



# Pty Ltd Company Membership Application Form

ABN 77 087 650 217 AFSL/Australian Credit Licence 240807

T 02 9859 0585 F 02 9859 0555 P PO Box 1967 Macquarie Centre 2113

Date		Member Number (Office use only)	
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**Membership confers rights and obligations under the Credit Union's Constitution, a copy of which you can obtain on request**

<b>Company Details</b>							
Company's Name		ARBN/ ACN					
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"/>	

<b>List Directors, Signatories &amp; Beneficial Owners</b>	
<i>Instructions for completion: Please list each beneficial owner (a person owning 25% or more of the company), 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.</i>	

**Person 1**

Title		Home Phone	
Surname		Daytime Phone	
Given Names		Mobile Phone	
Membership No (if a member)		Date of Birth	
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	
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	
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	
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:		

**Company's Authorisation to Open Account**

The Board of Directors of the company resolved that:

1. the company become a member of, and open an account with LCU.
2. 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.
3. where there are 2 or more signatories, the account signing authority will be as follows:

Any One to Sign  Any Two to Sign  All parties to Sign

I confirm that this is a true copy of the resolution.

I have disclosed details about the company's directors and beneficial owners as above.

Yours faithfully

.....

Chair of the Board of Directors

Please print name

<b>Selecting Your Accounts and Access Facilities</b>				
<b>Choice of Account Types</b>				
<input type="checkbox"/> Business Account (S10)		<input type="checkbox"/> Business e*Savers Account (S51)		
<b>Choice of Access Facilities</b>				
<input type="checkbox"/> VISA card	<input type="checkbox"/> Internet Banking	<input type="checkbox"/> Cheque Books	<input type="checkbox"/> Deposit Books	<input type="checkbox"/> eStatements

<b>Office Use Only:</b>	
<b>Date of Admission to Membership</b>	

<b>Record of Identification Procedure for the Pty Ltd Company</b>
<input type="checkbox"/> Member Identification Procedure – Pty Limited Company carried out & information matched to ASIC search

<b>Verification of licence - if member indicates holding a licence</b>
<input type="checkbox"/> Licence verified from ASIC Professional Register search

<b>Record of Identification Procedures for signatories and (unless the member is licensed) beneficial owners who are not members</b>			
<input type="checkbox"/> <b>For Signatory/Beneficial Owner 1</b> - Member Identification Procedure - Individual carried out and document(s) produced were: ..... .....	<input type="checkbox"/> <b>For Signatory/Beneficial Owner 2</b> - Member Identification Procedure - Individual carried out and document(s) produced were: ..... .....	<input type="checkbox"/> <b>For Signatory/Beneficial Owner 3</b> - Member Identification Procedure - Individual carried out and document(s) produced were: ..... .....	<input type="checkbox"/> <b>For Signatory/Beneficial Owner 4</b> - Member Identification Procedure - Individual carried out and document(s) produced were: ..... .....

<b>Access Facilities Action List</b>	
	Account Opened/Share Debited
	Welcome Letter Sent
	Internet Banking access to ATO's provided
	eStatement register
	Visa Card Ordered
	Cheque Books Ordered
	Deposit Books Ordered

<b>Confirmation</b>	
.....	
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](http://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**

<b>Certifier Categories</b>	
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)**

<b>Details of identification</b>	
<b>Full name of person being identified</b>	
<b>Type of documents certified</b>	
<b>Details of certifier</b>	
<b>Title</b>	
<b>Surname</b>	
<b>Given name(s)</b>	
<b>Occupation</b>	
<b>Category of certifier</b>	
<b>Certifier endorsement</b>	
<b>I have examined the original identification documents listed above</b>	<input type="checkbox"/>
<b>I have enclosed all certified copies of each document for LCU</b>	<input type="checkbox"/>
<b>I have endorsed each copy of the identification document with the following statement</b>	<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.	
<b>Certifier Signature</b>	<b>Date:</b>