



# business savings application.

Email: [business. origination@mebank.com.au](mailto:business. origination@mebank.com.au) or fax: (03) 9708 3680  
 Mail: ME Business Account Services, Reply Paid 1345, Melbourne VIC 8060  
 Any questions? Call ME on **1300 658 108** or visit [mebank.com.au](http://mebank.com.au)

Please complete this form and **return all pages** with a **certified copy of your trust deed** e.g. super fund deed (trust applicants only) and any other supporting documentation. If you run out of space, please provide the information requested on a second application form or on a separate sheet attached to this form.

## section 1 – account type.

Please select the account(s) you would like to apply for:  Business Online Savings Account  Business Term Deposit  Both

## section 2 – applicant details.

Applicant type:  Proprietary Company  Public Company  Sole Trader  Trust  Union  Partnership  
 Incorporated Association  Unincorporated Association

Full legal name of applicant:

Trust applicants note: if you are a company acting as a trustee, provide your name in this format (e.g. ABC Pty Ltd as trustee for the XYZ Trust)

ABN (if any) (sole trader, partnership and other applicant types) □□□□□□□□□□□□□□	ACN (company applicants only) □□□□□□□□□□□□□□	Registration number (incorporated association applicants only) □□□□□□□□□□□□□□
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Registered business name of applicant (including the trustee in respect of the trust – if any)

Registered office address or address of the trust (we can't accept PO Box addresses)

State Postcode

Address of principal place of business/administration if different to the above (we can't accept PO Box addresses)

State Postcode

Mailing address

State Postcode

Email address

Industry (e.g. superannuation fund, manufacturing, construction)

Country of incorporation/establishment

Trust applicants: specify type of trust (e.g. discretionary, family or unit trust)

Business super fund (if applicable)

Business phone number

(□□) □□□□□□□□□□

## section 3 – applicant identification information.

### identification information.

To comply with our obligations under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (Cth), we must collect certain information in relation to you. The information to be collected depends upon your organisation type and includes the following:

- if you are a **company** – details of **each** director.
- if you are a **partnership** – details of **each** partner.
- if you are a **trust** – details of **each** trustee. Note: if the trustee or trustees are:
  - natural person(s) – please complete the relevant details for each individual trustee within **section 4**.
  - company(ies) – please complete the relevant details within **section 6** and **section 7** in relation to one company trustee only. If there is more than one company trustee of the trust, please detail the full name and registered office address of the other company trustees on a separate sheet and return with this application form.
  - beneficiaries – please complete the relevant details within **section 7** in relation to beneficiaries with an interest of 25% or more in the trust.
- if you are a **sole trader** – details of the proprietor.
- if you are an **incorporated association** – details of the association's Chairman, Secretary and Treasurer (or equivalent officer in each case).
- if you are an **unincorporated association** – details of the public officer or president, secretary, or treasurer if there is no public officer.
- if you are a **union** – details of the union's Chairman, Secretary and Treasurer (or equivalent officer in each case).

Please arrange for each person described as applicable to your entity type to complete their details within **section 4**.

- For all applicants, except sole traders, details of individuals who own or control 25% or more of the applicant – please complete the relevant details within **section 7**.

**section 4 – individual details.**

**section 4.1a – person no. 1.** (to be completed by the applicant)

**Please note: We will communicate with this person regarding this application on behalf of the applicant, including notifying our acceptance of the application and requesting further information if required.**

Relationship to applicant:

Director  Proprietor  Partner  Sole trustee  Joint trustee  Other (please specify)

Title (Mr/Mrs/Miss/Ms/Other)  Given name(s)  Family name

**Appointment to operate on the account**

Please select if you would like Person No. 1 to be an Authorised Representative or Designated User on your account(s). Please refer to the Business Online Savings Account and/or the Business Term Deposit Terms and Conditions for a list of everything an Authorised Representative or Designated User can do in relation to your account which includes, in relation to a Business Term Deposit, the ability of an Authorised Representative to open an additional Business Term Deposit in your name provided certain conditions are met.

Authorised Representative  Designated User

Please indicate which account(s) this appointment applies to:  Business Online Savings Account  Business Term Deposit  Both

Should Person No. 1 be registered for internet and phone banking?  Yes  No

Please note: In order to be registered for internet and phone banking Person No. 1's email address and mobile phone number must be supplied in section 4.1b.

**section 4.1b – person no. 1 continued.** (to be completed by person no. 1)

**Please have Person No. 1 complete this section.**

Residential address (we can't accept PO Box addresses)

State  Postcode

Date of birth  Gender  Male  Female Email address

At least one contact number is required.

Mobile phone  Home phone  Work phone

Password (used to verify your identity when you call us)  Mother's maiden name  Occupation

Are you already a ME customer?

No – Please answer questions below  Yes – Please go to the end of this section and provide a signature

Driver's licence number

Are you an Australian citizen?

No  Yes – go to Verifying your identity

Complete the information below if you are not an Australian citizen.

Are you a permanent resident?

No  Yes

Current passport number  Country of issue  Visa subclass details

**Verifying your identity**

If you are not an existing ME customer before we can open an account we are legally required to verify your identity. We may do this electronically using reliable and independent data sources. We will contact you to request identification documents if we cannot verify your identity electronically.

**Credit Information File**

This is one of the best electronic data sources we can use to verify your identity. We will not access your credit rating or credit history. We will only check your name, address and date of birth against those held on Dun & Bradstreet's Credit Information File.

If you consent to ME using your Credit Information File to help verify your identity then you need to read and accept the following terms and conditions.

By ticking this box you consent to ME disclosing your name, residential address and date of birth to a credit reporting agency to assist us to verify your identity. We will request and the credit reporting agency may provide an assessment of whether the personal information provided matches (in whole or in part) personal information contained in a credit information file held by the credit reporting agency. In preparing the assessment the credit reporting agency may use the personal information about you and other individuals contained in their credit information files. No other information about your credit information file will be provided to ME. If you don't want your identity verified using your credit information file we will try to verify your identity from other electronic data sources.

Person No. 1 signature

**section 4.2a – person no. 2.** (to be completed by the applicant)

Relationship to applicant:

Director  Proprietor  Partner  Sole trustee  Joint trustee  Other (please specify)

Title (Mr/Mrs/Miss/Ms/Other)  Given name(s)  Family name

**Appointment to operate on the account**

Please select if you would like Person No. 2 to be an Authorised Representative or Designated User on your account(s).

Authorised Representative  Designated User

Please indicate which account(s) this appointment applies to:  Business Online Savings Account  Business Term Deposit  Both

Should Person No. 2 be registered for internet and phone banking?  Yes  No

Please note: In order to be registered for internet and phone banking Person No. 2's email address and mobile phone number must be supplied in section 4.2b.

**section 4.2b – person no. 2 continued.** (to be completed by person no. 2)

**Please have Person No. 2 complete this section.**

Residential address (we can't accept PO Box addresses)

State  Postcode

Date of birth  Gender  Male  Female Email address

At least one contact number is required.

Mobile phone  Home phone  Work phone

Password (used to verify your identity when you call us)  Mother's maiden name  Occupation

Are you already a ME customer?

No – Please answer questions below  Yes – Please go to the end of this section and provide a signature

Driver's licence number

Are you an Australian citizen?

No  Yes – go to Verifying your identity

Complete the information below if you are not an Australian citizen.

Are you a permanent resident?

No  Yes

Current passport number  Country of issue  Visa subclass details

**Verifying your identity**

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If you consent to ME using your Credit Information File to help verify your identity then you need to read and accept the following terms and conditions.

By ticking this box you consent to ME disclosing your name, residential address and date of birth to a credit reporting agency to assist us to verify your identity. We will request and the credit reporting agency may provide an assessment of whether the personal information provided matches (in whole or in part) personal information contained in a credit information file held by the credit reporting agency. In preparing the assessment the credit reporting agency may use the personal information about you and other individuals contained in their credit information files. No other information about your credit information file will be provided to ME. If you don't want your identity verified using your credit information file we will try to verify your identity from other electronic data sources.

Person No. 2 signature

**section 4.3a – person no. 3.** (to be completed by the applicant)

Relationship to applicant:

Director  Proprietor  Partner  Sole trustee  Joint trustee  Other (please specify) \_\_\_\_\_

Title (Mr/Mrs/Miss/Ms/Other) \_\_\_\_\_ Given name(s) \_\_\_\_\_ Family name \_\_\_\_\_

**Appointment to operate on the account**

Please select if you would like Person No. 3 to be an Authorised Representative or Designated User on your account(s).

Authorised Representative  Designated User

Please indicate which account(s) this appointment applies to:  Business Online Savings Account  Business Term Deposit  Both

Should Person No. 3 be registered for internet and phone banking?  Yes  No

Please note: In order to be registered for internet and phone banking Person No. 3's email address and mobile phone number must be supplied in section 4.3b.

**section 4.3b – person no. 3 continued.** (to be completed by person no. 3)

**Please have Person No. 3 complete this section.**

Residential address (we can't accept PO Box addresses)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Date of birth \_\_\_\_\_ Gender  Male  Female Email address \_\_\_\_\_  
[D][D][M][M][Y][Y][Y][Y] \_\_\_\_\_

At least one contact number is required.

Mobile phone \_\_\_\_\_ Home phone (\_\_\_\_) \_\_\_\_\_ Work phone (\_\_\_\_) \_\_\_\_\_

Password (used to verify your identity when you call us) \_\_\_\_\_ Mother's maiden name \_\_\_\_\_ Occupation \_\_\_\_\_

Are you already a ME customer?

No – Please answer questions below  Yes – Please go to the end of this section and provide a signature

Driver's licence number

\_\_\_\_\_

Are you an Australian citizen?

No  Yes – go to Verifying your identity

Complete the information below if you are not an Australian citizen.

Are you a permanent resident?

No  Yes

Current passport number \_\_\_\_\_ Country of issue \_\_\_\_\_ Visa subclass details \_\_\_\_\_

**Verifying your identity**

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**Credit Information File**

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If you consent to ME using your Credit Information File to help verify your identity then you need to read and accept the following terms and conditions.

By ticking this box you consent to ME disclosing your name, residential address and date of birth to a credit reporting agency to assist us to verify your identity. We will request and the credit reporting agency may provide an assessment of whether the personal information provided matches (in whole or in part) personal information contained in a credit information file held by the credit reporting agency. In preparing the assessment the credit reporting agency may use the personal information about you and other individuals contained in their credit information files. No other information about your credit information file will be provided to ME. If you don't want your identity verified using your credit information file we will try to verify your identity from other electronic data sources.

Person No. 3 signature

\_\_\_\_\_

**section 4.4 – appointing additional authorised representatives and/or designated users.**

If you would like to appoint other Authorised Representatives or Designated Users on your account, you will need to complete a Change of Details Form available at [mebank.com.au](http://mebank.com.au) or by phoning us on 1300 658 108.

**section 5 – trust beneficiary and settlor details.** (trust applicants only)

Please provide details of the beneficiaries and the settlor of the trust. If the terms of the trust identifies the beneficiaries by reference to membership of a class (e.g. family members of a named person), please provide details of the class(es):

  


If the terms of the trust identifies the beneficiaries by name, please provide the full name of each beneficiary and if the settlors contribution was \$10,000 or more at the time the trust was established the full name of the settlor:

Title (Mr/Mrs/Miss/Ms/Other)	Given name(s)	Family name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Title (Mr/Mrs/Miss/Ms/Other)	Given name(s)	Family name
<input type="text"/>	<input type="text"/>	<input type="text"/>

**section 6 – company trustee identification information.** (trust applicants only)

Please complete in relation to one company trustee of the trust only.

Full company name

Company type:  Proprietary Company  Public Company ACN

Registered office address (we can't accept PO Box addresses)

State          Postcode

Principal place of business address if different to the registered office address specified above (we can't accept PO Box addresses)

State          Postcode

**details of director(s).**

Please complete **section 4** to provide details of the directors of the trustee company.

**section 7 – applicant ownership or control details.** (all applicants except sole traders)

Please provide the details of each individual who own or control 25% or more of the applicant or the trustee company and for beneficiaries with an interest of 25% or more in the trust. If the individual's details are in **section 4** complete name in this section only.

**person no. 1**

Title (Mr/Mrs/Miss/Ms/Other)	Given name(s)
<input type="text"/>	<input type="text"/>
Date of birth	Family name
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
Residential address (we can't accept PO Box addresses)	
<input type="text"/>	
State          Postcode	
Occupation	
<input type="text"/>	
Are you already a ME customer?	
<input type="checkbox"/> ▼ No <input type="checkbox"/> ► Yes – go to the end of this section and provide a signature	
Are you an Australian Citizen?	
<input type="checkbox"/> ▼ No <input type="checkbox"/> ► Yes – go to Verifying your identity	
Complete the information below if you are not an Australian citizen	
Are you a permanent resident?	
<input type="checkbox"/> ▼ No <input type="checkbox"/> ▼ Yes	
Current passport number	
<input type="text"/>	
Country of issue	
<input type="text"/>	
Visa subclass details	
<input type="text"/>	
Go to Verifying your identity	

**person no. 2**

Title (Mr/Mrs/Miss/Ms/Other)	Given name(s)
<input type="text"/>	<input type="text"/>
Date of birth	Family name
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
Residential address (we can't accept PO Box addresses)	
<input type="text"/>	
State          Postcode	
Occupation	
<input type="text"/>	
Are you already a ME customer?	
<input type="checkbox"/> ▼ No <input type="checkbox"/> ► Yes – go to the end of this section and provide a signature	
Are you an Australian Citizen?	
<input type="checkbox"/> ▼ No <input type="checkbox"/> ► Yes – go to Verifying your identity	
Complete the information below if you are not an Australian citizen	
Are you a permanent resident?	
<input type="checkbox"/> ▼ No <input type="checkbox"/> ▼ Yes	
Current passport number	
<input type="text"/>	
Country of issue	
<input type="text"/>	
Visa subclass details	
<input type="text"/>	
Go to Verifying your identity	

**person no. 3**

Title (Mr/Mrs/Miss/Ms/Other)	Given name(s)
<input type="text"/>	<input type="text"/>
Date of birth	Family name
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
Residential address (we can't accept PO Box addresses)	
<input type="text"/>	
<input type="text"/>	<input type="text"/>
State	Postcode
Occupation	
<input type="text"/>	
Are you already a ME customer?	
<input type="checkbox"/> No <input type="checkbox"/> Yes - go to the end of this section and provide a signature	
Are you an Australian Citizen?	
<input type="checkbox"/> No <input type="checkbox"/> Yes - go to Verifying your identity	
Complete the information below if you are not an Australian citizen	
Are you a permanent resident?	
<input type="checkbox"/> No <input type="checkbox"/> Yes	
Current passport number	
<input type="text"/>	
Country of issue	
<input type="text"/>	
Visa subclass details	
<input type="text"/>	

**person no. 4**

Title (Mr/Mrs/Miss/Ms/Other)	Given name(s)
<input type="text"/>	<input type="text"/>
Date of birth	Family name
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
Residential address (we can't accept PO Box addresses)	
<input type="text"/>	
<input type="text"/>	<input type="text"/>
State	Postcode
Occupation	
<input type="text"/>	
Are you already a ME customer?	
<input type="checkbox"/> No <input type="checkbox"/> Yes - go to the end of this section and provide a signature	
Are you an Australian Citizen?	
<input type="checkbox"/> No <input type="checkbox"/> Yes - go to Verifying your identity	
Complete the information below if you are not an Australian citizen	
Are you a permanent resident?	
<input type="checkbox"/> No <input type="checkbox"/> Yes	
Current passport number	
<input type="text"/>	
Country of issue	
<input type="text"/>	
Visa subclass details	
<input type="text"/>	

**Verifying your identity**

If you are not an existing ME customer before we can open an account we are legally required to verify your identity. We may do this electronically using reliable and independent data sources. We will contact you to request identification documents if we cannot verify your identity electronically.

**Credit Information File**

This is one of the best electronic data sources we can use to verify your identity. We will not access your credit rating or credit history. We will only check your name, address and date of birth against those held on Dun & Bradstreet's Credit Information File.

If you consent to ME using your Credit Information File to help verify your identity then you need to read and accept the following terms and conditions.

- Person no. 1    Person no. 2    Person no. 3    Person no. 4

By ticking this box you consent to ME disclosing your name, residential address and date of birth to a credit reporting agency to assist us to verify your identity. We will request and the credit reporting agency may provide an assessment of whether the personal information provided matches (in whole or in part) personal information contained in a credit information file held by the credit reporting agency. In preparing the assessment the credit reporting agency may use the personal information about you and other individuals contained in their credit information files. No other information about your credit information file will be provided to ME. If you don't want your identity verified using your credit information file we will try to verify your identity from other electronic data sources.

Person No. 1 signature

Person No. 3 signature

Person No. 2 signature

Person No. 4 signature

## section 8 – account options.

### section 8.1 – business online savings account.

#### Initial deposit (optional)

Please debit \$  from the below nominated account and credit the amount to my/our Business Online Savings Account. This amount will be automatically debited from your nominated account when we open your Business Online Savings Account – please ensure the funds are available as this may occur prior to you receiving written confirmation of your new account details.

### section 8.2 – nominated account details for your business online savings account. (mandatory)

You must link an Australian bank account to your new Business Online Savings Account. Please complete the details of your nominated account below.

Name of financial institution

Name of account holder(s) e.g. ABC Pty Ltd as trustee for the XYZ Trust or ABC Pty Ltd

BSB number

Account number

Please note:

- These details should appear as they do on the nominated account statement
- The nominated account must be held in the name of the holder of the Business Banking account or, where the Business Banking account is to be held jointly, in the name of the joint account holders
- If the nominated account is a joint account please ensure the account authority is for either party to operate.

### section 8.3 – business term deposit.

#### Important Information

- To withdraw from this account before maturity, 31 days' notice is required;
- If you have a need in the future to immediately withdraw funds from this account, another deposit product may be more suitable;
- After the maturity date, if you renew your term deposit for a further term, the interest rate may be higher or lower than the current rate.

**I/We have read this important information.**

#### Initial Deposit

Investment amount (minimum \$1000.00) \$

#### Term

Years **or**  Months **or**  Days **or** Maturity Date

Please note:

- The minimum term is one month and the maximum term is five years. For the purposes of nominating a term please note that a month is taken to be a calendar month.

#### Interest Payment Frequency

Please select one of the following options:

At maturity only (for term one year or less)     Quarterly and at maturity     Monthly and at maturity  
 Yearly and at maturity     Six monthly and at maturity

Please note:

- If you do not select an Interest Payment Frequency option as stated above your interest will be paid either at maturity (for terms of one year or less) or yearly and at maturity
- You can only select an Interest Payment Frequency where the payment will occur within or at the completion of the term
- Interest will be paid to your nominated account.

#### Initial Deposit Payment method

Direct Debit from nominated account as stated in section 8.4 – Please ensure that funds are available immediately as the initial deposit amount will be automatically debited from this nominated account when we open your Business Term Deposit

**BPAY®** – If this method is selected, we will send Person No. 1 an email with the BPAY® payment details. Therefore this option is only available if Person No. 1 has supplied an email address in section 4.1b and for amounts less than **\$250,000.00**

Cheque – Cheques must be payable to at least one account holder or to ME. Please ensure that cleared funds are available in the account where the cheque will be drawn.

Direct Credit – If this method is selected, we'll send Person No. 1 an email with the direct credit details. Therefore this option is only available if Person No. 1 has supplied an email address in section 4.1b and usually limited to amounts less than **\$10,000.00**.

Please note:

- If you have selected to fund via BPAY® or Direct Credit, Person No. 1 named on the application will receive an email with the details required for this payment to be made.

#### Maturity

We'll write to you approximately 10 business days prior to the maturity of your Business Term Deposit to obtain your maturity instructions. If you don't instruct us as to what should happen to your Business Term Deposit at least two business days prior to maturity, we'll reinvest your Business Term Deposit for the same term with the same interest payment frequency and at the interest rate applicable on the maturity date.

**section 8.4 – nominated account details for your business term deposit.** (mandatory)

You must link an account with another Australian financial institution to your new Business Term Deposit. Please provide details of your nominated account below.

If you want ME to debit money from your nominated account for your initial deposit, you need to complete section 8.3 above.

Name of financial institution

Name of account holder(s) e.g. ABC Pty Ltd as trustee for the XYZ Trust or ABC Pty Ltd

BSB number

Account number

Please note:

- These details should appear as they do on the nominated account statement
- The nominated account must be in the name of the holder of the Business Banking account or, where the Business Banking account is to be held jointly, in the name of the joint account holders
- If the nominated account is a joint account please ensure the account authority is for either party to operate.
- If your nominated account is with another financial institution, you may experience an additional delay before funds become available to you on closure or at maturity of your Business Term Deposit.

**section 9 – privacy notice.****collection, use and disclosure of information.**

You are providing personal information to ME for the primary purpose of ME contacting you, assessing your application, verifying your identity and then establishing and administering your account. Your personal information may be used and disclosed to third party service providers for these purposes and without this information, ME may not be able to consider or approve your application or provide our services.

You must only give us information about any other person with their permission, and if you have told them about this privacy statement.

Some laws require or authorise our collection of your personal information including (where applicable):

- the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 (Cth);
- the Income Tax Assessment Act 1936 (Cth).

We also collect your personal information for the purposes of:

- customer relations including management of our relationship with you and market or customer satisfaction research and product development, and to obtain aggregate information for statistical or research purposes;
- our internal operations including record keeping, risk management and auditing, training, file reviews and portfolio analysis;
- information technology systems development and testing;
- investigating, resolving and preventing complaints;
- considering any other application made by you to ME for financial products or services;
- conducting fraud assessments;
- informing you about any of our products, or those of our alliance partners, that may be of interest to you; and
- reporting and data analytics, including for regulatory, management, statistical or research purposes.

We may disclose your personal information for those purposes to:

- our related entities, service providers, contractors, external advisers or alliance partners (for example a union, superannuation fund, insurer, the Co-op or other third parties with which we have arrangements);
- government and regulatory bodies, law enforcement bodies and courts as required by law or in accordance with prudent banking practice;
- external complaint resolution bodies;
- any person we are considering selling part of our banking business to;
- payment system operators; and
- other financial institutions.

We may also disclose your personal information to our third party service providers for them to help us provide banking and related services to you. Our third party service providers may store or access your personal information overseas, including in the USA and United Kingdom, as well as those countries listed in the ME Privacy and Credit Reporting Policy.

**marketing.**

ME may use your personal information to get in touch with you about ME products and services that may be of interest. If you don't want us to do this, please call us on **1300 658 108** or log in to internet banking to send us a secure email.

**access to your personal information and complaints.**

ME's Privacy and Credit Reporting Policy contains information about how you can:

- access and seek to correct your personal information held by ME; and
- complain about a breach by ME of the Australian Privacy Principles and how ME will deal with the complaint.

ME's Privacy and Credit Reporting Policy is available at [mebank.com.au](http://mebank.com.au) or by phoning us on **1300 658 108**.

**section 10 – customer relations.**

At ME, we're committed to building a reputation for excellence in customer service that includes delivering on our promises. If for some reason our service does not meet your expectations, please contact us as set out above to find out about our dispute resolution procedures. ME is a member of the Financial Ombudsman Service (FOS) Australia.

**section 11 – financial claims scheme.**

Your account is covered by the Financial Claims Scheme (Scheme). You may be entitled to payment under the Scheme. Payments made under the Scheme are subject to a limit for each depositor. Information about the Scheme can be obtained from the APRA website at [www.apra.gov.au](http://www.apra.gov.au) and the APRA hotline on 1300 55 88 49.



**section 12 – declaration and direct debit request authority.**

1. I/We declare that all information provided in this application is true and correct.
2. I/We acknowledge and agree that I/we have obtained and read the Business Deposit Products Fees and Charges Sheet and that I/we have received any further fees and charges information requested from ME.
3. I/We agree to comply with the ME Business Online Savings Account/Business Term Deposit Terms and Conditions. I/We agree to ensure that any Authorised Representatives or Designated Users also comply with these Terms and Conditions. For your Business Term Deposit your agreement with us is comprised of this application, the Confirmation Letter we send you when we open your account and when your term deposit is reinvested for a new term, our Business Term Deposit Terms and Conditions booklet and our Business Deposit Products Fees and Charges Sheet. Copies of the Terms and Conditions booklet and the Business Deposit Products Fees and Charges Sheet are available from [mebank.com.au](http://mebank.com.au) or by calling us on **1300 658 108**. ME will also provide you with copies of the Terms and Conditions booklet before you start using your account. Please read these documents carefully.
4. I/We warrant and represent as follows:
  - in the case of a sole director company, I am the sole director and sole secretary and have full power and authority to open and operate a Business Online Savings Account/Business Term Deposit;
  - in the case of trusts, I represent that I am the only trustee(s) of the trust and I have full trust power and authority to open and operate a Business Online Savings Account/Business Term Deposit;
  - in the case of a partnership/association, I represent that I have full power and authority to bind the partnership/association and each of the partners/members in accordance with its constituent documents and have full power and authority to open and operate a Business Online Savings Account/Business Term Deposit and I undertake to advise ME if the partnership/association is dissolved or terminated or the members of the partnership change;
  - in the case of a union, I represent that the union is an association of employees that is registered or recognised as a trade union under the laws of a State or Territory of Australia, has entered this agreement in accordance with its registered rules and that I am an authorised representative of that association with full power and authority to open and operate a Business Online Savings Account/Business Term Deposit;
5. I/We also understand that for joint applicants the signing authority for account(s) is 'any to sign'.
6. I/We have informed the people nominated in this form that I/we have provided their personal details to ME and that their personal information may be collected, used and disclosed in the manner and for the purposes set out in the Privacy Notice in section 9.
7. I/We agree that my/our personal information may be collected, used and disclosed in the manner and for the purposes set out in the Privacy Notice in section 9. If you do not want ME or its subsidiaries or its associated companies to use the personal information contained in this application form to provide such information to you, simply contact ME during normal business hours on **1300 658 108** or log in to internet banking to send us a secure email.
8. I/We request Members Equity Bank Limited (User I.D. 185871), through the Bulk Electronic Clearing System, to:
  - if I/we have applied for a Business Online Savings Account, arrange for funds to be debited from my/our nominated account at the financial institution shown in section 8.2 and credited to my/our Business Online Savings Account in accordance with (a) my/our instructions set out in section 8.1 (if any) and (b) my/our future instructions and the future instructions of any Authorised Representative and/or Designated User that I/we may appoint on my/our account from time to time;
  - if I/we have applied for a Business Term Deposit, arrange for funds to be debited from my/our nominated account at the financial institution shown in section 8.4 and credited to my/our Business Term Deposit in accordance with (a) my/our instructions set out in section 8.3 (if any) and (b) my/our future instructions and the future instructions of any Authorised Representative that I/we may appoint on my/our account from time to time;
9. I/We acknowledge that the above direct debit arrangement is governed by the terms of the Direct Debit Request Service Agreement contained in the Business Online Savings Account/Business Term Deposit Terms and Conditions.
10. If I am a Sole Trader, partner or individual trustee I declare that I am not a US citizen or US tax resident.

**tax file number (TFN) or exemption.**

We are authorised by the Income Tax Assessment Act 1936 to collect your TFN. Providing your TFN is not compulsory and it is not an offence to decline to provide your TFN. However, if you don't provide it (or identify a relevant exemption) we are required by law to deduct tax from any interest you earn on your account. We will only use your TFN if we are required to do so for lawful purposes, including providing information to the Commissioner of Taxation.

TFN	Or reason for exemption
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>

## signed by the applicant.

Please follow the instructions below to sign this form.

### Signature Rules:

- **Sole Trader:** Proprietor of business to sign.
- **Company:** A director and the secretary or two directors to sign.
- **Sole Director Company:** Sole director/secretary to sign, stating that he or she is the sole director and sole secretary of the company.
- **Partnership:** All partners to sign (unless ME agrees otherwise in the case of a large partnership).
- **Union:** Authorised Representative(s) to sign in accordance with the registered rules of the union.
- **Association:** Minimum of two office bearers (e.g. the chairman, secretary, treasurer or equivalent officer in each case) to sign in accordance with the rules governing the association.
- **Trust:** All trustees to sign.

Signature 1

Position (if required)

Signature 2

Position (if required)

Print name

Date

Print name

Date

## checklist before returning this application.

Before you return this application please check that you have completed the following:

- Signed this application correctly as specified in section 12
- Provided a tax file number or reason for exemption
- Included a certified copy of your trust deed e.g. super fund deed (trust applicants only)
- Included a copy of a recent bank statement showing the name of the applicant
- Identification forms completed for each individual named on this application

We may also request evidence satisfactory to us that:

- The individuals signing this application hold the positions indicated and have express authority to sign this form, and
- The business or other entity named as the account holder in this application is in existence, validly constituted, and capable of being bound by ME Business Online Savings Account/Business Term Deposit Terms and Conditions.