

MEMBERSHIP APPLICATION - Business

Membership Name: Member/Client No:

SHAREHOLDING MEMBER

NON SHAREHOLDING/LINKED MEMBER/CLIENT

Nature of
Business

No:

No:

ANZSIC Code:

Source of funds:

ORGANISATIONS DETAILS

Organisation / Business Name:

Membership Type: Partnership Registered / Unregistered Business Trust (type)

Sole Trader Registered / Unregistered Business Proprietary Company

Date of Registration:

ABN or ACN: Industry:

Registered Address:

Postal Address:

Principle place of business:

Contact Numbers: Work Mobile Home

Web address: Email Address:

When you open a shareholding membership \$10 for share capital (1 share) will be deducted from your initial deposit.

ANNUAL REPORT & ANNUAL GENERAL MEETING NOTICES

As a member of BDCU, you will receive notice papers regarding our Annual General Meeting. In order to reduce our impact on the environment, you can choose to receive these papers electronically.

Yes, I agree to receive these notices electronically.

You can choose to receive annual reports about BDCU. They contain information on its financial position and performance, how efficiently it is being managed and about any financial risks it may face.

You are not obliged to complete this section but, if you do not respond we are not required to send copies of the annual reports to you. You can change your choice at any time by notifying us in writing. Your choice will remain a standing election until notice is received.

Yes, I want you to send me annual financial reports.

Yes, I want you to send these reports electronically.

INFORMATION ON THE ANTI MONEY LAUNDERING AND COUNTER TERRORISM FINANCING ACT 2006 (Cth)

Note: It is an offence under the Anti Money Laundering and Counter Terrorism Financing Act 2006 (Cth) to give false and misleading information.

BDCU Limited will collect personal information as required by the Anti Money Laundering and Counter Terrorism Financing Act 2006 (Cth) and may take steps to verify the personal information it has collected.

If you provide BDCU Limited with incomplete or inaccurate information BDCU Limited may not be able to provide the products or services that you are seeking.

BDCU Limited ACN 087 649 787 (BDCU)

Ph (02) 4860 4000 Fax (02) 4861 6222 Email memberservice@bdcualliancebank.com.au Web www.bdcualliancebank.com.au

USE OF INFORMATION

We may use your personal information (including credit related information) for the purpose of providing products and services to you and managing our business. This may include:

- Assessing and processing your application for the products and services we offer.
- Establishing and providing our systems and processes to provide our products and services to you
- Executing your instructions
- Charging and billing
- Uses required or authorised by law
- Maintaining and developing our business systems and infrastructure
- Research and development
- Collecting overdue payments due under credit products
- Managing our rights and obligations regarding external payment systems, or
- Direct marketing

COMMON REPORTING STANDARD (CRS) – Completion of all questions is mandatory

- | | | |
|--|---|-----------------------------|
| Are any individual applicants residents of any country other than Australia or US? | <input type="checkbox"/> Yes – please complete the Foreign Tax Details Form | <input type="checkbox"/> No |
| Is the Entity created in any other country other than Australia or US? | <input type="checkbox"/> Yes – please complete the Foreign Tax Details Form | <input type="checkbox"/> No |
| Is the Entity Account Holder a Passive Non-Financial Entity? | <input type="checkbox"/> Yes – please complete the Foreign Tax Details Form | <input type="checkbox"/> No |

FOREIGN ACCOUNTS TAX COMPLIANCE ACT (FATCA) – Completion of all questions is mandatory

- | | | |
|--|---|-----------------------------|
| Are any applicants Citizens or Residents of the US for Tax purposes? | <input type="checkbox"/> Yes - please complete the Foreign Tax Details Form | <input type="checkbox"/> No |
| Is the Entity created in the US, established under the laws of the US or a US taxpayer? | <input type="checkbox"/> Yes – please complete the Foreign Tax Details Form | <input type="checkbox"/> No |
| Is the Entity a Financial Institution? | <input type="checkbox"/> Yes – please complete the Foreign Tax Details Form | <input type="checkbox"/> No |
| Are the controlling persons of an Entity Citizens or Residents of the US for Tax Purposes? | <input type="checkbox"/> Yes – please complete the Foreign Tax Details Form | <input type="checkbox"/> No |

For companies, trusts and partnerships a controlling person is an individual who is a shareholder, trustee, beneficiary, settlor or partner AND who owns 25% or more of the Entity, controls 25% or more of the voting rights including a power of veto, or holds the position of senior managing official of the Entity. For associations and co-operatives a controlling person is also an individual who is entitled to 25% or more of the assets of the Entity upon dissolution.

I/We apply for share capital in BDCU Limited. I acknowledge receipt of the BDCU's General Terms and Conditions and agree to be bound by the Rules and Constitution of BDCU Limited.

Note: Membership confers rights and obligations under BDCU's Constitution, a copy of which you may obtain upon request.

I/We consent to the collection, use, handling, disclosure and verification of personal information as required by the Anti Money Laundering and Counter Terrorism Financing Act 2006 (Cth), and BDCU's Privacy Notice

I/We acknowledge receipt of BDCU's Privacy Notice that is contained within BDCU's General Terms and Conditions and available at www.bdcualliancebank.com.au

I/We believe the above information supplied to be true and correct.

<input type="checkbox"/> I declare I am an Australian citizen or permanent Australian resident		
Signature: _____ (Director, Chairman, Chief Officer, Trustee, owner)	Print Name: _____ / / Date
<input type="checkbox"/> I declare I am an Australian citizen or permanent Australian resident		
Signature: _____ (Director, Chairman, Chief Officer, Trustee, owner)	Print Name: _____ / / Date

I declare I am an Australian citizen or permanent Australian resident

Signature: _____ Print Name: _____ / /
(Director, Chairman, Chief Officer, Trustee, owner) Date

Please provide details of all beneficial owners

A beneficial owner *is* an individual who ultimately owns or controls the account directly or indirectly.
“Owns” means ownership or control (either directly or indirectly).

Full Name	Address	% of ownership/control*

* All beneficial owners with more than 25% or more must complete Section A - Beneficial Owners and meet ID requirements

If the membership is an Individual OR Family Trust

If the terms of the Trust identify the beneficiaries by name please complete the details below

Beneficiary 1 – Full legal name (given name, middle name(s), family name) or organisation name

Beneficiary 2 – Full legal name (given name, middle name(s), family name) or organisation name

Beneficiary 3 – Full legal name (given name, middle name(s), family name) or organisation name

Beneficiary 4 – Full legal name (given name, middle name(s), family name) or organisation name

Declaration

The business/company/trust mentioned herein declares:

- the beneficial owners with more than 25% or more are listed in this document and are the true beneficial owners, and
- their particulars are accurate and not falsified.
- they are Australian citizens or permanent Australian residents

NOTE: Normal AML /CTF identification requirements need to be completed for EVERY beneficial owner with more than 25% or more ownership/control.

Signature of Chairperson of Directors or Sole Director

Date

SECTION A - BENEFICIAL OWNERS

1.	Full name of Beneficial Owner	Other names commonly known by:	Member/Client No:
Date of Birth	 / /	<input type="checkbox"/> Male <input type="checkbox"/> Female
Address:		Verified Y / N	
Postal Address:		Owner Y / N	
Phone (home):		(business):	Mobile:
Email:		Statements/Letters Y / N	

Use Of Information

We may use your personal information (including credit-related information) for the purpose of providing products and services to you and managing our business. This may include

- assessing and processing your application for the products and services we offer
- establishing and providing our systems and processes to provide our products and services to you
- executing your instructions
- charging and billing
- uses required or authorised by law
- maintaining and developing our business systems and infrastructure
- research and development
- collecting overdue payments due under our credit products
- managing our rights and obligations regarding external payment systems, or
- direct marketing

I acknowledge receipt of BDCU's Privacy Notice that is contained within BDCU's General Terms and Conditions and available at www.bdcualliancebank.com.au

I declare that I am an Australian Citizen or permanent Australian resident.

I consent to the collection, use, handling, disclosure and verification of personal information as required by the Anti Money Laundering and Counter Terrorism Financing Act 2006 (Cth), and BDCU's Privacy Notice

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Signature:

Date:

2.	Full Name of Beneficial Owner	Other names commonly known by:	Member/Client No:
Date of Birth	 / /	<input type="checkbox"/> Male <input type="checkbox"/> Female
Address:		Verified Y / N	
Postal Address:		Owner Y / N	
Phone (home):		(business):	Mobile:
Email:		Statements/Letters Y / N	

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Signature:	Date:
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Important:

Where there are more than 2 beneficial owners please have them complete their details on FRM 0115a Business Membership Application (Supplement) and attach to this form.

Office Use Only (Please tick each box to indicate all actions have been completed)		
<input type="checkbox"/> AML / CTF Identification requirements met	<input type="checkbox"/> TFN Loaded (if provided by member)	<input type="checkbox"/> Provide PDS & FSG Compliance Pack (event loaded)
<input type="checkbox"/> All applicable Beneficial Owners have completed Section A	<input type="checkbox"/> Custom fields 1 & 2 updated	<input type="checkbox"/> No duplicate membership held
<input type="checkbox"/> All beneficial owners with more than 25% or more ownership/control have met the AML/CTF identification requirements		<input type="checkbox"/> All positions/occupations have been loaded
<input type="checkbox"/> ASIC company search completed or collected		<input type="checkbox"/> A copy of the business name registration has been collected
<input type="checkbox"/> Nature of business loaded	<input type="checkbox"/> ANZSIC Code loaded	<input type="checkbox"/> A copy of the formal partnership agreement has been collected
<input type="checkbox"/> A copy of the Trust Deed has been collected (original must be sighted. If a certified copy supplied, certification must be verified).		
<input type="checkbox"/> Trust Deed – Is the Settlor's contribution \$10,000 or more? N (open membership) Y (referred to Ops or AML manager before opening membership)		
<input type="checkbox"/> Does any owner, beneficial owner, or ATO have an occupation that indicates they may be a politically exposed person (PEP) Yes / No If Yes, load PEP status in P&R profile and refer to AML via email with the membership number and PEP status.		