

Customer Application

- Cash Management Trading Account (CMTA)
 Gift Fund Account
 Capacity Builder Account



Please Note:- A customer must have an existing or establish a new CSB Cash Management Trading Account to be eligible to open and/or operate a CSB Capacity Builder Account

Staff use only - All new customers (including new individuals who will operate any account as a signatory) require the completion of the relevant "Know Your Customer Information - <entity type>" form(s). There is a form for each entity type listed below. Tick the box relating to the customer (and any new signatories) and complete the relevant form mentioned below:

- | | | |
|--|--|---|
| <input type="checkbox"/> Individual (OA565a) | <input type="checkbox"/> Partnership (OA565b) | <input type="checkbox"/> Australian Company (OA565c) |
| <input type="checkbox"/> Foreign Company Registered with ASIC (OA565d) | <input type="checkbox"/> Unregistered Foreign Company (company not registered with ASIC (OA565e) | <input type="checkbox"/> Association – Incorporated and Unincorporated (OA565f) |
| <input type="checkbox"/> Co-Operatives (OA565g) | <input type="checkbox"/> Government Bodies (OA565h) | <input type="checkbox"/> Trusts (OA565i) |

1. Organisation's Details

Existing Customer: Yes No

If yes, Account or Customer No: _____

Organisation Name: _____

Business Address: _____

City: _____

State: _____

Postcode: _____

Mailing Address (if different from Business Address): _____

City: _____

State: _____

Postcode: _____

Phone Number: _____

Fax Number: _____

Email Address: _____

Main Contact (ie. name of preferred contact person): _____

Business ABN or ACN Number (if applicable): _____

Tax File Number or Tax Exemption Endorsement Provided*: Yes No

*Although not compulsory CSB recommends you provide a TFN or TEE in order to avoid government withholding tax charges.

2. Service Selection

Account Title (eg. Operating Account, Gift Account, Donations Account etc.): _____

- | | | | |
|--|----------------------------------|------------------------------------|---|
| Statement Frequency: | <input type="checkbox"/> Monthly | <input type="checkbox"/> Quarterly | <input type="checkbox"/> Annually |
| Number of signatories to authorise operation of account [^] : | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 | <input type="checkbox"/> 3 |
| Cheque Book [#] : | <input type="checkbox"/> 50 form | <input type="checkbox"/> 100 form | <input type="checkbox"/> 200 form |
| Pre-printed Deposit Book – Bendigo Bank ^{**} : | <input type="checkbox"/> 50 form | <input type="checkbox"/> 100 form | <input type="checkbox"/> 200 form (duplicate) |
| Pre-printed Deposit Book – NAB ^{**} : | <input type="checkbox"/> 50 form | <input type="checkbox"/> 100 form | <input type="checkbox"/> 200 form |
| Debit Card ^{###} : | <input type="checkbox"/> Yes | <input type="checkbox"/> No | |

* Fees and charges apply. Refer to the Terms and Conditions document.

** Only available on one to sign accounts.

[^] The number of authorised signatories to the Capacity Builder Account must be the same as the number of authorised signatories on the Cash Management Trading Account.

[#] Not available with the CSB Capacity Builder Account (please refer to the CSB Terms and Conditions document Key Features Table).

3. Signatory Selection

Please list below all persons who will have authorised access to the account. All signatories to be added to the account are required to complete a CSB Non Titled Member Application Form (OA272), provide Know Your Customer (KYC) acceptable identification and a signed Signature Capture Form (IC021). Should you require copies of these applications please contact CSB on 1300 550 603 or via email at CustomerService@csbanking.com.au

Full Name of Signatory	Position

4. Documentation Checklist

In order to establish a CSB account the documentation listed below is to be provided by your organisation where applicable. Please complete the checklist to indicate the items applicable to you.

Documentation Provided	Provided	N/A
Please provide one of the following list of documentation as per your Organisation's entity type:		
<u>Company</u>		
Certificate of Registration of Business Name	<input type="checkbox"/>	<input type="checkbox"/>
<u>Incorporated/Unincorporated Association</u>		
Certificate of Incorporation	<input type="checkbox"/>	<input type="checkbox"/>
Rules or Constitution of Association	<input type="checkbox"/>	<input type="checkbox"/>
Minutes of a meeting of the Association	<input type="checkbox"/>	<input type="checkbox"/>
<u>Co-operative</u>		
Minutes of a meeting of the Co-operative	<input type="checkbox"/>	<input type="checkbox"/>
Information provided by State or Territory registration body	<input type="checkbox"/>	<input type="checkbox"/>
Any register maintained by the Co-operative	<input type="checkbox"/>	<input type="checkbox"/>
<u>Other documentation</u>		
Tax File Number or Tax Exemption Endorsement*	<input type="checkbox"/>	<input type="checkbox"/>
ABN or ACN Number	<input type="checkbox"/>	<input type="checkbox"/>

*Not required if an ABN or ACN has been supplied. If ABN or ACN is not supplied, it is not compulsory to provide a TFN or TEE but CSB recommends you do in order to avoid government withholding tax

5. Customer Authorisation

The below authorisation is required to be signed by any two current board or committee members.

Authorised by:

Signature:
Date: / /

Name:

Authorised by:

Signature:
Date: / /

Name:

Should you require assistance completing documentation to establish a CSB account, please contact 1300 550 603 or email CustomerService@csbanking.com.au for support.