BT Customer Refresh Form
Regulated Trusts
(Including Self-Managed Super Funds)

When to use this form

This form is applicable to:

- Australian Registered Managed Investment Schemes
- Unregistered Managed Investment Schemes (only has wholesale clients and does not make small scale offerings)
- Government Superannuation Funds
- Other Regulated Trusts subject to oversight by Australian Regulators (including Self-Managed Super Funds).

For trusts other than the above (e.g. family, unit, charitable, estate), complete the 'BT Customer Refresh Form - Unregulated Trusts'.

How to complete this form

Complete this form online before printing and signing. We will update your details based on the information you provide on this form, or contact you if more information is required.

If you are a:

- Customer - complete sections 1 to 4.
- Financial adviser or authorised representative - complete sections 1, 2, 3 and 5.

Privacy Statement and Consent Request

Privacy Statement

All personal information and credit-related information we collect about you is collected, used and disclosed by us in accordance with our Privacy Statement which is available at www.bt.com.au/privacy/privacy-statement or by calling us. Our Privacy Statement also provides information about how you can access and correct your personal information, and make a complaint. You do not have to provide us with any personal information or credit information but, if you don't, we may not be able to process your request.

Your Consent

By signing below, you consent to us collecting and holding any sensitive information such as health information or information about your racial or ethnic origin which appears on copies of your identity documents. You will not be able to withdraw your consent to us holding this information after it has been provided because we are required to retain a record of your personal information that is contained in your identification documents under the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006*.

SECTION 1: REGULATED TRUST IDENTIFICATION (MANDATORY)

1.1 GENERAL INFORMATION

Account number

Full name of trust

Does the trust have any other business, trading or other name(s)?

☐ No

☐ Yes - provide the name below. If there is more than one, attach a separate list.

Principal place of business (cannot be a PO box)

State	*Postcode*
Country, if not Australia	

Postal address

Note: updates to the postal address on this form below will not update the CHESS registration postal address (if applicable). To update CHESS registration, submit a 'Change of address on CHESS registration' form via Service requests in Panorama.

☐ Same as principal place of business

☐ Other - enter the postal address

State	*Postcode*
Country, if not Australia	

Provide industry type

If you are not completing this form online, refer to the 'BT Customer Refresh Form Guide for Australian Companies & Trusts' for the industry types to select from. This guide can be accessed at www.bt.com.au/identification/customer

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ABN (if any)

SECTION 2: TRUSTEE INFORMATION (MANDATORY)

Provide the name(s) of the individual trustees listed on the account. An additional 'BT Customer Refresh Form - Individuals & Sole Traders' is required for each individual. This form can be accessed at www.bt.com.au/identification/customer

If there are more than 4 trustees, provide the details on a separate sheet.

Individual trustee 1

Full given name(s) - including middle name

Surname

Individual trustee 2

Full given name(s) - including middle name

Surname

Individual trustee 3

Full given name(s) - including middle name

Surname

Individual trustee 4

Full given name(s) - including middle name

Surname

Does the trust also comprise of companies?

- ☐ No - skip to section 3
- ☐ Yes – provide the full name of the company trustee listed on the account. An additional 'BT Customer Refresh Form - Australian Company' or 'BT Customer Identification Procedure Form - Foreign Companies' is required. These forms can be accessed at www.bt.com.au/identification/customer

Full name of company trustee

SECTION 3: ADDITIONAL INFORMATION (MANDATORY)

3.1 SOURCE OF FUNDS

Select all sources of funds the company has in regard to deposits into the account.

- ☐ Commission
- ☐ Business income
- ☐ Investment income
- ☐ Rental income
- ☐ Capital injection
- ☐ Government grant
- ☐ Liquidation of assets
- ☐ Gift/donation
- ☐ Tax refund
- ☐ Bonus
- ☐ Business profits
- ☐ Corporate investments
- ☐ Loan
- ☐ Insurance payment
- ☐ Sale of assets
- ☐ Mergers and acquisitions
- ☐ Controlled money account
- ☐ Compensation payment
- ☐ Additional Sources (Please specify)

3.2 SOURCE OF WEALTH

Select all sources of wealth the company has used to build it's net wealth.

- ☐ Business income
- ☐ Investment income
- ☐ Rental income
- ☐ Owns property
- ☐ Sale of assets
- ☐ Gift/Donation
- ☐ Controlled money account
- ☐ Business profits
- ☐ Corporate investments
- ☐ Insurance payment
- ☐ Compensation payment
- ☐ Liquidation of assets
- ☐ Mergers and acquisitions
- ☐ None
- ☐ Additional Sources (Please specify)

SECTION 4: CUSTOMER DECLARATION (MANDATORY IF NOT BEING COMPLETED BY ADVISER)

Complete this declaration section if you are a customer. If you are a financial adviser or authorised representative, skip to section 5.

By signing this form, I:

- declare that to the best of my knowledge the information I have provided above is true and correct as at the date of this document.
- understand that it is an offence to knowingly give false or misleading information or knowingly produce a false or misleading document under the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006*, and the *Tax Laws Amendment (Implementation of the Common Reporting Standards) Act 2016*.
- agree to the consents in the Privacy Statement and Consent Request section.

Signatory 1

Full given name(s)

Surname

Position held (e.g. trustee or director)

Signature

Date (DD/MM/YYYY)

/ /

Signatory 2

Full given name(s)

Surname

Position held (e.g. trustee or director)

Signature

Date (DD/MM/YYYY)

Signatory 3

Full given name(s)

Surname

Position held (e.g. trustee or director)

Signature

Date (DD/MM/YYYY)

SECTION 5: ADVISER DECLARATION (ADVISER USE ONLY, IF APPLICABLE)

Complete this section if you are an adviser.

By signing this form, I:

- declare that to the best of my knowledge the information I have provided above is true and correct as at the date of this document.
- understand that it is an offence to knowingly give false or misleading information or knowingly produce a false or misleading document under the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006*, and *the Tax Laws Amendment (Implementation of the Common Reporting Standards) Act 2016*.

AFSL name

AFSL number

Representative / employee name and adviser code

Phone number

Adviser signature

Date (DD/MM/YYYY)

HOW TO SUBMIT THIS FORM

Post a signed copy of this form to:

Within Australia
BT, Reply Paid 1922, Adelaide SA 5001

Outside of Australia
BT, GPO Box 1922, Adelaide SA 5001, Australia

BT Financial Group - A Division of Westpac Banking Corporation ABN 33 007 457 141 AFSL and Australian credit licence 233714