

Know your customer – statement of referee

Information sheet – Australian First Nations People

When to use this form

Use this form if you are of Australian First Nations People heritage to provide the information we need to collect and verify your identity and to meet our legal obligations (including those under the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006* (AML/CTF Act) and the *AML/CTF Rules Instrument 2007 (No.1)*).

Note: You should only use this form if you are of Australian First Nations People heritage and you don't have any satisfactory combination of the conventional identity documents we need to verify your identity. If you do have any satisfactory combination of the conventional required identity documents, then you need to use the **know your customer – individual/sole trader form**.

If you are having any issues with this form or that there is a reason you need to contact us, please know that we're here to help and you can reach out to us on 13 30 30 for further assistance.

Verifying an applicant's identity

We need to verify or confirm your identity through a referee who can confirm the details you provide in this form.

Also, an independent person must witness your signature and the referee's signature.

Who can be a referee?

A referee must certify who you are. Only certain people can do this including:

- a school principal or counsellor
- a police officer
- a community leader or recognised elder (but they can't be your spouse, de facto partner, parent, sibling or child)
- someone before whom a statutory declaration can be made
- a religious leader
- the customer's current employer or manager
- a financial counsellor or financial capability worker
- a legal aid or community lawyer
- Services Australia (Centrelink) staff

- a manager or warden of a refuge or shelter accommodation or homeless shelter
- an official from an Australian First Nations People organisation, or a board member of a local Aboriginal Land Council
- a health professional such as a general practitioner, nurse practitioner, psychologist, Australian First Nations People health worker, or counsellor
- other social support services such as family violence workers, social workers or youth services.

There may be other suitable referees you choose to accept that are not listed here, depending on the customer's circumstances.

Additional requirements for the referee

The **know your customer – statement of reference** needs the referee to confirm the following:

1. Have known the person for more than two years.
2. That the referee is sufficiently independent.

Who can be a witness?

You and the referee must sign this form in front of a witness.

The witness must be:

- 18 years old or over, and
- independent – this means they can't be related to you or the referee.

For example, the witness can't be an immediate family member which includes your spouse/de facto partner or your or your spouse/de facto partner's child, parent, grandparent, grand child or sibling.

Privacy – use and disclosure of personal information

AMP Bank collects the personal information that you provide in the referee statement, and any supporting information you submit to us, solely for customer verification purposes. The AML/CTF Act requires us to collect this information.

The use of this form identifies you, and may identify the referee, as being from Australian First Nations People heritage. We will keep a record of the referee statement, including any supporting information, for the duration of our relationship with the applicant and at least seven years after this time to meet record keeping requirements under the AML/CTF Act.

If you do not provide us with the required information this may limit our ability to verify your identity and we may not be able to provide the products and/or services you have requested.

We will only share personal information from the referee statement and any supporting information:

- With other members of the AMP group and external service providers that we need to deal with for the purpose above
- As required by law or regulations with courts, tribunals or government agencies
- With persons or third parties authorised by you, or if required or permitted by law.

Some external service providers we need to deal with can be located or host data outside Australia. A list of countries where these providers may be located can be obtained via our privacy policy. We will take all reasonable steps to ensure that any data shared with service providers is shared securely to protect your information.

Our Privacy Policy contains information about how you can access or update your personal information that we hold or make a complaint about a breach or potential breach of our privacy obligations. You can view our privacy policy online at amp.com.au/privacy or contact us on 13 30 30 for a copy.

Alternative identification documents – Photographic reference

Are you able to arrange for the referee to incorporate a photograph of you on the letterhead stationery of the organisation the referee represents, with a statement that the photograph is of you and the name and signature of the referee on the back of the photograph? If so, please provide that photograph along with this completed form.

Please keep this information sheet for your records—
don't return it with your completed form(s).

Know your customer – statement of referee

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Note: You should only use this form if you are of Australian First Nations People heritage and you don't have any satisfactory combination of the conventional identity documents we need to verify your identity. If you do have any satisfactory combination of the conventional required identity documents, then you need to use the **know your customer – individual/sole trader** form.

We will not be able to process your application if you leave out any section, unless otherwise stated.

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

1. Personal details

Please provide the account number for products you hold with us or any other reference number:

Title

Surname (last name)

Given name(s)

Are you commonly known by any other names? ☐ Yes ☐ No

If 'yes' – please provide details

Gender

☐ Male ☐ Female ☐ Other

Date of birth

D	D	M	M	Y	Y	Y	Y
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Current residential address

Residential address (a PO Box is not acceptable)

Suburb

State

Postcode

Country

Previous residential addresses

1. Personal details continued

Please provide a brief explanation as to why you need to use a statement of referee form, ie natural disaster has destroyed all your identification documents, you are unable to access your identification documents due to personal circumstances or you do not have traditional identification documents.

2. Applicant's Declaration

By signing below I confirm that I:

1. Have read and understood the Privacy Collection and Disclosure Notice.
2. Agree to be bound by AMP Bank's terms and conditions available at amp.com.au/bankterms or by calling 13 30 30. I understand that I will automatically agree to them the first time I, or a person authorised by me, operates the account.
3. Am not commonly known by any names other than those disclosed in this application or otherwise to AMP Bank.
4. Have provided true and accurate information in relation to this application. Any document or information to be used for the purposes of this application (whether or not provided on or with this application):
 - is correct and complete, and
 - may be used for any other products, services or benefits offered or provided to me through AMP Bank or any other company in the AMP group and subject to their privacy obligations, may be disclosed to and used by the providers of such products, services or benefits offered or provided to me through AMP Bank or any other company in the AMP group and subject to their privacy obligations, may be disclosed to and used by the providers of such products, services or benefits to facilitate compliance with anti-money laundering and counter-terrorism financing legislation.

2. Applicant's Declaration continued

5. Understand that it is a criminal offence to knowingly provide false or misleading information or documents in connection with this application.
6. Consent to AMP Bank providing information held about the account(s) and the account holder(s) to a financial adviser, broker or originator named in this application, and/or to joint venture partners, business partners and related party and third party service providers for the purposes of those parties,
 - i. providing the information to the financial adviser, broker or originator named in this application, or
 - ii. providing administration services to the account holder(s).

Such information may comprise customer information (including personal information), account documentation and account information (including account balance, and current and historical account and transactional information).

7. Agree to notify AMP within 30 days from when there are any changes to the information provided in this application, including the tax residency of the customer.
8. By submitting this form I also acknowledge that AMP Bank may decide to delay or refuse any request or transaction (deposits and withdrawals) if AMP Bank has not been able to verify my or a signatory's identity, or if AMP Bank believe in good faith that allowing the transaction may cause an offence to be committed. I understand that AMP Bank does not accept responsibility for any such delay or refusal.

I understand that it's a criminal offence to knowingly provide:

- information in this form that is false or misleading
- false documents to support this form.

I declare that the information in this form and in any supporting document:

- is complete and correct
- that is about another person, that the person has read and understood the privacy collection notice accompanying this form
- may be used for any product, service or benefit that I hold, apply for, request or obtain
- may be disclosed to and used by the provider of the product, service or benefit in line with their privacy obligations to comply with anti-money laundering and counter-terrorism financing legislation and sanctions legislation.

I have read and understood the privacy collection statement set out in the information sheet.

Applicant

Name

Signature

Date

3. Referee details

 A referee must certify who you are. Only certain people can do this as set out in the **information sheet**.

Title

Surname (last name)

Given name(s)

How do you know the applicant?

Please confirm the applicant's circumstances as to why they need to use a statement of referee form, ie natural disaster has destroyed all your identification documents, you are unable to access your identification documents due to personal circumstances or you do not have traditional identification documents.

Type of referee/Title in business or organisation

Full business or organisation name – if relevant

Australian Business Number (ABN) – if relevant

Contact phone number

How long have you known the applicant for?

 years months

4. Referee's Declaration

Referee

- I am an authorised referee as set out in the **information sheet**.
- I am 18 years old or over.
- The applicant has signed this form in front of me.
- The name(s) the applicant listed in this form are all the name(s) they have been known as (that I'm aware of).
- The address(es) the applicant listed in this form are all the addresses(es) they have lived at (that I'm aware of).
- The birth date the applicant listed in this form is the birth date of the applicant (that I'm aware of).
- That I am sufficiently independent from the applicant ie I am not an immediate family member, spouse/de facto partner or spouse/de facto partner's child, parent, grandparent, grand child or sibling of the applicant.
- I have read and understood the privacy collection statement set out in the information sheet.
- Have known the applicant for at least 2 years.

Name

Signature

Date

D	D	M	M	Y	Y	Y	Y
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5. Witness Declaration

- I am an authorised witness as set out in the **information sheet**.
- The applicant and referee have signed this form in front of me.
- I am 18 years old or over.
- I am sufficiently independent from the applicant ie I am not an immediate family member, spouse/de facto partner or spouse/de facto partner's child, parent, grandparent, grand child or sibling of the applicant.
- I have read and understood the privacy collection statement set out in the information sheet.

Witness

Name

Signature

Date

D	D	M	M	Y	Y	Y	Y
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