



**Better Mortgage Management**

PTY LTD

ABN 65 089 835 192

Level 9, 490 Upper Edward Street  
 SPRING HILL Qld 4000

PO Box 274 SPRING HILL Qld 4004

Tel: (07) 3831 6400 Fax: (07) 3831 6500

Email: info@bettermm.com.au

**APPLICATION FOR ACCREDITATION  
 Checklist Covering Page – Fax to 07 3831 6500**

**I have attached ALL of the following to ensure speedy processing of my application:**

- Fully Completed Application for Accreditation Form
- Copy of Australian Credit Licence or Credit Representative Number
- Copy of current Professional Indemnity Insurance Certificate of Currency (PII)
- Membership certificate provided by an ASIC approved external dispute resolution scheme, such as COSL
- CLEAR copy of photographic ID e.g. drivers licence or passport

**Please select one of the following:**

I am an Australian Credit Licence Holder (confirmation from ASIC of licence number attached)

I am an authorised Credit Representative of an Australian Credit Licence Holder (confirmation of credit registration number attached)

**OR**

Office Use Only

Recommendation – to be completed by BDM/RM

Please comment on the advisor's business:

Recommended By Insert Name	/ /	Approved By Insert Name	/ /
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 Email: info@bettermm.com.au

**Section 1: BUSINESS/COMPANY DETAILS**

Please select your nearest Better Mortgage Management office (please tick one)									
<input type="checkbox"/> Brisbane	<input type="checkbox"/> Sydney	<input type="checkbox"/> Melbourne	<input type="checkbox"/> Adelaide						
Company Name									
ABN									
Trading Name	Insert name								
Type Please tick one	<input type="checkbox"/> Company	<input type="checkbox"/> Partnership	<input type="checkbox"/> Sole Trader						
Office Address									
Postal Address <small>If different to Office Address</small>									
Telephone Number		Fax Number							
Mobile Number									
E-mail address	Bettertrak updates will be sent to this address								
Secondary e-mail									
Web Address									

**Section 2: DIRECTORS/STAFF DETAILS**

<b>Details of Directors / Sole Director / Partners / Principals</b> Please circle one				
First Name	Last Name	DOB	Phone Number	Address
<b>Details of Broker Staff:</b> Please supply details of your broker staff <b>directly</b> employed by your business				
First Name	Last Name	DOB	Phone Number	E-mail
<b>Details of Credit Representatives under your licence</b> (only complete if you hold an ACL)				

<b>Section 3: National Credit Code Registration</b>
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Australian Credit Licence Number	
OR	
If you are a Credit Representative please list the company you are registered under & your registration number	

<b>Section 4: CURRENT MORTGAGE BUSINESS DETAILS</b>
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How long has your business been in operation?	YEARS	MONTHS
Which financial institutions do you currently place your business with?		
Do you deal with an Aggregator?	Yes/No – If yes, please list which aggregator:	
Have you, or the business you work for, ever had an application for accreditation with another lender, mortgage insurer or aggregator rejected?		
Have you, or the business you work for, ever had an accreditation with another lender, mortgage insurer or aggregator cancelled/suspended? If yes, please supply details.		
Are you aware of any wholesale funder who refuses to accept new loan applications from you or the business you work for?		
Have you ever been charged and/or convicted of a fraudulent offence either in Australia or overseas?		
What is the estimated \$ volume of loans business you anticipate introducing?	\$	
What types of mortgages do you originate? (circle appropriate) Residential    Commercial    Leasing    Development    Rural		
How did you find out about BMM?		
Please indicate if you would like to receive the following:		
a) loan training updates: <input type="checkbox"/> E-mail <input type="checkbox"/> SMS b) marketing updates: <input type="checkbox"/> E-mail <input type="checkbox"/> SMS		
What are your interests? E.g. sporting code, music, hobbies		
Would you like the BMM loan application form branded with your company logo and office details? Y / N IF YES, PLEASE E-MAIL YOUR COMPANY DETAILS AND LOGO IN JPEG FORMAT AS YOU WOULD LIKE IT TO APPEAR ON YOUR BRANDED APPLICATION FORM TO: <a href="mailto:admin@bettermm.com.au">admin@bettermm.com.au</a>		

<b>Section 5: COMMISSION PAYMENT DETAILS</b>
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Contact Name		Direct E-mail	
Bank		Branch	
BSB		Account no	
Account name			
Commissions payable to	<input type="checkbox"/> Company Name <input type="checkbox"/> Trading Name <small>Please select one of the above</small>		

<b>Section 6: PROFESSIONAL INDEMNITY INSURANCE</b>
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It is a requirement of accreditation with Better Mortgage Management that you hold professional indemnity insurance that covers you for "Introduction of Loans", and with a minimum cover of \$1 million per claim. Please attach a copy of your Professional Indemnity Insurance schedule to this application, and complete the details below.

A copy of the policy will be required with a copy of a renewal certificate each year

Name of insurer			
Policy Number			
Limit of Liability	\$	Expiry Date:	/ /

<b>Section 7: ACKNOWLEDGEMENT</b>
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I/we acknowledge that Better Mortgage Management Pty Ltd may make enquiries about me/us to any business referee (including a company search) disclosed by me/us on this form and any financial institution with whom I/we currently deal or have previously dealt with or any professional association of which I/we am/are a member and consent to such agency referee institution or association disclosing any information about me/us to Better Mortgage Management Pty Ltd and agree that any photocopy of authorisation will be sufficient as the original authorisation.

Signed by Directors / Sole Director / Partners / Principals (please circle)	Dated
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<b>Section 8: TERMS AND CONDITIONS</b>
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Full Accreditation with Better Mortgage Management requires the following:

1. Original signed Originator Agreement (to be provided)
2. A Copy of current Professional Indemnity Insurance Certificate of Currency, indicating adequate coverage for the party entering into the agreement (minimum \$1 million per claim)
3. A copy of current membership certificate to a dispute resolution scheme (i.e. COSL)
4. Attendance at a BMM training session for all individuals to be introducing the BMM loan products
5. Evidence of Australian Credit Licence or Credit Representative number

## Policy for payment of commission

1. The Introducer's Agreement and proof of adequate Professional Indemnity cover must be returned to BMM prior to settlement of any loan in order to receive an "upfront" commission for that loan. Upfront commission is only payable at settlement and will not be backdated.
2. Trailing commission will commence only on attainment of full Accreditation. Trailing commissions will not be backdated.
3. If full Accreditation is not completed within 6 months of application, the accreditation will be automatically cancelled without notice.

Office Use Only	
Terms of Arrangement – Accreditation approved subject to:	
1. Executed Introducer's Agreement	
2. Professional Indemnity Insurance by an approved government insurer	
3. Product Training	
4. Credit Licence Number or Credit Representative Number recorded	
5. Membership of dispute resolution scheme such as COSL	
6. Check BMM Introducer ID number is already loaded on the system	