



Company Information and Identification

-Trade Finance

The Bank is required to collect the following information to comply with the Anti-Money Laundering and Counter-Terrorism Financing Act 2006.

Guide to completing this form

Complete the following in **block letters**:

Section 1 – General company information (applicable to all companies)

Section 2 – Ownership details (only applicable for Australian Proprietary or Foreign Private Companies)

Section 3 – Director names (only applicable for Australian Proprietary or Foreign Private Companies)

Section 4 – Additional information for a foreign company (only applicable for all Foreign Companies)

Section 5 – Declaration (applicable to all companies)

Section 1 – General company information (All companies)

Full name of company

Select the type of company (Tick the box that is applicable)

Australian Company Foreign Company Registered with ASIC Foreign Company Not Registered with ASIC

Select the type of company structure (Tick the box that is applicable)

Proprietary/Private Public

Please provide ACN if it is an Australian company **or** ARBN if it is a foreign company registered with ASIC

Industry

Nature of business activity

Registered office address (PO Box is **not** acceptable)

Suburb	State	Postcode	Country
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Principal place of business (if any) (PO Box is **not** acceptable) Same as registered office address

Suburb	State	Postcode	Country
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Postal address Same as registered office address Same as principal place of business

Suburb	State	Postcode	Country
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Is the company operating as a charity? (Tick the box that is applicable)

No

Yes **Please complete the following question**

What is the objective/purpose of the charity? (e.g. vocational training for disabled persons, assistance for tsunami victims, building fund for a particular school or institution etc.)

Section 2 – Company ownership (Only needs to be completed for **proprietary or private** companies)

Provide details of **all** individuals who are beneficial owners through one or more (direct or indirect) shareholdings of **more than 25%** of the company's issued capital.

Shareholder 1

Full given name(s)

Surname

Full residential address (PO Box is **not** acceptable)

Suburb	State	Postcode	Country
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Shareholder 2

Full given name(s)

Surname

Full residential address (PO Box is **not** acceptable)

Suburb	State	Postcode	Country
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Shareholder 3

Full given name(s)

Surname

Full residential address (PO Box is **not** acceptable)

Suburb	State	Postcode	Country
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Section 3 – Director details (Only needs to be completed for **proprietary or private** companies)How many directors are there? Provide full name of each director

Full given name(s)

If there are more directors, please provide details on a separate sheet

Section 4 – Additional information for a foreign company

If company is an Australian company, go straight to Section 5.

Name of country where company was established, incorporated or registered

Industry

Name of foreign registration authority

Foreign registration number

Purpose of opening the account/facility with the Commonwealth Bank of Australia or related company

Please complete the following section only for foreign companies registered in Australia

Local agent

Full name of individual or company name

Residential address if an individual local agent **or** company registered office address (PO Box is **not** acceptable)

Suburb	State	Postcode	Country
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Section 5 – Declaration (All companies)

This declaration is to be signed by a director, secretary or authorised officer of the company.

I understand and acknowledge that the law requires applicants to provide true and correct information and state all the names by which they are commonly known. I also understand that the law prohibits the use of false names, as well as the giving, use or production of false or misleading information or documents in connection with the provision of financial services and the making, possession or use of a false document in connection with an identification procedure.

I declare that the details as shown on this form are complete and correct.

Name

Position

Signature

Date