

- ✓ Before you sign this application, you must read the Product Disclosure Statement (PDS) dated 19 September 2016 and any supplementary PDS.
- ✓ Please write in CAPITAL letters.

### 1) INVESTOR DETAILS

Full legal name	<input type="text"/>		
As registered by ASIC	<input type="text"/>		
ABN/ARBN/CAN	<input type="text"/>		
Business type	<input type="text"/>		
Account name	<input type="text"/>		
(If different from the above)	<input type="text"/>		

### 2) FULL REGISTERED ADDRESS (must not be a PO Box)

Unit no.	<input type="text"/>	Street no.	<input type="text"/>	Suburb	<input type="text"/>
Street name	<input type="text"/>			Country	<input type="text"/>
State	<input type="text"/>	Postcode	<input type="text"/>		

### 3) PRINCIPAL PLACE OF BUSINESS (must not be a PO Box) (if different from full registered address)

Unit no.	<input type="text"/>	Street no.	<input type="text"/>	Suburb	<input type="text"/>
Street name	<input type="text"/>			Country	<input type="text"/>
State	<input type="text"/>	Postcode	<input type="text"/>		

### 4) POSTAL ADDRESS (if different from full registered address)

Unit no.	<input type="text"/>	Street no.	<input type="text"/>	Suburb	<input type="text"/>
Street name	<input type="text"/>			Country	<input type="text"/>
State	<input type="text"/>	Postcode	<input type="text"/>		

#### Contact details

Daytime telephone	<input type="text"/>	Mobile	<input type="text"/>
Email address	<input type="text"/>		

### 5) COMPANY TYPE (select ONE of the following categories)

- Proprietary** (i.e A company with a name ending in Proprietary Ltd or Pty Ltd; also know as private companies) proceed to section 7
- Public** (i.e A company with a name that does not include the word Pty or proprietary) proceed to section 6

### 6) LISTING AND REGULATORY DETAILS (select ANY of the following categories if applicable)

Australian Public Listed company (companies that are listed on an Australian financial market such as the ASX)

Name of market or exchange

Majority owned subsidiary of an Australian public listed company (companies that are majority owned by an Australian company that is listed on an Australian financial market such as the ASX)

Australian listed company name

Name of market or exchange

Regulated company (subject to the supervision of a Commonwealth, State or Territory statutory regulator beyond that provided by ASIC as a company registered body. Examples include Australian Financial Services Licensees (AFSL); Australian Credit Licenses (ACL); or Registrable Superannuation Entity (RSE) Licensees).

Regulator name

Licence details

(e.g AFSL, ACL, RSE)

### 7) DIRECTOR DETAILS

If there is insufficient space, please complete and attach a separate sheet.

How many directors does your company have?

#### Director 1

Title

Mr

Mrs

Ms

Dr

Other

Surname

Given name(s)

#### Director 2

Title

Mr

Mrs

Ms

Dr

Other

Surname

Given name(s)

#### Director 3

Title

Mr

Mrs

Ms

Dr

Other

Surname

Given name(s)

#### Director 4

Title

Mr

Mrs

Ms

Dr

Other

Surname

Given name(s)

Please attach a separate page if you require more space.

### 8) BENEFICIAL OWNERSHIP

Are there any individuals who ultimately own 25% or more of the company's issued share capital (through direct or indirect shareholdings)?

Yes (complete section 9)

No (go to section 10)

### 9) TO BE COMPLETED FOR ALL COMPANIES THAT DID NOT MAKE A SELECTION AT SECTION 6

Please provide details for all beneficial owners of the company. A beneficial owner is:

- someone who holds 25% or more of the issued shares in the company either directly or indirectly eg through trusts
- or a person who controls the company (i.e. able to vote on 25% or more of issued shares in the company, including veto power)
- if neither of the above then list the CEO or most senior decision makers i.e the managing director or directors who are authorised in the company

#### Beneficial owner 1

Full Name	<input type="text"/>		
DOB	<input type="text"/>		
Address	<input type="text"/>		
Suburb	<input type="text"/>	State	<input type="text"/>
Postcode	<input type="text"/>	Country	<input type="text"/>

#### Beneficial owner 2

Full Name	<input type="text"/>		
DOB	<input type="text"/>		
Address	<input type="text"/>		
Suburb	<input type="text"/>	State	<input type="text"/>
Postcode	<input type="text"/>	Country	<input type="text"/>

#### Beneficial owner 3

Full Name	<input type="text"/>		
DOB	<input type="text"/>		
Address	<input type="text"/>		
Suburb	<input type="text"/>	State	<input type="text"/>
Postcode	<input type="text"/>	Country	<input type="text"/>

#### Beneficial owner 4

Full Name	<input type="text"/>		
DOB	<input type="text"/>		
Address	<input type="text"/>		
Suburb	<input type="text"/>	State	<input type="text"/>
Postcode	<input type="text"/>	Country	<input type="text"/>

Please attach a separate page if you require more space.

### 10) IDENTIFICATION PROCEDURES

KeyInvest must verify:

- the full name of the company as registered by ASIC;
- the registered office address;
- the company registration as a Proprietary Company (i.e., Pty Ltd); and
- Australian Company Number (ACN).

To verify this information you must provide to KeyInvest the following documents listed at A or B:

**Please mark x to indicate the type of documentation that you are providing.**

**A** - Original or certified copy of a certificate registration issued by ASIC

OR

**B** - Original or certified copy of a certificate registration issued by ASIC

KeyInvest also needs to identify each of the beneficial owners listed in this application. This can be completed in this section or by downloading an Individual ID Form from [www.keyinvest.com.au/financial-services/customer-forms](http://www.keyinvest.com.au/financial-services/customer-forms)

### Customer identification procedures for all beneficial owners named in Section 9

KeyInvest must verify your:

- Full name
- Date of birth
- Residential address

In order for KeyInvest to verify this information:

- Each LEB beneficial owner **MUST** supply **ONE** original or certified copy of a primary identification document from the Document List immediately below:

#### Document List

Beneficial owner (1)	Beneficial owner (2)	Primary photographic identification documents:
<input type="checkbox"/>	<input type="checkbox"/>	Current Australian driver's licence
<input type="checkbox"/>	<input type="checkbox"/>	Australian passport (not expired more than 2 years)
<input type="checkbox"/>	<input type="checkbox"/>	Current international passport
<input type="checkbox"/>	<input type="checkbox"/>	Current proof of age card (government issued)

  

Beneficial owner (1)	Beneficial owner (2)	Primary non-photographic identification documents:
<input type="checkbox"/>	<input type="checkbox"/>	Birth certificate
<input type="checkbox"/>	<input type="checkbox"/>	Citizenship certificate
<input type="checkbox"/>	<input type="checkbox"/>	Current Centrelink pension card

Does your primary identification document contain BOTH a photo AND your current residential address?

- Yes - No additional information is required
- No - You must also supply ONE original or certified copy of a secondary identification document that contains your current residential address from the Document List immediately below:

#### Document List

Beneficial owner (1)	Beneficial owner (2)	Secondary identification documents:
<input type="checkbox"/>	<input type="checkbox"/>	Utility bill or Council rates notice (less than 3 months old)
<input type="checkbox"/>	<input type="checkbox"/>	Taxation notice or Centrelink statement (less than 12 months old)

### Authorised persons who can certify customer identification documents

Your photocopied identification documents must be signed as certified true copies by one of the following:

- An officer with, or authorised representative of, a holder of an Australian Financial Services Licence, having 2 or more continuous years of service with one or more licensees (e.g. financial adviser)
- A nominated employee of KeyInvest
- A registrar or deputy registrar of a court
- An Australian consular officer or an Australian diplomatic officer
- A lawyer
- A judge of a court
- A magistrate
- A Chief Executive Officer of a Commonwealth court
- A notary public
- A Justice of the Peace
- An authorised Australian Post Office permanent employee
- An accountant (member of the ICA or CPA)
- An officer with 2 or more continuous years of service with one or more finance institutions

### 11) LIFE INSURED DETAILS

You **MUST** nominate a natural person(s) as Life Insured and include identification documents for the Life Insured as per section 10 above. The death of the last surviving Life Insured (in case of multiple Lives Insured) will trigger the pay out of the Life Events Bonds proceeds. You may nominate up to two Lives Insured.

#### Life Insured 1

Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss	Other	<input type="text"/>
Surname	<input type="text"/>				
Given names	<input type="text"/>				
Date of birth	<input type="text" value="DD / MM / YY"/>	Gender	<input type="checkbox"/> Female	<input type="checkbox"/> Male	

#### Residential address (must not be a PO Box)

Unit no.	<input type="text"/>	Street No.	<input type="text"/>	Suburb	<input type="text"/>
Street name	<input type="text"/>			Country	<input type="text"/>
State	<input type="text"/>	Postcode	<input type="text"/>		

#### Life Insured 2

Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss	Other	<input type="text"/>
Surname	<input type="text"/>				
Given names	<input type="text"/>				
Date of birth	<input type="text" value="DD / MM / YY"/>	Gender	<input type="checkbox"/> Female	<input type="checkbox"/> Male	

#### Residential address (must not be a PO Box)

Unit no.	<input type="text"/>	Street No.	<input type="text"/>	Suburb	<input type="text"/>
Street name	<input type="text"/>			Country	<input type="text"/>
State	<input type="text"/>	Postcode	<input type="text"/>		

### 12) INVESTMENT OPTIONS

#### Investment term

You can nominate an investment term between one and 99 years. If you do not make a selection the default term is 99 years. You can still access your investment any time after the first three months.

Investment Term  Years. You may change your investment term at any time

#### Investment Options

- Specify amount to be invested as a lump sum and your Regular Savings Plan amount (if applicable).
- Minimum initial Lump Sum investment is \$100, subject to \$100 per Investment Option.
- Minimum Initial Regular Savings Plan is \$25, subject to \$25 per Investment Option.

No.	Investment Options	UFM	Benefit Fund No. (KeyInvest use only)	Lump sum invested	Regular savings plan (per month)
<b>PART A1 - INDEXED DIVERSIFIED</b>					
1	Conservative Indexed	Vanguard			
2	Balanced Indexed	Vanguard			
3	Growth Indexed	Vanguard			
4	High Growth Indexed	Vanguard			
<b>PART A2 - INDEXED SECTOR</b>					
5	Fixed Interest Indexed	Vanguard			
6	Australian Property Securities Indexed	Vanguard			
7	Australian Shares Indexed	Vanguard			
8	International Shares Indexed	Vanguard			
<b>PART B - DIVERSIFIED</b>					
9	Conservative	Russell			
10	Balanced	Russell			
11	Growth	Russell			
12	High Growth	Russell			
13	Active Diversified Geared	MLC			
<b>PART C - SECTOR SPECIFIC</b>					
14	Australian Cash	Russell			
15	Term Deposit	KeyInvest			
16	Active Cash	Smarter Money			
17	Fixed Interest	Schroder			
18	Australian Property Securities	MLC			
19	Infrastructure	Magellan			
20	Australian Shares	Fidelity			
21	Australian Shares Multi	Russell			
22	Australian Shares Value	Investors Mutual			
23	Australian Shares Industrial	Investors Mutual			
24	Australian/International Shares Long-Short	Watermark			
25	Australian Shares Geared	Perpetual			
26	International Shares Multi	Russell			
27	International Shares	Magellan			
<b>Total Invested: (before deducting stamp duty)</b>				\$	\$

#### Stamp duty information

This is a government charge that may be payable depending on your State/Territory of residence.

AML CTF law requires that we collect information regarding your source of funds and wealth. Please tick the relevant box in each table. Please note that the application cannot be processed without this information.

#### Source of funds i.e. the origin of this contribution to establish your LEB

- Employment Income
- Existing savings or investments
- Proceeds from an inheritance
- Other (please specify below, eg sale of assets, gift)

#### Source of wealth i.e. how you generate your wealth

- Savings from employment income
- Profit from investing
- Proceeds from an inheritance
- Other (please specify below)

### 13) PAYMENT OPTIONS

- Cheque - Make cheques payable to KeyInvest Ltd.
- Direct debit - Complete the attached Direct Debit Request (DDR) Form
- BPAY- Once we receive your application we will contact either:
- LEB Investor 1 (and/or) - (With the biller code and your Customer Reference Number (CRN) to allow the initial payment to be made.)
  - Your financial adviser

### 14) AUTOMATIC INCREASES TO REGULAR SAVINGS PLAN

You can elect to automatically increase your Regular Savings Plan (if selected), 'only applicable by Direct Debit'.

Do you wish to automatically increase your Regular Savings Plan?

Yes  No

Annual percentage increase % (up to a maximum of 25%)

### 15) PURPOSE OF INVESTING

What are your reasons for investing. Please choose one or more;

- |   |  |                      |
|---|--|----------------------|
| <input type="checkbox"/> Child's education    | <input type="checkbox"/> Estate planning/wealth transfer |                      |
| <input type="checkbox"/> General savings      | <input type="checkbox"/> Life event (please specify)     | <input type="text"/> |
| <input type="checkbox"/> Alternative to super | <input type="checkbox"/> Other (please specify)          | <input type="text"/> |

### 16) SERVICE FEE PAYMENT INSTRUCTIONS (OPTIONAL)

You may instruct KeyInvest to pay your financial adviser or service provider an initial service fee, ongoing service fee or both. Please note service fees will be payable to your adviser or service provider by a withdrawal from your Investment each month.

#### Payment options

##### A. Initial service fee

I/We agree that the following amount is withdrawn from my/our investment as a once off initial service fee payable to my/our financial adviser or service provider.

Fixed dollar amount \$

% of initial investment

##### B. Ongoing service fee

I/We agree that the following amount is withdrawn from my/our investment as an ongoing service fee, payable to my/our financial adviser or service provider.

Fixed dollar amount \$  per month or

% of average daily balance %

If you invest into more than one Investment Option the service fee will be deducted proportionately across each option.

### 17) TAX RESIDENCY DECLARATION

a) Is the entity a tax resident in any country other than Australia?  Yes  No

If you answered "yes" KeyInvest will send a CRS Entity Self-Certification Form.

b) Are any of the beneficial owners named in Section 9 tax residents in any country other than Australia?  Yes  No

If you answered "Yes" KeyInvest will send a CRS Controlling Person Self-Certification Form.

If you answered "No" to both a) and b) no further action is required regarding tax residency.



### 18) AGREEMENT AND DECLARATION

- If your name appears on this Application Form, or you are the parent or guardian of a minor, or an authorised representative of the company, trust or other type of investor, you must sign and date this Application Form.
- KeyInvest cannot process this application without these signatures. By Signing this Application Form I/we:
  1. Acknowledge that I/we have received and have been given the opportunity to read the entire LEB PDS dated 19 September 2016 and any supplements to the PDS.
  2. Instruct KeyInvest to complete my/our investment instructions in accordance with the instructions on this form.
  3. Acknowledge that:
    - a. Investments can be subject to investment risk, possible delays in repayment and loss of income and principal invested.
    - b. KeyInvest, or any of its subsidiaries, do not guarantee the performance of the Investment Options or the UMF, or any particular rate of return, and
    - c. I/we have considered the appropriateness of the KeyInvest LEB to my/our investment objectives and needs and have not received specific investment advice from KeyInvest.
  4. Declare that I am/we are not commonly known by any names different to those disclosed in this Application Form, unless I/we have disclosed that information in writing to KeyInvest.
  5. Authorise the collection, use and disclosure of my/our personal information for the purpose of the management and administration of those KeyInvest products and services in which I/we have invested or for which I/we wish to apply, in accordance with the KeyInvest Privacy Policy.
  6. Agree that the information provided on this Application Form may be shared with the financial adviser and/or Financial Dealer group nominated on this form and/or subsequently notified to KeyInvest.
  7. Accept that KeyInvest may send me/us information about its products and/or services from time to time. I/we understand that I/we may notify KeyInvest of my/our decision not to receive further information by contacting KeyInvest directly.
  8. Declare that any document or information to be used for the purposes of this Application (whether or not provided on or with this application):
    - a. Is complete and correct, and
    - b. If it is about another person or party, is provided with the express authority of that person or party where required by law.
  9. Acknowledge that it may be a criminal offence to knowingly provide false or misleading information or documents in connection with this application.
  10. Acknowledge in the event of inconsistency between the LEB Benefit Fund Rules (the Rules) and the information contained in the PDS, the Rules will prevail. If an agent is signing this Application on my/our behalf, the last two declarations above are also given by and bind the agent in the personal capacity.

#### Investor Signatures

Each signatory below confirms that they have been duly authorised to execute this application on behalf of the investor(s). The signatures of signatory 1 and 2 will be required for any withdrawals to this investment.

Power of attorney (tick here if applicable)

Power of attorney (tick here if applicable)

Signature 1

Date

Signature 2

Date





Full name

Full name