


# Your guide to completing Domestic Proprietary Company's profile

This guide aims to help you verify and update the Domestic Proprietary Company details, as we've noticed the Company has missing or incomplete information in our system. By providing this information, you will better protect the account and help reduce the risk of identity theft.

## Step 1

Complete the required forms listed below and obtain certified copies of identification.

The form is available at [stgeorge.com.au/bizsecure](https://stgeorge.com.au/bizsecure), then go to the Domestic Proprietary Companies Tab under section 'What you need to do'.

Tick	Documents required	Who needs to complete and sign them?
<input type="checkbox"/>	<b>Customer Verification Form - Domestic Proprietary Company</b>	The Director/Secretary of the Company.
<input type="checkbox"/>	<b>Certified ID documents</b>	<p>Director or Secretary and each Beneficial Owner as nominated on the Customer verification form and the Individual (if not a Beneficial Owner) who signed the form.</p> <p>For certification instructions, go to the St.George website and search BizSecure then go to the FAQ section - 'How do I certify my identity?'</p> <p>Refer below for an example of certified ID documents (please ensure the images are clear and easy to read):</p> <ul style="list-style-type: none"> <li>• <b>ONE Primary Photographic Identification Document, for example:</b></li> </ul> <div style="border: 1px solid black; padding: 10px; margin: 10px 0;"> <div style="display: flex; justify-content: space-between;"> <div style="width: 60%;">  <p>Frankie Example 123 Sample Street, SYDNEY, NSW, 2000 Licence number: 12345678 Date of Birth: 01/01/1987 Expiry Date: 23 Feb 2024</p> </div> <div style="width: 35%;"> <p>I, <i>Sam Sample</i>, as a <i>Medical Practitioner</i>, certify that this <i>Driver Licence</i>, is a true copy of the original.</p> <p><i>Sam</i> <b>1 February 2023</b></p> </div> </div> <p>Driver Licence certified and signed by Medical Practitioner.</p> </div> <p>OR</p>

Tick	Documents required	Who needs to complete and sign them?																								
		<p>• <b>ONE Primary Non-Photographic Identification Document and ONE Secondary Identification Document, for example:</b></p> <div data-bbox="624 394 1473 965" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b>BIRTH CERTIFICATE</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;"><b>1 CHILD</b></td> <td>Family name Given name(s) Date of birth Place of birth</td> <td>EXAMPLE Charlie 1 January 1987 Sample Hospital, Sydney</td> </tr> <tr> <td><b>2 MOTHER</b></td> <td>Family name Maiden family name Given name(s) Occupation Age Place of birth</td> <td>EXAMPLE BROWN Leisha Doctor 35 years Sydney, NSW</td> </tr> <tr> <td><b>3 FATHER</b></td> <td>Family name Given name(s) Occupation Age Place of birth</td> <td>EXAMPLE Shaw Electrician 37 years Melbourne, VIC</td> </tr> <tr> <td><b>4 MARRIAGE OF PARENTS</b></td> <td>Date of marriage Place of marriage</td> <td>23 August 1985 Sydney, NSW</td> </tr> <tr> <td><b>5 PREVIOUS CHILDREN OF RELATIONSHIP</b></td> <td></td> <td>Not any</td> </tr> <tr> <td><b>6 INFORMANTS</b></td> <td>Name Address</td> <td>S. EXAMPLE 1 Smith Street, Sydney, NSW 2000 Father</td> </tr> <tr> <td><b>7 REGISTERING AUTHORITY</b></td> <td>Name Date</td> <td>Peter Owen, Registrar 1 January, 1987</td> </tr> <tr> <td><b>8 ENDORSEMENT(S)</b></td> <td></td> <td>Not any</td> </tr> </table> <p style="font-size: small;">Before accepting copies, sight unaltered original. The original has a coloured background.</p> <p style="font-size: x-small;">REGISTRY OF BIRTHS, DEATHS AND MARRIAGES</p> <p style="font-size: x-small;">I hereby certify that this is a true copy of particulars recorded in the Commonwealth of Australia</p> <p style="text-align: right;"><i>Sam</i> Registrar</p> </div> <div data-bbox="1034 450 1394 651" style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p style="text-align: center;"><b>medicare</b></p> <p style="text-align: center; font-size: large;"><b>1234 56789 1</b></p> <p style="text-align: center;"><b>1 Frankie Charlie Example</b></p> <p style="text-align: right; font-size: small;">VALID TO 12/2025</p> </div> <p style="margin-top: 10px;">I, <i>Sam Sample</i>, as a <i>Medical Practitioner</i>, certify that this <i>Australian Birth Certificate and Medicare card</i>, is a true copy of the original.</p> <p style="text-align: right;"><i>Sam</i></p> <p style="text-align: right;"><b>1 February 2023</b></p> <p style="text-align: center;">Birth Certificate and Medicare card certified and signed by Medical Practitioner.</p>	<b>1 CHILD</b>	Family name Given name(s) Date of birth Place of birth	EXAMPLE Charlie 1 January 1987 Sample Hospital, Sydney	<b>2 MOTHER</b>	Family name Maiden family name Given name(s) Occupation Age Place of birth	EXAMPLE BROWN Leisha Doctor 35 years Sydney, NSW	<b>3 FATHER</b>	Family name Given name(s) Occupation Age Place of birth	EXAMPLE Shaw Electrician 37 years Melbourne, VIC	<b>4 MARRIAGE OF PARENTS</b>	Date of marriage Place of marriage	23 August 1985 Sydney, NSW	<b>5 PREVIOUS CHILDREN OF RELATIONSHIP</b>		Not any	<b>6 INFORMANTS</b>	Name Address	S. EXAMPLE 1 Smith Street, Sydney, NSW 2000 Father	<b>7 REGISTERING AUTHORITY</b>	Name Date	Peter Owen, Registrar 1 January, 1987	<b>8 ENDORSEMENT(S)</b>		Not any
<b>1 CHILD</b>	Family name Given name(s) Date of birth Place of birth	EXAMPLE Charlie 1 January 1987 Sample Hospital, Sydney																								
<b>2 MOTHER</b>	Family name Maiden family name Given name(s) Occupation Age Place of birth	EXAMPLE BROWN Leisha Doctor 35 years Sydney, NSW																								
<b>3 FATHER</b>	Family name Given name(s) Occupation Age Place of birth	EXAMPLE Shaw Electrician 37 years Melbourne, VIC																								
<b>4 MARRIAGE OF PARENTS</b>	Date of marriage Place of marriage	23 August 1985 Sydney, NSW																								
<b>5 PREVIOUS CHILDREN OF RELATIONSHIP</b>		Not any																								
<b>6 INFORMANTS</b>	Name Address	S. EXAMPLE 1 Smith Street, Sydney, NSW 2000 Father																								
<b>7 REGISTERING AUTHORITY</b>	Name Date	Peter Owen, Registrar 1 January, 1987																								
<b>8 ENDORSEMENT(S)</b>		Not any																								

## Step 2

Send your completed and certified forms in the post via a Reply Paid envelope, addressed to  
**St. George Business Identification Team**  
**Reply Paid 91348**  
**SYDNEY NSW 2001**

No stamp is required.

If you have any queries, please call our dedicated Business Identification team on **1800 100 238** (or **+61 2 9155 7800** if calling internationally), 9am - 5pm AEST, Monday to Friday.

## Form definitions

### Customer Access Number

Your Customer Access Number can be found on your statement in St.George Internet Banking.

### Beneficial Owner

A Beneficial Owner/Controlling Person refers to the individual(s) that directly or indirectly owns a legal interest in the entity of 25% or more, and/or exercises actual effective control over the entity, whether from an economic or other perspective such as through voting rights.

### Business Classification (ANZSIC)

Australia and New Zealand Standard Industry Code (ANZSIC). Please provide us with the industry of your Business e.g: Real Estate Agent, Milk and Cream Manufacturer and we can find this information for you.

### Australian Financial Services (AFS) licence

- If you carry on a business of providing financial services, you must hold an AFS licence (unless you are exempt or are authorised to provide those services as a representative of another person who holds an AFS licence).
- AFS licence is a 5–9 digit number.

### Address

Please use a street address, not a PO Box.

### Purpose of business relationship

This refers to your reasons for engaging with us to obtain products and services. Customers may have multiple reasons. Please choose all applicable options.

### Source of Funds

This refers to the origin of the funds that are the subject of the business relationship between you and us. Many customers have multiple sources of funds. Please choose all applicable options.

### Source of Wealth

This refers to the origin of your total net assets/total net worth. Many customers will have multiple sources of wealth. Please choose all applicable options.

If you have any queries, please call our dedicated Business Identification team on **1800 100 238** from anywhere in Australia (or **+61 2 9155 7800** if calling internationally) 9am – 5pm AEST, Monday to Friday.

### Accessibility support

At any time, you can inform us how you would prefer to be contacted. If you are deaf and/or find it hard hearing or speaking with people who use a phone, you can reach us through the National Relay Service (NRS). To use the NRS, you can register by scanning the QR Code or visiting [infrastructure.gov.au/national-relay-service](https://infrastructure.gov.au/national-relay-service)

Visit [stgeorge.com.au/accessibility](https://stgeorge.com.au/accessibility) for further information on our accessible products and services for people with disability.



"QR Code" is a registered trademark of Denso Wave Incorporated.

*St.George acknowledges the traditional owners as the custodians of this land, recognising their connection to land, waters and community. We pay our respect to Australia's First Peoples, and to their Elders, past and present.*

© St.George Bank – A Division of Westpac Banking Corporation ABN 33 007 457 141 AFSL and Australian credit licence 233714.  
WBCSTGBIZSECGU11 0323