

# Signatory Identification Form

## Why you need to be identified:

The Glebe Administration Board (GAB) is required to comply with the Anti-Money Laundering and Counter Terrorism Financing (AML/CTF) Act 2006 by obtaining and verifying certain identification about a signatory to an account.

## Three ways you can be identified:

1. Have an Anglican Minister of Religion agree to perform the check on our behalf by acting as GAB's agent. A Minister of Religion for these purposes is a person who has been ordained as a presbyter or deacon, or
2. Send a completed Signatory Identification form with copies of identification documents certified by a valid certifier to GAB, or
3. Visit Glebe where the check can be performed by a GAB Representative.

**Please note that fax or email copies of identification documents will not be accepted.**

**Please contact Glebe Income Accounts on 1800 636 134 if you require assistance to complete this form.**

## Identification Documents:

In order to have your identity verified, you will need to produce an original or certified copy of the following documents:

- a) A primary photographic identification document or
- b) A primary non-photographic identification document and a secondary identification document.

## Filling out this Form:

*Step 1:* Fill out your personal details

*Step 2:* Select which identification documents have been used and attach a copy.

*Step 3:* An Anglican Minister of Religion from the Diocese of Sydney can act as Glebe Administration Board's Agent & identify the signatory using Step 3's checklist.

*Step 4:* If you are using certified copies of identification documents as part of the identification process, this section must be completed by the certifier.

*Step 5:* Attach copies of your identification documents or the certified copies used and return this form to Glebe Income Accounts.

## Step 1: Details of signatory

Title	Surname	Given Names	
Residential Address			
Suburb		State	Postcode
Postal Address (If same, write AS ABOVE)			
Suburb		State	Postcode
Account name / title		Account Number	
Gender: Male / Female	Date of Birth: / /	Phone:	Email:

I certify the above particulars to be correct and have attached copies of Identification Documents. I have signed in the presence of the certifier or agent.

Signature
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Date
/ /

## Step 2: Identification Document Used - Complete either A or B. Use section C as applicable



### Please Attach Copies of Identification Documents

**Note:** Please ensure that all documents produced **have not expired** (other than a passport that has expired within preceding two years).

**A)** When using a Primary Photographic Document, please select only **one** document type and ensure a copy has been attached.

#### Primary Photographic Document:

- Driver Licence
- Passport
- Proof of Age Card

**B)** If using a Primary Non-photographic Document & Secondary Document, please select **one** primary non-photographic document and **one** secondary document and ensure a copy has been attached.

#### Primary Non-Photographic Document:

- Birth Certificate
- Citizenship Certificate
- Pension Card

#### Secondary Document:

- Notice from the Commonwealth State or Government
- Notice from Australian Taxation Office
- Notice from local Government or Utilities provider
- Notice from School Principal (Minors)

**C)** If a change of name has occurred, please select a change of name document and ensure a copy has been attached.

#### Change of Name:

- Marriage Certificate
- Change of Name Certificate

PLEASE TURN OVER

PLEASE PHOTOCOPY THIS FORM IF YOU NEED MORE COPIES.

If a certified copy of an Identification Document was used in Step 2, please ensure Step 4 is completed before posting forms to Glebe

**Step 3: Anglican Minister of Religion or Agent Authorisation details & Checklist**

The Glebe Administration Board has given general authorisation for Anglican Ministers of Religion from the Diocese of Sydney to act on its behalf as its agents in identifying signatories to Glebe Income Accounts.

**Details of Anglican Minister of Religion from the Diocese of Sydney**

Title	Surname	Given Names	
Address			
Suburb		State	Postcode
Daytime Contact #:			

**IDENTIFICATION PROCESS**

If you answer **no** to any question, the signatory **cannot be identified**. Do not proceed until appropriate documents are provided.

- 1a. I have examined the identification documents selected in Step 2, consisting of:
- i. A *primary photographic document* in the name shown in Step 1
  - ii. A *primary non-photographic and secondary document* in the name shown in Step 1,
- 1b. It is:  i. An Original Document (copy attached)  
 ii. A Certified Copy of Document (attached)
- 2a. Are the identification documents still current and valid? (with the exception of a passport expiring within the past two years)? 2a. Yes  No  N/A
- 2b. Does the name and date of birth or residential address on the identification document correspond to those details provided from the signatory? 2b. Yes  No
- 2c. Has a certified copy / original document that proves the change been provided? (E.g. marriage certificate for change in surname) 2c. Yes  No  N/A
3. If certified documents are presented, is the Certifier from a valid category? (See below) 3. Yes  No  N/A

**Declaration:**

I declare that I have sighted the original or certified copies of the identification documents detailed above. Copies of the documents sighted are attached and submitted with this form. I agree to act as agent of the Glebe Administration Board in identifying the signatory in the manner provided in this form.

Signature	Date
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

**OFFICE USE ONLY:**

If you answer No to any question, the signatory cannot be identified. Follow up appropriate documents.

1. If an Anglican Minister of Religion has performed the identity check, is the Minister listed as a member of clergy in the Diocesan Year Book? Yes  No  N/A
2. Have copies of identification documents been supplied? Yes  No

Initial	Date
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

**Step 4: Certifiers Details**

Title	Surname	Given Name
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**Declaration:** The signatory signed this form in my presence and I have certified that the attached Identification Document copy is a true copy of an original document.

Certifier Category:	Daytime Contact #	Signature	Date
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

**CATEGORIES CERTIFIERS**

A certified copy is a document that has been certified as a true copy of the original document by an authorised person. The categories of person who are authorised to certify documents are as follows:

1. A person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described);
2. A judge of a court;
3. A magistrate;
4. A chief executive officer of a Commonwealth court;
5. A registrar or deputy registrar of a court;
6. A Justice of the Peace;
7. A notary public (for the purposes of the Statutory Declaration Regulations 1993);
8. A police officer;
9. An agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public;
10. A permanent employee of the Australian Postal Corporation with 2 or more years of continuous service who is employed in an office supplying postal services to the public;
11. An Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955);
12. An officer with 2 or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 1993);
13. A finance company officer with 2 or more continuous years of service with one or more finance companies (for the purposes of the Statutory Declaration Regulations 1993);
14. An officer with, or authorised representative of, a holder of an Australian financial services licence, having 2 or more continuous years of service with one or more licensees.
15. A member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with 2 or more years of continuous membership.

**Step 5: Post form with identification document copies to Reply Paid, PO Box Q190, QVB Post Office, NSW 1230**