



KJC



Precious Metals



Numismatics & Rare Coins



Secure Vaulting

1300 844 018

KJC Secure Vaulting - Exit - Personal

Personal Details

Title: First Name: Middle Name:

Family Name: DOB: / /

Unit No: Street No: Street Name:

Suburb: Postcode:

State: Country:

Phone: Email:

Postal Address (If different to above)

Unit No/PO Box: Street No: Street Name:

Suburb: Postcode:

State: Country:

Additional Personal Details

Full Name at Birth:
(If different to above)

City at Birth:

Country at Birth:

By signing this application form I accept and fully understand the KJC Group terms and conditions as outlined on <http://www.kjcbullion.com.au/tc>

I confirm all the above supplied information is correct and up to date at the time of signing this form.

Print Name:

Sign:

Date:

Sale

I would like to request the sale of my items from KJC Secure Vaulting.

I would like to sell only part of my items held in KJC Secure Vaulting.

I would like to sell all of my items held in KJC Secure Vaulting.

Please complete the item list on the following page.

Payment Details

Account Name:

BSB:

Account Number:

Bank

I confirm the above supplied bank account is correct and in my name.

Removal for Collection / Shipping

I would like to request the removal and sale of my items from KJC Secure Vaulting.

I would like to remove only part of my items held in KJC Secure and have them;

Shipped to my nominated address and agree KJC will invoice me for freight charges.

Collected from the KJC retail store.

I would like to remove all of my items held in KJC Secure Vaulting and have them;

Shipped to my nominated address and agree KJC will invoice me for freight charges.

Collected from the KJC retail store.

Please complete the item list on the following page.

Tag/Serial Number *(If applicable)*

| QTY | Product | Purity | Unit/\$ | Total/\$ |
|-----|---------|--------|---------|----------|
|-----|---------|--------|---------|----------|

Tag/Serial Number *(If applicable)*

| QTY | Product | Purity | Unit/\$ | Total/\$ |
|-----|---------|--------|---------|----------|
|-----|---------|--------|---------|----------|

Tag/Serial Number *(If applicable)*

| QTY | Product | Purity | Unit/\$ | Total/\$ |
|-----|---------|--------|---------|----------|
|-----|---------|--------|---------|----------|

Grand Total

I confirm the above detailed products are accurate and correct.

Print Name:

Sign:

Date:

Admin Use:

KJC Bullion - Registration Help Form

Submitting your identification check to KJC cannot be any easier. If you are an Australian resident simply scan and email to KJC colour copies of a combination of the below identification as listed below in our easy three step process. (International clients will have to supply original notarised copies by mail)

Easy 3 Step Process

1. Gather required identification.
2. Take photos or scan all identification
(Front and back images of cards are required and all images must be in colour).
3. Submit your identification to KJC via email to bullion@kjc.com.au or by post to:
KJC GPO BOX 825, Sydney NSW 2001 Australia.

Primary Identification

You must supply a **minimum of one piece** of primary identification. The options for primary identification include.



Drivers license



Passport

Secondary Identification

You must supply a **minimum of one piece** of secondary identification. The options for secondary identification include.



Medicare card

Supporting Identification

You must supply a **minimum of one piece** of supporting identification ***only if you have not supplied a drivers license.*** The options for supporting identification include.



Water, gas or electricity bill



Council rates



Bank statement



Vehicle title or registration



Phone bill