

Identity verification form

Your identity document requirements

You must present one document from the list below except if you are using a current foreign passport which must be presented with an Australian Medicare card.

The identity documents you present must be originals and must contain your photo and date of birth.

To verify your identity, the details in section A and B must exactly match your identity documents, including full given name, no initials. If they are different, please update this at www.qantascash.com and print a new form. If you have any questions, please call the Qantas Cash Service Centre on 13 11 31.

Australia Post will accept the following forms of identity:

- Australian Driver licence
- Australian Passport (current or expired within the last 2 years)
- New Zealand Passport (current or expired within the last 2 years)
- Photo card (NSW)
- Proof of age card (VIC, SA, WA & ACT)
- Adult proof of age card (QLD)
- Personal information card (TAS)
- Evidence of age card (NT)
- Current passports for the countries listed below are acceptable and must be presented with an Australian Medicare card. Cancelled passports are not acceptable.
 - Canada
 - China
 - Germany
 - Greece
 - India
 - Italy
 - Malaysia
 - Philippines
 - South Africa
 - Sri Lanka
 - United Kingdom
 - United States of America

How to lodge your application at Australia Post

1. After checking details, print this form and present it with your original identity documents to any participating post office. To find the nearest participating outlet, please call 13 13 18 or go to www.auspost.com.au/pol/idform
2. Do not complete section C, your signature must be witnessed by the Australia Post verifier.
3. The identity documents presented must be original and must contain your photo and date of birth

A. Details of applicant

Customer number

071488704

Family name / surname

HERRERA

Given name(s) (full name no initials)

CARLOS

Date of birth

28/03/1984

Contact phone number

0424514720

B. Current residential address of applicant (must be an Australian residential address not a PO Box)

Unit number / street number / street name (with a space between numbers and words)

1 / 205 ALISON RD

Suburb

RANDWICK

State

NSW

Postcode

2031

C. Declaration by applicant

Do not sign until you lodge this form at Australia Post
Your signature must be witnessed by the Australia Post verifier.

Please sign
in black ink

Applicant to sign at Australia Post

I acknowledge that the information on this form is true and correct and has been completed by me and not another person.

Date

DD

MM

YYYY

Disclaimer and privacy notice - Australia Post is acting as an agent for Access Prepaid Australia Pty Ltd (Access) AFSL 386837 and collects your information to identify you in accordance with requirements under Australian Law. Your details will be forwarded to Qantas Cash (Access) and Australia Post service providers and may also be disclosed to government agencies such as AUSTRAC. Subject to certain exceptions you may request access to your personal information. If access is denied, the law says you must be told why.

D. Australia Post use only

I confirm that I have sighted original documentation that verifies the applicant's name, date of birth and / or residential address as required.

Verifier's name

Comments

Date

DD MM YYYY

Work centre code

Verifier's signature

Identity
verified by

