

Important information

This Attestation form relates to the requirements for customer identification (ID) as governed by the Anti-Money Laundering and Counter Terrorism Financing Act 2006 and related rules and guidance notes issued by AUSTRAC (AML/CTF requirements).

Please note that this Attestation forms part of your application for the product you are investing in.

You must ensure that both completed Application and Attestation forms are forwarded to us to ensure that the application is accepted.

Guide to completing this form

- If you have a financial adviser please ensure your financial adviser completes relevant parts of Section 1 and all of Sections 2, 3 and 4 of this form.
- If you do NOT have a financial adviser please complete relevant parts of Section 1 and all of Section 5.
- Complete all applicable sections of this form in **BLOCK LETTERS**.
- Provide this form and a legible, certified copy of ID document(s), if required, to us with a completed application form.
- Please complete this form for the following customer types:
 - Foreign companies registered with ASIC: refer to page 1
 - Foreign companies not registered with ASIC: refer to page 3
 - Associations: refer to page 4
 - Registered cooperatives: refer to page 5
 - Government bodies: refer to page 5
- Individuals and sole traders should complete the Attestation form – Customer identification – individual or sole trader. You can obtain a copy from www.axa.com.au under Forms > Other forms, or from www.summitservice.com.au under Summit Solutions > Client ID forms.
- Australian companies, trusts and partnerships should complete the Attestation form – Customer identification – Australian company, trust or partnership. You can obtain a copy from www.axa.com.au under Forms > Other forms, or from www.summitservice.com.au under Summit Solutions > Client ID forms.

Customer name

Customer number (if known)

Section 1: Customer details
A Foreign company (registered with ASIC) details
1 Is the company registered with ASIC?
 No, please go to question 10

 Yes

2 Company details as registered with ASIC

Full name of company as registered with ASIC

Australian Registered Business Number (ABN)

3 Full address of the company's registered office (PO Box is not acceptable)

Street number and name

Town/Suburb

State

Postcode

Email

Mobile number

4 Address of principal place of business in Australia, if any, or the full name and address of the company's local agent in Australia (PO Box is not acceptable)

Full name of the company's local agent (if applicable)

Street number and name

Town/Suburb

State

Postcode

Email

Mobile number

Customer name	Customer number (if known)

5 Is the company registered with a relevant foreign registration body?

- No
- Yes ► Name of body and the country where the company was formed, incorporated or registered

Name of the body and the country

6 Is the company a private company?

- No
- Yes, please provide the name of each director of the company below

Full name of director(s)	Full name of director(s)

If space provided is not sufficient please attach an additional page

7 Is the company a public company?

- No
- Yes, please specify:
- Listed, please provide the name of the relevant stock exchange
- Unlisted

8 Is the company regulated?

- No, please provide the name and residential address of each shareholder who owns 25 per cent or more of the issued capital of the company through one or more share holdings.

Full name of shareholder	Residential address (including country)

If space provided is not sufficient please attach an additional page

- Yes, please provide the name of the regulator and your relevant licence details
- | | | |
|-------------------|--------------|----------------|
| | | |
| Name of regulator | Licence type | Licence number |

- If you have a financial adviser please ensure your financial adviser completes Sections 2, 3 and 4.
- If you do **NOT** have a financial adviser please complete Section 5.

Customer name	Customer number (if known)

B Foreign company (not registered with ASIC) details

9 Is the company registered with ASIC?

- No
- Yes, please go to question 1

10 Full name of company

Full name of company

11 Is the company registered with a relevant foreign registration body?

- No
- Yes ► Name of body and the country where the company was formed, incorporated or registered

Name of body and the country

12 Full address of the company’s principal place of business in the country of formation, incorporation or registration

(PO Box is not acceptable)

Street number and name	Town/Suburb	State	Postcode	Country	

13 If the company is registered please provide the identification number issued to the company

Identification number

14 Is the company a private company?

- No
- Yes, please provide the name of each director of the company below

Full name of director(s)	Full name of director(s)

If space provided is not sufficient please attach an additional page

15 Is the company a public company?

- No
- Yes, please specify:
 - Listed, please provide the name of the relevant stock exchange
 - Unlisted

16 Is the company regulated?

- No, please provide the name and residential address of each shareholder who owns 25 per cent or more of the issued capital of the company through one or more share holdings.

Full name of shareholder(s)	Residential address (including country)

If space provided is not sufficient please attach an additional page

- Yes, please provide the name of the regulator and your relevant licence details

Name of regulator	Licence type	Licence number

- If you have a financial adviser please ensure your financial adviser completes Sections 2, 3 and 4.
- If you do **NOT** have a financial adviser please complete Section 5.

Customer name	Customer number (if known)

C Association details

17 Full name of association

Full name of association

18 Full address of the association's principal place of administration or registered office (as applicable) (PO Box not acceptable)

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Street number and name

Town/Suburb

State

Postcode

Country

19 Please provide the names of the following individuals

Position	Given name(s)	Surname
Chairman (or equivalent officer)		
Secretary (or equivalent officer)		
Treasurer (or equivalent officer)		

If space provided is not sufficient, please attach an additional page

20 Is the association incorporated?

No, please go to question 22

Yes

21 Please provide the incorporation number issued to the association

Incorporation number

22 Please provide details for one member of the association (if applicable)

You must also provide customer identification documents for this individual.

Full name of member	Date of birth	Residential address including country (PO Box is not acceptable)
	/ /	

If space provided is not sufficient, please attach an additional page

▶ If you have a financial adviser please ensure your financial adviser completes Sections 2, 3 and 4.

▶ If you do **NOT** have a financial adviser please complete Section 5.

Customer name	Customer number (if known)

D Registered cooperative details

23 Full name of registered cooperative

Full name of cooperative	Registration body

24 Please provide the registration identification number of the cooperative

Registration number

25 Please provide the names for the following individuals

Position	Given name(s)	Surname
Chairman (or equivalent officer)		
Secretary (or equivalent officer)		
Treasurer (or equivalent officer)		
President (if applicable)		

If space provided is not sufficient, please attach an additional page

26 Please provide the full address of one of the following (please tick the appropriate box)

- Cooperative’s registered office or principal place of operations
- Residential address of the cooperative’s secretary, president or treasurer

Address (PO Box is not acceptable)

Street number and name	Town/Suburb	State	Postcode	Country

- ▶ If you have a financial adviser please ensure your financial adviser completes Sections 2, 3 and 4.
- ▶ If you do **NOT** have a financial adviser please complete Section 5.

E Government body details

27 Full name of government body

Full name of government body

28 Please provide the full address of government body’s principal place of operations (PO Box is not acceptable)

Street number and name	Town/Suburb	State	Postcode	Country

29 Is the government body an entity of, an emanation of, or established under the legislation of, the Commonwealth, an Australian state or territory, or foreign country?

- No
- Yes, if Australian state or territory, or foreign country please specify

- ▶ If you have a financial adviser please ensure your financial adviser completes Sections 2, 3 and 4.
- ▶ If you do **NOT** have a financial adviser please complete Section 5.

Adviser use only

Section 2: Declaration

I declare that I have undertaken an applicable customer ID procedure for the above listed client as required under the AML/CTF requirements and that the client details contained in the sighted documents correspond with the client details contained in the application form.

Section 3: Record of identification procedure

Copy of ID document(s):

Not attached

Do not tick this box unless you have confirmed with your Licensee that they have entered into a Licensee Agreement with AXA that contains the relevant customer identification obligations.

Attached

Please provide either:

- documentation for the foreign company, association, registered cooperative or government body
- documentation for an individual (where required).

Section 4: Financial adviser details – identification and verification conducted by:

<input type="text"/>	<input type="text" value="()"/>
Financial adviser's name	Telephone
<input type="text"/>	<input type="text"/>
AFS Licensee name	Adviser number
<input type="text" value="X"/>	<input type="text" value="/ /"/>
Financial adviser signature	Date

Section 5: Customer identification procedure

I confirm that I have attached certified customer ID documents as requested.

X

Client signature

/ /

Date

Customer identification checklist

You must attach the following certified documents to this form. Refer to page 9 to find out who can certify customer ID documents.

Foreign companies

Provide one of the following:

- An original or certified copy of a certificate of registration issued by ASIC (if applicable)
- A public document issued by the relevant company (if applicable)

Associations

Provide one of the following:

- An original, certified copy or certified extract of the constitution or rules of the association.
- An original, certified copy or certified extract of information provided by the relevant registration body responsible for the incorporation of the association.
- An original, certified copy or certified extract of the minutes of a meeting of the association.

And unincorporated associations must also provide:

- Relevant ID documents for the identified member (individual).

Registered cooperatives

Provide one of the following:

- An original, certified copy or certified extract of the register maintained by the cooperative.
- An original, certified copy or certified extract of the registration information provided by the relevant registration body.
- An original, certified copy or certified extract of the minutes of a meeting of the cooperative.

Government bodies

If established under a legislation please provide the following:

- A copy or relevant extract of the legislation obtained from a reliable and independent source, such as a government website.

If the government body is not established under legislation please ensure you have completed Section 1, **part E** appropriately. No further documentation is required.

Individuals

Part i – Provide one of the following:

- Current driver's licence/permit issued by a State or Territory containing a photograph of the person.
- Australian passport (a passport that has expired within the preceding two years is acceptable).
- Card issued under a State or Territory for the purpose of providing a person's age containing a photograph of the person (eg proof of age card).
- Current foreign driver's licence, passport or similar travel document containing the photograph and the signature of the person in whose name the document was issued.*
- National identity card issued by a foreign government containing a photograph of the person in whose name the card was issued.*

If you CANNOT provide a document listed above, please provide a document from Part ii (a) AND Part ii (b) below.

Part ii (a) – Provide one of the following:

- Birth certificate or birth extract.*
- Citizenship certificate issued by the Commonwealth.
- Citizenship certificate issued by a foreign government.*
- Pension card issued by Centrelink.
- Health Care card issued by Centrelink.

Part ii (b) – and also provide one of the following:

- A notice issued by the Commonwealth or a State or Territory within the preceding 12 months that records the provision of financial benefits to the individual and contains the individual's name and residential address.
- A notice issued by the Australian Taxation Office within the preceding 12 months that records a debt payable by the individual to the Commonwealth (or by the Commonwealth to the individual), which contains the individual's name and residential address.
- A notice issued by a local government body or utilities provider within the preceding three months, which records the provision of services to that address or to that person (the document must contain the individual's name and residential address).
- If under the age of 18, a notice that:
 - was issued to the customer by a school principal within the preceding three months, and
 - contains the customer's name and residential address, and
 - records the period of time that the customer attended the school.

* Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator.

Who can certify customer ID documents?

Under the AML/CTF requirements the following 'authorised individuals' are able to certify documents:

Legal profession

- Legal practitioner including lawyer, QC, barrister or solicitor
 - Judge
 - Magistrate
 - CEO of a Commonwealth Court
 - Registrar or deputy registrar of a court
 - Justice of the Peace (JP)
 - Notary public
 - Police officer
-

Financial services

- Finance company, credit union, building society, or bank officer with two or more years of continuous service
 - An officer or representative of an Australian Financial Services Licence with two or more years of continuous service with one or more licensees
 - Member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants
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Medical profession

- Chiropractor
 - Dentist
 - Medical practitioner
 - Nurse
 - Optometrist
 - Pharmacist
 - Physiotherapist
 - Psychologist
-

Veterinary surgeon

Australia Post employee with two or more years of continuous service

Teacher

Officer of the Australian Defence Force

Australian Consular or Diplomatic Officer

Registered Minister of Religion

Registered Marriage Celebrant

The full list of 'authorised individuals' who are able to certify documents can be found in the Statutory Declarations Regulations 1993.

When certifying documents, the following process must be followed:

- All copied pages of original documents must be certified.
- The authorised individual must ensure that the original and the copy are identical; then write or stamp on the copied document 'certified true copy'. This must be followed by the date and signature, printed name and qualification of the authorised individual.
- In cases where an extract of a document is photocopied to verify customer ID, the authorised individual should write or stamp 'certified true extract'.