

OVERSEAS APPLICATION & IDENTIFICATION FORM



ACCOUNT HOLDER DETAILS (Name of signatory in full)

TAB Account Number: Title: Date of Birth:

Surname: Given Name(s):

Residential Address:

Postal Address:

Contact Details Mobile: Work:

Email: Do you hold a licence under the rules of racing Yes: No:

I confirm that I am at least 18 years old

I confirm that I have read and understood the terms and conditions governing the use of this account, and will abide by them

Account Holders Signature: Today's Date:

IDENTIFICATION DOCUMENTS (ACCEPTABLE REFEREE TO COMPLETE)

Please attach a copy of all identification sighted by the Acceptable Referee

Group 1 Documents (Please tick) *One only required.* Passport Driver's Licence

Document No: Date of Issue: Date of Expiry: Date of Birth:

Address on Document (if Applicable):

Place/Country of Issue:

Group 2 Documents (Please tick) Birth Certificate Birth Extract Citizenship Certificate

Document No: Date of Issue: Date of Birth:

Place/Country of issue:

Group 3 Document Information (Only used in conjunction with a Group 2 document)

1st Document 2nd Document

Type of Document: Type of Document:

Document Number: Document Number:

Date of Issue: Date of Issue:

Address (if Applicable): Address (if Applicable):

Expiry Date: Expiry Date:

Issued by/ Country of Issue: Issued by/ Country of Issue:

DETAILS OF ACCEPTABLE REFEREE

Full Name of Referee: Phone Number:

Address:

Occupation: Category of Referee:

I confirm that I have known the TAB customer above for a minimum of 12 months.

I acknowledge that I have examined the ID documents detailed above and can confirm that the name and address shown on the documents are the same as those belonging to the TAB customer.

Signature of Referee: Date:

TYPES OF ACCEPTABLE REFEREE

1. A member of the Institute of Chartered Accountants
2. A member of municipal or local council
3. Permanent employee of the Commonwealth, State or Local Government with 5 years' service unless at executive level
4. An employee of a financial institution
5. A legal practitioner
6. A medical doctor, dentist, pharmacist, chiropractor, physiotherapist or a veterinary surgeon
7. A registered nurse
8. A judge
9. A minister of religion
10. A member of parliament
11. A notary public
12. A policeman
13. A manager of a post office or a permanent employee of Australia Post with 5 years' service
14. A full-time teacher or school principal
15. A justice of the peace
16. An officer of the Australian Defence Force

GROUP 1 DOCUMENTS

(Must be current)

Passport
Driver's Licence
Proof of Age Card
Working with Children Check
WA Learner's Permit Card

GROUP 2 DOCUMENTS

Birth Certificate
Citizenship Certificate
Centrelink Concession Card - Current
Certified Copy of Birth Extract
Licence to Perform High Risk Work (Work Safe WA Card)

GROUP 3 DOCUMENTS

(Must be issued within past 3 months)

Council Rates Notice
Electricity Account
Gas Account
Fixed Line Phone Account
Water Usage Account
Water Rates Notice
Australian Taxation Office - Notice of Assessment