PROFORMA EXAMPLE
PROMOTERS: CUSTOMER IDENTIFICATION FORM

Note: Racing NSW prepares its Pro Forma documents to assist Promoters in complying with the requirements of their Australian Financial Services Licence. The Pro Forma is not meant to be exhaustive and Racing NSW does not accept liability for the contents of the PROMOTERS IDENTIFICATION FORM which remains the responsibility of the Promoter.

PROMOTERS NAME: _____

PARTICULARS OF PROPOSED YEARLING(s) OR RACEHORSE(s) (if applicable) :
_____

PERSONAL DETAILS OF APPLICANT

Last Name	
First Name/s	
Date of Birth	
Residential Address	
Period of residency at this address	
Previous address if less than 3 years	
Postal Address (If different)	
Contact Telephone Number/s	
Email Address	
Name, address and telephone of Relative or Friend not residing with you	

PROOF OF IDENTITY – Minimum Requirements <u>Individual</u>
Minimum Requirements must verify - Full Name, Address and Date of Birth

Primary

Driver's Licence Details	
Passport Details	
Proof Of Age Card	

Secondary

Birth Certificate	
Citizenship Certificate	
Pension Card issued by Centrelink	
ATO Assessment (current)	
State Government Document (current)	
Local Government Document (current)	
Utilities Document (current)	

Minimum Requirements <u>Company</u>

Company Name	
Principal Place of Business	
ACN/ABN	
Directors	

EMPLOYMENT DETAILS

Occupation/Position	
Employer	
Address of Employer	
Telephone contact details	
Duration of employment	
Previous employer if less than 3 years	
If Self Employed advise external source (e.g. Accountant) who can confirm your business	

Other Information

Have you ever been listed as a Defaulter in Bets or Warned Off or Disqualified by a Racing, Harness or Greyhound Authority – provide details	

I certify that:

(a) the above information is true and correct,
(b) I agree to all the terms and conditions applicable to this Product Disclosure Statement,
(c) I agree that ownership of a racehorse is governed by the Australian and State Rules of Racing,

Signature_____

Date_____

Copy of Identification Documents Attached–Yes/No

Date Received	
Comments	
Employee Name	
Employee Signature	
Promoters Approval	