

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

Section 1: Account Details		<input type="checkbox"/> Individual		<input type="checkbox"/> Sole Trader, ABN (if any):		
Account Type:	<input type="checkbox"/> Demand Deposit Account		<input type="checkbox"/> Online Saver Account		<input type="checkbox"/> Term Deposit Account	
	<input type="checkbox"/> Cheque Account		<input type="checkbox"/> Others, please specify: _____			
Joint Account		<input type="checkbox"/> No <input type="checkbox"/> Yes, please provide the total number of joint customers: _____				
The Individual is:	<input type="checkbox"/> an Account Holder		<input type="checkbox"/> an Authorised Signatory who is not an Account Holder			
Section 2: Individual Details		Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Others, specify:				
Full Name (given name, surname):			Also Known As:			
Sole Trader Full Business Name (if any)	:			Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Others:		
Nationality	:	Place of Birth	:			
Date of Birth (dd/mm/yyyy)	:	Preferred Language	:			
Residential Address (Usual Home Address)	:Street					
PO Box is NOT acceptable	:Suburb	State	Postcode	Country		
Sole Trader's Principal Place of Business (if any)	:Street					
PO Box is NOT acceptable	:Suburb	State	Postcode	Country		
Correspondence Address (if different from above)	:Street					
	:Suburb	State	Postcode	Country		
Contact Details (at least provide one phone number)	:Home: ()		Work: ()			
	:Mobile Phone:		Email:			
Employment Status	<input type="checkbox"/> Employed <input type="checkbox"/> Un-employed <input type="checkbox"/> Self-employed		Occupation and Industry		:	
Source of Funds	<input type="checkbox"/> Salaries/Wages <input type="checkbox"/> Student Allowance <input type="checkbox"/> Inheritance		<input type="checkbox"/> Investment Income <input type="checkbox"/> Centerlink Payment <input type="checkbox"/> Gift		<input type="checkbox"/> Business Activity Income <input type="checkbox"/> Money Transferred from Overseas <input type="checkbox"/> Others, specify:	
Anticipated Maximum Account Balance	AU\$		❖ Cheque Book Required? <input type="checkbox"/> No <input type="checkbox"/> Yes (If "Yes", please complete relevant application form(s).)			
❖ Debit Card Required <input type="checkbox"/> No <input type="checkbox"/> Yes →		<input type="checkbox"/> New Card <input type="checkbox"/> Re-open *		<input type="checkbox"/> Applicant 1 (Account Holder) <input type="checkbox"/> Applicant 2 (Joint Account Holders or Deputy)		
Please link to my/our account _____		Customer's		Signature: ✕		
I/We will pick up the card/pin at/by _____		Date:				
❖ Internet Banking Service/E-token Required? <input type="checkbox"/> No <input type="checkbox"/> Yes						

BANK USE ONLY	Please complete the KYC Checklist now and then confirm the following:				
	1. The KYC Checklist has been completed. 2. The completed KYC Checklist and the supporting documents have been attached follow this form.				
Account Opening Officer (Staff ID:)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Signature:	Date:	
Name:			✕		
Account Checking Officer (Staff ID:)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Signature:	Date:	
Name:			✕		
Note: If "No" is selected above, the account(s) should NOT be opened and activated.					
CARD CENTRE USE ONLY			DATE (dd/mm/yyyy):		
REF NO.:			BATCH NO.:		
New Card No.: 6017-920 _____ - 00 _____ - _____					
Card Application Input By:			Card Approved By:		

Tax File Number (TFN)

No, the TFN was not provided to the Bank. Yes [the TFN / Reason for Exemption] has been provided to the Bank.

(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)

Please READ and SIGN “Declarations”, “Privacy” and “Acknowledgements”

Declarations

By the Internet Banking Customer:

- I/we have read, fully understood and accept the *Bank of China Personal Internet Banking Terms and Conditions*.
- I/we declare that all the information provided in the Application Form is true and correct and complete and that the Bank of China (Australia) Limited may proceed to provide Personal Internet Banking services in reliance on this information.
- I/We acknowledge that the Authority/ies to Operate previously given by me/us in respect of any Accounts still applies/y to all other operations on the Accounts, except Personal Internet Banking Services.

Privacy

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).

Collecting and Using Personal Information

We collect and use your personal information for the purpose of:

- Satisfying the Bank’s obligations under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006
- Considering your application for facilities, products or services;
- Opening, administering, managing and monitoring any facilities, products or services provided to you;
- Conducting market research, product development, data processing and statistical analysis;
- Protecting against fraud;
- Providing you with information about our facilities, products or services

Disclosing Information

We may disclose your personal information to the organisations described below:

- Other members of the Bank of China Group (BOC Group).
The following information may be exchanged among the members of the group:
 - any information contained in this document;
 - any other personal information you provide to us; and,
 - transaction details of the accounts which you hold with the Bank.
- Service providers 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;
- Broker and agents who refer you to us;
- Any person acting on your behalf, including your financial adviser, solicitor or accountant, executor, administrator, trustee, guardian or attorney;
- Organization, including overseas organization, to whom we outsource certain functions;
- 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;
- Where you have given your consent.

Access

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.

Provision of Information

If you provide us with incomplete or inaccurate information, your request for opening an account with us may be rejected by the Bank.

Authority and Declaration

I authorise the Bank to obtain personal information about me to verify my personal details in this application (including the authenticity of the identification documents).

I declare that all of the details that I have provided in this form are true and correct.

I declare that I have received a copy of the Bank’s Privacy Policy Statement.

I declare that I have read and understand the contents of the above Privacy Conditions. By signing below, I accept the above Privacy Conditions.

Acknowledgments

I agree:

- to be bound by the terms and conditions which apply from time to time to the accounts opened by me with the Bank;
- to be bound by the conditions of using the card if card access has been granted;
- the Bank may charge to this or any other account(s) I have with the Bank to recover from me any bank fees, government charges, taxes or duties imposed on transactions on/or which relate to my account(s);
- check my accounts and notify the Bank promptly of any errors or unusual transactions; and,
- that this account is not held in trust.

I hereby acknowledge that I have received Product Disclosure Statements issued by the Bank as below (please Tick as appropriate).

- Transaction, Savings and Investment Accounts Term Deposit Accounts Schedule of Fees and Charges
 Others, please specify:

Customer’s full name (print) _____ **Signature** _____ **Date** _____