



AgBiz Drought Loan

Application form

Application tips

- Do not leave any response areas blank
- If there are response areas that are not applicable simply make a line through it with a pen before signing this application form
- All personal information submitted within this form should match exactly with ASIC and your certified proof of identification documents
- If you have any questions please contact our team on 1800 875 675
- The Regional Investment Corporation (RIC) can't start assessing your application until we get all the information we ask for, including attachments from the AgBiz Drought Loan Document Checklist below and on page 2

AgBiz Drought Loan Document Checklist	Attached	Comments
Financial statements for at least the past three (3) years for all entities associated with this application. These should include accountant prepared: <ul style="list-style-type: none"> • profit and loss statement • balance sheet • depreciation schedules. Note: An application must be supported by the most recent finalised financial statements that are to be no more than 18 months old at the time of the RIC loan assessment.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	
Taxation returns – The three (3) most recent Taxation returns (business and personal) for all entities and individuals associated with this application. Note: Taxation assessment notices are not acceptable.	Yes <input type="checkbox"/>	MUST BE ATTACHED
If the organisation contains more than three (3) entities supply a diagram structure showing the interrelation of each entity.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	
Australian Taxation Office (ATO) Integrated Client Account Statement (previous 12 months) for all business entities and individuals associated with this application. These can be obtained from your accountant.	Yes <input type="checkbox"/>	MUST BE ATTACHED
Year-to-date income and expenditure including the last complete month for this financial year and a monthly cash flow budget for the remaining months of this financial year.	Yes <input type="checkbox"/>	MUST BE ATTACHED
Monthly cash flow projections (i.e. budget) including: <ul style="list-style-type: none"> • figures for the next financial year, and • future forecasts of cash flow for 3+ years including year in year out budget Note: A template is available on the website www.ric.gov.au/agbiz-drought	Yes <input type="checkbox"/>	MUST BE ATTACHED
Aged creditor list	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	
Aged debtor list	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	
<i>If Trusts are involved in the business structure</i> – A full (executed, signed and certified) Trust Deed and any amending supplementary deed (executed and dated) for ALL trusts involved in the business structure.	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	
Rates notices for all properties owned	Yes <input type="checkbox"/>	MUST BE ATTACHED
Water licences current copies	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	
<i>For loans being refinanced</i> – Past 12 months bank statements for all loans being refinanced	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	
<i>For all other loans and other commercial debts (i.e. those not being refinanced)</i> – The borrower's and guarantor's loan account statements for the past 12 months	Yes <input type="checkbox"/> N/A <input type="checkbox"/>	
The borrower's and guarantor's transactional account statements for the past 12 months. This includes overdrafts, trading accounts and 'day-to-day' accounts.	Yes <input type="checkbox"/>	MUST BE ATTACHED

AgBiz Drought Loan Document Checklist	Attached	Comments
Evidence of Australian citizenship or permanent residency for one or more members of the farm business.	Yes <input type="checkbox"/>	MUST BE ATTACHED
Certified copies of Proof of Identity documents for all individuals associated with this application (see page 17 for details).	Yes <input type="checkbox"/>	MUST BE ATTACHED
Certified copies of Verification of Identity documents for all individuals associated with this application (NSW, QLD, SA, VIC and WA only, see page 18 for details).	Yes <input type="checkbox"/>	MUST BE ATTACHED

Are you eligible to apply?

To be eligible to apply for an AgBiz Drought Loan, the following criteria must be met.

The farm business **must**:

- have a substantial part of the turnover of the business from supplying goods or services relating to primary production to farm businesses in an affected area
- be in financial need for a concessional loan as a consequence of drought affecting farm businesses in drought areas. There must have been:
 - a material reduction in the turnover of the small business, or
 - a material increase in unsecured debts to the small business by farm businesses.
- owe commercial debt
- throughout the 6 months before applying for the loan have fewer than 20 employees other than casual employees
- not be a farm business
- be assessed by the Regional Investment Corporation (RIC) as financially viable, or have sound prospects of a return to financial viability within the term of the loan
- be assessed by the RIC as having the capacity to repay the loan
- provide sufficient security for the loan
- operate as:
 - a sole trader who is an Australian citizen or permanent resident, or
 - a partnership, at least one of the partners in which is an Australian citizen or permanent resident, or
 - a trust, at least one of whose beneficiaries or unit-holders is an Australian citizen or permanent resident, or
 - a corporation (within the meaning of the *Corporations Act 2001* (Cth)) other than a public company (within the meaning of that Act), at least one of whose members is an Australian citizen or permanent resident
- be registered for tax purposes in Australia with an ABN and be registered for GST
- not be under external administration or bankruptcy
- **AND** at least one member of the small business must under normal circumstances, contribute 75% of their labour to the small business and earn at least 50% of their income from the small business.

Before you complete this form

Before completing this form we encourage you to read the *AgBiz Drought Loan Guidelines* available on the RIC website www.ric.gov.au/agbiz-drought

It is important that you fully complete this form and attach all the documents requested as part of the application. An incomplete application will delay the processing time. If you are completing this form by hand and make a mistake, please initial each and every correction you make. Do not use white out on this form.

Need assistance?

Contact the RIC by:

- calling 1800 875 675
- emailing applications@ric.gov.au
- completing the online contact form at www.ric.gov.au/about/contact-us

Lodging your form

Lodge your completed application, and all supporting documents, by

- emailing to applications@ric.gov.au
- mailing to **The Regional Investment Corporation**
PO Box 653
Orange NSW 2800

PART A – Applicant details

Full name of applicant (as per ABN registration)

ABN

ACN (if any)

ARBN (if any)

Primary business activity

Date name registered (if applicable)

Principal place of business (PO Box not accepted)

State

Postcode

Postal address (if different)

State

Postcode

Contact person's details for this application (these are the details of the applicant that we use as the main contact)

Title

Given name(s)

Surname

Telephone

Email

Tick if Sole Trader **Sole Traders – go to Part F**

PART B – Eligibility

Is a substantial part of your small business income derived from supplying goods or services relating to farm businesses in affected areas?

No **You are not eligible to apply**

Yes

In the 6 months before completing this form, has your small business had fewer than 20 employees (not including casual employees)?

No **You are not eligible to apply**

Yes

Does your small business operate as:

- a sole trader who is an Australian citizen or permanent resident, or
- a partnership, at least one of the partners in which is an Australian citizen or permanent resident, or
- a trust, at least one of whose beneficiaries or unit-holders is an Australian citizen or permanent resident, or
- a corporation (within the meaning of the *Corporations Act 2001* (Cth)) other than a public company (within the meaning of that Act), at least one of whose members is an Australian citizen or permanent resident?

No **You are not eligible to apply**

Yes

Is your small business:

- registered for tax purposes in Australia with an ABN, and
- registered for GST?

No **You are not eligible to apply**

Yes

Does your small business owe commercial debt?

No **You are not eligible to apply**

Yes

Is your small business under external administration or bankruptcy?

No

Yes **You are not eligible to apply**

Is your small business a farm business?

No

Yes **You are not eligible to apply**

Will you be able to supply three (3) years past financial statement and tax returns?

No Please explain why

Yes

Business description

Provide a detailed description of your small business including how it is structured, its products, client base etc.

Note: Your small business must not be a farm business.

If you need more space, attach a page with additional details and tick this box

Financial need

As a consequence of drought affecting farm businesses, provide a detailed description of:

- the material reduction in the turnover of your small business, or
- the material increase in unsecured debts to your small business by farm businesses.

If you need more space, attach a page with additional details and tick this box

Business turnover

Estimate the percentage of your small business turnover that comes from supplying goods or services relating to primary production to farm businesses in affected areas, under normal circumstances. Include pre-drought and within drought annual turnover and the portion of that turnover received from supplying farm businesses.

If you need more space, attach a page with additional details and tick this box

Contribution

At least one member of your small business must, in normal circumstances, contribute 75% of their labour to the small business and earn at least 50% of their income from the small business. Describe how your small business meets this requirement.

If you need more space, attach a page with additional details and tick this box

PART C – Partnership details

Partnership name (if any) – as per ABN

Partner 1

Title	
Given name(s)	
Surname	
Other known names (if any)	

Residential address as per driver's licence (PO Box not accepted)
Tick if same as Principal place of business in Part A

	State	Postcode
Country (if not Australia)		

Postal address (if different) Tick if same as Postal address in Part A

	State	Postcode

Date of birth			
Occupation			
Telephone			
Email			
Partnership share	%	No. of dependents	

Partner 2

Title	
Given name(s)	
Surname	
Other known names (if any)	

Residential address as per driver's licence (PO Box not accepted)
Tick if same as Principal place of business in Part A

	State	Postcode
Country (if not Australia)		

Postal address (if different) Tick if same as Postal address in Part A

	State	Postcode

Date of birth			
Occupation			
Telephone			
Email			
Partnership share	%	No. of dependents	

If the partnership contains more than three (3) entities, please supply a diagram structure showing the interrelation of each entity.

Tick if documents are attached

If more than two (2) partners, provide the additional details at Part G

For Partnerships ► **Go to Part G**

PART D – Company details

Company name – as per ACN

--

Principal place of business address (PO Box not accepted)
Tick if same as Principal place of business in Part A

	State	Postcode

Is this a proprietary company? No Yes

If more than one (1) company is involved please include corporate structure

Director / Secretary / Shareholder 1

Tick all that apply

Director Secretary Shareholder

Title	
Given name(s)	
Surname	
Other known names (if any)	

Residential address as per driver's licence (PO Box not accepted)

	State	Postcode
Country (if not Australia)		

Postal address (if different to residential address)

	State	Postcode

Date of birth	
Occupation	
Telephone	
Email	
No. of dependents	

Is this person an authorised signatory? No Yes

Director / Secretary / Shareholder 2

Tick all that apply

Director Secretary Shareholder

Title	
Given name(s)	
Surname	
Other known names (if any)	

Residential address as per driver's licence (PO Box not accepted)

	State	Postcode
Country (if not Australia)		

Postal address (if different to residential address)

	State	Postcode

Company details continued...

Date of birth	<input type="text"/>
Occupation	<input type="text"/>
Telephone	<input type="text"/>
Email	<input type="text"/>
No. of dependents	<input type="text"/>
Is this person an authorised signatory?	No <input type="checkbox"/> Yes <input type="checkbox"/>

If the company contains more than three (3) entities please supply a diagram structure showing the interrelation of each entity.

Tick if documents are attached

If there are more than two (2) Directors / Secretaries / Shareholders, provide the additional details at Part G

For Companies ► **If there is a Trust associated with the company, go to Part E otherwise, go to Part G**

PART E – Trust details

Full name of the trust	<input type="text"/>
Date established	<input type="text"/>
Place of establishment	<input type="text"/>
ABN (if different to Part A)	<input type="text"/>
Type of trust (e.g. unit, discretionary or other)	<input type="text"/>

Complete the following details for each Trustee to the Trust.

Note: If any of the trustees:

- are a partnership, also provide details in Part C – Partnership details.
- is a company/corporate trustee, write name company/corporate trustee below and also provide details in Part D – Company details.

<input type="text"/>

Trustee 1

Title	<input type="text"/>		
Given name(s)	<input type="text"/>		
Surname	<input type="text"/>		
Other known names (if any)	<input type="text"/>		
Residential address as per driver's licence (PO Box not accepted)	<input type="text"/>		
	State Postcode		
Country (if not Australia)	<input type="text"/>		
Postal address (if different to residential address)	<input type="text"/>		
	State Postcode		
Date of birth	<input type="text"/>	No. of dependents	<input type="text"/>
Occupation	<input type="text"/>		
Telephone	<input type="text"/>		
Email	<input type="text"/>		
Is this Trustee a beneficiary?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	

Trust details continued...

Trustee 2

Title	<input type="text"/>		
Given name(s)	<input type="text"/>		
Surname	<input type="text"/>		
Other known names (if any)	<input type="text"/>		
Residential address as per driver's licence (PO Box not accepted)	<input type="text"/>		
	State Postcode		
Country (if not Australia)	<input type="text"/>		
Postal address (if different to residential address)	<input type="text"/>		
	State Postcode		
Date of birth	<input type="text"/>	No. of dependents	<input type="text"/>
Occupation	<input type="text"/>		
Telephone	<input type="text"/>		
Email	<input type="text"/>		
Is this Trustee a beneficiary?	No <input type="checkbox"/>	Yes <input type="checkbox"/>	

If the trust contains more than three (3) entities please supply a diagram structure showing the interrelation of each entity.

Tick if documents are attached

If there are more than two (2) Trustees, provide the additional details at Part G

► **Go to Part G**

PART F – Sole trader details

Title	<input type="text"/>
Given name(s)	<input type="text"/>
Surname	<input type="text"/>
Other known names (if any)	<input type="text"/>
Residential address as per driver's licence (PO Box not accepted)	<input type="text"/>
	State Postcode
Country (if not Australia)	<input type="text"/>
Postal address (if different)	<input type="text"/>
	State Postcode
Date of birth	<input type="text"/>
Occupation	<input type="text"/>
Telephone	<input type="text"/>
Email	<input type="text"/>
No. of dependents	<input type="text"/>

Part G – Associated individuals

Complete the following details for all individuals associated with the farm business, who have **not already been listed on this form**.

Associated individual 1

Director Beneficial owner Partner Trustee Guarantor

Other Specify

Title

Given name(s)

Surname

Other known names (if any)

Residential address as per driver's licence (PO Box not accepted)

.....
State Postcode

Country (if not Australia)

Postal address (if different to residential address)

.....
State Postcode

Date of birth

Occupation

Telephone

Email

Partnership share % No. of dependents

Is this person an authorised signatory? No Yes

Associated individual 2

Director Beneficial owner Partner Trustee Guarantor

Other Specify

Title

Given name(s)

Surname

Other known names (if any)

Residential address as per driver's licence (PO Box not accepted)

.....
State Postcode

Country (if not Australia)

Postal address (if different to residential address)

.....
State Postcode

Date of birth

Occupation

Telephone

Email

Partnership share % No. of dependents

Is this person an authorised signatory? No Yes

Associated individuals continued...

Associated individual 3

Director Beneficial owner Partner Trustee Guarantor

Other Specify

Title

Given name(s)

Surname

Other known names (if any)

Residential address as per driver's licence (PO Box not accepted)

.....
State Postcode

Country (if not Australia)

Postal address (if different to residential address)

.....
State Postcode

Date of birth

Occupation

Telephone

Email

Partnership share % No. of dependents

Is this person an authorised signatory? No Yes

Associated individual 4

Director Beneficial owner Partner Trustee Guarantor

Other Specify

Title

Given name(s)

Surname

Other known names (if any)

Residential address as per driver's licence (PO Box not accepted)

.....
State Postcode

Country (if not Australia)

Postal address (if different to residential address)

.....
State Postcode

Date of birth

Occupation

Telephone

Email

Partnership share % No. of dependents

Is this person an authorised signatory? No Yes

If there are more than four (4) associated individuals, attach a page with additional details and tick this box

PART H – Professional contacts

Contact 1

Principal Bank/Commercial Lender

Title

Given name(s)

Surname

Name of firm

Telephone

Email

Do you consent to the RIC contacting this person to verify information in this application? No Yes

Do you want this person to receive copies of correspondence relating to your application? No Yes

Contact 2

Bank/Financier

Advisor/Consultant

Solicitor

Rural Financial Counsellor

Accountant

State Government Lender

Title

Given name(s)

Surname

Name of firm

Telephone

Email

Do you consent to the RIC discussing information in this application with this person? No Yes

Do you want this person to receive copies of correspondence relating to your application? No Yes

Contact 3

Bank/Financier

Advisor/Consultant

Solicitor

Rural Financial Counsellor

Accountant

State Government Lender

Title

Given name(s)

Surname

Name of firm

Telephone

Email

Do you consent to the RIC discussing information in this application with this person? No Yes

Do you want this person to receive copies of correspondence relating to your application? No Yes

If there are more than three (3) professional contacts, attach a page with additional details and tick this box

PART I – Loan details

Total proposed loan amount

\$

Frequency of interest only payments? Monthly Quarterly Six monthly

How do you intend to use the loan? (e.g. purchase stock, succession planning, refinance)

Loan purpose	Value
	\$
	\$
	\$
	\$
	\$
	\$

PART J – Income and expenses

Cash flow projections

Please ensure the following income and expense amounts correspond to your financial statements or cash book figures.

Income	This financial year Actuals/Estimates			Next financial year Estimates			Three (3) years in the future			
	Revenue Goods and services	Sales to primary producers in drought	Sales to others	Total	Sales to primary producers in drought	Sales to others	Total	Sales to primary producers in drought	Sales to others	Total
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$

If you need more space, attach a page with additional details and tick this box

Expenses

Expense	This financial year Actuals/Estimates	Next financial year Estimates	Three (3) years in the future
	Total	Total	Total
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$

If you need more space, attach a page with additional details and tick this box

PART K – Assets

Financial information from the borrowing entity and any related party (i.e. director, guarantor, partner).

If the applicant is a partnership borrowing in its own right, list the assets owned by the partnership and each partner.

If any of the security offered below is owned by someone other than the applicant, the owner of that security must grant a guarantee and indemnity in favour of the RIC and must also complete and return to the RIC a guarantor's Asset and Liability Statement available in the resources section online.

Property

Address / Property name	Registered owner(s)	Mortgagee	Area (ha)	To be provided as security? (Y/N)	Estimated market value
					\$
					\$
					\$
Total estimated value					\$

If you need more space, attach a page with additional details and tick this box

Note: During the assessment stage of your application, you will be asked to provide further information about your property, including title details.

Plant and equipment (if applicable)

Description (e.g. vehicles)	Value	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
Total value		\$

If you need more space, attach a page with additional details and tick this box

Stock on hand

Description	Value	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
Total value		\$


If you need more space, attach a page with additional details and tick this box

PART L – Off farm assets

Investments

Description (e.g. shares, term deposit)	Market value
	\$
	\$
	\$
	\$
Total value	\$


If you need more space, attach a page with additional details and tick this box

 Please ensure that any associated debts against these investments are fully disclosed in Part L Liabilities section above.

Other assets

Description (e.g. rented properties, holiday homes)	Market value
	\$
	\$
	\$
	\$
Total value	\$

If you need more space, attach a page with additional details and tick this box

 Please ensure that any associated debts against these other assets are fully disclosed in Part L Liabilities section above.

PART M – Liabilities

Loans / Borrowings For borrower, associated individuals and entities (e.g. term loans, overdraft, leasing, hire purchase, credit/store cards)

Lending institution	Borrower's name	Loan type	Purpose	Expiry date (dd/mm/yy)	Interest rate %	Limit amount (e.g. for overdraft, credit card)	Annual repayment	Amount owing	
						\$	\$	\$	
						\$	\$	\$	
						\$	\$	\$	
						\$	\$	\$	
						\$	\$	\$	
						\$	\$	\$	
								Total owing	\$

If you need more space, attach a page with additional details and tick this box

Creditors (e.g. trade creditors, deferred fertiliser payment)

Creditor's name	Purpose	Terms	Amount owing	
			\$	
			\$	
			\$	
			Total owing	\$

If you need more space, attach a page with additional details and tick this box

Government charges and taxation liabilities

Tick if Government charges and taxation liabilities are not applicable

List any outstanding charges or liabilities including, but not limited to: employee superannuation contributions, FBT, employee entitlements (LSL, annual leave), work cover premiums, local government authority rates, utility provider charges, PAYG withholding (group tax), PAYG instalments, GST.

Government charge / Taxation type	Name of entity owing charges / taxation	Total outstanding	ATO repayment arrangement	Included in cashflow budget? (Y, N or N/A)
		\$	\$	
		\$	\$	

If you need more space, attach a page with additional details and tick this box

Contingent liabilities (e.g. bank guarantee, export guarantee)

Institution	Borrower's name	Purpose	Due date (dd/mm/yy)	Facility amount	
				\$	
				\$	
				Total owing	\$

If you need more space, attach a page with additional details and tick this box

PART N – Privacy and third party declaration

Notice About Collection of Personal and Credit-Related Personal Information

This is a notice about the collection of your personal and credit-related personal information by the Regional Investment Corporation, ABN 99 528 049 038. We can be contacted on 1800 875 675, by email at info@ric.gov.au, or via our online contact form at www.ric.gov.au/about/contact-us

Our full-length Notice About Collection of Personal and Credit-Related Personal Information is available on our website at www.ric.gov.au/collection-personal-information. You can also ask us to give you a copy of the full-length Notice in another format – such as a hard copy – at any time.

The Notice contains information about credit reporting, including the credit reporting bodies to which we are likely to disclose your credit information, and the likely content of that information.

It also sets out:

- the purposes of which we collect your information to carry out our functions and activities under the *Regional Investment Corporation Act 2018*
- the circumstances in which we usually disclose your information
- the bodies and organisations we usually make those disclosures to, and
- your rights in relation to your credit-related personal information.

For more detailed information, see:

- our Credit Reporting Policy at www.ric.gov.au/credit-reporting and
- our general Privacy Policy, which applies in addition to our Credit Reporting Policy, at www.ric.gov.au/privacy

Have you advised **ALL third parties** listed on this form that you have provided their information?

Yes

No If no, list the people or parties who **have not been advised**

PART O – Declaration and execution

WARNING: It is an offence under Part 12 of the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006* (Cth) to provide false or misleading information, provide a false or misleading document or forge a document for use in an applicant identification procedure.

You should only sign this declaration if this loan is wholly or predominantly for business purposes, or investment purposes other than investment in residential property. By signing this declaration you may lose your protection under the National Credit Code.

I/We declare that the credit to be provided to me/us by the credit provider is wholly or predominantly for:

- business purposes, **or**
- investment purposes other than investment in residential property, **and**
- the information provided in this application is true and complete.

I/We understand that:

- the RIC will use the information provided in this application to determine whether or not to establish a credit facility.
- this application does not constitute an offer of credit or approval of this application by the RIC.
- unless otherwise indicated in this application any one account signatory (where there is more than one) can operate the account without the others' permission and that I am/we are responsible for transactions conducted accordingly.

I/We confirm that:

- I/we have read and agree to the Privacy information in this application, and on the RIC website.
- I/we have read and acknowledge the eligibility criteria for this credit facility and reasonably believe that I/we are eligible for this credit facility.
- all charges, rates and taxes have been correctly calculated and are paid up to date and there are no outstanding government charges or taxation liabilities other than those disclosed in this application.

I/We consent to:

- RIC disclosing my/our personal information to Equifax for the purpose of obtaining credit reporting information (for example, credit reports)
- RIC collecting credit reporting information from Equifax for the purpose of assessing this application.

Execution for a Sole Trader, Partnership or Individual Trustee

Applicant 1

Signature	<input type="text"/>	Date	<input type="text"/>
Full name	<input type="text"/>		

Applicant 2

Signature	<input type="text"/>	Date	<input type="text"/>
Full name	<input type="text"/>		

Applicant 3

Signature	<input type="text"/>	Date	<input type="text"/>
Full name	<input type="text"/>		

Applicant 4

Signature	<input type="text"/>	Date	<input type="text"/>
Full name	<input type="text"/>		

Execution for a Company or a Company as Trustee For

Company name or Company name ATF Trust

Executed in accordance with section 127(1) of the *Corporations Act 2001* (Cth) by:

Signature	<input type="text"/>	Date	<input type="text"/>
Full name	<input type="text"/>		

Signature	<input type="text"/>	Date	<input type="text"/>
Full name	<input type="text"/>		

If only one person has signed, that person states that he/she signed as sole director and sole company secretary of the company.

PART P – Guarantor declaration and execution (if applicable)

WARNING: It is an offence under Part 12 of the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006* (Cth) to provide false or misleading information, provide a false or misleading document or forge a document for use in an applicant identification procedure.

As a guarantor I/we:


- **declare** that the information provided in this application is true and complete and the RIC will use it to determine whether or not to establish a credit facility.
- **understand** that this application does not constitute an offer of credit or approval of this application by the RIC.
- **confirm** that I/we have read and agree to the Privacy disclosure at Part O of this form.
- **consent** to RIC disclosing my/our personal information to Equifax for the purpose of obtaining my/our credit reporting information (for example, credit reports).
- **consent** to RIC collecting credit reporting information from Equifax for the purpose of assessing this application.

If a company – As a guarantor I/we:

- **guarantee** that we will pay any debts the company is unable to pay


Execution if Individual or Partnership

Guarantor 1

Signature  Date


Full name

Guarantor 2

Signature  Date


Full name

Guarantor 3

Signature  Date

Full name

Guarantor 4


Signature  Date

Full name


Execution for a Company or a Company as Trustee For

Company name or Company name ATF Trust

Executed in accordance with section 127(1) of the *Corporations Act 2001* (Cth) by:

Signature  Date

Full name

Signature  Date

Full name

If only one person has signed, that person states that he/she signed as sole director and sole company secretary of the company.

Other details

Where did you hear about the RIC?

Rural financial counsellor Financial advisor
Accountant Local bank manager
RIC Engagement Manager Media

Other (specify)

Who completed the majority of this form?

Applicant Financial advisor
Rural financial counsellor Accountant

Other (specify)

Do you consent to the RIC sending you the RIC Newsletter – RIC update via email?

No

Yes If yes, preferred email address(es)

Lodging your form

Lodge your completed application, and all supporting documents, by

- emailing to **applications@ric.gov.au**
- mailing to **The Regional Investment Corporation
PO Box 653
Orange NSW 2800**

Proof of identity documents

The RIC needs to confirm the identity of the following individuals included in this application:

- Sole Traders
- Partners in a Partnership
- Beneficial owners in a company
- individual Trustees to a Trust
- all authorised signatories.

Certified copies of identity documents must be provided with this application. A **certified copy means** a document that has been certified as a true copy of an original document by an acceptable referee as listed below:

- Justice of Peace
- a Police Officer
- a permanent employee of the Australian Postal Corporation with two (2) or more years continuous service who is employed in an office supplying postal services to the public
- a member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with two (2) or more years of continuous membership
- any other individual before whom a statutory declaration may be made (see Schedule 2 of the *Statutory Declarations Regulations 2018* (Cth)).

To confirm identity we need documents that show each individual's:

- full name
- residential address (not PO Box), and
- date of birth.

The details on the identification must match the details in this application.

Note: Special provisions may be applied to Aboriginal Persons or Torres Strait Islanders.

Primary documents (provide one)
<p>Passport</p> <ul style="list-style-type: none"> • Australian passport that is current, or • Foreign passport with English translation by an accredited translator (if not in English).
<p>Current Australian Driver's Licence or Truck Licence Full, interim, provisional or learner's licences are acceptable.</p>
<p>Proof of Age Card issued by an Australian State or Territory.</p>
<p>Foreign National Identity Card with English translation by an accredited translator (if not in English).</p>
<p>Birth certificate</p> <ul style="list-style-type: none"> • Australian birth certificate, or • Foreign birth certificate with English translation by an accredited translator (if not in English).
<p>Birth Extract issued by an Australian State or Territory.</p>
<p>Citizenship certificate</p> <ul style="list-style-type: none"> • Australian Citizenship certificate, or • Foreign Citizenship certificate with English translation by an accredited translator (if not in English).
<p>Pension or Government Health Card issued by Centrelink of the Department of Veterans' Affairs. Reference number is required.</p>

If an individual's full name or residential address (not PO Box) cannot be confirmed using the primary documents, a secondary identification document may be provided.

Secondary documents (provide one)
<p>Notice of financial benefit issued by a Commonwealth, State or Territory Department (e.g. Centrelink statement). Note: Must have been issued within the past 12 months.</p>
<p>Assessment or debt notice issued by the Australian Taxation Office. Note: Must have been issued within the past 12 months.</p>
<p>Notice issued by a Local Government Body or utilities provider that notes the provision of services to the address of the person (e.g. Council rates, water rates, electricity bill, gas bill, telephone landline bill). Note: Must be less than three (3) months old.</p>

Special provisions for Aboriginal and Torres Strait Islander residents

Statement from two (2) people who are recognised as Community Leaders (including elected members of an Aboriginal Council or the Community to which the individual belongs).
Must contain the individual's name and either date of birth or residential address (not PO Box).

Verification of identity

In addition to proof of identity documents, in New South Wales, Queensland, South Australia, Victoria and Western Australia, the following combination of documents are also required to verify your identity.

For persons who are Australian Citizens or Residents	
Category	Documents
1	<ul style="list-style-type: none"> Australian passport or foreign passport, AND Australian driver's licence or other photographic identification card issued by the Commonwealth, State or Territory, AND change of name or marriage certificate (issued by registry office).
2	<ul style="list-style-type: none"> Australian passport or foreign passport, AND full birth certificate or citizenship certificate or descent certificate, AND Medicare or Centrelink or Department of Veterans' Affairs card, AND change of name or marriage certificate (issued by registry office).
3	<ul style="list-style-type: none"> Australian driver's licence or other photographic identification card issued by the Commonwealth, State or Territory, AND full birth certificate or citizenship certificate or descent certificate, AND Medicare or Centrelink or Department of Veterans' Affairs card, AND change of name or marriage certificate (issued by registry office).
4	<p>OPTION 1</p> <ul style="list-style-type: none"> Australian passport or foreign passport, AND other government issued photographic identification, AND change of name or marriage certificate (issued by registry office). <p><i>OR if option 1 does not apply,</i></p> <p>OPTION 2</p> <ul style="list-style-type: none"> Australian passport or foreign passport, AND full birth certificate, AND other government issued identification, AND change of name or marriage certificate (issued by registry office).
5	<p>Note: This option can only be used if categories 1, 2, 3 or 4 cannot be met.</p> <p>See <i>What is an Identifier Declaration?</i> in the next column.</p> <p>OPTION 1</p> <ul style="list-style-type: none"> Identifier Declaration, AND full birth certificate or citizenship certificate or descent certificate, AND Medicare or Centrelink or Department of Veterans' Affairs card, AND change of name or marriage certificate (issued by registry office). <p><i>OR if option 1 does not apply,</i></p> <p>OPTION 2</p> <ul style="list-style-type: none"> Identifier Declaration completed by an Australian Legal Practitioner, a Bank Manager, Community Leader, Court Officer, Doctor, Land Council Officeholder, Licenced Conveyancer, Local Government Officeholder, Nurse, Public Servant or Police Officer, AND Medicare or Centrelink or Department of Veterans' Affairs card, AND change of name or marriage certificate (issued by registry office).

For persons who are NOT Australian Citizens or Residents

Category	Documents
6	<p>OPTION 1</p> <ul style="list-style-type: none"> Foreign passport, AND another form of government issued photographic identification, AND change of name or marriage certificate (issued by registry office). <p><i>OR if option 1 does not apply,</i></p> <p>OPTION 2</p> <ul style="list-style-type: none"> Foreign passport, AND full birth certificate, AND another form of government issued identification, AND change of name or marriage certificate (issued by registry office).

What is an Identifier Declaration?

Note: This information is only relevant for Category 5.

An Identifier Declaration is a statutory declaration made by a person who is:

- at least 18 years old
- an individual who has known the borrower for at least 12 months (and is not a relative of the borrower), and
- not a party to the mortgage.

The Identifier Declaration must include the following information:

- the name, address, occupation and date of birth of the person making the declaration (the declarant)
- the nature of the relationship between the declarant and the borrower
- a statement that the declarant is not a relative of the borrower
- a statement that the declarant is not a party to the mortgage
- the length of time the declarant has known the borrower
- that to the declarant's knowledge, information and belief the borrower is who they purport to be, and
- if applicable (for Option 2 of category 5), that the declarant is an Australian Legal Practitioner, a Bank Manager, Community Leader, Court Officer, Doctor, Land Council Officeholder, Licenced Conveyancer, Local Government Officeholder, Nurse, Public Servant or Police Officer.

Note: The declarant must attend the face-to-face in-person interview and the RIC (or its agent) must complete verification of identity on the declarant in accordance with the relevant rules.