

AMP Cash Management Service – Identification Verification for Advisers or Delegates

Use this form to provide the identification details of Authorised Financial Advisers and their Nominated Delegates for the purposes of the AMP Cash Management Service (ACMS).

Please complete one form for each individual to be identified.

To have your identity verified:

Authorised Financial Advisers cannot certify copies of their own identification documents. However, Authorised Financial Advisers may certify copies of identification documents for their Nominated Delegates. A list of persons, other than an AMP representative, able to certify copies of document(s) for either advisers or delegates is shown at the end of this form.

The certifier must compare the original document with the copy and be satisfied that the copy is a true copy of the original before certifying that copy. The certifier must record on a clear and legible copy of the identification document:

This is a true and accurate copy of the original document, sighted by me this (day) of (month) (year).
(Name (print), signature, phone number type of approved person (as per list on page 4)).

Attach the certified copy(ies) of your identity documents to this form and mail the completed form together with any new **AMP Cash Management Service – Adviser Transaction Authority** form and/or **AMP Cash Management Service – Add or Remove Delegate Transaction Authority** form, and any other attachments (change of name, cheque, etc) if applicable to:

AMP Bank, Customer Transaction Services
Reply Paid 79702, PARRAMATTA NSW 2124

Please note: All identification documents must be clear and legible or they will not be accepted. Please contact banksupportservices@ampbanking.com.au if you change your Sales ID or AMP Planner Portal log in. Failure to do so may affect your ability to transact on your customers' accounts.

Please print in CAPITAL LETTERS and place a cross in any applicable boxes.

1. Identification documents

Identification to be verified by one Primary Photographic Document. If you are unable to provide a Primary Photographic Document, please provide one Primary Non-photographic Document AND one Secondary Identification Document. A list of acceptable documents is shown on page 4 of this form.

Authorised Financial Adviser or Nominated Delegate

Surname	Given name(s)	
<input type="text"/>	<input type="text"/>	
Residential address (must not be a PO Box)		
<input type="text"/>		
Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>
Country of Residence	<input type="text"/>	
<input type="checkbox"/> Australia <input type="checkbox"/> Other If Other – please specify		
Country of Citizenship	<input type="text"/>	
<input type="checkbox"/> Australia <input type="checkbox"/> Other If Other – please specify		
Email address	Contact number	
<input type="text"/>	<input type="text"/>	
Date of birth	Employer	
<input type="text"/>	<input type="text"/>	
Occupation/job title or if Sole Trader, business name	Industry	
<input type="text"/>	<input type="text"/>	

2. Privacy Collection Statement

Privacy Collection Notice:

We collect personal information of the Authorised Financial Adviser or Nominated Delegates named in this form, which will be used (along with any other information we already hold) to verify your identity. If you do not wish to provide personal information via this form, we will not be able to process your request.

We are required or authorised to collect this personal information under various laws including those relating to taxation and Anti-Money Laundering and Counter-Terrorism Financing Laws.

Some of the entities we might share your personal information with are listed in our privacy policy, and include:

- other members of the AMP group and external service providers that we need to deal with for the purposes described above
- courts, tribunals or government agencies as required by law or regulations
- persons or third parties authorised by you (including others named in this application), or if required or permitted by law.

Some external service providers we need to deal with can be located or host information outside Australia. A list of countries where these providers may be located can be obtained via our Privacy Policy.

Personal information is treated in accordance with the AMP Privacy Policy, which sets out how to access or update your personal information. It also contains information on how you can make a complaint about a breach or potential breach of our privacy obligations, and how we deal with such a complaint. You can view our Privacy Policy online at amp.com.au/privacy or contact us on 13 30 30 for a copy.

3. Signatures

Signature of identified Authorised Financial Adviser or Nominated Delegate

X

Date

D D M M Y Y Y Y

Name of Adviser or Delegate

Please provide the AMP Bank Sales ID of the Individual Financial Adviser if the person being identified on this form is a delegate.

- Required identification documents attached
- Details of document(s) recorded on table page 3
- Individual Financial Adviser or Delegate has signed the form

3. Signatures (continued)

(1) Primary Photographic document			(2) Primary Non-photographic document AND Secondary Identification document			
Original sighted or certified copy?	Original <input type="checkbox"/>	Certified <input type="checkbox"/> copy	Original <input type="checkbox"/>	Certified <input type="checkbox"/> copy	Original <input type="checkbox"/>	Certified <input type="checkbox"/> copy
Document type/description						
Person to whom it relates (name as shown)						
Date of birth (if shown)	/ /	/ /	/ /	/ /	/ /	/ /
Place of residence (if shown)						
Document number						
Date of issue	/ /	/ /	/ /	/ /	/ /	/ /
Place/Office of issue						
Expiry date	/ /	/ /	/ /	/ /	/ /	/ /

OR

Original sighted or certified copy?	Original <input type="checkbox"/>	Certified <input type="checkbox"/> copy	Original <input type="checkbox"/>	Certified <input type="checkbox"/> copy
Document type/description				
Person to whom it relates (name as shown)				
Date of birth (if shown)	/ /	/ /	/ /	/ /
Place of residence (if shown)				
Document number				
Date of issue	/ /	/ /	/ /	/ /
Place/Office of issue				
Expiry date	/ /	/ /	/ /	/ /

AMP Bank representative to confirm:

I declare that I have sighted the original identification documents or certified copies of the identification documents detailed above (as indicated). Copies of the documents sighted are attached and submitted with this application.

Name (please print)

Date

Signature

Business name and address of AMP Bank representative (please print)

1. Primary Photographic documents

Provide one of the following:

- Australian driver’s licence containing a photograph of the person, or
- Australian passport¹, or
- card issued under an Australian State or Territory law, for the purpose of proving a person’s age, containing a photograph of the person in whose name the card is issued, or
- foreign passport or similar document issued for the purpose of international travel, that contains a photograph and the signature of the person in whose name the document is issued.

Where any document relied on as part of the procedure is in a language that is not English, it must be accompanied by an English translation prepared by an accredited translator.

¹ A passport issued by the Commonwealth that expired less than two years ago is also an acceptable form of identification.

2. Primary Non-photographic documents

Provide one of the following AND one secondary identification document:

- Australian birth certificate, or
- Australian citizenship certificate, or
- Pensioner concession card issued by Centrelink, or
- Health care card issued by Centrelink.

3. Secondary Identification documents

Provide one of the following AND one Primary Non-photographic document:

An original notice issued to an individual, of a kind listed below, that contains the name of the individual and his or her residential address:

- issued by the Commonwealth or a State or Territory within the preceding 12 months that records the provision of financial benefits, or
- issued by the Australian Taxation Office within the preceding 12 months, or
- issued by a local government body or utilities provider (eg electricity/gas bill, telephone bill, water rates notice) within the preceding three months that records the provision of services to that address or to that person, or
- National Identity Card issued by a foreign government containing a photograph and signature of the person in whose name the card is issued

AND

- Foreign driver’s licence that contains a photograph of the person in whose name it was issued.
- In relation to a person under the age of 18, a notice that it:
 - a. was issued to a person by a school principal within the preceding three months;
 - b. contains the name of the person and his or her residential address; and
 - c. records the period of time that the person attended the school.

Where any document relied on as part of the procedure is in a language that is not English, it must be accompanied by an English translation prepared by an accredited translator.

4. Documents to confirm change of name

Please provide a certified copy of one of the following:

- Marriage Certificate, or
- Proof of change of name by deed poll.

‘**Certified copy**’ means a document that has been certified as a true copy of an original document.

‘**Certified extract**’ means an extract that has been certified as a true copy of some of the information contained in a complete original document by one of the persons described in paragraphs (1) to (18) following.

People who can certify documents or extracts include: (Italics added for ease of comprehension)

1. (*A lawyer*) A person who is enrolled on the roll of the Supreme Court of a State or Territory, or High Court of Australia, as a legal practitioner (however described).
2. (*A doctor*) A person who, under a law in force in an Australian State or Territory, is currently licensed or registered to practise in the following occupations: Chiropractor, Dentist, Legal practitioner, Medical practitioner, Nurse, Optometrist, Patent attorney, Pharmacist, Physiotherapist, Psychologist, Trade marks attorney and Veterinary surgeon.
3. A Judge or Master of a Court.
4. A magistrate.
5. A registrar, deputy registrar or clerk of a court.
6. A Justice of the Peace.
7. An Australian police officer, sheriff or sheriff’s officer.
8. A finance company, credit union, bank, or building society officer with two or more continuous years of service.
9. An officer, or authorised representative of, a holder of an Australian Financial Service Licence, having two or more continuous years of service with one or more licensees.
10. An officer, or authorised representative of, a holder of an Australian Credit Licence.
11. (*An accountant*) A member of the institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants.
12. Teacher employed on a full-time basis at a school or tertiary education institution.
13. Person before whom a statutory declaration may be made under the law of the State or Territory in which the declaration is made.
14. Commissioner for Affidavits or Declarations.
15. A bailiff.
16. Member of Chartered Secretaries Australia.
17. Member of Engineers Australia, other than the grade of student.
18. Member of the Association of Taxation and Management Accountants.

A full list of people who can certify documents or extracts is available at amp.com.au/identification.

Note: Certification must include the name, telephone number and qualification of the person certifying.