HEARTLAND BANK

Term Deposit application form

Australian company/trust/superannuation fund

Complete and return this form along with the supporting documents to support@heartlandbank.com.au.
Alternatively, you can mail documentation to: **Heartland Bank Australia Limited, PO Box 18134, Collins Street East VIC 8003.**
If you require more space, complete the information on a second form. If you require assistance in completing this form, contact us on **1300 889 338**.

Section 1 – Term Deposit details

Initial deposit amount: $ _____ (Minimum amount $50,000)

Select the term you're applying for:

Term: ☐ 31 days ☐ 3 months ☐ 6 months ☐ 9 months ☐ 12 months
☐ 24 months ☐ 36 months ☐ 48 months ☐ 60 months

Would you like the interest paid monthly? (Only available for 12 – 60 month terms) ☐ Yes ☐ No

We'll send you details on how to fund your Term Deposit via BPAY or funds transfer.

Interest disbursement instructions:

☐ Reinvest into my Term Deposit

☐ Send to account name _____

BSB number ☐☐☐ – ☐☐☐ Account number ☐☐☐☐☐☐☐☐☐

If sending interest to an account held with another financial institution, send us a copy of a bank statement issued in the last 12 months, or a letter from your bank confirming the account name and number of your nominated account.

Maturity: We'll write to you two weeks prior to maturity seeking your reinvestment (or redemption) instructions. You can also update your maturity instructions at any time via Internet Banking.

Select the source(s) of funds being invested:

☐ Borrowed funds

☐ Income from operating a business

☐ Sale of asset (e.g. shares, property)

☐ One-off payment (e.g. matured investment, court settlement, redundancy, inheritance)

☐ Charitable donation

☐ Investment income (e.g. rent, dividends, pension)

☐ Windfall (e.g. gift, lottery winnings)

Heartland Bank Australia Limited ABN 54 087 651 750 (Australian Financial Services Licence /Australian Credit Licence 245606)
PO Box 18134, Collins Street East VIC 8003

Section 2 – Customer details

Select what type of Australian entity is opening this account:

- ☐ Company
- ☐ Registered managed investment scheme
- ☐ Regulated superannuation fund (company trustee)
- ☐ Unregulated trust (company trustee)
- ☐ Regulated superannuation fund (individual trustee)
- ☐ Unregulated trust (individual trustee)

For the purposes of this form an unregulated trust will be a trust not subject to oversight of an Australian statutory regulator (e.g. family trust, discretionary trust or charitable trust).

2A Regulated superannuation fund, registered managed investment scheme or trust

Ensure you provide the required identity verification documents for the trust (refer to section 8).

Full name of entity

Country of establishment

ABN

TFN

TFN exemption

For unregulated trusts (e.g. family trust, discretiona ry trust or charitable trust), provide further details below.

Trust type

Full name of trust settlor

2B Company or company acting as trustee

Ensure you provide the required identity verification documents for the company or company acting as trustee (refer to section 8).

Select the applicable company type:

- ☐ Public (company whose name does NOT include the word Pty or Proprietary)
- ☐ Proprietary (company whose name ends with Proprietary Ltd or Pty Ltd; also known as private company)

Select relevant company category and provide the required details:

- ☐ Listed company (e.g. ASX)
- ☐ Majority-owned subsidiary of an Australian listed company

  Name of the listed company
- ☐ Licensed by an Australian Commonwealth, State or Territory statutory regulator and subject to supervision beyond that provided by ASIC as a company registration body (e.g. Australian Financial Services Licensees (AFSL) or Australian Credit Licensees (ACL))

  Name of the regulator

  License details
- ☐ Subsidiary of a company licensed by an Australian Commonwealth, State or Territory statutory regulator and subject to supervision beyond that provided by ASIC as a company registration body
- ☐ None of the above

Full name of company

Business name (if applicable)

Industry description (e.g. Construction, Finance and Insurance)

ACN

ABN

TFN

TFN exemption

Section 2 – Customer details (continued)

Principal place of business (cannot be a PO Box)

Contact name

Street address

Suburb

State

Postcode

Country

Phone (home)

Mobile

Registered office (cannot be a PO Box)

☐ Select if registered office is the same as the principal place of business (above).

Contact name

Street address

Suburb

State

Postcode

Country

Phone (home)

Mobile

Postal address (if applicable)

Street address or PO Box

Suburb

State

Postcode

Country

Phone (home)

Mobile

Email address

Section 3 – Account operations

Complete this section to appoint authorised representative/s to operate your accounts held with us.

An authorised representative can enquire about the account - such as account balance, interest rate, or Term Deposit maturity date. An authorised representative cannot instruct us to redeem or reinvest Term Deposits held with us - this can only be done by the owner of the account (such as director/s of the organisation) or a nominated authorised signatory.

An authorised signatory can enquire about accounts held with us, instruct us to redeem or reinvest Term Deposit accounts, and enable or disable the ability to share data.

Ensure you provide the required identity verification documents as per section 8A.

Authorised person 1

Type: ☐ Authorised representative ☐ Authorised signatory

Full name

Date of birth ☐☐/☐☐/☐☐☐☐

Is the authorised person known by any other names? If yes, provide below.

Residential address (cannot be a PO Box)

Street address

Suburb State

Postcode Country

Mobile

Email address

What is the authorised person's industry that they work in and occupation?

Industry Occupation

Authorised person 2

Type: ☐ Authorised representative ☐ Authorised signatory

Full name

Date of birth ☐☐/☐☐/☐☐☐☐

Is the authorised person known by any other names? If yes, provide below.

Residential address (cannot be a PO Box)

Street address

Suburb State

Postcode Country

Mobile

Email address

What is the authorised person's industry that they work in and occupation?

Industry Occupation

Section 3 – Account operations (continued)

Authorised person 3

Type: ☐ Authorised representative ☐ Authorised signatory

Full name

Date of birth ☐☐/☐☐/☐☐☐☐

Is the authorised person known by any other names? If yes, provide below.

Residential address (cannot be a PO Box)

Street address

Suburb State

Postcode Country

Mobile

Email address

What is the authorised person's industry that they work in and occupation?

Industry Occupation

Authorised person 4

Type: ☐ Authorised representative ☐ Authorised signatory

Full name

Date of birth ☐☐/☐☐/☐☐☐☐

Is the authorised person known by any other names? If yes, provide below.

Residential address (cannot be a PO Box)

Street address

Suburb State

Postcode Country

Mobile

Email address

What is the authorised person's industry that they work in and occupation?

Industry Occupation

☐ **If there are more authorised persons, tick this box and provide their details on a separate piece of paper. If not, proceed to section 4.**

Section 4 – Specified individuals (company or company acting as trustee)

4A Director details

Provide details of the individuals authorising this account.

Ensure you provide the required identity verification documents as per section 8A.

Sole or primary director

Full name

Date of birth / /

Is the director known by any other names? If yes, provide below.

Residential address (cannot be a PO Box)

Street address

Suburb

State

Postcode

Country

Mobile

Email address

What is the director's industry that they work in and occupation?

Industry

Occupation

Second director or secretary

Full name

Date of birth / /

Is the director or secretary known by any other names? If yes, provide below.

Residential address (cannot be a PO Box)

Street address

Suburb

State

Postcode

Country

Mobile

Email address

What is the director or secretary's industry that they work in and occupation?

Industry

Occupation

4B Additional directors (proprietary companies only)

Full name

Full name

Full name

Full name

☐ **If there are more directors, tick this box and provide their details on a separate piece of paper. If not, proceed to section 4C.**

Section 4 – Specified individuals (company or company acting as trustee) (continued)

4C Substantial shareholder details

Substantial shareholders are individuals with ultimate ownership, directly or indirectly, of 25% or more of the company's issued capital. Ultimate ownership of a company's issued capital includes an individual's aggregated holdings through a chain of company ownership.

This section is not required to be completed where company or company trustee is:

- Listed company (e.g. ASX)
- Majority-owned subsidiary of an Australian listed company
- Licensed by an Australian Commonwealth, State or Territory statutory regulator and subject to supervision beyond that provided by ASIC as a company registration body (e.g. Australian Financial Services Licensees (AFSL) or Australian Credit Licensees (ACL))

☐ Yes ▶ Provide details below. ☐ No ▶ If the company is acting as trustee proceed to section 5C, if not proceed to section 6.

Ensure you provide the required identity verification documents as per section 8A for each substantial shareholder.

Substantial shareholder 1

Full name

Date of birth ☐☐/☐☐/☐☐☐☐

Is the substantial shareholder known by any other names? If yes, provide below.

Residential address (cannot be a PO Box)

Street address

Suburb State

Postcode Country

Mobile

Email address

What is the substantial shareholder's industry that they work in and occupation?

Industry Occupation

Substantial shareholder 2

Full name

Date of birth ☐☐/☐☐/☐☐☐☐

Is the substantial shareholder known by any other names? If yes, provide below.

Residential address (cannot be a PO Box)

Street address

Suburb State

Postcode Country

Mobile

Email address

What is the substantial shareholder's industry that they work in and occupation?

Industry Occupation

Section 4 – Specified individuals (company or company acting as trustee) (continued)

Substantial shareholder 3

Full name

Date of birth ☐☐/☐☐/☐☐☐☐

Is the substantial shareholder known by any other names? If yes, provide below.

Residential address (cannot be a PO Box)

Street address

Suburb

State

Postcode

Country

Mobile

Email address

What is the substantial shareholder's industry that they work in and occupation?

Industry

Occupation

Substantial shareholder 4

Full name

Date of birth ☐☐/☐☐/☐☐☐☐

Is the substantial shareholder known by any other names? If yes, provide below.

Residential address (cannot be a PO Box)

Street address

Suburb

State

Postcode

Country

Mobile

Email address

What is the substantial shareholder's industry that they work in and occupation?

Industry

Occupation

Section 5 – Specified individuals (superannuation fund and other trusts)

5A Individual trustee(s)

Provide details of the individuals authorising this account. Ensure you provide the required identity verification documents as per section 8A.

Primary trustee (primarily responsible for the trust)

Full name

Date of birth ☐☐/☐☐/☐☐☐☐

Is the trustee known by any other names? If yes, provide below.

Residential address (cannot be a PO Box)

Street address

Suburb

State

Postcode

Country

Mobile

Email address

What is the trustee's industry that they work in and occupation?

Industry

Occupation

Secondary trustee (only required for an unregulated trust)

Full name

Date of birth ☐☐/☐☐/☐☐☐☐

Is the trustee known by any other names? If yes, provide below.

Residential address (cannot be a PO Box)

Street address

Suburb

State

Postcode

Country

Mobile

Email address

What is the trustee's industry that they work in and occupation?

Industry

Occupation

Section 5 – Specified individuals (superannuation fund and other trusts) (continued)

5B Additional trustees (only required for an unregulated trust)

If your trust is regulated, proceed to section 7.

Third trustee

Full name

Date of birth / /

Is the trustee known by any other names? If yes, provide below.

Residential address (cannot be a PO Box)

Street address

Suburb

State

Postcode

Country

Mobile

Email address

What is the trustee's industry that they work in and occupation?

Industry

Occupation

Fourth trustee

Full name

Date of birth / /

Is the trustee known by any other names? If yes, provide below.

Residential address (cannot be a PO Box)

Street address

Suburb

State

Postcode

Country

Mobile

Email address

What is the trustee's industry that they work in and occupation?

Industry

Occupation

☐ **If there are more trustees, tick this box and provide their details on a separate piece of paper. If not, proceed to section 5C.**

Section 5 – Specified individuals (superannuation fund and other trusts) (continued)

5C Substantial trust beneficiary details

You are not required to complete this section if the customer is a regulated trust.

Does the trust have any substantial beneficiaries?
Substantial trust beneficiaries are individuals specified in the trust deed with ultimate entitlement, directly or indirectly to 25% or more of trust income/assets. Where trust beneficiary is a company you must consider an individual's ownership of any issued share capital of the company when disclosing whether they are a substantial trust beneficiary.

☐ Yes ▶ Provide details below. ☐ No ▶ Proceed to section 5D.

Ensure you provide the required identity verification documents as per section 8A for each substantial trust beneficiary.

Substantial trust beneficiary 1

Full name

Date of birth ☐☐/☐☐/☐☐☐☐

Is the trust beneficiary known by any other names? If yes, provide below.

Residential address (cannot be a PO Box)

Street address

Suburb State

Postcode Country

Mobile

Email address

What is the trustee beneficiary's industry that they work in and occupation?

Industry Occupation

Substantial trust beneficiary 2

Full name

Date of birth ☐☐/☐☐/☐☐☐☐

Is the trust beneficiary known by any other names? If yes, provide below.

Residential address (cannot be a PO Box)

Street address

Suburb State

Postcode Country

Mobile

Email address

What is the trustee beneficiary's industry that they work in and occupation?

Industry Occupation

Section 5 – Specified individuals (superannuation fund and other trusts) (continued)

Substantial trust beneficiary 3

Full name

Date of birth / /

Is the trust beneficiary known by any other names? If yes, provide below.

Residential address (cannot be a PO Box)

Street address

Suburb

State

Postcode

Country

Mobile

Email address

What is the trustee beneficiary's industry that they work in and occupation?

Industry

Occupation

Substantial trust beneficiary 4

Full name

Date of birth / /

Is the trust beneficiary known by any other names? If yes, provide below.

Residential address (cannot be a PO Box)

Street address

Suburb

State

Postcode

Country

Mobile

Email address

What is the trustee beneficiary's industry that they work in and occupation?

Industry

Occupation

5D Other substantial trust beneficiaries

Provide names of other trust beneficiaries below then proceed to section 5E.

Full name

Full name

Full name

Full name

Section 5 – Specified individuals (superannuation fund and other trusts) (continued)

5E Beneficiary classes

☐ If the trust deed refers to beneficiaries in relation to membership of a class, tick this box and list each class below.

Class 1

Class 2

Class 3

Class 4

☐ **If there are more Beneficiary classes, tick this box and provide their details on a separate piece of paper. If not, proceed to section 6.**

Section 6 – Other individuals controlling the entity

Are there any individuals exercising control over your entity other than those listed under sections 4A, 4C, 5A or 5C?

If your entity is a trust with a company trustee, consider both the trust and the company trustee when answering this question.

This section is not required to be completed where company or company trustee is:

- Listed company (e.g. ASX)
- Majority-owned subsidiary of an Australian listed company
- Licensed by an Australian Commonwealth, State or Territory statutory regulator and subject to supervision beyond that provided by ASIC as a company registration body (e.g. Australian Financial Services Licensees (AFSL) or Australian Credit Licensees (ACL)).

☐ Yes ▶ Provide details below. ☐ No ▶ Proceed to section 7.

Individual 1

Capacity / Role

Full name

Date of birth ☐☐/☐☐/☐☐☐☐

Is the individual known by any other names? If yes, provide below.

Residential address (cannot be a PO Box)

Street address

Suburb State

Postcode Country

Mobile

Email address

What is the person's industry that they work in and occupation?

Industry Occupation

Individual 2

Capacity / Role

Full name

Date of birth ☐☐/☐☐/☐☐☐☐

Is the individual known by any other names? If yes, provide below.

Residential address (cannot be a PO Box)

Street address

Suburb

State

Postcode

Country

Mobile

Email address

What is the person's industry that they work in and occupation?

Industry

Occupation

Individual 3

Capacity / Role

Full name

Date of birth / /

Is the individual known by any other names? If yes, provide below.

Residential address (cannot be a PO Box)

Street address

Suburb

State

Postcode

Country

Mobile

Email address

What is the person's industry that they work in and occupation?

Industry

Occupation

Individual 4

Capacity / Role

Full name

Date of birth / /

Is the individual known by any other names? If yes, provide below.

Residential address (cannot be a PO Box)

Street address

Suburb

State

Postcode

Country

Mobile

Email address

What is the person's industry that they work in and occupation?

Industry _____ Occupation _____

☐ **If there are any other individuals exercising control over your entity tick this box and provide their details on a separate piece of paper. If not proceed to section 7.**

Section 7 – Additional information

Purpose/activities of the entity _____

Date of formation ☐☐/☐☐/☐☐☐☐

Select primary source(s) of the overall wealth of the customer opening this account.

☐ Borrowed funds
☐ Charitable donations
☐ Income from operating a business
☐ Investment income (e.g. rent, dividends, pension)
☐ One-off payment (e.g. matured investment, court settlement, redundancy, inheritance)
☐ Sale of assets (e.g. shares, property)

Select primary source(s) of the overall wealth of the specified individuals associated with the entity (i.e. individuals listed in sections 4, 5, or 6).

☐ Borrowed funds
☐ Income from employment
☐ Income from operating a business
☐ Investment income (e.g. rent, dividends, pension)
☐ One-off payment (e.g. matured investment, court settlement, redundancy, inheritance)
☐ Sale of assets (e.g. shares, property)
☐ Windfall (e.g. gift, lottery winnings)

Is the investing entity a charity, aid organisation, foundation or a not-for-profit organisation?

☐ Yes – Does it provide financial or other support to recipents overseas?

☐ Yes – List destination countries.

_____

☐ No

Section 8 – Identity verification

8A Specified individuals

This section must be completed by the following individuals:

- Each person nominated as either an authorised representative or an account signatory in section 3
- Primary/Sole Director and Second Director/Secretary (of company or company trustee) if you completed section 4A
- Each substantial shareholder (of company or company trustee) in section 4C
- Primary Individual Trustee of the unregulated trust in section 5A
- Second Individual Trustee of the unregulated trust in section 5A if signing in section 11
- Each substantial trust beneficiary of the unregulated trust in section 5C
- Other individuals controlling the entity listed in section 6.

Provide at least two of the following documents:

- Australian driver's licence containing your photograph, or
- Australian passport containing your photograph and signature, or
- a Medicare card.

If the above cannot be provided, contact our office to discuss alternative acceptable forms of documentation.

Please note:

- documents are required to be certified copies of the original
- documents such as passports, driver's licences and other cards that have an expiry date must not have expired (however, Australian passports that have expired within the preceding two years may be accepted), and
- if any document is in a previous name, then it must be accompanied by evidence of the change of name (e.g. a marriage certificate).

8B Company or company acting as trustee

Ensure the document(s) you provide confirm(s) either A or B and tick which document(s) you have provided.

A. whether the company is: • listed; or • a majority owned subsidiary of a listed company; or • regulated.	☐ Up-to-date extract from the ASX database (if applicable); or ☐ Public document issued by the company; or ☐ Up-to-date extract from the relevant regulator's database (if regulated).
B. if the company is none of these, the: • full name of the company; and • whether the company is registered as a proprietary or a public company; and • ACN.	☐ Certificate of registration issued by ASIC; or ☐ Up-to-date extract from ASIC database.

8C Trust

Ensure the document(s) you provide confirm one of the following and tick which document(s) you have provided.

Superannuation funds	☐ Up-to-date extract from ATO/APRA; or ☐ Up-to-date extract of the legislation establishing the government superannuation fund sourced from a government website.
Registered managed investment scheme	☐ Up-to-date extract from ASIC.
Unregulated trusts • full name of Trust; or • name of Trust settlor.	☐ Provide documentation confirming the existence of the Trust and the name of the settlor (e.g. trust deed or extract of the trust deed).

Section 8 – Identity verification (continued)

How to certify documents

A certified copy is a document that has been certified as a true copy of an original document. To certify a document, take the original document and a photocopy to one of the people listed in the categories below and ask them to certify that the photocopy is a true and correct copy of the original document. That person will need to print their name, date and the capacity in which they are signing (e.g. postal agent, Justice of the Peace).

Sample wording

I, [full name], a [category of persons listed below], certify that this [name of document] is a true and correct copy of the original.
[Signature and date]

Documents in a language other than English must be accompanied by an English translation prepared by an accredited translator.

Who can certify documents?

Financial corporations (bank, building society, credit union)	• Officer with five or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 1993 (Cth)) • Finance company officer with five or more continuous years of service with one or more finance companies (for the purposes of the Statutory Declaration Regulations 1993 (Cth)) • Officer with, or authorised representative of, a holder of an Australian financial services licence, having five or more continuous years of service with one or more licensees
Post office	• Permanent employee of the Australian Postal Corporation with five or more years of continuous service who is employed in an office supplying postal services to the public • Agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public
JP	• Justice of the Peace
Legal	• Person who is enrolled on the roll of the Supreme Court of a state or territory, or the High Court of Australia, as a legal practitioner (however described) • Judge of a court • Magistrate • Chief executive officer of a Commonwealth court • Registrar or deputy registrar of a court • Notary public (for the purposes of the Statutory Declaration Regulations 1993 (Cth)) • Person authorised as a notary public in a foreign country
Police	• Australian Police officer
Diplomatic service	• Australian consular officer • Australian diplomatic officer (within the meaning of the Consular Fees Act 1955 (Cth))
Accountant	• Member of the Institute of Chartered Accountants in Australia, Certified Practising Accountants (CPA) Australia or the National Institute of Accountants with two or more years of continuous membership

Section 9 – Foreign Tax Status – Information required for international tax reporting requirements

9A Entity type/tax status

You are not required to complete this section if the investing entity is a self-managed superannuation fund or other regulated superannuation fund.

Is the investing entity a tax resident of a country other than Australia?

☐ Yes ▶ To open an account with us, you must be exclusively an Australian resident for tax purposes. ☐ No ▶ Go to section 9B

9B Foreign controlling persons

Tax residency rules differ by country. Whether an individual is a tax resident of a particular country is often (but not always) based on the amount of time a person spends in a country, the location of a person's residence or place of work. For the US, tax residency can be as a result of citizenship or residency.

Are any of the individuals listed in the application form (directors, substantial shareholders, trustees, trust settlors or trust beneficiaries) tax residents of countries other than Australia?

☐ Yes ▶ To open an account with us, you – and any controlling persons must be exclusively an Australian resident for tax purposes. ☐ No ▶ Go to section 10

Section 10 – Declaration

Please read and consider the General Terms, Term Deposit Important Information Statement, Fees and Charges Schedule and Privacy Policy as applicable. Copies of these documents are available on our website **heartlandbank.com.au** or by contacting our office on **1300 889 338**.

By applying for an account, you agree and/or acknowledge:

- you've read and considered the General Terms, Term Deposit Important Information Statement and Fees and Charges Schedule, as applicable and agree to accept them by opening an account with Heartland Bank Australia Limited (**Heartland Bank, we, us, our**);
- all details in this application are true and correct and you indemnify us against any liabilities whatsoever arising out of us acting on any incorrect or misleading information provided by you in connection with this application or in the future;
- you have legal power to invest and/or hold the account(s) to which this application relates and have complied with all applicable laws in making this application;
- you're making this application from within Australia;
- to receive statements, notices and all other documents from us electronically, e.g. via SMS, email or Internet Banking;
- that we may change the terms and conditions for any or all accounts and other products at any time effective immediately on us sending notice to your nominated contact details, or on such later effective date as required by applicable laws; and
- that if you apply for an account as a non-individual entity where there is more than one signatory, each signatory may individually operate that account on an either-to-sign basis, meaning any signatory will be able to operate the account including additional deposits and withdrawals.

In relation to your personal information:

- You acknowledge reading our Privacy Policy and are aware that until you inform us otherwise, you'll be taken to have consented to all the uses of your personal information (including marketing) contained within.
- If there are any changes to information provided in the application about individuals associated with the non-individual entity investing (e.g. directors, substantial shareholders, trustees and beneficiaries), you'll inform us when the change occurs, with the consent of the relevant individual(s).

In relation to how we verify your identity:

- You agree to the use of electronic verification to verify your identity; and
- you understand using electronic verification involves comparing and matching information on your identity documents such as name, address, and date of birth with commercial, government and credit records using our electronic verification provider, Equifax Australia Information Services and Solutions Pty Ltd.

☐ **By ticking this box**, you agree to Heartland Bank electronically verifying your information. If you don't wish to have your details electronically verified, please contact us on **1300 889 338** to discuss alternative options.

Section 11 – Signatories

For individual trustees, at least the primary trustee must sign this section. For Australian companies and company trustees, we require the signature(s) of either a sole director, or two directors, or one director and the company secretary.

Signatory 1

Signature _____ Date ☐☐/☐☐/☐☐☐☐

Capacity ☐ Sole or Primary Director (of company or company trustee)
☐ Primary individual trustee

Signatory 2

Signature _____ Date ☐☐/☐☐/☐☐☐☐

Capacity ☐ Second Director (of company or company trustee)
☐ Secretary
☐ Second individual trustee

Note: Payment must be received prior to 3.30pm (EST/EDT) for us to establish the account same day. Otherwise, we'll establish the account on the following business day.