

OPTION 2 ONE photographic documentation (refer to option 1) plus TWO secondary non-photographic documentation from B:

B. TWO of the following

| | |
|---|--------|
| Birth Certificate | 70 pts |
| Citizenship Certificate | 70 pts |
| Pension/Health Care/Medicare Card issued by Centrelink | 25 pts |
| Financial Benefits Statement issued by the Commonwealth, a State or a Territory within the last 12 months | 25 pts |
| Rates Notice issued by a local government body within last 3 months | 35 pts |
| Records of public utility, phone, water, gas or electricity | 25 pts |

B - Transaction Information

Location of asset being purchased with the loan (if any)

Address of security property (if any)

| | | |
|--------|------------|-------------|
| Unit # | Street No. | Street Name |
| Suburb | State | Post Code |

Source of funds for repayment or investment

(provide details of account)

C - Sole Trader

Collect information and verify the identity of the individual as per Part A1 and A2 above

Collect the Transaction Information as per Part B above AND collect the following (no need to verify)

Full name of business

Principal place of business

| | | |
|--------|------------|-------------|
| Unit # | Street No. | Street Name |
| Suburb | State | Post Code |

ABN issued to the business

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| Suburb | State | Post Code |

ABN issued to the business



D - Company (Pty and Ltd, but not listed companies)

Collect the name of ALL directors

Collect information and verify the identity of ALL directors as per Part A1 and A2 above

Collect the Transaction Information as per Part B above

Collect the personal information in A1 for ALL shareholders owning more than 25% of the company (no need to verify under A2) AND collect the following (no need to verify)

Full name of company as registered by ASIC

ACN issued to the company

Full address of the company's registered office

Unit # Street No. Street Name

Suburb State Post Code

Full address of the company's principal place of business

Unit # Street No. Street Name

Suburb State Post Code

D - Trust

If the trustee(s) is an individual, collect information and verify the identity as per Part A1 and A2 above for EACH individual trustee

If the trustee(s) is a company, collect and verify information as per Part D

Collect the Transaction Information as per Part B above AND collect the following (no need to verify)

Full name of the Trust

Type of Trust (eg unit, discretionary, hybrid)

Country Trust was established

Unless the Trust is widely held (10 or more unit holders), the full name of each beneficiary or a description of the class of beneficiaries of the Trust

ABN of Trust (if applicable)

D - Company (Pty and Ltd, but not listed companies)

Collect the name of ALL directors

Collect information and verify the identity of ALL directors as per Part A1 and A2 above

Collect the Transaction Information as per Part B above

Collect the personal information in A1 for ALL shareholders owning more than 25% of the company (no need to verify under A2) AND collect the following (no need to verify)

Full name of company as registered by ASIC

ACN issued to the company

Full address of the company's registered office

Unit # Street No. Street Name

Suburb State Post Code

Full address of the company's principal place of business

Unit # Street No. Street Name

Suburb State Post Code

D - Trust

If the trustee(s) is an individual, collect information and verify the identity as per Part A1 and A2 above for EACH individual trustee

If the trustee(s) is a company, collect and verify information as per Part D

Collect the Transaction Information as per Part B above AND collect the following (no need to verify)

Full name of the Trust

Type of Trust (eg unit, discretionary, hybrid)

Country Trust was established

Unless the Trust is widely held (10 or more unit holders), the full name of each beneficiary or a description of the class of beneficiaries of the Trust

ABN of Trust (if applicable)



F - Partnership

Collect information as per Part A1 for all partners

Verify the identity as per Part A1 and A2 for ALL partners

Collect the Transaction Information as per Part B above AND collect the following (no need to verify)

Full name of partnership

Full address of partnership's principal place of business

| | | |
|--------|------------|-------------|
| Unit # | Street No. | Street Name |
| Suburb | State | Post Code |

Country partnership was registered

Registered business name of partnership (if any)

ABN of partnership (if applicable)

TOTAL POINTS (Applicant 1)

F - Partnership

Collect information as per Part A1 for all partners

Verify the identity as per Part A1 and A2 for ALL partners

Collect the Transaction Information as per Part B above AND collect the following (no need to verify)

Full name of partnership

Full address of partnership's principal place of business

| | | |
|--------|------------|-------------|
| Unit # | Street No. | Street Name |
| Suburb | State | Post Code |

Country partnership was registered

Registered business name of partnership (if any)

ABN of partnership (if applicable)

TOTAL POINTS (Applicant 2)

Broker Declaration

I declare

The documentation provided is current or within acceptable time frames

All photographic identification is a "reasonable likeness" to the individual

Nothing in my dealings with the customer have raised any suspicions concerning the proposed transaction

Face to face verification of the customer was carried out by me

Face to face verification of the customer was carried out at

Face to face verification was not possible because (state reason)

Customer Name 1

Customer Name 2

Customer 1 Signature

Customer 2 Signature

Originator / Introducer Name

Originator / Introducer Signature

Date

/ /

