

Know your customer – company

Information sheet

When to use this form

Use this form to provide the information we need to verify the company's identity and to meet our legal obligations (including those under the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006*).

Verifying a customer's identity

We need to verify or confirm your identity by checking that certain details you provide in this form **match** the details that are in certain documents you need to attach to this form.

- !** Please send us **original certified copies** of your original documents—don't send us the original documents.
- If the document is not written in English, then you must also attach an English translation prepared by an accredited translator.

Getting your copies certified

A copy of a document must be certified to be a true and correct copy of the original document. Only certain people can certify copies including:

- police officer or sheriff
- justice of the peace or notary public
- legal practitioner, magistrate, judge or registrar/ deputy registrar of a court
- pharmacist, physiotherapist or veterinary surgeon
- optometrist, dentist, medical practitioner or nurse
- member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising Accountants or the National Institute of Accountants.

You can see the full list of people who can certify documents or extracts at resolutionlife.com.au/identification.

Example:

I certify that this is a true and correct copy of the original document.

John Citizen

John Citizen, Justice of the Peace 10
Other Street
Suburb NSW 2000

02 9999 9999 30 May 2015

Documents for a company

The document you need to send us depends on the type of company:

Australian company

- certificate of registration issued by ASIC.

Foreign company registered by ASIC

Both of these:

- certificate of registration issued by ASIC; and
- company extract issued from relevant foreign registration body.

Foreign company not registered by ASIC

- certificate of registration issued by the relevant foreign registration body.

Documents for any beneficial owner or controlling person

So we can verify the identity of any beneficial owner or controlling person you listed in the form, you need to send us the documents shown under option A or B:

Option A

One of these:


- current Australian state or territory driver licence that has your photo
- Australian passport that is current or expired within the last two years
- card issued under a state or territory law to prove your age that has your photo
- current foreign government passport (or similar international travel document) that has your photo and signature
- current foreign driver licence that has your photo
- current national identity card that has your photo.

Option B

One of these:

- Australian or foreign birth certificate
- Australian or foreign citizenship certificate
- birth certificate extract
- pension card issued by Department of Human Services
- health card issued by Department of Human Services.

Plus

 The documents listed below are only **valid** if they include your full name and residential address.

One of these:

- a document issued by the Commonwealth or a state or territory within the last 12 months that shows financial benefits paid to you
- a document issued by the Australian Taxation Office within the last 12 months that shows money to be paid to you or that you need to pay to them (make sure you cross out your TFN)
- a document issued by a local government body or utility provider within the last three months that shows the services provided to you at your address
- if you're under 18 years old, a notice issued by a school principal within the last three months that shows how long you attended that school.

Privacy – use and disclosure of personal information

The privacy of your personal information is important to us.

We collect and hold personal information about you so we can provide you with financial products and services and assist you with your ongoing financial needs. If we do not collect this information, we may not be able to provide you with these products and services. We may also use your personal information for other purposes, such as enhancing our customer service and product options, and to inform you of opportunities which may be beneficial to you via direct marketing. Please contact us if you do not want to receive this information.

Personal information may be shared with business areas or companies within the Resolution Life Group. We may also provide information to local and overseas entities which provide Resolution Life with administrative, financial, research or other services, other insurers and credit providers, financial advisers, brokers and other organisations authorised by Resolution Life to assist in reviewing customer needs. A list of countries where these providers are likely to be located can be accessed via our privacy policy.

We may also disclose personal information to courts, tribunals and disputes resolution bodies, government agencies, and other bodies we are required to provide information to under the law.

The Resolution Life privacy policy (available at resolutionlife.com.au) provides more information about how we manage and protect your personal information. It sets out how you can access and correct your information, how you may complain about a breach of privacy and our process for resolving privacy related enquiries and complaints.

Definitions

Resolution Life approved financial market

A full list of Resolution Life approved financial markets is available at resolutionlife.com.au/identification.

Australian public listed company

Australian companies that are listed on an Resolution Life approved financial market such as the ASX.

Beneficial owner

A beneficial owner is an individual who ultimately own 25% or more of the company's capital issued to shareholders (through direct or indirect shareholdings).

Controlling Person

A controlling person is an individual who controls the company through:

- the authority to make decisions about financial or operating policies, or
- voting rights of 25% or more, or
- power of veto, or
- by way of trusts, agreements and practices.

If the controlling person can't be identified, you need to provide us with the details of the most senior official(s) (eg managing director).

Foreign public listed company

Companies that are subject to disclosure requirements that ensure transparency of beneficial ownership comparable to similar public listing requirements in Australia. Refers to listing on an AMP Life approved financial market that by stock exchange rules, law or enforceable means promotes transparency of beneficial owner information.

Majority owned subsidiary of an Australian public listed company

Companies that are majority owned by an Australian company that is listed on an AMP Life approved financial market such as the ASX.

Regulated company

Companies subject to the supervision of an Australian Commonwealth, state or territory statutory regulator beyond that provided by ASIC as a company registration body. For example, Australian Financial Services Licensees (AFSL); Australian Credit Licensees (ACL) or Registrable Superannuation Entity (RSE) Licensees.

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Please keep this information sheet for your records—
don't return it with your completed form(s).

Know your customer – company

Use this form to provide the information we need to verify the company's identity and to meet our legal obligations (including those under the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006*).

Note: You should only use this form for a company. A different form applies for an individual, sole trader, trust or other organisation.

Please print in CAPITAL LETTERS and place a cross ☒ in any applicable boxes

1. What you need to do

Are you completing this form for an Australian or foreign company?

- ☐ Australian company > Complete sections 1–3 and 6–11
- ☐ Foreign company registered by ASIC > Complete sections 1, 2, 4 and 6–11
- ☐ Foreign company not registered by ASIC > Complete sections 1, 2 and 5–11

2. Products held and company name – all companies

Please provide the plan/policy/member/account number for products you hold with Resolution Life or any other reference number:

Full company name (as registered by ASIC or an equivalent foreign registration body)

Where was the company formed/incorporated/registered?

- ☐ Australia
- ☐ Other – provide details below:

Name of country

3. Australian company

Australian company number (ACN)

Registered office address

Address (a PO Box is not acceptable)

Suburb State Postcode

Country

3. Australian company (continued)

Principal place of business address

Does your company have a principal place of business address?

- ☐ No
- ☐ Yes, it's the same as the registered office address
- ☐ Yes, it's different to the registered office address—provide details below:

Address (a PO Box is not acceptable)

Suburb State Postcode

Country

4. Foreign company registered by ASIC

Australian registered body number (ARBN)

Is the company registered with a foreign registration body?

- ☐ No
- ☐ Yes—provide details below:

Name of foreign registration body

Identification number issued by foreign registration body

4. Foreign company registered by ASIC (continued)

Registered office address in Australia

Address (a PO Box is not acceptable)

Suburb

State

Postcode

Country

Principal place of business address in Australia or local agent

Does the company have a principal place of business address in Australia?

- ☐ Yes, it's the same as the registered office address in Australia
- ☐ Yes, it's different to the registered office address in Australia—provide details below:
- ☐ No, I have a local agent—provide details below:

Full name of local agent (if relevant)

Address (a PO Box is not acceptable)

Suburb

State

Postcode

Country

5. Foreign company not registered by ASIC

Is the company registered with a foreign registration body?

- ☐ No—provide details below:

The **principal place of business address** in the country where the company was formed/incorporated:

Address (a PO Box is not acceptable)

Suburb

State

Postcode

Country

- ☐ Yes—provide details below:

Name of foreign registration body

Identification number issued by foreign registration body

5. Foreign company not registered by ASIC (continued)

The **registered office address** held by the foreign registration body in the country where the company was formed/incorporated/registered:

Address (a PO Box is not acceptable)

Suburb

State

Postcode

Country

6. Directors

- ! Complete this section if your company is:
- Australian proprietary
 - foreign private, or
 - foreign other (not a public or private company).

How many directors does your company have?

Please provide the name of each director (if your company has more than four directors, attach details of additional directors on a separate sheet):

Director 1

Title

Surname

Given name(s)

Director 2

Title

Surname

Given name(s)

Director 3

Title

Surname

Given name(s)

6. Directors (continued)

Director 4

Title

Surname

Given name(s)

7. Other details – all companies



To find out more about the types of company categories and an Resolution Life approved exchange, refer to the **definitions** in the **information sheet**.

Which of these categories describes your company?

☐ Australian public listed—provide details below:

Name of financial market company is listed on

☐ Foreign public listed—provide details below:

Name of financial market company is listed on

Country of financial market

☐ Majority owned subsidiary of an Australian public listed company—provide details below:

Name of the Australian public listed company

Name of financial market Australian company is listed on

☐ Regulated company—provide details below:

Name of regulator

Licence details

Licence number

☐ Other—go to section 8.

Is your company either listed on an Resolution Life approved exchange or is it regulated?

☐ No—go to section 8.

☐ Yes—go to section 10.

8. Beneficial owners

List the people who ultimately own 25% or more of the company's capital issued to shareholders (through direct or indirect shareholdings).

You'll also need to attach a certified copy of identification documents for each person listed. Refer to the **information sheet** for details.

Does your company have any beneficial owners?

☐ No—go to section 9

☐ Yes—provide details below for each beneficial owner:

Beneficial owner 1

Title

Date of birth

Surname

Given name(s)

Gender

☐ Male ☐ Female ☐ Other

Residential address (PO Box is not acceptable)

Suburb

State

Postcode

Country

Beneficial owner 2

Title

Date of birth

Surname

Given name(s)

Gender

☐ Male ☐ Female ☐ Other

Residential address (PO Box is not acceptable)

Suburb

State

Postcode

Country

8. Beneficial owners (continued)

Beneficial owner 3

Title	Date of birth	
<input type="text"/>	<input type="text"/>	
Surname		
<input type="text"/>		
Given name(s)		
<input type="text"/>		
Gender		
<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other		
Residential address (PO Box is not acceptable)		
<input type="text"/>		
<input type="text"/>		
Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>
Country		
<input type="text"/>		

Beneficial owner 4

Title	Date of birth	
<input type="text"/>	<input type="text"/>	
Surname		
<input type="text"/>		
Given name(s)		
<input type="text"/>		
Gender		
<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other		
Residential address (PO Box is not acceptable)		
<input type="text"/>		
<input type="text"/>		
Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>
Country		
<input type="text"/>		

9. Controlling persons

! Complete this section if you didn't list any beneficial owners in section 8.

List the people who directly or indirectly control your company.

You'll also need to attach a certified copy of identification documents for each person listed. Refer to the **information sheet** for details.

9. Controlling persons (continued)

Note: A person may control the company through: the authority to make decisions about financial or operating policies; voting rights of 25% or more; power of veto; or, by way of trusts, agreements and practices. If this person can't be identified, provide details of the most senior official(s), such as a managing director.

Controlling person 1

Role		
<input type="text"/>		
Title	Date of birth	
<input type="text"/>	<input type="text"/>	
Surname		
<input type="text"/>		
Given name(s)		
<input type="text"/>		
Gender		
<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other		
Residential address (PO Box is not acceptable)		
<input type="text"/>		
<input type="text"/>		
Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>

Country
<input type="text"/>

Controlling person 2

Role		
<input type="text"/>		
Title	Date of birth	
<input type="text"/>	<input type="text"/>	
Surname		
<input type="text"/>		
Given name(s)		
<input type="text"/>		
Gender		
<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other		
Residential address (PO Box is not acceptable)		
<input type="text"/>		
<input type="text"/>		
Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>
Country		
<input type="text"/>		

9. Controlling persons (continued)

Controlling person 3

Role

Title

Date of birth

Surname

Given name(s)

Gender

☐ Male ☐ Female ☐ Other

Residential address (PO Box is not acceptable)

Suburb

State

Postcode

Country

Controlling person 4

Role

Title

Date of birth

Surname

Given name(s)

Gender

☐ Male ☐ Female ☐ Other

Residential address (PO Box is not acceptable)

Suburb

State

Postcode

Country

10. Customer declaration – all companies

These declarations are given by the company named in section 2 and by any signatories signing this form.

I understand that it's a criminal offence to knowingly provide:

- information in this form that is false or misleading
- false documents to support this form.

I declare that the information in this form and in any supporting document:

- is complete and correct
- that is about another person has been provided with their consent (if required)
- may be used for any product, service or benefit that I hold, apply for, request or obtain
- may be disclosed to and used by the provider of the product, service or benefit in line with their privacy obligations to comply with anti-money laundering and counter-terrorism financing legislation.

Note: Anyone authorised to sign or transact on behalf of the company must be appointed in line with the relevant application form, product disclosure statement or other disclosure document.

Signatory 1

Name of

Signature

Date

Signatory 2

Name

Signature

Date

11. Checklist – all companies

- ☐ Have you completed all relevant sections of this form?
- ☐ Have you read and understood the declaration in section **10** and signed and dated that section?
- ☐ If your company has more than four directors, have you attached a separate sheet with the name details for the other directors?
- ☐ Have you attached original certified copies of documents to verify the identity of your company as set out in the **information sheet**?
- ☐ Have you attached original certified copies of documents to verify the identity of any beneficial owner or controlling person that you listed in this form as set out in the **information sheet**?

Financial adviser and office use

Request ID

Financial adviser ID

Financial adviser name

Customer identification verified by:

- ☐ Originals
- ☐ Original certified copies
- ☐ Register search
- ☐ Attached documents