

**GUIDE TO COMPLETING THIS FORM**

- o This form is for FOREIGN COMPANIES only. For companies incorporated in Australia use the AUSTRALIAN COMPANIES IDENTIFICATION FORM.
- o Complete one form for each company. Complete all applicable sections of this form in BLOCK LETTERS.
- o Contact your licensee if you have any queries.

**SECTION 1: FOREIGN COMPANY IDENTIFICATION PROCEDURE**

**1.1 General Information**

Full name of foreign company

Country of formation / incorporation / registration

Select  if registered by a foreign body and provide name of body

For companies incorporated in Australia, rather use the **AUSTRALIAN COMPANIES IDENTIFICATION FORM**.

**1.2 Is the foreign company registered with ASIC? (select  ONE of the following)**

**Yes** Provide ARBN

Provide **EITHER**  principal place of business address in Australia **OR**  local agent name and address details (Tick one box)

Address (PO Box is NOT acceptable)

Street

Suburb  State  Postcode  Country

Name of local agent in Australia

**No** Provide company identification number (if any) issued by the foreign registration body

Principal place of business in the company's country of formation or incorporation (PO Box is NOT acceptable)

Street

Suburb  State  Postcode  Country

**1.3 Registered Address of Company**

Provide the registered address as registered with ASIC. If the company is NOT registered with ASIC, provide the registered address in the country of formation, incorporation or registration (if any).

Street

Suburb  State  Postcode  Country

**1.4 Regulatory/ Listing Details (If the company is regulated or listed, select the relevant category and provide the information requested)**

**Regulated company** (A company whose activities are subject to the oversight of a statutory regulator. In this context regulated means subject to supervision beyond that provided by a company registration body. Examples of regulated companies in Australia include Australian Financial Services Licensees (AFSL), Australian Credit Licensees (ACL) or Registrable Superannuation Entity (RSE) Licensees).

Regulator name

Licence details

**Listed on a recognised market/exchange**

Name of market / exchange

**Majority-owned subsidiary of an Australian listed company**

Australian listed company name

Name of market / exchange

**1.5 Company Type** (select ✓ only ONE of the following categories and provide any information requested) **Public**

Go to Section 2

 **Proprietary** (also known as private companies)

Go to Section 1.6 below

**1.6 Directors** (To be completed for proprietary companies, not required for public companies as per 1.5)How many directors are there?  provide full name of each director below

	Full given name(s)	Surname
1	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>

If there are more directors, provide details on a separate sheet.

**1.7 Beneficial Owners** (To be completed for proprietary companies, not required for public companies as per 1.5)Provide details of **ALL individuals** who are beneficial owners through one or more shareholdings of more than 25% of the company's issued capital**Beneficial Owner 1**

Full given name(s)	<input type="text"/>				Surname	<input type="text"/>	
Residential address (PO Box is NOT acceptable)	<input type="text"/>						
Street	<input type="text"/>						
Suburb	<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>	Country	<input type="text"/>

**Beneficial Owner 2**

Full given name(s)	<input type="text"/>				Surname	<input type="text"/>	
Residential address (PO Box is NOT acceptable)	<input type="text"/>						
Street	<input type="text"/>						
Suburb	<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>	Country	<input type="text"/>

**Beneficial Owner 3**

Full given name(s)	<input type="text"/>				Surname	<input type="text"/>	
Residential address (PO Box is NOT acceptable)	<input type="text"/>						
Street	<input type="text"/>						
Suburb	<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>	Country	<input type="text"/>

**SECTION 2: FOREIGN COMPANY VERIFICATION PROCEDURE**

Identification documentation is to be provided to verify the information listed in one of the verification procedure described below (either the standard verification procedure for companies registered with ASIC, the standard verification procedure for companies not registered with ASIC or the alternate verification procedure for regulated or listed companies as described in section 1.4 of this form).

**Standard verification procedure for Foreign Companies registered with ASIC**

Information to be verified:

- The full name of the company as registered by ASIC
- The ARBN issued to the company
- Whether it is registered by a foreign registration body and if so, whether it is registered as a proprietary or public company.

Tick ✓	Verification options (select one of the following options used to verify the Company)
<input type="checkbox"/>	Perform a search of the relevant ASIC database.
<input type="checkbox"/>	Perform a search of the relevant foreign registration body.
<input type="checkbox"/>	If the ASIC or foreign registration body database is not reasonably available, an original or certified copy of the certification of registration issued by ASIC or by the relevant foreign registration body. *

**Standard verification procedure for Foreign Companies NOT registered with ASIC**

Information to be verified:

- The full name of the company
- Whether it is registered by a foreign registration body and if so whether it is registered as a proprietary or public company
- the identification number issued to the company

Tick ✓	Verification options (select one of the following options used to verify the Company)
<input type="checkbox"/>	Perform a search of the relevant foreign registration body.
<input type="checkbox"/>	If the foreign registration body database is not reasonably available, an original or certified copy of the certification of registration issued by the relevant foreign registration body. *
<input type="checkbox"/>	Where the above means are unavailable, a disclosure certificate from the company given by an individual acting as agent of the company (where the agent has been verified). See your licensee for other disclosure certificate requirements. *

**Alternative verification procedure for a regulated company, a listed company or a majority owned subsidiary of an Australian listed company (as described in section 1.4 of this form)**

Information to be verified:

- The full name of the company
- That the company is a regulated company, a listed company or a majority owned subsidiary of an Australian listed company (whichever is applicable)

Tick ✓	Verification options (select one of the following options used to verify the Company)
<input type="checkbox"/>	Perform a search of the relevant financial market.
<input type="checkbox"/>	Perform a search of the relevant ASIC database.
<input type="checkbox"/>	Perform a search of the licence or other records of the relevant Commonwealth, State or Territory statutory regulator.
<input type="checkbox"/>	A public document issued by the company. *

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

**IMPORTANT NOTE:**

- **Either attach a legible certified copy of the ID documentation used to verify the company (and any required translation) OR**
- **Alternatively, if agreed between your licensee and the product issuer, complete the Record of Verification Procedure section below and DO NOT attach copies of the ID Documents**

**SECTION 3: RECORD OF VERIFICATION PROCEDURE**

ID DOCUMENT DETAILS	Document 1	Document 2 (if required)
Verified From	<input type="checkbox"/> Performed search <input type="checkbox"/> Original <input type="checkbox"/> Certified copy	<input type="checkbox"/> Performed search <input type="checkbox"/> Original <input type="checkbox"/> Certified copy
Document Issuer / Website		
Public Document Type		
Issue date / Search date		
Accredited English Translation	<input type="checkbox"/> N/A <input type="checkbox"/> Sighted	<input type="checkbox"/> N/A <input type="checkbox"/> Sighted

By completing and signing this Record of Verification Procedure I declare that I have verified the identity of the Customer as required by AML/CTF Rules and that this identification procedure has been performed by an AFSL holder or an authorised representative of an AFSL holder.

AFS Licensee Name	<input type="text"/>	AFSL No.	<input type="text"/>
Representative/ Employee Name	<input type="text"/>	Phone No.	<input type="text"/>
Signature	<input type="text"/>	Date Verification Completed	<input type="text"/>