

# Term Deposit Application (Non Personal Customer)



Complete this form, sign and return to Goldfields Money.  
For assistance call us on 08 9021 6444

\* Denotes Mandatory Field

## Type of Account

Please select one type of account only\*

Trust

Association

Business/Company  
(ABN/ACN required)

Registered Body  
(ARBN required)

Superannuation Fund

## Details for Non Personal Accounts

Business / Super Fund / Trust Name	<input type="text"/>
Account Name	<input type="text"/>
ABN / ACN / ARBN (for Bus. / Co. / Registered Body)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Tax File Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> or <input type="checkbox"/> I want to claim an exemption <input type="checkbox"/> I don't want to quote a TFN or claim an exemption

Please note: Quotation is not compulsory but tax may be taken out of your interest if you do not quote your Tax File Number, Australian Business Number or claim an exemption. For more information about the use of Tax File Numbers, please contact the Australian Taxation Office.

**Registered Address (PO Box not accepted)**

Unit Number	Street Number*
<input type="text"/>	<input type="text"/>
Street Name*	<input type="text"/>
Suburb/Town*	<input type="text"/>
State/Territory*	Postcode*
<input type="text"/>	<input type="text"/>
Country*	<input type="text"/>

**Contact Details**

	Country	Area	Number
Home	<input type="text"/>	<input type="text"/>	<input type="text"/>
Work	<input type="text"/>	<input type="text"/>	<input type="text"/>
Fax	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mobile	<input type="text"/>	<input type="text"/>	
Email	<input type="text"/>		

## Account Holder/s or Company Contact/s

**First Account Holder or Business Contact\***  
Please provide the personal and contact details for individual, trustee, proprietor or director.

Title*	Mr	Mrs	Ms	Miss	Dr	Prof
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First Name\*

Middle Name

Last Name\*

**Secondary Account Holder or Business Contact**  
Please provide the personal and contact details for individual, trustee, proprietor or director.

Title*	Mr	Mrs	Ms	Miss	Dr	Prof
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First Name\*

Middle Name

Last Name\*

PRINT

[www.goldfieldsmoney.com.au](http://www.goldfieldsmoney.com.au)



Account Holder/s or Company Contact/s (continued)

**First Account Holder or Business Contact\***

Gender\*  Female  Male

Date of Birth\*  
 DD  MM  YYYY

Position Held\*

Occupation\*

**Residential Address\* (PO Box not accepted)**

Unit Number  Street Number

Street Name\*

Suburb/Town\*

State/Territory\*  Postcode\*

Country\*

**Contact Details\***  
 Please specify at least one phone number for each account holder for information purposes only.

	Country	Area	Number
Home	<input type="text"/>	<input type="text"/>	<input type="text"/>
Work	<input type="text"/>	<input type="text"/>	<input type="text"/>
Fax	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mobile	<input type="text"/>	<input type="text"/>	
Email	<input type="text"/>		

**Second Account Holder or Business Contact\***

Gender\*  Female  Male

Date of Birth\*  
 DD  MM  YYYY

Position Held\*

Occupation\*

**Residential Address\* (PO Box not accepted)**

Unit Number  Street Number

Street Name\*

Suburb/Town\*

State/Territory\*  Postcode\*

Country\*

**Contact Details\***  
 Please specify at least one phone number for each account holder for information purposes only.

	Country	Area	Number
Home	<input type="text"/>	<input type="text"/>	<input type="text"/>
Work	<input type="text"/>	<input type="text"/>	<input type="text"/>
Fax	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mobile	<input type="text"/>	<input type="text"/>	
Email	<input type="text"/>		

**Tax File Number (TFN) or Exemption\***

Please provide the TFN for each account holder/s or business contact/s.

**First Account Holder or Business Contact\***

or I am a non resident of Australia  
 I want to claim an exemption  
 I do not want to quote a TFN or claim an exemption

**Second Account Holder or Business Contact**

or I am a non resident of Australia  
 I want to claim an exemption  
 I do not want to quote a TFN or claim an exemption

Please note: Quotation is not compulsory but tax may be taken out of your interest if you do not quote your Tax File Number, Australian Business Number or claim an exemption. For more information about the use of Tax File Numbers, please contact the Australian Taxation Office.



**Term Deposit Account Details**

**Term Deposit Details**

Deposit Amount\* \$  Interest Rate\* %p.a.

How long would you like to invest?\*  Days  Months  Years

**Interest Frequency\***

At Maturity (for terms 12 mths or less)

Quarterly (for terms >12 mths)

Yearly (for terms > 12 mths)

**How would you like interest paid?\***

Compound at maturity (i.e add to principal)

Pay to my account

**Account for Direct Credit**

Bank Name

Bank Address

BSB    -

Account Name

Account Number\*

PRINT

## Important Privacy Notice

By signing this Term Deposit Application (Non Personal Customer):

I/We acknowledge that any personal information about me/us in my/our application, and any other personal information about me/us collected by Goldfields Money, will be used by Goldfields Money to assess my/our application, and, if approved, to establish and administer my Goldfields Money customer account or accounts if more than one (including all products and services offered by Goldfields Money, such as, without limitation, electronic and other payments, withdrawal and deposit services, loans, Internet Banking, and Phonelink Banking).

Personal information may be disclosed to:

- any person acting on your behalf, including your financial adviser, solicitor or accountant, executor, administrator, trustee, guardian or attorney;
- organisations to whom we outsource certain functions.

I/We agree and consent to Goldfields Money collecting, using and disclosing my/our personal information for this purpose.

I/We acknowledge that if this personal information about me/us is not provided Goldfields Money, it may be unable to process or accept my/our application, or to operate or administer my/our account(s).

I/We agree Goldfields Money may use or disclose personal information collected about me/us for the following other purposes: its administration and management, providing its products and services to me/us, arranging for other organisations to provide products and services to me/us at my/our request, informing me/us about its products or services or those of other organisations, developing products and services, fraud and crime prevention and complying with legislative and regulatory requirements.

I/We understand that Goldfields Money may outsource some functions and may disclose personal information about me/us to service providers, (outsourced functions may include provision of services such as mailing, statement production, information technology, payment and deposit processing, debt collection, legal, insurance, banking and auditing), signatories to my/our account and additional cardholders (if applicable). Subject to the Privacy Act 1988 and this notice, I/we consent to such disclosures and collection of my/our personal information.

Tax File Number - Collection of Tax File Number(s) is authorised, and its use and disclosure are strictly regulated by the tax laws and Privacy Act 1988. Quotation is not compulsory but tax may be taken out of my/our interest if I/we do not quote my/our Tax File Number, Australian Business Number or claim an exemption. For more information about the use of Tax File Numbers, please phone your nearest Tax Office.

## Agree to Terms and Conditions

I/We apply for the products and services listed within this Application Form.

Details Correct - I/We declare that my/our details above are true, complete and correct. I/We acknowledge that these details have been given to Goldfields Money to enable it to decide whether or not to issue the requested products and services to me/us and that Goldfields Money will rely on these details when making its decision.

Joint Accounts - I/We agree that any credit balance in the joint account is owned by all account holders jointly, with the right of survivorship, and that all joint account holders are liable for any money owed on the joint account.

Terms and Conditions - I/We agree to abide by the Terms and Conditions applying to all products or services obtained from Goldfields Money and acknowledge that my/our signature on this application signifies my/our acceptance of these Terms and Conditions and of any applicable Fees and Charges.

## Method of Operation

For joint applicants, please indicate Method of Operation. If no box is ticked, it will be deemed all to sign.\*

Anyone to Sign

All to Sign

Other

## Declaration

I/We acknowledge that my/our signature on this application signifies my/our acceptance of the following:

I/We have received or downloaded and printed a copy of the [Fees and Charges Brochure](#) for future reference. I/We understand that the Terms and Conditions for Terms Deposits and other relevant information, as listed below, is available at [www.goldfieldsmoney.com.au](http://www.goldfieldsmoney.com.au) or by calling 08 9021 6444:

[Product Disclosure Statement](#)

[Personal Savings Bank Account Fees and Charges](#)

[Direct Debit Service Authority](#)

[NetBanking Terms & Conditions Direct](#)

[Phonelink Terms & Conditions](#)

[Financial Services Guide](#)

I/We consent to the use and disclosure of personal information collected about me as indicated in the section titled "Important Privacy Notice".

I/We acknowledge that all correspondence will be sent to my/our address above.

### First Account Holder or Business\*

Signature\*

Print Name\*

Date\*

### Second Account Holder

Signature\*

Print Name\*

Date\*

### Office Use Only

Reference / Transaction No.

AML/CTF Verification Completed by