

Fin One Pty Ltd

ABN: 80 139 719 903 - Australian Credit Licence: 387 528

Phone: 1800 346 663 - Fax: (07) 4723 5466

Postal Address: PO Box 3041, Hermit Park, QLD 4812

## **Customer Identification Verification Form - Individual**

Satisfactory customer verification documents must be provided before we can settle a loan.

CLIENT DETAILS						
Full Name:		Date of Birth:				
Residential Address (not PO Box or C/O address):						
Suburb:	State:		Post Code:			
Occupation:						

An individual's full name and date of birth must be verified with identification information from one document from category 1 or two documents from category 2.

CATEGORY	TYPE OF DOCUMENT	VERIFICATION FIELD			
ONE PHOTOGRAPHIC IDENTITY DOCUMENT					
	Current Drivers Licence OR Note: A current Australian Drivers Licence must be provided if the Customer is obtaining funds to purchase a vehicle or a vehicle is being taken as security	Licence Number:			
1		Issuing Body:			
		Expiry Date:			
	ONE OF: Australian Passport (must not have expired within the last 2 years); current International Passport; Adult Proof of Age Card; National Identity Card	Document Number:			
		Date of Issue:			
		Date of Expiry:			
OR TWO NON-PHOTOGRAPHIC IDENTITY DOCUMENTS					
	Current Medicare Card AND/OR	Card Number:			
		Expiry Date:			
	ONE OF: Birth Certificate; Citizenship Certificate; Pension Card; Healthcare Card AND/OR	Document Number:			
2		Expiry Date:			
	ONE OF: Income Tax Assessment Notice (issued within 12 months); Government Benefits Notice (issued within 12 months); Council Rates or Utilities Notice (issued within 3 months) Note: must match the Customer's name and residential address	Name of Document:			
		Date of Document:			

VERIFIED FROM (please tick)						
	Original Document		Photocopy		*Certified Copy (<3months)	
I confirm that the person presenting these documents is the person identified in the documents. Additionally, I confirm that if the person's identification was not able to be verified using photocopies of the identification documents, I certify that I have sighted the original identification document or certified copy as indicated above, and the supplied information is correct.						
Name	e of Introducer:					
Chec	k Completed By:					
Signature:				Date:		

Please submit this completed form together with the relevant identification documentation to help effect settlement.

\* Certified copies must contain the certifying person's name, qualification, and the date of certification on all pages.

## Note:

- 1. A photocopy of identification documents (front and back) is acceptable at the time of application. A certified copy must however be received prior to settlement, if the person's identification was not able to be verified using photocopies of the identification documents.
- 2. Please do not send copies of Income Tax Assessment Notices to Finance One containing the Customer's full TFN number.