Centuria

CENTURIA LIFE LIMITED AFSL 230 867 ACN 087 649 054

Centuria Education Bond

APPLICATION FORM

Centuria's Investment Bonds offered by this product disclosure statement are designed for investors seeking a tax-effective investment over the medium to long-term. For investment and product related questions, please contact Centuria Investor Services on 1300 50 50 50.

APIR CODE CNT0032AU | 20 August 2026

HOW TO INVEST

Online application
Go to **centuria.com.au/lifegoals/invest** and follow the instructions.

Postal application
Refer below and follow the instructions to complete your application.

We highly recommend applying through our streamlined online application portal. Online application forms will be processed immediately, as opposed to postal applications which may take several days to be received.

This application form (including direct debit authority form) is part of the Product Disclosure Statement issued by Centuria Life Limited (ABN 79 087 649 054) (AFSL 230867) for Centuria LifeGoals dated 20 August 2026. The PDS contains important information about Centuria Education Bonds. Please read the PDS before applying. You should also read the target market determination (**TMD**) for Centuria LifeGoals, which is available at **centuria.com.au/investment-bonds/investor-centre**. Any person who gives another person access to this application form must at the same time and by the same means, give the other person access to the PDS (and, if issued, any supplementary PDS). The offer to which the PDS relates is only available to eligible Investors receiving a copy (electronically or otherwise) in Australia. Unless the context requires otherwise, capitalised terms used in this application form have the meaning given to them in the PDS. We reserve the right to accept or refuse any application for investment in the Centuria Education Bonds.

Checklist – completing your application form

- ☐ Complete the **target market determination**.
- ☐ Complete the **application form**.
- ☐ If required complete the **identification form 1 – individual, joint or sole trader**.
- ☐ If required complete the **identification form 2 – companies**.
- ☐ If required complete the **identification form 3 – trusts, trustees**.
- ☐ **Make payment** using one of the payment methods below.

Payment methods

You will be provided details once your application has been received by our registry administrator, Caruso. You will be provided the below payment options to fund your application. Any delays in receiving your application monies may result in an application being delayed or rejected.

BPAY®

Electronic funds transfer

NOTE: *If you choose electronic funds transfer as your payment method, you must include the unique payment reference provided with your payment instructions. This reference is required to ensure your funds can be correctly matched to your application and to avoid any delay in the allotment of your units.*

Where to send your application

Email
Centuria Life accepts application forms and identification documents via email. Scanned copies of certified documents are acceptable. Email your completed application form and identification documentation to **enquiries@centuria.com.au**.

By post
Mail to Centuria LifeGoals C/O Centuria Investor Services, Level 41, Chifley Tower, 2 Chifley Square, Sydney NSW 2000. If sending by post, your identification documents must be an original certified document, or a copy of the certified original document.

Your application cannot be processed until your application form, payment and the required identification documents have been received by Centuria Life.

TARGET MARKET DETERMINATION

Filtering questions for target market determination

The following questions assists in Centuria Life Limited (**CLL**) in meeting its regulatory obligations by enabling it to assess whether the Centuria LifeGoals is being offered to the stated target market. If you don't understand the questions or need assistance, we recommend that you seek advice from your financial adviser before deciding to proceed with your investment.

INVESTOR STATUS

Are you investing in this Bond on the advice of a licensed financial adviser who has provided current investment advice having regard to your personal objectives, financial situation and needs?

☐ Yes ☐ No

If you have answered yes, you do not need to complete the target market determination questionnaire, but you must provide your adviser details in the application form.

TARGET MARKET DETERMINATION QUESTIONNAIRE

Question 1 Are you comfortable with selecting your own Investment Options?	☐ Yes	☐ No
Question 2 What is your intended investment timeframe? (select only **ONE** option)	☐ Less than 1 year	☐ 1 year or more
Question 3 Are you a superannuation fund looking to invest in the Centuria Education Bond product?	☐ Yes	☐ No
Question 4 Are you looking for a product that calculates and pays a regular distribution?	☐ Yes	☐ No
Question 5 Are you looking to invest in the Centuria Education Bond for education purposes?	☐ Yes	☐ No

Important notice: Your responses to these questions may indicate that the product is not suitable for you. Before proceeding with your investment, we recommend that you review the target market determination for the product which can be found on our website **centuria.com.au/education-bond/tmd** or by calling us on **1300 50 50 50** and/or seek advice from your financial adviser before deciding to proceed with your investment.

By completing the application form, you acknowledge that you have read and understood in the PDS and the Investment Options Booklet how the Centuria LifeGoals Education Bond invests your funds.

APPLICATION FORM CENTURIA LIFEGOALS EDUCATION BOND

Guide to completing this form.

- Complete the form for each new Investor nominated on your application.
- Complete the form in pen using block letters and mark appropriate answers with a cross X or number.
- Any queries please contact the Centuria Investor Services team on **1300 50 50 50**.

Section 1 INVESTOR IDENTIFICATION

*The AML legislation requires Centuria Life Limited to confirm the identity of each Investor. If Centuria Life Limited is not able to do so, it may not be able to accept your application. If you are an existing Centuria Life Limited investor and **HAVE NOT** invested in a Centuria product in the last five years, we may require additional AML verification documentation to process your application. We will be in contact to request further information.*

Has the person/entity invested in a Centuria fund previously?

☐ Yes, Bond number _____

Has there been any change to the following?

- If applying as a company, the company details including directors, Beneficial Owners and key stakeholders who own 25% or more of shares.
- If applying as a trust, the trust details including trustee and beneficiaries.

You must complete the **identification form** referring to your investment entity.

☐ No, I have not invested previously.

In addition to this application form, you also need to complete the investor identification form appropriate to the type of Investor you are, as below.

☐ 1. Individual/joint investor > Complete **identification form 1 – individual, joint or sole trader**

☐ 2. Company > Complete **identification form 2 – companies**

☐ 3. Trust > Complete **identification form 3 – trusts, trustees**

Section 2 INVESTOR DETAILS

Adviser details are not acceptable unless your adviser holds a Letter of Authority which must be provided with the application form. The investment contact will be the noted contact on all statements and correspondence.

Bond entity name

☐ Individual - investor name _____

☐ Company - company name _____

☐ Trust - trust name _____

Title | Given name | Surname

Street/PO box

Suburb | State | Postcode

Telephone number

Mobile number

Email address

By providing this email address, you agree to receive all communications, including transaction confirmations, statements, reports and other notifications required by the Corporations Act, by email. From time to time we may still need to send correspondence by post. Contact us if you would like to receive a hard copy of the annual statement in the post.

NOTE: *The identification section needs to be completed for ID purposes.*

Section 3 INVESTOR CONTACT

Authority to instruct Centuria

Please select which joint applicants have authority to instruct on the investment and bind the other joint Investor(s) for future transactions (including additional investments, switches and withdrawals).

☐ All applicants (default) ☐ Applicant 1 ☐ Applicant 2 ☐ Either applicant

Section 4 REGULAR INVESTMENT PLAN

I/We wish to participate in the Regular Investment Plan and I/we agree to be bound by the service agreement terms and conditions outlined in the 'Direct debit request service agreement'. Direct debits are processed on day 17 of each month. If the processing day falls on a weekend, public holiday, state holiday or a non-Business Day your debits would be processed on next Business Day. It may also take funds up to three days to clear depending on the financial institution you bank with.

Frequency

Direct debit to commence (MM/YYYY)

☐ Monthly ☐ Quarterly ☐ Yearly

Would you like the regular contribution to automatically increase annually to take advantage of the 125% Rule. If so, by how much would you like the contribution amount to increase on the anniversary of you commencing the regular contribution plan?

☐ 0% (default) ☐ 5% ☐ 10% ☐ 15% ☐ 20% ☐ 25%

Please complete the 'Direct debit authority' section. If you do not complete this form, your investment will not be processed.

Section 5 PAYMENT DETAILS

These details are required so your payment can be matched to your application form.
Please indicate your payment method:

☐ Direct debit
> Complete the 'Direct debit authority' section.

☐ EFT
> Your reference

☐ BPAY®
> Refer to payment section 'How to invest'.

Section 6 SOURCE OF FUNDS

Please confirm the source and origin of funds being invested e.g. inheritance or savings.

Section 7 DIRECT DEBIT AUTHORITY

- Any queries please contact the Centuria Investor Services team on **1300 50 50 50**.
- Direct debits are only available for initial investments less than $500,000. If your investments is greater than $500,000 please use BPAY or EFT.

☐ Establish a Regular Investment Plan with the amounts specified in the Regular Investment Amount(s) in **Section 19**, allocated to each investment option.

☐ Establish once off direct debit for initial investment.

Section 8 DETAILS

These details are found on your investment correspondence.

Bond number – if you are an existing investor

Account name/investment entity

Section 9 BANK DETAILS

Initial investment

Account name

BSB number

Account number

Name of financial institution

Section 10 ADVISER CONTACT DETAILS

Please ensure your licensee has signed an RCTI agreement with Centuria Life Limited.

Please have your financial adviser complete and sign this section, to confirm they hold a current AFS licence and are authorised to deal and advise on managed investment products.

Adviser given name

Adviser surname

Adviser company (if applicable)

Adviser telephone number

Adviser email address

Dealer group name

AFSL number

I confirm I have provided personal advice to the applicant in relation to their investment in the Fund and I represent that I: have reviewed and considered the TMD in providing personal advice to the applicant; have robust product governance arrangements in place to ensure compliance with my distribution obligations in Part 7.8A of the Corporations Act; have taken reasonable steps that will, or are reasonably likely to result in distribution of the Fund being consistent with the TMD; have complied with the distribution conditions/restrictions in the TMD; will provide to Centuria the reports specified in the TMD within the timeframes specified in the TMD; will not knowingly do anything to put Centuria in breach of Part 7.8A of the Corporations Act; and will notify Centuria immediately if I become aware of anything that would, or may potentially, put Centuria in breach of Part 7.8A of the Corporations Act.

Adviser signature

Full name

Date (DD/MM/YYYY)

Section 11 ADVISER SWITCH

☐ I authorise the adviser nominated above to submit Investment Option switch requests on my behalf.

Section 12 INITIAL ADVICE FEE

I hereby direct Centuria Life Limited to pay an adviser service fee, out of my application monies on my/our behalf to my financial adviser.

Initial advice fee (if applicable) excluding GST*

**GST will be deducted separately*

☐ % **OR** $ ☐

Section 13 ONGOING ADVISER SERVICE FEE

Ongoing adviser service fee (excluding GST and paid monthly in arrears)

☐ % p.a. based on the Investors account balance **OR** $ ☐ p.a.

OR such other percentage p.a. or other dollar amount p.a. that Centuria is instructed from time to time to pay to the financial adviser by the Investor.

For both initial and ongoing adviser service fee please ensure your adviser's licensee has signed an RCTI agreement with Centuria Life Limited. Please contact Centuria Investor Services to obtain a copy of the agreement.

Section 14 HOW WOULD YOU LIKE YOUR BOND SETUP?

Nominated Student *(You must name an individual and cannot be an entity, such as a company or trust)*	☐ Yes	☐ No
Life Insured *(Optional, however if no Life Insured is nominated this defaults to Bond holder)*	☐ Yes	☐ No
Beneficiary nominations *(Optional)*	☐ Yes	☐ No
Guardian(s) *(Optional, must be at least 18 years of age who is an individual)*	☐ Yes	☐ No

Please proceed to the relevant pages to set up your Bond.

Section 15 NOMINATED STUDENT(S)

Nominated Student(s) must be an individual and cannot be an entity, such as a company or trust. You can nominate up to 10 students.

I, the Bond Owner, hereby nominate the following student(s).

Nominated Student 1

Given name

Surname

Residential address

Suburb

State

Postcode

Email

Mobile

Date of birth (DD/MM/YYYY)

Relationship to policy owner

☐ Son ☐ Daughter ☐ Grandson ☐ Granddaughter ☐ Nephew ☐ Niece

☐ Other (please specify)

Nominated Student 2

Given name

Surname

Residential address

Suburb

State

Postcode

Email

Mobile

Date of birth (DD/MM/YYYY)

Relationship to policy owner

☐ Son ☐ Daughter ☐ Grandson ☐ Granddaughter ☐ Nephew ☐ Niece

☐ Other (please specify)

Nominated Student 3

Given name

Surname

Residential address

Suburb

State

Postcode

Email

Mobile

Date of birth (DD/MM/YYYY)

Relationship to policy owner

☐ Son ☐ Daughter ☐ Grandson ☐ Granddaughter ☐ Nephew ☐ Niece

☐ Other (please specify)

Nominated Student 4

Given name

Surname

Residential address

Suburb

State

Postcode

Email

Mobile

Date of birth (DD/MM/YYYY)

Relationship to policy owner

☐ Son ☐ Daughter ☐ Grandson ☐ Granddaughter ☐ Nephew ☐ Niece

☐ Other (please specify)

Nominated Student 5

Given name

Surname

Residential address

Suburb

State

Postcode

Email

Mobile

Date of birth (DD/MM/YYYY)

Relationship to policy owner

☐ Son ☐ Daughter ☐ Grandson ☐ Granddaughter ☐ Nephew ☐ Niece

☐ Other (please specify)

Nominated Student 6

Given name

Surname

Residential address

Suburb

State

Postcode

Email

Mobile

Date of birth (DD/MM/YYYY)

Relationship to policy owner

☐ Son ☐ Daughter ☐ Grandson ☐ Granddaughter ☐ Nephew ☐ Niece

☐ Other (please specify)

Nominated Student 7

Given name

Surname

Residential address

Suburb

State

Postcode

Email

Mobile

Date of birth (DD/MM/YYYY)

Relationship to policy owner

☐ Son ☐ Daughter ☐ Grandson ☐ Granddaughter ☐ Nephew ☐ Niece

☐ Other (please specify)

Nominated Student 8

Given name

Surname

Residential address

Suburb

State

Postcode

Email

Mobile

Date of birth (DD/MM/YYYY)

Relationship to policy owner

☐ Son ☐ Daughter ☐ Grandson ☐ Granddaughter ☐ Nephew ☐ Niece

☐ Other (please specify)

Nominated Student 9

Given name

Surname

Residential address

Suburb

State

Postcode

Email

Mobile

Date of birth (DD/MM/YYYY)

Relationship to policy owner

☐ Son ☐ Daughter ☐ Grandson ☐ Granddaughter ☐ Nephew ☐ Niece

☐ Other (please specify)

Nominated Student 10

Given name

Surname

Residential address

Suburb

State

Postcode

Email

Mobile

Date of birth (DD/MM/YYYY)

Relationship to policy owner

☐ Son ☐ Daughter ☐ Grandson ☐ Granddaughter ☐ Nephew ☐ Niece

☐ Other (please specify)

Section 16 LIFE INSURED

- If no Life Insured is nominated, it will default to the Bond holder named in **Section 2**.
- The Nominated Student be added as the Life Insured.
- Once the Life Insured is selected it cannot be changed, however you can add additional Life Insured to the policy during the nominated term.

Life Insured 1

Given name

Surname

Residential address

Suburb

State

Postcode

Email

Mobile

Date of birth (DD/MM/YYYY)

Life Insured 2

Given name

Surname

Residential address

Suburb

State

Postcode

Email

Mobile

Date of birth (DD/MM/YYYY)

If you have additional life insured to nominate, please contact Centuria Investor Services on **1300 50 50 50**.

Section 17 GUARDIAN NOMINATION

- The Guardian must be at least 18 years old.
- Guardian(s) to take administrative control of the Plan in the event of my/our death or intellectual disability before the Nominated Student has completed their education.
- Before the Guardian can act in the capacity of the Bond owner Centuria Life will reach out to request for identification documents for AML purposes.

Guardian 1

Given name

Surname

Residential address

Suburb

State

Postcode

Email

Mobile

Date of birth (DD/MM/YYYY)

Relationship to the student

☐ Mother ☐ Father ☐ Aunt ☐ Uncle ☐ Grandfather ☐ Grandmother

☐ Other (please specify)

Guardian 2

Given name

Surname

Residential address

Suburb

State

Postcode

Email

Mobile

Date of birth (DD/MM/YYYY)

Relationship to the student

☐ Mother ☐ Father ☐ Aunt ☐ Uncle ☐ Grandfather ☐ Grandmother

☐ Other (please specify)

Section 18 BENEFICIARY NOMINATION

- Beneficiary nomination is only available on individual bonds where applicant 1 is aged 16 years or older.
- Beneficiaries may be changed or revoked by notice in writing from applicant 1 at any time prior to death.
- A transfer of the bond by way of an assignment will automatically cancel and revoke any prior nomination.
- The Investor must also be the Life Insured to nominate one or more beneficiaries (Nominated Beneficiaries).

I, applicant 1, nominate the beneficiary(s) listed below to receive the proceeds of the investment(s) to which this application form relates in the proportion specified hereunder.

Individual as beneficiaries

Beneficiary 1

Beneficiary's name

Mailing address

Suburb

State

Postcode

Phone number

Email address

Date of birth (DD/MM/YY)

% of benefit

Beneficiary 2

Beneficiary's name

Mailing address

Suburb

State

Postcode

Phone number

Email address

Date of birth (DD/MM/YY)

% of benefit

Beneficiary 3

Beneficiary's name

Mailing address

Suburb

State

Postcode

Phone number

Email address

Date of birth (DD/MM/YY)

% of benefit

Beneficiary 4

Beneficiary's name

Mailing address

Suburb | State | Postcode

Phone number

Email address

Date of birth (DD/MM/YY) | % of benefit

Entities as beneficiaries

Beneficiary 1

Entity type e.g. company or trust

Entity name

ABN

% of benefit

%

Phone number

Email address

Section 19 INVESTMENT OPTIONS

Initial and regular investment plan (minimum initial investment $500)

IMPORTANT: The LifeGoals product requires you to select your own Investment Options that best fit your risk tolerances and objectives. The risk profile, investment objectives and strategy of each of the underlying Investment Options (the Investment Option features) can be found in the PDS in the Education Bond Investment Options Booklet. It is important that you read and understand the risk profile of each underlying option and are comfortable that they are suitable for you particular financial situation, needs and objectives. Where you have selected a sector specific fund (e.g. a fund investing in Australian shares only), you should give consideration to diversifying your investment across multiple investment choices within the LifeGoals Education Bond menu or otherwise across your investable assets held outside of this product, particularly where these funds also have a risk level of high or very high. If you require any further information on any of the investment options, please contact us on **1300 50 50 50**.

☐ By ticking this box, you acknowledge that you have read and understood the Investment Option features.

Investment Option	Regular investment amount	Initial investment amount
CASH AND FIXED INTEREST FUNDS		
Centuria Education Macquarie Treasury Fund	$	$
Centuria Education RAM Australian Credit Fund	$	$
Centuria Education RAM US Dollar High Yield Hybrid Income Fund	$	$
Centuria Education Vanguard Australian Fixed Interest Index Fund	$	$
Centuria Education Vanguard International Fixed Interest Index Fund (Hedged)	$	$
DIVERSIFIED BALANCED FUNDS		
Centuria Education Vanguard Diversified Balanced Index Fund	$	$
DIVERSIFIED GROWTH FUNDS		
Centuria Education Vanguard Diversified Growth Index Fund	$	$
Centuria Education Vanguard Diversified High Growth Index Fund	$	$
Centuria Education CARE High Growth Fund	$	$
Centuria Education Dimensional World Allocation 70/30 Trust Fund	$	$
Centuria Education Betashares Wealth Builder Diversified All Growth Geared (30-40% LVR) Complex ETF Fund	$	$
Centuria Education Alpha All Growth Fund	$	$
Centuria Education Dimensional Sustainability World Allocation 70/30 Trust Fund	$	$
Centuria Education Providence Investment Fund	$	$
AUSTRALIAN SHARE FUNDS		
Centuria Education Betashares Australia 200 ETF Fund	$	$
Centuria Education Perpetual Income Share Fund	$	$
Centuria Education Fidelity Future Leaders Fund	$	$
Centuria Education Yarra Ex-20 Australian Equities Fund	$	$
Centuria Education Firetrail Australian Small Companies Fund	$	$
INTERNATIONAL SHARE FUNDS		
Centuria Education Betashares Global Shares ETF Fund	$	$
Centuria Education Betashares Global Shares Currency Hedged ETF Fund	$	$

Investment Option	Regular investment amount	Initial investment amount
Centuria Education PM Capital Global Companies Fund	$	$
Centuria Education Munro Global Growth Small and Mid-Cap Fund	$	$
Centuria Education Arrowstreet Global Equity Fund	$	$
Centuria Education Plato Global Alpha Fund	$	$
PROPERTY AND INFRASTRUCTURE FUNDS		
Centuria Education VanEck FTSE Global Infrastructure (AUD Hedged) ETF Fund	$	$
Centuria Education Vanguard Australian Property Securities Index Fund	$	$
Total	$	$

You can nominate any term between 10 and 40 years. Regardless of the nominated period you can access your funds at anytime and your investment can continue after the term. If you leave this blank you will default to a 40-year term to give you maximum flexibility. See the PDS for more details.

Section 20 DECLARATION AND SIGNATURES

I/We acknowledge, declare and agree that by completing this application form:

- I/We agree to be bound by the Rules of the Fund (set out in Rule U of Centuria Life Limited's Constitution as amended from time to time) and the terms and conditions of the PDS.
- I/We acknowledge that an investment in Centuria LifeGoals Education Bond (i) does not represent an investment in Centuria Life Limited or any subsidiary of Centuria Capital Limited; and (ii) is subject to investment and other risks, including possible delays in repayment and the loss of income and capital invested.
- I/We acknowledge that neither Centuria Capital nor any of its subsidiaries guarantees the performance of Centuria LifeGoals Education Bond or the return or repayment of capital or income.
- I/We confirm that where the investment has been recommended to me by a financial planner/adviser, that planner/adviser has explained to me the features and risks of the product(s) as detailed in the PDS.
- I/We have personally received the PDS or a complete and unaltered print out of the electronic PDS accompanied by, or attached to, this application form, which I/we have read, understood and agree to be bound by the terms and conditions contained in the PDS.
- I/We have read, understood and agree to the collection, use and disclosure of my/our personal information as set out in the section headed 'Privacy statement' in the PDS.
- I/We have read the TMD for the product which is available at **centuria.com.au/design-distribution-obligations-ddo**
- If this application form is signed under a Power of Attorney, then the Attorney certifies that no notice of revocation of that power has been received.
- I/We have instructed Centuria Life Limited to make payments to my/our licensed financial adviser. I/We understand that these payments as detailed on the application form represent a deduction from the value of my investment in the Bond and will be paid by Centuria Life Limited as agent of the recipient named on the application form.
- I/We have no reason to suspect that our contribution lodged with this application or any subsequent contributions is or will be derived from or related to any money laundering, terrorism financing or other illegal activities.
- I/We undertake to provide any information that the Responsible Entity reasonably requires for the purposes of Centuria Life Limited's obligations under the AML legislation.
- I/We represent that all details contained in this application form, including if relevant my answers to the TMD questions in section 'Filtering questions for target market determination' are complete and accurate.
- I am/We are not, as a result of the law of any place, a person to whom this PDS should not be given.

NOTE: *If you have received an electronic copy of the PDS, then Centuria Life Limited will provide you with a paper copy of the PDS, this form and any supplementary document on request. Applications received from companies must be signed in accordance with their Constitution.*

Section 21 DIRECT DEBIT DECLARATION AND AUTHORISATION

Where direct debit has been elected in the application, I/we request and authorise Centuria Life Limited ABN 79 087 649 054 AFSL 230 867 (CLL) through its own financial institution and registry provider, for funds to be debited from the nominated account for any amount CLL has deemed payable by this application. This debit charge will be made through the bulk electronic clearing system (BECS) from the nominated account and I/we acknowledge this direct debit arrangement is subject to the terms and conditions of the direct debit request service agreement outlined in the PDS. By signing and/or providing CLL with a valid instruction in respect to this direct debit request, I/we have understood and agreed to the terms and conditions governing the debit arrangements between the applicant and CLL as set out in this request and in the direct debit request service agreement. I/We authorises CLL to act in accordance with the instructions and acknowledges that these instructions supersede and have priority over all previous instructions in respect to the Investment. All bank account signatories must sign.

Signatures

All authorised signatories to sign. If any to sign is ticked, this will authorise any signatory to operate the account in the future.

☐ Any to sign; or ☐ All to sign

Full name

Date (DD/MM/YYYY)

☐ Director ☐ Trustee ☐ Company Secretary

☐ Other

Full name

Date (DD/MM/YYYY)

☐ Director ☐ Trustee ☐ Company Secretary

☐ Other

IDENTIFICATION FORM 1: INDIVIDUALS, JOINT, SOLE TRADER

Guide to completing this form.

- Complete the form in pen using block letters and mark appropriate answers with a cross X or number.
- Any queries please contact the Centuria Investor Services team on **1300 50 50 50**.

Section 1 INVESTOR 1 (PERSONAL DETAILS)

Title | Given name | Surname

Residential address (not a PO box)

Suburb | State | Postcode

Postal address (if different to residential address)

Suburb | State | Postcode

Country

COMPLETE IF YOU ARE A SOLE TRADER.

Full business name

Business address (not a PO box)

Suburb | State | Postcode

Section 2 INVESTOR 2 (PERSONAL DETAILS)

Title | Given name | Surname

Residential address (not a PO box)

Suburb | State | Postcode

Postal address (if different to residential address)

Suburb | State | Postcode

Country

Section 3 REQUIRED IDENTIFICATION DOCUMENTS

*(Minimum age for joint bond owners is 10 years. Where a bond owner is below 16 years of age, we require the identification documents of the parent or Guardian who completed **Section 4**, above).*

***NOTE**: Certified copies of identification can be mailed, scanned or faxed. If you complete the online application these certified documents are not required.*

☐ A certified copy of current drivers licence or passport (an Australian passport that has expired within the preceding two years is acceptable); **OR**

☐ A certified copy of birth certificate **AND** a tax assessment (less than 12 months old), council rates notice or utilities provider account (less than three months old).

For other acceptable forms of identification, please call our Investor Services team on **1300 50 50 50.**

IMPORTANT: This identification form is now complete.

Certification guidelines:

- Documents must be certified by an eligible certifier.
- Documents must be either certified on all pages or certified on the front page with a clear reference to the number of subsequent pages that are included.
- All documents should be certified within 12 months of when received by Centuria for processing.

The below must be noted for certification to be accepted:

- I certify that this is a true copy of the original document
- Signature of certifier
- Name of certifier
- Qualification/occupation which makes the person certifying eligible (e.g. JP, pharmacist)
- Date of certification

IDENTIFICATION FORM 2: AUSTRALIAN COMPANIES

Guide to completing this form.

- Complete the form in pen using block letters and mark appropriate answers with a cross X or number.
- Any queries please contact the Centuria Investor Services team on **1300 50 50 50**.

Section 1 AUSTRALIAN COMPANY DETAILS

1.1 General information

Full name as registered by asic/account designation

ACN/ABN

TFN

Registered office address (not a PO box)

Suburb

State

Postcode

Principal place of business (if any) (not a PO box)

Suburb

State

Postcode

1.2. Company type

Select **ONE** of the following categories.

☐ Public ☐ Proprietary

1.3 Directors

Only needs to be completed for proprietary companies.

How many directors are there?

Provide full name of each director below.

	Full given name(s)	Surname
1		
2		
3		
4		

If there are more directors, provide details on a separate sheet.

1.4 Beneficial owners

Please provide the details for the individual(s) who ultimately own 25% or more of the company. If there aren't any, provide the name(s) of the individual(s) who directly or indirectly 'control' the company.

This section is not required for companies that marked a box in **Section 1.2**.

Beneficial owner 1

Given name | Surname | Date of birth (DD/MM/YY)

Residential address (not a PO box)

Suburb | State | Postcode

Beneficial owner 2

Given name | Surname | Date of birth (DD/MM/YY)

Residential address (not a PO box)

Suburb | State | Postcode

Beneficial owner 3

Given name | Surname | Date of birth (DD/MM/YY)

Residential address (not a PO box)

Suburb | State | Postcode

Beneficial owner 4

Given name | Surname | Date of birth (DD/MM/YY)

Residential address (not a PO box)

Suburb | State | Postcode

1.5 Acceptable company ID documents

Attach a certified copy of:

☐ A certified copy of the driver's licence **OR** passport for each Beneficial Owner identified in **Section 1.5**; **AND**

☐ A copy of the full ASIC extract of the company (the ASIC extract is used to verify that the Beneficial Owners listed on the form are correct).

NOTE: *Certified copies of identification can be mailed, scanned or faxed.*

IMPORTANT: This identification form is now complete.

IDENTIFICATION SECTION 3 – TRUSTS AND TRUSTEES

Guide to completing this form.

- **Section 1** must be completed for all trusts **AND** select and complete **ONE** of the following sections for the trustee(s):
  - **Section 2** (applicable sections) – if selected trustee is an individual.
  - **Section 3** (applicable sections) – if selected trustee is an Australian company.
- Complete the form in pen using block letters and mark appropriate answers with a cross X or number.
- Any queries please contact the Centuria Investor Services team on **1300 50 50 50**.

Section 1 TRUST DETAILS

1.1 General information

Full name of trust

Full business name (if any)

Country where trust established

1.2 Unregulated trusts

Select only **ONE** of the following trust types and provide the information requested.
Type of unregulated trust

☐ Family trust ☐ Unit trust ☐ Testamentary trust ☐ Other, please specify:

Beneficial owner(s) of the trust (Individual(s) that directly or indirectly control the trust e.g. Appointer).
If there are more beneficial owners, please provide details on a separate sheet.

Given name | Surname | Date of birth (DD/MM/YY)

Residential address (not a PO box)

Suburb | State | Postcode

Country

Settlor name (Not required if the settlor is deceased or the material asset contribution to the trust by the settlor at the time the trust was established was less than $10,000)

Given name | Surname | Date of birth (DD/MM/YY)

Residential address (not a PO box)

Suburb | State | Postcode

Country

Beneficiary details

If the trust identifies the beneficiaries by reference to membership of a class, please provide details of the class (e.g. family members of named person).

How many beneficiaries are there?

Provide full name of each director below.

	Full given name(s)	Surname
1		
2		
3		
4		

If there are more directors, provide details on a separate sheet

> Go to **2. Type of trustee.**

Section 2 TYPE OF TRUSTEE

Select only **ONE** of the following trustee types and provide the information requested.

☐ Individual(s) > go to **2.1**. ☐ Company > go to **3. Company details**

2.1 Trustee details

How many trustees are there?

Trustee 1

Given name | Surname | Date of birth (DD/MM/YY)

Residential address (not a PO box)

Suburb | State | Postcode

Principal place of business (if any) (not a PO box)

Suburb | State | Postcode

Trustee 2

Given name | Surname | Date of birth (DD/MM/YY)

Residential address (not a PO box)

Suburb | State | Postcode

Principal place of business (if any) (not a PO box)

Suburb | State | Postcode

Trustee 3

Given name | Surname | Date of birth (DD/MM/YY)

Residential address (not a PO box)

Suburb | State | Postcode

Principal place of business (if any) (not a PO box)

Suburb | State | Postcode

- Unregulated trust with a company as trustee > go to **Section 3**.
- Unregulated trust with individual trustee(s) > this identification form is now complete. Proceed to the verification requirements in **Section 4**.

Section 3 COMPANY DETAILS

To be completed if trustee is a company.

3.1 General information

Full registered name

ACN or other registration number

Registered office address (not a PO box)

Suburb | State | Postcode

Country

Principal place of business (if any) (not a PO box)

Suburb | State | Postcode

Country

3.2 Regulatory/listing details

Select any categories which apply to the company and provide the information requested.

☐ Regulated in Australia (licensed by an Australian Commonwealth, State or Territory statutory regulator)

Regulator name | Licence details

☐ Australian listed company

Name of market/exchange

☐ Majority-owned subsidiary of an Australian listed company

Australian listed company name

3.3 Company type

Select **ONE** of the following categories.

☐ Public ☐ Proprietary

3.4 Directors

Only needs to be completed for proprietary companies.

How many directors are there?

Provide full name of each director below.

	Full given name(s)	Surname
1		
2		
3		
4		

If there are more directors, provide details on a separate sheet

3.5 Company details

Please provide the details for the individual(s) who ultimately own 25% or more shares of the company. If there aren't any, provide the names of the individual(s) who directly or indirectly 'control' the company. This section is not required for companies that marked a box in **Section 3.2**.

Beneficial owner 1

Given name | Surname | Date of birth (DD/MM/YY)

Residential address (not a PO box)

Country

Beneficial owner 2

Given name | Surname | Date of birth (DD/MM/YY)

Residential address (not a PO box)

Suburb | State | Postcode

Country

Beneficial owner 3

Given name | Surname | Date of birth (DD/MM/YY)

Residential address (not a PO box)

Suburb | State | Postcode

Country

3.6 Acceptable company ID documents

Attach a certified copy of:

☐ The driver's licence **OR** passport for each beneficial owner completed in **Section 3.5**.
See **Section 4.2** for acceptable alternative ID options for individual trustees.

☐ A copy of the full ASIC extract of the company (the ASIC extract is used to verify that the Beneficial Owners listed on the form are correct).

Section 4 VERIFICATION REQUIREMENTS - UNREGULATED TRUSTS ONLY

4.1 Verification of the trust – unregulated trusts only

If the trust is an unregulated trust selected in 1.1 type of trust, **OR** the trust does not have an ABN:

In order to verify the trust the following is

☐ A certified copy of the trust deed **OR**

☐ if not reasonably available a certified extract of the trust deed. Extracts of trust deeds must include the name of the trust, trustees, beneficiaries, settlor/s and appointers (where applicable)

Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator.

4.2. Verification of trust beneficial owners and individual trustees

A certified copy of acceptable identification documents are required for **ALL** of the following:

☐ **ALL** beneficial owner(s) listed in **Section 1.1**; **AND**

☐ **ONE** individual trustee listed in **Section 2.1** (if applicable).

Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator.

4.2.1 Acceptable primary ID documents

Complete **Section 4.2.1** (or if the individual does not own a document from **Section 4.2.1**, then complete either **Section 4.2.2** or **4.2.3**).

Select **ONE** option from this section only.

☐ Australian State/Territory driver's licence containing a photograph of the person;

☐ Card issued under a State or Territory for the purpose of proving a person's age containing a photograph of the person; or

☐ Australian passport (a passport that has expired within the preceding 2 years is acceptable);

☐ Foreign passport or similar travel document containing a photograph and the signature of the person.

Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator.

Certification guidelines:

- Documents must be certified by an eligible certifier.
- Documents must be either certified on all pages or certified on the front page with a clear reference to the number of subsequent pages that are included.
- All documents should be certified within 12 months of when received by Centuria for processing.

The below must be noted for certification to be accepted:

- I certify that this is a true copy of the original document
- Signature of certifier
- Name of certifier
- Qualification/occupation which makes the person certifying eligible (e.g. JP, pharmacist)
- Date of certification

4.2.2 Acceptable secondary ID documents

Should only be completed if the individual does not own a document from **4.2.1**.
Complete **4.2.1** (or if the individual does not own a document from **4.2.1**, then complete either **4.2.2** or **4.2.3**).

Select **ONE** option from this section only.

☐ Australian birth certificate

☐ Australian citizenship certificate

☐ Pension card issued by Centrelink

☐ Health card issued by Centrelink

Should only be completed if the individual does not own a document from **4.2.1**.
Complete **4.2.1** (or if the individual does not own a document from **4.2.1**, then complete either **4.2.2** or **4.2.3**).

Select **ONE** option from this section only.

☐ A document issued by the Commonwealth or a State or Territory within the preceding 12 months that records the provision of financial benefits to the individual and which contains the individual's name and residential address.

☐ A document issued by the Australian Taxation Office within the preceding 12 months that records a debt payable by the individual to the Commonwealth (or by the Commonwealth to the individual), which contains the individual's name and residential address. Block out the TFN on the certified copy of this document.

☐ A document issued by a local government body or utilities provider within the preceding three months which records the provision of services to that address or to that person (the document must contain the individual's name and residential address).

4.2.3 Acceptable foreign ID documents

Should only be completed if the individual does not own a document from **4.2.1**.

ONE document from this section must be presented.

☐ Foreign driver's licence that contains a photograph of the person in whose name it is issued and the individual's date of birth; **OR**

☐ National ID card issued by a foreign government containing a photograph and a signature of the person in whose name the card was issued.

Important: Please attach a certified, legible copy of the original ID documentation used to verify the individual trustee (and any required translation).

Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator.

IMPORTANT: This identification form is now complete.

Directory

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