

Complete all sections of the form in BLOCK LETTERS and attach any relevant documents.

An Identification Form must be completed by each individual who is:

- requesting a cash withdrawal from a Superannuation Fund;
- making an application as a direct investor (without an adviser);
- being appointed a Power of Attorney or Guardian for a direct investor;
- receiving a death benefit in respect of a deceased investor; or
- receiving a death benefit as a legal personal representative for the Estate of a deceased investor.

If you have provided an Identification Form to Asgard since 12 December 2007 then you do not need to complete this form again.

A certified copy of the identification documents selected under Part 2 must be attached and submitted with this form.

Note: Privacy laws protect your privacy. Please read our privacy brochure for more information. A copy can be obtained from our Contact Centre.

Questions? Call our Contact Centre on 1800 998 185 or email asgard.investor.services@asgardwealthsolutions.com.au

What sections need to be completed?

TYPE OF CLIENT	Sections
Individual	1, 6 and 10
Regulated Partnership	2, 7 and 10
Unregulated Partnership	2, 7, 10 and 11
Regulated Trust - Individual Trustee	1, 3, 6, 8 and 10
Regulated Trust - Australian Company Trustee (non proprietary company)	3, 4, 8, 9 and 10
Regulated Trust - Australian Company Trustee (proprietary company)	3, 4, 8, 9, 10, 13 and 14
Regulated Trust - Foreign Company Trustee (non proprietary company)	3, 5, 8, 9 and 10
Regulated Trust - Foreign Company Trustee (proprietary company)	3, 5, 8, 9, 10, 13 and 14
Non Regulated Trust - Individual Trustee	1, 3, 6, 8, 10 and 12
Non Regulated Trust - Australian Company Trustee (non proprietary company)	3, 4, 8, 9, 10 and 12
Non Regulated Trust - Australian Company Trustee (proprietary company)	3, 4, 8, 9, 10, 12, 13 and 14
Non Regulated Trust - Foreign Company Trustee (non proprietary company)	3, 5, 8, 9, 10 and 12
Non Regulated Trust - Foreign Company Trustee (proprietary company)	3, 5, 8, 9, 10, 12, 13 and 14
Australian Company Trustee (non proprietary company)	4, 9 and 10
Australian Company Trustee (proprietary company)	4, 9, 10, 13 and 14
Foreign Company Trustee (non proprietary company)	5, 9 and 10
Foreign Company Trustee (proprietary company)	5, 9, 10, 13 and 14

6. Identification details – Individual, Partner or Individual Trustee

One form of primary identification (ID) must be copied, certified and attached to this form. If you are unable to provide one of the forms of primary ID, you are able to have two forms of secondary ID from either PART II or III copied, certified and attached.

PART I - ACCEPTABLE PRIMARY ID DOCUMENTS

Select ONE valid option from this section only

Notes

<input type="checkbox"/>	Australian State / Territory driver's licence containing a photograph of the person.	The ID provided must contain your full name and either residential address (not PO Box) and/or date of birth
<input type="checkbox"/>	Australian passport (a passport that has expired within the preceding 2 years is acceptable).	
<input type="checkbox"/>	Card issued under a State or Territory for the purpose of proving a person's age containing a photograph of the person.	
<input type="checkbox"/>	Foreign passport or similar travel document containing a photograph and the signature of the person*.	

PART II - ACCEPTABLE SECONDARY ID DOCUMENTS – only needs to be completed if you do not own a document from Part I

Select ONE valid option from this section

Notes

<input type="checkbox"/>	Australian birth certificate.	Must contain a document reference number as well as your full name and either residential address (not PO Box) and/or date of birth.
<input type="checkbox"/>	Australian citizenship certificate.	
<input type="checkbox"/>	Pension card issued by Centrelink.	
<input type="checkbox"/>	Health card issued by Centrelink.	

And ONE valid option from this section

Notes

<input type="checkbox"/>	A document issued by the Commonwealth or a State or Territory within the preceding 12 months that records the provision of financial benefits to the individual and which contains the individual's name and residential address.	Must be on letterhead and show your full name and residential address.
<input type="checkbox"/>	A document issued by the Australian Taxation Office within the preceding 12 months that records a debt payable by the individual to the Commonwealth (or by the Commonwealth to the individual), which contains the individual's name and residential address. Block out the TFN before scanning, copying or storing this document.	
<input type="checkbox"/>	A document issued by a local government body or utilities provider within the preceding 3 months which records the provision of services to that address or to that person (the document must contain the individual's name and residential address).	
<input type="checkbox"/>	If under the age of 18, a notice that: was issued to the individual by a school principal within the preceding 3 months; and contains the name and residential address; and records the period of time that the individual attended that school.	

PART III – ACCEPTABLE FOREIGN ID DOCUMENTS – only needs be completed if you do not have a document from Part I

BOTH documents from this section must be presented

Notes

<input type="checkbox"/>	Foreign driver's licence that contains a photograph of the person in whose name it is issued and the individual's date of birth*.	*Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator.
<input type="checkbox"/>	National ID card issued by a foreign government containing a photograph and a signature of the person in whose name the card was issued*.	

Have you changed your name or are you signing on behalf of another person?

The following table contains information about suitable linking documents.

Purpose	Suitable linking documents
Change of Name	Marriage certificate, deed poll or change of name certificate from the Births, Deaths and Marriages Registration Office.
Power of Attorney or Guardian	Guardianship Papers, Power of Attorney, Grant of Probate, Letters of Administration, Will or any other documentation confirming your authority to act.

7. Identification details – Partnership

One form of identification (ID) from PART I and, if the partnership is regulated by a professional association, another form of ID from PART II must be **copied, certified and attached to this form**.

PART I - ACCEPTABLE PRIMARY ID DOCUMENTS – to verify partnership name

Select ONE valid option from this section only

Notes

<input type="checkbox"/>	a partnership agreement.	The ID provided must be on letterhead (where appropriate) and contain the full name of the partnership.
<input type="checkbox"/>	minutes or extract of a partnership meeting.	
<input type="checkbox"/>	a notice issued by the Australian Taxation Office within the last 12 months e.g. Notice of Assessment. Block out the TFN before copying and sending this document.	
<input type="checkbox"/>	a certificate of registration of business name issued by a government or government agency in Australia.	

PART II – ACCEPTABLE ID DOCUMENTS - to verify membership of a professional association

Select ONE valid option from this section

Notes

<input type="checkbox"/>	a current membership certificate (or equivalent) of a professional association.	The ID provided must be on letterhead (where appropriate) and contain the full name of the partnership.
<input type="checkbox"/>	membership details independently sourced from the relevant professional association.	

8. Identification details – Trust

One form of identification (ID) must be **copied, certified and attached to this form**.

ACCEPTABLE ID DOCUMENTS

Select ONE valid option from this section only

Notes

<input type="checkbox"/>	A notice issued by the Australian Taxation Office within the last 12 months (eg a Notice of Assessment). Block out the TFN before copying and sending this document.	The ID provided must be on letterhead (where appropriate) and contain the full name of the trust.
<input type="checkbox"/>	A letter from a solicitor or qualified accountant that confirms the name of the trust.	
<input type="checkbox"/>	A certified copy or certified extract of the trust deed.	

9. Identification details – Company

One form of identification (ID) must be **copied, certified and attached to this form**.

ACCEPTABLE ID DOCUMENTS

Select ONE valid option from this section only

Notes

<input type="checkbox"/>	A certified copy of the certification of registration issued by ASIC or relevant foreign registration body.	The ID provided must be on letterhead (where appropriate) and contain the full name of the company, whether the company is registered as a proprietary or public company and the ACN issued to the company (if applicable).
<input type="checkbox"/>	A public document issued by the relevant company. Only acceptable for a company which is a listed company, a majority owned subsidiary of an Australian listed company or is a regulated company.	
<input type="checkbox"/>	For a foreign company only - a disclosure certificate from the company given by an individual acting as agent of the company (where the agent has completed all sections of this form as an individual).	

11. Additional Partnership Details (only complete if you have answered no in Part 1 Section 2 that the partnership is not regulated by a professional association)

Partner 1

Full given name(s)

Last name

Residential address (PO Box is NOT acceptable)

 State Postcode

Partner 2

Full given name(s)

Last name

Residential address (PO Box is NOT acceptable)

 State Postcode

Partner 3

Full given name(s)

Last name

Residential address (PO Box is NOT acceptable)

 State Postcode

If there are more partners, provide details on a separate sheet.

Trustee 3

Full given name(s) or Company name

[Grid of 30 empty boxes for name entry]

Last name

[Grid of 15 empty boxes for last name entry]

Residential Address if an individual trustee or company registered address (PO Box is NOT acceptable)

[Grid of 25 empty boxes for residential address entry]

[Grid of 25 empty boxes for residential address entry]

State

[Grid of 5 empty boxes for state entry]

Postcode

[Grid of 10 empty boxes for postcode entry]

Trustee 4

Full given name(s) or Company name

[Grid of 30 empty boxes for name entry]

Last name

[Grid of 15 empty boxes for last name entry]

Residential Address if an individual trustee or company registered address (PO Box is NOT acceptable)

[Grid of 25 empty boxes for residential address entry]

[Grid of 25 empty boxes for residential address entry]

State

[Grid of 5 empty boxes for state entry]

Postcode

[Grid of 10 empty boxes for postcode entry]

Trustee 5

Full given name(s) or Company name

[Grid of 30 empty boxes for name entry]

Last name

[Grid of 15 empty boxes for last name entry]

Residential Address if an individual trustee or company registered address (PO Box is NOT acceptable)

[Grid of 25 empty boxes for residential address entry]

[Grid of 25 empty boxes for residential address entry]

State

[Grid of 5 empty boxes for state entry]

Postcode

[Grid of 10 empty boxes for postcode entry]

Trustee 6

Full given name(s) or Company name

[Grid of 30 empty boxes for name entry]

Last name

[Grid of 15 empty boxes for last name entry]

Residential Address if an individual trustee or company registered address (PO Box is NOT acceptable)

[Grid of 25 empty boxes for residential address entry]

[Grid of 25 empty boxes for residential address entry]

State

[Grid of 5 empty boxes for state entry]

Postcode

[Grid of 10 empty boxes for postcode entry]

If there are more trustees, provide details on a separate sheet

Asgard Capital Management Ltd
ABN 92 009 279 592 AFSL 240695
RSE Licence L0001946, Fund RSE R105580
Contact Centre 1800 998 185
PO Box 7490, Cloisters Square, Perth WA 6850

Asgard

ABGALL11108