



business banking individual identification requirements.

Mail: ME Business Account Services, Reply Paid 1345, Melbourne VIC 8060
Any questions? Call ME on **1300 658 108** or visit **mebank.com.au**

individual identification requirements.

To comply with our obligations under the Anti-Money Laundering and Counter Terrorism Financing Act 2006, the following individuals on a Business Deposit Account need to have their identity verified:

- Each account holder who is a natural person
- Authorised Representatives
- Designated Users
- Individuals who own or control 25% or more of the applicant or the trustee company
- Beneficiaries with an interest of 25% or more in the trust

Please complete one of the following two options.

option a for identification - bank@post.

An individual can attend a Bank@Post outlet to complete the necessary identification requirements.

Please refer to the following form for instructions.

option b for identification - documents certified by an approved person.

Individuals can complete the identification requirements by taking required original document(s) together with a photocopy of the original to an Approved Person who will verify your original identification document(s) and certify the photocopy.

The following persons can certify a document as a true copy of an original:

- Police Officer, JP or Notary Public
- Barrister or Solicitor
- Australian Consular / Diplomatic Officer
- Judge, Magistrate, Registrar, Deputy or CEO of a Court
- Agent in charge of a Postal Agency
- Post Office Permanent Employee with 2 or more years of continuous service
- Officer with 2 or more years of continuous service with one or more financial institutions
- Officer with 2 or more years of continuous service with one or more finance companies
- Officer or authorised representative of a holder of an Australian Financial Services Licence having 2 or more continuous years of service with one or more licensees
- Member of CPA Australia, Institute of Chartered Accountants Australia, or National Institute of Accountants with at least 2 years membership

individual 1.

Title (Mr/Mrs/Miss/Ms/other) Family name

Given name(s)

Date of birth

Residential address (we can't accept PO BOX addresses)

State Postcode

Signature

Date

individual 2.

Title (Mr/Mrs/Miss/Ms/other) Family name

Given name(s)

Date of birth

Residential address (we can't accept PO BOX addresses)

State Postcode

Signature

Date

Note - it is an offence under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (Cth) to provide false or misleading information or to produce false or misleading documents.

Privacy - the information provided by you on this form to verify your identity is collected in accordance with the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (Cth). Information may be disclosed to the Australian Transaction Reports and Analysis Centre (AUSTRAC) or as other legislation allows or requires.

STEP 1:

Please provide the Approved Person with documents from either option 1 or option 2 listed below:

option 1.

(supply one primary photographic identification document)

Primary Photographic Identification Document:

- Driving licence or permit (Australian only)
- Passport (Australian or foreign*)
- Proof of Age card (Australian Only)

or option 2.

(supply one primary non-photographic identification & one secondary identification document)

Primary Non-photographic Identification Document:

- Birth Certificate (Australian only)
- Birth extract (Australian only)
- Pension card issued by Centerlink
- Citizenship certificate (Australian only)

* An Australian passport that has expired in the preceeding 2 years is acceptable. A foreign passport may be used if it is current and contains a Permanent Residency Visa.

Secondary Identification Document (must contain your full name and residential address):

- Government financial benefits notice (issued within the last 12 months)
- Australian Tax Office notice of assessment (issued within the last 12 months)
- Local government or utilities bill (issued within the last three months)

STEP 2:

The Approved Person must sight each original identification document and compare the original with the photocopy. The Approved Person must be satisfied the photocopy is a true and correct copy of the original.

If so, the Approved Person is to write the following on the photocopy:

"I certify that this is a true and correct copy of the original".

The Approved Person must also write their full name as well as their qualification/profession and sign and date the photocopy.

STEP 3:

Post the certified photocopy of the identification document(s) together with the completed application or change of business details form, or provide details of the applicant or the account holder to: ME Business Account Services, Reply Paid 1345, Melbourne VIC 8060



*2956 927 01 0 000000000112233 66

Identity verification form

Your identity document requirements

You must present one primary document from the list.

Does your primary document contain a photo?

Yes ▶ No additional identification is required.

No ▶ You must also supply one secondary document that contains your current residential address.

To verify your identity, the details in section A and B must exactly match your identification documents including full given name, no initials.

Primary identification documents

- Australian driver's licence or learner permit (current)
- Australian passport (current or expired within the last 2 years)
- International passport (current)
- Proof of age card/NSW photo card (current and government issued)
- Centrelink pension card (current)
- Australian birth certificate (not an extract)
- Australian citizenship certificate

Secondary identification documents with residential address

- Utility bill or council rates notice (less than 3 months old)
- Taxation notice or Centrelink statement (less than 12 months old)
- Under 18's letter from a school principal that records the period of time the individual attended the school (less than 3 months old)

How to lodge your application at Australia Post

1. Complete this form and bring it with your original identification documents to any participating post office. To find the nearest participating outlet, please call 13 13 18 or go to auspost.com.au/pol/idform.
2. Do not complete section C, your signature must be witnessed by the Australia Post verifier.
3. Identification documents must be presented and be original.

Please use blue or black ink and print within the boxes in **BLOCK LETTERS**

A. Details of applicant

Which **ME** product are you applying for? (e.g. deposit account)

Title e.g. (Mr, Mrs, etc.) Family name/surname

Given name/s (full name, no initials)

Date of birth

Contact phone number

B. Current residential address of applicant (must be an Australian residential address not a PO Box)

Unit number/street number/street name (with a gap between numbers and words)

Suburb/locality

State

Postcode

C. Declaration by applicant

Do not sign until you lodge this form at Australia Post

Your signature must be witnessed by the Australia Post verifier.

I acknowledge that the information on this form is true and correct. The details on this form have been completed by me and not another person.

Please sign in blue or black ink

Applicant to sign at Australia Post

Date

Privacy Notice - Australia Post collects your personal information as an agent for **ME** in order to verify your identity on their behalf. Your personal information will be disclosed to **ME** to fulfill this purpose. Without this information Australia Post would be unable to provide this service. Your personal information is handled in accordance with Australia Post's Privacy Policy which outlines how to access and / or correct your personal information or make a privacy related complaint. You may contact the Privacy Contact Officer, Australia Post, GPO Box 1777, Melbourne, Vic 3001 for privacy related queries. For more information please visit auspost.com.au/privacy.

D. Australia Post use only

I confirm that I have sighted original documentation that verifies the applicant's name, date of birth and/or residential address as required.

Verifier's name

Comments

Date

Work centre code

Verifier's signature

Identity verified by

