



How to complete the AML/CTF Investor Identification Information Form

The Australian government has introduced legislation called the 'Anti-Money Laundering and Counter Terrorism Financing Act 2006' which is designed to combat money laundering and terrorism financing.

The introduction of this legislation means that investors must provide additional identification details when they request a 'designated service'. You may also be asked to provide supporting identity documentation.

What is a designated service, and are you requesting one of them?

1. Are you acquiring (e.g. buying or transferring) a SAFA Retail Bond?
2. Are you applying for a SAFA Retail Bond by completing an application form?

If the answer is yes to either of these questions, you are requesting a designated service and therefore must complete an 'Investor Identification Information Form' and provide the identity documents specified on the form.

Which type of investor are you and which section of the form should you complete?

The amount of information you need to provide depends upon your Investor Type. You need only complete the section(s) of the form that relate to your particular Investor Type and circumstances, as follows:

Investor Type	Form
Individual/Including joint Individuals	Individual (Complete one form per joint Individual holder)
Company (foreign or domestic)	Company
Trust	Trust
Financial Planners, Brokers or other AFSL Holders	AFS Licensee Information Form

What do you need to do?

1. Complete the appropriate form or forms for your Investor Type by typing it, or handwriting in blue or black pen ink. Do not use correction fluid/tape or pencil. Please initial all corrections. Complete one form for each Investor.
2. **Include originally certified copies** of identity documents as specified on each form. A list of people who can certify documents is on the other side of this page. **Do not** send original documents as they may get lost. Certified copies of documents will not be returned to you.
3. Each Agent, Power of Attorney, Parent or Guardian acting on behalf of an Individual Investor must identify themselves and provide supporting documentation.
4. If you are requesting a designated service via a financial planner or broker, provide your identity documents to them for verification
5. Attach all of the relevant documents to the front of the transfer or application form and mail to:

Link Market Services Limited
Registry Operations – AML/CTF Processing
Locked Bag A14
SYDNEY SOUTH NSW 1235
AUSTRALIA

Please note: If you are lodging this form with an 'Application for SAFA Retail Bonds' please send this form with your application to the address specified on the application form.

AFS Licensees:

6. Verify the Investors identity and then complete the AFS Licensee form. Attach it to the Investor Identification Information Form.

Who can certify identity documents for you?

The following individuals are authorised to certify identity documents. This list may be different to other lists you are accustomed to using. One of the people on this list should certify your identity documents or we may have to reject your forms.

- 1) A legal practitioner enrolled on the roll of the Supreme Court of an Australian State or Territory, or the High Court of Australia;
- 2) A judge of a court;
- 3) A magistrate;
- 4) A chief executive officer of a Commonwealth court;
- 5) A registrar or deputy registrar of a court;
- 6) A Justice of the Peace (a.k.a. JP);
- 7) A notary public (for the purposes of Statutory Declaration Regulations 1993);
- 8) A police officer;
- 9) An agent of Australia Post, who is in charge of an office supplying postal services to the public;
- 10) A permanent employee of Australia Post with 2 or more years continuous service who is employed in an office supplying postal services to the public;
- 11) An Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955);
- 12) An officer with 2 or more years continuous service with one or more financial institutions (for the purposes of Statutory Declaration Regulations 1993) e.g. bank manager;
- 13) An officer with 2 or more years continuous service with one or more finance companies (for the purposes of Statutory Declaration Regulations 1993) e.g. finance company manager;
- 14) An officer or a representative with 2 or more years continuous service with one or more holders of an Australian financial services licence e.g. financial planner;
- 15) A member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with 2 or more years continuous membership e.g. Accountant or CPA.

Privacy Statement:

Link Market Services Limited advises that the Anti-Money Laundering & Counter Terrorism Financing Act 2006 (AML/CTF) requires information about you (including but not restricted to, your name, street address, date of birth or country of origin) be collected and verified before a designated service is provided to you. The minimum information collected complies with the rules of the AML/CTF Act. The SA Government Financing Authority or Link may request additional information from you before providing you with the requested designated service.

Please note: your personal information may be disclosed to the AML/CTF regulator, AUSTRAC, or a law enforcement agency.



INDIVIDUAL

Investor Identification Information Form

Anti-Money Laundering and Counter Terrorism Financing (AML/CTF) legislation 2006

Service Requested by the Investor

Please tick one

Transfer registration

Application for an issue of SAFA Retail Bonds

Issuer Details

Issuer name

SA GOVERNMENT FINANCING AUTHORITY

Security code/Description

SAFA RETAIL BONDS

Section 1

Investor identification details

Surname

Date of birth

First name(s)

Middle name(s)

Residential street address (Do not use a PO Box or C/- Address)

Line 1

Suburb/Town/City

Line 2

State/Territory/County/Region

Line 3

Post/Zip code

Driver's Licence Number

Line 4

Country (if not Australia)

Other names known by

1.

2.

Country of birth

Country(s) of residency

1.

2.

Country(s) of citizenship

1.

2.

Primary Occupation or Business Activity

1.

2.

In Australia

In your country of citizenship or residency other than Australia

Section 1 – to be completed by all investors.

GO TO SECTION 2 AND 3 ON THE REVERSE SIDE OF THIS PAGE ►►

Section 2 – to be completed by a person authorised to Act for the Individual.

Section 2 Investors Agent or Power of Attorney or Person Acting on behalf of a Minor

Full name of person acting on behalf of the Individual

Residential address (Do not use a PO Box or C/- Address)

Address line 1

Phone number

Country code / area code / number

Address line 2

Date appointed as agent or POA

dd / mm / yyyy

Proof of Identity and Authorisation to Act on the Investors Behalf

- I have attached a certified copy of my driver's licence, passport or other photo Id which confirms my details above and contains my signature; and Agent
- I have attached a certified copy of my authorisation to Act on behalf of the Investor. (Tick from list over page) Power of Attorney
- In the case of a minor, I have attached a certified copy of the minors birth certificate or extract of birth. Parent or Guardian

Signature  Date

dd / mm / yyyy

Authorisation – In relation to the person authorised to act for the Individual

Please **DO NOT** attach original documents. Send only certified copies of original documents. Documents will not be returned.

Tick ✓	
	Authority to act as Investors Agent
	Power of Attorney
	Minor(s) Statement and Indemnity
	Other, please specify:

Section 3 – to be completed by all Investors.

Section 3 Identification documents – to be completed by or for the Investor

Please complete either Option 1 or Option 2 and attach the applicable document(s). Please **DO NOT** attach original documents. Send only **certified copies** of original documents. Documents will not be returned. Holders of an AFSL providing a service to the Investor must complete the AFS Licensee form at the end of this document which certifies they have verified the identity of the Investor.

Option 1 – Australian citizens – Please attach at least 1 document; or Foreign citizens – Please attach at least 2 documents

Tick ✓ 1	Primary photographic identity document
	Driver's Licence
	Australian Passport (current or expired in the last 2 years)
	International Travel Document – foreign passport (current or expired in the last 2 years)

OR Option 2 – Australian citizens – Please attach at least 1 primary non-photographic document and 1 secondary non-photographic document; or Foreign citizens – Please attach at least 2 primary non-photographic documents and 1 secondary non-photographic document

Tick ✓ 1	Primary non-photographic identity document; AND
	Australian Birth Certificate or Extract of Birth
	Australian Citizenship Certificate
	Foreign Citizenship Certificate
	Foreign Birth Certificate
	A Centrelink Pension card or Centrelink Healthcare card
Tick ✓ 1	Secondary non-photographic identity document
	A financial benefit notice issued by the Commonwealth, State or Territory within the last 12 months
	An income tax assessment notice issued within the last 12 months
	A local government notice (e.g. council rates) or utilities notice (e.g. power, gas or phone bill) issued within the last 3 months
	In relation to a minor (under 18 years of age) a notice issued by a school principal within the last 3 months

All foreign language documents must be accompanied by an English translation prepared by an accredited translator

Investors signature  Date

dd / mm / yyyy



COMPANY

Investor Identification Information Form

Anti-Money Laundering and Counter Terrorism Financing (AML/CTF) legislation 2006

Service requested by the Investor

Please tick one

- Transfer registration
- Application for an issue of SAFA Retail Bonds

Issuer details

Issuer name

SA GOVERNMENT FINANCING AUTHORITY

Security code/Description

SAFA RETAIL BONDS

Section 1

Investor identification details

Company name

[Empty text box for company name]

Registered office street address (Do not use a PO Box or C/- Address)

Line 1 [Empty text box]

Line 2 [Empty text box]

Line 3 [Empty text box]

Line 4 [Empty text box]

Suburb/Town/City

[Empty text box]

State/Territory/County/Region

[Empty text box]

Post/Zip code

[Empty text box]

Country (if not Australia)

[Empty text box]

Country of incorporation/Origin

[Empty text box]

Principal place of business street address (Do not use a PO Box or C/- Address)

Line 1 [Empty text box]

Line 2 [Empty text box]

Line 3 [Empty text box]

Line 4 [Empty text box]

Suburb/Town/City

[Empty text box]

State/Territory/County/Region

[Empty text box]

Post/Zip code

[Empty text box]

Country (if not Australia)

[Empty text box]

Company type and registration details

Please tick from each column

Domestic company

Public company

ASIC registered

ACN or ARBN

[Empty text box]

and/or

Foreign registration number

Foreign company

Proprietary or Private company

Foreign registered

[Empty text box]

Section 1 – to be completed by all Investors.

Sections 2 & 3 – to be completed by private or proprietary Company Investors.

Section 2 If a proprietary or private company, the full name of each director of the company

Name

Name

Name

Name

Section 3 If a proprietary or private company, the name and address of the beneficial owners owning 25% or more of the issued capital

Name <input type="text"/>	Date of birth <input type="text" value="dd / mm / yyyy"/>
Address (Do not use a PO Box or C/- Address) <input type="text"/>	Driver's Licence Number <input type="text"/>
Name <input type="text"/>	Date of birth <input type="text" value="dd / mm / yyyy"/>
Address (Do not use a PO Box or C/- Address) <input type="text"/>	Driver's Licence Number <input type="text"/>
Name <input type="text"/>	Date of birth <input type="text" value="dd / mm / yyyy"/>
Address (Do not use a PO Box or C/- Address) <input type="text"/>	Driver's Licence Number <input type="text"/>
Name <input type="text"/>	Date of birth <input type="text" value="dd / mm / yyyy"/>
Address (Do not use a PO Box or C/- Address) <input type="text"/>	Driver's Licence Number <input type="text"/>
Name <input type="text"/>	Date of birth <input type="text" value="dd / mm / yyyy"/>
Address (Do not use a PO Box or C/- Address) <input type="text"/>	Driver's Licence Number <input type="text"/>

Section 4 – to be completed by all Investors.

Section 4 Identification documents – to be completed by the Investor

Please attach at least 1 identification document which verifies the identity of the company. Please **DO NOT** attach original documents. Send only **certified copies** of original documents. Documents will not be returned. Holders of an AFSL providing a service to the Investor must complete the AFS Licensee form at the end of this document which certifies they have verified the identity of the Investor.

Tick ✓	Identity document
<input type="checkbox"/>	A certificate of registration issued by ASIC or other regulator.
<input type="checkbox"/>	A licence issued by a domestic or foreign regulator.
<input type="checkbox"/>	A disclosure certificate that verifies information about the company.

All foreign language documents must be accompanied by an English translation prepared by an accredited translator

Director or Sole Director

..... 

Director or Company Secretary

..... 

Company Seal

Date

Sections 3 & 4 – to be completed by all investors.

Section 3 Trustee identification details

Trustee 1 Trustee type (tick one) Individual Company

Full name of Trustee

Trustee address (Do not use a PO Box or C/- Address)

Address line 1

Address line 2

Trustee 2 Trustee type (tick one) Individual Company

Full name of Trustee

Trustee address (Do not use a PO Box or C/- Address)

Address line 1

Address line 2

Trustee 3 Trustee type (tick one) Individual Company

Full name of Trustee

Trustee address (Do not use a PO Box or C/- Address)

Address line 1

Address line 2

Section 4 Identification procedure for any one of the Trustees

Tick ✓ 1	Trustee identity procedure
	Individual Trustee – Please complete the applicable sections of the identity information form for individuals. Remember to attach certified copies of identification documents so that your identity as a trustee can be verified.
	Company Trustee – Please complete the applicable sections of the identity information form for a company. Remember to attach certified copies of identification documents so that your identity as a trustee can be verified.

Please attach the completed trustee identity information form and identity documents to the back of this document.

Section 5 – to be completed by all investors.

Section 5 Identification documents – to be completed by the Trustee customer

Please attach at least 1 identification document which verifies the identity of the trust. Please **DO NOT** attach original documents. Send only certified copies of original documents. Documents will not be returned.

Tick ✓ 1	Trustee identity procedure
	A certified copy of the trust deed
	A certificate issued to the trust by ASIC or other regulator

All foreign language documents must be accompanied by an English translation prepared by an accredited translator

Trustee Signature

..... 

Trustee Signature

..... 

Date

dd / mm / yyyy



AFS Licensee Information Form

Anti-Money Laundering and Counter Terrorism Financing (AML/CTF) legislation 2006

Investors full name

Investor type:

 Individual Trust Company Individual – minor (under 18 years)

Record of Investor identification procedure – To be completed by AFS licensee

Identity details	Primary document – Individuals and non-individuals (Do not attach original documents)	Secondary document – Individuals (Originals will not be returned)
Identity verified from	<input type="checkbox"/> Original <input type="checkbox"/> Certified Copy	<input type="checkbox"/> Original <input type="checkbox"/> Certified Copy
The identity document is	<input type="checkbox"/> Attached <input type="checkbox"/> Not Attached	<input type="checkbox"/> Attached <input type="checkbox"/> Not Attached
Document details	Primary document	Secondary document
Document issuer		
Issue date	dd / mm / yyyy	dd / mm / yyyy
Expiry date	dd / mm / yyyy	dd / mm / yyyy
Document number		
Accredited English translation	<input type="checkbox"/> Original <input type="checkbox"/> Attached <input type="checkbox"/> Sighted	<input type="checkbox"/> Original <input type="checkbox"/> Attached <input type="checkbox"/> Sighted

AFS licensee details – Financial Planner, Financial Advisor, Broker

AFS Licensees or their representatives, who are arranging a designated service for the Investor must complete this section of the Investor identification information form verifying that they have confirmed the Investors identity.

Full name of AFS representative

AFS licensee type

 Planner Advisor Broker

AFS licensee name

AFS license number

Licensee address

Address line 1

Phone number

Country code / area code / number

Address line 2

I confirm that I have sighted original or certified copies of the Investors identity documents; and (where applicable).

I confirm that I have sighted original or certified copies of the Investors Agent or Power of Attorney, Parent or Guardian identity documents.

AFS licensee signature

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Date verified

dd / mm / yyyy

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