Application for Deposit Account



Police & Nurses Limited ABN 69 087 651 876 AFSL Australian Credit Licence 240701 Level 6, 556 Wellington Street, Perth WA 6000 | PO Box 8609, Perth BC, Western Australia 6849

MEMBER DETAILS			
Primary Member	Secondary Member		
Member number	Member number		
Surname	Surname		
Given name/s	Given name/s		
Residential address	Residential address		
Suburb	Suburb		
State Postcode	State		
Phone (home)	Phone (home)		
Mobile	Mobile		
ACCOUNT(S) TO BE OPENED Please select all account type/s and the number of accounts to be open to a count to be open to a count to be open to a count to	ened: or this account to be "any to si	Method of Any to sign	Operation All to sign
CARD REQUEST			
Primary Member I request that P&N Bank issue me with a new VISA Debit card for my new eligible account. A card can only be issued when the method of operation is any to sign	Secondary Member I request that P&N Bank issue me with a new VISA Debit card for my new eligible account.		
ONLINE BANKING ACCESSS			
Primary Member	Secondary Member		
I request to have Online Banking access to my new account. If method of operation is "all to sign" then all account owners must have Note: Non Personal Memberships may not be registered for Internet B personal Internet Banking service linked to applicable Non Personal a			
IMPORTANT INFORMATION:			
You acknowledge that by signing this form, you have received a copy of Savings Account & Account Access Channels T&Cs Savings & Transaction Account Interest Rates Fees & Charges	f the following documents and	have read, understood a	nd accept the:

- VISA Debit Card Terms and Conditions
- Privacy Statement and Consent
- Financial Services Guide

Note: Your application for a Savings or Transaction Account cannot be completed until this form is signed and returned to us. Please complete and sign this form and return to P&N Bank, at any of one of our branches or by email* to your consultant.

*If you choose to email a copy of any documentation to us, you do so at your own risk. As emails are an unsecured method of communication, there is a risk your email could be viewed by others if it is intercepted or sent to an incorrect email address, and P&N Bank assumes no responsibility for this. If you have concerns about emailing information to us, please return this form by other means.

TAX RESIDENCY In accordance with our obligations under taxation laws, including the Common Reporting Standard (CRS) and Foreign Account Tax Compliance (FATCA), P&N is required to confirm your residency status for taxation purposes. Secondary 1. Are you an Australian resident for tax purposes? Yes No Yes No 2. Are you a US Citizen or resident for tax purposes? No Yes Yes 3. Are you a resident for tax purposes of another country? Yes If so, which country/ies? If applicable, please provide your Foreign Taxpayer Identification Number (TIN) TAX FILE NUMBER **Primary Secondary** Tax file number (TFN) previously supplied?^ Yes Yes ^Australian TFN quotation is not compulsory but withholding tax may apply to interest earned if your TFN is not quoted or evidence of exemption is not provided. TRANSFER OF INTEREST PAYMENTS TO AN ACCOUNT Transfer to: Account Number Account Name ^You may nominate a P&N Bank account for interest to be transferred from your SwiftSaver and Smart Saver account only. Any interest you earn on your Smart Saver or SwiftSaver account will be paid directly into your nominated bank account. If you are eligible for both standard and bonus interest, the full combined amount will be credited in one payment. **PAY&SAVE** (& Transaction account only) Round up transferred to A/C |X|X|X|X(Last four digits of account number) Please round my transactions to the closest \$1.00 \$5.00 **AUTHORITY** By signing below, I authorise and request P&N Bank to open an account and/or issue me/us with the card(s) to operate the requested account(s) (if applicable) listed in my/our application. I/we confirm I/we agree to the Privacy Statement and Consent below.

PRIVACY STATEMENT AND CONSENT

X

Name

Date

Primary signature

Identification No./Exp __

In this statement, personal information includes information such as your name, contact details, date of birth, it may also include information about you that is publicly available.

You agree that personal information you supply to Police & Nurses Limited as part of this application may be held and used by us to assess and process the application, execute your instructions, comply with legislative or regulatory requirements and contact you, if necessary, to complete your application and advise you of other products and services that may be of interest to you unless you ask us not to.

X

Name

Secondary signature

Identification No./Exp_

When you give us personal information about another person you represent that you are authorised to do so and agree to inform the person who we are, that we will use and disclose the information for the relevant purpose, that they can access the information we hold about them and of the contents of this Privacy Statement and Consent.

We are required by the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 to collect information to identify you. Without your information we may not be able to process your request. We are permitted to collect, but you are not required to provide, your Tax File Number under the Taxation Administration Act 1953 and the Income Tax Assessment Act 1936. Information is requested about tax residency of other countries in order to help us comply with taxation laws including Common Reporting Standards, Foreign Account Taxation Compliance Act and non-resident withholding tax.

You agree we may collect personal information about you from, and/or disclose it to, financial institutions, credit reporting bodies (CRBs), our related bodies corporate, agents and contractors, organisations for verifying your identity, your agents, law enforcement, regulatory and government bodies, payment system operators, your and our insurers or prospective insurers and their underwriters, any person we consider necessary to execute your instructions

Further, to enable us to verify your identity, we may disclose your name, date of birth and residential address to a CRB for the purpose of obtaining an assessment of whether that personal information matches information held by the CRB. You agree to us requesting, and providing your personal information for, such as assessment.

The CRBs we use include Equifax (equixfax.com), Experian (experian.com.au) and illion (illion.com.au) and you can find their privacy policy and contact details by visiting their website.

We may disclose your personal information to our systems support and administrative service providers located overseas. The P&N Bank Privacy Notice and Consent - countries to which this information may be disclosed may include the Philippines, Netherlands, the United States of America, India and the United Kingdom.

You have rights to access and seek correction of personal information we hold about you, in accordance with the *Privacy Act* 1988 and make a complaint about a breach of your privacy rights, by contacting our Member Advocate on 13 25 77 or info@pnbank.com.au.

Our Privacy Policy contains information about how you may do these things and how we deal with complaints. Our Privacy Policy is available at www.pnbank.com.au.