

Support staff access

 Use this form to:

- Add a new support staff user which will provide them with access to clients under your Dealer group
- Amend existing support staff access under your Dealer group

Note: If the support staff user holds an existing access under a different dealer group, they will need to request new support staff access in Section 1.

Complete one form for each support staff user. You can type directly into the form and print before signing, or print then complete in block letters. **Each applicable section of the form must be completed for this request to be processed.**

Important information

Anti-Money Laundering, Counter-Terrorism Financing and Sanctions obligations

We are bound by applicable laws about the prevention of money laundering and the financing of terrorism as well as sanctions obligations, including but not limited to the Australian Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (AML/CTF laws).

We are required to carry out procedures that verify you and your client's identity before providing services to you, and from time to time thereafter.

Overseas support staff

If the support staff requesting access resides overseas there are additional requirements.

- A true residential address of the support person being on-boarded must be provided.
- Certified identification of the support staff must be provided. Please refer to the [BT Certified ID Guide on acceptable documents](#).

Terms and conditions

In signing this form, you are bound by the '[Panorama User Agreement](#)' and '[Electronic Identity Verification Terms](#)'. These have been provided to you at the same time as this application and can be accessed via the above hyperlink or bt.com.au/panorama. These terms and conditions will be updated from time to time. Upon your first login you will receive a prompt to accept the most recent terms and conditions. These should be reviewed prior to accepting as they could have been amended since signing this form.

Data Protection

For secure data protection, BT recommends the use of Fileshare, a secure external file sharing solution that will provide an efficient way for you to send and receive sensitive information.

For security reasons, if any documents containing personal information are attached within your email, please ensure that these are password protected. Failure to do so is at your own risk as we're unable to assume responsibility for your security obligations. Refer to the [Data protection guide](#) for more ways to secure your data.

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/personal/help/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 application.

Before you provide your client's personal information to us, or you provide access to any of our products or services to your customers whereby we will collect or you will provide to us their personal information, you must make them aware:

- that you will be doing this;
- the contents of our Privacy Statement and any other relevant privacy notices; and
- that we will collect, use and share their personal information in accordance with our Privacy Statement and any other privacy notices we give you.

Where you provide us with another person's sensitive information (or sensitive information will be collected by or provided to us by you in relation to a customer's use of any of our products or services), you must first obtain their consent to sharing it with us and their consent to us collecting, using and disclosing their sensitive information in accordance with our Privacy Statement and any other relevant privacy notices.

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 copies of identification documents under the Anti-Money Laundering and Counter Terrorism Financing Act 2006 (Cth).



DECI1IBTF34033

1 Support staff access type

I am a new support staff for the Dealer group listed in section 2, and I understand my identity will be verified as per section 5.

I wish to add or change my existing permissions under the current Dealer group as listed in section 2

Would you like to request that you retain this access when we link your login to the dealer group, practice or adviser group provided in section 2 and 3?

No Yes¹, supply user ID

¹If we accept your request, we will link your existing login to allow access under a single sign-in. We reserve the right to reject this request for any reason.

2 Dealer group

Dealer group name (AFSL holder)

Dealer group AFSL Number

Input field for Dealer group AFSL Number (9 digits)

3 Dealer group hierarchy

Practice name (if applicable)

For existing support staff, if you include a practice name below, we will link your support staff to that practice. Their relationship with the dealer group will remain unchanged.

Adviser Group name (if applicable)

For existing support staff, if you include an adviser group name below, we will link your support staff to that adviser group. Their relationship with the dealer group will remain unchanged.

4 Support staff personal details

Title

Mr Mrs Ms Miss Dr

Given names (First name, Middle name)

Preferred name

Last name

Are you known by any other names? (e.g. maiden name)

No Yes, specify

Gender

Male Female

Date of birth (dd/mm/yyyy)

Residential address

Address (cannot be a PO Box or Business Address). This will be used to verify your identity. No correspondence will be sent here.

Suburb State Postcode

5 Support staff identity verification

We will verify your identification information if you are new to Panorama, you have not previously been verified by us or your identification details (eg Name) have changed since you were previously verified by us.

Please provide copies of at least 2 forms of identification documents. Providing copies of all 3 identification documents will increase your success rate of being verified. Select which documents you have attached with this form:



DECIXIBTF34033

Australian driver's licence (Front and back)

Passport

Medicare card

Colour of card

Green Yellow Blue

Do I agree to electronic identity verification?

Yes, I confirm that I am authorised to provide the personal details presented and I consent to my information being checked with the document issuer or official record holder via third party systems and services for the purposes of confirming my identity. I have also read and agree to the ['Electronic Identity Verification Terms'](#).

No, I'll provide **certified copies** of my ID documents, **along with this form**, to BT Panorama, GPO Box 2861, Adelaide SA 5001.

6 Support staff contact details

Note A mobile number is required to finalise your Panorama online access. Incomplete details may result in a delay. A Country code is only required for international mobile phone numbers.

Primary mobile

Country code Phone number

Primary email

Other contact number (e.g work phone)

Preferred contact method

Mobile Email address Other contact number

Business address

Address (cannot be a PO Box)

Suburb **State** **Postcode**

Postal address

Same as business address, go to section 7.

Address

Suburb **State** **Postcode**

7 Panorama online access

Support role

Paraplanner Administration assistant

Support permission

Read only Limited transact (investment only) Full transact¹

¹Full transact permissions are not available on Investor Managed profiles

Managed profiles

Investor managed Adviser managed Both

Access level (please select one option only)

Dealer group, the support staff will have visibility of all clients under the dealer group listed in section 2 (including practices set up under the dealer group). A dealer group authorised person is required to sign this form with dealer group authorisation.

Practice, the support staff will have visibility of all clients under the practice listed in section 3. A dealer group authorised person is required to sign this form with dealer group or practice authorisation.

Adviser group, the support staff will have visibility of all clients under the adviser group listed in section 3. A dealer group authorised person is required to sign this form with dealer group or adviser group authorisation.

Individual adviser(s), the support staff will have visibility of all clients under each adviser listed below. Each individual adviser is required to sign this form.

Adviser 1: Full name

Adviser 2: Full name

Adviser 3: Full name

Adviser 4: Full name



8 Declaration & acknowledgments

Support staff

(Applicable if new access is required for support staff)

By signing this form:

- I declare I have read this form and the information completed is true and correct
- I agree to the consents in the Privacy Statement and Consent Request section

Full name

Full name

Signature ([Wet \(pen\) signature](#) required)

Date (dd/mm/yyyy)

Adviser/Dealer group authorised person

By signing this form, I declare I have read this form and the information completed is true and correct.

Primary signature

Full name

Signature ([Wet \(pen\) signature](#) required)

Date (dd/mm/yyyy)

Authorised dealer group person *

Adviser 1

In order to sign this form, you must be either;

- A previously appointed dealer group authorised person and have authority to sign on behalf of the named dealer group, practice or adviser group,
- A Dealer group manager with 'Update access*', or
- A Practice Manager with 'Update access'*

*User can set up and maintain dealer group managers, practice managers, advisers and support access to Panorama, perform user access validation and if applicable, manage tailored portfolios.

Secondary signature

(Applicable if individual advisers were selected in section 7 and an Authorised Person did not sign as a primary signatory above)

Adviser 2

Full name

Signature ([Wet \(pen\) signature](#) required)

Date (dd/mm/yyyy)

Adviser 3

Full name

Signature ([Wet \(pen\) signature](#) required)

Date (dd/mm/yyyy)

Adviser 4

Full name

Signature ([Wet \(pen\) signature](#) required)

Date (dd/mm/yyyy)

You can submit this form by:



email: adviserregistration@panorama.com.au
mail: BT Panorama,
GPO Box 2861, Adelaide SA 5001

Note: Please ensure any documents (containing personal information) attached within your email, are sent securely to us. Options available can be found in the '[Data protection guide](#)'.



DECIXIBTF34033