



ABN 77 087 650 217 AFSL/Australian Credit Licence 240807

Pty Ltd Company Membership Application Form

T 02 9859 0585 F 02 9859 0555 P PO Box 1967 Macquarie Centre 2113
W www.lcu.com.au E info@lcu.com.au

Date		Member Number (Office use only)	
------	--	------------------------------------	--

Membership confers rights and obligations under the Credit Union's Constitution, a copy of which you can obtain on request

Company Details		ACN	
Company's Name		ABN	
Company's registered office (mandatory)			
Unit / Floor / Street No.		Street Name	
Suburb / Town		State	Postcode
Principal place of business if different from above			
Business Address			Post Code:
Email Address		Phone	
Does the company hold an Australian Financial Services licence or an Australian Credit licence?	Australian Financial Services Licence	<input type="checkbox"/>	
	Australian Credit Licence	<input type="checkbox"/>	
	Neither	<input type="checkbox"/>	

List Directors, Signatories & Beneficial Owners

Instructions for completion

Please list each beneficial owner*, each director and each signatory to the account. Please tick the relevant box in each disclosure which indicates the person's status as a beneficial owner, director or a signatory. A person can be any or all of these, for example, for a single shareholder/director Pty limited company there will be only one person disclosed who will be ticked as the beneficial owner, a director and as a signatory.

* A beneficial owner is an individual owning 25% or more of, or otherwise controlling, the company. If there are no beneficial owners please list the chief executive officer or closest equivalent senior managing officer.

Person 1

Title		Home Phone	
Surname		Daytime Phone	
Given Names		Mobile Phone	
Membership No (if a member)		Date of Birth	
Email Address			
Residential Address			Post Code:
Is this person: <input type="checkbox"/> a beneficial owner <input type="checkbox"/> a director <input type="checkbox"/> a signatory			
Specimen Signature if a signatory:	Date:		

Person 2

Title		Home Phone	
Surname		Daytime Phone	
Given Names		Mobile Phone	
Membership No (if a member)		Date of Birth	
Email Address			
Residential Address	Post Code:		
Is this person: <input type="checkbox"/> a beneficial owner <input type="checkbox"/> a director <input type="checkbox"/> a signatory			
Specimen Signature if a signatory	Date:		

Person 3

Title		Home Phone	
Surname		Daytime Phone	
Given Names		Mobile Phone	
Membership No (if a member)		Date of Birth	
Email Address			
Residential Address	Post Code:		
Is this person: <input type="checkbox"/> a beneficial owner <input type="checkbox"/> a director <input type="checkbox"/> a signatory			
Specimen Signature if a signatory:	Date:		

Person 4

Title		Home Phone	
Surname		Daytime Phone	
Given Names		Mobile Phone	
Membership No (if a member)		Date of Birth	
Email Address			
Residential Address	Post Code:		
Is this person: <input type="checkbox"/> a beneficial owner <input type="checkbox"/> a director <input type="checkbox"/> a signatory			
Specimen Signature if a signatory	Date:		

Tax Residency of Beneficial Owners				
For each beneficial owner listed above specify the person's tax residency				
Name of beneficial owner	Tax resident of Australia only	OR	Tax resident of each the following countries and not a tax resident of any other foreign country	
			Country	Taxpayer Identification Number (TIN) *
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			

* The TIN is the taxpayer identification number used in the relevant country. If the beneficial owner does not have a TIN for a country he or she is a tax resident of please explain why, being either (A) the country does not issue TINs to residents or (B) other reason why the beneficial owner does not have a TIN (with explanation)

Beneficial owner	Country	Reason (A) or (B)	Explanation for (B)

Tax Residency of Company										
please select one answer only										
<input type="checkbox"/>	the Company is a tax resident of Australia only									
OR										
<input type="checkbox"/>	the Company is a tax resident of each of the following foreign countries and is not a tax resident of any other foreign country:									
	<table border="1"> <thead> <tr> <th>Country</th> <th>Taxpayer Identification Number (TIN) *</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> <tr> <td></td> <td></td> </tr> </tbody> </table>	Country	Taxpayer Identification Number (TIN) *							
Country	Taxpayer Identification Number (TIN) *									
The TIN is the taxpayer identification number used in the relevant country. If the Company does not have a TIN for a country it is a tax resident of please explain why, being either (A) the country does not issue TINs to residents or (B) other reason why the Company does not have a TIN (with explanation)										
	<table border="1"> <thead> <tr> <th>Country</th> <th>Reason (A) or (B)</th> <th>Explanation for (B)</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>	Country	Reason (A) or (B)	Explanation for (B)						
Country	Reason (A) or (B)	Explanation for (B)								

Company's Authorisation to Open Account	
The Board of Directors of the company resolved that:	
<ol style="list-style-type: none"> the company become a member of, and open an account with LCU. the person(s) specified as signatories be authorised to sign on the company member's behalf on any of the company's accounts with the Credit Union. where there are 2 or more signatories, the account signing authority will be as follows: <input type="checkbox"/> Any One to Sign <input type="checkbox"/> Any Two to Sign <input type="checkbox"/> All parties to Sign 	
By signing below I certify that:	
<ul style="list-style-type: none"> the above is a true copy of the resolution of the Board of Directors of the company the information provided and statements made in this form are to the best of my knowledge and belief correct and complete I am authorised by the company to sign this form on its behalf. 	
Yours faithfully	
.....
Chair of the Board of Directors	Please print name

Selecting Your Accounts and Access Facilities	
Choice of Account Types	
<input type="checkbox"/> Business Account (S10) <input type="checkbox"/> Business e*Savers Account (S51)	
Choice of Access Facilities	
<input type="checkbox"/> VISA Debit Card <input type="checkbox"/> Internet Banking <input type="checkbox"/> Cheque Books <input type="checkbox"/> Deposit Books <input type="checkbox"/> eStatements	
Office Use Only:	
Date of Admission to Membership	

Record of Identification Procedure for the Pty Ltd Company

Member Identification Procedure – Pty Limited Company carried out & information matched to ASIC search

Verification of licence - if member indicates holding a licence

Licence verified from ASIC Professional Register search

Record of Identification Procedures for signatories and (unless the member is licensed) beneficial owners who are not members

<input type="checkbox"/> For Signatory/Beneficial Owner 1 - Member Identification Procedure - Individual carried out and document(s) produced were:	<input type="checkbox"/> For Signatory/Beneficial Owner 2 - Member Identification Procedure - Individual carried out and document(s) produced were:
<input type="checkbox"/> For Signatory/Beneficial Owner 3 - Member Identification Procedure - Individual carried out and document(s) produced were:	<input type="checkbox"/> For Signatory/Beneficial Owner 4 - Member Identification Procedure - Individual carried out and document(s) produced were:

Access Facilities Action List

	Account Opened/Share Debited
	Welcome Letter Sent
	Internet Banking access to ATO's provided
	eStatement register
	Visa Debit Card Ordered
	Cheque Books Ordered
	Deposit Books Ordered

Confirmation

.....

Staff Member's Signature

Operator No

The law requires us to verify your identity when you open an account, change your name or when you become a signatory to an account. Photo ID like a passport and driver's license are preferable identity documents, however a full list of acceptable documents are available on our website www.lcu.com.au

If you are mailing a copy of your identification documents, photocopies will be accepted however they must be certified by a person on the certifier categories list. The certifier will need to sight the original documents by following the instructions in the certifier endorsement section below.

All signatories to the account must be identified, please supply identification documents for signatories who are not already members.

If you are presenting original documents at the LCU office then this certifier endorsement is not required

Certifier Categories	
1. 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 2. Judge of a court 3. Magistrate 4. Chief executive officer of a Commonwealth court 5. Registrar or deputy registrar of a court 6. Justice of the peace/Commissioner for Declarations 7. Notary public 8. Police officer 9. Agent of the Australia Postal Corporation who is in charge of an office supplying postal services to the public	10. 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. Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955) 12. Officer with 2 or more continuous years of service with one or more financial institutions 13. Finance company officer with 2 or more continuous years of service with one or more finance companies 14. 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. Member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants

To be completed by the certifier (if applicable)

Details of identification	
Full name of person being identified	
Type of documents certified	
Details of certifier	
Title	
Surname	
Given name(s)	
Occupation	
Category of certifier	
Certifier endorsement	
I have examined the original identification documents listed above	<input type="checkbox"/>
I have enclosed all certified copies of each document for LCU	<input type="checkbox"/>
I have endorsed each copy of the identification document with the following statement	<input type="checkbox"/>
This is to certify that this is a true copy of the original which I have sighted. Date, name, signed, title, registration number (if applicable). It is an offence under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 to give false and/or misleading information.	
Certifier Signature	Date: