



Business Term Deposit Application

For any enquiries contact us on **1300 658 108** Mon to Fri 9am-5pm (Melbourne time).
Visit mebank.com.au

Please complete this form and mail it together with the supporting documentation listed within the application checklist to:

New Accounts - Business Banking, ME Bank, Reply Paid 1345, Melbourne VIC 8060

If you run out of space, please complete the information requested within a second application form or on a separate sheet and return with this form.

Section 1 - Applicant details

Applicant type: Proprietary Company Public Company Sole Trader Trust
 Incorporated Association Union Partnership

Full legal name of applicant: *Trust applicants note: this is the full name of the trust, (e.g. ABC Pty Ltd as trustee for the XYZ Trust)*

ABN (if any) (sole trader, partnership and other applicant types) ACN (company applicants only) Registration number (incorporated association applicants only)

Registered business name of applicant (including the trustee in respect of the trust) (if any)

Registered office address or address of the trust (PO Box is not acceptable)

Address of principal place of business/administration if different to the above (PO Box is not acceptable)

Postal address (if different to the address of principal place of business)

Country of incorporation/establishment Specify type of trust (e.g. discretionary or unit trust)

Business super fund (if applicable) Business phone number

Address for notices

We may send you correspondence and notices about the Business Term Deposit Account to your mailing address, by facsimile or by email.

Mailing address: (If different to above)

Facsimile number Email address:

Who can we contact about this application? Name Business phone number

Section 2 - Business Term Deposit details

Section 2.1 - Initial Deposit

Investment Amount (minimum \$1000)

Cheque attached* Electronic transfer from nominated account**

* Cheques must be made payable to at least one holder of the Business Term Deposit Account or to "ME Bank".

** For the electronic transfer of deposit funds please complete the details of your nominated account in Section 3. Please ensure the funds are available as this amount will be automatically debited from your nominated account when we open your Business Term Deposit Account.

Section 2.2 - Business Term Deposit Options

Term

days or months or Maturity date

Note - the minimum term is 30 days and the maximum term is 730 days. For the purpose of nominating a term please note that a month is taken to be 30 days and not a calendar month. What this means is that if you for example select a 3 month term your Term Deposit will be invested for 90 days.

Interest payments:

If your Business Term Deposit is for a term of more than 365 days, in addition to interest being paid to you at maturity, interest will be paid to you 365 days from the date your account is opened. Please select how you would like to receive this interest payment:

- Reinvested to the Business Term Deposit Account
- Transferred to the nominated account specified in Section 3 on the next page; or
- Paid by bank cheque sent to my mailing address detailed in Section 1

Section 2 - Business Term Deposit details *(continued)*

Maturity

We will write to you approximately 10 business days prior to maturity of your Business Term Deposit to obtain your maturity instructions. If you do not instruct us as to what should happen to your Business Term Deposit at least one business day prior to maturity, we will reinvest your Business Term Deposit for the same term at the interest rate applicable on the maturity date

Section 3 - Nominated account details

You may link an account with an Australian financial institution to your new Business Term Deposit Account. Accordingly please complete the details of your nominated account below. If you want ME Bank to debit money from your nominated account for your initial deposit, then you also need to complete Section 2.1 above. Please ensure you sign Section 12 of this application form to authorise the Direct Debit Request.

Please print details as they appear on the statement of the nominated account. The nominated account must be in the same name as the account holder, or where the account is held jointly, in the name of both of the account holders.

Name of financial institution

Address of financial institution

State

Postcode

Account name

BSB number

Account number

Section 4 - Applicant identification information and individual details

Identification information

To comply with our obligations under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006, we must collect certain information in relation to you.

The information to be collected depends upon your organisation type and includes the following:

- If you are a company - details of **each** director.
- If you are a partnership - details of **each** partner.
- If you are a trust - details of **each** trustee.

Note, if the trustee or trustees are:

- natural person(s) - please complete the relevant details for each individual trustee within this **Section 4**.
- company(ies) - please complete the relevant details within **Section 7** and **Section 8** in relation to one company trustee only. If there is more than one company trustee of the trust, please detail the full name and registered office address of the other company trustees on a separate sheet and return with this application form.
- If you are a sole trader - details of the proprietor.
- If you are an incorporated association - details of the association's Chairman, Secretary and Treasurer (or equivalent officer in each case).
- If you are a union - details of the union's Chairman, Secretary and Treasurer (or equivalent officer in each case).

Please arrange for each person described as applicable to your entity type to complete their details within Section 4.

Personal details - Person No.1

Relationship to applicant:

Director

Proprietor

Partner

Sole trustee

Joint trustee

Other *(please specify)*

Title *Mr/Mrs/Miss/Ms/Other*

Surname

Given name(s)

Gender (M or F)

Residential address *(PO Box is not acceptable)*

State

Postcode

Date of birth

Mobile number

Work number

Personal details - Person No.2

Relationship to applicant:

Director

Proprietor

Partner

Sole trustee

Joint trustee

Other *(please specify)*

Title *Mr/Mrs/Miss/Ms/Other*

Surname

Given name(s)

Gender (M or F)

Residential address *(PO Box is not acceptable)*

State

Postcode

Date of birth

Mobile number

Work number

Section 8 - Company trustee identification information - trust applicants only

Please complete in relation to one company trustee of the trust only.

Full company name

ACN

Company type: Proprietary Company Public Company

Registered office address (PO Box is not acceptable)

State

Postcode

Principal place of business address if different to the registered office address specified above (PO Box is not acceptable)

State

Postcode

Details of Director(s)

Please provide the full names of each director of the company:

Given name(s)

Surname

Given name(s)

Surname

Details of Director(s)

Please complete **Section 4** to provide details of the directors of the trustee company.

Details of Major Shareholder(s)

Please complete **Section 9** to provide details of major shareholders of the trustee company.

Section 9 - Additional details - company and trust applicants only

Company major shareholder's details (company applicants only)

Please provide the details of each individual who owns 25% or more of the issued capital of the company

Given name(s)

Surname

Residential address (PO Box is not acceptable)

State

Postcode

Given name(s)

Surname

Residential address (PO Box is not acceptable)

State

Postcode

Given name(s)

Surname

Residential address (PO Box is not acceptable)

State

Postcode

Section 10 - Privacy notice

By completing this application form, you are providing personal information about the individuals named in this application to ME Bank for the primary purpose of us verifying their identity in accordance with the Anti-Money Laundering and Counter-Terrorism Financing Act 2006, and to enable us to assess your application and administer your account. The personal information of the individuals named in this application may be used and disclosed to third party service providers for these purposes and without this information we may not be able to consider or approve your application.

Any of the individuals named in this application may request access to their own personal information held by ME Bank and ask for it to be corrected if it is inaccurate. To do this they should phone 1300 658 108 during normal business hours or write to the Privacy Officer, ME Bank, GPO Box 1345, Melbourne, Victoria, 3001.

Section 11 - Customer Relations

At ME Bank, we are committed to building a reputation for excellence in customer service that includes delivering on our promises. If for some reason our service does not meet your expectations, please contact us as set out above to find out about our dispute resolution procedures. ME Bank is a member of the Financial Ombudsman Service.

Section 12 - Representations, Declaration and Direct Debit Request Authority

1. I/We declare that all information provided in this application is true and correct.
2. I/We acknowledge and agree that I/we have obtained and read the Business Deposit Products Interest Rates, Fees and Charges Schedule and that I/we have received any further fees and charges information requested from ME Bank.
3. I/We agree to comply with the ME Bank Business Term Deposit Account Terms and Conditions. I/We agree to ensure that any Authorised Representatives also comply with these Terms and Conditions. Copies of these Terms and Conditions and the Business Deposit Products Interest Rates, Fees and Charges schedule are available from mebank.com.au or by calling us on 1300 658 108. ME Bank will also provide you with copies of the Terms and Conditions before you start using your account.
4. I/We warrant and represent as follows:
 - in the case of a sole director company, I am the sole director and sole secretary and have full power and authority to open and operate a Business Term Deposit Account;
 - in the case of trusts, I represent that I am the only trustee(s) of the trust and I have full trust power and authority to open and operate a Business Term Deposit Account;
 - in the case of a partnership/association, I represent that I have full power and authority to bind the partnership/association and each of the partners/members in accordance with its constituent documents and have full power and authority to open and operate a Business Term Deposit Account and I undertake to advise ME Bank if the partnership/association is dissolved or terminated or the members of the partnership change;
 - in the case of a union, I represent that the union is an association of employees that is registered or recognised as a trade union under the laws of a State or Territory of Australia, has entered this agreement in accordance with its registered rules and that I am an authorised representative of that association with full power and authority to open and operate a Business Term Deposit Account;
5. I/We also understand that for joint applicants the signing authority for the account is "any to sign".
6. I/We have informed the people nominated in this form that I/we have provided their personal details to ME Bank and that their personal information may be collected, used and disclosed in the manner and for the purposes set out in the Privacy Notice above.
7. I/We agree that my/our personal information may be collected, used and disclosed in the manner and for the purposes set out in the Privacy Notice above.
If you do not want ME Bank or its subsidiaries or its associated companies to use the personal information contained in this application form to provide such information to you, simply contact ME Bank during normal business hours on 1300 658 108 or insert a cross in this box .
8. I/We request Members Equity Bank (User I.D. 185871), through the Bulk Electronic Clearing System, to arrange for funds to be debited from my/our nominated account at the financial institution shown in Section 3 and credited to my/our Term Deposit Account in accordance with (a) my/our instructions set out in Section 2.1 (if any) and (b) my/our future instructions;
I/We acknowledge that the above direct debit arrangement is governed by the terms of the Direct Debit Request Service Agreement contained in the Business Term Deposit Account Terms and Conditions.

Signed by the applicant (please follow the instructions below to sign this form)

Please follow the instructions below to sign the application form and refer to the application checklist for the documents that need to be provided.

Signature

Position

Signature

Position

Print name

Date

D	D	M	M	Y	Y
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Print name

Date

D	D	M	M	Y	Y
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Where the applicant is a:

- **Sole Trader:** Proprietor of business to sign.
- **Company:** A Director and the Secretary or two Directors to sign.
- **Sole Director Company:** Sole Director/Secretary to sign, stating that he or she is the Sole Director and Sole Secretary of the company.
- **Trust:** All trustees to sign.
- **Partnership:** All partners to sign (unless ME Bank agrees otherwise in the case of a large partnership).
- **Incorporated Association:** Minimum of two office bearers (e.g. the Chairman, Secretary, Treasurer or equivalent officer in each case) to sign in accordance with the rules governing the association.
- **Union:** Authorised Representative(s) to sign in accordance with the registered rules of the Union.

Tax File Number (TFN) or Exemption

You are not required by law to provide your TFN and it is not an offence if you do not. If you do not supply your TFN or exemption, we will be obliged to deduct tax.

TFN

or reason for exemption

Checklist before mailing this application

Before you mail this application please check that you have completed the following:

- Signed this application correctly as specified in section 12
- Provided a tax file number or reason for exemption
- Included a copy of a recent bank statement for the nominated account
- Identification forms completed for each individual named on this application

We may also request evidence satisfactory to us that:

- The individuals signing this application hold the positions indicated and have express authority to sign this form, and
- The business or other entity named as the account holder in this application is in existence, validly constituted, and capable of being bound by the Business Term Deposit Account Terms and Conditions.

Please note: the account cannot be set up without all the relevant documents.

Individual Identification Requirements

To comply with our obligations under the Anti-Money Laundering and Counter Terrorism Financing Act 2006, each account holder who is a natural person as well as each person nominated as an Authorised Representative or Designated User on a Business Investment Account needs to have their identity verified.

Please complete one of the following two options. Note, the business deposit account you have applied for cannot be opened without the completion of these requirements.

Option A 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.

Categories of Approved Persons

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

STEP 1:

Please provide the Approved Person with either:

- One of the documents listed in Category A; **OR**
- One of the documents listed in Category B together with one of the documents listed in Category C.

CATEGORY A (Must contain your photo)	OR	CATEGORY B	+	CATEGORY C (Must contain your full name and residential address)
Current Australian Driver's Licence		Birth Certificate / Extract		State / Federal Govt Financial Benefit Statement (less than 12 months old)
Passport [#]		Current Centrelink Pension Card		ATO Assessment Notice (less than 12 months old)
Current Australian state or territory Proof of Age Card		Citizenship Certificate		Rates / Utilities Notice (less than 3 months old)

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

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:

Send the certified photocopy of the identification document(s) together with the completed application form to:

New Accounts - Business Banking,
ME Bank,
Reply Paid 1345, Melbourne, VIC, 8060

Option B for Identification – Bank@Post

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

Please refer to the attached form for instructions.



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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 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 recording the period of time an individual attended the school (less than 3 months old)

How to lodge your Application at Australia Post

1. Lodge your form at any participating post office. To find the nearest participating outlet, please call 13 13 18 or go to auspost.com.au/pol and select Bank@Post.
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 **BLACK INK** and print within the boxes in **BLOCK LETTERS**

A. Details of Applicant

Which ME Bank 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.

Please sign in black ink

Applicant to sign at Australia Post

Date

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.

Disclaimer and Privacy Notice - Australia Post is acting as an agent for ME Bank and collects your information to identify you in accordance with requirements under Australian Law. Your details will be forwarded to ME Bank and may also be disclosed to government agencies such as AUSTRAC. Subject to certain exceptions you may request access to your personal information. If access is denied, the law says we must tell you why.

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

Verifier's signature

Date

Work centre code