# **Identity Verification Form**

Individual/Joint Investor/Sole Trader

PLEASE USE BLOCK LETTERS AND BLACK INK TO COMPLETE THIS FORM

# **i i fidante**

1	Investment	details		
Please	e provide your existing F	idante investment details.		
Existir	ng account name			
	g account number (HIN)			
Fund N	Jame			
2	Investor typ	oe		
Please	e indicate ( <b>X</b> ) the investo	or type.		
☐ In	dividual Investor	Joint Investors Sole Trader		
3	Investor det	tails		
3A. I	nvestor 1			
Surna	me			
Full gi	ven name(s)			
Title (	Mr/Mrs/Miss/Ms)	Date of birth /		
	other names ou known by?			
Busin Sole T	ess name of rader	ABN		
TFN		Tax exemption		
If you choose not to provide your TFN, ABN or specific exemption, then tax will be deducted from your distributions at the highest marginal tax rate (plus the Medicare levy, and any other levies we are required to deduct from time to time).				
Non-r	esidents	If you are an overseas investor, please indicate your country of residence for tax purposes.		
Count	ry			
Resid	dential address for	Investor 1 (cannot be a PO Box)		
C/- (if	applicable)			
Street	name and number			
Subur	b	State Postcode		
Count	ry			
		If your country of residence is not Australia, please ensure that you also complete section 5.		

# Investor details (continued)

Postal address	_					
Is the postal address the same as the residential address?						
Street name and number						
Suburb			State		Postcode	
Country						
Contact details						
Telephone (home)		Tele	hone (work)			
Mobile						
Email address						
Principal place of busi	iness of Sole Trader (cannot	be a PO Box)				
Street name and number						
Suburb			State		Postcode	
Country						
3B. Investor 2 - Joint I	Investor					
Complete this section if ther	re is a joint owner.					
Surname						
Full given name(s)						
Title (Mr/Mrs/Miss/Ms)				Date of birtl		/
What other names are you known by?						
TFN			ax exemption			
ABN						
If you choose not to provide your TFN, ABN or specific exemption, then tax will be deducted from your distributions at the highest marginal tax rate (plus the Medicare levy, and any other levies we are required to deduct from time to time).						
Non-residents	If you are an overseas investor, ple	ase indicate your	country of residen	ce for tax purpo	oses.	
Country						
Residential address (cannot be a PO Box)						
C/- (if applicable)						
Street name and number						
Suburb			State		Postcode	
Country						
If your country of residence is not Australia, please ensure that you also complete section 5.						
Contact details						
Telephone (home)		Tele	hone (work)			
Mobile						
Email address						

### **Additional information**

Only complete this section if:  • any one of your addresses (residentia • you are investing \$1 million or more.	l, postal) or tax residency is outside Australia or New Zealand; and/or
Investor 1 -	
What is your country of citizenship?	What is your occupation? (If retired, please provide prior occupation).
If you are a sole trader, please provide details of your business activities.	
One-off payment (e.g. matured investment, court settlement, redundancy,	ome (e.g. rent, dividends, pension) Business income
If you are a sole trader, please provide details of your business activities.	
One-off payment (e.g. matured investment, court settlement, redundancy,	ome (e.g. rent, dividends, pension) Business income

### **Global Tax Reporting Requirements (CRS/FATCA)**

Information about investors that are foreign tax residents must be reported to the Australian Taxation Office (ATO) in accordance with international tax reporting standards and laws to which Australia is subject. These include the OECD Common Reporting Standard (CRS) and United States Foreign Account Tax Compliance Act (FATCA). If you require further information on Australia's obligations under CRS or FATCA, please visit the ATO website www.ato.gov.au.

Tax Residency rules differ by country. Whether an individual is a tax resident of a particular country is often (but not always) based on the amount of time a person spends in a country, the location of a person's residence or place of work. For the US, tax residency can be as a result of citizenship or residency.

A TIN is the number assigned by each country for the purposes of administering tax laws. This is the equivalent of a Tax File Number in Australia or Social Security Number in the US. If a TIN is not provided, please list one of the three reasons specified (A, B or C) for not providing a TIN.

a TIN.	mber in the OS. If a TIN IS no	t provided, please i	ist one of the three reasons spe	ecified (A, B or C) for not providing
Investor 1 Tax information – p	lease answer BOTH tax resid	dency questions		
Are you an Australian resident	for tax purposes?	Yes No		
Are you a tax resident of anoth	ner country?	Yes No		
If you are a tax resident of a co a tax resident of more than one			ax Identification Number (TIN)	or equivalent below. If you are
1. Country		TIN		If no TIN, list reason A, B or C
2. Country		TIN		If no TIN, list reason A, B or C
3. Country		TIN		If no TIN, list reason A, B or C
4. Country	L	TIN		If no TIN, list reason A, B or C
Reason A – The country of tax Reason B – I have not been iss Reason C – The country of tax Investor 2 Tax information – p Are you an Australian resident	ued with a TIN. residency does not require to the state of the state o	the TIN to be disclo	sed.	
Are you a tax resident of anoth		Yes No		
If you are a tax resident of a co tax resident of more than one	•		ax Identification Number (TIN)	or equivalent below. If you are a
If you are a tax resident of a co a tax resident of more than on			Tax Identification Number (TIN)	or equivalent below. If you are
1. Country		TIN		If no TIN, list reason A, B or C
2. Country		TIN		If no TIN, list reason A, B or C
3. Country		TIN		If no TIN, list reason A, B or C
4. Country	L	TIN		If no TIN, list reason A, B or C
Reason A – The country of tax Reason B – I have not been iss Reason C – The country of tax	ued with a TIN.		sed.	

# **Customer identity verification**

You must complete this section. If you are lodging this application through a financial adviser, they are required to provide us with copies of the identity verification documents. If you are not lodging this application through a financial adviser, you are required to provide us with certified copies of the identity verification documents. Please see below for a list of who can certify the documents.

Please provide either A or B.	
<b>A.</b> A valid copy of one of the following documents:	
Australian driver's licence containing your photogra	ph; or
Australian passport containing your photograph and	d signature; or
A card issued under an Australian State or Territory	law containing your photograph and proof of age.
·	ne document from Group 1 and one document from Group 2 below:
Group 1	Group 2
A copy of one of the following documents:	(The document must contain your full name and current residential address as shown in section 3 of this form)
Australian birth certificate or birth extract; or	A copy of one of the following documents issued to you:
Australian citizenship certificate; or	a notice or bill issued within the preceding three months from a local government body or utilities provider that records the provision of
Pension or Health care card issued by Centrelink or Department of Veterans' Affairs.	services to you, e.g.:  council rates notice electricity bill gas bill water rates notice telephone bill internet services bill  a letter or notice issued within the preceding 12 months from a Commonwealth or State/Territory government department that records the provision of financial benefits to you, e.g.: pension statement rent assistance statement mobility allowance statement utilities allowance statement a letter or notice issued to you within the preceding 12 months from the ATO that records a debt or refund payable by or to you, e.g.: notice of assessment payment reminder
If you are a non-Australian resident and cannot provide A or	B, please provide a valid copy of ONE of the following:
foreign passport, or similar travel document bearing national identity card issued by a foreign governmen identifier; or	your signature and photograph; t that contains your photograph, and either your signature or your unique
foreign driver's license that contains your photograp	h.
Diagrameter	
<ul><li>Please note:</li><li>documents are required to be certified copies of the</li></ul>	original:
·	ther cards that have an expiry date must not have expired
<ul> <li>(however, only Australian passports that have expire</li> <li>if any document is in a language other than English, t</li> </ul>	ed within the preceding two years may be accepted); hen it must be accompanied by an English translation
<ul> <li>prepared by an accredited translator; and</li> <li>if any document is in a previous name, then it must be (e.g. a marriage certificate).</li> </ul>	accompanied by evidence of the change of name

### **Customer identity verification** (continued)

#### 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

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

#### [Signature and date]

Documents in a language other than English must be accompanied by an English translation prepared by an accredited translator.

#### Who can certify documents?

Officer with two or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 1993 (Cth))		
Finance company officer with two or more continuous years of service with one or more finance companies (for the purposes of the Statutory Declaration Regulations 1993 (Cth))		
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		
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		
Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public		
Justice of the Peace		
<ul> <li>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)</li> </ul>		
Judge of a court		
Magistrate		
Chief executive officer of a Commonwealth court		
Registrar or deputy registrar of a court		
Notary public (for the purposes of the Statutory Declaration Regulations 1993 (Cth))		
A person authorised as a notary public in a foreign country		
Australian police officer		
Australian consular officer		
Australian diplomatic officer (within the meaning of the Consular Fees Act 1955 (Cth))		
Member of the Institute of Chartered Accountants in Australia, Certified Practising Accountants (CPA) Australia or the National Institute of Accountants with two or more years of continuous membership		

### Declaration and applicant(s) signature(s)

Please read the declarations below before submitting this form.

#### I/We declare that:

all details in this Customer identify verification form (including all related documents provided) are true and correct and I/we indemnify the responsible entity of the fund(s) I/we am/are invested in against any liabilities arising from acting on any of the details or any future details provided by me/us in connection with this form which are deliberately false or misleading;

If requests, I/we will provide additional information and assistance to all reasonable requests to ensure Fidante complies with AML/CTF Laws in Australia or an equivalent overseas jurisdiction

I/we agree that I/we have provided all information required and that the information is accurate and complete.

In relation to my/our personal information:

I am/We are aware that until I/we inform Fidante otherwise, I/we will be taken to have consented to all the uses of my/our personal information (including marketing) as described in the PDS and AIB and I/we have consented to my/our financial adviser providing such further personal information to Fidante as is required or reasonably deemed necessary by Fidante under applicable law. Any personal information provided about a third party (if any) in connection with this application has been provided with their knowledge and informed consent; and

I/We agree to personal information about me/us being collected, used and disclosed in accordance with Fidante's Privacy Policy and the privacy statement in the Information Booklet, including direct marketing.

# Declaration and applicant(s) signature(s) (continued)

Refer to list of signatories in section 9.				
Investor 1 - Sole Trader		Investor 2 - Joint Investor		
Signature		Signature		
Signature				
Date		Date		
Surname		Surname		
Given name(s)		Given name(s)		
Capacity	Director Company Secretary	Capacity	Director Company Secretary	
	Primary Trustee (Individual)		Secondary Trustee (Individual)	
			COMPANY SEAL	

## 9 Signatories

The table below provides guidance on completing the 'Declaration and applicant(s) signature's section of the application form. Before signing the application form please ensure you have read the declaration.

Type of investor	Names required	Signature required	TFN/ABN or exemption to be provided	
Individual and/or Joint Investors	Full name of each investor (please do not use initials)	Individual investor, or each joint investor	Individual investor, or each joint investor	
Sole Trader	Full name of Sole Trader, and Full business name	Sole Trader	Sole Trader	
If the investment is being made on behalf of other person	Name(s) of the responsible adult(s) as the investor	Adult(s) investing on behalf of the person/minor	Adult(s)	
If the investment is being made under Power of Attorney (POA)	Full name of each investor(s) as listed in Section 3; and Full name of person holding POA (underneath signature)	Person holding Power of Attorney in the case that the POA document does not contain a sample of the POA's (i.e. Attorneys signature. Please provide a certified copy of either the POA's drivers licence or passport providing a sample of their signature).	Individual investor or each join investor.	

# 10 Adviser use only

By signing this section, I declare that the attached document(s) are true copies of the document(s) used to satisfy the identity verification requirements and I have complied with my obligations under the Anti-Money and Counter-Terrorism Financing Act 2006. All details in this form are true and correct and I indemnify the responsible entity of the Fund(s) against any liabilities arising from acting on any of the information provided by me in connection with my clients application which are deliberately false or misleading. Adviser number Office name Surname Given name(s) Title (Mr/Mrs/Miss/Ms) Phone (business hours) Adviser group Adviser group AFSL Adviser signature Date **Investment Link information** IL GN (Group)