

# Trust Application (Individual Trustee and Corporate Trustee)

Please select Trustee Type		
Individual Trustee – <b>Proceed to Part</b>	1	
Corporate Trustee – <b>Proceed to Part</b>	2	
PART 1   Individual Trustee		
Individual 1		
Role of applicant: Trustee O	ther (specify):	
Is this person the Primary Contact for this	account? Yes	No
First Name:	Middle Name	2:
Surname:	Date of Birth:_	
Email Address:		
Residential Address:		
Phone number:		
Country of Birth:	_ Country of Resider	nce:
Are you a US citizen for tax purposes?	Yes	No
Ae you a Politically Exposed Person?	Yes	No
Individual 2		
Role of applicant: Trustee O	ther (specify):	
Is this person the Primary Contact for this	account? Yes	No



First Name:	_ Middle Name:	
Surname:	Date of Birth:	
Email Address:		
Residential Address:		
Phone number:		
Country of Birth: Cour	ntry of Residence	::
Are you a US citizen for tax purposes?	Yes	No
Ae you a Politically Exposed Person?	Yes	No
Individual 3  Role of applicant: Trustee Other (some state of the Primary Contact for this account to the primary Contact for		
First Name:	_ Middle Name:	
Surname:	Date of Birth:	
Email Address:		
Residential Address:		
		_
Phone number:		
Country of Birth: Cour	ntry of Residence	x:
Are you a US citizen for tax purposes?	Yes	No
Ae you a Politically Exposed Person?	Yes	No



Individual 4					
Role of applicant:	Trustee	Other (specify)	:		
Is this person the Prima	ary Contact for	this account?	Yes	No	
First Name:		Middl	e Name:		 
Surname:		Date of	Birth:		
Email Address:					
Residential Address:					
Phone number:					
Country of Birth:					
Are you a US citizen fo	r tax purposes	? Yes	ı	No	
Ae you a Politically Exp	oosed Person?	Yes	ı	No	



# PART 2 | Corporate Trustee

Full name of Comp	any <u>:</u>		
Company Type:	Public	Proprietary/Private	Other (specify):
Registered address	s of Compan <u>y:</u>		
Principal place of b	usiness (if an <u>y):</u>		
Date of Incorporati	on <u>:</u>		
Legal Entity Identif	ier (LEI <u>):</u>		
Australian Busines	s Number (AB <u>N)</u>	:	
Australian Compar	ny Number (AC <u>N</u>	):	
If you are a <u>foreign</u>	company, please	e provide the following:	
Name of Regulatin	g body <u>:</u>		
Company Registra	tion Numb <u>er:</u>		
Country of incorpo	ration:		
Business Activit <u>y:</u>			
Director 1			
First Name:		Middle Name:	
Surname:			
Date of Birth:		Country of Birth:	
Email Address:			



Phone number:		
Country of Citizenship or lawful permanent resid	lency:	
Are you a US citizen for tax purposes?	Yes	No
Ae you a Politically Exposed Person?	Yes	No
Director 2		
First Name:	_ Middle Name:_	
Surname:		
Date of Birth:	_Country of Birtl	h:
Email Address:		
Residential Address:		
Phone number:		
Country of Citizenship or lawful permanent resid	lency:	
Are you a US citizen for tax purposes?	Yes	No
Ae you a Politically Exposed Person?	Yes	No
Director 3		
First Name:	_ Middle Name:_	
Surname:		
Date of Birth:		
Email Address:		
Residential Address:		



Phone number:		
Country of Citizenship or lawful permanent resid	lency:	
Are you a US citizen for tax purposes?	Yes	No
Ae you a Politically Exposed Person?	Yes	No
Director 4		
First Name:	_ Middle Name:_	
Surname:		
Date of Birth:	_Country of Birt	h:
Email Address:		
Residential Address:		
Phone number:		
Country of Citizenship or lawful permanent resid	lency:	
Are you a US citizen for tax purposes?	Yes	No
Ae you a Politically Exposed Person?	Yes	No
Beneficial Owners		
Please list any person who owns 25% or more (	either directly or	indirectly) of the corporate trustee.
If there are no individuals who qualify as a benef	ficial owner tick t	this box.
Beneficial Owner 1		
Full name:		Date of Birth:
Residential Address:		



Beneficial Owner 2	
Full name:	Date of Birth:
Residential Address:	
Beneficial Owner 3	
Full name:	_ Date of Birth:
Residential Address:	
Beneficial Owner 4	
Full name:	Date of Birth:
Residential Address:	



# PART 3 | Trust Details

Full name of Trust:	
Full name of business (if any):	
Date of Trust deed:	
Type of Trust:	
Country of Establishment:	
If you have indicated Australia, do you have an ABN/1	FN Exemption: Yes No
If no, please provide the following:	
Australian Business Number (ABN):	
Tax File Number (TFN):	
Trust Beneficiaries:	
Full name:	Date of Birth:
Settlor of the Trust	
At the time the Trust was established did the settlor of	of the Trust make a material asset contribution to
the Trust of less than \$10,000?	es No
If you have answered yes to any of the above regarding	ng the Settlor of the Trust please provide details
of the Settlor of the Trust.	
Full Name:	Date of Birth:



## PART 4 | Bank Account Details

Fill in N/A where not applicable. Any additional information can be filled in the field provided.

Beneficiary Bank			
Bank Country:		Routing Number:	
Bank:		BSB:	_
Account Name:		Sort Code:	
Account Number:		City:	_
Additional Information	:		
Intermediary Bank			
Bank Country:		Routing Number:	
Bank:		BSB:	_
		SWIFT/BIC:	
Account Name:			
			_
Additional Information			
•	g Account Currer	,	
222		J ( <b>-</b> )	
AUD	CAD	EUR	
GBP	SGD	USD	



## PART 6 | Electronic Verification

To enable us to verify your identity, we may disclose personal information such as your name, date of birth and address to a Credit Reporting Agency (CRA) to obtain assessment of whether that personal information matches information held by the CRA and perform identity verification with the document issuer or official record holder. The CRA may give us a report on that assessment and to do so we use personal information about you and other individuals in their files and from the document issuer or official record holder. Alternative means of verifying you are available on request. If we are unable to verify your identity using information by the CRA or from the document issuer or from official record holder we will provide you with notice to this effect and give you the opportunity to contact the CRA and document issuer or official record holder to update your information held by them or verify your identity using alternative method acceptable to us.

Please provide us with the following documentation for Trustee/Director/Beneficial Owners on the account:

### I have included an Identification Documents (ID)

Acceptable documents include: Birth Certification, Driver's License (Front and Back), Passport and National Identity Card.

#### I have included a Proof of residence document

You may use a driver's license or government-issued, non driver's identification or a bank statement (no older than 3 months). If you do not have this, or the address is not current, then you can take pay slips, mortgage statement, rental payment statement, utility bill, etc (no older than 3 months)

#### I have included a Company supporting document (For corporate trustee application only)

You may use Australian Company - registration certificates issued by ASIC, Foreign Company - registration certificates issued by their foreign registration body, verifying: Directors, Shareholders and Share Capital, Certificate of Incorporation, Company Particulars Document – Full Name of the Company, Date of Incorporation, identification of the Registering Body, Company Register. For a SMSF – you must provide: Trust Deed (minimum cover page, schedule, execution page), and any Deeds of Variation. For a Unit or Discretionary Trust you must provide: Trust Deed \*certified\* (Cover page, schedule and execution page with the number of pages certified identified) and any Deeds of Variation.



## PART 7 | Declaration

To apply for a Margin Forex Exchange and Spot Metals account and proceed with ID requirements, please download and ensure you have read the following agreements which are available on our website at <a href="https://www.globalprime.com/legal-documentation/">https://www.globalprime.com/legal-documentation/</a>

- Global Prime FX Product Disclosure
   Statement
- Global Prime FX Financial Service Terms
- Global Prime FX Vanuatu AML Policy

By making this declaration and submitting the application, I acknowledge that I am signing your Terms and Conditions and related documents and that this is a legally binding contractual agreement.

I confirm that I have read and understood the Global Prime FX Product Disclosure Statement, Financial Product Service Terms and Vanuatu AML Policy, and I agree to be bound by these documents. I also confirm that I understand the full nature and risks of trading Forex, CFDs and other derivative products.

Signature:	Signature:
Full Name:	Full Name:
Title:	Title:
Date:	Date:
Signature:	Signature:
Full Name:	Full Name:
Title:	Title:
Date:	Date:

Please email your completed application along with the required documents to support@globalprime.com. If you have any questions, contact us via Live Chat on our website.