

Know your customer - statement of referee

Information sheet

When to use this form

Use this form if you're an Aboriginal or Torres Strait Islander to provide the information we need to verify your identify and to meet our legal obligations (including those under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006).

Note: You should only use this form if you're an Aboriginal or Torres Strait Islander and you don't have the documents we need to verify your identity. If you do have the required identity documents, then you need to use the **know your customer – individual/sole trader** form.

Verifying a customer's identity

We need to verify or confirm your identity through a referee who can confirm the details you provide in this form.

Also, an independent person must witness your signature and the referee's signature.

Who can be a referee?

A referee must certify who you are. Only certain people can do this including:

- a Chairperson, Secretary or CEO of an Aboriginal/Torres Strait Islander organisation
- a board member of a local Aboriginal land council
- a school principal or counsellor
- a minister of religion
- a health professional or manager in Aboriginal/Torres Strait Islander medical services
- a police officer
- a community leader or recognised elder (but they can't be your parent, sibling or child)
- your current employer or manager
- someone before whom a statutory declaration can be made.

Who can be a witness?

You and the referee must sign this form in front of a witness. The witness must be:

- 18 years old or over, and
- independent this means they can't be related to you or the referee.

For example, the witness can't be an immediate family member which includes your spouse/de facto partner or your or your spouse/de facto partner's child, parent, grandparent, grand child and sibling.

Privacy – use and disclosure of personal information

The privacy of your personal information is important to us.

We collect your personal information to identify you in line with the Anti-Money Laundering and Counter-Terrorism Financing Act 2006.

For more information about how we collect and handle personal information, please see our privacy policy available at **amp.com.au/privacy** or contact us for a copy.

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Please retain this information sheet for your records. Do not return it with your completed form(s).



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Please print in CAPITAL LETTERS and place a cross **≭** in any applicable boxes.

1. Personal details	1. Personal details (continued)
Please provide the plan/policy/member/account number for products you hold with AMP or any other reference number:	Previous residential address
	Address (a PO Box is not acceptable)
Title	
	Suburb State Postcode
Surname	Side i osicode
Given name(s)	Country
Other name(s) used or known by	Correspondence address
	Same as current residential address
	Other—provide details below:
Gender Caracla Char	Address
Male Female Other	
Date of birth	Cultural Charles Dealthands
Place of Birth	Suburb State Postcode
Tidee of Biriti	Country
Occupation	
Industry	2. Agent details (if relevant)
	(!) Complete this section if you've been authorised by our
Country of residence for tax purposes	customer to complete applications and transactions on their behalf. You also need to attach proof of our
Australia Other	customer's authority for you to act for them (eg a
Current residential address	power of attorney).
Address (a PO Box is not acceptable)	Title
	Surname
Suburb State Postcode	
	Given name(s)
Country	

3. Referee details 4. Declaration (continued) () A referee must certify who you are. Only certain Referee people can do this as set out in the information sheet. – I am an authorised referee as set out in the **information** Title - The customer has signed this form in front of me. – The names the customer listed in this form are all the names Surname they have been known as (that I'm aware of). – The addresses the customer listed in this form are all the Given name(s) addresses they have lived at (that I'm aware of). Name Type of referee/Title in business or organisation Signature Full business or organisation name Date Australian Business Number (ABN) - if relevant Contact phone number Witness – I am an authorised witness as set out in the **information** How long have you known the customer for? sheet. years months - The customer and referee have signed this form in front of 4. Declaration Name I understand that It's a criminal offence to knowingly provide: - information in this form that is false or misleading Signature - false documents to support this form. I declare that the information in this form and in any supporting document: Date - is complete and correct – that is about another person has been provided with their consent (if required) 5. Checklist - may be used for any product, service or benefit that I hold, apply for, request or obtain. Have you completed all relevant sections of this form? – may be disclosed to and used by the provider of the Have you read and understood the privacy statement product, service or benefit in line with their privacy that's set out in the information sheet? obligations to comply with anti-money laundering and Have you read and understood the declaration in counter-terrorism financing legislation. section 4 and signed and dated that section? Note: Anyone authorised to sign or transact on behalf of our If you're an authorised agent, have you attached an customer must be appointed in line with the relevant original certified copy of a document which authorises application form, product disclosure statement or other you to act for our customer? disclosure document. Where to send this form Customer Mail or email this completed form (and other relevant documents) to: Name **AMP Limited** Any questions? PO Box 6346 131 267 Signature WETHERILL PARK NSW 1851 ampsuper@amp.com.au Date