

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 Nui (Office use on								
Membership confers rights and obligations under the Credit Union's Constitution, a copy of which you can obtain on request											
Company Details											
Company's Name						ARBN/ ACN					
Company's registered office (mandatory)											
Unit / Floor / Street No. Street Name											
Suburb / Town	Suburb / Town State Postcode										
Principal place of business if different from above											
Business Address	Post Code:										
Email address						Phone					
Financial Service	Does the company hold an Australian Financial Services Licence Financial Services licence or an Australian Credit Licence Neither										
List Directors,	Signatories 8	Benefic	ial Owners								
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, of 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				Dayt	Daytime Phone						
Given Names				Mob	Mobile Phone						
Membership No	(if a member)				Date	Date of Birth					
Residential Address Post Code:											
Is this person: □ a beneficial owner □ a director □ a signatory											
Specimen Signature if a signatory: Date:											
Person 2											
Title					Hom	e Phone					
Surname				Dayt	Daytime Phone						
Given Names				Mob	Mobile Phone						
Membership No	(if a member)				Date	of Birth					

Residential Address					Post Code:			
Is this person:	a beneficial owner	☐ a direc	tor 🗌 a sig	gnatory	1 ost oode.			
Specimen Signature	e if a signatory				Date:			
Person 3								
Title Home Phone								
Surname				Daytime Phone	1			
Given Names				Mobile Phone	1			
Membership No (if a	ı member)			Date of Birth	1			
Residential Address Post Code:								
Is this person:	a beneficial owner	☐ a direc	tor ☐ a siç	gnatory				
Specimen Signature	Specimen Signature if a signatory: Date:							
Person 4	-							
Title				Home Phone	Home Phone			
Surname	ame Daytime Phone							
Given Names								
Membership No (if a	ı member)			Date of Birth				
Residential Address Post Code:								
Is this person: \Box a beneficial owner \Box a director \Box a signatory								
Specimen Signature if a signatory								
Date:								
	Beneficial Owners							
For each beneficial owner listed above specify the person's tax residency Tax resident of each the following countries and not a tax resident of a								
Name of beneficial Tax resident of a superior Tax resident of Australia onl		OR		other fore	eign country			
				Country	Taxpayer Identification Number (TIN) *			
				<u> </u>				
* The TIN is the taxpayer resident of please explait TIN (with explanation)	r identification number us n why, being either (A) th	ed in the releva	ant country. If the s not issue TINs to	beneficial owner does not l residents or (B) other reason	have a TIN for a country he or she is a tax on why the beneficial owner does not have a			

Beneficial owner			Country		Reason (A) or (B)		Explanation for (B)		
				ı					
Tax Res	sidency of Company								
please se	elect one answer only								
OR	, ,		,						
	the Company is a tax re	esident of eac	ch of the following fore	ign c	ountries and is not a ta	ax reside	ent of any other foreign country:		
		Country			Taxpayer Identification Number (TIN) *				
İ									
İ	The TIN is the taypayer	identification	number used in the r	دروام	nt country If the Com	nnany do	es not have a TIN for a country it		
	is a tax resident of plea the Company does not	se explain wh	ny, being either (A) the	cour	ntry does not issue TIN	Vs to res	idents or (B) other reason why		
	Country	nave a riiv (v				Explanation for (B)			
İ									
							_		
Common	anda Andhariaatian ta	. Onen Ace							
Compar	ny's Authorisation to	O Open Acc	count						
The Boa	ard of Directors of the	company re	esolved that:						
			mber of, and open a						
	the person(s) sp company's according			orised	d to sign on the con	npany n	nember's behalf on any of the		
				ount	signing authority wil	ll be as	follows:		
	☐ Any One to Sign	1	☐ Any Two	to S	Sign [☐ All pa	arties to Sign		
Dy signi	, ,		•			•			
By signii	ng below I certify thatthe above is a tr		the resolution of the	Boa	rd of Directors of th	e comp	any		
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									
☐ Business Account (S10) ☐ Business e*Savers Account (S51)									
Choice of Access Facilities									
□VISA	card	Ranking	☐ Cheque Books	Г	Deposit Books		atements		
⊔ VISA	caru ⊔ internet t	anking	□ Cheque Books	L	ם אסטם אפטם הehosit ה	⊔ esta	atements		

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 & info	ormation 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					
For Signatory/Beneficial Owner 1 - Member Identification Procedure - Individual carried out and document(s) produced were:	For Signatory/Beneficial Owner 2 - Member Identification Procedure - Individual carried out and document(s) produced were:					
For Signatory/Beneficial Owner 3 - Member Identification Procedure - Individual carried out and document(s) produced were:	For Signatory/Beneficial Owner 4 - Member Identification Procedure - Individual carried out and document(s) produced were:					
Access Facilities Action List	Confirmation					
Account Opened/Share Debited						
Welcome Letter Sent						
Internet Banking access to ATO's provided	Staff Member's Signature					
eStatement register						
Visa Card Ordered	Operator No					
Cheque Books Ordered						
Deposit Books Ordered	1					

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

- 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
- 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
- Agent of the Australia Postal Corporation who is in charge of an office supplying postal services to the public
- 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
- 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
- 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)

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Details of identification	1				
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 origi	nal identification documents listed above				
I have enclosed all certifie	d copies of each document for LCU				
I have endorsed each copy of the identification document with the following statement					
	a true copy of the original which I have sighted. Date, name, signed, ti Anti-Money Laundering and Counter-Terrorism Financing Act 2006 to g				
Certifier Signature		Date:			

Version: July 2017