

Identification form – Individuals & Sole Traders


- ALLAN GRAY AUSTRALIA EQUITY FUND
- ALLAN GRAY AUSTRALIA BALANCED FUND
- ALLAN GRAY AUSTRALIA STABLE FUND

CLIENT SERVICES CONTACT DETAILS

 **1300 604 604** (within Australia)

 **clientservices@allangray.com.au**

 **+61 2 8224 8604** (outside Australia)

 **allangray.com.au**

PLEASE COMPLETE THIS FORM IF YOU ARE A NEW INVESTOR WITH ALLAN GRAY IN AUSTRALIA OR IF YOU ARE AN AUSTRALIAN FINANCIAL ADVISER VERIFYING YOUR CLIENT WHO IS A NEW INVESTOR. A SEPARATE FORM IS REQUIRED FOR EACH INVESTOR IN THE CASE OF JOINT HOLDINGS.



If you are a new investor and do not have an Australian financial adviser

1. Please complete the following sections of this identification form in block letters, using a black pen.
 - Section 1 – provide your personal details
 - Section 2 – if you are a sole trader, provide your business details
 - Section 3 – indicate which ID document(s) you are including with your form
2. Make copies of your ID document(s) and arrange for them to be certified. Please refer to the 'Prices and Forms' section of our website for more information on getting your documents certified.
3. Include this identification form and original certified copies of your ID documents with your initial application form when you send it to us.



If you are an Australian financial adviser verifying your client who is a new investor

1. Please complete the following sections of this identification form in block letters, using a black pen.
 - Section 1 – provide your client's personal details
 - Section 2 – if they are a sole trader, provide your client's business details
 - Section 4 – indicate the ID documents you have verified
2. Include this identification form and original certified copies of the ID document(s) (if applicable) with the initial application form when you send it to us.

Legal notices

Equity Trustees Ltd AFSL No. 240975 (EQT) is the issuer of units in the Allan Gray Australia Equity Fund, Allan Gray Australia Balanced Fund and the Allan Gray Australia Stable Fund (together Funds).

Personal information is collected on this form by EQT and Allan Gray including their delegates, such as OneVue Fund Services Pty Ltd and Orbis, (together us), for the purposes of maintaining the register of unitholders, facilitating distribution payments and other unitholder communications required or permitted by the Corporations Act 2001 or other legislation. Your personal information may be disclosed to external service companies such as print or mail service providers, to Allan Gray, Orbis or to the Funds' custodian, or as otherwise required or permitted by law. If you would like details of your personal information held by us, or you would like to correct information that is inaccurate, incorrect or out of date, please contact Allan Gray. Our privacy policy is available on our website, www.allangray.com.au In accordance with the Corporations Act 2001, you may be sent material (including marketing material) approved by EQT, Allan Gray or Orbis in addition to general corporate communications. You may elect not to receive marketing material by contacting Allan Gray using the details on this form. Allan Gray means Allan Gray Australia Pty Ltd AFSL No. 298487 as manager for the Funds. Orbis means Orbis Investment Advisory Pty Ltd AFSL No. 237862 and its associates.

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1. PERSONAL DETAILS

Title	<input type="text"/>	Full given names	<input type="text"/>				
Surname	<input type="text"/>						
Date of birth	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Residential address.	A PO Box/RMB/Locked Bag is not acceptable.						
Property name/ building name	<input type="text"/>						
(if applicable)	<input type="text"/>						
Address	<input type="text"/>						
	<input type="text"/>						
Suburb	<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>		
Country	<input type="text"/>						

2. ADDITIONAL DETAILS FOR SOLE TRADERS

Full business name	<input type="text"/>				
	<input type="text"/>				
ABN	<input type="text"/>				
Place of business.	A PO Box/RMB/Locked Bag is not acceptable.				
Property name/ building name	<input type="text"/>				
(if applicable)	<input type="text"/>				
Address	<input type="text"/>				
	<input type="text"/>				
Suburb	<input type="text"/>	State	<input type="text"/>	Postcode	<input type="text"/>
Country	<input type="text"/>				

3. VERIFICATION PROCEDURE - INVESTORS

Verification if you are an Australian resident

Please enclose an original certified copy of ONE of the following current documents. If your document does not show your signature, please sign your name on the original certified copy of the document.

TICK	SELECT ONE OPTION FROM THIS SECTION
<input type="checkbox"/>	Drivers licence (must show your date of birth, photo and signature).
<input type="checkbox"/>	Passport (must show your date of birth, photo, current date of passport and signature).
<input type="checkbox"/>	Any identification card issued under a state or territory in Australia or by an overseas government (must show your date of birth, photo and signature).

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Verification if you are not an Australian resident

Please enclose original certified copies of at least TWO of the following current documents. The TWO documents together must show ALL of the following:

- Your photo
- Date of birth
- Residential address
- Signature (If your documents do not show your signature, please sign your name on the original certified copy of the document.)

TICK	SELECT TWO OPTIONS FROM THIS SECTION
<input type="checkbox"/>	Drivers licence
<input type="checkbox"/>	Passport
<input type="checkbox"/>	Any identification card issued by an overseas government
<input type="checkbox"/>	A document issued by a local government body or utilities provider within the preceding three months which records the provision of services to your address or to you (this document must contain your name and address as indicated on this form)

4. VERIFICATION PROCEDURE - AUSTRALIAN FINANCIAL ADVISER

Record of verification procedure

Either:

- Attach the original certified copy of the ID document (as required under section 3) used to verify your client (and any required translation); or
- Complete the details below and do not attach copies of the ID document. By completing this you represent that you have verified your client's name and either their date of birth or residential address.

ID DOCUMENT DETAILS	DOCUMENT 1	DOCUMENT 2
Verified from	<input type="checkbox"/> Original <input type="checkbox"/> Certified copy	<input type="checkbox"/> Original <input type="checkbox"/> Certified copy
Document name/type	<input type="text"/>	<input type="text"/>
Document issuer	<input type="text"/>	<input type="text"/>
Issue date	<input type="text"/> DD / <input type="text"/> MM / <input type="text"/> YY <input type="text"/> YY	<input type="text"/> DD / <input type="text"/> MM / <input type="text"/> YY <input type="text"/> YY
Expiry date	<input type="text"/> DD / <input type="text"/> MM / <input type="text"/> YY <input type="text"/> YY	<input type="text"/> DD / <input type="text"/> MM / <input type="text"/> YY <input type="text"/> YY
Document number	<input type="text"/>	<input type="text"/>
Accredited English translation	<input type="checkbox"/> N/A <input type="checkbox"/> Sighted	<input type="checkbox"/> N/A <input type="checkbox"/> Sighted

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Financial adviser details

Date verified	<input type="text" value="D"/> <input type="text" value="D"/> / <input type="text" value="M"/> <input type="text" value="M"/> / <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>
Authorised Representative Number (if any)	<input type="text"/>
Financial adviser name	<input type="text"/>
Business number	<input type="text" value="+"/> <input type="text"/>
Dealer group name	<input type="text"/>
AFSL number	<input type="text"/>