

Account Details			
Account Opening Date			
Account Title			
Account Mailing Address			
If different to Business Address	SUBURB / TOWN	State	
	COUNTRY	Post code	
ABN / ARBN / ACN - Mandatory for Companies	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
Number to Sign to Open NEW CUSTOMERS ONLY			
<p>Any of the Owners / Authorised Officers specified below can open and close deposit accounts and authorise changes or additions to Authorised Officers, Signatories and Operating Authorities for all accounts opened in the name of the above Registered Business / Company / Organisation. This Authority also extends to affecting changes to details supplied to Suncorp for the Registered Business / Company / Organisation. Any accounts subsequently opened under this Authority will be opened in the name of the above Registered Business / Company / Organisation and held in the name of Registered Business / Company / Organisation specified above.</p> <p>Please identify how many Owners or Authorised Persons you would like:</p> <ul style="list-style-type: none"> To open and close accounts, authorise changes or additions to Authorised Persons. <input type="text"/> <p>Special Opening Conditions (optional) <input type="text"/></p> <p>An Authorised Officer is permitted to make changes and perform transactions if Signatory is indicated in Owner/Authorised Officer Signature section.</p>			
Number to Sign to Operate			
<p>To be able to perform transactions on the account? <input type="checkbox"/> Only 1 <input type="checkbox"/> Any 2 can sign</p>			
Existing Customers			
<p>I/We appoint the signatory(ies) specified on existing account number <input type="text"/> to also be an authorised signatory(ies) on the above new account(s). <small>("same account")</small></p> <p>I/We authorise the same Operating Authority (ie. number to sign to operate) to be applied to the above new account number(s).</p>			
Special Signing Conditions (Optional)	<input type="text"/>		
Registered Business Details			
Full Business Name			
Business Address	(PO BOX NOT ACCEPTABLE)		
	SUBURB / TOWN	State	
	COUNTRY	Post code	
Nature of Business			
Business Phone	()	Business Fax	()
Business Mobile			

Company Details	
Full Name (including ACN)	
Registered Office Address	(PO BOX NOT ACCEPTABLE)
	SUBURB / TOWN
	COUNTRY
	State Post code
Principal Place of Business	
	State Post code
Nature of Business	
Business Phone	() Business Fax ()
Business Mobile	
Primary Contact	TITLE GIVEN NAMES (IN FULL)
	SURNAME
Position	EG: DIRECTOR, SECRETARY
Public	<input type="checkbox"/> Private <input type="checkbox"/>
Provide full name of each director	
1. FULL GIVEN NAMES AND SURNAME	5. FULL GIVEN NAMES AND SURNAME
2. FULL GIVEN NAMES AND SURNAME	6. FULL GIVEN NAMES AND SURNAME
3. FULL GIVEN NAMES AND SURNAME	7. FULL GIVEN NAMES AND SURNAME
4. FULL GIVEN NAMES AND SURNAME	8. FULL GIVEN NAMES AND SURNAME
Beneficial Owners	
<p>BENEFICIAL OWNERS - BENEFICIAL OWNER: any individual who ultimately owns or controls (directly or indirectly) the entity. OWNS: means 25% or more direct or indirect ownership of the entity. CONTROL: Includes exercising control through the capacity to determine decisions about the customers financial and operating policies.</p> <p>PROVIDE THE FULL NAME, RESIDENTIAL ADDRESS AND DATE OF BIRTH (Beneficial owners details are not required if the Company customer has an existing bank account or loan with the Bank)</p>	
Beneficial Owner 1	
Full Name	FULL GIVEN NAMES AND SURNAME Date of Birth D D / M M / Y Y Y Y
Address	(PO BOX NOT ACCEPTABLE)
	SUBURB / TOWN State Post code
Beneficial Owner 2	
Full Name	FULL GIVEN NAMES AND SURNAME Date of Birth D D / M M / Y Y Y Y
Address	(PO BOX NOT ACCEPTABLE)
	SUBURB / TOWN State Post code
Beneficial Owner 3	
Full Name	FULL GIVEN NAMES AND SURNAME Date of Birth D D / M M / Y Y Y Y
Address	(PO BOX NOT ACCEPTABLE)
	SUBURB / TOWN State Post code

Beneficial Owners (continued)			
Beneficial Owner 4			
Full Name	FULL GIVEN NAMES AND SURNAME		Date of Birth DD / MM / YYYY
Address	(PO BOX NOT ACCEPTABLE)		
	SUBURB / TOWN	State	Post code
Trust Details - Complete for ALL Trustees whether individual or company			
Full Name of Trust			
Type of Trust	<input type="checkbox"/> Discretionary (eg. Family) <input type="checkbox"/> Managed Investment Scheme <input type="checkbox"/> Unit <input type="checkbox"/> Superannuation Funds		
Country where Trust Established			
Trust Address			
	SUBURB / TOWN	State	
	COUNTRY	Post code	
Are there any settlor/s named in the trust deed who contributed \$10,000 or more (in money and/or assets) to the trust when it was established?			
<input type="checkbox"/> No <input type="checkbox"/> Yes If YES, full name of settlor/s			
Full Name	FULL GIVEN NAMES AND SURNAMES		
Date of trust	DD / MM / YYYY	Date of variations	DD / MM / YYYY
Trustee Details - (Trustee could be a company)			
Please Note: Individual Trustees must complete Authorised Officer Details Section. Company Trustees must also complete Company Details Section.			
Full Name (Trustee 1)	FULL GIVEN NAMES AND SURNAME		
Residential Address	(PO BOX NOT ACCEPTABLE)		
	SUBURB / TOWN	State	
	COUNTRY	Post code	
Full Name (Trustee 2)	FULL GIVEN NAMES AND SURNAME		
Residential Address	(PO BOX NOT ACCEPTABLE)		
	SUBURB / TOWN	State	
	COUNTRY	Post code	
If more than 2 Trustees, please provide details on a separate Trusts Customer Identification Form.			
Trading Name of the Trustee (if any)			
Beneficial Owner Details			
BENEFICIAL OWNERS – TRUST – BENEFICIAL OWNER: any individual who ultimately owns or controls (directly or indirectly) the entity. OWNS: means 25% or more direct or indirect ownership of the entity. CONTROL: Includes exercising control through the capacity to determine decisions about the customers financial and operating policies.			
PROVIDE THE FULL NAME, RESIDENTIAL ADDRESS AND DATE OF BIRTH (Beneficial owners details are not required if the Trust customer has an existing bank account or loan with the Bank)			
Beneficial Owner 1			
Full Name	FULL GIVEN NAMES AND SURNAME		Date of Birth DD / MM / YYYY
Address	(PO BOX NOT ACCEPTABLE)		
	SUBURB / TOWN	State	Post code

Beneficial Owner Details (continued)

Beneficial Owner 2

Full Name	FULL GIVEN NAMES AND SURNAME	Date of Birth	D D / M M / Y Y Y Y
Address	(PO BOX NOT ACCEPTABLE)		
	SUBURB / TOWN	State	Post code

Beneficial Owner 3

Full Name	FULL GIVEN NAMES AND SURNAME	Date of Birth	D D / M M / Y Y Y Y
Address	(PO BOX NOT ACCEPTABLE)		
	SUBURB / TOWN	State	Post code

Beneficial Owner 4

Full Name	FULL GIVEN NAMES AND SURNAME	Date of Birth	D D / M M / Y Y Y Y
Address	(PO BOX NOT ACCEPTABLE)		
	SUBURB / TOWN	State	Post code

Do the terms of the trust identify the beneficiaries by reference to a membership of a class?

Yes Provide Details of each Class

No Full Name of each Beneficiary

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

Authorised Officer Details – Individual/Directors/Trustees/Partners			
Authorised Officer 1	TITLE	GIVEN NAMES (IN FULL)	
	SURNAME		
Preferred Name			
Residential Address	(PO BOX NOT ACCEPTABLE)		
	SUBURB / TOWN	State	Post code
Mailing Address	<input type="checkbox"/> If same as Residential	STREET NUMBER AND NAME OR PO BOX NUMBER	
	SUBURB / TOWN	State	Post code
Phone (Work)	()	Phone (Home)	()
Fax	()	Mobile	
Date of Birth		Employer	
Password		Occupation	
Do not send me product/marketing material or Special Offers from Suncorp <input type="checkbox"/>			
Authorised Officer 2	TITLE	GIVEN NAMES (IN FULL)	
	SURNAME		
Preferred Name			
Residential Address	(PO BOX NOT ACCEPTABLE)		
	SUBURB / TOWN	State	Post code
Mailing Address	<input type="checkbox"/> If same as Residential	STREET NUMBER AND NAME OR PO BOX NUMBER	
	SUBURB / TOWN	State	Post code
Phone (Work)	()	Phone (Home)	()
Fax	()	Mobile	
Date of Birth		Employer	
Password		Occupation	
Do not send me product/marketing material or Special Offers from Suncorp <input type="checkbox"/>			
Authorised Officer 3	TITLE	GIVEN NAMES (IN FULL)	
	SURNAME		
Preferred Name			
Residential Address	(PO BOX NOT ACCEPTABLE)		
	SUBURB / TOWN	State	Post code
Mailing Address	<input type="checkbox"/> If same as Residential	STREET NUMBER AND NAME OR PO BOX NUMBER	
	SUBURB / TOWN	State	Post code
Phone (Work)	()	Phone (Home)	()
Fax	()	Mobile	
Date of Birth		Employer	
Password		Occupation	
Do not send me product/marketing material or Special Offers from Suncorp <input type="checkbox"/>			

Authorised Officer Details – Individual/Directors/Trustees/Partners - continued			
Authorised Officer 4	TITLE	GIVEN NAMES (IN FULL)	
	SURNAME		
Preferred Name			
Residential Address	(PO BOX NOT ACCEPTABLE)		
	SUBURB / TOWN	State	Post code
Mailing Address	<input type="checkbox"/> If same as Residential	STREET NUMBER AND NAME OR PO BOX NUMBER	
	SUBURB / TOWN	State	Post code
Phone (Work)	()	Phone (Home)	()
Fax	()	Mobile	
Date of Birth		Employer	
Password		Occupation	
Do not send me product/marketing material or Special Offers from Suncorp <input type="checkbox"/>			
If more than 4 Authorised Officers, please complete Authorised Officers/Signing Officers – Account Opening Authority – Non Personal Customer form (00251)			
Deposit Account Details			
Product Name/Description			
Package Name/Description			
Statement Details			
A statement of account will be sent in accordance with the terms and conditions of Suncorp Deposit accounts. If you would like a copy of the Account Statement sent to an address different to the nominated mailing address (eg Accountant etc), then please complete the following details:			
Name			
Address			
	SUBURB / TOWN	State	Post code
Interest Payment Method			
<input type="checkbox"/>	Reinvest in this account		
<input type="checkbox"/>	Redirect to another Suncorp account (Available on selected products only)		
	Account Number		
	Account Name		
Cheque Book Order Details			
Name to appear on Cheque book	IF DIFFERENT TO ACCOUNT TITLE		
Special Cheque Book Mailing Address	IF DIFFERENT TO STATEMENT ADDRESS		
	SUBURB / TOWN	State	
	COUNTRY	Post code	
Special Cheque Book Mailing Address Expiry Date			
Cheque Book Size Options	<input type="checkbox"/> 25	<input type="checkbox"/> 50	<input type="checkbox"/> 200
NOTE: For Company Accounts if ABN does not incorporate ACN - ACN MUST be quoted on the cheque book.			

Term Deposit Details

Investment Details

Funding Instructions Account Transfer Cheque Deposit

Suncorp Account Number

Amount \$ Term Length Days Interest Rate %

Interest Payment Instructions (must be a Suncorp Account)

Pay Interest Monthly Quarterly Half Yearly Annually Maturity

BSB Suncorp Account No.

Suncorp Account Name (If not the same as Term Deposit)

Renewal Instructions (not applicable to Negotiated Term Deposits) Renew Principal and Interest for the same term at the then current rate

Principal Payment Instructions (must be a Suncorp Account)

Mature Principal and Interest Mature Principal

BSB Suncorp Account No.

Suncorp Account Name (If not the same as Term Deposit)

Appointment of an Agent

I/We appoint

and any individual person employed by this Firm, to be my/our agent for the purposes of obtaining information from Suncorp in relation to this Application, term deposit account numbers, balances, maturity details and other information required for the purposes of commission calculation. I/We authorise the Bank to contact my agent and/or accept instructions from my agent in relation to any renewal or reinvestment of my/our Term Deposits or in relation to opening new Term Deposits.

Tax File Numbers

Who will report to the ATO for any tax liability? (EG. COMPANY NAME, REGISTERED BUSINESS NAME) ETC.

Tax File Number

Unless otherwise directed, a Tax File Number where provided, will be applied to all accounts opened under this account name. The providing of Tax File Numbers is optional under taxation legislation. If you do not quote a tax file number for the Registered Business or at least 2 owners, for the Company / Organisation or in the case of an account for joint Companies at least two tax file numbers, tax may be deducted from the interest earned on the account at the highest marginal rate. Further information can be obtained from the Australian Taxation Office.

Do any of the following circumstances apply: Yes No

- any applicant is a U.S. citizen, resident, partnership, corporation or trust, or otherwise governed by US tax laws; or
- any applicant is a resident of another foreign country for the purpose of the tax laws of that foreign country; or
- any applicant has no residence for tax purposes; or
- a U.S. citizen, U.S. resident or a resident of another foreign country for tax purposes exercises control over any account holder or applicant.

If 'Yes' is ticked, please complete the Foreign Tax Liability Self Certification Declaration – Entities Form

Privacy Statement

Privacy is Important....

...especially when you consider the number of ways we communicate and interact these days. That's why we've put together this statement. It explains how we collect, hold, use and disclose your personal information and who we share it with.

And because it's guided by privacy laws, you can be sure it takes your rights seriously.

Above all, this statement is your assurance that we never take your privacy for granted and always take the utmost care in protecting your personal information.

Suncorp-Metway Ltd ("Bank"), is a member of the Suncorp Group, which we'll refer to simply as "the Group".

Why do we collect personal information?

Personal information is information or an opinion about an identified individual or an individual who is reasonably identifiable. The Bank collects personal information so that we can:

- identify you and conduct appropriate checks;
- understand your requirements and provide you with a product or service;
- set up, administer and manage our products and services;
- manage, train and develop our employees and representatives;
- manage complaints and disputes, and deal with dispute resolution bodies; and
- get a better understanding of you, your needs, your behaviours and how you interact with us, so we can engage in product and service research, development and business strategy including managing the delivery of our services and products via the ways we communicate with you.

What happens if you don't give us your personal information?

If we ask for your personal information and you don't give it to us, we may not be able to provide you with any, some, or all of the features of our products or services.

How we handle your personal information

We collect your personal information directly from you and, in some cases, from other people or organisations. We also provide your personal information to other related companies in the Group, and they may disclose or use your personal information for the purposes described in 'Why do we collect personal information?' in relation to products and services they may provide to you.

Under the following Australian laws we may be authorised or required to collect your personal information: Anti-Money Laundering and Counter-Terrorism Financing Act; Income Tax Assessment Acts, Tax Administration Act and A New Tax System (Goods and Services Tax) Act, and any regulations made under those Acts.

We will use and disclose your personal information for the purposes we collected it as well as purposes that are related, where you would reasonably expect us to. We may disclose your personal information to and/or collect your personal information from:

- other companies within the Group;
- any of our Group joint ventures where authorised or required;
- any entity where disclosure to, or collection from, such entity is required or authorised by law;
- customer, product, business or strategic research and development organisations;
- data warehouse, strategic learning organisations, data partners, analytic consultants;
- social media and other virtual communities and networks where people create, share or exchange information;
- publicly available sources of information;
- clubs, associations, member loyalty or rewards programs and other industry relevant organisations;
- a third party that we've contracted to provide financial services, financial products or administrative services – for example; information technology providers, administration or business management services, consultancy firms, auditors and business management consultants, marketing agencies and other marketing service providers, and print/mail/digital/imaging/document management service providers;

- yours or our advisers, agents, representatives or consultants;
- government, statutory or regulatory bodies and enforcement bodies;
- the Financial Ombudsman Service or any other external dispute resolution body;
- manufacturers for plastic card production (eg debit cards); and
- any other organisation or person, where you've asked them to provide your personal information to us or asked us to obtain personal information from them, eg your mother.

We'll use a variety of methods to collect your personal information from, and disclose your personal information to, these persons and organisations, including written forms, telephone calls and via electronic delivery. We may collect and disclose your personal information to these persons and organisations during the information life cycle, regularly, or on an ad hoc basis, depending on the purpose of collection.

Overseas Disclosure

Sometimes, we need to provide your personal information to – or get personal information about you from – persons located overseas, for the same purposes as in 'Why do we collect personal information?'.

The list of countries Suncorp usually disclose personal information to is in our Suncorp Group Privacy Policy. Please go to www.suncorp.com.au/privacy to see our Suncorp Group Privacy Policy or call 13 11 55 to obtain a list of countries Suncorp usually disclose personal information to. From time to time, we may need to disclose your personal information to, and collect your personal information from, other countries not on this list. Nevertheless, we will always disclose and collect your personal information in accordance with privacy laws.

Your personal information and our marketing practices

Every now and then, we and any related companies that use the Suncorp brand might let you know – including via mail, SMS, email, telephone or online – about news, special offers, products and services that you might be interested in. We will engage in marketing unless you tell us otherwise. You can contact us to update your marketing preferences at any time.

In order to carry out our direct marketing we collect your personal information from and disclose it to others that provide us with specialised data matching, trending or analytical services, as well as general marketing services (you can see the full list of persons and organisations under 'How we handle your personal information'). We may also collect your personal information for marketing through competitions and by purchasing contact lists.

We, and other people who provide us with services, may combine the personal information collected from you or others, with the information we, or companies in our Group, or our service providers already hold about you. We may use online targeted marketing, data and audience matching and market segmentation to improve advertising relevance to you.

How to access and correct your personal information or make a complaint

You have the right to access and correct your personal information held by us and you can find information about how to do this in the Suncorp Group Privacy Policy.

The Policy also includes information about how you can complain about a breach of the Australian Privacy Principles and how we'll deal with such a complaint. You can get a copy of the Suncorp Group Privacy Policy. Please use the contact details in Contact Us if you wish to do so.

Contact us

For more information about our privacy practices including overseas disclosure or to tell us about your marketing preferences you can visit: www.suncorp.com.au/privacy.

Alternatively, you can get in touch directly by contacting us on:

Phone: 13 11 55

Email: privacyaccessrequests@suncorp.com.au

Mail: Suncorp Bank GPO Box 1453, Brisbane Qld 4001

or by visiting a Suncorp Bank Branch

Declaration & Consent

I/We understand it is an offence under the “Anti-Money Laundering and Counter-Terrorism Financing Act 2006” to make a false or misleading statement.

I/We agree to be bound by the Terms and Conditions detailed in the Product Disclosure Statement / Product Information Document in relation to accounts opened under the above account name. I/We confirm the details supplied are correct.

By signing this application, I/We agree to Suncorp collecting, using and disclosing my/our personal information, including sensitive and health information if applicable, in accordance with the Privacy Statement included in this document and the Suncorp Group Privacy Policy and I/we will ensure that the Privacy Statement is provided to any individual I/we have provided personal information about in this form. This includes any Beneficial Owner(s) who I/we have identified.

Sometimes, Suncorp might use personal information to make product-related material on a range of financial products and services available

to our customers. A customer may elect not to receive product-related material by indicating in the Authorised Officer Details section of this form. I/We agree to Suncorp transmitting my/our personal information by electronic means as well as contacting me by SMS Messaging and/or E-Mail regarding my account where I have included my mobile telephone number or E-Mail address as part of this application. I accept that there is a risk that information may come into the possession of another person not entitled to receive it and acknowledge that while Suncorp will take all reasonable steps to protect my privacy it accepts no liability for breach of confidentiality or damages for loss I might suffer provided Suncorp can show it communicated to me at the electronic address or number provided by me. I/We will update Suncorp Bank immediately if my/our tax status for the purposes of FATCA and/or the Common Reporting Standard is to change in the future.

Owners / Authorised Officers Signatures

Authorised Officer 1	FULL NAME		
Date		Position	EG.: DIRECTOR
Signatory	<input type="checkbox"/> Yes <input type="checkbox"/> No	SIGNATURE	
Authorised Officer 2	FULL NAME		
Date		Position	EG.: DIRECTOR
Signatory	<input type="checkbox"/> Yes <input type="checkbox"/> No	SIGNATURE	
Authorised Officer 3	FULL NAME		
Date		Position	EG.: DIRECTOR
Signatory	<input type="checkbox"/> Yes <input type="checkbox"/> No	SIGNATURE	
Authorised Officer 4	FULL NAME		
Date		Position	EG.: DIRECTOR
Signatory	<input type="checkbox"/> Yes <input type="checkbox"/> No	SIGNATURE	

Internal Use Only

Identification Document Details - Trusts

Document 1	
Verified From	<input type="checkbox"/> Original <input type="checkbox"/> Certified Copy
Document Type	
Issued Date	
Collection Date	

Identification Document Details - Companies

Date of ASIC Search		Collection Date	
Company Search provided by	<input type="checkbox"/> Customer <input type="checkbox"/> Suncorp		

New Customers Identification Details (if more than 4 attach KYC form) **New Customers:** Complete KYC Verification **Existing Customers:** Verify Signature

Owner/Authorised Officer 1	Document 1	Document 2	Document 3
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Verified From	<input type="checkbox"/> Original <input type="checkbox"/> Certified Copy	<input type="checkbox"/> Original <input type="checkbox"/> Certified Copy	<input type="checkbox"/> Original <input type="checkbox"/> Certified Copy
Document Type			
Issuer			
Issue Date (If any)			
Expiry Date (If any)			
Document Number (If any)			
Collection Date			

Owner/Authorised Officer 2	Document 1	Document 2	Document 3
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Verified From	<input type="checkbox"/> Original <input type="checkbox"/> Certified Copy	<input type="checkbox"/> Original <input type="checkbox"/> Certified Copy	<input type="checkbox"/> Original <input type="checkbox"/> Certified Copy
Document Type			
Issuer			
Issue Date (If any)			
Expiry Date (If any)			
Document Number (If any)			
Collection Date			

Owner/Authorised Officer 3	Document 1	Document 2	Document 3
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Verified From	<input type="checkbox"/> Original <input type="checkbox"/> Certified Copy	<input type="checkbox"/> Original <input type="checkbox"/> Certified Copy	<input type="checkbox"/> Original <input type="checkbox"/> Certified Copy
Document Type			
Issuer			
Issue Date (If any)			
Expiry Date (If any)			
Document Number (If any)			
Collection Date			

Owner/Authorised Officer 4	Document 1	Document 2	Document 3
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Verified From	<input type="checkbox"/> Original <input type="checkbox"/> Certified Copy	<input type="checkbox"/> Original <input type="checkbox"/> Certified Copy	<input type="checkbox"/> Original <input type="checkbox"/> Certified Copy
Document Type			
Issuer			
Issue Date (If any)			
Expiry Date (If any)			
Document Number (If any)			
Collection Date			

Internal Use Only

Notes Section

New Account Number(s)						
Effective Open Date		Term Deposit Type	<input type="checkbox"/> QLD	<input type="checkbox"/> Non QLD	<input type="checkbox"/> Campaign	<input type="checkbox"/> Negotiated
Hold/s Applies		Negotiated Rate Code				

Business Payments - Internal Use Only:

If the customer/account uses Internet Banking Business Payment ensure the following are updated.

<input type="checkbox"/> Add/Modify APCA ID (Mandatory for Business Payments)	<input type="checkbox"/> Internet Banking Customer Relationships
<input type="checkbox"/> Internet Banking Business Payment Account/Personal Limits	<input type="checkbox"/> Security Token (daily limit of \$10,000 or >) or ETP (daily limit of \$5,000 or <)

Branch/Agent Name			
Second Officer Code		Sales Officer Code	
Broker Code		Promo Code	

NAME	SIGNATURE	USER ID	DATE

Processed and Verified by:

VERIFIER'S NAME	VERIFICATION DATE
VERIFIER'S ORGANISATION	USER ID