

## Additional Authority

Please refer to the end of this document for submission instructions.

Additional authority      Power of Attorney (POA) (please attach a certified copy of the POA document)

### Section 1 – Additional Authority: Personal Details

Title      Mr      Mrs      Miss      Ms      Other

Full given name/s      Surname

Other name/s commonly known by (if applicable)      Date of Birth (DD/MM/YYYY)

Gender      Male      Female

Residential address (cannot be a PO Box)

State	Postcode	Country

Postal address (if same as residential address, write 'As above')

State	Postcode	Country

#### Contact Details

Email address (mandatory)      Mobile number (mandatory)

Home number      Work number

#### Employment Information

Refer to 'Job and Industry Classifications List' available on the website for the list of acceptable job categories and types.

Job category      Job type

#### Identification

##### Client has a Passport or Australian Driver Licence

Please attach a copy of two of the following items to this application: Australian Driver Licence, Passport or Medicare Card.

By ticking this box and providing copies of your ID, you consent to the electronic verification of your ID documents as outlined in the Declaration Section of this form.

##### Client does not have a Passport or Australian Driver Licence

If you do not have an Australian Driver Licence or Passport please contact us for alternative options to confirm your identity.

See the submission instructions at the end of the form for more details.

## Section 2 – Which account is the authority to be added to?

Loan name	Loan number

## Section 3 – Declarations (account holders)

- I/We understand, acknowledge and declare:
- Authorise the additional authority set out in Section 1 to act on my/our behalf in connection with the products and services nominated in Section 2, to the extent of their authority set out below:
- Acknowledge that it is my/our obligation to be aware of any activity undertaken on my/our behalf by the additional authority in relation to instructions provided on the products nominated in Section 2.
- Agree that I/we will not provide my/our personal login details, instead relying on the Participant/Bank to issue relevant account access to the Additional Authority.
- For company accounts (as applicable), I/we confirm the company has complied with its constitution and the requirements of the Corporations Act in relation to the execution of the Additional Authority Form.
- For trust accounts (as applicable), warrant that the Trust Deed/instrument authorises the operation of the account as nominated by this Additional Authority Form.
- For trust accounts (as applicable), warrant that authority has been given by signature of the Trustee/s, or where the Trustee is a Company, by resolution passed at a legally constituted meeting of director/s of the company for the operation of the account in the name of and on the Terms and Conditions and in the manner set out in this Additional Authority Form.
- I/We authorise the person named as the Additional Authority in Section 1 to have 'view-only' access to the account/s listed above.
- With view-only access, that person will have access to request information pertaining to the account/s listed above, but not perform transactions.

### Account Holder/Director/Trustee 1

Full name

Date (DD/MM/YYYY)

**Signature**

(must be signed pen to paper)

### Account Holder/Director/Trustee 2 (if applicable)

Full name

Date (DD/MM/YYYY)

**Signature**

(must be signed pen to paper)



### Notes:

All existing account holders must sign this form for your instructions to be executed. If there are more than 2 authorised signatories, please photocopy this page, complete and attach to the form.

## Section 4 – Declarations (additional authority)

I understand, acknowledge and declare:

- The information I provided to you in this form is complete and correct and that I will advise the Bank and/or the Participant if these details change.
- The name of individual persons given in this form are true and correct and that the law prohibits the use of false names, as well as the giving or use of false documents in connection with an identification procedure.
- I have received and agree to be bound by the Terms and Conditions governing each product nominated in this form. The Commonwealth Bank's Group Privacy Statement contains more information about how the Group (including the Bank and CommSec) collects and handles personal information and is available at [commbank.com.au/privacy](http://commbank.com.au/privacy) or alternatively by visiting [commbank.com.au](http://commbank.com.au) and clicking the Privacy Statement link or asking for a copy at any CommBank branch.
- The Bank and/or the Participant are required by the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006* to collect information about you and verify your identity before we can provide you with the services or products for which you've applied.

If you selected 'Passport or Australian Driver Licence' as the method of ID in this form the following applies to you:

- I consent to having electronic identification performed using personal details and identification documents. I have provided, and understand that providing false or misleading information about my identity is an offence under the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006*.
- I consent to having my personal details and identification documents matched to information held by the issuer or official record holder via third party systems.
- I understand that my personal information will be exchanged with external organisations including: credit reporting agencies, Commonwealth and State government departments, independent and private sector organisations and outsourced providers who coordinate the electronic identification process and who may conduct additional matches against public or proprietary databases.
- As part of the electronic identification process, I permit these external organisations to record, use and disclose my information in accordance with their own privacy policies and legal obligations. I understand that the Bank and/or the Participant and its outsourced providers will access records held about me by these external organisations only for the purpose of matching the identifying information I have chosen to provide.
- I consent to providing my name, address and date of birth to selected credit reporting agencies to match this information against their records.
- I understand that this is done only for identity verification purposes as required by the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006*.

You do not have to consent to electronic verification. If you do not want to be verified electronically, please contact us for alternative options of confirming your identity.

### Additional Authority

Full name

Date (DD/MM/YYYY)

Signature (must be signed pen to paper)

Commonwealth Bank Geared Investments Loan is issued by Commonwealth Bank of Australia ABN 48 123 123 124 AFSL 234945. This product is administered by Commonwealth Securities Limited ABN 60 067 254 399 AFSL 238814 (CommSec), a wholly owned but non-guaranteed subsidiary of the Commonwealth Bank of Australia. CommSec is a Market Participant of ASX Limited and Cboe Australia Pty Limited, a Clearing Participant of ASX Clear Pty Limited and a Settlement Participant of ASX Settlement Pty Limited.

## How to submit your documents

### Clients

Please provide your completed and signed form with relevant supporting documents to your adviser.


### Advisers

Send this form and all supporting documents to the email address listed below.

If you are required to send Original Certified Copies of documents please send via post to:

 **Geared Investments, Locked Bag 34,  
Australia Square NSW 1215**

 **[gearedinvestments@cba.com.au](mailto:gearedinvestments@cba.com.au)**

 **13 15 20**

 **[commbank.com.au/gearedinvestments](http://commbank.com.au/gearedinvestments)**