

Applicant/s to complete this section.

Complete this form to nominate or vary signatories on personal account/s. Only the signatories named below will be authorised signers from the effective date marked below with account/s owners to authorise changes.

A F49 'Account access application' must also be completed to request an additional card on a savings or credit card account.

Account owner/s.			
Member number.		Member name.	
Joint member number.		Joint member name.	
Nominated account/s.			
I/We wish to change the signatorie	s on the following accounts.		
Account number.		One signature OR required.	Two signatures Available in required. Available in
Account number.		One signature OR required.	Two signatures Available in required. Available in
Account number.		One signature OR required.	Two signatures Available in required. Available in
Account number.		One signature required.	Two signatures Available in required. Available in
Effective date.	/ /	Note: If no signing authority is authority will apply.	indicated, 'Two signatures required' signing
All owners and new sigatorie	es.		
Member number (if applicable). ¹	Full name (please print).	Signature.	Online banking access? ¹
1.			Yes. No.
2.			Yes. No.
3.			Yes. No.
4.			Yes. No.

Verifying your identity.

You should provide sufficient documents from the lists below to verify your full name, and either your date of birth or residential address. If your photographic identification does not have your full name and either your date of birth or residential address, you can use an additional non-photographic identification document to fulfil this requirement.

At least one form of photographic identification should be provided.

${\bf Acceptable\ photographic\ identification.}$

- Drivers Licence
- Passport

$\label{lem:control} \mbox{Acceptable non-photographic identification (if required).}$

- $\bullet \ Birth \ certificate$
- Medicare Card
- Citizenship certificate
- Tax assessment notice
- Rates Notice
- State Government ID card (TBD)

If your photographic identification does not have your full name and either your date of birth or residential address, you can use an additional non-photographic identification document to fulfill this requirement. If you are unable to visit a branch, please fill out F602 - Certification form. Verifying your identity. You can get your documents certified by approved certifier.

 $For approved certifiers, visit {\bf defence bank.com.au/tools-and-advice/forms-and-applications/approved-certifiers.} \\$

The completed application form and certified identification documents can be posted to your local Defence Bank branch location for processing.

To locate you nearest branch please visit defencebank.com.au/about-us/branches



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Details of all sig								
Details of all sig	natories to Defence B	ank.						
If there are more than	n four signatories to Defen	ce Bank to be i	identified and veri	ified, please ask for additional p	pages.			
Signatory 1.	Signatory. Yes.	No.	Access to Online Ban	nking ² Yes. No.	Access to Business Bankin	g ⁴ Yes. No.		
Member number¹.				Residential address.				
Title/rank.	Gende	er.			State.	Postcode.		
Last name.				Phone.				
First name.				Other phone.				
Middle name(s).				Email.				
Date of birth.	/	/		Occupation.				
Tax Residency De	claration.			Intended nature of relationship. ⁵				
Are you an Australia	n resident for taxation purp	ooses? ₃		Please provide the purpose of the account with Defence Bank.				
Yes. No. For taxation purposes If you selected no for the above question, Australia is not your sole tax residence or you are a US citizen/resident you				Everyday banking. Other	Savings.	Investment.		
must also comple								
_	cte a Poor Poreign Tax	Declaration	n form.	(please specify).				
Signatory 2.	Signatory. Yes.	No.	Access to Online Ban		Access to Business Bankin	g ⁴ Yes. No.		
		_	Aggesta			g ⁴ Yes. No.		
Member number ¹ .		No.	Aggesta	nking ² Yes. No.		g ⁴ Yes. No.		
Member number¹. Title/rank.	Signatory. Yes.	No.	Aggesta	nking ² Yes. No.	Business Bankin	g·		
Member number¹. Title/rank. Last name.	Signatory. Yes.	No.	Aggesta	Residential address.	Business Bankin	g•		
Member number ¹ . Title/rank. Last name. First name.	Signatory. Yes.	No.	Aggesta	Residential address. Phone.	Business Bankin	g•		
Member number ¹ . Title/rank. Last name.	Signatory. Yes.	No.	Aggesta	Residential address. Phone. Other phone.	Business Bankin	g•		
Member number¹. Title/rank. Last name. First name. Middle name(s).	Signatory. Yes. Gend	No.	Aggesta	Residential address. Phone. Other phone. Email.	Business Bankin	g·		
Member number ¹ . Title/rank. Last name. First name. Middle name(s). Date of birth. Tax Residency De	Signatory. Yes. Gend	No.	Aggesta	Residential address. Phone. Other phone. Email. Occupation.	Business Bankin State.	Postcode.		
Member number ¹ . Title/rank. Last name. First name. Middle name(s). Date of birth. Tax Residency De	Signatory. Yes. Gend / cclaration.	No.	Aggesta	Residential address. Phone. Other phone. Email. Occupation. Intended nature of re	State. State. State State.	Postcode.		



Signatory 3.	Signatory. Yes.	Access to Online Bar	nking ² Yes. No.	Access to Business Bankin	g ⁴ Yes. No.
Member number¹.			Residential address.		
Γitle/rank.	Gender.			State.	Postcode.
Last name.			Phone.		
First name.			Other phone.		
Middle name(s).			Email.		
Date of birth.	/ /		Occupation.		
Tax Residency Decla	ration.		Intended nature of rel	ationship.5	
Are you an Australian r	esident for taxation purposes? ₃		Please provide the purpos	se of the account with D	efence Bank.
Yes. No.	For taxation purposes		Everyday banking.	Savings.	Investment.
your sole tax reside	or the above question, Au nce or you are a US citize a F601 Foreign Tax Decl	en/resident you	Other (please specify).	Ü	
your sole tax reside must also complete Signatory 4.	or the above question, Au nce or you are a US citize	en/resident you aration form.	Other (please specify). nking² Yes. No.	Access to Business Bankin	g ⁴ Yes. No.
your sole tax reside must also complete Signatory 4.	or the above question, Au nce or you are a US citize a F601 Foreign Tax Decl	en/resident you aration form.	Other (please specify).		g ⁴ Yes. No.
your sole tax reside must also complete Signatory 4. Member number ⁴ . Citle/rank.	or the above question, Au ence or you are a US citize a F601 Foreign Tax Decl Signatory. Yes.	en/resident you aration form.	Other (please specify). nking² Yes. No.	Access to Business Bankin	
your sole tax residemust also complete Signatory 4. Member number ¹ . Citle/rank. Last name.	or the above question, Au ence or you are a US citize a F601 Foreign Tax Decl Signatory. Yes.	en/resident you aration form.	Other (please specify). No. Residential address.	Access to Business Bankin	
your sole tax reside must also complete	or the above question, Au ence or you are a US citize a F601 Foreign Tax Decl Signatory. Yes.	en/resident you aration form.	Other (please specify). No. Residential address. Phone.	Access to Business Bankin	
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your sole tax residemust also complete Signatory 4. Member number ⁴ . Citle/rank. Last name. First name. Middle name(s). Date of birth. Tax Residency Declar	or the above question, Aunce or you are a US citize a F601 Foreign Tax Decl Signatory. Yes. No	en/resident you aration form. Access to Online Bar	Other (please specify). Residential address. Phone. Other phone. Email. Occupation.	Access to Business Bankin State.	Postcode.
your sole tax residemust also complete Signatory 4. Member number ⁴ . Citle/rank. Last name. First name. Middle name(s). Date of birth. Tax Residency Declar	or the above question, Audree or you are a US citize a F601 Foreign Tax Decl Signatory. Yes. No Gender.	en/resident you aration form. Access to Online Bar	Other (please specify). No. Residential address. Phone. Other phone. Email. Occupation. Intended nature of relationships and the properties of the phone.	Access to Business Bankin State.	Postcode.

- 3. The completion of this question is mandatory for all individuals connected to this membership as Defence Bank is required to comply with reporting obligations under the Foreign Account Tax Compliance Act 2010 (FATCA) and Common Reporting Standards (CRS) legislation. If the individual is not an Australian resident for taxation purposes, they must also complete a Foreign Tax Declaration Form.

 4. The undersigned request to have access to our account(s) through Business Banking and Two to Sign Banking. Business Banking and Two to Sign Banking allows accounts signing authority to use Online Banking. A transaction can be set up and approved by one member and then approved by another before it is processed ensuring that 'two to sign' authority is being followed.
- 5. In line with our regulatory obligations, understanding the origin of your deposits and the intended purpose of your Defence Bank membership will help us ensure the integrity and security of your ongoing banking relationship.



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Privacy information.

Defence Bank complies with applicable privacy laws. General information about how we collect, use and disclose personal information about you is set out in our Defence Bank Products and Services – Conditions of Use. Our Privacy Policy provides additional information about how we handle your personal information. Both of these documents can be viewed on our website at **defencebank.com.au** or are available on request. When you access our website the terms of our Website Privacy Notice also apply. When you apply for a loan product we will ask that you give us various privacy permissions.

By giving access to an authorised person you are giving them authority to some, or all of the following:

- Transfer money/pay someone.
- Access Online Banking and the App facilities.
- Make a BPAY payment.
- Make international transfers.

- Set up notifications (alerts).
- Set up Pay ID.
- Make cash withdrawals.
- Remove themselves as a signatory.

View balances and transaction history.				• Update their own details.			
Authorisation by existing owner/s.							
As the owner/s of the	nominated acco	ounts, I/we author	rise the list of signatories	to operate on the accoun	nt(s) from the effecti	ive date (above	e).
Member name.				Joint member name.			
Member signature.				Joint member signature.			
Date.	/	/		Date.	/	/	

Office use only.

Identification and form completion verification check.							
Staff name 1.			Staff name 2.				
Signature.			Signature.				
Date. / /			Date. / /				
Working alone? Yes. No.			Branch name.				
Digital ID.			Foreign ID.				
Was member verified via digital ID?	Yes. N	No.	Has ID been approved by Business Services? Yes. No.				
ID Application (App) open in branch?	Yes. N	Vo.	If Yes, who approved?				
Member navigated to ID within the app observed?	Yes. N	No.	Date of approval. / /				