

Investor Guide to completing the Application Form



Investor Details

Applicants may be one or more individuals, a company, incorporated association, partnership or an unincorporated association.

Persons signing for:

Corporations and Incorporated Associations

Acknowledge:

- You are the officers of the corporation or incorporated association;
- You have the authority to bind the corporation or incorporated association;
- The Certificate of Incorporation attached to the application is a true and current copy;
- Company applicants may sign under seal, although seal is not required.

Joint Investors

Agree to hold the interests as joint tenants:

- Acknowledge that unless otherwise stated, both signatures are required for written withdrawal requests and additional applications;
- Acknowledge all liability shall be both joint and several.

Partnerships

- Acknowledge that you are a partner in the partnership and are investing on behalf of the partnership;
- Acknowledge that you have the authority to bind the partnership;
- Agree all liability shall be both joint and several.

Trustees

- If you are joint trustees and you elect in the relevant section of the application that either trustee can sign authorities for future transactions you acknowledge the relevant trust deed authorises you to do this;
- Acknowledge that holding units is an authorised investment of the trust into the investment.

Unincorporated Associations

Acknowledge you:

- Have authority to bind the unincorporated association;
- Invest for and on behalf of the unincorporated association.

Authorise Representative

Accept ASL and the Authorised person named in the Application may exchange personal investment details and relevant account information.

Communication

All communications from ASL will be sent to the address shown on the Application. For joint applicants only one address is required. Please include telephone, e-mail details should ASL need to contact you urgently.

Payment Details

- Complete the payment details in the Application. Your contribution will be held by Australian Securities Limited in a trust account for you until a suitable mortgage security is identified and approved by you for investment under the MSD.
- Payment can be collected by ASL for the amount you nominate to invest in the Application by debiting any bank account you nominate for that purpose in the Application.
- Investment amounts due to be repaid to you from a sub-scheme on maturity can be credited by electronic funds transfer to any bank account you nominate for that purpose in the Application.

Income Payments

Your interest income from the mortgage security will be credited to the bank account you nominate in the Application form.

You understand and acknowledge that:

1. Your nominated financial institution may in its absolute discretion decide the order of priority of payment by it of any monies pursuant to this request or any authority or mandate.
2. ASL may, in its absolute discretion, at any time by notice in writing to you, terminate this request as to future debits.
3. You can modify, defer, stop or cancel the DDR at any time by giving ASL 14 days notice in writing.
4. If at any time you feel that a direct debit against your nominated account is inappropriate or incorrect it is your responsibility to notify ASL as soon as possible.
5. It is your responsibility to ensure that there are sufficient cleared funds in your nominated account to honour the DDR. ASL will charge the cost of dishonoured direct debits against your account.

Signature Declarations

The Applicant must sign each Application personally. A person signing under a Power of Attorney must provide a certified copy of the original Power of Attorney with the Application. Joint applicants must each sign the Application. An application by a company may be under seal and must be executed in accordance with its Constitution. A copy of its Constitution need not be provided. The Application should also be dated.

By completing and signing the Application Form the investor gives ASL their Power of Attorney as set out in this PDS and the investor agrees to be bound by all the provisions in this PDS, the Constitution and any MSD approved in compliance with this PDS.

A completed Application selecting the Direct Debit Authority box and completing the bank account information at Section 4 of the Application can be mailed to -

Australian Securities Limited
Level 29, 140 William Street Melbourne
Melbourne VIC 3000 or by email to:
mail@asltd.com.au

Section T

Fund Application Form

This is an Australian Securities Limited, Fund Application Form. To be completed if you are investing in any or all of the Funds listed below



Australian Securities Fund Application.

This form accompanies the Product Disclosure Statement for each of the following funds
Please tick chosen fund application boxes:

- Australian Securities Income Fund
- Australian Securities Property Fund
- Australian Securities Term Fund
- All of the above

ASL use only: _____

When you complete this form please print in clear **BLOCK LETTERS** and use crosses in boxes.

Adviser's stamp:

- Step One** Identify the applicant type for your investment account by ticking the appropriate box
- Step Two** Complete the mandatory sections identified against the Applicant type you ticked
- Step Three** Complete section 5 only if you appoint a third party or representative to act for you.
- Step Four** Sign the Application at Section 6 [initial any amendments or white outs]
- Step Five** Return the signed Application to Australian Securities Limited along with a copy of the following:
 - Photo ID (eg Drivers licence, Passport)
 - Recent utilities bill (eg Gas, electricity, water)
 - Certified copy of a Power of Attorney (if account is opened under a Power of Attorney)
 [Authorised Representative or Third Party appointments also require Photo Identification]

Applicant type (please tick box)

Mandatory Sections to complete

- Individual or Joint Individuals..... 1, 2A, 2B, 3, 4, 6A
- Company..... 1, 2A, 2C, 3, 4, 6B
- Trust- Trustees are individuals..... 1, 2A, 2B, 3, 4, 6A
- Trust- Trustee is a company..... 1, 2A, 2C, 3, 4, 6B
- Superannuation Fund- Trustees are individuals..... 1, 2A, 2B, 3, 4, 6A
- Superannuation Fund- Trustee is a corporation..... 1, 2A, 2C, 3, 4, 6B
- Partnership- partners are individuals..... 1, 2A, 2B, 3, 4, 6A
- Partnership- partners are companies..... 1, 2A, 2C, 3, 4, 6B
- Deceased Estates..... 1, 2A, 2B, 3, 4, 6A
- Trust (no trust deed)- individual..... 1, 2A, 2B, 3, 4, 6A
- Trust (no trust deed)- Company..... 1, 2A, 2C, 3, 4, 6B
- Unincorporated body- office bearers..... 1, 2A, 2C, 3, 4, 6B

Australian Securities Limited Fund Application Form

1. Investor Name: _____

Your investment is/or will be recorded in this name

2. Do you have an existing investment in this name? Yes ASL INVESTOR NUMBER: _____

If YES and you do not wish to use this form to update our records, proceed to Signing Clause at Section 6 and return this Application with your preferred method of payment. If NO, continue to complete this Application Form.

3. Initial Investment Method⁹ (Minimum requirements apply) **If this is an ASL Term Fund Application only, please proceed to number 11.**

\$ _____ (Cash is not accepted) Direct Debit Direct Credit

4. Investment Options¹⁰ **Applies to Income Fund (ASIF)**

Only Direct Only Contributory Only Nominee All Types

5. First Mortgage Security Priority Type **Applies to Income Fund (ASIF)**

T1 T2¹¹ All Types

6. Preferred Term **Applies to Income Fund (ASIF)**

One Year Two Year Three Year Four Year Five Year Any term up to 5 Years

7. Security Category¹² **Applies to Income Fund (ASIF)**

Industrial Residential Development & Construction Regional/Rural Regional/Coast All Types

8. Interest Rate **Applies to Income Fund (ASIF)**

Fixed Variable Both Fixed and Variable

9. Interest Advance Facility¹³ **Applies to Income Fund (ASIF)**

If you do not require this facility for direct investments tick this box Hold – I do not require the interest Advance Facility

10. Investment Summary¹⁴ **Applies to Property Fund (ASPF) & Income Fund (ASIF)**

Investment summaries are issued electronically. Tick box to opt out of receiving summary

11. Annual Accounts and Reports **Applies to Property Fund (ASPF) & Income Fund (ASIF)**

The Annual Report for all Australian Securities Limited Funds are available on the ASL website. You can "opt in" to receive a paper version by post. Tick this box if you wish to receive the Australian Securities Limited, Funds Annual Accounts & Report by post.

12. GST

Yes No ABN No. _____

13. Privacy Notice

Your personal information is collected to enable us to provide you with information about existing or new investments, investment opportunities and Fund performance. Please cross the box if you do not wish to receive this marketing information.

No marketing information

⁹ Initial Investment (Page 8 ASTF PDS) ¹⁰ Investment options (Page 5 ASIF PDS) ¹¹ T2 Investments (Page 7 ASIF PDS) ¹² Security Categories (Page 6 ASIF PDS)

¹³ Interest Advance Facility (Page 8 ASIF PDS) ¹⁴ Mortgage Security Summary (Page 3 ASIF PDS) / Property Description Certificate [PDC] (Page 5 ASPF PDS).

Section

2

Australian Securities Limited Fund Application Form

A INFORMATION TYPE

New Investor Information

Updated Investor Information

B INDIVIDUALS (COMPLETE ALSO IF TRUSTEE IS INDIVIDUAL(S))

1. Individual Investor A or Trustee

Title (Mr/Mrs/Miss/Ms/Other) _____ This person is an Individual Trustee for this Investment

Given Names: _____

Last Name: _____ Date of Birth _____ / _____ / _____

Tax File Number: _____

2. Individual Investor B or Trustee

Title (Mr/Mrs/Miss/Ms/Other) _____ This person is an Individual Trustee for this Investment

Given Names: _____

Last Name: _____ Date of Birth _____ / _____ / _____

Tax File Number: _____

3. Relationship Investor A & B. If contact details for each investor the same, please state "AS ABOVE" for Investor B

Joint Tenants in Common Partnership Trustee

4. Account signing authorities for future transactions

For two investors only A&B Either A or B Only A Only B

C NON INDIVIDUAL

5. Name: _____

If the Trustee is an Individual, complete Question 1 and Mark the BOX as Trustee.

6. Tax File Number: _____

Australian Registered Business Number or Exemption Reason: _____

ARBN Non-resident OR Exemption Reason: _____

Australian Securities Limited Fund Application Form

Contact Information

1. Contact Name: _____

2. Contact Details

Address: _____ Suburb: _____

State: _____ Postcode: _____ Country of Residence (If other than Australian): _____

Telephone (Home): + 61 () _____ (Work): + 61 () _____ (Mobile): _____

Fax: + 61 () _____ E-mail address: _____

3. Alternative Contacts: _____ Phone (Day time) + 61 () _____

4. Relationship: _____

ADVISERS DETAILS (if applicable)

5. Lawyers Details

Contact Name: _____ Phone No: + 61 () _____

Business No: _____ Address: _____

Suburb: _____ State: _____ Postcode: _____

6. Accountant Details

Contact Name: _____ Phone No: + 61 () _____

Business No: _____ Address: _____

Suburb: _____ State: _____ Postcode: _____

7. Financial Advisor Details

Contact Name: _____ Phone No: + 61 () _____

Business No: _____ Address: _____

Suburb: _____ State: _____ Postcode: _____

7. Attorney or Administrator Details

Contact Name: _____ Phone No: + 61 () _____

Business No: _____ Address: _____

Suburb: _____ State: _____ Postcode: _____

Power of Attorney Appointment as administrator _____ / _____ / _____ Date of Appointment

Attach Certified copy of EPA or Order of Appointment as Administrator

8. Next of Kin (Emergency Only)

Contact Name: _____ Phone No: + 61 () _____

Business No: _____ Address: _____

Suburb: _____ State: _____ Postcode: _____

Section

4

Australian Securities Limited Fund Application Form Capital & income payments electronic banking

1. DEFT INVESTMENT ACCOUNTS - AUTHORITY

Direct Credit Authority Direct Debit Authority

2. Bank Account Details (ASL User ID 161318, 484021 & 476158)

The following nominated bank account will be:

- (a) Credited for payment of income distributions and withdrawals if applicable, and
- (b) Debited for your initial and additional investments (if paying by direct debit).

(i) Primary Bank Account (incorporating Direct Debit request)

Name of Institution: _____

Address: _____

City: _____ State: _____ Postcode: _____

Account Name: _____ BSB Number: _____ Account Number: _____

Direct Debit Authority/We acknowledge this Direct Debit arrangement is governed by the Direct Debit Facility in this Product Disclosure Statement to Australian Securities Ltd (ASL User ID 161318, 484021 & 476158)

BANK SIGNATORIES All signatories for account to be debited must sign

Signature: _____

Signature: _____

3. ALTERNATE BANK ACCOUNT FOR INCOME DISTRIBUTION ONLY

Please complete if you wish to nominate an alternative bank account for payment of the following:

Income distribution payments

(ii) Optional Alternative Bank Account (for direct credit payments only)

Name of Institution: _____

Address: _____

City: _____ State: _____ Postcode: _____

Account Name: _____ BSB Number: _____ Account Number: _____

4. INSTRUCTIONS FOR ALL CAPITAL REPAYMENTS FROM INCOME FUND INVESTMENTS*:

Please complete the following.

Return capital to the nominated primary bank account

OR

Return Capital to the Australian Securities Term Fund (ASTF) account. Note this Capital will then be subject to the 90 day minimum investment term as defined by the ASTF PDS; the 14 day cooling-off period will not apply.

Signature: _____ Date: _____ / _____ / _____

* Note that these instructions can be changed by providing written notice to ASL 10 business days prior to the next capital repayment

Australian Securities Limited Fund Application Form Authorised Representative

Authorised Representative

You may appoint another person or entity with legal capacity to contract as your authorised representative to operate investments on your behalf by completing this section. Complete company name & ASL reference if authorised representative is known.

Company Name: _____

Title (Mr/Mrs/Miss/Ms/Other): _____ ASL INVESTOR NUMBER: _____

Given Names: _____ Last Name: _____

CONTACT DETAILS

Address 1: _____

Address 2: _____

City: _____ State: _____ Postcode: _____

Telephone (Home): + 61 () _____ (Work): + 61 () _____ (Mobile): _____

Fax: + 61 () _____ E-mail address: _____

I/We agree to the conditions relating to the appointment of an authorised representative as shown in the declarations, conditions and acknowledgments. All investors must countersign the authorised representative's signature

Authorised Representative: All signatories for account to be debited must sign Enduring Power of Attorney held?

Signature: _____ Date: ____ / ____ / ____

SIGNATORIES APPOINTED AUTHORISED REPRESENTATIVES

Given Names: _____ Last Name: _____ Date: ____ / ____ / ____
Investor A (Print Name and Date)

Given Names: _____ Last Name: _____ Date: ____ / ____ / ____
Investor B (Print Name and Date)

APPOINTING AUTHORISED REPRESENTATIVE

COMPANY SEAL

Signature: _____ Signature: _____



You must indicate your company title

Director or Secretary Sole Director and Sole Secretary

You must indicate your company title

Director Secretary

Australian Securities Limited Fund Application Form

Investor Authorisation

Section 6

SIGNATURE(S)

All investors must sign and date the Application.

In signing this Application I/We acknowledge that I/We have read and understood the Product Disclosure Statement to which this Application relates AND agree, consent and acknowledge the declarations, conditions and acknowledgments provided in the Prospectus AND declare that all the details given in this Application are true and correct.

NOTE: If signing under a Power of Attorney, you are verifying that at the time of signing you have not received notice of revocation of that Power. Please provide a certified copy of the Power of Attorney including appointed signature

A INDIVIDUALS & INDIVIDUALS ACTING AS TRUSTEES

Investor A (Print Name and Date)

Given Names: _____ Last Name: _____

SIGNING CLAUSE: _____ Date: _____ / _____ / _____

Investor B (Print Name and Date)

Given Names: _____ Last Name: _____

SIGNING CLAUSE: _____ Date: _____ / _____ / _____

B CORPORATE INVESTORS

COMPANY SEAL

Company Name: _____

ACN: _____



CORPORATE DIRECTORS SIGNING CLAUSE Director (Print Name and Date)

Two directors or a director and a company secretary MUST sign (unless Sole Director and Sole Secretary)

1. Given Names: _____ Last Name: _____

Signature: _____ Date: _____ / _____ / _____

You must indicate your company title Director or Secretary Sole Director and Sole Secretary Other

2. Given Names: _____ Last Name: _____

Signature: _____ Date: _____ / _____ / _____

You must indicate your company title Director or Secretary Sole Director and Sole Secretary Other

3. Given Names: _____ Last Name: _____

Signature: _____ Date: _____ / _____ / _____

You must indicate your company title Director or Secretary Sole Director and Sole Secretary Other

4. Given Names: _____ Last Name: _____

Signature: _____ Date: _____ / _____ / _____

You must indicate your company title Director or Secretary Sole Director and Sole Secretary Other