

Business Membership Application

Company
Partnership
Trust
Association



People's Choice Credit Union,
a trading name of Australian Central Credit Union Ltd
ABN 11 087 651 125, acts under its own
Australian Financial Services Licence (AFSL 244310)
and Australian Credit Licence (ACL 244310)
T 13 11 82 peopleschoicecu.com.au

INSTRUCTIONS FOR COMPLETING THE BUSINESS MEMBERSHIP APPLICATION

What type of entity is the application for?

Please complete the following sections:

| | |
|---|--|
| Partnership | Section A, B, G, H, I and J (if a Company is a Partner also Section D and F) |
| Trust (includes Superannuation Funds and Estate Accounts) | Section A, C, G, H, I and J (if a Company is a Trustee also Section D and F) |
| Company Pty Ltd | Section A, D, F, G, H, I and J |
| Company (other) – must be referred to Business Banking | Section A, D, F, G, H, I and J |
| Association (includes Unincorporated and Incorporated Associations) | Section A, E, G, H, I and J |

A – MEMBERSHIP DETAILS

Membership Number

Additional Membership Number where a Company is a Trustee or Partner

Full Name of the Entity/Trust

ABN

Full Name of Trustee(s) (if applicable)

ABN

Registered Business Name (if any) - please provide record of registration

Trading as

ACN/ARBN (if applicable)

Main Business Activity/ANZSIC Code

Primary Contact Details

Name

Membership Number

Principal place of business address (PO Box is NOT acceptable)

| | | | |
|-----------------------------|----------------------------|-------------------------------|---|
| Street <input type="text"/> | | | |
| Suburb <input type="text"/> | State <input type="text"/> | Postcode <input type="text"/> | Country (if not Australia) <input type="text"/> |

Registered office address if different to the principal place of business (PO Box is NOT acceptable)

| | | | |
|-----------------------------|----------------------------|-------------------------------|---|
| Street <input type="text"/> | | | |
| Suburb <input type="text"/> | State <input type="text"/> | Postcode <input type="text"/> | Country (if not Australia) <input type="text"/> |

Postal address if different to the principal place of business

| | | | |
|-----------------------------|----------------------------|-------------------------------|---|
| Street <input type="text"/> | | | |
| Suburb <input type="text"/> | State <input type="text"/> | Postcode <input type="text"/> | Country (if not Australia) <input type="text"/> |



Tax File Number/Exemption (if not completed, you may be taxed on interest received)

This information will be destroyed once loaded onto the system.

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B – PARTNERSHIP DETAILS

Is a formal Partnership Agreement in place? No Yes (please provide a copy)

Country where Partnership established

Where a Company/ies is a Partner complete section D – Company Details

Regulated Partnerships - only

Is the partnership regulated by a professional association? (if Yes, refer to Business Banking for additional requirements) e.g. Law Society, CPA Australia, Institute of Chartered Accountants in Australia, Real Estate Institute

Yes Name of Association
Membership/ID Number
(issued by professional association)

| |
|--|
| |
| |

No

C – TRUST DETAILS

Country where Trust established

Trust type – please provide Trust Deed

- Government Superannuation Fund (establish by legislation) Refer to Business Banking
 Registered Managed Investment Scheme (registered with ASIC) Refer to Business Banking
 Regulated Trust (e.g. a Self Managed Superannuation Fund)

Name of Regulator (e.g. ASIC, APRA, ATO)

Registration or licence details

Other Trust description (e.g. family, unit, charitable, estate)

Beneficiary Details – If the Trust specifies beneficiaries by reference to a membership class, provide details of the membership classes

| |
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| |

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| |
| |

Provided full names of all specified beneficiaries

| | |
|----------------|---------|
| First names(s) | Surname |
| First names(s) | Surname |
| First names(s) | Surname |

| | |
|----------------|---------|
| First names(s) | Surname |
| First names(s) | Surname |
| First names(s) | Surname |

Settlor of Trust - If the Trust specifies a Settlor of Trust provide full names of Settlor of Trust below:

| | |
|----------------|---------|
| First names(s) | Surname |
|----------------|---------|

Where a Company/ies is the Trustee of the Trust complete section D – Company Details

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D – COMPANY DETAILS

Country where Company established

Proprietary Limited Company – please provide Record of Registration Other – refer to Business Banking – please provide Record of Registration

Principal place of business address (PO Box is NOT acceptable) – If different to membership details

| | | | |
|--------|-------|----------|----------------------------|
| Street | | | |
| Suburb | State | Postcode | Country (if not Australia) |

Secretary Details – to be completed only when the Secretary is to be an operator on the membership

| | | | | | |
|----------------|---------|--------|-------|----------|----------------------------|
| First names(s) | Surname | Street | | | |
| | | Suburb | State | Postcode | Country (if not Australia) |

Where there is more than one Company involved in a Partnership or Trust complete the additional Companies details below:

Country where Company established

Proprietary Limited Company – please provide Record of Registration Other – refer to Business Banking – please provide Record of Registration

ABN/ACN/ARBN

Main Business Activity/ANZSIC Code

Principal place of business address (PO Box is NOT acceptable)

| | | | |
|--------|-------|----------|----------------------------|
| Street | | | |
| Suburb | State | Postcode | Country (if not Australia) |

Secretary Details – to be completed only when the Secretary is to be an operator on the membership

| | | | | | |
|----------------|---------|--------|-------|----------|----------------------------|
| First names(s) | Surname | Street | | | |
| | | Suburb | State | Postcode | Country (if not Australia) |

E – ASSOCIATION DETAILS

- Unincorporated Association – please provide either the Constitution/Rules or Minutes of Meeting showing approval to open membership and stating officeholders authorised to sign
- Incorporated Association – please provide either the Constitution/Rules or Minutes of Meeting showing approval to open membership and stating officeholders authorised to sign. Provide name and residential address of public officer (or chairman, secretary and treasurer or equivalent officer if there is no public officer)

First names(s) Surname

| | | | |
|--------|-------|----------|----------------------------|
| Street | | | |
| Suburb | State | Postcode | Country (if not Australia) |

Associations Office Holders

| | | |
|----------------|---------|----------|
| First names(s) | Surname | Position |
| First names(s) | Surname | Position |
| First names(s) | Surname | Position |
| First names(s) | Surname | Position |

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F – SHAREHOLDER DETAILS

All Individuals who own more than 25% of the issued shares in a Company including Companies for a Partnership or Trust

Shareholder 1 Details

| | | | |
|---------------|----------------|-------------|--|
| Title | First names(s) | | |
| Surname | | | |
| Date of birth | | Shares held | |

Residential address (PO Box is NOT acceptable)

| | | | |
|--------|-------|----------|----------------------------|
| Street | | | |
| Suburb | State | Postcode | Country (if not Australia) |

Are you a U.S. resident for tax purposes or a U.S. citizen?

Yes (please complete Section I) No

Are you a tax resident of another country other than Australia/U.S.?

Yes (please complete country below and Section I) No

1st Country of Tax residency

2nd Country of Tax residency

Shareholder 3 Details

| | | | |
|---------------|----------------|-------------|--|
| Title | First names(s) | | |
| Surname | | | |
| Date of birth | | Shares held | |

Residential address (PO Box is NOT acceptable)

| | | | |
|--------|-------|----------|----------------------------|
| Street | | | |
| Suburb | State | Postcode | Country (if not Australia) |

Are you a U.S. resident for tax purposes or a U.S. citizen?

Yes (please complete Section I) No

Are you a tax resident of another country other than Australia/U.S.?

Yes (please complete country below and Section I) No

1st Country of Tax residency

2nd Country of Tax residency

Shareholder 2 Details

| | | | |
|---------------|----------------|-------------|--|
| Title | First names(s) | | |
| Surname | | | |
| Date of birth | | Shares held | |

Residential address (PO Box is NOT acceptable)

| | | | |
|--------|-------|----------|----------------------------|
| Street | | | |
| Suburb | State | Postcode | Country (if not Australia) |

Are you a U.S. resident for tax purposes or a U.S. citizen?

Yes (please complete Section I) No

Are you a tax resident of another country other than Australia/U.S.?

Yes (please complete country below and Section I) No

1st Country of Tax residency

2nd Country of Tax residency

Shareholder 4 Details

| | | | |
|---------------|----------------|-------------|--|
| Title | First names(s) | | |
| Surname | | | |
| Date of birth | | Shares held | |

Residential address (PO Box is NOT acceptable)

| | | | |
|--------|-------|----------|----------------------------|
| Street | | | |
| Suburb | State | Postcode | Country (if not Australia) |

Are you a U.S. resident for tax purposes or a U.S. citizen?

Yes (please complete Section I) No

Are you a tax resident of another country other than Australia/U.S.?

Yes (please complete country below and Section I) No

1st Country of Tax residency

2nd Country of Tax residency

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G – INDIVIDUALS ASSOCIATED WITH THE BUSINESS

Partnerships – full details of all individuals who are Partners

Trust – full details of all individuals who are Trustees

Companies – full details of all Directors including Directors where a Company is a Trustee or Partner

Association – full details of Officeholders of Association (e.g. President, Treasurer, Secretary)

Individual 1 Details

Partner Trustee Director Officeholder

| | |
|---------------|-----------------------------|
| Title | First names(s) |
| Surname | |
| Date of birth | Shares held (if applicable) |

Residential address (PO Box is NOT acceptable)

| | | | |
|--------|-------|----------|----------------------------|
| Street | | | |
| Suburb | State | Postcode | Country (if not Australia) |

Are you a U.S. resident for tax purposes or a U.S. citizen?

Yes (please complete Section I) No

Are you a tax resident of another country other than Australia/U.S.?

Yes (please complete country below and Section I) No

1st Country of Tax residency

2nd Country of Tax
residency

| |
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| |
| |

Individual 3 Details

Partner Trustee Director Officeholder

| | |
|---------------|-----------------------------|
| Title | First names(s) |
| Surname | |
| Date of birth | Shares held (if applicable) |

Residential address (PO Box is NOT acceptable)

| | | | |
|--------|-------|----------|----------------------------|
| Street | | | |
| Suburb | State | Postcode | Country (if not Australia) |

Are you a U.S. resident for tax purposes or a U.S. citizen?

Yes (please complete Section I) No

Are you a tax resident of another country other than Australia/U.S.?

Yes (please complete country below and Section I) No

1st Country of Tax residency

2nd Country of Tax
residency

| |
|--|
| |
| |

Individual 2 Details

Partner Trustee Director Officeholder

| | |
|---------------|-----------------------------|
| Title | First names(s) |
| Surname | |
| Date of birth | Shares held (if applicable) |

Residential address (PO Box is NOT acceptable)

| | | | |
|--------|-------|----------|----------------------------|
| Street | | | |
| Suburb | State | Postcode | Country (if not Australia) |

Are you a U.S. resident for tax purposes or a U.S. citizen?

Yes (please complete Section I) No

Are you a tax resident of another country other than Australia/U.S.?

Yes (please complete country below and Section I) No

1st Country of Tax residency

2nd Country of Tax
residency

| |
|--|
| |
| |

Individual 4 Details

Partner Trustee Director Officeholder

| | |
|---------------|-----------------------------|
| Title | First names(s) |
| Surname | |
| Date of birth | Shares held (if applicable) |

Residential address (PO Box is NOT acceptable)

| | | | |
|--------|-------|----------|----------------------------|
| Street | | | |
| Suburb | State | Postcode | Country (if not Australia) |

Are you a U.S. resident for tax purposes or a U.S. citizen?

Yes (please complete Section I) No

Are you a tax resident of another country other than Australia/U.S.?

Yes (please complete country below and Section I) No

1st Country of Tax residency

2nd Country of Tax
residency

| |
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| |

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Individual 5 Details

Partner Trustee Director Officeholder

| | |
|---------------|-----------------------------|
| Title | First names(s) |
| Surname | |
| Date of birth | Shares held (if applicable) |

Residential address (PO Box is NOT acceptable)

| | | | |
|--------|-------|----------|----------------------------|
| Street | | | |
| Suburb | State | Postcode | Country (if not Australia) |

Are you a U.S. resident for tax purposes or a U.S. citizen?

Yes (please complete Section I) No

Are you a tax resident of another country other than Australia/U.S.?

Yes (please complete country below and Section I) No

1st Country of Tax residency

| |
|--|
| |
| |

2nd Country of Tax
residency

Individual 6 Details

Partner Trustee Director Officeholder

| | |
|---------------|-----------------------------|
| Title | First names(s) |
| Surname | |
| Date of birth | Shares held (if applicable) |

Residential address (PO Box is NOT acceptable)

| | | | |
|--------|-------|----------|----------------------------|
| Street | | | |
| Suburb | State | Postcode | Country (if not Australia) |

Are you a U.S. resident for tax purposes or a U.S. citizen?

Yes (please complete Section I) No

Are you a tax resident of another country other than Australia/U.S.?

Yes (please complete country below and Section I) No

1st Country of Tax residency

| |
|--|
| |
| |

2nd Country of Tax
residency

H – CRS/FATCA STATUS DETERMINATION

Why Are we asking you to complete this?

Australia is one of many countries that has committed to global standards on the automatic exchange of financial account information in an attempt to deter tax evasion.

The Australian Government has enacted laws and entered into international agreements whereby Australian financial institutions are required by law to collect information for reporting to the Australian Taxation Office (ATO). The ATO may then exchange this information with tax authorities around the world.

The Australian laws implement automatic exchange of information (AEOI) with: the United States (US) under a system known as the Foreign Account Tax Compliance Act (FATCA); other countries under the Common Reporting Standard (CRS). Australian financial institutions must identify accounts held by customers who are foreign tax residents or entities connected to foreign tax residents

Financial institution requirements

Financial Institution means a Custodial Institution, Authorised Deposit Taking Institution or an Insurance Company

Is the entity a Financial institution? Yes (refer to Business Banking) No (continue)

Passive entity requirements

Does the entity earn more than 50% of its gross income from: interest, rent, dividends, distributions or royalties; OR use more than 50% of its assets to generate such income?

Yes (please complete Section I) No (please sign CRS/FATCA Declaration)

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I – FOREIGN TAX INFORMATION FOR INDIVIDUALS

Beneficial owners of the entity

Beneficial Owners under CRS and FATCA are the natural person(s) who exert control over the entity. This includes partners, members, directors, beneficiaries and anyone person who owns 25% or more in the entity, whether individually or through a controlling entity. For any Beneficial Owners not already documented on this form please complete the below. For all other individuals who are foreign tax residents go to **Foreign Tax Identification/Exemption** section below.

Are any of the entity's Beneficial Owners a U.S. resident for tax purposes or a U.S. citizen?

Yes (complete details below)

No (answer next question)

Are any of the entity's Beneficial Owners a resident for tax purposes of another country other than Australia and/or the U.S.?

Yes (complete details below)

No (go to Declaration)

Beneficial Owner 1 Details

| | | | |
|---------------|----------------|--|--|
| Title | First names(s) | | |
| Surname | | | |
| Date of birth | Ownership type | | |

Residential address (PO Box is NOT acceptable)

| | | | |
|--------|-------|----------|----------------------------|
| Street | | | |
| Suburb | State | Postcode | Country (if not Australia) |

Country of residence for tax purposes

| | |
|-------------------------|--|
| 1 st Country | |
| 2 nd Country | |

Beneficial Owner 2 Details

| | | | |
|---------------|----------------|--|--|
| Title | First names(s) | | |
| Surname | | | |
| Date of birth | Ownership type | | |

Residential address (PO Box is NOT acceptable)

| | | | |
|--------|-------|----------|----------------------------|
| Street | | | |
| Suburb | State | Postcode | Country (if not Australia) |

Country of residence for tax purposes

| | |
|-------------------------|--|
| 1 st Country | |
| 2 nd Country | |

Foreign Tax Identification/Exemption

Please provide a Foreign Tax Identification number or exemption reason below:

Exemption Reasons

Reason A – The country/jurisdiction where the individual is a resident does not issue TINS to its residents

Reason B – The individual is other wise unable to obtain a TIN or equivalent number (please explain why they are unable to obtain a TIN)

Reason C – No TIN is required (Note. Only select this reason if the domestic law of the relevant country/jurisdiction does not require the collection of the TIN issued by such country/jurisdiction)



This information will be destroyed once loaded onto the system

| Full name | TIN or Exemption reason code | Country of residence for tax purposes or explanation for Exemption |
|-----------|------------------------------|--|
| | | |
| | | |
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J - Declaration

Annual Report

Every year Australian Central Credit Union Ltd trading as People's Choice Credit Union ("People's Choice Credit Union") prepares an Annual Report which contains information on our financial position and performance, how efficiently we are being managed, and about any financial risks we may face. This report will be put up on the People's Choice Credit Union website peopleschoicecu.com.au in October each year for your viewing.

Company & Incorporated Association Only

I/We apply for membership and one \$2.00 share in People's Choice Credit Union. I/We understand that if I/we have included \$2.00 as payment towards my share in People's Choice Credit Union and this results in having paid an excess for my share, then the difference will be refunded to me within 90 days. I/We agree to be bound by the rules of People's Choice Credit Union.

Declaration

I/We understand that it is an offence under the law including the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (Cth) ("AML-CTF-Act") to make a false and misleading statement. I/We declare that the details as shown on this form are complete and accurate.

I/We have received the Accounts & Access Facilities Terms & Conditions document, Fees & Charges document and Savings & Investments Interest Rates Brochure and agree to be bound by them.

I/We understand that the collection of Tax File Numbers, Australian Business Number or Exemption is authorised, and their use and disclosure are strictly regulated by tax laws and the Privacy Act 1988 (Cth). I/We understand that quotation of the number is not compulsory, but tax may be taken out of my/our interest if I/we do not quote my/our Tax File Number, Australian Business Number or claim an Exemption.

I/we understand that where I/we am/are resident(s) of a country other than Australia for tax purposes, People's Choice Credit Union may be legally obliged to pass on this information and other information with respect to me/us and my/our accounts with People's Choice Credit Union to the Australian Taxation Office (ATO) and that the ATO may then exchange this information with tax authorities of other jurisdictions pursuant to intergovernmental agreements to exchange financial account information.

I/we undertake to promptly notify People's Choice Credit Union of any change in circumstances which affects my/our tax residency.

I/We have received the welcome pack which contains People's Choice Credit Union Privacy Policy. I/We consent to the collection, use, handling, and disclosure of my/our personal information as set out in the Privacy Policy. I/We understand the Privacy Policy may change from time to time and I/we will be kept updated of any changes to the Privacy Policy via People's Choice Credit Union's newsletters or on its website. I/We consent to the collection, use and disclosure of the information contained in this application and for any other application or communication I/we may have with People's Choice Credit Union from time to time. If I/we supply information to People's Choice Credit Union about another person, I/we confirm that I/we am/are authorised by that person to supply the information and I/we will inform that person how to contact People's Choice Credit Union, how to obtain the Privacy Policy, that People's Choice Credit Union will use and disclose their personal information for the purposes set out in this application and that they can gain access to that information.

I/We authorise People's Choice Credit Union to provide its relevant service providers:

- Any information provided by me/us in this document (including personal information)
- Any other information I/we may provide to People's Choice Credit Union which it may lawfully obtain about me/us where the provision of such information is required or allowed by law. This includes verification of personal information as required by the AML-CTF Act.

By signing this form I/we certify that I/we am/are authorised to do so on behalf of this entity.

| | | |
|-----------|-----------|------|
| Full name | Signature | Date |
| Full name | Signature | Date |
| Full name | Signature | Date |
| Full name | Signature | Date |

| | |
|------------------------------|--|
| Type of entity | Signing instructions for above Declaration |
| Partnership | All partners |
| Company – Sole Director | Sole Director/Secretary |
| Company – Multiple Directors | Any 2 Directors or 1 Director together with the Secretary |
| Association | Any 2 (max 4) Officeholders (e.g. President, Secretary, Treasurer) |
| Trust – Individual Trustees | All Trustees |
| Trust – Company as Trustee | As per Company membership |

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PEOPLE'S CHOICE CREDIT UNION OFFICE USE ONLY

Registered Business Name

- Obtain a Record of Registration of Business Name
- Complete a search of the Business Name via www.equifax.com.au. Confirm the search shows the entity listed in Section A as the 'Corporation carrying on the Business'.
- Search fee of \$20.00 per business name search charged. Fee charged from account _____

Partnership (where a Company/ies is a Partner also complete Company section)

- All partners including both the Company/ies and/or Individual/s must have a shareholding membership with People's Choice Credit Union.

If the Partnership has a formal Partnership Agreement, obtain

- An original, certified copy or certified extract of the Partnership Agreement. Check the Agreement to confirm name of the Partnership, how many Partners are required to consent to open a bank account, and any prescribed method of operation for bank accounts.

Trust (where a Company/ies is a Trustee also complete Company section)

- All trustees including both the Company/ies and/or Individual/s must have a shareholding membership with People's Choice Credit Union.
- Obtain an original, certified copy or certified extract of the Trust Deed and confirm the full name of the Trust and the full name(s) of the Trustees as detailed in Section A
- Settlor of Trust to be verified from Trust Deed (if applicable)

If a Regulated Trust, obtain

- A search of the trust/superannuation fund visa www.abn.business.gov.au (Super fund lookup) to verify the full name of the trust/superannuation fund

Company

- The Company must have a shareholding membership with People's Choice Credit Union
- Obtain an original or certified copy of Certificate of Incorporation/Record of Registration for Company
- Complete a search of the Company Name via www.equifax.com.au. Confirm the Director and Shareholder details from the search to the information provided in Section F and G
- Search fee of \$20.00 per company name search charged. Fee charged from account _____

Beneficial Owners of Company to be verified from the following:

- An original or certified copy of Certificate of Incorporation of Company with ASIC and/or an annual statement including the amendment
- An original or certified copy of the Constitution

Association

- Incorporated Association** – the Incorporated Association must have a shareholding membership with People's Choice Credit Union unless its rules prohibit it from doing so (in which case, obtain evidence that it is prohibited – e.g. an extract from its rules)
- Unincorporated Association** – at least 2 officeholders (maximum 4) must have a shareholding membership with People's Choice Credit Union
- Full name of Association to be verified from one of the below documents
- Obtain either an original or certified copy of the Constitution or Rules of the association; or
- An original or certified copy of the minutes of meeting of the association showing approval to open membership and stating officeholders authorised to sign on account

CRS/FATCA and Beneficial Owner requirements

- Passive entity status recorded on business membership
- CRS/FATCA status recorded for any Beneficial Owners if a Passive entity
- Beneficial Owner membership/s created for any Beneficial Owner/s not loaded as a BSG and their memberships linked to the Trust
- Beneficial Owners requested to supply Foreign Tax ID (if applicable)

Membership Signoff

Brochures provided to member/s

- Welcome Pack Issued
- Business Interest Rates
- All documents used to verify information are to be forwarded to Member Fulfilment with this Application.
- Companies other than Pty Ltd Companies sent to Business Banking for Approval

Documentation checked and opening of membership approved by:

| | | |
|------|-----------|------|
| Name | Signature | Date |
|------|-----------|------|

Senior Manager – Retail Sales & Relationships, Business Banking staff, Branch Manager or Assistant Manager

- Signature verified

| | | | |
|---------------------------------------|------|-----------|------|
| <input type="checkbox"/> Processed by | Name | Signature | Date |
| <input type="checkbox"/> Checked by | Name | Signature | Date |

Account Number



BUSINESS SAVINGS ACCOUNT APPLICATION

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Member Number

Membership Name

Account required

- Business & Community Account
- Business Access
- Business Line of Credit (subject to approval)
- Business Online Account

Signing Authority

- I/We require only one to sign (mandatory for Business Online Account)
- at least to sign
- All to sign

Facilities ^

I/We require

- a cheque facility 25 50 100
- an Overdraft (subject to approval)

^ Facilities are not available for Business Online Account

Account Access for Authorised Account Owners

Signatory 1

| | | |
|---------------|---------|------------|
| First name(s) | Surname | Position |
| Signature | | Member no. |

Facilities required for Signatory 1

- Business Visa Debit Card+ Visa Debit Card* Internet Banking** Phone Banking eStatements***

Signatory 2

| | | |
|---------------|---------|------------|
| First name(s) | Surname | Position |
| Signature | | Member no. |

Facilities required for Signatory 2

- Business Visa Debit Card+ Visa Debit Card* Internet Banking** Phone Banking eStatements***

Signatory 3

| | | |
|---------------|---------|------------|
| First name(s) | Surname | Position |
| Signature | | Member no. |

Facilities required for Signatory 3

- Business Visa Debit Card+ Visa Debit Card* Internet Banking** Phone Banking eStatements***

Signatory 4

| | | |
|---------------|---------|------------|
| First name(s) | Surname | Position |
| Signature | | Member no. |

Facilities required for Signatory 4

- Business Visa Debit Card+ Visa Debit Card* Internet Banking** Phone Banking eStatements***

+ available to business members who are self employed (Sole Trader, Partnership or Company).

*available only where accounts are "one to sign" and excludes Business Online Account. If card access is required for accounts with two or more to sign (for deposit access) a redicard must be ordered.

**Unlimited access to internet banking is only available for accounts with 'one to sign'.

***For business accounts to be available through eStatements, signatory must be registered for eStatements. A signatory will receive an eStatement in addition to the paper statement issued to the business.



Tax File Number / Exemption (if not completed, you may be taxed on interest received)

This information will be destroyed once loaded onto the system.

Account Number



BUSINESS SAVINGS ACCOUNT APPLICATION

People's Choice Credit Union,
a trading name of Australian Central Credit Union Ltd
ABN 11 087 651 125, acts under its own
Australian Financial Services Licence (AFSL 244310)
and Australian Credit Licence (ACL 244310)
T 13 11 82 peopleschoicecu.com.au

Declaration

It is acknowledged that:

- any liability in connection with the operation of this account generally is joint and several.
- People's Choice Credit Union has the right to decline or approve account applications.

I/We understand that it is an offence under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 to make a false and misleading statement. I/We declare that the details as shown on this form are complete and accurate.

I/We have received the Accounts & Access Facilities Terms & Conditions document, Fees & Charges document and Business Interest rates and agree to be bound by them.

I/We understand that the collection of my/our Tax File Numbers is authorised, and their use and disclosure are strictly regulated by Tax Laws and the Privacy Act. I/We understand that quotation is not compulsory, but tax may be taken out of my/our interest if I/we do not quote my/our Tax File Number or claim an Exemption.

I/We have received the Privacy Policy from People's Choice Credit Union. I/We consent to the collection, use, handling, and disclosure of my/our personal information as set out in the Privacy Policy. I/We understand the Privacy Policy may change from time to time and I/we will be kept updated of any changes to the Privacy Policy via People's Choice Credit Union's newsletters or on its website. I/We consent to the collection, use and disclosure of the information contained in this application and for any other application or communication I/we may have with People's Choice Credit Union from time to time. If I/we supply information to People's Choice Credit Union about another person, I/we confirm that I/we am/are authorised by that person to supply the information and I will inform that person how to contact People's Choice Credit Union, how to obtain the Privacy Policy, that People's Choice Credit Union will use and disclose their personal information for the purposes set out in this document and that they can gain access to that information.

I/We authorise People's Choice Credit Union to provide its relevant service providers:

- Any information provided by me/us in this document (including personal information)
- Any other information (including personal information) I/we may provide to People's Choice Credit Union which they may lawfully obtain about me/us where the provision of such information is required or allowed by law. This includes verification of personal information as required by the Anti-Money Laundering and Counter-Terrorism Financing Act 2006.

| | | |
|---------------|---------|----------|
| First name(s) | Surname | Position |
| Signature | | |
| First name(s) | Surname | Position |
| Signature | | |

Signing Instructions for above Declaration

| Membership Type | Declaration to be Signed by |
|---------------------------|---|
| Sole Trader | Sole Trader |
| Partnership | All partners |
| Company - Sole Trader | Sole Director/Secretary |
| Company - Multi Director | Any 2 Directors or 1 Director together with the Secretary |
| Association | Any 2 (max3) Officeholders (e.g. President, Secretary, Treasurer) |
| Trust/Superannuation Fund | If Trustees are Individuals, all Trustees If Trustee is a Company, as per Company Membership |

People's Choice Credit Union Use Only

- Cheque signatory card completed
- Internet Banking Access loaded (under personal membership/s)

Regulatory Requirements

Accounts & Access Terms & Conditions, Fees & Charges, Business Interest Rates

Issued to all members if not previously recorded Yes No

| | | | | |
|--|-----------------|-------|------|------|
| <input type="checkbox"/> Signatures verified | Operator's Name | Print | Sign | Date |
| <input type="checkbox"/> Processed by | Operator's Name | Print | Sign | Date |
| <input type="checkbox"/> Checked by | Operator's Name | Print | Sign | Date |



Cut off Tax File Number and destroy, once loaded