

Due Diligence Form

Unregulated Australian & Foreign Trusts

Please complete neatly in BLOCK LETTERS

If your trust is regulated by an Australian government department, please use the SMSF & Regulated Trusts form.

OFFICE USE ONLY

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NEW

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CHANGE OF DETAILS

ACCOUNT NUMBER:

CHECKED BY:

SECTION ONE – TRUST DETAILS

FULL NAME OF TRUST INCLUDING TRUSTEE (e.g. John Smith ATF Smith Family Trust)

BUSINESS / TRADING NAME (IF ANY)

COUNTRY WHERE TRUST WAS ESTABLISHED

INDUSTRY (Primary product or service the trust is linked to, use 'Financial' if trust created for investment purposes)

RESIDENTIAL ADDRESS / PRINCIPAL PLACE OF BUSINESS

POSTAL / REGISTERED OFFICE ADDRESS (if different)

CITY / TOWN

STATE

CITY / TOWN

STATE

POSTCODE

COUNTRY

POSTCODE

COUNTRY

PHONE (including country code) PRIMARY EMAIL ADDRESS

WEBSITE

TO YOUR KNOWLEDGE, IS ANY PERSON ASSOCIATED WITH THE TRUST A POLITICALLY EXPOSED PERSON?

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YES

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NO

If 'yes', provide details

TYPE OF TRUST (e.g. family, discretionary, unit)

IS THE TRUST REGISTERED WITH ASIC OR AN EQUIVALENT FOREIGN BODY?

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YES

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NO

If 'yes', provide regulator name (e.g. ATO, APRA)

Provide registration number:

INITIAL CONTRIBUTION AMOUNT

FULL NAME OF SETTLOR (if initial contribution amount is \$10,000 or more)



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SECTION TWO - BENEFICIARIES

LIST THE FULL NAMES OF ANY NAMED BENEFICIARIES AND ANY PERSONS WHO CAN CHANGE THE NAMED BENEFICIARIES OF THE TRUST (APPOINTERS)

LIST EACH BENEFICIARY CLASS OF THE TRUST (e.g. family members of named beneficiary, unit holders)

SECTION THREE - COMPANY TRUSTEES

ARE ANY OF THE TRUSTEES OF THE TRUST A COMPANY?

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YES

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NO

If 'yes', list names of each company and complete a separate Company Due Diligence Form for each company

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SECTION FOUR - INDIVIDUAL TRUSTEES

TRUSTEE #

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FULL NAME

DATE OF BIRTH

--	--

CURRENT RESIDENTIAL ADDRESS (NO POSTAL ADDRESSES OR PO BOXES)

--

CITY / TOWN

STATE

POSTCODE

COUNTRY

--	--	--	--

TRUSTEE #

--

FULL NAME

DATE OF BIRTH

--	--

CURRENT RESIDENTIAL ADDRESS (NO POSTAL ADDRESSES OR PO BOXES)

--

CITY / TOWN

STATE

POSTCODE

COUNTRY

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ARE THERE MORE BENEFICIARIES OR TRUSTEES?

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YES

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NO

If 'yes', list additional beneficiaries or trustees on a separate copy of this page



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SECTION FIVE – DECLARATION

AS AUTHORISED REPRESENTATIVE OF THE TRUST, YOU

- confirm and warrant that all the information, including the identification material, provided in this form is true, valid and correct; and
- that The Perth Mint will rely on the information to review the customers application; and,
- warrant that you have the authority to consent to the disclosure of the personal information of any third party individual as required and provided in accordance with this form.
- confirm that you have reviewed and accept The Perth Mint's Terms and Conditions (available at <https://www.perthmint.com/terms-and-conditions/>)

Information provided to The Perth Mint for the purposes of this due diligence will be held as per The Perth Mint Privacy Policy. This information is being gathered to comply with a legal obligation placed upon us. For more information on the purposes of collection, please read our Know Your Customer (KYC) Collection Notice (our collection notices and The Perth Mint Privacy Policy are available at <https://perthmint.com/privacy-policy/>). If you have questions about our privacy policy or how we handle your information, please contact us at privacyofficer@perthmint.com.

FULL NAME		DATE OF BIRTH	
<input type="text"/>		<input type="text"/>	
POSITION	PHONE (including area code)	PRIMARY EMAIL ADDRESS	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
CURRENT RESIDENTIAL ADDRESS (NO POSTAL ADDRESSES OR PO BOXES)			
<input type="text"/>			
CITY / TOWN	STATE	POSTCODE	COUNTRY
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
SIGNATURE		COMPANY STAMP (IF APPLICABLE)	
<input type="text"/>		<input type="text"/>	
DATE			
<input type="text"/>			

SECTION SIX – IDENTIFICATION

Only after we are satisfied that proof of your identity has been established and the validation procedure has been completed will we be able to validate your account for bullion transactions.

When lodging this form, please provide the following documents:

- Certified copy of the trust deed.
- For each named beneficiary, individual trustee and the authorised representative of the trust:
 - a certified copy of a driver's licence, passport or national ID card showing the person's signature and photograph; and
 - if the photographic identification doesn't show their current residential address, a utility bill or government notice showing their current residential address.

If there is a company trustee, please also provide certified copies of the documents listed in the Company Due Diligence forms All documentation provided must be current. If any documentation is in a language other than English, it must be accompanied by an English translation prepared by an accredited translator.

A certified copy means a document that has been certified as a true copy of the original document by an individual who is authorised to do so

For Australian customers, certification/notarisation is acceptable by the following:

- | | |
|---|---|
| • Legal Practitioner (including lawyers, judges, magistrates, registrar of a court) | • Commissioner of Declarations |
| • Medical Practitioner | • Commissioner of Affidavits |
| • Pharmacist | • Police Officer |
| • Justice of the Peace | • Member of a professional accounting body |
| • Notary Public | • Australian Consular Official |
| | • An authorised representative of a financial institution |

For overseas customers, certification/notarisation is acceptable by the following:

- | | | |
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| • Commissioner for Oaths | • Justice of the Peace | • Notary Public |
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