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Execution, Settlement and Clearing through: E*TRADE Australia Securities Limited trading as E*TRADE Australia ABN 93 078 174 973, AFSL No. 238277, an ASX and Chi-X Australia market participant, an ASX Clear participant and ASX Settlement participant.

This form must be completed for all new clients. Please send completed form to:

E*TRADE Broking Services
 PO Box 1346
 Royal Exchange NSW 1224

Email etrade_newaccounts@anz.com

Adviser to Complete

Adviser name

Client Account No.

Brokerage Scale

1. Type of Account

Individual
 Joint
 Sole Trader
 Company
 Superfund/Trust
 Registered Body

2. For Sole Trader, Company, Trust/Superfund or Registered Body Accounts Only

For superannuation funds with a company trustee, please provide an ACN. For superannuation funds with individual trustees, please provide an ABN.

ACN or ABN/ABRN

3. CHESS Registered Account Name

The name you nominate here will be your CHESS Registered Name. Account Designation is the name of the superfund, trust or minor's name.

Account Name

Account Designation

4. Address

Individual, joint accounts or sole traders to provide a residential address. Company, super and trust accounts, to provide the registered address. This will be your CHESS registered address **unless** you provide an address in question 5 or 6.

Address

(Not P.O. Box)

Suburb/City

State

Postcode

Country

5. Postal Address (if different from above)

This will be your CHESS registered address, **unless** you provide an address in question 6. Contract notes will be sent to this address if provided.

Address

Suburb/City

State

Postcode

Country

6. Adviser Address

If address is provided this will be the CHESS Registered Address.

Address

Suburb/City

State

Postcode

Country

7. Contact Details

Please tick your preferred means of contact. An email address plus at least one phone number is required.

Phone	<input type="checkbox"/>	Work	<input type="text"/>	<input type="checkbox"/>	Home	<input type="text"/>
	<input type="checkbox"/>	Mobile	<input type="text"/>	<input type="checkbox"/>	Fax	<input type="text"/>
	<input type="checkbox"/>	Email	<input type="text"/>			

8. Account Holder 1

Please provide details for an individual, trustee, custodian or company director.

All fields are mandatory and your account will not be processed if you do not complete all sections.

Title	<input type="checkbox"/>	Mr	<input type="checkbox"/>	Mrs	<input type="checkbox"/>	Ms	<input type="checkbox"/>	Miss	<input type="checkbox"/>	Other	<input type="text"/>	Gender	<input type="checkbox"/>	Male	<input type="checkbox"/>	Female	
Family name	<input type="text"/>																
Given names	<input type="text"/>										Date of Birth (dd/mm/yyyy)	<input type="text"/>					
Occupation	<input type="text"/>																
Residential Address	<input type="text"/>																
Suburb/City	<input type="text"/>				State	<input type="text"/>			Postcode	<input type="text"/>			Country	<input type="text"/>			
Citizenship	<input type="text"/>								<input type="text"/>								
	Primary (e.g. Australian)								Secondary (if applicable)								
Are you a US resident for tax purposes or a US Citizen? (Only answer this question for Individual, Sole Trader or Joint account type).																	
<input type="checkbox"/> Yes <input type="checkbox"/> No																	

ANZ Customers only

Current ANZ Account Number	<input type="text"/>
Customer Reference Number	<input type="text"/>

9. Account Holder 2

Please provide details for an individual, trustee, custodian or company director.

All fields are mandatory and your account will not be processed if you do not complete all sections.

Title	<input type="checkbox"/>	Mr	<input type="checkbox"/>	Mrs	<input type="checkbox"/>	Ms	<input type="checkbox"/>	Miss	<input type="checkbox"/>	Other	<input type="text"/>	Gender	<input type="checkbox"/>	Male	<input type="checkbox"/>	Female	
Family name	<input type="text"/>																
Given names	<input type="text"/>										Date of Birth (dd/mm/yyyy)	<input type="text"/>					
Occupation	<input type="text"/>																
Residential Address	<input type="text"/>																
Suburb/City	<input type="text"/>				State	<input type="text"/>			Postcode	<input type="text"/>			Country	<input type="text"/>			
Citizenship	<input type="text"/>								<input type="text"/>								
	Primary (e.g. Australian)								Secondary (if applicable)								
Are you a US resident for tax purposes or a US Citizen? (Only answer this question for Individual, Sole Trader or Joint account type).																	
<input type="checkbox"/> Yes <input type="checkbox"/> No																	

ANZ Customers only

Current ANZ Account Number	<input type="text"/>
Customer Reference Number	<input type="text"/>

10. Account Holder 3

Please provide details for an individual, trustee, custodian or company director.
All fields are mandatory and your account will not be processed if you do not complete all sections.

Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Ms	<input type="checkbox"/> Miss	Other <input type="text"/>	Gender	<input type="checkbox"/> Male	<input type="checkbox"/> Female
Family name	<input type="text"/>							
Given names	<input type="text"/>					Date of Birth (dd/mm/yyyy)	<input type="text"/>	
Occupation	<input type="text"/>							
Residential Address	<input type="text"/>							
Suburb/City	<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>	Country	<input type="text"/>	
Citizenship	<input type="text"/>				<input type="text"/>			
	Primary (e.g. Australian)				Secondary (if applicable)			
Are you a US resident for tax purposes or a US Citizen? (Only answer this question for Individual, Sole Trader or Joint account type).						<input type="checkbox"/> Yes	<input type="checkbox"/> No	
ANZ Customers only								
Current ANZ Account Number	<input type="text"/>							
Customer Reference Number	<input type="text"/>							

11. Contract Notes

Please tick your preference. I/we would like to receive my/our contract notes by Email Post Email and post

12. Custodian/Margin Lender Details (complete this section if you are applying for a DVP account)

This account must be in the name of, or include the name of, the party in question 3.

Custodian Name	<input type="text"/>
PID	<input type="text"/>
External Reference Number	<input type="text"/>
CTM Reference (Optional)	<input type="text"/>

If you completed question 12, please go to question 18 Acknowledgements/Declaration.

13. Nominated Financial Institution Account

You must nominate a financial institution account in the name of, or including the name of the party shown in question 3 into which we will credit any funds withdrawn from your ANZ Bank Account. On request, cleared funds are remitted to this financial institution account as cheque withdrawals are not available.

Account Holder Name	<input type="text"/>
BSB Number	<input type="text"/> - <input type="text"/>
Account Number	<input type="text"/>

14. Tax File Number

Individual and joint accounts: please provide the Tax File Number (TFN) of each Account Holder signing.

Companies, funds or trust accounts: please provide the TFN of the entity.

The collection of TFN's is authorised by the Australian Taxation Office. It is not compulsory to quote a TFN, however if you choose not to, withholding tax will be applied at the highest rate. Should you choose to provide a TFN, we will pass it on to E*TRADE Australia, ANZ Bank and share registries with whom you hold securities.

Tax File Number – Account Holder 1 - - Or Exemption Code

Tax File Number – Account Holder 2 - - Or Exemption Code

15. Direct Debit

I/We authorise and request E*TRADE Australia to arrange for funds to be debited from my/our account at the financial institution identified in question 13.

I/We understand and acknowledge that:

1. My financial institution has absolute discretion to decide the order in which it will pay money under this request, or any other request, authority or mandate;
2. My financial institution has absolute discretion to refuse to honour this request at any time;
3. You may vary the amount or frequency of future debits to meet amounts payable under the product;
4. This request operates on the terms of the attached Direct Debit Service Agreement.

Yes No

16. CHESS Sponsorship Transfer

Complete only when transferring sponsorship to E*TRADE Australia.

I/We am/are currently sponsored on CHESS by another broker or have issuer sponsored securities but would prefer to hold some or all of my/our securities with E*TRADE Australia sponsorship. Please read the CHESS Sponsorship Terms (contained within the Trading Terms and Conditions) and if you agree with the terms contained therein, complete this section.

Broker Sponsored Holdings (please attach a copy of your CHESS holding statement)

Name of Existing Sponsoring Broker HIN to be transferred

CHESS Registered Account Name

If you complete this section your HIN and all holdings on the HIN will be transferred from your existing broker to E*TRADE Australia.

To transfer selected holdings or issuer sponsored holdings complete the Broker to Broker Transfer or Issuer Sponsored Conversion forms.

Please note, transfers may require you to re-notify the share registries of your instructions regarding dividend reinvestment plans and Tax File Numbers. The account name and address with your existing broker must be EXACTLY the same as your account name and address with E*TRADE Australia.

17. Dividend Direction

Only applicable if distribution is paid into the E*TRADE ANZ Cash Investment Account.

Please tick.

I/We hereby authorise and request E*TRADE Australia to instruct the share registries of any companies in which I hold shares to pay any dividends and other distributions directly into my/our E*TRADE ANZ Cash Investment Account. These instructions apply for all existing holdings and future holdings. Please note:

- This dividend direction applies only to shares held in the account name below which are Broker Sponsored by E*TRADE Australia.
- These instructions will override all previous instructions that you have provided to share registries regarding payment of dividends.
- If you wish to use an account other than your E*TRADE Australia Settlement Account for the direct crediting of dividends, you will need to liaise directly with the relevant share registries.
- This form operates as a standing authorisation and instruction by you to E*TRADE Australia in relation to any shares that you purchase through E*TRADE Australia at any time after the date of this form. E*TRADE Australia will provide your E*TRADE Australia Settlement Account details to the relevant registry at the time of purchasing the stock for you.
- You may cancel your Dividend Direction Request at any time by a written confirmation.

18. Acknowledgements/Declaration

1. I/We acknowledge having received, read and understood the Trading Terms and Conditions, Financial Services Guide, Direct Debit Service Agreement (if applicable) and ANZ Privacy Policy.
2. I/We have received, read and understood the CHESS Sponsorship Agreement and agree to be bound by its terms and conditions (applicable if E*TRADE Australia is sponsoring the HIN).
3. I/We enter into this agreement on the Trading Terms and Conditions as updated from time to time or included within the account application package should it have been dispatched to me/us by mail. By signing this agreement I/we agree to be bound by these Trading Terms and Conditions.
4. I/We authorise E*TRADE Australia to open a Bank Account as Account Holder and trustee of which I/we are beneficiaries for the purpose of settling share transactions on the account (applicable for opening an E*TRADE ANZ Cash Investment Account).
5. I/We authorise to give effect to my instructions regarding execution and settlement of my/our securities transactions. I will be bound by all such instructions.

For Company/Partnership/Trust (Referring to the Know Your Customers section)

I/We certify that; I/We understand and agree to all matters specified in this form and this declaration; the place of establishment/registration of the Company/Partnership/Trust specified in this form is accurate and can be relied upon by E*TRADE Australia; the nature of business specified in this form generates at least 50% of Company's/Partnership/Trust gross income; and all other information provided in this form is true and correct.

Anti-Money Laundering and Sanctions

The Client agrees that E*TRADE Australia may delay, block or refuse to process any transaction without incurring any liability if E*TRADE Australia suspects that:

- a. the transaction may breach any laws or regulations in Australia or any other country;
- b. the transaction involves any person (natural, corporate or governmental) that is itself sanctioned or is connected, directly or indirectly, to any person that is sanctioned under economic and trade sanctions imposed by the United States, the European Union or any country; or
- c. the transaction may directly or indirectly involve the proceeds of, or be applied for the purposes of, unlawful conduct.

The Client must provide all information to E*TRADE Australia which E*TRADE Australia reasonably requires in order to manage money-laundering or terrorism-financing and economic and trade sanctions risk or to comply with any laws or regulations in Australia or any other country. Unless the Client has disclosed that it is acting in a trustee capacity or on behalf of another party, the Client warrants that it is acting on its own behalf in signing this Application Form. The Client declares and undertakes to E*TRADE Australia that the processing of any transaction by E*TRADE Australia in accordance with the Client's instructions will not breach any laws or regulations in Australia or any other country.

19. Signatory Requirements

Signature	<input type="text"/>	Date	<input type="text"/>
Name	<input type="text"/>		
Title (if company)	<input type="text"/>		
Signature	<input type="text"/>	Date	<input type="text"/>
Name	<input type="text"/>		
Title (if company)	<input type="text"/>		
Signature	<input type="text"/>	Date	<input type="text"/>
Name	<input type="text"/>		
Title (if company)	<input type="text"/>		

For joint applicants, please indicate signatory requirements for all written instructions (please tick one)

- Either applicant to sign All applicants to sign

E*TRADE Australia Direct Debit Service Agreement.

This agreement sets out the terms on which you have authorised E*TRADE Australia to arrange for amounts owing to E*TRADE Australia, to be made by deduction from your account at the **approved financial institution**.

1. You will need to complete the Direct Debit Request in the Application Form to use the E*TRADE Australia trading facility provided by us (the 'Service').
2. By the Direct Debit Request, you authorise us to arrange for amounts that become payable to E*TRADE Australia under the Service, to be made by deduction from your account at the **approved financial institution** written on your application form.
3. Your Direct Debit Request allows us to arrange for payment to us for the amounts on the trade day or other nominated times, as required by the Trading Terms and Conditions ('Conditions') of the Service including all amounts in relation to your trading instructions or your adviser's trading instructions to us.
4. You can cancel your Direct Debit Request by calling us on 1300 363 241 8:30 am to 5:00 pm AEST weekdays. We will require 6 working days to process your cancellation request (in some cases, we will also need your written confirmation). You or your adviser cannot, however, vary, defer or suspend it, or stop or suspend an individual debit from taking place under it.
5. Once you have asked us to cancel your Direct Debit Request:
 - We will cancel any outstanding buy orders that have been approved on the basis of accessing funds via direct debit;
 - We can still use the Direct Debit Request to process any filled, but unsettled, buy orders for another 6 working days; and
 - You will not be able to give further buy orders without cleared funds in your E*TRADE ANZ Cash Investment Account or until we have received a replacement Direct Debit Request.
6. Debits will be processed in accordance with the Conditions of the Service. If a due date for a debit falls on a weekend or public holiday, the debit will be processed on the next settlement day. Please contact us if you are uncertain when a debit will be processed to your account.
7. You must ensure that you have sufficient **cleared funds** available in the nominated account by the due date to permit the payments under the Direct Debit Request as required by the Conditions of the Service.

IMPORTANT Information: The funds will be drawn on trade day. Please ensure that when placing an at limit order that cleared funds are maintained in the account at the approved financial institution, during the entire life of the order. Insufficient cleared funds in your nominated financial institution account e.g. an uncleared cheque deposit will result in the drawing being unsuccessful.

8. If a drawing is unsuccessful you or your adviser will need to transfer cleared funds to the E*TRADE ANZ Cash Investment Account by the settlement date.
9. Please contact E*TRADE Australia on 1300 363 241 if you have any questions about your Direct Debit Request, such as concerns about a debit that we make under it. We will reply to you within seven (7) days.
10. We can vary this Service Agreement at any time after giving you 14 days notice of the changes.
11. We will keep information about your financial institutions account confidential, except to the extent necessary to resolve any claim you might make relating to a debit which you claim has been made incorrectly.
12. Please ensure that your **approved financial institution** allows direct debits on your nominated account.

E*TRADE Broking Services

Know Your Customers.

This KYC (Know Your Customers) document must be completed for all new clients in order to activate a new account. It covers a range of client types, all of which are listed here:

- Individuals
- Joint Account Holders
- Companies (Domestic & Foreign)
- Sole Traders
- Partnerships
- Associations
- Trusts with Individual Trustee(s)
- Trusts with Company Trustee(s)
- Trusts with a combination of Individual Trustee(s) and Company Trustee(s)

To complete this document you should first determine the type of client that you are signing up (e.g. a Trust with an Individual Trustee). You can then use the table below to determine which sections need to be completed.

All fields within each section are compulsory unless stated otherwise.

Incorrectly completed forms will be rejected and may delay the opening of your clients account.

Once you have completed this form, it should be returned along with your clients completed and signed Application Form and all required Certified Copies to your Account Service Manager for processing.

Client Type	Required Sections	Sections to complete	Certified copies of proof of identity documents required
Individuals	The individual only (no others allowed).	7	<ul style="list-style-type: none"> • Identification for each individual.
Joint Accounts	Both individuals only (no others allowed).	7	<ul style="list-style-type: none"> • Identification for each individual.
Companies	One or two Directors or authorised corporate representatives.	2 & 7	<ul style="list-style-type: none"> • Identification for each director and signatory. • Identification for each beneficial owner. • Identification for the senior managing official (if applicable). • Basic ASIC company search.
Trusts with Individual Trustee(s)	At least one individual trustee.	4 & 7	<ul style="list-style-type: none"> • Identification for each trustee. • Identification for each beneficial owner. • Trust deed or a certified copy/extract – including full name of trust, full name of trustees and date of execution of the trust deed.
Trusts with Company Trustee(s)	One or two authorised corporate representatives.	2, 4 & 7	<ul style="list-style-type: none"> • Identification for each director and signatory. • Identification for each beneficial owner of the company trustee. • Identification for the senior managing official of the company trustee (if applicable). • Basic ASIC company search. • Identification for each beneficial owner of the trust. • Trust deed or a certified copy/extract – including full name of trust, full name of trustees and date of execution of the trust deed.
Trusts with Combination Trustee(s)	One individual trustee and one authorised corporate representative.	2, 4 & 7	<ul style="list-style-type: none"> • Identification for each director and signatory. • Identification for each beneficial owner of the company trustee. • Identification for the senior managing official of the company trustee (if applicable). • Basic ASIC company search. • Identification for each trustee. • Identification for each beneficial owner of the trust. • Trust deed or a certified copy/extract – including full name of trust, full name of trustees and date of execution of the trust deed.
Sole Traders	The sole trader only (no others allowed).	3 & 7	<ul style="list-style-type: none"> • Identification for each individual.
Partnerships	At least one partner.	5 & 7	<ul style="list-style-type: none"> • Identification for each individual and company • Identification for each beneficial owner and senior managing official (if applicable) • Verification of the partnership name such as a: <ul style="list-style-type: none"> – Partnership agreement; – Australian Partnership Taxation Return; or – Minutes of a meeting confirming the attendance and approval from an authorised representative.

Client Type	Required Sections	Sections to complete	Certified copies of proof of identity documents required
Associations	At least one association member.	6 & 7	<ul style="list-style-type: none"> • Identification for each office bearer. • Identification for each beneficial owner. • Verification of the association name, type of association and registered ID number such as a: <ul style="list-style-type: none"> – Basic ASIC company search; – Search documentation from the responsible registering body; – Constitution or rules of the association; – Minutes of association meeting or a certified copy/extract; or – Reliable and independent documents or register maintained by the registered cooperative.

1. Identification Requirements

All signatories, directors, trustees, beneficial owners or senior managing officials (if applicable) and office bearers for this account must provide one (1) identity document from 'A' below, or two (2) from 'B' below.

Note:

- Documents must be current unless otherwise specified and may be Australian or foreign except where otherwise specified.
- Photocopies must be clear and legible.

A – Primary Government issued photographic ID documents

- Australian state/territory photographic driver's licence or learner's permit;
- Australian passport (current or has expired within the past two years);
- Foreign passport;
- Australian state/territory Government issued proof of age card;
- Government issued National Identification card;
- Australian Department of Defence identification card;
- Australian Army, Navy or Air-Force identification card;
- Australian Police Officer identification card;
- Australian firearms/shooting licence;
- Australian explosives licence; or
- Australian waterways/boat licence.

B – Secondary ID documents

- Government issued birth certificate, birth card, birth extract;
- Citizenship certificate;
- Foreign driver's licence;
- Australian Centrelink pension card including:
 - Health and Veterans Affairs card;
 - Pensioner Concession cards (including interim cards);
- Notice issued by the Australian Tax Office (ATO) within preceding 12 months recording debt payable/ refund due by/to the person at the stated address;
- Notice issued within last three months by a local government body or a utility provider (Electricity, Gas, Water) containing the name of the individual and their residential address recording provision of services to that address or person;
- Notice issued by an Australian approved aged care facility detailing the resident's name and residential address;
- Notice issued within last 12 months by Australian Commonwealth, State or Territory, recording provision of financial benefits to person at the stated address;
- Letter issued by the Australian Electoral Commission within the last three months, confirming name and residential address;
- Another Australian bank account statement issued within last three months. (The bank must be a member of Australian Banking Association);
- Bank statement issued by an ANZ point of representation within the last three months;
- Australian Medicare card; or
- Australian ImmiCards:
 - Evidence of Immigration Status (EIS) ImmiCard;
 - Permanent Resident Evidence (PRE) ImmiCard; and
 - Residence Determination ImmiCard (RDI).

1. Identification Requirements (continued)

Certify your ID

Below is a list of persons authorised to certify copies of documentation under the anti-money laundering legislation (“**Approved Certifier**”). Unless specified, an approved certifier must be either an Australian citizen or permanent resident of Australia.

Please note: An original certified copy of the identity documents referred to on page 8 must be provided and certification must have taken place within three months of submitting this application.

- A person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner;
- Judge of a court;
- Magistrate;
- Chief executive officer of a Commonwealth court;
- Registrar or deputy registrar of a court;
- Justice of the Peace;
- Notary Public;
- Police Officer;
- Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public;
- Permanent employee of the Australian Postal Corporation with two or more years of continuous service who is employed in an office supplying postal services to the public;
- Australian consular officer or an Australian diplomatic officer (within the meaning of the *Consular Fees Act 1955*);
- Officer with two or more continuous years service with one or more Australian financial institutions (for the purposes of the *Statutory Declaration Regulations 1993*) or overseas financial institutions with which ANZ has an existing correspondent banking relationship;
- Officer with, or authorised representative of, a holder of an Australian financial services licence, having two or more continuous years of service with one or more licensees;
- Member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants; or
- Pharmacist.

IMPORTANT – For the certifier

We recommend you certify in the following manner:

Example

“I certify that this is a true copy of the original”

John Smith 01/01/2016
Signature Date

John Smith
Full name of certifier

Chartered Accountant
Title/authority to certify

CPA#12345
Professional membership number (if applicable)

(02) 9888 8888
Phone number of certifier

Remember:

- Certification **MUST** appear on the same side as image.
- Sticker certifications will not be accepted.
- The certifier must include their title/authority to certify.

For multiple page documents:

- The first page of the document must be certified as follows: “I certify this and the following <xx> pages are a true copy of the original sighted by me”. The certifier should then sign or initial each page of the copy and number as Page 1 of <xx> etc **OR**
- All pages of the certified document are certified as individual pages.

2. Company Details

Complete this section for companies and company trustees.

Registered company name	<input type="text"/>
Principal place of business address (if any)	<input type="text"/>
Registered office address	<input type="text"/>
	(in country of establishment)
Nature of business activities	<input type="text"/>
	(Generates at least 50% of Gross Revenue)
Country of incorporation	<input type="text"/>

Full name and date of birth of all directors (include address for foreign companies)

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

Beneficial owner (mandatory)

A beneficial owner is an individual who ultimately, directly or indirectly, owns or has control, through one or more shareholdings, of 25% or more of the shares or voting rights.

If there are no such individuals, please provide details of any individual who exercises control (directly or indirectly) through:

- the ultimate authority to make financial and operating decisions on a day-to-day basis; or
- authority to control the decisions and operations of the association through a power of veto; or
- entitlement on dissolution to 25% or more of the property of the partnership.

An individual will have control if they hold the relevant rights or powers directly, or indirectly through a chain of ownership or by means of trusts, agreements, arrangements, understanding and practices.

Please note: If there is no beneficial owner, a senior managing official must be provided below.

Beneficial Owner 1

Full name	<input type="text"/>	Date of birth (dd/mm/yyyy)	<input type="text"/>
Residential address	<input type="text"/>		

Beneficial Owner 2

Full name	<input type="text"/>	Date of birth (dd/mm/yyyy)	<input type="text"/>
Residential address	<input type="text"/>		

Beneficial Owner 3

Full name	<input type="text"/>	Date of birth (dd/mm/yyyy)	<input type="text"/>
Residential address	<input type="text"/>		

Beneficial Owner 4

Full name	<input type="text"/>	Date of birth (dd/mm/yyyy)	<input type="text"/>
Residential address	<input type="text"/>		

Senior managing official of the company

Complete this section if no beneficial owners for the company have been provided above.

A senior managing official is an individual who makes or participates in key decisions for the company or can significantly affect the financial standing of the company (e.g. CEO, CFO, COO, president, treasurer, managing director).

Full name	<input type="text"/>	Date of birth (dd/mm/yyyy)	<input type="text"/>
Residential address	<input type="text"/>		
Role	<input type="text"/>		

2. Company Details (continued)

Select One Registration Status

- Australian Public Company Please select Unlisted Listed
- Australian Proprietary Company
- Foreign Company Registered in Australia
- Foreign Company Registered Outside Australia

Company Type

ID Number

Attach the basic ASIC search or an equivalent foreign registration body extract confirming;

- Company Name
- ACN (or ABRN)
- Proprietary or Public
- Registration Number (if any)

3. Sole Trader Details

Complete this section for sole traders.

Full business name

Nature of business

(Generates at least 50% of Gross Revenue)

Principal place of
business address (if any)

4. Trust/Superfund Details

Complete this section for Trusts and Superannuation Funds. Ensure that at least one Individual Trustee is identified in section 1, if applicable, and at least one company trustee is identified in section 2, if applicable.

Full Trust Name

(e.g. XYZ Superannuation Fund)

Type of Trust

Discretionary/Family Trusts: protecting family or business assets for legal liability.

Unit Trusts: ownership of the trusts assets are split into shares or units giving a percentage of income, capital gains and voting powers to holders of the shares.

Hybrid Trusts: a combination of a discretionary and a unit trust, giving the trustee the power to divide ownership amongst beneficiaries.

Testamentary Trusts: created upon the death of an individual and used as a means of managing that persons assets.

Superannuation Funds

Minors

Country of establishment

Registered office address

(in country of establishment)

Nature of business activities

(Generates at least 50% of Gross Revenue)

4. Trust/Superfund Details (continued)

Full name and registered address of all Trustee/s

Full name of all Beneficiaries (and percentage ownership if applicable)

Beneficial owner of the trust (mandatory)

Note: Beneficial Owner, Controller and Settlor of trust is not required for regulated trusts. Regulated trusts include SMSFs, Government superannuation funds, & registered managed investment schemes.

A beneficial owner is an individual who exercises direct or indirect control over the trust arrangement.

This includes the following individuals:

- The appointer or protector
- Any other individual who can appoint/remove trustees or add/remove beneficiaries
- Trustees who have discretion over how to distribute trust property (or where the trustee is a company, the individuals who own or control the trustee, including through a chain of ownership or control)
- Any individual who can direct or veto the decisions of the trustee(s).

Beneficial Owner 1

Full name Date of birth (dd/mm/yyyy)
Residential address

Beneficial Owner 2

Full name Date of birth (dd/mm/yyyy)
Residential address

Beneficial Owner 3

Full name Date of birth (dd/mm/yyyy)
Residential address

Beneficial Owner 4

Full name Date of birth (dd/mm/yyyy)
Residential address

Settlor of trust

A Settlor is the person who created the trust; and an example of the Settlor may be (for the avoidance of doubt, not in all cases) an Accountant or Lawyer.

Full Name

Attach a certified copy of the trust deed or an extract of the trust deed showing;

- Full Trust Name
- Execution Date
- Full Name & Signature of all Trustee(s)
- Full Name & Signature of all Beneficiary(s)
- Settlor of Trust

5. Partnership Details

Complete this section for all partnerships.

Full partnership name

Full registered business name
(if any)

Principal place of business

Registration number
(if applicable)

Name of professional association of which the partnership is a member
(if applicable)

Nature of business
(Generates at least 50% of Gross Revenue)

Country of establishment

Registered office address
(in country of establishment)

Full name and residential address of all partners

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

Beneficial owner (mandatory)

A beneficial owner is an individual who ultimately, directly or indirectly, owns or has control, through one or more shareholdings, of 25% or more of the shares or voting rights.

If there are no such individuals, please provide details of any individual who exercises control (directly or indirectly) through:

- the ultimate authority to make financial and operating decisions on a day-to-day basis; or
- authority to control the decisions and operations of the association through a power of veto; or
- entitlement on dissolution to 25% or more of the property of the partnership.

An individual will have control if they hold the relevant rights or powers directly, or indirectly through a chain of ownership or by means of trusts, agreements, arrangements, understanding and practices.

Please note: If there is no beneficial owner, a senior managing official must be provided in Step 5 below.

Beneficial Owner 1

Full name Date of birth (dd/mm/yyyy)

Residential address

Beneficial Owner 2

Full name Date of birth (dd/mm/yyyy)

Residential address

Beneficial Owner 3

Full name Date of birth (dd/mm/yyyy)

Residential address

Beneficial Owner 4

Full name Date of birth (dd/mm/yyyy)

Residential address

5. Partnership Details (continued)

Senior managing official

Complete this section if no beneficial owners for the association have been provided above.

A senior managing official is an individual who makes or participates in key decisions for the association or can significantly affect the financial standing of the company (e.g. CEO, CFO, COO, president, treasurer, managing director).

Full name	<input type="text"/>	Date of birth (dd/mm/yyyy)	<input type="text"/>
Residential address	<input type="text"/>		
Role	<input type="text"/>		

Attach a certified copy of one of the below documents confirming the partnership name:

- Partnership Agreement, or
- Australian Partnership Taxation Return, or
- Minutes of a meeting confirming the attendance and approval from an authorised representative.

6. Associations

Complete this section for all Associations.

Full Association name	<input type="text"/>
Registered unique identifying number	<input type="text"/>
	(if any)
Full name of the Chairman	<input type="text"/>
	(or equivalent)
Full name of the Secretary	<input type="text"/>
	(or equivalent)
Full name of the Treasurer	<input type="text"/>
	(or equivalent)
Full address of the association's principal place of administration	<input type="text"/>
	(not a P.O. Box)
Nature of business activities	<input type="text"/>
	(Generates at least 50% of Gross Revenue)
Place of establishment or registration	<input type="text"/>
	(Country)

Beneficial owner (mandatory)

A beneficial owner is an individual who ultimately, directly or indirectly, owns or has control, through one or more shareholdings, of 25% or more of the shares or voting rights.

If there are no such individuals, please provide details of any individual who exercises control (directly or indirectly) through:

- the ultimate authority to make financial and operating decisions on a day-to-day basis; or
- authority to control the decisions and operations of the association through a power of veto; or
- entitlement on dissolution to 25% or more of the property of the association.

An individual will have control if they hold the relevant rights or powers directly, or indirectly through a chain of ownership or by means of trusts, agreements, arrangements, understanding and practices.

Please note: If there is no beneficial owner, a senior managing official must be provided in Step 6 below.

6. Associations (continued)

Beneficial Owner 1

Full name Date of birth (dd/mm/yyyy)

Residential address

Beneficial Owner 2

Full name Date of birth (dd/mm/yyyy)

Residential address

Beneficial Owner 3

Full name Date of birth (dd/mm/yyyy)

Residential address

Beneficial Owner 4

Full name Date of birth (dd/mm/yyyy)

Residential address

Senior managing official

Complete this section if no beneficial owners for the association have been provided above.

A senior managing official is an individual who makes or participates in key decisions for the association or can significantly affect the financial standing of the company (e.g. CEO, CFO, COO, president, treasurer, managing director).

Full name Date of birth (dd/mm/yyyy)

Residential address

Role

Attach a certified copy of one of the below documents verifying the Association Name and Registered ID Number;

- Constitution/Rules
- Minutes of a meeting of the Association
- Information provided by ASIC or the state, territory or overseas body responsible for the association
- Reliable and independent documents or electronic data.

7. Adviser Declaration

Complete this section for all accounts.

I declare to E*TRADE Australia that:

- I have satisfied the verification requirement in this KYC schedule.
- I have collected all client & account holder information disclosed in this KYC Schedule from an Authorised Representative of the client named in the Application Form.
- I have checked that all required account holders are included & all required documents are attached and have used original or certified copies provided by the client. Where photographic identification is used in the presence of the client, I have confirmed in the presence of the client that the photograph of the client is a reasonable likeness of the client.
- I have verified the full name, address and/or date of birth of all Account Holders.
- For Companies & Company Trustees I have completed the free ASIC search available online and confirmed the full company name & ACN as well as verified & indicated if the Company is Proprietary or Public.

Adviser Name

Position

Signature X Date

Please note: if the account applicant and the adviser is the same person, another authorised person from the Intermediary is required to sign this form.