

CRS TIN Exemption form

WealthHub Securities Limited
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AFSL No. 230704

nabtrade
Reply Paid 87762
Melbourne VIC 8060

Telephone 13 13 80
nabtrade.com.au

Account number

Reference number

Section 1

About this form

You have previously indicated that you are a tax resident of a country other than Australia, and provided a reason for not being able to quote your Taxpayer Identification Number (TIN). The reason code you have selected is not valid for your country of foreign tax residence.

We request that you complete the form below to provide a valid reason for not being able to quote your TIN.

Section 2

Individual Details

Title

Mr Mrs Miss Ms Other

Middle name

First name(s)

Family name

Section 3

Entity Details

Entity name

ACN, ABN, or other registration number

Section 4

Foreign Tax Residency Information

1st Country

Country of Tax Residence

TIN

or Reason for not being issued with a TIN
Provide a tick against the applicable reason

- Minor (under the age of 18)
- Applied for
- Diplomat
- International organisation
- Student/professor
- No taxable income
- Other

2nd Country

Country of Tax Residence

TIN

or Reason for not being issued with a TIN
Provide a tick against the applicable reason

- Minor (under the age of 18)
- Applied for
- Diplomat
- International organization
- Student/professor
- No taxable income
- Other

3rd Country

Country of Tax Residence

TIN

or Reason for not being issued with a TIN
Provide a tick against the applicable reason

- Minor (under the age of 18)
- Applied for
- Diplomat
- International organisation
- Student/professor
- No taxable income
- Other

Section 5

Declaration

By completing and signing this declaration, I certify that the information I have provided is true and correct.

INDIVIDUAL DECLARATION (The person named in this form)

Name

Signature

Date

OR

ENTITY DECLARATION

By completing and signing this declaration, I certify that the information I have provided is true and correct.

To be completed by an authorised representative of the Entity, such as a Director or Trustee

Given Name(s)/Family Name (PRINT)

Signature

Date

Section 6

Send us your form

Please mail or fax your completed, signed and dated form to:

Post

nabtrade
Reply Paid 87762
Melbourne VIC 8060

Fax

1300 368 758

Email

forms@nabtrade.com.au

Need Help? If you need any assistance with completing this form, contact us on **13 13 80**. For more information about our opening hours visit **nabtrade.com.au**