

mecu Limited ABN 21 087 651 607 AFSL/Australian Credit Licence 238431 trading as bankmecu • 222 High Street, Kew Victoria 3101, Australia
Private Bag 12, Kew Victoria 3101, Australia • Telephone 132 888 • Facsimile 03 9853 9294 • Email mail@bankmecu.com.au • bankmecu.com.au

Please return completed form to bankmecu by mail, facsimile or to a service centre.

<input type="checkbox"/> New customer	<input type="checkbox"/> Company	Customer number	<input type="text"/>
<input type="checkbox"/> Change to existing account	<input type="checkbox"/> Association/Club	Contact telephone	<input type="text"/>
	<input type="checkbox"/> Trust/Superannuation	Mobile telephone	<input type="text"/>
Registered name	<input type="text"/>	Facsimile	<input type="text"/>
Trust/Superannuation name	<input type="text"/>	Email address	<input type="text"/>
Registered address	<input type="text"/>	Business name	<input type="text"/>
	<input type="text"/>		<input type="text"/>
	Postcode <input type="text"/>	ACN/ABN	<input type="text"/>
Mailing address	<input type="text"/>		(if applicable)
	<input type="text"/>		<input type="text"/>
	Postcode <input type="text"/>		

required documents

- Certified copy of Certificate of Incorporation attached to Customer Application
- Formal Declaration of Directors as required by ASIC (Australian Securities and Investments Commission)
- Memorandum (prior to 01 Jul 2000) or Constitution (post 01 Jul 2000)
- Certified copy of Minutes/Trust Deed identifying the authorised person/s to open an account and the authorised person/s to operate the account

declaration

I/We advise that all information contained in this application is true and correct.
Authorised party detailed on the list of signatories overleaf may;

1. Sign, draw, accept, endorse or make arrangements with you regarding cheques, withdrawals, bills of exchange, bank cheques, periodical payments, debit authorities, and orders.
2. Place money on Term Deposit and receive payments of interest.
3. Sign or execute guarantees, indemnities or declarations

If bankmecu, at its discretion, permits the above account to become overdrawn, liability to the bank for this account shall be joint and several.

Immediate notification in writing is required when any change to the authorised signatories for the business is made. This authority shall remain in force until bankmecu receives notice of cancellation signed in accordance with the operation of this account. bankmecu is authorised to deduct from the customers account(s) any applicable bankmecu and Government charges. These are detailed in our 'Fees and Charges' brochure and/or our 'Terms and Conditions' brochure. bankmecu is authorised to conduct any inquiries, searches or obtain information concerning the Incorporated Body which bankmecu considers necessary to verify the eligibility of the Incorporated Body to join bankmecu as a customer. I have read the relevant Terms and Conditions and agree to be bound by them and to be bound by the disclosure of information therein. I have also read the bankmecu Privacy Statement and consent to the contents therein.

authorised contact

Surname	<input type="text"/>	Home telephone	<input type="text"/>
First names	<input type="text"/>	Facsimile	<input type="text"/>
Position	<input type="text"/>		
For authorised signatories see page 2.			
Signature	<input type="text"/>	Date	<input type="text"/>

Office use only

Shares paid	<input type="text"/>	Op # and initials	<input type="text"/>	Verified	<input type="text"/>	Op # and initials	<input type="text"/>
ABN/TFN loaded	<input type="text"/>	Op # and initials	<input type="text"/>	Passcode	<input type="text"/>	Op # and initials	<input type="text"/>
Prosper loaded	<input type="text"/>	Op # and initials	<input type="text"/>	Account opened	<input type="text"/>	Op # and initials	<input type="text"/>
Card Criteria met	<input type="text"/>	Op # and initials	<input type="text"/>	Card ordered	<input type="text"/>	Op # and initials	<input type="text"/>
Checking officer #	<input type="text"/>	Name	<input type="text"/>	Date	<input type="text"/>		

tax file number (trust or superannuation)

Collection of Tax File Number information is authorised and regulated by tax laws and the Privacy Act. It is not an offence to choose not to quote your Tax File Number. If your Tax File Number is not quoted, you may be charged Withholding Tax on the interest that you earn. If quoted, your Tax File Number will automatically be applied to future accounts you open on this account unless you instruct us otherwise.
Exemptions For details about who is exempt, contact the Australian Taxation Office.
For more information, ask for the 'New Rules for Savings and Investments Accounts' booklet or contact the Australian Taxation Office.

Tax file number	<input type="text"/>	Exemption	<input type="text"/>
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telephone passcode application

As per the declaration above, I have agreed to the passcode Terms and Conditions

<input type="text"/>
Passcode (min. 4 and max. 6 characters) Office use: Destroy after recording on system.

opening an account

I/We would like to apply for a Business account (please tick)

You can also apply for the following products, each with its own Application form (please tick for further information).

- | | | |
|---------------------------------------|--|---|
| <input type="checkbox"/> Cheque Book | <input type="checkbox"/> Incentive Saver | <input type="checkbox"/> Community Access Account |
| <input type="checkbox"/> Deposit Book | <input type="checkbox"/> Internet Banking | <input type="checkbox"/> CyberSaver |
| | <input type="checkbox"/> Business Loan/Overdraft | <input type="checkbox"/> Fixed Term Deposit |

We also offer a range of personalised banking solutions (please tick for further information).

- | | | |
|---|--|---|
| <input type="checkbox"/> Property Solutions | <input type="checkbox"/> Insurance Solutions | <input type="checkbox"/> Wealth Creation & Management Solutions |
| <input type="checkbox"/> Personal Banking Solutions | <input type="checkbox"/> Travel Solutions | <input type="checkbox"/> Motoring Solutions |

authorised signatories

Method of operation Any signatory to operate All must sign At least must sign

Note: Signatories must have previously completed signatory 'identification verification' with bankmecu as per Government requirements, otherwise they must be completed and included with this application.

Signatory 1 Customer/Sig. # Title

Surname

Given name(s) Date of birth

Home Address
 Postcode

Home Tel. Bus. Tel.

Mob. Tel.

Email

Signature

Signatory 2 Customer/Sig. # Title

Surname

Given name(s) Date of birth

Home Address
 Postcode

Home Tel. Bus. Tel.

Mob. Tel.

Email

Signature

Signatory 3 Customer/Sig. # Title

Surname

Given name(s) Date of birth

Home Address
 Postcode

Home Tel. Bus. Tel.

Mob. Tel.

Email

Signature

Signatory 4 Customer/Sig. # Title

Surname

Given name(s) Date of birth

Home Address
 Postcode

Home Tel. Bus. Tel.

Mob. Tel.

Email

Signature

If you require more than four authorised signatories, please complete a Signatory Application for Non Personal Customer form.

card/s required

 For the signatory(ies) above

The issue of cards is subject to approval in accordance with bankmecu policy. I/we would like to access the account using (please tick):

- | | | | | | |
|--------------------|---|-----------------------------------|--------------------|---|-----------------------------------|
| Signatory 1 | <input type="checkbox"/> VISA Access card | <input type="checkbox"/> Redicard | Signatory 2 | <input type="checkbox"/> VISA Access card | <input type="checkbox"/> Redicard |
| Signatory 3 | <input type="checkbox"/> VISA Access card | <input type="checkbox"/> Redicard | Signatory 4 | <input type="checkbox"/> VISA Access card | <input type="checkbox"/> Redicard |

Please note that the above Access cards do not provide access to credit. If you require a new credit card and would like more information about our products, please tick: VISA Credit Card

declaration

 Must be signed by authorised contact

- I/We apply to open this account(s) per the details completed on this application and appoint the above people as authorised signatory(ies) to this account. They may deposit or withdraw and obtain access to any prearranged continuing credit arrangement and in accordance with Section 18N (1) (ga) (ii) of the Privacy Act (1988), may seek and obtain information relating to this account(s). I/We indemnify bankmecu against any claim which may arise from those acts of an authorised signatory which are within the terms of this authority. I/we have read the relevant Terms and Conditions, and agree to be bound by them and to be bound by the Disclosure of Information therein. I/We have also read the bankmecu Privacy Statement and consent to the contents therein. I/We agree to pay all charges required by bankmecu in accordance with the Corporations Law.
- I/We hereby acknowledge that a Personal Identification Number (PIN) and the card/s will be mailed to my/our address(es). For security purposes, they will be mailed on separate days.
- I/we acknowledge that I/we have received and read the relevant Terms and Conditions relating to the account that I/we have applied for. I/We further agree and accept to be bound by the terms and conditions as specified.

Signature

Date

customer identification requirements

For further information regarding bankmecu's identification requirements under the *Anti-Money Laundering and Counter Terrorism Financing Act 2006 (Cth)*, refer to our 'What Information we need from you' document.

To satisfy bankmecu's requirements in accordance with the *Anti-Money Laundering and Counter Terrorism Financing Act 2006 (Cth)*, the following identification must be presented;

One Category A document, OR one Category B AND one Category C document, OR one Category D document AND one Category B OR C document.

category A documents

Current Australian passport (or one that has expired within last 2 years)

Current driver's licence

Proof-of-age card which contains a photograph

category B documents

Full Birth Certificate

Australian citizenship certificate

Pension card issued by Centrelink

Electoral enrolment card

Medicare card, Department of Veteran's Affairs card or any other entitlement card issued by the Australian Government

Loan document held by another Financial Institution

Mortgage records of another Financial Institution

Land Title Office Records

Key Pass

category C documents

Benefit notice issued by Australian, State or Territory governments within last 12 months

Tax assessment notice issued by the Australian Taxation Office (ATO) within last 12 months

Council rates notice or utilities bill issued within last 3 months (with residential address)

category D documents

Current NSW Firearm, Security Industry or Commercial Agent's and Private Inquiry Agent's operator licence issued by NSW Roads and Traffic Authority

Current photo identity card for Australian Defence Forces or State Police

Current consular photo identity card issued by Department of Foreign Affairs and Trade

Current foreign passport stamped with permanent residency status (with English translation as required)

certification form

certifier's details

Surname	<input type="text"/>	or Business address (PO Box not acceptable)	<input type="text"/>
Given names	<input type="text"/>		<input type="text"/>
Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/> Dr		<input type="text"/> Postcode <input type="text"/>
Occupation	<input type="text"/>	Home telephone	<input type="text"/>
Home address	<input type="text"/>	Business telephone	<input type="text"/>
	<input type="text"/>	Mobile telephone	<input type="text"/>
	<input type="text"/> Postcode <input type="text"/>	Email address (personal address only)	<input type="text"/>

categories of certifiers

1. Legal Practitioner
2. Judge
3. Magistrate
4. Medical Practitioner
5. Registrar or Deputy Registrar of a court
6. Justice of the Peace
7. Notary Public
8. Police Officer
9. Nurse
10. Pharmacist
11. Australian Consular or Diplomatic Officer
12. Officer of Financial Institution (2 years service)
13. Officer or authorised representative of AFS licensee
14. Accountant (member of a recognised accounting body)

Category of certifier Insert relevant number (see list above)

documents to be certified

Category of Document	<input type="checkbox"/>
Document details	
Type of document	<input type="text"/>
Person to whom it relates	<input type="text"/>
Category of Document	<input type="checkbox"/>
Document details	
Type of document	<input type="text"/>
Person to whom it relates	<input type="text"/>

certifier statement

I have examined the original identification documents listed above, and I have endorsed each copy of the identification document in the following manner:

This is to certify that this is a true copy of the original which I have sighted.

Name:

Date:

Title:

Registration Number (if applicable):

Certified copies of the identification documents need to be returned to bankmecu with this form.

It is an offence under the *Anti-Money Laundering and Counter Terrorism Financing Act 2006* to give false and misleading information.

Signature	<input type="text"/>	Date	<input type="text"/> / <input type="text"/> / <input type="text"/>
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Certified by the
Carbon Reduction Institute

bankmecu
responsible banking™