

AMP Business Finance Application Form

Loan Approval – The loan application approval process involves consideration of the proposal and assessment of this application form and all required supporting documentation by AMP Bank.

Applicants should seek independent taxation, legal and financial advice, as well as undertaking their own due diligence when seeking to acquire an additional practice or register.

If you have any questions while filling out your application, feel free to call your AMP Relationship Manager. They'll be happy to help.

Please print in CAPITAL LETTERS and place a tick ☒ in any applicable boxes.

Financial planning licensee/
Mortgage broker aggregator

Please ensure that all questions are answered. If a question is not applicable please write 'N/A'. If the second applicant's details are the same as the first please write 'SAME'. Borrowers should seek independent taxation, legal and financial advice.

Type of Borrower

Company	Complete Sections 1 and 5-21
Trust	Complete Section(s) 1 (only if Trustee is a company), 2 and 5-21
Individual (sole trader)	Complete Sections 3 and 5-21
Partnership	Complete Sections 4 and 5-21

Sections **1, 2, 3, 4, 6A, 6B, 10A, 10B** or **10C** of the application form should be photocopied and completed where necessary if there are more than two applicants or additional space is required for directors/trustees/beneficiaries names.

1. Company details

1.1 General information

Please complete all company details below.

What is your company registered as?

Public Company Proprietary Company

Director details must be completed under Connecting party details section.

Full name of company (as registered by ASIC)			
Australian Company Number (ACN)			
Australian Business Number (ABN)			
Number of Directors			
How many Beneficial Owners or Controlling Persons does your company have?			
Registered office address in Australia (a PO Box is not acceptable)			
Suburb	State	Postcode	
Country			

Is the principal place of Business address the same as above?

Yes No

Principal place of Business

Principal place of Business address (a PO Box is not acceptable)			
Suburb	State	Postcode	
Country			

Is the mailing address the same as above? Yes No

Mailing address

Mailing address			
Suburb	State	Postcode	
Country			

Is the entity a financial institution? Yes No

Is it an investment entity in a non-participating CRS jurisdiction and managed by another financial institution? Yes No

Is the entity a publicly listed company, majority owned subsidiary of a publicly listed company, international organisation, central bank or deceased estate? Yes No

Is the entity a Foreign Tax Resident? Yes No

You must answer **Yes** if the entity is both a foreign and Australian tax resident. The ATO website provides residency test calculators to help determine tax residency, and information on the Common Reporting Standard (CRS) and the Foreign Account Tax Compliance Act (FATCA). Additional information about CRS and FATCA can be found on the OECD and IRS websites respectively ([oecd.org](https://www.oecd.org), [ato.gov.au](https://www.ato.gov.au) and [irs.gov](https://www.irs.gov)).

Issue date: November 2024

1. Company details (continued)

1.1 General information (continued)

The entity is a tax resident of the following countries:

Country of Foreign Tax Residency, if more than one Foreign Tax Residency, fill in the next row for each

Is the entity an Active NFE? Yes No

An Active NFE includes an entity that is not a financial institution and derives less than 50% of its gross annual income from passive means (eg dividends, interest, royalties), and less than 50% of the assets held produce, or are held to produce, the passive income. For details of other Active NFE categories, refer to Section VIII of the Common Reporting Standard (CRS) – see ‘Standard for Automatic Exchange of Financial Account Information’ on the OECD website (oecd.org).

Does your company trade under a business or other name(s)? Yes No

Space provided below for up to two different business or trading names. If more space is required, please copy this form.

i) If ‘Yes’, please provide trading name

Is this name registered? Yes No

If ‘Yes’, who is it registered with?

Registration No.

1.2 Contact details – please provide details for the primary contact person

Number of employees
(excluding directors)

(Brokers/
Advisers)

(Admin staff)

Contact name

Position

Phone number

Email

Mobile number

1. Company details (continued)

1.3 Connected Party details

Please complete the below. One person may occupy multiple roles – use the check boxes to indicate which roles apply to each person. If your company is registered as a proprietary company, please complete for all directors of the company.

Beneficial owners are people who ultimately own 25% or more of the company's capital issued to shareholders. If no shareholders meet this definition, then provide details for the people who indirectly or directly control your company (Controlling Persons) through either the authority to make decisions about financial or operating policies or voting rights of 25% or more or power of veto. If this person can't be identified, provide details of the senior official(s) such as the Managing Director.

Details of ALL Directors, Signatories, and Beneficial Owners OR Controlling Persons MUST be supplied below. Certified ID MUST be supplied for all signatories and Beneficial Owners OR Controlling Persons. Directors who are also signatories MUST provide certified ID.

We will not accept applications where all connected parties are not provided below.

If there are more than four connected parties, please copy this page and attach as a separate sheet.

1.3 Connected Party details – Person 1

Title	
Surname (last name)	
First name	
Middle name(s)	

Role(s)

<input type="checkbox"/> Authorised Signatory (ID required)	<input type="checkbox"/> Director	<input type="checkbox"/> Controlling Person of Company Trustee (ID required)
<input type="checkbox"/> Controlling Person of Trust (ID required)	<input type="checkbox"/> Director ¹ will sign form (ID required)	<input type="checkbox"/> Beneficial Owner (ID required)
<input type="checkbox"/> Controlling Person (ID required)		

¹Unless that person is the sole Director/Secretary of the company, a minimum of two Directors or a Director and Company Secretary will need to sign this form.

If Director only, please proceed to next section. All other connected parties to respond to the rest of this section.

Date of birth			
Residential address (a PO Box is not acceptable)			
Suburb		State	Postcode
Australian mobile number	()		
Preferred contact number			
Email			

Are you a Foreign Tax Resident? Yes No

Foreign Tax Resident details

If you are a foreign tax resident and also a taxpayer in Australia, you should answer **Yes**.

All foreign tax residents and US citizens and resident alien individuals (ie green card test and substantial presence test) should answer **Yes**.

The ATO website provides residency test calculators to help you determine your tax residency, and information on the Common Reporting Standard (CRS) and the Foreign Account Tax Compliance Act (FATCA). Additional information about CRS and FATCA can be found on the OECD and IRS websites respectively (oecd.org, ato.gov.au and irs.gov).

Full name of customer	
I am a tax resident of the following countries	
Country of Foreign Tax Residency	

1. Company details (continued)

1.3 Connected Party details – Person 1 (continued)

The reason my TIN is not available is:

- A. The country of my tax residence does not issue TINs
- B. The country of my tax residence issues a TIN but I currently cannot provide it
- C. The country of my tax residence does not require a TIN to be disclosed.

1.3 Connected Party details – Person 2

Title	
Surname (last name)	
First name	
Middle name(s)	

Role(s)

Authorised Signatory (ID required) Director Controlling Person of Company Trustee (ID required)
Controlling Person of Trust (ID required) Director¹ will sign form (ID required) Beneficial Owner (ID required)
Controlling Person (ID required)

¹Unless that person is the sole Director/Secretary of the company, a minimum of two Directors or a Director and Company Secretary will need to sign this form.
If Director only, please proceed to next section. All other connected parties to respond to the rest of this section.

Date of birth			
Residential address (a PO Box is not acceptable)			
Suburb		State	Postcode
Australian mobile number	()		
Preferred contact number			
Email			

Are you a Foreign Tax Resident? Yes No

Foreign Tax Resident details

If you are a foreign tax resident and also a taxpayer in Australia, you should answer **Yes**.

All foreign tax residents and US citizens and resident alien individuals (ie green card test and substantial presence test) should answer **Yes**.

The ATO website provides residency test calculators to help you determine your tax residency, and information on the Common Reporting Standard (CRS) and the Foreign Account Tax Compliance Act (FATCA). Additional information about CRS and FATCA can be found on the OECD and IRS websites respectively (oecd.org, ato.gov.au and irs.gov).

Full name of customer	
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I am a tax resident of the following countries

Country of Foreign Tax Residency	
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1. Company details (continued)

1.3 Connected Party details – Person 3

Title	
Surname (last name)	
First name	
Middle name(s)	

Role(s)

Authorised Signatory (ID required) Director Controlling Person of Company Trustee (ID required)
Controlling Person of Trust (ID required) Director¹ will sign form (ID required) Beneficial Owner (ID required)
Controlling Person (ID required)

¹Unless that person is the sole Director/Secretary of the company, a minimum of two Directors or a Director and Company Secretary will need to sign this form.
If Director only, please proceed to next section. All other connected parties to respond to the rest of this section.

Date of birth			
Residential address (a PO Box is not acceptable)			
Suburb		State	Postcode
Australian mobile number	()		
Preferred contact number			
Email			

Are you a Foreign Tax Resident? Yes No

Foreign Tax Resident details

If you are a foreign tax resident and also a taxpayer in Australia, you should answer **Yes**.

All foreign tax residents and US citizens and resident alien individuals (ie green card test and substantial presence test) should answer **Yes**.

The ATO website provides residency test calculators to help you determine your tax residency, and information on the Common Reporting Standard (CRS) and the Foreign Account Tax Compliance Act (FATCA). Additional information about CRS and FATCA can be found on the OECD and IRS websites respectively (oecd.org, ato.gov.au and irs.gov).

Full name of customer	
I am a tax resident of the following countries	
Country of Foreign Tax Residency	

1. Company details (continued)

1.3 Connected Party details – Person 4

Title	
Surname (last name)	
First name	
Middle name(s)	

Role(s)

Authorised Signatory (ID required) Director Controlling Person of Company Trustee (ID required)
Controlling Person of Trust (ID required) Director¹ will sign form (ID required) Beneficial Owner (ID required)
Controlling Person (ID required)

¹Unless that person is the sole Director/Secretary of the company, a minimum of two Directors or a Director and Company Secretary will need to sign this form.
If Director only, please proceed to next section. All other connected parties to respond to the rest of this section.

Date of birth			
Residential address (a PO Box is not acceptable)			
Suburb		State	Postcode
Australian mobile number	()		
Preferred contact number			
Email			

Are you a Foreign Tax Resident? Yes No

Foreign Tax Resident details

If you are a foreign tax resident and also a taxpayer in Australia, you should answer **Yes**.

All foreign tax residents and US citizens and resident alien individuals (ie green card test and substantial presence test) should answer **Yes**.

The ATO website provides residency test calculators to help you determine your tax residency, and information on the Common Reporting Standard (CRS) and the Foreign Account Tax Compliance Act (FATCA). Additional information about CRS and FATCA can be found on the OECD and IRS websites respectively (oecd.org, ato.gov.au and irs.gov).

Full name of customer	
I am a tax resident of the following countries	
Country of Foreign Tax Residency	

2. Trust details

2.1 General information

Please select your customer type:

Individual as Trustee (if selected please complete 2.2 below)

Company as Trustee (if selected please complete section 1.1 above, and then proceed from 2.3 below)

Full name of Trust

Discretionary Trust

Family Trust

Unit Trust

Testamentary Trust

Fixed

Trust

Other

Full business name (if any) of the Trustee in respect of the Trust

Country where Trust was established

Is the entity a financial institution? Yes No

Is it an investment entity in a non-participating CRS jurisdiction and managed by another financial institution? Yes No

Is the entity a publicly listed company, majority owned subsidiary of a publicly listed company,
international organisation, central bank or deceased estate? Yes No

Is the entity a Foreign Tax Resident? Yes No

You must answer **Yes** if the entity is both a foreign and Australian tax resident. The ATO website provides residency test calculators to help determine tax residency, and information on the Common Reporting Standard (CRS) and the Foreign Account Tax Compliance Act (FATCA). Additional information about CRS and FATCA can be found on the OECD and IRS websites respectively (oecd.org, ato.gov.au and irs.gov).

The entity is a tax resident of the following countries:

Country of Foreign Tax Residency, if more than one Foreign Tax Residency, fill in the next row for each.

Country of Foreign Tax Residency, if more than one Foreign Tax Residency, fill in the next row for each

2. Trust details (continued)

2.1 General information (continued)

Is the entity an Active NFE? Yes No

An Active NFE includes an entity that is not a financial institution and derives less than 50% of its gross annual income from passive means (eg dividends, interest, royalties), and less than 50% of the assets held produce, or are held to produce, the passive income. For details of other Active NFE categories, refer to Section VIII of the Common Reporting Standard (CRS) – see 'Standard for Automatic Exchange of Financial Account Information' on the OECD website (oecd.org).

Number of Trustees

Trust ABN

2.2 Connected Party details

Complete details below for each Account Signatory, each Individual Trustee, Beneficial Owner or Controlling Person and Controlling Person of the Trust. Indicate each person(s) role (one person can occupy multiple roles) using the check boxes.

Beneficial owners* are people who ultimately own 25% or more of the entity.

Controlling Persons** – If no beneficial owners meet this definition, then provide details for the people who directly or indirectly control the trust. A person may control the trust through: the capacity to direct trustees, the ability to appoint or remove trustees, acting as trustee, or by way of trusts, agreements and practices.

If more than one connected party, please copy this page and attach as a separate sheet.

Title

Surname (last name)

First name

Middle name(s)

Date of birth

Residential address
(a PO Box is not acceptable)

Suburb

State

Postcode

Australian mobile number ()

Preferred contact number

Email

Role(s)

Individual Trustee (ID required)

Beneficial Owner (ID required) (unregulated trusts only)

Controlling Person (ID required) (unregulated trusts only)

Signatory (ID required)

Are you a Foreign Tax Resident?

Yes No

Foreign Tax Resident details

If you are a foreign tax resident and also a taxpayer in Australia, you should answer **Yes**.

All foreign tax residents and US citizens and resident alien individuals (ie green card test and substantial presence test) should answer **Yes**.

The ATO website provides residency test calculators to help you determine your tax residency, and information on the Common Reporting Standard (CRS) and the Foreign Account Tax Compliance Act (FATCA). Additional information about CRS and FATCA can be found on the OECD and IRS websites respectively (oecd.org, ato.gov.au and irs.gov).

Full name of customer

I am a tax resident of the following countries

Country of Foreign Tax Residency

2. Trust details (continued)

2.2 Connected Party details (continued)

The reason my TIN is not available is:

- A. The country of my tax residence does not issue TINs
- B. The country of my tax residence issues a TIN but I currently cannot provide it
- C. The country of my tax residence does not require a TIN to be disclosed.

2.3 Trust settlor details

Please select your customer type:

- A. Unit trust that does not have a settlor
- B. Testamentary Trust
- C. Trust has a Settlor

Provide the name of the settlor—the person who settled the initial sum to create the trust.

You'll need to provide a copy of the trust deed, or a certified extract, that includes the name of the settlor.

Individual settlor – provide details below:

Title	
Surname (last name)	
Given name(s)	

Company/Entity settlor – provide details below:

Full company name	
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I confirm the settlor is either unknown, deceased or has no continuing connection with the trust and after reasonable inquiry, the trustee has no reason to believe that the settlor is a foreign tax resident.

Yes No

Are you (the settlor) a Foreign Tax Resident?

Yes No

If yes, trust settlor is a tax resident of the following countries:

Country of Foreign Tax Residency	
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Applicable to Company/Entity Settlers who are Foreign Tax

Is the entity a financial institution?

Yes No

Is it an investment entity in a non-participating CRS jurisdiction and managed by another financial institution?

Yes No

Is the entity a publicly listed company, majority owned subsidiary of a publicly listed company, international organisation, central bank or deceased estate?

Yes No

2. Trust details (continued)

2.4 Trust beneficiary details

Please provide the name of each trust beneficiary as referenced in the trust.
(If the trust has more than four beneficiaries, attach a separate sheet).

Beneficiary 1

Individual settlor – provide details below:

Title	
Surname (last name)	
Given name(s)	

Company/Entity settlor – provide details below:

Full company name	
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Beneficiary 2

Individual settlor – provide details below:

Title	
Surname (last name)	
Given name(s)	

Company/Entity settlor – provide details below:

Full company name	
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Beneficiary 3

Individual settlor – provide details below:

Title	
Surname (last name)	
Given name(s)	

Company/Entity settlor – provide details below:

Full company name	
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Beneficiary 4

Individual settlor – provide details below:

Title	
Surname (last name)	
Given name(s)	

Company/Entity settlor – provide details below:

Full company name	
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Do the terms of the trust identify the beneficiaries as members of a beneficiary class (eg unit holders, family members of a named person, charitable organisation or cause)?

Yes – provide details below No

Name of beneficiary class	
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2. Trust details (continued)

2.4 Trust beneficiary details (continued)

Does the trust have any beneficiaries who are foreign tax residents and who will receive a distribution from the trust this year?

Yes No

Name of trustee beneficiary who is a foreign tax resident
(copy this page if more than one beneficiary is a foreign tax resident)

Residential address
(a PO Box is not acceptable)

Suburb

State

Postcode

Country

Date of birth

The beneficiary is a tax resident of the following countries:

Country of Foreign Tax Residency

3. Individual (Sole Trader) details

3.1 Sole Trader details

Title

Surname (last name)

First name

Middle name(s)

Are you commonly known by any other name? Yes No

Please provide details:

Title

Surname (last name)

First name

Middle name(s)

Date of birth

Occupation
(if retired, please specify)

Residential address
(a PO Box is not acceptable)

Suburb

State

Postcode

Country

Is the postal address the same as above? Yes No

3. Individual (Sole Trader) details (continued)

3.1 Sole Trader details (continued)

Postal address details

Postal address			
Suburb		State	Postcode
Country			
Home phone number			
Work phone number			
Australian mobile number	()		
Email			
Full business name of sole trader, if any (if applicable, please also attach a copy of your Certificate of Registration of Business Name)			
Australian Business Number (ABN), if any, for sole trader			
Number of employees			
Principal place of business address (for sole trader)			
Suburb		State	Postcode
Country			

3.2 Foreign Tax Resident details

Are you a Foreign Tax Resident? Yes No

Foreign Tax Resident details

If you are a foreign tax resident and also a taxpayer in Australia, you should answer **Yes**.

All foreign tax residents and US citizens and resident alien individuals (ie green card test and substantial presence test) should answer **Yes**.

The ATO website provides residency test calculators to help you determine your tax residency, and information on the Common Reporting Standard (CRS) and the Foreign Account Tax Compliance Act (FATCA). Additional information about CRS and FATCA can be found on the OECD and IRS websites respectively (oecd.org, ato.gov.au and irs.gov).

Full name of customer	
I am a tax resident of the following countries	
Country of Foreign Tax Residency	

4. Partnership details

Please complete all details below.

Full name of partnership			
Full registered business name (if any) of the partnership			
Country where partnership was established			
Residential address (a PO Box is not acceptable)			
Suburb	State	Postcode	
Country			

Is your partnership regulated by a professional association? Yes No

Name of professional association			
Membership details of the professional association			

Are there people who ultimately own 25% or more of the partnership, or are entitled to exercise 25% or more of the voting rights, including power of veto? Yes No

How many partners does your organisation have?

Partners that are an individual			
Partners that are a company			

If your partnership is regulated by a professional association and you are a current member of that association, then you only need to provide the connected parties details for the primary partner.

In all other cases, you need to provide details for ALL partners in Section 4.1.

Note: If any of the partners are a company, please populate section 1 of this form for each partner that is a company.

Is the entity a financial institution? Yes No

Is it an investment entity in a non-participating CRS jurisdiction and managed by another financial institution Yes No

Is the entity a publicly listed company, majority owned subsidiary of a publicly listed company, international organisation, central bank or deceased estate? Yes No

Is the entity a Foreign Tax Resident? Yes No

You must answer **Yes** if the entity is both a foreign and Australian tax resident. The ATO website provides residency test calculators to help determine tax residency, and information on the Common Reporting Standard (CRS) and the Foreign Account Tax Compliance Act (FATCA). Additional information about CRS and FATCA can be found on the OECD and IRS websites respectively (oecd.org, ato.gov.au and irs.gov).

The entity is a tax resident of the following countries

Country of Foreign Tax Residency (if more than one Foreign Tax Residency, fill in separate rows for each)			
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Is the entity an Active NFE? Yes No

An Active NFE includes an entity that is not a financial institution and derives less than 50% of its gross annual income from passive means (eg dividends, interest, royalties), and less than 50% of the assets held produce, or are held to produce, the passive income. For details of other Active NFE categories, refer to Section VIII of the Common Reporting Standard (CRS) – see ‘Standard for Automatic Exchange of Financial Account Information’ on the OECD website (oecd.org).

4. Partnership details (continued)

4.1 Personal details

If there are multiple connected parties, copy this page and attach for all connected parties.

Title			
Surname (last name)			
First name			
Middle name(s)			
Date of birth			
Residential address (a PO Box is not acceptable)			
Suburb	State	Postcode	
Country			
Australian mobile number	()		
Preferred contact number			
Email			

Role(s)

Authorised Signatory (ID required)

Partner (ID required)

Controlling Person (ID required)

Beneficial Owner (ID required)

Are you a Foreign Tax Resident?

Yes No

Foreign Tax Resident details

If you are a foreign tax resident and also a taxpayer in Australia, you should answer **Yes**.

All foreign tax residents and US citizens and resident alien individuals (ie green card test and substantial presence test) should answer **Yes**.

The ATO website provides residency test calculators to help you determine your tax residency, and information on the Common Reporting Standard (CRS) and the Foreign Account Tax Compliance Act (FATCA). Additional information about CRS and FATCA can be found on the OECD and IRS websites respectively (oecd.org, ato.gov.au and irs.gov).

Full name of customer	
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I am a tax resident of the following countries

Country of Foreign Tax Residency	
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5. Source of Wealth, Source of Funds and Nature and Purpose of Business Relationship for the Entity

Source of Wealth

How have you built your overall wealth?

Please select the most relevant option (select one only):

- Income from employment (ie regular and/or bonus).
- Investment income (eg rent, dividends, pension).
- Business income.
- One-off payment (eg matured investment, court settlement, redundancy, inheritance).
- Sale of assets (eg shares, property).
- Windfall (eg gift, lottery or gambling winnings).

Source of Funds

Please select the source of funds to service your account(s).

Please select the most relevant option (select one only):

- Income from employment (ie regular and/or bonus).
- Investment income (eg rent, dividends, pension).
- Business income.
- One-off payment (eg matured investment, court settlement, redundancy, inheritance).
- Sale of assets (eg shares, property).
- Windfall (eg gift, lottery or gambling winnings).
- Borrowed funds.
- Government benefits (eg childcare rebate, family tax benefit).

Nature and Purpose of Business Relationship

Why do you have your account(s)?

Please select the most relevant option (select one only):

- Everyday banking (eg regular deposits and withdrawals for everyday expenses).
- Business income (eg regular deposits and withdrawals for business expenses—usually for non-individuals).
- Savings income (eg regular deposits (with few withdrawals) earning interest to grow your balance).
- Building wealth (eg a large initial deposit—using investment returns to grow your wealth over time).

6A. Your personal details (to be completed by individuals or all directors/trustees where applicant is a company/trust)

Applicant 1

Director	Trustee	Individual
Title		
Surname (last name)		
First name		
Middle name(s)		
Date of birth		
Gender	Male	Female
Driver's Licence number		
Relationship to other applicants	Spouse/Partner	Other (specify below)
Current residential status	Owner - no mortgage Living with parents Other (eg property owned by spouse) (specify below)	Owner - mortgage Boarding Renting
Marital status	De facto/Married	Single Other (specify below)
Number of dependants		
Ages		
Are you commonly known by other names?	Yes	No If 'Yes', please provide details
Residential address (a PO Box is not acceptable)		
Suburb	State	Postcode
Country		
Date moved there (month/year)		
Phone number	()	
Email		
Mobile number	()	
Current postal address (if different from current residential)		
Suburb	State	Postcode
Country		
Previous residential address (if fewer than two years at current)		
Suburb	State	Postcode
Country		
Date moved there (month/year)		
Country of citizenship	Australia	Other

6A. Your personal details (to be completed by individuals or all directors/trustees where applicant is a company/trust) (continued)

Applicant 1 (continued)

Occupation details

Current occupation			
Industry			
Current employer name			
Previous occupation (if been in current occupation for less than two years)			
Previous employer's name or company/business name (if self-employed)			
Date finished at previous employment (month/year)			
Date started at previous employment (month/year)			
Previous employment status (if less than two years in current)	Permanent full-time Permanent part-time	Self-employed Casual	Not employed

Source of wealth – for Borrower

We will not be able to process your application if this section is not completed.

Please select how you have built your overall wealth. Select the one response most relevant.

- Income from employment (regular and/or bonus)
- Investment income (eg rent, dividends, pension)
- Business income
- One-off payment (eg matured investment, court settlement, redundancy, inheritance)
- Sale of assets (eg shares, property)
- Windfall (eg gift, lottery winnings, gambling)

Source of funds – for Borrower

We will not be able to process your application if this section is not completed.

Please select the source of funds you'll be using to make repayments. Select the one response most relevant.

- Business income
- Sale of assets (eg shares, property)
- Investment income (eg rent, dividends, pension)
- One-off payment (eg matured investment, court settlement, redundancy, inheritance)
- Windfall (eg gift, lottery winnings, gambling)
- Income from employment (regular and/or bonus)
- Borrowed Funds
- Government benefits (eg childcare rebate, family tax benefit)

Nature and purpose of business relationship

We will not be able to process your application if this section is not completed.

Select your reason for opening the account(s). Select the one response most relevant.

- Business growth/acquisitions/refinance (eg purchase of register or practices; including refinance of existing loans for this purpose)
- Business development/progressive drawdowns (eg improvements or refurbishment to business premises or equipment or staged drawdowns for register acquisition in which there are deferred drawdowns)
- Other business reasons – day to day cash flow needs (eg working capital or day to day business banking transactions)

If more than two applicants, please copy page and attach additional pages.

6B. Your personal details (to be completed by individuals or all directors/trustees where applicant is a company/trust) (continued)

If more than two applicants, please copy page and attach additional pages.

Applicant 2

Director	Trustee	Individual
Title		
Surname (last name)		
First name		
Middle name(s)		
Date of birth		
Gender Male Female		
Driver's Licence number		
Relationship to other applicants Spouse/Partner Other (specify below)		
Current residential status Owner - no mortgage Owner - mortgage Renting Living with parents Boarding Other (eg property owned by spouse) (specify below)		
Marital status De facto/Married Single Other (specify below)		
Number of dependants		
Ages		
Are you commonly known by other names? Yes No If 'Yes', please provide details		
Residential address (a PO Box is not acceptable)		
Suburb	State	Postcode
Country		
Date moved there (month/year)		
Phone number	()	
Email		
Mobile number	()	
Current postal address (if different from current residential)		
Suburb	State	Postcode
Country		
Previous residential address (if fewer than two years at current)		
Suburb	State	Postcode
Country		
Date moved there (month/year)		
Country of citizenship Australia Other		

6B. Your personal details (to be completed by individuals or all directors/trustees where applicant is a company/trust) (continued)

Applicant 2 (continued)

Occupation details

Current occupation			
Industry			
Current employer name			
Previous occupation (if been in current occupation for less than two years)			
Previous employer's name or company/business name (if self-employed)			
Date finished at previous employment (month/year)			
Date started at previous employment (month/year)			
Previous employment status (if less than two years in current)	Permanent full-time Permanent part-time	Self-employed Casual	Not employed

Source of wealth – for Borrower

We will not be able to process your application if this section is not completed.

Please select how you have built your overall wealth. Select the one response most relevant.

- Income from employment (regular and/or bonus)
- Investment income (eg rent, dividends, pension)
- Business income
- One-off payment (eg matured investment, court settlement, redundancy, inheritance)
- Sale of assets (eg shares, property)
- Windfall (eg gift, lottery winnings, gambling)

Source of funds – for Borrower

We will not be able to process your application if this section is not completed.

Please select the source of funds you'll be using to make repayments. Select the one response most relevant.

- Business income
- Sale of assets (eg shares, property)
- Investment income (eg rent, dividends, pension)
- One-off payment (eg matured investment, court settlement, redundancy, inheritance)
- Windfall (eg gift, lottery winnings, gambling)
- Income from employment (regular and/or bonus)
- Borrowed Funds
- Government benefits (eg childcare rebate, family tax benefit)

Nature and purpose of business relationship

We will not be able to process your application if this section is not completed.

Select your reason for opening the account(s). Select the one response most relevant.

- Business growth/acquisitions/refinance (eg purchase of register or practices; including refinance of existing loans for this purpose)
- Business development/progressive drawdowns (eg improvements or refurbishment to business premises or equipment or staged drawdowns for register acquisition in which there are deferred drawdowns)
- Other business reasons – day to day cash flow needs (eg working capital or day to day business banking transactions)

7. Loan details

Purpose of loan
(brief description)

Other information

Loan amount required

Register/trail book \$

Register purchase \$

GST (if applicable) \$

Other \$
(please specify)

Total \$

Less own contribution \$

Total Finance required \$

**Amount of existing
Business Finance loans** \$

Loan portion and amount	(a) Variable or Fixed	Repayment type	(b) Fixed Rate term ⁽ⁱ⁾	
Portion 1 \$	Variable Fixed	I&P IO*	1 year 3 years	2 years 5 years
Portion 2 \$	Variable Fixed	I&P IO*	1 year 3 years	2 years 5 years
Portion 3 \$	Variable Fixed	I&P IO*	1 year 3 years	2 years 5 years
Portion 4 \$	Variable Fixed	I&P IO*	1 year 3 years	2 years 5 years
Portion 5 \$	Variable	I&P IO*	6 months Interest Only then repayable in full (available for financing of GST on register purchases only)	
Line of Credit \$	Variable only	I&P IO*	N/A Interest Only 10 years (Cheque book will be provided after settlement)	

*Only applies to 1 year fixed term.

8. Applicant's facilities held with other lenders

Do you have any facilities/borrowings with other banks/lenders? Yes If 'Yes', please provide details below No
(Include all types of credit, eg overdrafts, lease facilities, property finance, asset finance etc.)

Name of lender	Facility type	Facility limit	Amount outstanding	Monthly repayment	Security held by lender
		\$	\$	\$	
		\$	\$	\$	
		\$	\$	\$	
		\$	\$	\$	

9A. Financial details

Complete for each individual borrower, director or trustee listed in sections 2, 3, 4, 5, 6A or 6B.

Applicant/Director's name

What you own (Assets)	Value	Monthly Income	What you owe (Liabilities)	Limit	Balance	Monthly Repayments / Interest rate	Loan / IO Term Remaining (Years)
Your home address	\$		Mortgage on your home	\$	\$	\$	
Owners name and %			Borrower Name				
			Financier				
Rental Property 1	\$	\$	Mortgage on rental property 1	\$	\$	\$	
Owners name and %			Borrower Name				
			Financier				
Rental Property 2	\$	\$	Mortgage on rental property 2	\$	\$	\$	
Owners name and %			Borrower Name				
			Financier				
Savings Accounts	\$		Other loan 1	\$	\$	\$	
			Financier				
Motor vehicle 1	\$		Other loan 2	\$	\$	\$	
			Financier				
Motor vehicle 2	\$		Car loan/lease	\$	\$	\$	
			Financier				
			Residual/ Balloon payment (Leases)				
Other Assets	\$		Credit Card 1	\$	\$	\$	
			Financier				
Home contents	\$		Credit Card 2	\$	\$	\$	
			Financier				
Superannuation	\$		Store Card 1	\$	\$	\$	
			Provider				
Shares	\$	\$	Store Card 2	\$	\$	\$	
			Provider				
Other investments	\$	\$	Outstanding Tax		\$	\$	
Other	\$		HECS/HELP debts		\$	\$	
Other	\$		Rent/board			\$	
			Child Maintenance		\$	\$	
Other income		\$	Monthly Living Expenses			\$	
			Total	\$	\$	\$	
Total	\$	\$					

Annual Gross income	Current year	Previous financial year
Applicant/Director/Guarantor	\$	\$
Spouse/partner	\$	\$

9B. Financial details (for additional applicants if more than two applicants)

Complete for each individual borrower, director or trustee listed in sections 2, 3, 4, 5, 6A or 6B.

Applicant/Director's name							
What you own (Assets)	Value	Monthly Income	What you owe (Liabilities)	Limit	Balance	Monthly Repayments / Interest rate	Loan / IO Term Remaining (Years)
Your home address	\$		Mortgage on your home	\$	\$	\$	
Owners name and %			Borrower Name				
			Financier				
Rental Property 1	\$	\$	Mortgage on rental property 1	\$	\$	\$	
Owners name and %			Borrower Name				
			Financier				
Rental Property 2	\$	\$	Mortgage on rental property 2	\$	\$	\$	
Owners name and %			Borrower Name				
			Financier				
Savings Accounts	\$		Other loan 1	\$	\$	\$	
			Financier				
Motor vehicle 1	\$		Other loan 2	\$	\$	\$	
			Financier				
Motor vehicle 2	\$		Car loan/lease	\$	\$	\$	
			Financier				
			Residual/ Balloon payment (Leases)				
Other Assets	\$		Credit Card 1	\$	\$	\$	
			Financier				
Home contents	\$		Credit Card 2	\$	\$	\$	
			Financier				
Superannuation	\$		Store Card 1	\$	\$	\$	
			Provider				
Shares	\$	\$	Store Card 2	\$	\$	\$	
			Provider				
Other investments	\$	\$	Outstanding Tax		\$	\$	
Other	\$		HECS/HELP debts		\$	\$	
Other	\$		Rent/board		\$	\$	
			Child Maintenance		\$	\$	
Other income		\$	Monthly Living Expenses		\$	\$	
			Total	\$	\$	\$	
Total		\$					

Annual Gross income	Current year	Previous financial year
Applicant/Director/Guarantor	\$	\$
Spouse/partner	\$	\$

9C. Financial details (for additional applicants if more than two applicants)

Complete for each individual borrower, director or trustee listed in sections 2, 3, 4, 5, 6A or 6B.

Applicant/Director's name

What you own (Assets)	Value	Monthly Income	What you owe (Liabilities)	Limit	Balance	Monthly Repayments / Interest rate	Loan / IO Term Remaining (Years)
Your home address	\$		Mortgage on your home	\$	\$	\$	
Owners name and %			Borrower Name				
			Financier				
Rental Property 1	\$	\$	Mortgage on rental property 1	\$	\$	\$	
Owners name and %			Borrower Name				
			Financier				
Rental Property 2	\$	\$	Mortgage on rental property 2	\$	\$	\$	
Owners name and %			Borrower Name				
			Financier				
Savings Accounts	\$		Other loan 1	\$	\$	\$	
			Financier				
Motor vehicle 1	\$		Other loan 2	\$	\$	\$	
			Financier				
Motor vehicle 2	\$		Car loan/lease	\$	\$	\$	
			Financier				
			Residual/ Balloon payment (Leases)				
Other Assets	\$		Credit Card 1	\$	\$	\$	
			Financier				
Home contents	\$		Credit Card 2	\$	\$	\$	
			Financier				
Superannuation	\$		Store Card 1	\$	\$	\$	
			Provider				
Shares	\$	\$	Store Card 2	\$	\$	\$	
			Provider				
Other investments	\$	\$	Outstanding Tax		\$	\$	
Other	\$		HECS/HELP debts		\$	\$	
Other	\$		Rent/board			\$	
			Child Maintenance		\$	\$	
Other income		\$	Monthly Living Expenses			\$	
			Total	\$	\$	\$	
Total	\$	\$					

Annual Gross income	Current year	Previous financial year
Applicant/Director/Guarantor	\$	\$
Spouse/partner	\$	\$

10. Choose your signing authority (For Lines of Credit only)

Please tick ☒ one:

Any to sign (any one of the authorities can operate the account without the others' permission).

All to sign (all of the signatories are required to operate the account).

Any two to sign (two of the signatories are required to operate the account).

Select this option only if there are three or more signatories.

11. Privacy Disclosure Statement

AMP Bank Limited (we/us/our) ABN 15 081 596 009, AFSL and Australian credit licence 234517 obtains, uses and discloses personal information and credit information as set out below.

Our Policies

Privacy Policy

Personal information is treated in accordance with the AMP Privacy Policy. This policy explains how you may:

- access your personal information held by AMP,
- seek correction of that information, and
- make a complaint about a breach of the Australian Privacy Principles or about how AMP deals with such complaints.

The AMP Privacy Policy is available online at amp.com.au/privacy or contact us on 13 30 30 for a copy.

Credit Reporting Policy

Credit information is treated in accordance with the AMP Bank Credit Reporting Policy. This policy explains:

- how we manage your credit-related personal information,
- how you may:
 - access your credit eligibility information held by us,
 - seek correction of your credit information or credit eligibility information held by us,
 - complain about a failure by us to comply with the credit reporting provision of the Privacy Act or the Credit Reporting Code and how we will deal with such complaints, and
 - whether it is likely that AMP Bank will disclose your credit information or credit eligibility information to entities that do not have an Australian link and, if so, the countries in which those entities are likely to be located.

The AMP Bank Credit Reporting Policy is available online at amp.com.au/privacy or contact us on 13 30 30 for a copy.

11. Privacy Disclosure Statement (continued)

Collection of information

We collect personal information from the applicant(s) named in this application, including information obtained in this form. We also collect personal information and credit eligibility information from credit reporting bodies (CRBs) listed in our Credit Reporting Policy that is available online at amp.com.au/privacy or contact us on 13 30 30 for a copy, and all credit providers named in this application. We may use this information, and if you are an existing customer, any other information we already hold about you for the purpose of:

- verifying the information provided in this application and assessing this application for consumer or commercial credit,
- understand that AMP Bank assesses the application in real-time via its automated assessment process,
- Reporting and data analytics, including for regulatory, management, statistical or research purposes, and
- facilitating the provision of a loan to the applicant(s), to enable us to establish and manage any consumer or commercial loan, including the collection of overdue payments.

Collection of this information is required under the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006* (Cth) and authorised under the *Privacy Act 1988* (Cth).

If we are unable to collect your personal or credit information, we may be unable to process your application.

Disclosure of information

We may disclose your personal information to:

- any person named in this application, including your employer, estate agent, referee or accountant,
- our related bodies corporate,
- property valuers, and
- joint venture partners, business partners, associates, advisers, market researchers and service providers both here and overseas. A list of countries where these providers are likely to be located can be accessed via the AMP Privacy Policy.

We may disclose your personal information and credit eligibility information to:

- a financial adviser or broker named in this application
- CRBs listed in our Credit Reporting Policy that is available online at amp.com.au/privacy or contact us on 13 30 30 for a copy,
- credit providers named in this application or named in
- a credit report issued by a credit reporting body (CRB),
- persons involved in securitisation arrangements with us,
- any applicant(s) (including a guarantor or proposed guarantor) named in this application, and
- mortgage insurers.

Information provided to credit reporting bodies

We provide information to CRBs. The information that we provide may be used by a CRB to include in reports provided to credit providers to assist them to assess your credit worthiness as well as to verify your identity (see "Electronic Verification of Identity" section below). If you fail to meet payment obligations in relation to consumer credit or if you commit a serious credit infringement, we may be entitled to disclose this to the CRB. You have the right to request a CRB not to use your credit reporting information for the purposes of pre-screening of direct marketing by a credit provider. You have the right to request the CRB not to use or disclose credit reporting information about you, if you believe on reasonable grounds that you have been, or are likely to be, a victim of fraud.

Marketing and other purposes

In addition to the purposes stated above we may use your personal information for marketing and research purposes. To opt out of direct marketing from AMP Bank, to obtain further information about how AMP handles your personal information or to request access to the personal information AMP holds about you, call 13 30 30 or write to:

AMP Bank, Locked Bag 5059, PARRAMATTA NSW 2124

12. Direct Debit Request Service Agreement

1. This Agreement allows AMP Bank (User ID No. 037432) to withdraw money from your nominated account, on the terms specified below and in the Direct Debit Request.
2. The first time money is withdrawn from your nominated account, you automatically agree to these conditions. These conditions then apply to all withdrawals from your nominated account.
3. If we want to change this Agreement, we will notify you four calendar days in advance of any change. If you disagree with this change, please notify us within these 14 calendar days.
4. Please contact AMP Bank by phone on 13 30 30, fax, email or mail at least three Business Days before the due date if you want to:
 - change this Agreement, eg the amount you pay, how often you pay or deferring payment due to unforeseen circumstances
 - change your nominated account details. AMP Bank will require you to sign a new Direct Debit Request
 - cancel this Agreement
 - stop or defer an individual payment. Requests to stop or cancel direct debits may be made to AMP Bank or your financial institution directly.
5. If you want to dispute a debit that has been made from your account, contact AMP Bank and AMP Bank will respond to you within five business days. If you are not satisfied with AMP Bank's response to your dispute, you can lodge a formal claim with your financial institution.
6. If the payment date is on a weekend or public holiday in Sydney, we will process your payment on the next Business Day. If you are uncertain as to when the debit will be processed to your nominated account, you should contact your financial institution directly.
7. You must make sure that sufficient cleared funds are available in your nominated account on the payment date. If there are insufficient funds and your financial institution dishonours the payment, any charges incurred:
 - by your financial institution may be debited from your nominated account
 - by AMP Bank may be debited from your account.You must advise us in writing, or by fax if you have Fax Bank, if you close your nominated account.
8. If your direct debit is dishonoured by your financial institution, the value of the dishonoured drawing will be debited to your account. We will also withdraw money to cover any costs or charges incurred by AMP Bank and an inward dishonour fee may also apply. We also reserve the right to cancel the Direct Debit Request if any debit is returned unpaid by your financial institution.
9. AMP Bank will keep your financial institution account details confidential. However, we will disclose these details:
 - if you give us permission
 - if a court order applies
 - to settle a claim
 - if a financial institution involved in the transaction requires information for the purpose of settling a claim/dispute.

You authorise the following:

- AMP Bank to verify the details of the account with you/your financial institution.
- The financial institution to release information allowing AMP Bank to verify the account details.

Warning: Please enter your details correctly as AMP Bank will not be liable for any loss or other consequences arising from the account information being inaccurate. Your existing account details can be found on a recent bank statement or cheque book. Direct Debits may not be available on all accounts. If you are not sure whether direct debits are available on your account or your account details, check with your financial institution before completing a Direct Debit Request. You indemnify us against all losses, costs, damages and liability that we suffer as a result of you giving us incorrect or false information in your Direct Debit Request.

Your indemnity:

- extends and covers all changes you make to your Direct Debit Request
- continues after this agreement is ended.

In this clause, we refer to AMP Bank Limited (ABN 15 081 596 009, AFSL/ACL No. 234517), as 'AMP Bank', 'AMP Banking', 'we', 'us' and 'our'.

13. Declaration

By signing below I declare (and if acting on behalf of an entity declare on behalf of that entity):

- I understand that an AMP Bank Loan will be available only on AMP Bank's approval of this application based on AMP Bank's standard lending guidelines; and
- I am agreeing to the matters in the application form, including the matters in the Privacy Disclosure Statement, Verification of Identity sections, Privacy Policy and Credit Reporting Policy; and
- You may communicate with me regarding this application via e-mail, SMS, or phone. You may also use mail where you think the circumstances require you to do so; and
- where I have provided another person's personal information, I've gotten their consent to do so and informed them of the matters in the Privacy Disclosure Statement; and
- I authorise you to get a valuation on any security by your panel valuers, and understand this valuation is for you and not me; and
- I am fully aware of my financial position under my proposed loan(s) with AMP Bank; and
- I am satisfied that my additional financial commitment to AMP Bank will not adversely impact on my/ our ability to meet all my/our other financial obligations (including living expenses) as and when they fall due; and
- I can comfortably afford all repayments resulting from my loans without incurring substantial financial hardship; and
- I am not aware of any factors, for example, a possible claim made against me involving payment of an amount of money, ill health or disability, or any other factor which may result in a decrease in income or increase in expenditure, which may affect my ability to make repayments or which may cause substantial hardship to me making repayments; and
- I will tell you of any changes to the information in this application, including my tax residency status or that of related parties; and
- I agree that you or your related bodies corporate may access and use information contained in my credit file to assist with authenticating the financial information I have provided to you; and
- I acknowledge that you reserve the right to obtain further financial and/or other documentation from me at any time before or after the loan(s) has been approved by you; and
- you recommend I obtain independent legal and financial; and
- I understand you are relying on the information I have provided and that such information is accurate and complete and not materially misleading; and
- I acknowledge that it may be a criminal offence to knowingly provide false or misleading information or documents in connection with this application; and
- I acknowledge that where the account is opened in the name of a trust, and the trust makes a distribution to a beneficiary who is a foreign tax resident, that I am required to notify you within 30 days of the distribution being made. I will also provide you with the beneficiary details requested, including details in relation to their foreign tax residency; and
- I have provided true and accurate information in relation to this form. Any document or information to be used for the purposes of this form (whether or not provided on or with this application):
 - is correct and complete;
 - may be used for any other products, services or benefits offered or provided to me through AMP Bank or any other company in the AMP group and subject to their privacy obligations, may be disclosed to and used by the providers of such products, services or benefits to facilitate compliance with anti-money laundering and counter-terrorism financing legislation.

All account holders must sign this form. If more than two account holders, please copy the page and attach as separate sheet(s).

Applicant 1		Applicant 2		
True	False	True	False	I/We have not made a debt agreement under Part IX of the <i>Bankruptcy Act 1966</i> .
True	False	True	False	I/We have not been declared bankrupt or insolvent, or executed deed of arrangement under Part X of the <i>Bankruptcy Act 1966</i> .
True	False	True	False	I/We have not been a director or officer of a company to which a manager, receiver, controller administrator or liquidator has been appointed.
True	False	True	False	I/We have not been a director of a company in the last five years other than as disclosed in this application.
True	False	True	False	I/We have not defaulted under any credit contract in the last five years.

Please note: If you answered False to any of the above questions, please attach separate details.

⚠ Electronic Verification of Identity

We have obligations under the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006* ('AML/CTF Act'). You consent to us disclosing your full name, residential address and date of birth to a third party electronic verification of identity ('eVID') service provider for the purposes of requesting the eVID provider to provide an assessment whether this personal information matches (in whole or in part) the personal information held by various approved electronic verification data sources on you and other individuals.

You consent to the eVID service provider preparing an assessment using this personal information, and comparing this personal information with the personal information it sources from these electronic verification sources and providing this report to us. One of the approved electronic sources the eVID service provider may subsequently provide your personal information to may be a credit reporting body ('CRB'). Where a CRB is utilised to verify your identity the CRB may use the Commonwealth Attorney General's Department Document Verification Service ('DVS') to make an Information Match Request against information held by an Official Record Holder and a corresponding Information Match result may be given to you and us. If you would like more information on what these are please visit www.dvs.gov.au.

You consent to us and/or our service provider to request your personal information including any biometric information such as a photograph "selfie" of you for the purposes of compiling a report for us on the authenticity of your identity.

We may collect, hold, use and disclose the personal information collected in this section for the purposes of complying with our obligations under the AML/CTF Act and for fraud risk management purposes.

If you don't consent to this, please tell us and we may have to use other reasonable means of verifying your identity.

⚠ Statement delivery and electronic communication

If you are an existing AMP Bank customer:

- your selections below will apply to all accounts, and
- if you do not cross an option below, your standing instructions will remain unchanged for all accounts.

Statement delivery method (please tick ☒ one box only)

Online Post

Electronic Communication (please tick ☒ one box only)

Yes, I'd/We'd like to receive information by electronic communication

No thanks, I/We prefer paper communications

Things you need to know before you agree to online statements or electronic communication:

- paper documents may no longer be given.
- online statements will be made available in My AMP and we'll notify you by email – we may also deliver other documents this way if you've agreed to electronic communications.
- you'll have to check regularly for electronic communications.
- you can change to statements by post or paper communications at any time in My AMP or by calling us on 13 30 30.

If you choose statements by post, or paper communications:

- some electronic communications will still be sent, like account updates and fraud alerts.

For terms that apply to communications about your accounts, see the Account Access and Operating Terms and Conditions, available at amp.com.au/bankterms.

You will be able to register for **My AMP** after your loan has settled at amp.com.au.

⚠ Important: AMP Bank will disclose your credit information to a credit reporting body, which will end up on your credit file. This means your loan application inquiry, loan amount, repayments, overdue amounts, defaults and other information about your credit contract. See our credit reporting policy for more information.

Signature of Applicant 1

X

Date

Signature of Applicant 2

X

Date

The signature(s) will be retained by AMP Bank as your specimen signature(s).

14. Statutory payments declaration

RE:

Company/Business name

I/We declare that instalments for the following statutory payments are current:

Payment Type	Are all payments current?		
GST	Yes	No	
Group Tax	Yes	No	
PAYG/Company Tax	Yes	No	
Employee Superannuation Contributions	Yes	No	
FBT (if applicable)	Yes	No	N/A
Payroll Tax (if applicable)	Yes	No	N/A
WorkCover (if applicable)	Yes	No	N/A

If you have answered no to any of the above points please provide the following information.

1. What is the amount outstanding?

2. What arrangements are in place to pay arrears?

(Please provide copies of any supporting documents that show details of agreed arrangements with creditor).

3. For GST, PAYG, Company Tax or Group Tax

please provide a copy of the latest ATO Portal Running Balance Account (RBA).

4. For GST

please also provide copies of BAS for the last of last 12 months.

15. Signature(s) of signatories/applicants to the account

Signature of Applicant 1

X

Date	
Name of Signatory (Print in BLOCK LETTERS)	
Position	

Signature of Applicant 3

X

Date	
Name of Signatory (Print in BLOCK LETTERS)	
Position	

Signature of Applicant 2

X

Date	
Name of Signatory (Print in BLOCK LETTERS)	
Position	

Signature of Applicant 4

X

Date	
Name of Signatory (Print in BLOCK LETTERS)	
Position	

16. Identification verification

Identification to be verified by one Primary Photographic Document. If applicants are unable to provide a Primary Photographic Document, please provide one Primary Non-photographic Document and one Secondary Identification Document. For a full list of acceptable forms of identification and a list of people who can certify documents or extracts, please visit amp.com.au/identification. Note that the certifying person must not be a signatory, family member or related party. The certifier must be an independent and reliable third party.

Certified documents must be endorsed with the following clause: 'I confirm that all certified copies are true and accurate copies of the original document.' (sign & date).

17. Guarantors – additional information

1. Guarantor's solicitor details

Please provide the details for the guarantors' solicitor(s). Guarantors' solicitors may not be the same solicitors as the Borrower's. (If more than two guarantors, please copy this section and attach to the application.)

Guarantor 1

Guarantor 1 name			
Residential address (a PO Box is not acceptable)			
Suburb	State	Postcode	
Date of birth			

We will not be able to process your application if this section is not completed.

Applicant 1

Please select how you have built your overall wealth. Select the one response most relevant.

- Income from employment (regular and/or bonus)
- Investment income (eg rent, dividends, pension)
- Business income
- One-off payment (eg matured investment, court settlement, redundancy, inheritance)
- Sale of assets (eg shares, property)
- Windfall (eg gift, lottery winnings, gambling)

17. Guarantors – additional information (continued)

1. Guarantor's solicitor details (continued)

Solicitor details for Guarantor 1

Name of firm			
Contact name			
Business address (a PO Box is not acceptable)			
Suburb		State	Postcode
Country			
Contact phone number	()		
Email			
Mobile number			

Guarantor 2

Guarantor 2 name			
Residential address (a PO Box is not acceptable)			
Suburb		State	Postcode
Date of birth			

We will not be able to process your application if this section is not completed.

Applicant 2

Please select how you have built your overall wealth. Select the one response most relevant.

- Income from employment (regular and/or bonus)
- Investment income (eg rent, dividends, pension)
- Business income
- One-off payment (eg matured investment, court settlement, redundancy, inheritance)
- Sale of assets (eg shares, property)
- Windfall (eg gift, lottery winnings, gambling)

Solicitor details for Guarantor 1

Name of firm			
Contact name			
Business address (a PO Box is not acceptable)			
Suburb		State	Postcode
Country			
Contact phone number	()		
Email			
Mobile number			

17. Guarantors – additional information (continued)

2. Director guarantors of corporate borrower (other than sole director)

Directors providing guarantees for company borrowings have the right to receive the documents listed in the table below. **These documents contain important information that may affect your decision to give a guarantee.** You may choose not to receive some or all of these documents.

I would like to receive	Guarantor 1	Guarantor 2
• all documents listed below		
• none of the documents listed below		
• some of the documents listed below (please make your selections by ticking the relevant boxes in the table)		

Document	Guarantor 1	Guarantor 2
1. any notice of demand we have made on the Borrower for any loan the Borrower has (or has had) with us, within the previous two years		
2. the loan contract to be guaranteed		
3. a list of security contracts related to the loan to be guaranteed (eg mortgage, general security agreement)		
4. any related credit report from a credit reporting body		
5. any current credit-related insurance contract that is in our possession		
6. any financial accounts or statement of financial position the Borrower has given us in the previous two years for the purposes of the guaranteed loan		
7. the latest statement of account relating to the guaranteed loan for a period in which a notice of demand was made by us (if any)		

We will also give you any other information we have about the guaranteed loan or related transaction that you reasonably request. Please list any additional information you would like to receive below. If you change your mind, you can contact us on 13 30 30 to request information.

Additional information (if any) requested by Guarantor 1	
Additional information (if any) requested by Guarantor 2	

Signature of Guarantor 1

X	
Date	
Name of Signatory (Print in BLOCK LETTERS)	
Position	

Signature of Guarantor 2

X	
Date	
Name of Signatory (Print in BLOCK LETTERS)	
Position	

18. Business Finance Transaction overview (required if Business Case not provided)

Ownership structure

Please provide a visual depiction of your business ownership structure. Your diagram should include the following:

- Confirm the entity that holds:
 1. The authorisation with the relevant licensee or aggregator, and
 2. The remuneration derived from the authorisation/ Authorised Representative agreement or broker agreement.
- All related entities are to be included.
- Confirm shareholders of each entity and percentage of ownership.
- Show how funds flow between entities.

Business ownership structure
(visual diagram)

Overview and details of business to be acquired

Vendor name

Name of Licensee/Aggregator

Office address

Please provide any relevant background information on the Business being acquired (if any)

What is the agreed sale price?

Register, Furniture, etc.

Other than the register, what other business assets are being purchased? For example, Office Equipment, General Insurance

Details of new advisers and staff joining the Purchaser following the acquisition

Number of Advisers/Brokers

Number of admin staff

Number of paraplanners
(For FP only)

Other

Assets Under Management
(For FP only)

Annual Risk Premium (API)
(FP applicable only)

Recurring revenue (last 12 months)

New business revenue (last 12 months)

18. Business Finance Transaction overview (required if Business Case not provided) (continued)

Overview and details of business to be acquired (continued)

Do you hold the Ability to Advise in all segments covered by the clients you are purchasing (eg If the clients hold a product in SMSF, do you hold the Ability to Advise for SMSF?)

Yes	No
(if 'No' provide details)	

Proposed timetable

Proposed date for signing the Agreement	
Proposed date for completion (if different)	
Copy of Sale Agreement is attached	