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Identification Form - Government Body

GUIDE TO COMPLETING THIS FORM

o Complete the following in BLOCK LETTERS

o Contact your licensee if you have any queries.

1A. Government Body Details

1.1 General Information

Full name of Government Body

A PO Box/RMB/Locked Bag is not acceptable.

Property name/building name (if applicable)

Unit Street number Street name

Suburb State Postcode

Country

1.2 Government Information (select ✓ only ONE of the following categories and provide the information requested)

☐ Commonwealth of Australia Government Body

☐ Australian State or Territory Government Body *please specify Foreign Country*

☐ Foreign Country Government Body *please specify Foreign Country*

1B. Government Body Identification Procedure

Verify the following:

o Full name of the government body

o Full address of the government body's principal place of operations

o Whether the government body is:

■ *A body of the Commonwealth of Australia; or*

■ *A body of a State or Territory of Australia (and, if so which one); or*

■ *A body of a foreign country (and, if so which country)*

Tick ✓ Verification options (select one of the following options used to verify the Government Body)

☐ Search of the relevant Commonwealth, State, Territory or Foreign government website for confirmation of the body's existence.

☐ Search of the relevant Commonwealth, State, Territory or Foreign Country register of government bodies.

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

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

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1C. Record of Verification Procedure

IMPORTANT:

→ ***Attach a legible copy of the ID documentation used to identify the Government Body (and any required translation).***

→ ***Alternatively, if agreed between your licensee and the product issuer, complete the ID Document Details below, and DO NOT attach copies of the ID Documents.***

ID DOCUMENT DETAILS	
Verified From	☐ Performed search ☐ Copy of legislation sighted
URL link / Full name of legislation	
Search date	
Accredited English Translation	☐ N/A ☐ Sighted

1D. Financial Planner Details – identification and verification conducted by:

Date Verified (dd/mm/yyyy)

Financial Planner's Name

Phone No.

AFS Licensee Name

AFSL No.

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