

Client Services contact details

Phone: 1300 997 774 | International: +(61) 3 9616 8687

Send your form by email: australianunitywealth\_transactions@unitregistry.com.au

Email enquiries: australianunitywealth@unitregistry.com.au

## **Application | SMSF**

#### WHO SHOULD COMPLETE THIS FORM?

This application form is for investments made by trustees of Self Managed Superannuation Funds (SMSF).

#### **HOW TO COMPLETE THIS FORM**

Step 1 Before submitting this form, please read the Product Disclosure Statement (PDS) available on our website <a href="www.australianunity.com.au/wealth">www.australianunity.com.au/wealth</a> or if you are unable to access the link or print the document, contact us on 1300 997 774. Units in a fund will only be issued following acceptance of an application form issued with the relevant PDS, with all required documents attached.

Online applications: Please complete online and then print to sign using a black pen.

Manual applications: Please print, use black pen and write in BLOCK letters. If you make an error do not use correction fluid, instead, cross out your error and initial your changes.

Note: Please ensure all fields are completed including those in sections A, B and C.

#### Step 2 Tell us your foreign tax status

Please complete the Global Tax Reporting (FATCA/CRS) information in section 10.

#### Step 3 Sign and send your documents to the below address.

Please ensure you sign section 12 of the form in accordance with the instructions provided.

You can return your forms by post to:

Australian Unity GPO Box 804 Melbourne VIC 3001

Scan and email to: australianunitywealth\_transactions@unitregistry.com.au

#### Step 4 Make your payment

Please refer to **section 4** and **5** of the application form and follow the instructions on how to pay the application amount. Your application cannot be processed until all relevant identification documents and cleared funds are received.

#### IMPORTANT INFORMATION

- Please ensure all fields are completed. If you do not complete all relevant sections your application may be rejected and returned to you for completion, resulting in a delay in processing your application.
- If you have any questions as you complete this form, please refer to the FAQs of this form, or contact us on 1300 997 774.

Australian Unity AUIL | June 2024 | 1

#### **SECTION A: DDO Obligations**

The following questions may assist Australian Unity in meeting its regulatory obligations by determining whether this financial product is being offered to the stated target market.

The below only needs to be answered where you are a direct [retail] investor (i.e. does not apply to indirect or intermediated investments such as those made by platforms, custodians, etc).

Was this investment made based on personal advice received from your financial adviser?	
Yes - please ensure that details of your financial adviser are completed in section 8	
No - please complete the questions below:	
Please read and answer the following questions carefully: It is important for you to consider if the fund you are applying to invest in is in line with your needs and objectives for the portion of your investment portfolio that you intend to invest in this fund. In other words the questions below should be answered having regard to what you are seeking from this particular investment - not what you may be seeking more generally from your overall investment portfolio as a whole.	,
All financial products provide different features, objectives, risks and return profiles.	
You can understand more about the specific objectives and outcomes that the fund seeks to accomplish and to determine whether the fund is appropriate for your needs by consulting the fund's PDS.	ne
The following questions assist the issuer in meeting its regulatory obligations by enabling it to assess whether the selected fund is be offered to the stated target market. We reserve the right to refuse your application.	eing
A. What is your primary investment objective in relation to this investment? (select only one option)	
You are seeking an investment which provides Capital Growth Capital Growth, also known as capital appreciation or capital gain, refers to an increase in the value of an asset over time. Capital Growth is not guaranteed, and the value of an investment can also decrease, resulting in capital losses. You should consider the amount of risk you are willing to accept to achieve a capital growth, (or loss) outcome. If you are primarily seeking capital growth with some income, please select Capital Growth for Question A, and Yes for Question B.	
You are seeking an investment which provides Capital Preservation  A Capital Preservation strategy is a strategy employed by certain types of investment funds with the primary objective of protecting the capital invested. Generally, funds designed to provide Capital Preservation have a lower risk profile and are less volatile than growth investments. You should consider if you are willing to accept lower returns (growth or income) as a result of choosing a fund with a lower risk profile.	
You are seeking an investment which provides Income Distribution Income Distribution refers to the income generated from the assets within a fund that is regularly paid out or distributed to investors periodically. The level of income generated will typically change each period and there is no guarantee of income being available each period.	

B. Are you seeking a source of supplemental income (which may not be regular or recurrent) in addition to the above investment objective? (selct only one option)	
Note: If your primary objective is Capital Growth or Capital Preservation, but you are also seeking the potential for income supplemental to those object select 'Yes'. If Income Distribution is your primary investment objective, please select Income Distribution in Question A, and 'No' for Question B.	otives,
Yes	
No No	
C. What is your investment timeframe in relation to this investment? (select only one option)	
Equal to 7 years or more (i.e. Long term)	
Equal to 5 years but less than 7 years (i.e. Medium to long term)	
More than 2 years but less than 5 years (i.e. Medium term)	
Up to and including 2 years (i.e. Short term)	
D. Under normal circumstances, within what period do you expect to be able to access your funds for this investment? (select only or option)	те
At issuer's discretion	
Within ten years of the request	
Within five years of the request	
Within one year of the request	
Within three months of the request	
Within one month of the request	
Within one week of the request	

E. In relation to this investment, which investment risk and return profile best describes you? (select only one option)	
We note again, that this question is in relation to this investment in particular, and not to your overall risk and return profile. In other words, what rare you expecting the fund to play in your overall portfolio.	ole
I am seeking a fund with a low risk and return profile: You are looking for an investment that is low risk in nature (e.g. you have the ability to tolerate up to one negative return over a 20-year period and you are comfortable with a low target return from this investment. Funds designed to provide low risk and return typically provide capital preservation and invest in cash or cash like investments).	
I am seeking a fund with a medium risk and return profile: You are looking for an investment that is moderate or medium risk in nature (e.g. you have the ability to tolerate up to four negative returns over a 20-year period and you are comfortable with a moderate target return from this investment. Funds designed to provide a medium risk and return are typically invested in defensive assets, such as fixed income products).	
I am seeking a fund with a high risk and return profile: You are looking for an investment that is higher risk in nature (e.g. you have the ability to tolerate up to six negative returns over a 20-year period in order to achieve a higher target return from this investment. Funds with a high risk and return are typically invested in growth assets which include shares and property investments).	
I am seeking a fund with a very high risk and return profile:  You are looking for an investment that is very high risk in nature (e.g. you have the ability to tolerate six or more negative returns over a 20-year period as you are seeking to maximise returns and you can accept higher potential losses. Products with Very High risk and return are typically higher conviction portfolio such as concentrated share funds, hedge funds and other growth alternative assets).	
I am seeking a fund with an extremely high risk and return: You are looking for an investment that is extremely high risk in nature (e.g. you can accept significant volatility and losses as you are seeking to obtain accelerated returns (potentially in a short timeframe). Products with an extremely high risk and return proile are typically speculative investments in niche asset classes such as crypto assets).	
F. What percentage of your total investable assets are you directing into this fund (i.e. the total assets you have available for investable assets are you directing into this fund (i.e. the total assets you have available for investable assets are you directing into this fund (i.e. the total assets you have available for investable assets are you directing into this fund (i.e. the total assets you have available for investable assets are you directing into this fund (i.e. the total assets you have available for investable assets are you directing into this fund (i.e. the total assets you have available for investable assets are you directing into this fund (i.e. the total assets you have available for investable	stment,
excluding your residential home)? (select only one option)	
Satellite allocation (up to 10%)	
Minor allocation (up to 25%)	
Core component (up tp 50%)	
Major allocation (up to 75%)	
Solution/Standalone (up to 100%)	
G. Where did you obtain your application form? (select only one option)	
Fund Manager Website	
Financial Adviser	
Referred by a friend/colleague	
Advertisement	
Other	

Section B: Investor details	
What is the full legal name of the entity that will hold title to the units?	
Full name of account designation	
If you are an existing investor, please provide your account number	
I/We confirm there are no changes to our identification docume	nts previously provided and that these remain current and valid.
I/We confirm there are no changes to the information in our prev	vious application provided and that it remains current and valid.
Section C: Are you investing using funds borrowed under a margin l	oan?
No - go to <b>section 1</b> Yes - please complete the d	etails below
Name of margin lender	Name of borrower
Borrower's TFN	Loan number
If the person who will hold legal title to the units will be the borrower gr complete this form as an SMSF.	ranting Power of Attorney to the margin lender or its nominee, please
1. TRUST/FUND DETAILS	
Full name of trust/superannuation fund	
Full business name (if any) of the trustee in respect of the trust/superc	annuation fund
Country of establishment	
Tax file number or exemption code	Australian Business Number (if any)
2. TRUSTEE DETAILS	
2. INCOTEL DETAILS	
<b>Note:</b> A Self-managed Super Fund (SMSF) must have a minimum of t individual or corporate. Where the trustee is corporate, all members than four (4) trustees, please complete <b>section 2</b> of another applicat	
How many trustees does the SMSF have?	
Type of trustee	
Individual trustee (complete section 2.1)  Corporate	e trustee (complete section 2.2 & 2.3)

2.1 Individual trustee(s) details			
Individual trustee 1			
Title Given name(s)		Surname	
Date of birth (DD/MM/YYYY)	Occu	pation	
Residential address - (A PO Box/RMB/Locked Bag is not accept	able)		
Unit Street number Street name			
			_
Suburb	State	Postcode	Country
Contact details	Mahila		
Home number (including country and area code)	Mobile nu	mber (including co	buntry codej
Email (default address for all correspondence)			
Email (default address for all correspondence)			
Individual trustee 2			
Title Given name(s)		Surname	
Date of birth (DD/MM/YYYY)	Occu	pation	
Residential address - (A PO Box/RMB/Locked Bag is not accept	able)		
Unit Street number Street name			
Suburb	State	Postcode	Country
Contact details	Maletta	andron Corollado	
Home number (including country and area code)	Mobile nu	mber (including co	buntry codej
Email			
Emui			
All correspondence will be sent to the email address provided b	y <b>Individual truste</b> e	<b>1</b> .	
Individual trustee 3			
Title Given name(s)		Surname	
Date of birth (DD/MM/YYYY)	Occu	pation	

Unit	ddress - (A PO Box/RMB/L Street number	Street name	ершыеј			
Suburb			State		Postcode	Country
						Ţ
Contact deta	ils					
	r (including country and a	rea code)		Mobile nu	umber (includin	g country code)
Email						
All correspon	dence will be sent to the e	mail address provide	d by <b>Individ</b>	ual truste	e 1.	
Individual tru	stae 4					
					C	
Title	Given name(s)				Surname	
Date of birth	(DD/MM/YYYY) /	/		Оссі	upation	
Residential a	ddress - (A PO Box/RMB/L	ocked Baa is not acc	entable)			
Unit	Street number	Street name	оргавіој			
Suburb			State		Postcode	Country
Contact deta	ile					
	r (including country and a	rea code)		Mobile nu	umber (includin	g country code)
						-
Email						
All correspon	dence will be sent to the e	mail address provide	d by <b>Individ</b>	ual truste	e 1.	
22 Cornor	ate trustee details					
Full business	name as registered by AS	SIC		ACN		
Nature of bus	iness					
Registered O	ffice Address - (PO Box is r	not acceptable)				
Unit	Street number	Street name				
Suburb			State		Postcode	Country
				_		

Principal plac	<b>e of business</b> (if any) (PO E	Box is not acceptable)					
Unit	Street number	Street name					
Suburb			State		Postcode	Country	
Contact detai	<b>ls</b> (for company or contact	t person)					
Name			Er	nail			
Business num	ber (include country and c	rea code)	М	obile nu	ımber (include c	ountry code)	
0.0 Whatte		t tt0					
2.3 What ty	pe of company is the corp	orate trustee?					
Public (comp	anies whose name does N	OT include the word P	ty or proprie	tary; ge	enerally listed co	mpanies)	
Proprietary (	companies whose name er	nds with Proprietary L	td or Pty Ltd	l; also ki	nown as private	companies)	
Please comple	ete the director details belo	ow if you are an Austro	alian proprie	tary co	mpany. Do not c	omplete for public compo	anies.
Directors deta	nils						
How many dir	ectors are there?						
	e below the full name of all this application form.	the directors. If there	are more the	an four	directors, please	e complete the details on	a separate sheet
Director 1							
Title	Given name(s)			_	Surname		
Director 2							
Title	Given name(s)				Surname		
Director 3	O. (.)						
Title	Given name(s)				Surname		
Director 4					_		
Title	Given name(s)				Surname		

#### 3. INVESTMENT AND DISTRIBUTION INSTRUCTIONS

Specify your initial application amount.

The minimum investment amount is \$5,000 per fund. Indicate your distribution choice below. If you do not make an election, distributions will be reinvested.

Fund name	APIR	Investment	<b>Distribution option</b> (indicate (X) one option per fund)		
runa name	APIK	amount (Minimum AUD \$5,000)	Pay to my bank a/c	Reinvest	
Australian Unity Property Income Fund - Wholesale	Y0C0100AU				
Please indicate the source & origin of funds being invested.					
Savings					
Superannuation contributions					
Income from employment - regular and/or bonus					
Normal course of business					
Investment					
Donation/gift					
Inheritance					
Sale of assets (e.g. shares, property)					
Other					

4. PAYMENT OF A	APPLICATION AMOUNT	
Select your payme	nt method and complete the relevant section if ap	oplicable. All payments must be made in AUD.
EFT	Direct debit	
EFT	Electronic Funds Transfer	
Account name:	SS&C GIDS TRANSFER AGENCY (AUSTRALIA) PT	TY LTD AS AGENT FOR AUSTRALIAN UNITY INVESTMENTS LIMITED
BSB:	083-001	
Account number:	898586895	
Your reference:	[please use the name of the investor and investo	r number]
Direct debit author	ity - Australian bank accounts only	
	ow. This debit will be made through the Bulk Electi	our nominated financial institution account by completing the direct ronic Clearing System (BECS) from your account held at the financial
completing this sec	ction, you have understood and agreed to the terr	nal service provider to process your application and payment. By ns and conditions governing the debit arrangements between you s request and in your Direct Debit Request Service Agreement.
Financial institution	n name	Branch name
Account name		
BSB number		Account number
	3 761 561 (User ID 628110) to arrange, through its ninistrator.	Pty Ltd ABN 18 107 333 308 as agent for Australian Unity Investments own financial institution, a debit to the nominated account as deemed
Please print full na	me	Date signed (DD/MM/YYYY)
Signature of joint a	ccount holder (if applicable)	
Please print full na	me	Date signed (DD/MM/YYYY)

## 5. FINANCIAL INSTITUTION ACCOUNT DETAILS Australian bank account details Please provide your bank account details if you have selected to take your distribution in cash or wish to provide these details for future redemptions. We will only pay cash proceeds to a bank account in the name(s) of the investor(s). We will not make any payments into third party bank accounts. Branch name Financial institution name Account name BSB number Account number Foreign bank account details Financial institution name Financial institution address Account number Account name SWIFT/BIC ABA/FED (US) IBAN (Europe) 6. REGULAR SAVINGS PLAN I/We would like to establish a regular savings plan Monthly investment amount AUD\$ (minimum \$100 per month). Please complete the direct debit request in section 4 (Payment of application amount) above. 7. COMMUNICATION Automatic online account access Online access enables you to view details of your investments (account balance, investment details and account statements). We will send

you the necessary registration details by post once your application is processed.

Note: You may receive marketing material (e.g. market commentary, event invitations) from us, from time to time. Please indicate if you do not wish to receive these communications.

#### Annual & semi-annual report options

The annual and any semi-annual financial statements of the fund are available free on our website. If you would like to receive a copy by post or email, please indicate below. (This refers to annual and semi-annual reports only. This will not affect communication instructions regarding general correspondence for your fund).

By email	By post

Marketing material	
services or information that may be of interest to you. By provid	r other electronic messaging service relating to market commentary, ing us with your contact details you consent to being contacted by wish to receive marketing information from us or any companies within
8. FINANCIAL ADVISER DETAILS	
Use this section to tell us about your financial adviser. If you change user to receive copies of your stater	
Adviser email address	
Operating your account	
Do you want your financial adviser to be able to operate your account	?
No	
Yes - Please complete <b>section 9</b> (Authorised representative of in	vestor).
In general, an appointed financial adviser can do everything you can a your account. It is important to tell us promptly if you no longer wish adviser changes - OneVue will keep accepting their instructions until terminated.	your financial adviser to operate your account, or if your financial
We may suspend or terminate their appointment for any reason consi your account.	dered reasonable, and may change the terms on which they operate
You indemnify us from any loss you or we suffer as a result of the acti actions if we ask.	ons of your appointed financial adviser, and agree to ratify their
<b>Notice to financial adviser:</b> by completing this section of the application of the application of the section of the application of the applicati	ation form, you are confirming that you hold a current Australian lvise on and arrange this product.
Details	
AFSL holder name	AFSL number
Adviser name	
Advisor code or Authorised representative number	ABN
Dranatu/huilding nama	
Property/building name	
Unit Street number Street name	
Suburb State	Postcode Country
Phone	Mobile

Performance of investor identification & verification procedures
Please indicate below whether client identification and verification procedures have been performed.
No - I have not performed the applicable customer identification procedure on this investor.
Yes - I have completed the applicable customer identification procedure on this investor.
Financial adviser declaration
Notice to financial adviser: please note that reliance on the KYC performed by the financial advisor is only acceptable if all the criteria below is met.
I hold an AFSL in my own name or have been appointed as an authorised representative by the licensee.
I am a reporting entity for AML/CTF purposes.
The issuer has reasonable grounds to believe that it is appropriate to rely on the KYC procedure I have undertaken.
I have attached the KYC documents to this form.
AFSL full legal entity name  AFSL number  Please print full name
Fredse print full fluttle
Signature
9. AUTHORISED REPRESENTATIVE OF INVESTOR
Please complete this section if you wish to appoint an individual or individuals to act on your behalf in relation to your investment in the fund. If you have appointed an entity as your authorised representative, please contact us on 1300 997 774 to obtain the relevant KYC form.
9.1 Authorised representative details
Authorised representative 1
Title Given name(s) Surname
Authorised representative's phone number
Email
Authorized representative's signature
Authorised representative's signature

Authorised re	epresentative 2			
Title	Given name(s)		Surname	
Authorised re	epresentative's phone number			
Email				
Authorised re	epresentative's signature			
If you wish to application f	o appoint more than two authorised representatives, please comorm.	plete	the details on a separate sheet and attach to this	
9.2 How at	uthorised representatives may act in relation to the account?			
Tick applica	able			
Each autho	rised representative listed above may provide instructions in rel the other	ation	to the investment individually without the	
All authoris	ed representatives must act jointly to provide instructions in rel	ation	to the investment	
Other arran	gement - please provide details			
9.3 Verific	ation procedure for authorised representatives who are individu	ıals		
For each au	thorised representative, please provide verification documents. ive's authority to act on behalf of the investor. Please tick the do	In ad		
Verification	documents - mandatory			
A certified o	copy of an Australian Driver's Licence or Australian Passport			
Authorised	representative's authority - one of the following (not required fo	r a Fii	nancial Adviser listed in <b>Section 8</b> )	
Certified co	py of the authorising document (e.g. POA); or			
A certified o	copy of a guardianship order; or			
Other arran	gement - please provide details			
I confirm	n that the document authorising each authorised representative	e is st	ill valid and has not been revoked.	
	y verification documents provided are written in a language other prepared by an accredited translator.	er tha	n English, they must be accompanied by an English	

#### 10. GLOBAL TAX REPORTING REQUIREMENTS (FATCA/CRS)

#### Why you need to complete this section?

The Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) are regulatory requirements that aim to deter tax evasion by US and other foreign taxpayers. The Australian and a number of other foreign Governments have an agreement which requires us to obtain certain information from investors, including taxation information. You may be liable to a penalty if you provide information that is false or misleading that is material. We may decide not to open an account without first receiving the required information. For more information, visit <a href="https://www.ato.gov.au">www.ato.gov.au</a>.

If you are unsure of any of the answers, please contact a legal or accounting professional.

# 10.1 Regulated Superannuation Funds Are you a regulated superannuation fund?

I am the trustee of a regulated superannuation fund (this includes a self-managed superannuation fund)

#### HELP

**Regulated superannuation fund** means self-managed superannuation funds, APRA regulated superannuation funds, Australian Government or semi-government superannuation funds and pooled super trusts.

#### 11. DECLARATIONS & ACKNOWLEDGMENTS

Please read the declarations below before signing this form. The required signature(s) are detailed at the bottom of this form. When you apply to invest, you (the applicant) are telling us:

- to the best of your knowledge, all details in this application (including all related documents provided) are true, correct and complete
- you have received, read and understood the current PDS. You agree to be bound by the constitution of the fund, the PDS as supplemented, replaced or re-issued from time to time
- you are not bankrupt or a minor, and are authorised to sign this form
- you have received and accepted this offer in Australia
- you have read and understood the information relating to privacy in the PDS
- I consent to the issuer disclosing my personal information to any issuer's service providers, in relation to any identification and verification that the issuer is required to undertake on me, as required under the AML/CTF Act. This shall include any information:
  - o required by any third party document verification service provider, and/or
  - o provided to any third party document verification service provider.

#### By applying to invest you also acknowledge that:

- monies deposited are not associated with crime, money laundering and/or financing terrorism. We may decide to delay or refuse any
  request or transaction, including by suspending the issue or redemption of units. If we are concerned that the request or transaction
  may breach any obligation of, or cause us to commit or participate in an offence under any AML/CTF and Sanctions Law and FATCA/
  CRS obligations, we will incur no liability to you if we do so
- we may take other action we reasonably believe is necessary to comply with AML/CTF and Sanctions Law and FATCA/CRS
  obligations, including disclosing any information held about you to any of our related bodies corporate or service providers whether
  in Australia or outside Australia, or to any relevant Australian or foreign regulator, and
- we collect additional information about you from time to time, from you or from third parties, for the purposes of satisfying AML/CTF and Sanctions Law and FATCA/CRS obligations, and that any such information may be used and disclosed as described in Australian Unity's privacy policy available online at <a href="https://www.australianunity.com.au/privacy-policy">www.australianunity.com.au/privacy-policy</a> or by contacting us.

#### Important information

- nothing in this form is advice and 'help' is general guidance only. Seek professional advise to be sure of your answers
- it is a condition of investing that you keep your details (including tax detail) with us, up to date. We recommend that you review this tax information form at the end of the financial year and update your details if required. You must contact us when you learn new things about the matters in this form. Failing to update us can have tax and other consequences. You can update us by requesting and completing this form and emailing, faxing or posting it to our Administrator.

#### By completing and signing this form:

- you represent having read and understood this form
- you represent this form is complete and accurate
- if you have applied for but not received your TIN or GIIN, you undertake to inform us within 30 days of receiving it
- you undertake that if information in this form changes, you will tell us within 30 days
- you declare that to the best of your knowledge and belief the information provided in the Global Tax Reporting section is true and correct
- you agree to notify Australian Unity of any changes to your tax residency or that of any beneficial owners or controlling person.

#### 12. SIGNATURE(S)

For individual trustees, all trustees to sign. For Australian corporate trustee, the signature(s) of either a sole director, or two directors, or one director and the company secretary.

Signature 1	Signature 2			
Signature	Signature			
Date signed (DD/MM/YY)	Date signed (DD/MM/YY)			
Full name	Full name			
Capacity	Capacity			
Individual trustee 1	Individual trustee 2			
Director	Director			
Company Secretary	Company Secretary			
Authorised Representative	Authorised Representative			
Signature 3	Signature 4			
Signature	Signature			
Date signed (DD/MM/YY)	Date signed (DD/MM/YY)			
Full name	Full name			
Capacity	Capacity			
Individual trustee 3	Individual trustee 4			
Director	Director			
Company Secretary	Company Secretary			
Authorised Representative	Authorised Representative			

#### **FAQs**

## Translating documents by an accredited translator

In Australia an accredited translator means a professional translator accredited by the National Accreditation Authority for Translators and Interpreters at or above professional level.

• NAATI (https://www.naati.com.au/)

In an overseas country, an accredited translator is a professional translator accredited by a NAATI equivalent authority. For these, escalate to the AML Compliance Officer for assistance.

## Getting your copies certified

Any document(s) requiring to be certified for verification purposes must be certified by an eligible person to be a true copy of the original document. Documents must be either certified on all pages or certified on the front page with a clear reference to the number of subsequent pages that are included.

### Example of certification

I certify that this is a true and correct copy of the original document

Signature of Certifier Name of Certifier

Capacity of certifier - e.g. Justice of the Peace

Date of certification (DD/MM/YYYY)

#### List of occupations that can certify (from the Statutory Declaration Regulations 2018)

- Architect
- Chiropractor
- Dentist
- Financial adviser or financial planner
- · Legal practitioner
- Medical practitioner
- Midwife
- Migration authorised representative registered under Division 3 of Part 3 of the Migration Act 1958
- Nurse
- Occupational therapist
- Optometrist
- Patent attorney
- Pharmacist
- Physiotherapist
- Psychologist
- Trade marks attorney
- Veterinary surgeon.

## List of persons who can certify

- a person who is enrolled on the roll of the Supreme Court of a State or Territory or the High Court of Australia, as a legal practitioner (however described)
- a judge of a court
- a magistrate
- a chief executive officer of a Commonwealth court
- a registrar or deputy registrar of a court
- a Justice of the Peace
- a notary public (for the purposes of the Statutory Declaration Regulations 2018)
- a police officer
- an authorised representative of the Australian Postal Corporation who is in charge of an office supplying
  postal services to the public
- a permanent employee of the Australian Postal Corporation with 2 or more years of continuous service who is employed in an office supplying postal services to the public
- an Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955)
- an officer with 2 or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 2018)
- a finance company officer with 2 or more continuous years of service with one or more financial companies (for the purposes of the Statutory Declaration Regulations 2018)
- 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
- a member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with 2 or more years of continuous membership.