ANZ is collecting your personal information to enable it to process this application and for the purposes described in the product terms and conditions. Without this information ANZ may not be able to consider or process your application.

You agree that ANZ may disclose your personal information to:

- any agent, contractor or service provider ANZ engages to carry out or assist its functions and activities;
- an organisation that assists ANZ to identify, prevent or investigate any fraud, unlawful activity or misconduct (or suspected fraud, unlawful activity or misconduct);
- any related entity of ANZ; and
- your authorised representative.

ANZ may disclose information to recipients (including service providers and related entities) which are (1) located outside Australia and/or (2) not established in or do not carry on business in Australia. You can find details about the location of these recipients in ANZ's Privacy Policy and at [www.anz.com/privacy](http://www.anz.com/privacy).

ANZ's Privacy Policy ([www.anz.com/privacy](http://www.anz.com/privacy)) contains information about:

- any laws that require or authorise ANZ to collect certain information from you;
- the circumstances in which ANZ may collect your information from other sources (including from a third party);
- how to access your information and seek correction of your information; and
- how you can raise concerns that ANZ has breached the Privacy Act or an applicable Code and how ANZ will deal with these matters.

### Promotion of other products and services

ANZ may use your information to help ANZ promote its products or services or those of its related entities or organisations that are in a product or marketing alliance with ANZ (alliance partners). ANZ may also disclose your information to its related entities or alliance partners to enable them or ANZ to tell you about a product or service.

Where you do not want ANZ to tell you about its products and services or those of its related entities or alliance partners, you may call 13 13 14 at any time to withdraw your consent.

### Further information

Your product terms and conditions booklet and our ANZ Privacy Policy contain further information about our handling of the information we collect during the course of your relationship with ANZ.

If you have provided information about someone else, please show them a copy of this clause so that they may understand how ANZ may use and disclose their information.

### By signing the declaration and authority:

You acknowledge that you have read and understood the above privacy and confidentiality declaration; and You consent to ANZ collecting and disclosing your personal information in the manner described, and all matters set out, in the above privacy and confidentiality declaration.

You acknowledge that you have read and accept the ANZ Saving & Transaction Products - Terms and Conditions and ANZ Personal Banking Account Fees and Charges for this product and the Financial Services Guide.

# ANZ TERM DEPOSIT APPLICATION FORM

I/we understand and agree that all information provided in support of this application is true and correct including:

- Information regarding my US residency/citizenship status (where applicable); and
- Where a Super fund/Trust is specified the country in which it was established can be relied upon by ANZ and the Industry/Nature of Business specified generates at least 50% of the Super fund/Trust gross income.

## AUTHORISED REPRESENTATIVE/THIRD PARTY SIGNATORY (IF APPLICABLE)

Name of authorised representative:

Signature of authorised representative:

Date (DD/MM/YYYY)

Name of authorised third party signatory(if applicable):

Signature of authorised third party signatory (if applicable):

Date (DD/MM/YYYY)

By signing below you agree and confirm that you are appointing the Intermediary as an authorised representative on your account. You understand that the authorised representative/third party signatory (if applicable) will have the same level of access to your ANZ Term Deposit Account as you. This includes authority to make deposits into, and withdrawals from, your ANZ Term Deposit account, to provide instructions for reinvestment and to view your ANZ Term Deposit account. You also hereby release, discharge and indemnify ANZ from and against all actions, proceedings, accounts, claims and demands whatsoever arising from the appointment of the authorised representative/third party signatory (if applicable) named above.

Signature of Applicant

Print Name

Date (DD/MM/YYYY)

Signature of Applicant

Print Name

Date (DD/MM/YYYY)

Signature of Applicant

Print Name

Date (DD/MM/YYYY)

Signature of Applicant

Print Name

Date (DD/MM/YYYY)

# ANZ TERM DEPOSIT APPLICATION FORM

## APPENDIX A: ACCEPTABLE IDENTIFICATION DOCUMENTS

Certified copies of all identification documents must be included with the application.

Guidance note for certified copies:

- When using certified copies (where permissible), the certification document must not be > 3 months old
- Where certified copies are sighted, they must be original certified copies of the documents and not copies of the certified copy document.
- Acceptable documents used for identification are listed below

## IDENTIFICATION REQUIREMENTS FOR NON-INDIVIDUAL ACCOUNTS

If you are...	We will need ID from...	Forms of ID required...
A trust	• At least one Trustee(s)	• Where the trustee is an individual, trustee to be identified as per the verification requirements for an individual; where the trustee is a company, trustee to be identified as per the verification requirements for a company (below)
	• The trust	• An original or certified copy/extract of trust deed
A company	• Each signatory	• Each signatory to be identified as per the verification requirements for an individual
	• The company	• ASIC search; or • ASX search (for companies listed publicly in Australia)

## Authorised Persons

The following is a list of persons authorised to certify a copy. Unless it is specified that the Authorised Person may be overseas, an Authorised Person must be either an Australian Citizen or Permanent Resident of Australia.

1. 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);
2. A judge of a court in Australia;
3. A magistrate in Australia;
4. A chief executive officer of a Commonwealth court;
5. A registrar or deputy registrar of a court;
6. A Justice of the Peace;
7. A notary public (for the purposes of the Statutory Declaration Regulations 1993) in Australia or overseas;
8. A police officer;
9. An agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public;
10. A 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;
11. An Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955) - position can be held overseas;
12. An officer with 2 or more continuous years service with one or more Australian financial institutions (for the purposes of the... or overseas financial institution with which ANZ has an existing correspondent banking relationship - position can be held overseas);
13. A finance company officer with 2 or more continuous years of service with one or more finance companies (for the purposes of the Statutory Declaration Regulations 1993);
14. An officer with, or authorised representative of, a holder of an Australian financial services licence, having 2 or more continuous years of service with one or more licensees;
15. A member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants;
16. A pharmacist;
17. Employee of the Australian Trade Commission (AUSTRADE) who is overseas:
  - (a) in a country or place outside Australia; and
  - (b) authorised under paragraph 3(d) of the consular Fees Act 1955; and
  - (c) exercising his or her function in that place.

## IDENTIFICATION REQUIREMENTS FOR INDIVIDUALS AND SIGNATORIES

If you are ...	We will need ...
Current ANZ customer(s)	Just your ANZ account number so we can refer to the identification you have on file with us
A current ANZ customer, with joint account holder(s) new to ANZ	Provide your ANZ account number, and identity verification documents – as per acceptable identification documents list – for the new to ANZ joint account holder(s)
New to ANZ – individual over 18 years of age	Identity verification documents – as per acceptable identification documents list



# ANZ TERM DEPOSIT APPLICATION FORM

## ACCEPTABLE IDENTIFICATION DOCUMENTS FOR INDIVIDUALS

**MUST** provide identification as per the following options:

- At least ONE Primary identification document type, **OR**
- At least TWO different types of Secondary identification document
- Each identification document that is accepted **MUST** have **NAME AND DATE OF BIRTH OR RESIDENTIAL ADDRESS** (except Medicare Card)
- No document type can be used more than once
- Documents must be current unless otherwise specified
- Where you are giving us information that is different or has changed from that shown on identification documents, you must provide us with appropriate linking documents that explain the difference
- Utility Bill is not accepted as an identification document, but is accepted as a linking document to explain an address change

Category	Verification Document
Primary Identification Document Types	<ul style="list-style-type: none"> <li>• Australian photographic driver's licence or learner's permit</li> <li>• Australian Passport (current, or one that has expired within the past two years)</li> <li>• Foreign Passport*</li> <li>• Australian State/Territory Government issued Proof of Age card</li> <li>• Foreign Government issued National Identification card*</li> <li>• Australian Firearms/Shooting Licence</li> <li>• Australian Explosives Licence</li> <li>• Australian Waterways/Boat Licence</li> </ul>
Secondary Identification Document Types	<p>Maximum of ONE of each Document type:</p> <ul style="list-style-type: none"> <li>• Birth certificate, birth card, birth extract issued by an Australian State or Territory, or Foreign Government*</li> <li>• Australian Medicare card</li> <li>• Foreign driver's licence*</li> <li>• Australian or Foreign citizenship certificate*</li> <li>• Australian Government card or notice issued by Centrelink to concession holder Includes any ONE of: <ul style="list-style-type: none"> <li>• DHS Commonwealth Seniors Health Card or Health Care Card</li> <li>• DHS or DVA Pensioner Concession card</li> <li>• Benefits Notice (less than 12 months old)</li> </ul> </li> <li>• Australian ImmiCard. Includes any ONE of: <ul style="list-style-type: none"> <li>• Evidence of Immigration Status (EIS) ImmiCard</li> <li>• Permanent Resident Evidence (PRE) ImmiCard</li> <li>• Residence Determination ImmiCard (RDI)</li> </ul> </li> <li>• Australian School attendance letter issued by principal to person under 18, recording residential address and period of attendance (less than 3 months old)</li> <li>• Australian Tax Office (ATO) assessment notice (less than 12 months old) with name and residential address</li> <li>• Notice issued by approved Australian Aged Care facility (less than 12 months old) with name and residential address</li> <li>• Letter issued by the Australian Electoral Commission (less than 3 months old) with name and residential address</li> </ul>

\*If your identification document is written in a language other than English, you must provide a translation into English by a translator who is accredited by the National Accreditation Authority for Translators and Interpreters.

Alternative Primary Identification Document Types	<p>If an Indigenous Australian or Torres Strait Islander and not otherwise able to provide other forms of identification, ONE of the following may be used;</p> <ul style="list-style-type: none"> <li>• Indigenous Community Identification Card <b>OR</b></li> <li>• Community Leader Document: Verification in writing and signed by two Indigenous Australians or Torres Strait Islanders who are: <ul style="list-style-type: none"> <li>• elected members of an Aboriginal Council; or</li> <li>• members of a regional council; or</li> <li>• members of a land council; or</li> <li>• Community leaders</li> </ul> </li> </ul> <p>The Community Leader Document must contain full name and date of birth and may consist of one letter signed by 2 community leaders or 2 letters each signed by a different community leader.</p>
---	--

Acceptable Linking Documents			
Name	Adoption Papers	Birth Certificate with Endorsement	Change of Name Certificate (Deed Poll)
	Court Order	Marriage Certificate	Certificate of Divorce (Decree Nisi)
Address	Lease/Rental Agreement	Change of Address label on back of Driver's Licence	Utility Bill (no more than 3 months old)

# ANZ TERM DEPOSIT APPLICATION FORM

## APPENDIX B: AUSTRALIA AND UNITED STATES TAX AGREEMENT

Under an agreement between the Australian and United States governments, ANZ is required to ask individuals who are account holders to confirm whether they are a US resident for tax purposes or a US citizen.

The US tax resident/US citizen question will need to be completed by the following account holders:

- Individuals opening an account (including each joint account holder where applicable)
- Individual trustees

The US tax resident/US citizen question does not need to be completed for account holders of the following accounts:

- Deceased Estate accounts
- Trust accounts where the trust is the account holder
- Accounts held by Superannuation Funds

## APPENDIX C: REGULATED TRUST DEFINITION

A Regulated Trust is;

- a trust that is registered and subject to the regulatory oversight of a Commonwealth statutory regulator e.g. superannuation fund regulated by the Australian Taxation Office (ATO) or Australian Prudential Regulation Authority (APRA)
- a domestic Registered Managed Investment Scheme (RMIS); registered with Australian Securities and Investments Commission (ASIC) to which persons make contributions and has an Australian Registered Scheme Number (ARSN)
- an Australian Managed Investment Scheme not registered with ASIC that:
  - only has wholesale clients; and
  - does not make small scale offerings to which section 1012E of the Corporations Act 2011 applies
- a government superannuation fund; a trust that is a superannuation fund for government employees established by legislation

A trust is considered Unregulated if it does not meet the requirements of a Regulated Trust.