Savings Accelerator application



About this form

Figure 1 like to set up a Savings Accelerator, this is the form for you.

Please read the Savings Accelerator Terms & Conditions, available at ing.com.au or by calling 133 464 and consider whether the product is appropriate for you before making any decision in relation to it.

Please: • use CAPITAL LETTERS • use black pen • mark boxes with an X.



Step 1: Your details			
Applicant 1		Applicant 2	
ING client number (if existing client)		ING client number (if existing client)	
Mr Mrs Ms Othe		Mr Mrs Ms Other	
First name	Middle initial	First name	Middle initial
Surname / Family name		Surname / Family name	
Residential address (must be complete	ted. PO Box not accepted)	Residential address (if same as Applicant 1,	please mark this box with an X
Unit number	Street number	Unit number	Street number
Street name		Street name	
Suburb		Suburb	
State	Postcode	State F	Postcode
Mailing address (if same as above, pleas	se mark this box with an X	Mailing address (if same as above, please ma	rk this box with an X)
Unit number	Street number	Unit number S	Street number
Street name (or PO Box)		Street name (or PO Box)	,
Suburb		Suburb	
State	Postcode	State	Postcode
Previous residential address (if you ha	ave been at nour current address for less than 3 years)	Previous residential address (if you have been	en at upur current address for less than 3 years)
Unit number	Street number		Street number
Street name		Street name	
Suburb		Suburb	
-			
State	Postcode	State F	Postcode
Optional section		Optional section	
Tax File Number (TFN) or Exemption	If not supplied, we may deduct tax from interest earned at the highest marginal tax rate plus the Medicare levy.	inte	not supplied, we may deduct tax from erest earned at the highest marginal a rate plus the Medicare levy.



Driver's Licence (if applicable) Driver's Licence (if applicable)	
]
Contact details (you must provide at least one phone number) Mobile phone number Mobile phone number	e phone number)
Other phone number (for landline, please provide area code) Other phone number (for landline, please provide provide area code) Other phone number (for landline, please provide area code)	de area code)
Email Email	
Online statements and account information If you provide an email address, you may nominate to receive statements and account information from us electronically every 6 months and if you opt to receive online statements, you will be notified by email when they are available. Note the online statements you will no longer be sent hard copy statements in the mail. We may also send email notifications about important information relating to your account. You can change your nomination or your email address at any time by not agree to receive electronic online statements and account information I agree to receive electronic online statements and account information	at if you choose to receive ut product updates and other otifying ING.
Mandatory security details Date of birth (dd/mm/yyyyy) Mandatory security details Date of birth (dd/mm/yyyyy)	
Nationality Nationality	
Mother's maiden name (mother's original surname / family name) Mother's maiden name (mother's original surname)	nama / familiu nama)
Motrier's marker marine (motrier's original surname / famility name)	idine / idiniig idine)
Step 2: Your opening deposit	
Please select how you wish to make your opening deposit. Note: The combined total deposits in all your Savings Accelerator ac	count(s) should not exceed \$5 million,
whether in joint or individual names. A. By electronic transfer – Your opening deposit will be transferred from the linked bank account nominated in Step 3. Your opening deposit will be requested from your linked bank account on the day your Savings Accelerator is opened (provided we are able to verify your bank account). If the transfer is from an external bank account, the Debit Authority and Declaration box in Step 6 must also be selected. OR	•
B. By cheque – The cheque must be drawn on the external bank account nominated in Step 3. Your cheque must be made payable to the account holder(s) or to ING. Cheque deposits are not permitted for your opening deposit when linking to an ING account.	•
Step 3: Your linked bank account	
You must link an eligible ING account OR an external Australian bank account (must be in the same name(s) as the app Savings Accelerator. Note: If linking to an eligible ING account, just write: Name of bank: "ING" Suburb: "Sydney" BSB: "923100" Account Number: your ING account number (not your Client Number - your account number can be found on your Account Holder's name on linked bank account: the name(s) on your ING account. Name of bank	, -
Suburb of bank BSB number (mandatory) Account no	umber (mandatory)
Account Holder's name on linked bank account (mandatory - must be the same name(s) as the applicant(s) in Step 1)	

If you have nominated an eligible ING account, you authorise and request ING, a business name of ING Bank (Australia) Limited ABN 24 000 893 292, to transfer money from the ING account nominated above to your Savings Accelerator as instructed by you or any other amounts as instructed or authorised to debit in accordance with the Savings Accelerator Terms and Conditions.



Step 4: Automatic Savings Plan (optional)	
Please complete this section if you would like a fixed amount automatically ton a regular basis. Note: If your linked bank account is an external bank acco	ransferred from your linked bank account into your Savings Accelerator unt, the Debit Authority and Declaration box in Step 6 must be selected.
Yes, I would like to set up an Automatic Savings Plan (ASP) commencing on:	(Your ASP can only commence once your account has been opened and activated.)
Weekly Fortnightly Monthly Amount \$	•
Step 5: Naming your Savings Accelerator (optional)	
You can give your Savings Accelerator a name. Please mark one (X) or write y	jour own name:
Holiday Home deposit Car Retirement Education	Gifts/ Christmas Other
Step 6: Debit authority and declaration	
External Bank Account - Direct Debit Request: By marking the box below wit ING, a business name of ING Bank (Australia) Limited ABN 24 000 893 292 (Usin Step 3, through the Bulk Electronic Clearing Systems, as instructed by me/with the Savings Accelerator Terms and Conditions. I/we understand that this Agreement and the Savings Accelerator Terms and Conditions.	ser ID 123079) to draw money from the External Bank Account nominate us or any other amounts as instructed or authorised to debit in accordanc
Declaration (to be completed by each Applicant) I/we have read and agree to be bound by the Savings Accelerator T&Cs, which incor Signature of Applicant 1	Signature of Applicant 2 (if applicable)
Date (DD/MM/YY)	Date (DD/MM/YY)
For a joint Savings Accelerator	, both applicants must sign.
Adviser use only - Company name Adviser name	
	Adviser number
Adviser - Please provide a copy of records identifying your client(s), if they ar	re not existing ING client(s) • Go to Sten 8
Step 7: Supporting identification document	e not existing in a circle(s) P do to step o
If you are linking to an eligible ING account you do not need to complete this If you are linking to an external bank account, you need to provide a support	'
the following. Note: You must provide an original bank statement for us to r	
A. An original bank statement (less than 6 months old) for your nominate bank account showing your full name and current residential address	
OR	
B. A certified copy of the identification document ► Refer Appendix A (on are an existing ING co	n page 4 of this application form) for how to do this. (Not required if you ustomer. Go to Step 8).
Step 8: What to do when you have completed this form	
When you have completed and signed the application form, please send it w	ith your supporting identification document to us at:

Reply Paid 2682 Sydney NSW 2001 (no stamp required)



Appendix (this section does not apply to Financial Advisers)

As part of the application process, your identity must be verified. If you are not able to provide an original bank statement, you must complete this section to send us an original certified copy of a document which verifies your identity. You must complete all steps in this section. If the application is for a joint account, each applicant will need to provide an identification document (they may have a different certifier).

Step A. Choose identification documents

You need to choose 1 document from the following list Please note that documents will not be returned.

Certified copy document

- Australian Driver's Licence (must be current, shows current residential address and photograph)
- Birth Certificate or Birth Extract (issued by a State or Territory in Australia)
- Proof of Age Card / NSW Photo Card (must be current and show date of birth and photograph)
- Pension Card (must be current and issued by Centrelink entitling financial benefits)
- Australian Tax Office Tax Assessment Notice (issued in the last 12 months and shows current residential address)
- Australian Passport (either a current passport or a passport that expired within the last 2 years)
- International Passport (current, containing a photo and signature and accompanied by translation by a Professional Translator accredited by the National Accreditation Authority for Translators and Interpreters if not in English)

THE IDENTIFICATION DOCUMENT PROVIDED MUST DISPLAY YOUR FULL NAME.

Step B. Select a certifier

Take the original and copy of your identification document to a document certifier from the list below. Ask them to follow the instructions in Step C.

- A Justice of the Peace
- A Bank Officer with 2 or more years continuous service
- An Accountant who is a member of the Australian Institute of Chartered Accountants, CPA Australia or the National Institute of Accountants with 2 or more years of continuous membership
- A Solicitor or Barrister
- A Judge
- A Police Officer
- An agent in charge of, or a permanent employee (with 2 or more years of continuous service) of an Australia Post outlet
- 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.

Note: We are not able to accept doctors, pharmacists or members of the Defence Force as document certifiers. A complete list of ING acceptable document certifiers is available on inq.com.au in the FAQ section.

Step C. Document certifier to complete

To certify the copy of the identification document to be a true copy of the original document, on the copied document complete the following:

- 1. Write these words: "I hereby certify this document is a true copy of the original document shown to me on [date]"
- 2. Sign the copy document
- 3. Provide Name and Certifier Classification (as per Step B). For example; John Smith, Accountant
- **4.** Then complete the following section **▼**

I have examined the identification document of the person(s) listed in Step 1. If ING has any questions regarding this verification, you may contact me at the details provided below (this may be your work or residential contact details).

Document certifier 1		Document certifier 2 (if a	pplicable)
First name	Middle initial	First name	Middle initial
Surname / Family name		Surname / Family name	
Primary phone number		Primary phone number	
Unit number Street number		Unit number	Street number
Street name		Street name	
Suburb		Suburb	
State Postcode		State	Postcode
Certifier classification (as per Step B)		Certifier classification (as per	Step B)
Signature of certifier 1		Signature of certifier 2	
Date (DD/MM,	/YY)		Date (DD/MM/YY)

Note: It is an offence under the Anti-Money Laundering / Counter-Terrorism Financing Act 2006 to provide a false or misleading statement, produce a false or misleading document, to receive an ING product in a false name or to fail to disclose any other name or names you are commonly known by.



Individual foreign tax residency self-certification form



About this form

Individuals banking with us must complete this form to ensure we hold accurate and current information about your foreign tax residency. This form is for personal banking customers, sole traders, guarantors and controlling persons of an entity.

Please return to

customerresolutions.au@inq.com

Why this form must be completed

Australia has enacted laws committing to global standards on the automatic exchange of financial account information - commonly known as the Common Reporting Standard (CRS) and Foreign Account Tax Compliance Act (FATCA).

Under these laws, financial institutions must identify where an account holder is a resident for tax purposes, and report information about financial accounts of foreign tax residents to the Australian Taxation Office (ATO). Tax authorities in participating countries may then exchange this information with each other.

The purpose of the standards is to give participating nations transparency about the financial assets that their residents hold offshore.

If we don't receive your form

As we're bound by legislation, we may be required to treat you as a tax resident in a country outside of Australia (even if you aren't) and report the relevant details to the ATO. If you intend to open a new account, we won't be able to do this for you.

Where to find more information

- Visit the ATO website—ato.gov.au/crs
- · Speak with a professional tax adviser
- See the CRS and FATCA FAQs and glossary—ing.com.au

If you're an entity

If self-certifying on behalf of an entity (which includes businesses, trusts and partnerships), please provide your foreign tax residency information using the form for entity's available at ing.com.au > Entity foreign tax residency self-certification form.

Complete online instead—if you have secure banking access, you can complete self-certification when you log in at ing.com.au and go to My Profile > Foreign Tax Details.

Part 1: Identification of individual			
Existing customer Your ING client number: Please tick this box if you've already completed a valid ING self-certif	ication on or afte	er 1 July 2017, and there hav	ve been no changes to your
foreign tax residency details (please proceed to Part 3).			
General information			
If you are new to ING or you need to provide a new self-certification, pleas		_	
	Residentia	l address	
Given name	Street addre	SS	
Family name	Suburb		
Middle name(s)	State	Country	Postal code
Date of birth (DD/MM/YYYY)			
Bate of Bilding Strain (1997)		ress (if different from above))
	Street addre	ss (or PO Box)	
Place of birth			
Town or city of birth	Suburb		
Country of birth	State	Country	Postal code
Citizenship(s)			
Citizensinp(s)			



Source of wealth and funds

Please select your main source of wealth (i.e. assets and property) and funds from the table below (select only one from each column):

			Source of wealt	h Source of funds
Salary/Wages				
Dividends or income from business				
Divorce settlement				
Family trust/Inheritance				
Donation/Gift				
Grant/Subsidy				
Insurance/Settlement proceeds				
Investment income				
Lottery/Gambling				
Pension/Social benefits payment(s)				
Royalties				
Sale of property or investments				
Spouse/Partner				
Other (please specify)				
Australian & New Zealand Standard Industrial Clas If you are a sole trader, please provide the ANZSIC C ANZSIC Class code and name for popular industries www.abs.gov.au and select Statistics > Classification website under the ANZSIC FAQs at ing.com.au Class (4 digit code) Name	lass code most applicable are provided in the table	e to your business, as pu below. To search throug	ublished by the Australian B h the full list of ANZSIC Clas	Bureau of Statistics. The ss codes available, visit
Danidau in direction				
ANZSIC Class Name Other Social Assistance Services Accounting Services Accounting Services Management Advice and Related Consulting Services Other Health Care Services n.e.c. Other Interest Group Services n.e.c. Computer System Design and Related Services Religious Services Other Professional, Scientific and Technical Services n.e.c. Other Construction Services n.e.c. Other Construction Services n.e.c. Class Code ANZSIC Class Name ANZSIC Class Name ANZSIC Class Name Class Code ANZSIC Class Name Residential Property Operators Engineering Design and Engineering Consulting Services Sports and Physical Recreation Instruction Legal Services Adult, Community and Other Education n.e.c. Creative Artists, Musicians, Writers and Performers Electrical Services Other Professional, Scientific and Technical Services n.e.c. 3299			8211 6931 8219	
If applicable, please select any of the below industrial	tries that the entity oper	rates in:		
Armament services Remittance Reg		Registered online gamb	ling	
Unlicensed gambling Pornographic activities Nor		Non-profit organisation	S	
		Thermal coal-fired power	er plants	
Mountain top removal mining Shell or correspondent banks		•		



Is Australia your sole country of to In general, your tax residence is the coulive, however in some special cases, you than one country. Yes No	intry/jurisdiction in which you	Are you a U.S. Person for tax purposes? A U.S. Person generally includes a citizen or resident of the United States of America. Yes No
Part 2: Country of foreign tax resid	dence and related Taxpayer Id	lentification Number ("TIN")
		esidence or you are a US Person for tax purposes. Otherwise, proceed to Part 3.
Please complete the table below indicati	-	
 each country of tax residency for the country 	•	ia)
•		ber for each country/jurisdiction indicated.
Country TIN		
Note: A TIN is always required (unless in t	he rare case the country does not i	ssue TINs).
Part 3: Declarations		
	erms and conditions and our Privac	ible Terms and Conditions governing the account holder's relationship with cy Policy (available at ing.com.au) which sets out how ING may collect, use
I confirm that I am the individual identifi	ed in Part 1 of this form, or I am au	uthorised to sign on their behalf.
I certify that where I have provided information this form, notify those persons the I have provided the information to IN	nat:	ny other person (such as a Controlling Person) that I will, within 30 days of
'	the ATO and later disclosed by the	ATO to tax authorities of another country or countries in which the person ange financial account information.
I declare that all the statements made a	nd information provided in this for	m are, to the best of my knowledge and belief, correct and complete.
9	9 9	which affects the foreign tax residency status of the individual identified come incorrect, and to promptly provide ING with a suitably updated
Full name		
Signature	Date (DD/MM/YYYY)	
		his form for a Controlling Person of an entity, please indicate the capacity in under authority, please also attach supporting information. Mobile phone



Email