



Request for Refund of Unclaimed Monies For Business Entity

About this Form

Please complete this form if the account is in a business entity name (ie not a personal name) and provide documents as indicated to request a refund of Unclaimed Monies.

Please provide the completed form to your nearest Citibank branch

Please do not send this form through fax

1. Business Entity Details

Business Entity Name of account transferred as Unclaimed Monies

ABN or ACN (as applicable)

Account Number (or Credit Card Number)

Amount

Business Address

Suburb, State and Post Code

Current Mailing Address

Suburb, State and Post Code

Business Address (when account was opened - if different)

Suburb, State and Post Code

Mailing Address (when account was opened - if different)

Suburb, State and Post Code

Email

Telephone

ASIC OTN (This can be retrieved from ASIC's website at www.asic.gov.au)

2. Details of Directors/Authorised Users

A. Director/Authorised User Name

Position (eg: Director, Company Secretary)

Email

Telephone

Residential Address

Suburb,State and Post Code

B. Director/Authorised User Name

Position (eg: Director, Company Secretary)

Email

Telephone

Residential Address

Suburb,State and Post Code

3. Refund Details (Select only one method)

Pay to an existing Citibank account

(Please note: this is not applicable for Credit Cards or Ready Credit Accounts)

Account Name

Account Number

OR

Post a cheque in the name of the Business Entity

Address

Suburb,State and Post Code

4. Declaration

I, the undersigned, make the following declaration to Citigroup Pty Limited ("Citibank")

I had an account with Citibank the money from which I believe has been transferred to ASIC

The account details were as stated above.

I am the true owner of the money that was in the account identified above and am entitled to claim the money that transferred to ASIC; or I am an attorney for the true owner acting under a power of attorney granted by the true owner.

I request Citibank to act on my behalf to recover the money held as unclaimed money with respect to the account identified above and request the Treasurer to pay the proceeds to Citibank.

Important - It is an offence under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 to give false or misleading information or documents

5. Authorisation

All signatories to print name and sign in accordance with signing instructions on the account(s)

Name

Name

Signature

Signature

Date

Date

6. Verifying Account Ownership

Attach certified copy of document showing proof of account ownership relating to account transferred as unclaimed (eg: bank statement)

OR

Attach certified proof of connection to address relating to account where unclaimed monies were held (eg: ASIC search showing principal place of business)

Note: Certification can be done via your local Citibank branch.

7. Verifying identity of Business Entity

Please select the entity type and provide information/documentation as requested at your nearest Citibank branch

Sole Trader

Partnership

Trust

Sole Director Company

Company

Note: Certification can be done via your local Citibank branch.

8. Verifying identity of directors/authorised users

Part 1 - Primary Photographic ID Documents

Select ONE valid option from this section only

Current Australian Driver's Licence

Valid Passport
(expired passport within 2 years is acceptable for Australians)

Proof of Age Card

Foreign Driver's Licence that contains a photograph and date of birth

National ID Card issued by a foreign government containing a photograph and a signature of the person

Part 2 - Primary Non-Photographic Documents

Note: This section should be completed only if the individual does not own a document from Part 1

Select ONE valid option from this section only

Australian birth certificate

Australian citizenship certificate

Centrelink Health Card or Pensioner Concession Card or Commonwealth Seniors Health Card

In addition to Parts 1 and 2

If you have selected ONE valid option from Part 1, please select ONE valid option from the section below.

If you have selected ONE valid option from Part 2, please select TWO valid options from the section below.

Medicare Card

Tax Office Notice of Assessment less than 12 months old, which contains the individual's name and residential address. Block out the TFN before scanning, copying or storing this document.

Utility Bills and/council rates notices less than 3 months old, which contains the individual's name and residential address

Current Bank Statements or credit card issued by a recognised financial institution less than 3 months old, which contains the individual's name and residential address

Note: Certification can be done via your local Citibank branch.

9. Check List

Sections 1-8 Completed

Documents required as per Sections 6,7 and 8 have been submitted

I/we am/are aware that refunds from ASIC can take up to 3 months

10. Citibank Staff to complete

Signature Verified by (Stamp and sign)

Date

Maker (Stamp and sign)

Checker (Stamp and sign)

Date

Date

