

VERIFICATION OF IDENTITY TRUSTS



Phone: 1300 334 336
Fax: 1300 434 336
Email: applications@betterchoice.com.au
Website: www.betterchoice.com.au
Office: Level 5, 50 Cavill Avenue Surfers Paradise QLD 4217
Postal: PO Box 845 Surfers Paradise QLD 4217

The completed form will need to be emailed to:
Applications@betterchoice.com.au

Trust details

Full name of trust

Full business name (if any) of the trustee in respect to the trust

Full address of principal place of business in trust's country of establishment (if any)

Postcode

Trust Type (tick the box that is applicable)

Individual OR Family

Registered managed investment scheme*

- Please provide ARSN

Government superfund*

- Please provide name of legislation

Unregistered managed investment scheme that is not registered by ASIC that only has wholesale clients and does not make scale offerings to which section 1012E of the Corporations Act 2001 applies*

Registered trust subject to regulatory oversight of a Commonwealth statutory regulator (e.g. APRA) in relation to its activities as a trust*

- Please provide name of regulator
- Please provide a registration number given by the regulator

Other

- Trust description

Country in which the trust was established

Settlor of Trust

Not required for trust types marked * above or if initial sum to establish the trust was less than \$10,000.

The 'settlor' is the person/entity who established the trust by contributing the initial assets or amount, often called the 'settled sum'.

Full legal name (given name, middle name(s), family name) or Registered Business Name

If the trustee is a company the Verification of Identity - Company form will also need to be completed.

Full list of trustees

- **Mandatory:** the details of least one trustee must be provided below.
- The details for all other trustees must be provided below: (not required for trust types marked *above).
- At least one of the trustees listed below must complete the Verification of Identity - Individual or Verification of Identity - Company form (as relevant) and the relevant verification requirement: (not required for trust types marked *above).

Full name of Trustee 1

D.O.B

Full residential address (PO Box is not acceptable)

Postcode

Full name of Trustee 2

D.O.B

Full residential address (PO Box is not acceptable)

Postcode

Full name of Trustee 3

D.O.B

Full residential address (PO Box is not acceptable)

Postcode

Full name of Trustee 4

D.O.B

Full residential address (PO Box is not acceptable)

Postcode

If there are more than four Trustees attach additional page(s).

Please note the following:

- The person(s) acting on behalf of the trust must be a trustee
- If trustees are not identifiable from the trust deed, additional documents will be required to establish who the trustees of the trust are
- Trustees acting on behalf of the trust are required to complete a separate Verification of Identity - or Verification of Identity Company (as relevant)

Beneficiaries of trust

Not required for trust types marked *above. If the terms of the trust identify the beneficiaries by reference to membership of a class, provide details.

Full name of Beneficiary 1

Full residential address (PO Box is not acceptable)

Postcode

Full name of Beneficiary 2

Full residential address (PO Box is not acceptable)

Postcode

Full name of Beneficiary 3

Full residential address (PO Box is not acceptable)

Postcode

Full name of Beneficiary 4

Full residential address (PO Box is not acceptable)

Postcode

If there are more than four beneficiaries attach additional page(s).

If a beneficiary listed above resides outside Australia they must complete Verification of Identity - Individual or Verification of Identity -Company form (as relevant) for their customer type.

Customer 1

Name(s):

Corporate title: (Please indicate - director/secretary/trustee - if applicable)

Signature

Date

Customer 2

Name(s):

Corporate title: (Please indicate - director/secretary/trustee - if applicable)

Signature

Date

Identification documents - office use only

Existing Better Choice customers are only required to provide Identification Documents if a new loan security is required; or, if requested by Better Choice.

Tick those that have been sighted and attach copies to this form

All Trusts

confirm that all required Verification of Identity – Individual forms have been collected.

For trusts that are managed investment schemes registered by ASIC, or a registered trust as selected in section 1 above. Tick those that have been sighted and attach copies to this form.

Performed a search of the ASIC, ATO, APRA or relevant regulator's website (e.g. "Super Fund Lookup" at www.abn.business.gov.au) and retained a copy of the search results

to verify the following details:

- The full name of the trust
- Whether the trust is a Registered Managed Investment Scheme or a Registered Trust

For trusts that are managed investment schemes ("MIS") that are not registered with ASIC, only have wholesale clients and do not make small scale offerings to which section 1012E of the Corporations Act 2001 applies, as selected in section 1 above. Tick those that have been sighted and attach copies to this form.

Sighted and retained a copy of the pages of the original Trust Deed or Constitution where the name of the trust and who the trust is offered to appears; **or**

Obtained a certified copy of the pages of the original Trust Deed or Constitution where the name of the trust and who the trust is offered to appears;

to verify the following details:

- The full name of the trust
- Whether the MIS is limited to wholesale investors

and

Obtained a disclosure certificate signed by one of the trustees declaring that the MIS does not make small scale offerings.

For trusts that is a government superannuation fund as selected in section 1 above. Tick those that have been sighted and attach copies to this form.

Obtained a copy of the relevant extract of the legislation establishing the government superannuation fund sourced from a government website to verify the following details:

- The full name of the trust
- Whether the trust is a government superannuation fund established by legislation

For "individual or family trusts types" as selected in section 1 above. Tick those that have been sighted and attach copies to this form.

Verify the full name of the trust and the settlor of the trust (if applicable) by one of the following methods:

Sighted and retained a copy of the page of the original Trust Deed where the name of the trust appears; **or**

Obtained a certified copy of the page of the original Trust Deed where the name of the trust appears; **or**

Sighted and retained a copy of an original notice issued by the Australian Taxation Office within the last 12 months (e.g. Notice of Assessment). Block out the TFN before imaging or storing this document; **or**

Obtained a certified copy of a notice issued by the Australian Taxation Office within the last 12 months (e.g. Notice of Assessment). Block out the TFN before imaging or storing this document.

Completed by: staff member

I confirm that the information checked in the verification documents as set out above correctly reflects the information supplied by the customer in the form.

Staff member name

Signature