

Savings Account Operation: Trust or Sole Trader/Partnership



How to lodge your application:



Use this form if you are opening a savings account and or arranging the account as a

- Trust account - an account held by a trustee/s on behalf of a beneficiary,
- Sole trader account - a business owned by one person
- Partnership - business owned by more than one person

Prior to opening an account or applying for an access service, we recommend you read our Financial Services Guide, and Terms and Conditions.

Before proceeding with this application, we recommend that you read BankVic's Privacy Policy available at bankvic.com.au/privacy which sets out key information about why we're collecting your personal information, and how we use, disclose and secure it.

Account Type

YOUR DETAILS

Primary account holder

Member no

Title Ms Miss Mrs Mr Dr

Surname

Given name/s

Residential address
Postcode

Business address
Postcode

Home tel.

Business tel.

Mobile

Email

Occupation

Joint account holder (if applicable)

Member no

Title Ms Miss Mrs Mr Dr

Surname

Given name/s

Residential address
Postcode

Business address
Postcode

Home tel.

Business tel.

Mobile

Email

Occupation

Account Suffix 'as trustee for' or 'trading as' or 'ABN'

You may need to provide information as an Addendum to this form. See below of what you need to supply with this document.

Trading as - please supply

- Certified copy of Record of Registration of your business name which will show the business name and details of registration
- Letter of Resolution advising that the account can be opened, how it is to be operated and including full address of principal place of business

Partnership - please supply

- Certified copy/extract of partnership agreement showing respective share of each partner

Trust - please supply

- Certified copy of Schedule to the Trust Deed which will show the business name, if any, of the trust, the type of trust eg Unit or Family trust, country, state / territory established in, full name/s of beneficiaries (and class) and full name of Trust Manager / Settlor (if any); and
- Letter of Resolution advising that the account can be opened and how it is to be operated.

Please advise any *Beneficial Owner/s and/or Appointer/s full names and addresses below.

* any individual who owns one or more share holdings more than 25% of the issued capital in the company or the Appointer as shown in the trust deed. Please note, if there are any beneficial owners who are not an existing BankVic member or client, please arrange for them to complete the Application for Membership and Services form.

Police Financial Services Limited ABN 33 087 651 661 AFSL 240293 - trading as BankVic. T 13 63 73 bankvic.com.au 20.06.18 6963bv

IMPORTANT: EACH ACCOUNT HOLDER: PLEASE READ AND SIGN THE DECLARATION ON THE REVERSE SIDE OF THIS AUTHORITY

Primary account holder

Business or Trust Tax Number

Joint account holder

Tax File Number or Exemption Details

Quoting Tax File Number is not compulsory but withholding tax may be deducted from your interest earned if you don't or you do not have an exemption. Contact the ATO for further information. After input this record will be detached from this application and destroyed.

DURATION OF AUTHORITY

With reference to the Operation your membership and accounts as detailed in the Police Financial Services Limited ABN 33 087 651 661 (BankVic) Terms and Conditions, this authority commences immediately and revokes any previous authorities on this account except as regards any cheques or other instruments dated prior to the date of this authority and presented for payment after receipt by BankVic of this notice and as regards any act done by BankVic or such persons in pursuant to the authority referred to in any such previous notice. This authority shall continue until BankVic receives written notice at the registered office of BankVic, from all surviving account holders revoking this authority. This authority shall be binding on the account holder's executors, administrators, legal personal representatives and all persons claiming from or under the account holders as to all documents, acts, matters and things done or executed in terms of this authority before receipt by BankVic of notice of its revocation.

METHOD OF OPERATION IF JOINT ACCOUNT

- 'Either to sign', either signatory may make withdrawals, use access cards or close the account.
- 'Both to sign', two signatures are required to make withdrawals and to close the account. Visa debit card is not available.
- Visa debit card - subject to approval. These means of access are only available for S1 accounts. Please apply for your access cards by completing the applicable Application forms
- Deposit Book required

Easyinvest note: As this account is only available through our online internet, mobile banking and telephone banking services, the terms and conditions and your authority under methods of operation apply to the operation of this account.

DECLARATION

Anti-Money Laundering and Counter Terrorism-Financing Act

To meet international standards and to help protect business from being misused for money laundering and terrorism financing Australia has implemented legislation in the Anti-Money Laundering and Counter Terrorism-Financing Act 2006 (Cth) (AML/CTF Act). As a customer or potential customer of BankVic, in seeking certain services you may be asked to verify your identity. As a member of BankVic you will also be asked at various times to verify the continuing accuracy of personal information you have previously supplied. By doing this you are helping to protect Australian businesses from being misused for the purposes of criminal activity.

I/We acknowledge that I/we believe the above details to be true and correct and that it is an offence under the AML/CTF Act to give false and misleading information. I/We make this solemn declaration conscientiously believing the same to be true.

I/We understand BankVic will collect personal information from me/us as required by the AML/CTF Act and that it may take steps to verify the personal information it has collected.

I/We consent to the collection, use, handling, disclosure and verification of personal information as required by the AML/CTF Act. I/We understand that if I/we provide BankVic with incomplete or inaccurate information that BankVic may not be able to provide me/us with the products or services that I/we am seeking.

Privacy Act

I/We acknowledge having received a copy of BankVic's Privacy Notice, contained within the Financial Services Guide. I/We authorise BankVic to use personal information contained in this application for the purpose of considering this application, and if accepted, supplying and administering the facility to me/us additional cardholder for which I/we have applied. I/We understand that in order for BankVic to supply the facility to me/us/additional cardholder for which I/We have applied, it may be necessary for BankVic to provide personal information contained in this application form to third parties used by BankVic and its service providers.

Before signing this authority, please ensure that all alterations have been initialled and blank spaces ruled through with a diagonal line.

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Signature of Primary Account Holder Date Joint account holder (if applicable) Date

Terms and conditions, interest rates, fees and charges are available on our website bankvic.com.au or on request.

Office Use Only	Initial	Date processed
At Call Savings Account/s opened		
FSG issued		
T&Cs issued		
AML Identity Verified		
TFN loaded/exemption noted		
TFN detached and destroyed		

	Initial	Date processed
RRS		
Telebanking		
online banking/p		
chq book		
eStatement loaded		
Link No.		

	Initial	Date processed
Debit card		
Deposit book		
F&C issued		
Interest rates		