

### When to use this form

Use this form when there is ANY change to the authorised signatories of either an Association, a Body Corporate, a Club or other Organisation (including changes to either one or all of the appointed signatories).

Evidence supporting the requested changes MUST always be provided. In most circumstances this will be in the form of Meeting Minutes advising of the signatory changes.

When this form is completed, it will replace all previously lodged signing authorities.

### Documents required

- **Association/Club/Organisation Accounts** - Meeting Minutes in a recognised format subsequent to a legally constituted meeting advising of the resolution to change / update signatories. Minutes of the meeting (or extract) must be an official document signed by the Chairperson and include names and positions of the governing committee (chairperson, secretary, treasurer), authorised parties to operate the account and how many persons required to sign.
- **Body Corporate Account** - either Minutes of a legally constituted meeting as above and/or a BCCM Form 2 (Notice of authorised signatories on body corporate financial institution account).
- **Incorporated Organisations** - as above or a search document issued by the Office of Fair Trading may be presented to verify authorised Officer Bearers.

### Identification requirements

- All newly appointed signatories are required to provide identification which meets an Acceptable Identification Combination and all their details will need to be recorded in the New Party section of the Signatory Form.

### How to complete form

First Page:

- **Membership details** to be fully completed.
- **Method of operation** to be completed as per the information contained in the supplied Meeting Minutes.
- **All parties to the membership** - full name and specimen signature must be completed with all current details relating to appointed signatories.
- **Acknowledgement of authorised account opener/s** is to be signed by the person/s legally authorised by resolution of the organisation.

New Party Pages:

- Each newly appointed party to the membership must complete the relevant details on these pages and sign where indicated.
- Existing parties to the membership do not need to complete unless any of their details have changed.

# SIGNATORY FORM

ASSOCIATIONS / BODY CORPORATES / CLUBS / ORGANISATIONS



## Membership details

Member number: \_\_\_\_\_ Date: \_\_\_\_\_

Member name: \_\_\_\_\_

To update membership details such as a change of address please complete an Amendment form - Non-Personal Accounts.

## Method of operation

Number to sign on account: \_\_\_\_\_ of \_\_\_\_\_ to sign Is there a special signing authority (Y/N)? \_\_\_\_\_

If yes, details must be stated in minutes supplied: \_\_\_\_\_

## All parties to the membership - full name and specimen signature

All authorised signatories on association / organisation / club memberships are required to complete this form to ensure Heritage has the most up to date authorised signatory information.

**PARTY ONE** - Full name: \_\_\_\_\_

Position: \_\_\_\_\_

Signature of party one:

**PARTY TWO** - Full name: \_\_\_\_\_

Position: \_\_\_\_\_

Signature of party two:

**PARTY THREE** - Full name: \_\_\_\_\_

Position: \_\_\_\_\_

Signature of party three:

**PARTY FOUR** - Full name: \_\_\_\_\_

Position: \_\_\_\_\_

Signature of party four:

## Acknowledgement of authorised account opener/s

The authorised signatories listed above replace the existing signing authority and will extend to all accounts and term deposits operated under the above member number and will remain in force until Heritage receives notice in writing of the cancellation thereof.

I/we certify that authority has been duly given by resolution at a legally constituted meeting for those nominated to conduct operations on behalf of the said body and evidence of this change has been provided.

**CHEQUE ACCOUNTS:** This does not refer to cheques dated prior to the date hereof and presented for payment on or after such date.

Signature of Person(s) Authorised to Sign

Signature of Person(s) Authorised to Sign

Branch use only	Branch Stamp:	Coded:	Checked:	Has KYC & ID been collected & verified (Y/N)?	CSO Signature:	Checking Officer Signature:

NOTE: It is an offence under the Financial Transaction Reports Act 1988 and the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 to give false and misleading information.

**PARTY ONE** (only complete if this party is not already on the membership or if any details require updating)**Existing relationship with Heritage**

Do you have an existing relationship with Heritage (Y/N): \_\_\_\_ For example, do you have a membership or are you listed as a signatory on another membership.

If yes, list existing member number: \_\_\_\_\_

**Party type (relationship)**PARTY ONE:  Authorised Signatory  Power of Attorney  Executor  Token Holder  \*Enquiry Access Only Chairman  Treasurer  Secretary (✓ to select appropriate party type, may select more than one party type if appropriate)**Personal details**

\*Title: \_\_\_\_\_ \*Surname: \_\_\_\_\_

\*Given names: \_\_\_\_\_ Commonly known as: \_\_\_\_\_

\*First school attended: \_\_\_\_\_

\*Mother's maiden name: \_\_\_\_\_

Date of birth: \_\_\_\_\_ Gender (M/F): \_\_\_\_\_ Drivers licence: \_\_\_\_\_

**\*Residential address details**

Property: \_\_\_\_\_ Unit/flat #: \_\_\_\_\_ House #: \_\_\_\_\_

Street: \_\_\_\_\_ Street type: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

**Mailing address details**

Mail address: \_\_\_\_\_

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

**\*Contact details**

Home: \_\_\_\_\_ Work: \_\_\_\_\_ Mobile: \_\_\_\_\_

Other: \_\_\_\_\_ If other, relationship: \_\_\_\_\_

**Foreign Tax residency certification**Are you, for Tax purposes, a resident of any country other than Australia?  No  Yes

If YES, please complete the below "Common Reporting Standard details: Resident of a foreign country" section to complete your application. \_\_\_\_\_

**Common Reporting Standard details: Resident of a foreign country**

	Country / Jurisdiction of Tax residence	TIN (Taxpayer Identification Number)	If no TIN available, select reason: A The country/jurisdiction where the Account Holder is resident does not issue TINs B Unable to provide to the bank due to the law by country/Jurisdiction of tax residence C Unable to obtain a TIN or equivalent (please state reason why)
1			A B C
2			A B C
3			A B C

**\*Specimen Signature****Foreign Country Tax Information Declaration**I/we declare: - that the information provided in this form is correct and reflects my/our tax residency status;  
- that I/we will update Heritage immediately if my/our tax residency status is to change in the future.

I/we acknowledge that the information contained in this form and information regarding the Account Holder(s) and any Reportable Account(s) may be provided to the Australian Taxation Office and exchanged with tax authorities of another country/jurisdiction or countries/jurisdictions in which the Account Holder(s) may be tax resident pursuant to intergovernmental agreements to exchange financial account information.

Signature of Party One \_\_\_\_\_

NOTE: If adding a person with Enquiry Access Only, complete fields marked with\*.

**PARTY TWO** (only complete if this party is not already on the membership or if any details require updating)

**Existing relationship with Heritage**

Do you have an existing relationship with Heritage (Y/N): \_\_\_\_ For example, do you have a membership or are you listed as a signatory on another membership.  
 If yes, list existing member number: \_\_\_\_\_

**Party type (relationship)**

**PARTY ONE:**  Authorised Signatory  Power of Attorney  Executor  Token Holder  \*Enquiry Access Only  
 Chairman  Treasurer  Secretary (✓ to select appropriate party type, may select more than one party type if appropriate)

**Personal details**

\*Title: \_\_\_\_\_ \*Surname: \_\_\_\_\_  
 \*Given names: \_\_\_\_\_ Commonly known as: \_\_\_\_\_  
 \*First school attended: \_\_\_\_\_  
 \*Mother's maiden name: \_\_\_\_\_  
 Date of birth: \_\_\_\_\_ Gender (M/F): \_\_\_\_\_ Drivers licence: \_\_\_\_\_

**\*Residential address details**

Property: \_\_\_\_\_ Unit/flat #: \_\_\_\_\_ House #: \_\_\_\_\_  
 Street: \_\_\_\_\_ Street type: \_\_\_\_\_  
 Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

**Mailing address details**

Mail address: \_\_\_\_\_  
 Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

**\*Contact details**

Home: \_\_\_\_\_ Work: \_\_\_\_\_ Mobile: \_\_\_\_\_  
 Other: \_\_\_\_\_ If other, relationship: \_\_\_\_\_

**Foreign Tax residency certification**

Are you, for Tax purposes, a resident of any country other than Australia?  No  Yes  
 If YES, please complete the below "Common Reporting Standard details: Resident of a foreign country" section to complete your application. \_\_\_\_\_

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1			A B C
2			A B C
3			A B C

**\*Specimen Signature**

**Foreign Country Tax Information Declaration**  
 I/we declare: - that the information provided in this form is correct and reflects my/our tax residency status;  
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 I/we acknowledge that the information contained in this form and information regarding the Account Holder(s) and any Reportable Account(s) may be provided to the Australian Taxation Office and exchanged with tax authorities of another country/jurisdiction or countries/jurisdictions in which the Account Holder(s) may be tax resident pursuant to intergovernmental agreements to exchange financial account information.  
 Signature of Party Two \_\_\_\_\_  
 NOTE: If adding a person with Enquiry Access Only, complete fields marked with\*.

**PARTY THREE (only complete if this party is not already on the membership or if any details require updating)**

**Existing relationship with Heritage**

Do you have an existing relationship with Heritage (Y/N): \_\_\_\_ For example, do you have a membership or are you listed as a signatory on another membership.  
 If yes, list existing member number: \_\_\_\_\_

**Party type (relationship)**

**PARTY ONE:**  Authorised Signatory  Power of Attorney  Executor  Token Holder  \*Enquiry Access Only  
 Chairman  Treasurer  Secretary (✓ to select appropriate party type, may select more than one party type if appropriate)

**Personal details**

\*Title: \_\_\_\_\_ \*Surname: \_\_\_\_\_  
 \*Given names: \_\_\_\_\_ Commonly known as: \_\_\_\_\_  
 \*First school attended: \_\_\_\_\_  
 \*Mother's maiden name: \_\_\_\_\_  
 Date of birth: \_\_\_\_\_ Gender (M/F): \_\_\_\_\_ Drivers licence: \_\_\_\_\_

**\*Residential address details**

Property: \_\_\_\_\_ Unit/flat #: \_\_\_\_\_ House #: \_\_\_\_\_  
 Street: \_\_\_\_\_ Street type: \_\_\_\_\_  
 Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

**Mailing address details**

Mail address: \_\_\_\_\_  
 Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

**\*Contact details**

Home: \_\_\_\_\_ Work: \_\_\_\_\_ Mobile: \_\_\_\_\_  
 Other: \_\_\_\_\_ If other, relationship: \_\_\_\_\_

**Foreign Tax residency certification**

Are you, for Tax purposes, a resident of any country other than Australia?  No  Yes  
 If YES, please complete the below "Common Reporting Standard details: Resident of a foreign country" section to complete your application. \_\_\_\_\_

**Common Reporting Standard details: Resident of a foreign country**

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2			A B C
3			A B C

**\*Specimen Signature**

**Foreign Country Tax Information Declaration**  
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 I/we acknowledge that the information contained in this form and information regarding the Account Holder(s) and any Reportable Account(s) may be provided to the Australian Taxation Office and exchanged with tax authorities of another country/jurisdiction or countries/jurisdictions in which the Account Holder(s) may be tax resident pursuant to intergovernmental agreements to exchange financial account information.  
 Signature of Party Three \_\_\_\_\_  
 NOTE: If adding a person with Enquiry Access Only, complete fields marked with\*.

**PARTY FOUR (only complete if this party is not already on the membership or if any details require updating)**

**Existing relationship with Heritage**

Do you have an existing relationship with Heritage (Y/N): \_\_\_\_ For example, do you have a membership or are you listed as a signatory on another membership.  
 If yes, list existing member number: \_\_\_\_\_

**Party type (relationship)**

**PARTY ONE:**  Authorised Signatory  Power of Attorney  Executor  Token Holder  \*Enquiry Access Only  
 Chairman  Treasurer  Secretary (✓ to select appropriate party type, may select more than one party type if appropriate)

**Personal details**

\*Title: \_\_\_\_\_ \*Surname: \_\_\_\_\_  
 \*Given names: \_\_\_\_\_ Commonly known as: \_\_\_\_\_  
 \*First school attended: \_\_\_\_\_  
 \*Mother's maiden name: \_\_\_\_\_  
 Date of birth: \_\_\_\_\_ Gender (M/F): \_\_\_\_\_ Drivers licence: \_\_\_\_\_

**\*Residential address details**

Property: \_\_\_\_\_ Unit/flat #: \_\_\_\_\_ House #: \_\_\_\_\_  
 Street: \_\_\_\_\_ Street type: \_\_\_\_\_  
 Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

**Mailing address details**

Mail address: \_\_\_\_\_  
 Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

**\*Contact details**

Home: \_\_\_\_\_ Work: \_\_\_\_\_ Mobile: \_\_\_\_\_  
 Other: \_\_\_\_\_ If other, relationship: \_\_\_\_\_

**Foreign Tax residency certification**

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 If YES, please complete the below "Common Reporting Standard details: Resident of a foreign country" section to complete your application. \_\_\_\_\_

**Common Reporting Standard details: Resident of a foreign country**

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 Signature of Party Four \_\_\_\_\_  
 NOTE: If adding a person with Enquiry Access Only, complete fields marked with\*.