

▪ This application form is used for Partnerships only.

<b>Bank Use Only</b>	Branch:	BSB:	A/C No.
	Account Name:		

The following sections are to be completed by the Customer.

Section 1: Account Information			
<b>Account Type</b> (Please tick <input checked="" type="checkbox"/> where it is appropriate)	<input type="checkbox"/> Demand Deposit	<input type="checkbox"/> Cheque Account	<input type="checkbox"/> Term Deposit
	<input type="checkbox"/> Foreign Exchange Margin	<input type="checkbox"/> Internet Banking (please also complete the Internet Banking Form)	
	<input type="checkbox"/> Others, please specify:		
Section 2: Partnership Details			
Full Name of Partnership			
Full Business Name (if any)			
ABN (if any):	Business or Principal Activities:	Total Number of Partners:	
Registered Business Address (if any)  (PO Box is NOT acceptable)	Street		
	Suburb	State	Postcode
	Country		
Principal Place of Business (If any and different from the address provided above)  (PO Box is NOT acceptable)	Street		
	Suburb	State	Postcode
	Country		
Correspondence Address  (If different from the address provided above)	Street		
	Suburb	State	Postcode
	Country		
Country where the partnership was established			
Is the Partnership regulated by a professional association? <input type="checkbox"/> No, please complete Section 3 <input type="checkbox"/> Yes, please provide name of the professional association below and then go to Section 4:			
<b>Tax File Number (TFN):</b>			
<input type="checkbox"/> No, the TFN was not provided to the Bank. <input type="checkbox"/> Yes, [the TFN / Reason for Exemption] has been provided to the Bank. <i>(Quoting the Tax File Number is not compulsory; however tax may be deducted out of any interest paid if you do not quote your number or your exemption. For more information about Tax File Number regulations, please contact your local Tax Office)</i>			
Section 3: Partners Details (Total Number of Partners:                    )			
Partner 1 (this part is to be completed by the Partner who is signing the declaration on behalf of the Partnership)			
Full Name:	Also Known As:		
Nationality:	Date of Birth (dd/mm/yyyy):		
Tel:	Fax:	Email:	
Full Residential Address  (PO Box is NOT acceptable)	Street		
	Suburb	State	Postcode
	Country		

Partner 2	
Full Name:	Also Known As:
Full Residential Address (PO Box is NOT acceptable)	Street Suburb Country
	State                      Postcode
Partner 3	
Full Name:	Also Known As:
Full Residential Address (PO Box is NOT acceptable)	Street Suburb Country
	State                      Postcode
<b>* For additional partners, please complete the 'Additional Partner Form' and attach it follow this page.</b>	
<b>Section 4. Authorised Signatories Required to operate the above Account(s)</b>	
Total number of Authorised Signatories	
Method of Operation	<input type="checkbox"/> Any _____ of _____ the authorised signatories listed in Section 5 can operate on the above account(s) <input type="checkbox"/> Other, please specify:
<b>Privacy Principles</b>	
<p>The privacy of your personal information has always been important to the Bank. We seek to ensure that the information is collected, used or disclosed consistently with National Privacy Principles in the Privacy Act 1988 (Cth).</p> <p><b>Collecting and Using Personal Information</b></p> <p>We collect and use your personal information for the purpose of:</p> <ul style="list-style-type: none"> <li>• satisfying the Bank's obligations under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006.</li> <li>• considering your application for facilities, products or services;</li> <li>• opening, administering, managing and monitoring any facilities, products or services provided to you;</li> <li>• conducting market research, product development, data processing and statistical analysis;</li> <li>• protecting against fraud;</li> <li>• providing you with information about our facilities, products or services.</li> </ul> <p><b>Disclosing Information</b></p> <p>We may disclose your personal information to the organisations described below:</p> <ul style="list-style-type: none"> <li>• Other members of the Bank of China Group (BOC Group). The following information may be exchanged among the members of the group:             <ol style="list-style-type: none"> <li>a) any information contained in this document;</li> <li>b) any other personal information you provide to us; and,</li> <li>c) transaction details of the accounts which you hold with the Bank.</li> </ol> </li> <li>• Service providers, including overseas organizations, that the BOC Group engages to do something on our behalf, such as organizations involved in maintaining, reviewing and developing our business systems, procedures and infrastructure;</li> <li>• Broker and agents who refer you to us;</li> <li>• Any person acting on your behalf, including your financial adviser, solicitor or accountant, executor, administrator, trustee, guardian or attorney;</li> <li>• Organization, including overseas organization, including overseas organization, to whom we outsource certain functions;</li> <li>• As required or authorized by law, for example, to government or regulatory bodies for purposes related to public health or safety, the prevention or detection of unlawful activities or to protect public revenue;</li> <li>• Where you have given your consent.</li> </ul> <p><b>Access</b></p> <p>You may access your information by contacting one of our branches. This is subject to some exceptions allowed by law. We will give you reasons if we deny access. We may charge you for providing access.</p>	
<b>Acknowledgement and Authorisation</b>	
<p>By signing in Section 5 below, as an authorised signatory of the Accounts of the Company, I</p> <ul style="list-style-type: none"> <li>• authorise the Bank to obtain personal information about me to verify my personal details in this application (including the authenticity of the identification documents);</li> <li>• declare that all of the details that I have provided in this form are true and correct; and</li> <li>• declare that I have read and understand the contents of the above Privacy Principles and I agree to be bound by these principles.</li> </ul>	



## Section 6: Declarations and Acknowledgement

1. We, (names of partners) \_\_\_\_\_

constituting the partnership or firm of \_\_\_\_\_  
(the "Partnership") undertake and advise the Bank that:

a) We will be responsible for operating any accounts of the Partnership now or at any time open (the "Accounts") and we will notify the Bank immediately if any details of the Partnership change;

b) The authorised signatories listed in Section 5 of this application form (whose identities are to be confirmed as required by applicable anti-money laundering laws) are to operate in accordance with Section 4 of this application form the Accounts in the name of the Partnership and on behalf of the Partnership, including to:

- draw cheques upon the Accounts;
- overdraw the Accounts (to the extent permitted by the Bank);
- draw, endorse, make, accept, negotiate or discount bills of exchange, promissory notes and other negotiable instruments whether or not the proceeds are credited to an Account;
- place money on interest bearing deposit in the name of the Partnership for any term and to withdraw such money held on interest bearing deposit and give valid discharges for interest paid and principal repaid;
- have access to, and receive and give valid receipts for, any securities, packets, boxes, deeds, scrip, debentures or other documents or property held by the Bank in the name of the Partnership, whether as security or for safe custody or otherwise in respect of which no special written authority from the Partnership as to delivery is held by the Bank;
- have access to, withdraw, direct the redemption or sale of and the disbursement of the proceeds thereof, direct the conversion to another series of, transfer, or direct the application of interest payable on Government securities held for safe custody or as security in the name of the Partnership in respect of which no special written authority from the Partnership as to dealing or delivery is held by the Bank;
- make arrangements with the Bank for the issue of letters of credit (including documentary letters of credit and authorities to negotiate) and all matters incidental thereto;
- make application for authority to buy or sell foreign currency (being any currency other than Australian) in such form and subject to such conditions or agreements as may be required by the Bank or by law, and to complete, amend or cancel any such application or any condition or agreement relating thereto;
- obtain statements of account and any information required concerning the Accounts; and
- give authorities in the Bank's usual form for periodical payments from the Accounts; and

c) If the Bank in its sole discretion permits any account to become overdrawn, our liability to the Bank in respect of that overdrawn account shall be joint and several

2. We request the Bank to recognise and act upon this authority until the branch of the Bank where the Accounts are conducted receives notice in writing of their cancellation. Any purported variation of this authority by any of us will operate as a total cancellation of this authority.

3. We acknowledge and agree that the Bank is not obliged in any circumstances to enquire whether an act purporting to be done in accordance with this authority is a proper exercise of any authority conferred and the Bank is released from all liability for any loss or damage suffered by any of us or the Partnership arising from the Bank acting on this authority, except as may be incurred directly by reason of fraudulent conduct on the part of any of the Bank's employees.

4. We declare that all of the details that we have provided in this application form are true and correct.

5. We authorise the Bank to charge to the Accounts to recover from us any bank fees, government charges, taxes or duties imposed on transactions on/or which relate to the Accounts.

6. We agree to be bound by the terms and conditions which apply from time to time to the Accounts opened by us with the Bank.

### Persons authorised to sign declarations

Full name of duly authorised person:	Title (e.g. Partner):	Signature:  X Date:
Full name of duly authorised person:	Title (e.g. Partner):	Signature:  X Date:

### Bank Use Only

☞ Please complete the KYC Checklist now and then confirm the following (see next page):

## Account Application - Partnership

Bank Use Only (continued)				
Confirmed by	1. The KYC Checklist has been completed. 2. The completed KYC Checklist and the supporting documents have been attached follow this form.			
<b><u>Account Opening Officer</u></b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Signature:	Date (dd/mm/yyyy):
Name:			✕	
Staff ID:				
<b><u>Checking Officer</u></b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Signature:	Date (dd/mm/yyyy):
Name:			✕	
Staff ID:				
<b>Note: If "No" is selected above, the account(s) should NOT be activated.</b>				
Additional comments (if any):				