

# Proof of Identity Compliance Form

Portfolio Service



FREEDOM  
OF CHOICE

Please complete this form in **BLOCK LETTERS** using **BLACK** or **BLUE** pen only.

If you are submitting an application for the Freedom of Choice Portfolio Service directly you must complete and submit this form along with your Application Form attaching certified copies of the acceptable proof of identity documents as outlined in Section 1.

## Section 1: TYPE OF INVESTOR(S)

Please select the type of investor(s) relevant for your application into the Freedom of Choice Portfolio Service.

Select One	Type of Investor(s)	Sections to Complete	Identification Requirement Groups to Complete
<input type="checkbox"/>	Individual(s)	1, 2, 7	Group A
<input type="checkbox"/>	Partnership(s)	1, 3, 7	Group A and B
<input type="checkbox"/>	Trust/Superannuation fund with an individual trustee	1, 2, 4, 7	Group C or D, and E
<input type="checkbox"/>	Trust/Superannuation fund with a corporate trustee	1, 4, 5, 7	Group C or D, and E
<input type="checkbox"/>	Company	1, 5, 7	Group F or G
And complete these if you would like to appoint a Power of Attorney or agent			
<input type="checkbox"/>	Power of Attorney or agent	6, 7	Group G

### Important Information

#### Additional information required under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006.

In accordance with the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (the 'AML/CTF Act') the Operator is required to collect additional information about you. The Operator may also ask you to provide certified copies of certain identification documents.

Under the AML/CTF Act, the Operator is prohibited from processing your application into the Freedom of Choice Portfolio Service until all of the information and supporting documentation requested in this form has been received. In most cases, the information that you provide in this form will satisfy the AML/CTF Act. However, in some instances the Operator may contact you to request further information. It may also be necessary for the Operator to collect information (including sensitive information) about you from third parties in order to meet its obligations under the AML/CTF Act.

#### Declarations

When you complete this Proof of Identity Form, you make the following declarations:

- I/we hereby confirm that the personal information that I/we have provided to Acclaim Management Group Limited is correct and current in every detail, and should these details change, I/we shall promptly advise Acclaim Management Group Limited in writing of the change(s).
- I/We agree to provide further information or personal details to the Operator if required to meet its obligations under anti-money laundering and counter-terrorism legislation and acknowledge that processing of my/our application may be delayed and will be processed at the unit price applicable for the Business Day as at which all required information has been received and verified.

**When you sign this Proof of Identity Form you declare that you have read and agree to declarations above.**

## AML/Identification Requirements

The AML/CTF Act requires the Operator to adopt and maintain an anti-money laundering and counter-terrorism financing (AML/CTF) compliance program. The AML/CTF compliance program includes ongoing customer due diligence, which may require the Operator to collect further information.

- Identification documentation provided must be in the name of the Applicant.
- Non-English language documents must be translated by an accredited translator.
- Applications made for the Freedom of Choice Portfolio Service without providing this information cannot be processed until all the necessary information has been provided.
- If you are unable to provide the identification documents described please contact 1800 806 013.

**These documents should be provided as a CERTIFIED COPY of the original.**

### Group A - Individuals

Each individual investor, individual trustee, partner or individual agent must provide one of the following:

- A current Australian driver's licence (or foreign equivalent) that includes a photo
- An Australian passport
- A current passport (or similar) issued by a foreign government or the United Nations (UN) (or an agency of the UN) that provides your signature
- An identity card issued by a State or Territory Government that includes a photo

### Group B - Partnerships

Provide one of the following:

- A certified copy or certified extract of the partnership agreement
- A certified copy or certified extract of minutes of a partnership meeting
- A notice issued by the Australian Taxation Office (ATO) within the last 12 months
- An original or certified copy of a certificate of registration of business name issued by a government agency in Australia
- Group A verification requirements for each beneficial owner of the trust

### GROUP C - Regulated Superannuation Fund (including self- managed)

Provide one of the following:

- A copy of the company search on the ATO database

### Group D - Other Trusts

Provide one of the following:

- A certified copy or certified extract of the Trust Deed
- Signed meeting minutes showing the full name of the trust
- Annual report or audited financial statements
- A certified copy of a notice issued by the ATO within the previous 12 months
- Group A verification requirements for each beneficial owner of the trust

### Group E - Trustees

- If you are an **Individual Trustee** - please provide the identification documents listed under Group A
- If you are a **Corporate Trustee** - please provide the identification documents listed under Group F or G
- If you are a combination of both - please complete for one trustee from each investor type listed under Group A and F or G

### GROUP F - Australian Companies

Provide one of the following:

- A certified copy of the Certificate of Registration or Licence
- A copy of a company search on the ASIC database
- A copy of information regarding the company / trustee's licence or other information held by the relevant Commonwealth, State or Territory regulatory body

All of above must clearly show the company's full name and type (i.e. public or private).

- Group A verification requirements for each beneficial owner (senior managing official and shareholder)

### Group G - Agents

- If you are an **Individual Agent** - please provide the identification documents listed under Group A
- If you are a **Corporate Agent** - please provide the identification documents listed under Group F

## Section 2: INDIVIDUAL(S) OR INDIVIDUAL TRUSTEE(S)

Complete this section if you are investing in your own name or as an individual trustee.

**For AML requirements please refer to page 2.**

### 2.1 Type of investor

Tick one box only and complete the specified parts of this section.

- Individual - complete 2.2.
- Sole trader - complete 2.2 and 2.4.
- Jointly with another individual(s) - complete 2.2, 2.3 and 2.5.
- Individual trustee for a individual - complete 2.2, 2.3 and 2.5 (if there is more than one individual trustee).
- Individual trustee for a trust - complete 2.2 and 2.3 (also complete Section 3).

### 2.2 Investor 1

Surname:  Salutation:

Given name(s):

Telephone number:  Country of birth:

Are you a foreign resident for tax purposes?  No  Yes, please advise country of residence:

Do you hold dual citizenship?  No  Yes, please advise which countries:

### 2.3 Investor 2

Surname:  Salutation:

Given name(s):

Telephone number:  Country of birth:

Are you a foreign resident for tax purposes?  No  Yes, please advise country of residence:

Do you hold dual citizenship?  No  Yes, please advise which countries:

### 2.4 Sole Trader Details

Business name (if applicable, in full):

Australian Business Number if obtained (ABN):

Street Address:

Suburb:  State:  Postcode:

## Section 3: PARTNERSHIPS

Complete this section if you are investing for a partnership or as a partner.

**For AML requirements please refer to page 2.**

### 3.1 General Information

Full name of partnership:

Registered business name of partnership (if any):

Country where partnership established:

### 3.2 Type of Partnership

Is the partnership regulated by a professional association?

Yes, please provide details

Name of Association:

Membership details:

No, provide number of partners

#### Partner 1

Surname:

Salutation:

Given name(s):

Date of Birth:

Telephone number:

Country of birth:

Street Address:

Suburb:

State:

Postcode:

#### Partner 2

Surname:

Salutation:

Given name(s):

Date of Birth:

Telephone number:

Country of birth:

Street Address:

Suburb:

State:

Postcode:

## Section 4: TRUST/SUPERANNUATION FUND

Complete this section if you are investing for a Trust or Superannuation Fund.

**For AML requirements please refer to page 2.**

### 4.1 General Information

Full name of Trust or Superannuation Fund:

Full name of business (if any):

Country where Trust/Superannuation Fund was established:

### 4.2 Trustee Details

How many trustees are there?

**Individual** - At least one trustee must complete Section 2 of this form.

**Company** - At least one trustee must complete Section 5 of this form.

**Combination** - At least one trustee from each investor type must complete the relevant section of this form.

### 4.3 Type of Trust

**Regulated trust** (including self managed superannuation funds). Name of regulator (e.g. ASIC, APRA, ATO):

Registration/Licence details:

Australian Business Number (ABN):

**Other trust** (also complete section 4.4).

Please describe:

### 4.4 Beneficiaries

Complete Section 4.4 and 4.5 only if you ticked 'Other Trust' in 4.3.

Does the Trust Deed name beneficiaries?

**Yes**, how many?

Provide the full name of each beneficiary: (If more than 8, please provide as an attachment).

1.	<input type="text"/>	2.	<input type="text"/>
3.	<input type="text"/>	4.	<input type="text"/>
5.	<input type="text"/>	6.	<input type="text"/>
7.	<input type="text"/>	8.	<input type="text"/>

**No**, describe the class beneficiary below (e.g. name of the family group, class of unit holders, the charitable purpose or charity name).

#### 4.5 Beneficiaries/Owners

Please provide the Full Name of any beneficial owner of the trust. A Beneficial owner of a trust is any individual who has a 25% or more interest in the trust or controls the trust. This includes the appointor of the trust (who holds the power to appoint or remove the trustees of the trust), the settlor of any trust over \$10,000 upon establishment, and beneficiaries with at least a 25% interest in the trust. All beneficial owners will need to provide AML verification documents as per page 2. Please provide beneficial owners as an attachment if there is insufficient space below:


### Section 5: COMPANY/CORPORATE TRUSTEE

Complete this section if you are investing for a company or where a company is acting as a trustee.

**For AML requirements please refer to page 2.**

#### 5.1 Company Type

- Australian public company - complete 5.2
- Australian proprietary company - complete 5.2 and 5.3

#### 5.2 Company Details

Company name:  ACN/ABN (if registered in Australia):

Name of contact person:

Registered street address (not a PO Box):

Suburb:  State:  Postcode:

**Principal place of business in Australia:**  Tick if the same as above, otherwise provide below:

Registered street address (not a PO Box):

Suburb:  State:  Postcode:

### 5.3 Beneficial owner

**a. Managing Officials:** All proprietary or non-listed public domestic companies must provide the full name of each senior managing official/s of the company (such as the managing director or directors who are authorised to sign on the company's behalf):

1.	<input type="text"/>	2.	<input type="text"/>
3.	<input type="text"/>	4.	<input type="text"/>

If there are more than 4 directors please provide as an attachment.

**b. Shareholders:** All proprietary or non-listed public domestic companies must provide details of each shareholder who owns directly, jointly or beneficially at least 25% of the company's issued capital.

#### Shareholder 1

Full name:

Registered street address (not a PO Box):

Suburb:  State:  Postcode:

#### Shareholder 2

Full name:

Registered street address (not a PO Box):

Suburb:  State:  Postcode:

If there are more than 2 shareholders that each have at least 25% of the company's issued capital, provide as an attachment.

## Section 6: AUTHORISED REPRESENTATIVE OR AGENT

Complete this section if you are completing this Application Form as an agent under a direct authority such as a Power of Attorney. You must also complete the section relevant to the investor/applicant that you are acting on behalf of.

**For AML requirements please refer to page 2.**

### 6.1 Appointment of Power of Attorney

- I would like to appoint an authorised representative to operate on this account OR
- I am an agent under Power of Attorney or the investor's legal or nominated representative - complete 6.2

Full name of authorised representative/agent:

Title of role held with the applicant:

Signature

### 6.1 Appointment of Power of Attorney

- The document is an original or certified copy
- The document is signed by the applicant/investor
- The document is current and complete
- The document permits the attorney/agent (you) to transact on behalf of the applicant/investor

## Section 7: DECLARATIONS (ALL INVESTORS MUST COMPLETE)

### Applicant 1

Full name:

Capacity (if applicable):

Individual Signatory  Director  Executive Officer  Partner

Sole Director/Secretary  Authorised Signatory

Signature:

Date:

Company seal (if applicable):

### Applicant 2

Full name:

Capacity (if applicable):

Individual Signatory  Director  Executive Officer  Partner

Sole Director/Secretary  Authorised Signatory

Signature:

Date:

Company seal (if applicable):

**Please return this completed form to Freedom of Choice PO Box 3528, Tingalpa DC Qld 4173 or email to [enquiries@freedomofchoice.com.au](mailto:enquiries@freedomofchoice.com.au)**

Phone: 1800 806 013 Fax: (07) 3899 7299 Website: [www.freedomofchoice.com.au](http://www.freedomofchoice.com.au)

**We are committed to respecting the privacy of the personal information you give us.**

Our formal Privacy Statement sets out how we do this. If you would like a copy of Freedom of Choice's Privacy Statement, please let us know. We have published our Privacy Statement on our website [www.freedomofchoice.com.au](http://www.freedomofchoice.com.au)