

## APPLICATION FOR ACCOUNT AUSTRALIAN SELF MANAGED SUPERANNUATION FUND - INDIVIDUAL(S)

### Section One - Applicant Details

#### 1.1. Individual Trustee(s) Personal Details:

| Applicant #1  |   |
|---|---|
| Mr. / Mrs. / Ms. / Miss   |   |
| <input style="width: 100%;" type="text"/>   |   |
| Full Name   |   |
| <input style="width: 100%;" type="text"/>   |   |
| Other names used  |   |
| <input style="width: 100%;" type="text"/>   |   |
| Date of Birth   | <input style="width: 150px;" type="text" value=" / /"/>   |
| Country of Birth  | <input style="width: 150px;" type="text"/>  |
| Residential Address   | <input style="width: 100%;" type="text"/>   |
| Unit / Street Number and Name   |   |
| <input style="width: 100%;" type="text"/>   |   |
| Other e.g. Property Name (if applicable)  |   |
| <input style="width: 150px;" type="text"/>  | <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> |
| Suburb/Town   | State   |
| <input style="width: 50px;" type="text"/> <input style="width: 50px;" type="text"/> <input style="width: 50px;" type="text"/> | <input style="width: 100px;" type="text"/>  |
| Postcode  | Country (if outside Australia)  |
| Country of Citizenship  | <input style="width: 100%;" type="text"/>   |
| Tax File Number <input style="width: 150px;" type="text"/>  |   |
| Are you a resident of Australia for tax purposes?   |   |
| <input type="checkbox"/> Yes <input type="checkbox"/> No <input style="width: 100px;" type="text"/>                           |   |
| If No, country of residence for tax purposes  |   |

| Applicant #2  |   |
|---|---|
| Mr. / Mrs. / Ms. / Miss   |   |
| <input style="width: 100%;" type="text"/>   |   |
| Full Name   |   |
| <input style="width: 100%;" type="text"/>   |   |
| Other names used  |   |
| <input style="width: 100%;" type="text"/>   |   |
| Date of Birth   | <input style="width: 150px;" type="text" value=" / /"/>   |
| Country of birth  | <input style="width: 150px;" type="text"/>  |
| Residential Address   | <input style="width: 100%;" type="text"/>   |
| Unit / Street Number and Name   |   |
| <input style="width: 100%;" type="text"/>   |   |
| Other e.g. Property Name (if applicable)  |   |
| <input style="width: 150px;" type="text"/>  | <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> <input style="width: 30px;" type="text"/> |
| Suburb/Town   | State   |
| <input style="width: 50px;" type="text"/> <input style="width: 50px;" type="text"/> <input style="width: 50px;" type="text"/> | <input style="width: 100px;" type="text"/>  |
| Postcode  | Country (if outside Australia)  |
| Country of Citizenship  | <input style="width: 100%;" type="text"/>   |
| Tax File Number <input style="width: 150px;" type="text"/>  |   |
| Are you a resident of Australia for tax purposes?   |   |
| <input type="checkbox"/> Yes <input type="checkbox"/> No <input style="width: 100px;" type="text"/>                           |   |
| If No, country of residence for tax purposes  |   |

#### 1.2. Correspondence Details:

|  |   |        |   |
|--|---|--------|---|
| Postal Address (if different from residential) |   |        |   |
| <input style="width: 100%;" type="text"/>      |   |        |   |
| Contact details: Home                          | <input style="width: 80px;" type="text"/> | Mobile | <input style="width: 80px;" type="text"/> |
| Work   | <input style="width: 80px;" type="text"/> | Fax    | <input style="width: 80px;" type="text"/> |
| Email  | <input style="width: 100%;" type="text"/> |        |   |

|  |   |        |   |
|--|---|--------|---|
| Postal Address (if different from residential) |   |        |   |
| <input style="width: 100%;" type="text"/>      |   |        |   |
| Contact details: Home                          | <input style="width: 80px;" type="text"/> | Mobile | <input style="width: 80px;" type="text"/> |
| Work   | <input style="width: 80px;" type="text"/> | Fax    | <input style="width: 80px;" type="text"/> |
| Email  | <input style="width: 100%;" type="text"/> |        |   |

#### 1.3. Occupation and Income Details:

##### 1.3.1. Occupation Status

|                                       |  |                                     |
|---------------------------------------|--|-------------------------------------|
| <input type="checkbox"/> Professional | <input type="checkbox"/> Self Employed | <input type="checkbox"/> Unemployed |
| <input type="checkbox"/> Retired      | <input type="checkbox"/> Home Duties   | <input type="checkbox"/> Student    |
| <input type="checkbox"/> Employed     | <input type="checkbox"/> Pensioner     |                                     |

|                                       |  |                                     |
|---------------------------------------|--|-------------------------------------|
| <input type="checkbox"/> Professional | <input type="checkbox"/> Self Employed | <input type="checkbox"/> Unemployed |
| <input type="checkbox"/> Retired      | <input type="checkbox"/> Home Duties   | <input type="checkbox"/> Student    |
| <input type="checkbox"/> Employed     | <input type="checkbox"/> Pensioner     |                                     |

##### 1.3.2. Description of Occupation/Profession/Business

*(Detail what the applicant does for work- If retired, specify work prior to retirement. For example, if employed, provide details of the role or the position the applicant is employed in.)*

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### 1.3.3. Name of Employer, or Business Name if Self-Employed (Sole Trader) and Address

**Name**

  

**Address**

  
  
 Unit / Street Number and Name  
  
 Other e.g. Property Name (if applicable)  
    
 Suburb/Town State  
     
 Postcode Country (if outside Australia)  
 

**Name**

  

**Address**

  
  
 Unit / Street Number and Name  
  
 Other e.g. Property Name (if applicable)  
    
 Suburb/Town State  
     
 Postcode Country (if outside Australia)  
 

### 1.3.4. Industry of employer or nature of business if self-employed (sole trader) or a business owner

**Applicant #1**

Manufacturer  Wholesaler  
 Health and community services  Transport and Storage  
 Services  Retailer  Government  
 Finance and Insurance  Construction

Other (Please specify)

**Applicant #2**

Manufacturer  Wholesaler  
 Health and community services  Transport and Storage  
 Services  Retailer  Government  
 Finance and Insurance  Construction

Other (Please specify)

### 1.3.5. Sources of Income (Tick more than one if applicable):

Where the individual is a trustee, include the funds that the trustee earns from running the trust, if any. This may be different from the funds of the trust.

Employment  Own business  
 Dividends  Interest  Rent  
 Pension  Unemployment benefits  
 Student allowance  Dependent on family member

Other (Please describe)

Employment  Own business  
 Dividends  Interest  Rent  
 Pension  Unemployment benefits  
 Student allowance  Dependent on family member

Other (Please describe)

### 1.3.6. Annual Income Range

<\$30K  <30K-\$70K  \$70K-\$100K  
 >\$150K  \$100K-\$150K Other

<\$30K  <30K-\$70K  \$70K-\$100K  
 >\$150K  \$100K-\$150K Other

### 1.3.7. Reason for Banking

Tick all applicable:

Investment  Savings  
 Other

Tick all applicable:

Investment  Savings  
 Other

## Section Two - Self Managed Superfund Details

### A. Identifiers Of Existence

**Full Name of the Trust**

*exactly as recorded on the trust deed. See footnote for example.*

Bank use CIF

Full name of business carried out by the trust, *if any*

Australian Business Number (ABN)

Trust is Australian resident for tax purposes

 Yes  No

If No, country of tax residence-----

Tax File Number issued by the Australian Taxation Office

### B. Financial Details

**Source of funds** (Specify the activity(ies) that will generate the trust funds)

Tick all applicable

- Salary Sacrifice
- Return from Shares /Securities/Investments
- Rental income
- Working Capital
- Assets sale
- After tax contributions
- Other, please specify details

Does the trust receive cash as income?

 Yes  No

If yes, source of cash

Estimated annual cash transactions of the account

Estimated total annual non cash transactions for the account

Monthly transactions amount:

Average size of each transaction

### C. Self Managed Superannuation Fund Members

Insert full name for each member





### D. Relationship Management of the Fund

Tick this box if at anytime any of the trust's members, trustee(s) or authorised signatory(ies) has been entrusted with, or been a member of the family or an associate, of a person entrusted with a prominent public function (2). If you ticked the box, bank staff will contact you for additional details.

(2) Prominent public functions include the functions of heads of state, government ministers, members of parliaments, those holding high judicial, governmental, administrative, central bank, diplomatic or military offices and member of the administrative, management or supervisory boards of state-owned companies.

## APPLICATION FOR ACCOUNT AUSTRALIAN SELF MANAGED SUPERANNUATION FUND - INDIVIDUAL(S)

### Section Three - Account Details

#### 3.1. Account Name:

Account Name:  Account Number:

Record the full name i.e. individual(s) name in trust for the trust name

#### 3.2. Account Types

| Account Type <i>(tick applicable)</i>   | Currency | <input type="checkbox"/> AUD |
|---|----------|------------------------------|
| <input type="checkbox"/> Online Savings Account   |          |                              |
| <input type="checkbox"/> Term Deposit   |          |                              |
| <input type="checkbox"/> 1 month <input type="checkbox"/> 3 months <input type="checkbox"/> 6 months <input type="checkbox"/> 1 year <input type="checkbox"/> 2 Years <input type="checkbox"/> 5 years                    Other ..... |          |                              |
| <b>Instructions at Maturity</b>   |          |                              |
| <input type="checkbox"/> Reinvest principal plus interest for the same period as the initial deposit, unless otherwise instructed prior to maturity.  |          |                              |
| <input type="checkbox"/> Reinvest principal for the same period as the initial deposit and credit interest to my A/C No. <input style="width: 100px; height: 15px;" type="text"/>   |          |                              |
| <input type="checkbox"/> Credit principal plus interest to my account number <input style="width: 150px; height: 15px;" type="text"/>   |          |                              |
| <input type="checkbox"/> Other .....  |          |                              |
| A certificate confirming details of this term deposit will be produced within 24 hours of processing and forwarded to the nominated correspondence address.   |          |                              |

#### Internet Banking

I wish to apply for Internet Banking and understand that this is a VIEW Only Access

#### Unique Identification word

If you are applying for Internet Banking for the first time, please provide us with a unique identification word. This identification word is for your security. Please keep this word secure and confidential. You may be required to quote this identification word when an ABAL customer service representative will need to identify you over the phone.

If you have previously provided us with a unique identification word, please also record that word here.

Identification Word

## APPLICATION FOR ACCOUNT AUSTRALIAN SELF MANAGED SUPERANNUATION FUND - INDIVIDUAL(S)

### Section Four - Other

#### Privacy Notice

##### Collection and Use of personal information

Arab Bank Australia Limited ('we', 'us', 'our') ACN 37 002 950 745 requires personal information including information provided by you in this form in order to open and conduct an account and to provide you with our products and services.

If you do not provide all relevant information here then we will be unable to process your application to open an account or provide you with our products and services.

##### Use

We may use the information provided by you for account administration, planning, product development and research purposes, as well as for the purpose of prudential and compliance management within the organisation.

##### Disclosure

The Privacy Act allows us and other applicable persons to disclose personal information about you when related to the primary purpose for which it was collected. Personal information include details to identify you and verify your identity, such as your name, sex, date of birth, current and previous addresses, your employment, your identification documents details, complaints details.

For the purpose of account opening and providing products and services to you and managing our business, we may give information to:

- external service providers to us, such as organisations which we use to verify your identity, to open the account or provide the product or service applied for, payment systems operators, mailing houses, and research consultants
- members of the Arab Bank Group;
- insurers and re-insurers, where insurance is provided in connection with our services to you;
- debt collecting agencies, if you have not repaid a debt as required;
- our professional advisors, such as accountants, lawyers and auditors;
- state or territory authorities that give assistance to facilitate the provision of home loans to individuals;
- other credit providers and their professional advisors;
- your representative, for example, lawyer, mortgage broker, financial advisor or attorney, as authorised by you; or
- government and regulatory authorities, if required or authorised by law;
- Credit reporting bodies and external dispute resolution schemes.

##### Overseas disclosure

We may disclose your personal information within the Arab Bank Group, to our parent entity Arab Bank plc incorporated in Jordan. The information shall only be disclosed for the purposes set out in this document and an agreement is in place with our parent that it will observe the Australian Privacy laws.

##### Privacy policy and access

Our Privacy Policy provides additional information about how we collect and handle your personal information. It contains information about circumstances where collection of personal information may be required or authorised by law. It also explains circumstances where information may be collected from persons other than you.

Our Policy sets out how you can ask for access to personal information we hold about you and seek correction of that information. It also explains how you can complain about a breach of the Privacy Act or the Credit Reporting Code of Conduct, and how we will deal with your complaint. Our Privacy Policy can be located at [www.arabbank.com.au](http://www.arabbank.com.au)

You can request to access and update your personal information during ordinary business hours by contacting anyone who handles your banking or at

Mail: P. O Box N645, Grosvenor Place Sydney NSW 1220

Email: [Service@arabbank.com.au](mailto:Service@arabbank.com.au)

Telephone: 1800 646 484 – Overseas callers: +61 2 9377 8900 Fax 612 9221 5428

##### Opt out clause

We and our related body corporates value your privacy. We wish to use your information to offer you other products and services that will enhance our relationship with you. If you do not wish to receive such communication please let us know by ticking the box below.

I do not wish to receive offers and services from the bank, its agents or third party service providers.

#### Tax File Number

Accounts earning interest are subject to Tax File Number (TFN) legislation. It is not compulsory for you to provide your TFN. However, if you are an Australian resident and you choose not to provide your TFN or Australian Business Number (ABN), or a TFN exemption has not been supplied, the Bank must deduct tax calculated at the highest marginal tax rate, plus the Medicare levy, from the interest earned. Please also note that you do not need to inform us of your ABN if you have already provided it to us.

#### Declaration

I / we have read the whole of this application and certify that the information contained in it is correct and complete. I / we acknowledge having received a copy of the product disclosure statement (PDS) that applies to this account, and accept those terms. The Bank may charge to this or any other account I / we may conduct with the Bank or recover from me / us any bank fees, government charges, taxes or duties imposed on transactions on / or which relate to my / our account(s).

##### Joint Accounts

Where any one signatory is authorised to operate the account, we acknowledge that subject to the conditions of use of the account from time to time any one of us may withdraw from the account, endorse cheques lodged for the credit of the accounts, operate the account (including by card access or other electronic means if applicable) or close the account. That the authority will remain in force until the Bank receives instructions to the contrary signed by any one of us. If an account holder dies, the Bank may consider the account is owned by the surviving account holder(s). The Bank will be free from all responsibility in paying any money to the survivor(s).

### Section Five - Signature and Method of Account Operation

#### Method of account operation

All

Anyone

|               |     |
|---------------|-----|
| Signature     |     |
| Name          |     |
| Date          | / / |
| Bank Use -CIF |     |

|               |     |
|---------------|-----|
| Signature     |     |
| Name          |     |
| Date          | / / |
| Bank Use -CIF |     |