

Applicant Details Are you a permanent Australian resident? Yes Miss Mr Mrs Ms First name Surname Date of birth Home phone Work phone Mobile phone Email address Residential address (no PO Boxes) Unit No. Street No. Street name Suburb State Postcode Deposit Details With this application I wish to deposit \$ For a period of: 2 Years 6 Months 12 Months On Call Tax Details Tax File Number Reporting Details I require statements issued Monthly Quarterly I require statements to be sent via: Mail E-Mail

Interest Rates & Calculation of Interest

Current interest rates on offer are listed on our website at http://www.allstatesgroup.com Rates listed are subject to change and All States Capital Group reserves the right to change advertised rates without notice. Once this application form has been received by our office and processed, your applicable rate will reflect the rate on offer at the time that the application was received

Interest commences from the date application monies are lodged with All States Capital Group Limited

Interest is calculated daily and credited monthly/quarterly, depending on your reporting requirements as indicated above.

For amounts over \$250,000 special rates can apply. Please enquire at contact@allstatesgroup.com or call (03) 9589 7600 where we can discuss a special rate

Initial Deposit Details

Cheques should be made payable to All-States Capital Group Limited and should be crossed and marked "Not Negotiable"

DIRECT BANK TRANSFER

Monies can alternatively be sent via online transfer:

Bank Details

Name: All States Capital Group Limited

BSB: 083-004

Account Number: 51-517-1108

Please provide your name as the description of the transaction and notify us of the amount and time at which the money was sent

DEPOSITOR APPLICATION FORM

Post: P.O Box 7167 Beaumaris Victoria 3193

☑ Email: contact@allstatesgroup.com

Fax: 03 9589 7611

Before you decide to make any financing or investment decision you are strongly recommended to obtain appropriate professional advice.

ı	Identification					
	100 Points of Identification needs to be attached to this application form. Please provide one form of Primary Identification from the list below and then one/two form(s) of secondary Identification to complete the 100 points. All Identification needs to be Valid, and if Utilities Bills are used, they must be issued within the last three months.					
	Identification must be witnessed. The full list of parties authorised to witness can be found on page two of this application.					
	Please attach one of the following forms of Primary Identification:					
	Valid Australian Full Drivers Licence	60 Points				
	Valid Australian Passport & Valid Utilities Bill	70 Points				
	Valid New Zealand Passport & Valid Utlities Bill	70 Points				
	Valid Australian Full Boat Licence	60 Points				
	Australian Birth Certificate & Valid Utilities Bill	70 Points				
	Australian Marriage Certificate & Valid Utilities Bill	70 Points				
	Please attach one/two of the following forms of Secondary Identification:					
	Valid Australian Bank Credit Card	30 Points				
	Valid Australian Medicare Card	30 Points				
	Valid Utilities Bill (Gas, Electrocity, Phone Service)	30 Points				
	Valid Australian Private Health Insurance Card	20 Points				
	Valid Australian Seniors Card	20 Points				
	Valid Australian Car Registration Papers	20 Points				
	Valid Keypass I.D Card (Registered in Australia)	20 Points				
	Privacy					

We aim to protect your personal information and ensure your privacy. Your confidentiality is important to us and we are committed to respecting the ongoing trust placed in us by you to maining your prvacy.

The information is principally used for matters relating to the administration of your account with All-States Group. It may also be used to contact you in relation to products provided by All States Group, which you request or which we may feel may be of interest to you. It is not sold or given to a third party or made public without your permission except where we are obliged by law to dsclose the information.

You may request access to the information we hold about you. Access will generally be provided except in cases prohibited under the Privacy Act (for example if providing access would prejudice any legal dispute of a commerically sensitive nature with you).

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This application may be signed personally or by the applicant's authorised attorney and if made under Power of Attorney, the donor of such power states that the donor has received no notice of revocation thereof

Signature	X			
Date (DD/MM/YYYY)		/	/	