

SIGNATORY FORM

ASSOCIATIONS / BODY CORPORATES / CLUBS / ORGANISATIONS

When to use this form

Use this form when there is ANY change to the authorised signatories of either an Association, a Body Corporate, a Club or other Organisation (including changes to either one or all of the appointed signatories).

Evidence supporting the requested changes MUST always be provided. In most circumstances this will be in the form of Meeting Minutes advising of the signatory changes.

When this form is completed, it will replace all previously lodged signing authorities.

Documents required

- **Association/Club/Organisation Accounts** - Meeting Minutes in a recognised format subsequent to a legally constituted meeting advising of the resolution to change / update signatories. Minutes of the meeting (or extract) must be an official document signed by the Chairperson and include names and positions of the governing committee (chairperson, secretary, treasurer), authorised parties to operate the account and how many persons required to sign.
- **Body Corporate Account** - either Minutes of a legally constituted meeting as above and/or a BCCM Form 2 (Notice of authorised signatories on body corporate financial institution account).
- **Incorporated Organisations** - as above or a search document issued by the Office of Fair Trading may be presented to verify authorised Officer Bearers.

Identification requirements

- All newly appointed signatories are required to provide identification as per the Membership ID Requirements and all their details will need to be recorded in the New Party section of this Form.

How to complete form

Second Page:

- **Member details** to be fully completed.
- **Method of operation** to be completed as per the information contained in the supplied Meeting Minutes.
- **All parties to the membership** - full name of the appointed signatories for the membership. (Do not list any current signatories that are to be removed from the membership).
- **Acknowledgement of authorised account opener/s** is to be signed by the person/s legally authorised by resolution of the organisation.

New Party Pages:

- Each newly appointed party to the membership must complete the relevant details on these pages and sign where indicated.
- Existing parties to the membership do not need to complete unless any of their details have changed.
- Newly appointed party can return their individual page and acceptable identification to the branch of their choosing. All signatories do not need to attend the same branch nor do they need to attend at the same time.

Please note changes cannot be actioned until the second page of this form has been received by Heritage Bank.

Member details

Member number: _____ Date: _____

Member name: _____

Method of operation

Number of parties to sign: _____ Is there a special signing authority (Y/N)? _____

If yes, details must be stated in minutes supplied: _____

All parties to the membership - full name

All authorised signatories are to be listed to ensure the correct signatories are loaded on the member.

Full name: _____ Position: _____

Membership details

Please complete this section to ensure the most up to date information is available for membership correspondence such as bank statements.

Membership Mailing Address: _____

Suburb: _____ State: _____ Post Code: _____

Membership Email Address: _____

Primary Contact Numbers:

Mobile: _____ Home: _____ Work: _____

Acknowledgement of authorised account opener/s

The authorised signatories listed above replace the existing signing authority and will extend to all accounts and term deposits operated under the above member number and will remain in force until Heritage receives notice in writing of the cancellation thereof.

I/we certify that authority has been duly given by resolution at a legally constituted meeting for those nominated to conduct operations on behalf of the said body and evidence of this change has been provided.

CHEQUE ACCOUNTS: This does not refer to cheques dated prior to the date hereof and presented for payment on or after such date.

Signature of Person(s) Authorised to Sign

Signature of Person(s) Authorised to Sign

Branch use only	Branch Stamp:	Checked:	Has KYC & ID been collected & verified (Y/N)?	CSO Signature:	Checking Officer Signature:

NOTE: It is an offence under the Financial Transaction Reports Act 1988 and the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 to give false and misleading information.

PARTY ONE (only complete if this party is not already on the membership or if any details require updating)**Existing relationship with Heritage**

Do you have an existing relationship with Heritage (Y/N): ____ For example, do you have a membership or are you listed as a signatory on another membership.

If yes, list existing member number: _____

Party type (relationship)**PARTY ONE:** Authorised Signatory Power of Attorney Executor Token Holder *Enquiry Access Only Chairman Treasurer Secretary (✓ to select appropriate party type, may select more than one party type if appropriate)**Personal details**

*Title: _____ *Surname: _____

*Given names: _____ Commonly known as: _____

*First school attended: _____

*Mother's maiden name: _____

Date of birth: _____ Gender (M/F): _____ Drivers licence: _____

***Residential address details**

Property: _____ Unit/flat #: _____ House #: _____

Street: _____ Street type: _____

Suburb: _____ State: _____ Postcode: _____

Mailing address details

Mail address: _____

Suburb: _____ State: _____ Postcode: _____

***Contact details**

Home: _____ Work: _____ Mobile: _____

Other: _____ If other, relationship: _____

Foreign Tax residency certificationAre you, for Tax purposes, a resident of any country other than Australia? No Yes

If YES, please complete the below "Common Reporting Standard details: Resident of a foreign country" section to complete your application.

Common Reporting Standard details: Resident of a foreign country

	Country / Jurisdiction of Tax residence If more than 3 countries are selected, please call our Contact Centre on 1314 22	If no TIN available, select reason: A The country/jurisdiction where the Account Holder is resident does not issue TINs B Unable to provide to the bank due to the law by country/Jurisdiction of tax residence C Unable to obtain a TIN or equivalent (please state reason why)
1		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C
2		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C
3		<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C

Specimen Signature*Foreign Country Tax Information Declaration**I/we declare: - that the information provided in this form is correct and reflects my/our tax residency status;
- that I/we will update Heritage immediately if my/our tax residency status is to change in the future.

I/we acknowledge that the information contained in this form and information regarding the Account Holder(s) and any Reportable Account(s) may be provided to the Australian Taxation Office and exchanged with tax authorities of another country/jurisdiction or countries/jurisdictions in which the Account Holder(s) may be tax resident pursuant to intergovernmental agreements to exchange financial account information.

Signature of Party One _____

NOTE: If adding a person with Enquiry Access Only, complete fields marked with*.

PARTY TWO (only complete if this party is not already on the membership or if any details require updating)**Existing relationship with Heritage**

Do you have an existing relationship with Heritage (Y/N): ____ For example, do you have a membership or are you listed as a signatory on another membership.

If yes, list existing member number: _____

Party type (relationship)**PARTY ONE:** Authorised Signatory Power of Attorney Executor Token Holder *Enquiry Access Only Chairman Treasurer Secretary (✓ to select appropriate party type, may select more than one party type if appropriate)**Personal details**

*Title: _____ *Surname: _____

*Given names: _____ Commonly known as: _____

*First school attended: _____

*Mother's maiden name: _____

Date of birth: _____ Gender (M/F): _____ Drivers licence: _____

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Mailing address details

Mail address: _____

Suburb: _____ State: _____ Postcode: _____

***Contact details**

Home: _____ Work: _____ Mobile: _____

Other: _____ If other, relationship: _____

Foreign Tax residency certificationAre you, for Tax purposes, a resident of any country other than Australia? No Yes

If YES, please complete the below "Common Reporting Standard details: Resident of a foreign country" section to complete your application.

Common Reporting Standard details: Resident of a foreign country

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Signature of Party Two _____

NOTE: If adding a person with Enquiry Access Only, complete fields marked with*.

PARTY THREE (only complete if this party is not already on the membership or if any details require updating)**Existing relationship with Heritage**

Do you have an existing relationship with Heritage (Y/N): ____ For example, do you have a membership or are you listed as a signatory on another membership.

If yes, list existing member number: _____

Party type (relationship)**PARTY ONE:** Authorised Signatory Power of Attorney Executor Token Holder *Enquiry Access Only Chairman Treasurer Secretary (✓ to select appropriate party type, may select more than one party type if appropriate)**Personal details**

*Title: _____ *Surname: _____

*Given names: _____ Commonly known as: _____

*First school attended: _____

*Mother's maiden name: _____

Date of birth: _____ Gender (M/F): _____ Drivers licence: _____

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Mailing address details

Mail address: _____

Suburb: _____ State: _____ Postcode: _____

***Contact details**

Home: _____ Work: _____ Mobile: _____

Other: _____ If other, relationship: _____

Foreign Tax residency certificationAre you, for Tax purposes, a resident of any country other than Australia? No Yes

If YES, please complete the below "Common Reporting Standard details: Resident of a foreign country" section to complete your application.

Common Reporting Standard details: Resident of a foreign country

	Country / Jurisdiction of Tax residence If more than 3 countries are selected, please call our Contact Centre on 1314 22	If no TIN available, select reason: A The country/jurisdiction where the Account Holder is resident does not issue TINs B Unable to provide to the bank due to the law by country/Jurisdiction of tax residence C Unable to obtain a TIN or equivalent (please state reason why)
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Signature of Party Three _____

NOTE: If adding a person with Enquiry Access Only, complete fields marked with*.

PARTY FOUR (only complete if this party is not already on the membership or if any details require updating)**Existing relationship with Heritage**

Do you have an existing relationship with Heritage (Y/N): ____ For example, do you have a membership or are you listed as a signatory on another membership.

If yes, list existing member number: _____

Party type (relationship)**PARTY ONE:** Authorised Signatory Power of Attorney Executor Token Holder *Enquiry Access Only Chairman Treasurer Secretary (✓ to select appropriate party type, may select more than one party type if appropriate)**Personal details**

*Title: _____ *Surname: _____

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*Mother's maiden name: _____

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Mailing address details

Mail address: _____

Suburb: _____ State: _____ Postcode: _____

***Contact details**

Home: _____ Work: _____ Mobile: _____

Other: _____ If other, relationship: _____

Foreign Tax residency certificationAre you, for Tax purposes, a resident of any country other than Australia? No Yes

If YES, please complete the below "Common Reporting Standard details: Resident of a foreign country" section to complete your application.

Common Reporting Standard details: Resident of a foreign country

	Country / Jurisdiction of Tax residence If more than 3 countries are selected, please call our Contact Centre on 1314 22	If no TIN available, select reason: A The country/jurisdiction where the Account Holder is resident does not issue TINs B Unable to provide to the bank due to the law by country/Jurisdiction of tax residence C Unable to obtain a TIN or equivalent (please state reason why)
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Signature of Party Four _____

NOTE: If adding a person with Enquiry Access Only, complete fields marked with*.

PARTY FIVE (only complete if this party is not already on the membership or if any details require updating)**Existing relationship with Heritage**

Do you have an existing relationship with Heritage (Y/N): ____ For example, do you have a membership or are you listed as a signatory on another membership.

If yes, list existing member number: _____

Party type (relationship)**PARTY ONE:** Authorised Signatory Power of Attorney Executor Token Holder *Enquiry Access Only Chairman Treasurer Secretary (✓ to select appropriate party type, may select more than one party type if appropriate)**Personal details**

*Title: _____ *Surname: _____

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Mailing address details

Mail address: _____

Suburb: _____ State: _____ Postcode: _____

***Contact details**

Home: _____ Work: _____ Mobile: _____

Other: _____ If other, relationship: _____

Foreign Tax residency certificationAre you, for Tax purposes, a resident of any country other than Australia? No Yes

If YES, please complete the below "Common Reporting Standard details: Resident of a foreign country" section to complete your application.

Common Reporting Standard details: Resident of a foreign country

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Signature of Party Five _____

NOTE: If adding a person with Enquiry Access Only, complete fields marked with*.

PARTY SIX (only complete if this party is not already on the membership or if any details require updating)**Existing relationship with Heritage**

Do you have an existing relationship with Heritage (Y/N): ____ For example, do you have a membership or are you listed as a signatory on another membership.

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Party type (relationship)**PARTY ONE:** Authorised Signatory Power of Attorney Executor Token Holder *Enquiry Access Only Chairman Treasurer Secretary (✓ to select appropriate party type, may select more than one party type if appropriate)**Personal details**

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***Contact details**

Home: _____ Work: _____ Mobile: _____

Other: _____ If other, relationship: _____

Foreign Tax residency certificationAre you, for Tax purposes, a resident of any country other than Australia? No Yes

If YES, please complete the below "Common Reporting Standard details: Resident of a foreign country" section to complete your application.

Common Reporting Standard details: Resident of a foreign country

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Signature of Party Six _____

NOTE: If adding a person with Enquiry Access Only, complete fields marked with*.