

Direct Debit Payments

Managed Merchant Onboarding Requirements

J & J Hoffard Pty Ltd ACN 622 128 705 as Trustee for Hoffard Family Trust trading as Tickets.org.au

ABN 92 273 595 542

Paddington, Queensland, 4064 Email: support@tickets.org.au



NEW MERCHANT ONBOARDING

1 Business Information

Fill in all details required on form and email a copy of all supporting documents to support@tickets.org.au

Supporting documents required:

- Most recent bank statement
- ASIC registration document or ABR for sole traders

Business Name
Legal Entity Name (If Different)
ADNI
ABN
Main Business Address
Business Bank Account to be Funded
Website Address (If taking payments online, please enter this web address)
What does your business do?



2 Main Business Contact

First Name		
Last Name		
Email Address		
Phone Number		
Role in the Busin	ess	
Business Address		
ls this person (sele	ect all that a	pply)
	Main Busin	ess Contact
	Director	
	Executive	
	Owner	

Note: The main business contact must be an active director, executive or owner who is involved in the daily operations of the business.



3 Owners and Directors

For each	owner of 25%	or more, an	d each director,	the following	g information	must be	provided

Full legal name DOB Home Address % Ownership (if applicable) Identity verification documentation. If a driver's license is provided, this serves as address verification as well as photo identification. If a passport is provided, an additional document such as rates notice or utility bill must be provided as address verification. Individual 1 Full Legal Name Date of Birth Home Address Is this person (select all that apply): □ Director ☐ Owner: Insert % Ownership % Supporting documents required: ☐ Driver's License front AND back OR ☐ Passport AND a utility bill, rates notice or other well-known supplier that can verify your address



ndividual 2	
Full Legal Name	
Date of Birth	
Home Address	
s this person (select all that apply):	
□ Director□ Owner: Insert % Ownership%	
Supporting documents required:	
 □ Drivers License front AND back □ Passport AND a utility bill, rates notice or your address 	other well known supplier that can verify
ndividual 3	
Full Legal Name	
Date of Birth	
Home Address	
s this person (select all that apply):	
□ Director□ Owner: Insert % Ownership%	
Supporting documents required:	
 □ Drivers License front AND back □ Passport AND a utility bill, rates notice or your address 	other well known supplier that can verify



Indivi	dual 4
Full	Legal Name
Date	e of Birth
Hon	ne Address
Is this	person (select all that apply): Director Owner: Insert % Ownership %
Suppo	orting documents required:
OR	□ Drivers License front AND back
	☐ Passport AND a utility bill, rates notice or other well known supplier that can verify your address

^{*}If there are more than four owners/directors, email all necessary information for each additional owner/director to support@tickets.org.au until all have been identified.