

# Application Form

5 October 2021

## Lifepan Education Bond

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### Important information

This Application Form accompanies the Product Disclosure Statement (PDS) dated 5 October 2021 for the Lifepan Education Bond which is a product issued by Lifepan Australia Friendly Society Limited ABN 78 087 649 492, AFS Licence No. 237 989 (Lifepan). You must consider the PDS which contains important information about investing in the Lifepan Education Bond before completing this Application Form. The PDS can be found via our website [australianunity.com.au/wealth](http://australianunity.com.au/wealth) or a free paper copy is available by calling us on 1300 1300 38. A reference to 'you', or 'your', includes individuals or entities making an investment.

## 1. Providing your information

### Your personal information

We collect your personal information for the following purposes:

- to administer and provide products and services and to manage our relationship with you;
- to process transactions;
- to answer queries and for security purposes;
- to develop products and services;
- to meet regulatory requirements; and
- to allow the Australian Unity Group to market products and services to you (subject to your right to opt-out of receiving various direct marketing materials at any time).

In managing your account, we may need to disclose your personal information to:

- your financial adviser, either directly or through other service providers (such as platform software including Xplan) which we have arrangements with;
- reputable service providers who may carry out functions associated with our products and services on our behalf (e.g. mailing houses who conduct mailings for us);
- our Australian financial institution to initiate the drawing from or payment to your nominated Australian financial institution account (where you have selected the direct debit or credit facility); and
- a third party, as required by law.

You are entitled to access information we have about you. You should notify us immediately if any of the information we hold about you changes, so that we can ensure that your information is complete, accurate and up to date.

**If you do not provide the information requested on the Application Form, we may be unable to process your application request.**

If a financial adviser's details appear on the Application Form, you authorise us to give information relating to your investment account and investments to your financial adviser, in doing so you acknowledge that your financial adviser is your agent for the purpose of receiving this information.

### Collecting your personal information

We collect and manage your personal information in accordance with the law and the Australian Unity Privacy Policy, which can be accessed from our website – [australianunity.com.au/privacy-policy](http://australianunity.com.au/privacy-policy). If you have any concerns or questions about the privacy of your personal information please contact our Privacy Officer:

Email: [enquiries@australianunity.com.au](mailto:enquiries@australianunity.com.au)

Address: Privacy Officer  
Australian Unity – Investment Bonds  
Reply Paid 89 Adelaide SA 5001 (postage paid)

If you are not satisfied with how your concern was addressed you may contact the Privacy Commissioner at:

Address: Office of the Australian Information Commissioner  
GPO Box 5218  
Sydney NSW 2001

Online: <https://www.oaic.gov.au/individuals/how-do-i-make-a-privacy-complaint>

### Changing your personal details

It is important that we maintain accurate records about you. Please inform us of any changes to your personal details as soon as possible.

You can change your personal details, such as mailing address, phone, mobile or email address, by:

- logging into your account on our Lifeplan Investor Portal [australianunity.com.au/wealth/login](http://australianunity.com.au/wealth/login);
- sending us a request by mail;
- emailing us at [enquiries@australianunity.com.au](mailto:enquiries@australianunity.com.au); or
- calling us on 1300 1300 38.

Please ensure that you provide us with the following information when requesting a change of personal details:

- your account number;
- the full name on your account;
- the change(s) you are requesting;
- a contact name and daytime phone or mobile number in case we need to contact you; and
- where the request is made by mail, ensure each signatory to the investment account signs the request.

### Providing instructions via email

We offer an email service that allows you to send us instructions on your account (**Email Instructions Service**).

If you wish to give us instructions by email in relation to your account, (including for example additional investments, withdrawals, switches, change of details or transfer requests) then you must:

- 1) send the email to [enquiries@australianunity.com.au](mailto:enquiries@australianunity.com.au) or such other email address we may advise from time to time;
- 2) ensure that you attach the relevant completed PDF form to your email that contains the instructions and is signed by all the authorised signatories to the investment and is dated correctly; and
- 3) include the name of all the investors, the customer reference number and sufficient information to enable us to complete the email instructions.

(Collectively referred to as **Email Instructions Requirements**).

Lifeplan may refuse to act on email instruction unless they meet the Email Instructions Requirements. In addition to the Email Instructions Requirements the following terms also apply to your use of the Email Instructions Service:

- (a) You use the service entirely at your own risk.
- (b) Lifeplan is not in any way liable for and will not compensate you for any losses arising as a result of your use of the Email Instructions Service, unless required by law.

(c) Lifeplan is not in any way liable for any action taken by Lifeplan based upon any email instructions that are false, misleading, fraudulent or incorrect. This means that Lifeplan will not compensate you for any claim arising out of, for example, a fraudulent email redemption request made by someone who has access to your investor code and a copy of your signature.

(d) Lifeplan is not in any way liable for any loss that may be incurred by you arising from an email being delayed or not being received by Lifeplan.

### Making changes to your account on the Lifeplan Investor Portal

You can make certain changes in relation to your account by logging on our **Lifeplan Investor Portal** [australianunity.com.au/wealth/login](http://australianunity.com.au/wealth/login). These changes include:

- updating your contact details;
- changing a beneficiary;
- changing your regular savings plan<sup>1</sup>;
- switching between investment options; and
- making withdrawal requests;

1. Please ensure to notify us at least five (5) business days before the next automatic contribution is due to ensure your request is carried out.

## 2. Direct Debit Request Service Agreement

This is your Direct Debit Request Service Agreement with Lifeplan Australia Friendly Society Limited (Lifeplan), User ID 26445, ABN 78 087 649 492. It explains what your obligations are when undertaking a Direct Debit arrangement with us. It also details what our obligations are to you as your Direct Debit provider.

Please keep this agreement for future reference. It forms part of the terms and conditions of your Direct Debit Request and should be read in conjunction with your Direct Debit Request authorisation. If you require a copy of a Direct Debit Service Agreement, please contact us (see below in the section 'Notice' for our mailing address).

The terms for this Direct Debit Service Agreement are for the purpose of an investment into the Lifeplan Education Bond by:

- 1) Initial contribution by direct debit, or
- 2) Regulars Savings Plan.

### Definitions

**account** means the account held at your nominated Australian financial institution from which we are authorised to arrange for funds to be debited.

**agreement** means this Direct Debit Request Service Agreement between you and us.

**business day** means a day other than a Saturday or a Sunday or a public holiday listed throughout Australia.

**debit day** means the day that payment from *you* to *us* is due.

**debit payment** means a particular transaction where a debit is made.

**Direct Debit Request** means the written, verbal or online request between us and you to debit funds from your account.

**our, us or we** means *Lifeplan Australia Friendly Society Limited*, (the Debit User) **you** have authorised by requesting a Direct Debit Request.

**PDS** means the offer document to which this agreement is incorporated by reference and which sets out the terms of the offer of the fund.

**fund** means the Lifeplan Education Bond.

**you or your** means the customer who has signed the Direct Debit Request.

**your financial institution** means the Australian financial institution as nominated by you on the Direct Debit Request at which the account is maintained.

### **Our commitment to you**

- By signing a *Direct Debit Request*, **you** have authorised **us** to arrange for funds to be debited from **your** account. **You** should refer to the *Direct Debit Request* and this *agreement* for the terms of the arrangement between **us** and **you**.
- We will only arrange for funds to be debited from **your account** as authorised in the *Direct Debit Request*.
- Where **you** request a one off debit, the payment will be drawn from **your** nominated *account* on the date **you** have indicated on **your** application.
- For regular debits, payment will normally start to be drawn from **your** nominated *account* from the date **you** have indicated on **your** application.
- Where the due date for a drawing falls on a non-*business day*, it will be drawn from **your account** on the next *business day*. If **you** are unsure about which day **your account** has or will be deducted **you** should ask **your financial institution**.
- We may vary any terms of this *agreement* or a *Direct Debit Request* at any time by giving **you** at least fourteen (14) days written notice sent to the preferred email/address **you** have given **us** in the *Direct Debit Request*.
- We will keep the details of **your** nominated *account* and *financial institution* private and confidential.
- We will investigate and deal promptly with any queries, claims or complaints regarding debits.

### **Your commitment to Lifeplan (us)**

- It is **your** responsibility to check with **your** nominated Australian *financial institution* to confirm that direct debits are available on **your account** as direct debiting through the Bulk Electronic Clearing System (BECS) may not be available on all accounts.
- If there are insufficient clear funds in **your** account to meet a *debit payment*:

(a) **you** may be charged a fee and/or interest by **your financial institution**;

(b) **we** may charge **you** reasonable costs incurred by **us** on account of there being insufficient funds; and

(c) **you** must arrange for the *debit payment* to be made by another method or arrange for sufficient clear funds to be in **your account** by an agreed time so that **we** can process the *debit payment*.

- It is **your** responsibility to ensure that the authorisation at the 'Direct Debit Request' section of this Application Form matches the signing instructions on **your** nominated Australian *financial institution account*.
- It is **your** responsibility to ensure that there are sufficient cleared funds in the nominated Australian *financial institution account* to allow a *debit payment* to be made on the drawing date in accordance with the *Direct Debit Request*. **We** may reject **your** application if **we** are unable to draw funds from **your** nominated Australian *financial institution*.
- It is **your** responsibility to cover any charges resulting from the use of the direct debit program. This may include transaction fees charged by **us** or **your** nominated Australian *financial institution* due to dishonoured drawing.
- It is **your** responsibility to check **your account** details which **you** have provided to **us** are correct by checking them against a recent *account* statement from **your** Australian *financial institution*.
- It is **your** responsibility to check with **your financial institution** before completing the 'Direct Debit Request' section of this Application Form, if **you** have any queries about how to complete the *Direct Debit Request*.
- It is **your** responsibility to check **your account** statement to verify that the amounts debited from **your account** are correct.

### **Changes to the arrangement**

If **you** want to make changes to the drawing arrangements, please notify **us** in writing (see below section 'Notice' for **our** mailing address), at least five (5) *business days* prior to the drawing date. **You** can also contact **your own financial institution**, which must act promptly on **your** instructions. These changes may include:

- deferring the drawing;
- altering the details of the drawing;
- stopping an individual debit; or
- cancelling the *Direct Debit Request* completely.

### **Enquiries**

All **your** personal customer information held by **us** will remain confidential, except for information that may be provided to **our financial institution** to initiate the drawing to **your** nominated *account*, or information that may be disclosed to a third party as required by law. Information may also be provided to any entity within the Australian Unity Group to enable the *Direct Debit Request* to be effected as required by law.

## Disputes

- If you believe there has been an error in debiting your account, you should notify us directly in writing by mail, emailing us at [enquiries@australianunity.com.au](mailto:enquiries@australianunity.com.au) or contacting us on 1300 1300 38 (see below section 'Notice' for our mailing address) and then confirm that notice in writing with us as soon as possible so that we can resolve your query more quickly.
- If we conclude, as a result of our investigations that your account has been incorrectly debited, we will respond to your query by arranging within a reasonable period for your Australian financial institution to adjust your account (including interest and charges) accordingly. We will also notify you in writing of the amount by which your account has been adjusted.
- If we conclude, as a result of our investigations that your account has not been incorrectly debited we will respond to your query by providing you reasons and any evidence for this finding in writing.
- If you do not receive a satisfactory response from us, then please follow up with your nominated Australian financial institution regarding your claim.
- You will receive a refund of the drawing amount if we cannot substantiate the reason for the drawing.

## Confidentiality

- We will keep any information (including your account details) in your Direct Debit Request confidential. We will make reasonable efforts to keep any such information that we have about you secure and to ensure that any of our employees or agents who have access to information about you do not make any unauthorised use, modification, reproduction or disclosure of that information.
- We will only disclose information that we have about you:
  - (a) to the extent specifically required by law; or
  - (b) for the purposes of this agreement (including disclosing information in connection with any query or claim).

## Notice

- If you wish to notify us in writing about anything relating to this agreement, you should write to:

Australian Unity – Investment Bonds  
Reply Paid 89 Adelaide SA 5001 (postage paid)  
or email us at [enquiries@australianunity.com.au](mailto:enquiries@australianunity.com.au)
- We will notify you by:
  - (a) sending a notice in the ordinary post to the address you have given us in this Application Form to the PDS; or
  - (b) by sending a notice electronically to the email address you have given us in the Application Form to the PDS.
- Any notice received after 1:30pm in our Adelaide office on any Adelaide Business Day will be deemed to have been received on the next Adelaide Business Day.

## 3. Anti-Money Laundering Laws and the Application Form

### Anti-Money laundering

Australia's Anti-Money Laundering and Counter Terrorism Financing ('AML/CTF') laws requires Australian Unity to adopt and maintain an AML/CTF program. To meet this legal requirement, we need to collect certain identification information and documentation (Know Your Client ('KYC') Documents) from investors.

- If you are applying through a financial adviser:

Your financial adviser will assist you in providing the necessary identification documents prior to lodging the application.
- If you are submitting your application directly (without the assistance of a financial adviser):

The required identification documents are set out under 'Applying for different types of investment accounts' on page 7 of this Application Form.

Please note that any certified identification documents must be certified by an approved certifier. See 'Certification of documents' on page 5 of this Application Form for more details. Please note your identification document must be in date (or within two years of expiry for a passport). Existing investors may also be asked to provide KYC Documents as part of a re-identification process to comply with the AML/CTF laws.

### Processing of applications or withdrawals will be delayed or refused if investors do not provide the required KYC Documents when requested.

Under the AML/CTF laws, Australian Unity is required to submit regulatory reports to the Australian Transaction Reports and Analysis Centre (AUSTRAC). This may include the disclosure of your personal information. Australian Unity may not be able to tell you when this occurs. As a result, if instructed by AUSTRAC, Australian Unity may be required to deny you (on a temporary or permanent basis) access to your investment. This could result in loss of the capital invested, or you may experience significant delays when you wish to transact on your investment.

We are not liable for any loss you may suffer because of compliance with the AML/CTF laws.

### Politically Exposed Persons (PEP)

To comply with AML/CTF laws we require you to disclose whether you (or any of your beneficial owners) are, or have an association with, a PEP. A PEP is an individual who holds a prominent public position or function in a government body or an international organisation in Australia or overseas, such as a Head of State, or Head of a Country or Government, or a Government Minister, or equivalent senior politician. A PEP can also be an immediate family member of a person referred to above, including spouse, de facto partner, child, and a child's spouse or a parent. A close associate of a PEP, i.e. any individual who is known to have joint beneficial ownership of a legal arrangement or entity is also considered to be a PEP. Where you identify as, or have an association with, a PEP, we may request additional information from you.

## Source of investable assets/wealth

Under AML/CTF laws, we are required to identify your source of investable assets/wealth.

### Non-individual entities – your beneficial owners

Your beneficial owner means an individual who ultimately ‘controls’ you or owns you. ‘Control’ includes control (directly or indirectly) as a result of, or by means of trusts (including in the capacity as beneficiary, trustee or settlor), an agreement, an understanding or practice, and further includes the ability to exercise control over decisions about financial and operating policies. ‘Owns’ means ownership (either directly or indirectly) of 25% or more of you.

Under AML/CTF laws you are required to provide information about your Beneficial Owners for certain account types including:

- Australian incorporated or created entities such as:
  - unlicensed proprietary limited companies, not subject to regulatory oversight (note: not applicable for complying Australian Superannuation Fund investors); or
  - partnerships; or
  - unregistered trusts, including family trusts.
- Entities incorporated or created outside of Australia such as:
  - companies;
  - partnerships;
  - trusts; or
  - estates.

These account types will be required to complete Application Form Part B or the Beneficial Owner Information Form, which is available on our website [australianunity.com.au/wealth](http://australianunity.com.au/wealth) or by calling our Investor Services team on 1300 1300 38.

### Submitting your application without the assistance of a financial adviser

If you are submitting the Application Form directly, without having consulted with a financial adviser, you must include the relevant identification documents when you submit your Application Form. The required identification documents are set out under ‘Applying for different types of investment accounts’ of this Application Form.

**Important note:** Please take your time to complete the Application Form, ensuring that all of the required information (for example, AML/KYC requirements) is included. If your application does not meet the requirements and we need to contact you for further information, this may result in you receiving a different unit price than you expected. Units cannot be issued to you until you have submitted all required verification documents.

## Certification of documents

Where your identification documents need to be certified, we suggest that the person certifying the document(s) for you uses the following statement on the copy being certified:

**‘I certify this to be a true copy of [name of document] the original of which, was seen by me at the time of signing’.**

The certified copy must also be dated, and have the signature, printed name, occupation, employer and address of the person certifying the document. Please note your identification document must be in date (or within two years of expiry for a passport).

Persons who may certify copies of original identification documents are:

- Officer with or authorised representative by an Australian Financial Services licence holder, with two or more years of continuous service with one or more licensees.
- Chartered Accountant, CPA or member of the National Institute of Accountants with two or more years of continuous membership.
- Officer of a financial institution or finance company with two or more years of continuous service, with one or more institutions or companies.
- Permanent employee of the Australian Postal Corporation with two or more years of continuous service, or someone who operates as an agent of the Australian Postal Corporation.
- Police Officer.
- A person who, under the law in force in a state or territory, is currently licensed or registered to practice as a: chiropractor, dentist, legal practitioner, medical practitioner, nurse, optometrist, pharmacist, physiotherapist, psychologist or veterinary surgeon.
- Lawyer, Magistrate, Registrar of a Court, Justice of the Peace.
- Notary Public (including persons authorised as a notary public in a foreign country).

A complete list of persons who may certify documents can be obtained from our website [australianunity.com.au/wealth/ACL](http://australianunity.com.au/wealth/ACL) or by contacting us on 1300 1300 38.

## 4. Completing the Application Form

The following information is provided to assist you in completing and lodging the Application Form.

- You may type your details into the Application Form; or use a blue or black pen.
- Print in **BLOCK** letters inside the boxes.
- Answer all sections unless otherwise indicated (if a section does not apply, please indicate using ‘N/A’).
- Ensure each signatory to the investment account signs the Application Form.
- Complete the Direct Debit Request in Step 6.
- Scan and email, or mail your Application Form, relevant identification documents (where required) and direct debit instructions to our mailing address (see ‘Lodgement’).

### **Signing the Application Form**

Read the declaration section carefully before signing the Application Form. Each signatory to the investment account must sign the Application Form(s).

If signed under Power of Attorney, the Attorney must certify that they have not received notice of revocation of the Power. We require an original OR a certified copy OR a copy of a certified copy of the Power of Attorney for our reference.

Company applications must be signed in accordance with the constitution or rules of the company.

### **Lodgement**

**By email:** [enquiries@australianunity.com.au](mailto:enquiries@australianunity.com.au)

**By post:** Australian Unity – Investment Bonds  
Reply Paid 89 Adelaide SA 5001 (postage paid)

### **Identification documents:**

If you are submitting this Application Form directly, without having consulted with a financial adviser, you must include the relevant identification documents when you submit your Application Form. The required identification documents are set out under 'Applying for different types of investment accounts' on page 7 of this Application Form.

Your identification documents can be sent to us by the following means:

#### **By email:**

- A scanned copy of a certified copy; and/or
- A scanned copy of a certified extract.

#### **By post:**

- An original; and/or
- A certified copy; and/or
- A certified extract.

Any application received after 1:30pm in our Adelaide office on an Adelaide Business Day will be deemed to have been received on the next Adelaide Business Day.

### **Incomplete applications**

Please take your time to complete the Application Form, ensuring that all of the required information is included, or we may not be able to process your application.

If we do not receive sufficient information from you, we will contact you to request the necessary information. **Any delay in providing the necessary information may result in you receiving a different unit price than you expected.**

#### **We reserve the right to decline your application if your application does not meet our AML/KYC requirements.**

We recommend you carefully complete the Application Form and use the 'Completing the Application Form' instructions, the 'Application Form checklist', and 'Applying for different types of investment accounts' to ensure that you provide all of the required information. If you require assistance with completing the Application Form, please call us on 1300 1300 38.

If your application is incomplete and/or if the additional information is not received after 30 business days, we may return the application and your application monies with any interest earned being retained by us.

## 5. Applying for different types of investment accounts

The following identification documents are required if you are submitting your application directly, without the assistance of a financial adviser.

Please Note:

- You may be required to complete the 'Beneficial Owner Information' Form. See page 5 for information about 'Non-individual entities – your beneficial owners'.
- Certified copies of relevant identification documents(s) must not be more than 12 months old. Please note that any certified identification documents must be certified by an approved certifier. See 'Certification of documents' on page 5 for more details.
- If you have sent us originals of your relevant identification documents, we will take a copy of the document and certify that is an original copy. After which we will post the original document(s) back to the mailing address you have provided in your Application Form.

Type of investor	Your account must be in the name of	ABN or ARSN (if applicable)	Signature(s) required	Identification documents required (in support of the Application Form)
<b>Individual account</b>	The applicant e.g. Jane Citizen	N/A	The applicant	<p>An original OR a certified copy OR a copy of a certified copy of any of the following that identify your (the applicant's) full name and either date of birth and/or residential address:</p> <ul style="list-style-type: none"> <li>Driver Licence; or</li> <li>Passport containing photo identification.</li> </ul> <p>Applicable to foreign individual accounts only:</p> <ul style="list-style-type: none"> <li>In addition to the identification documents outlined above, a <b>foreign individual</b> who wishes to establish a relationship must also provide evidence of a current visa with working rights.</li> </ul>
<b>Joint account</b>	Both or all joint applicants e.g. Jane Citizen and John Citizen	N/A	All joint applicants	
<b>Partnership</b>	Registered business name of partnership (if applicable) or full name of the partnership	N/A	As required under the partnership agreement	<p>Please provide at least one of the following three documents:</p> <ul style="list-style-type: none"> <li>An original OR a certified copy OR a copy of a certified copy OR a certified extract OR a copy of a certified extract of a partnership agreement; and/or</li> <li>An original OR a certified copy OR a copy of a certified copy OR a certified extract OR a copy of a certified extract of minutes of meeting; and/or</li> <li>A relevant ASIC company search/extract showing registered business name, number and address. This document should also list the full name of each Partner (not required if the regulated status of the partnership is confirmed by referring to a current membership directory of the relevant professional association).</li> </ul> <p>If the Partner is a company, please provide the same type of information requested for a <b>Company account</b>. For each Director and/or company secretary, please provide the same type of information requested for an <b>Individual account</b>.</p> <p>If the Partnership is <b>not regulated</b> by a professional association, for each Partner please provide:</p> <ol style="list-style-type: none"> <li>the same type of information requested for an <b>Individual account</b> (e.g. full name, date of birth and residential address);</li> <li>the respective share of the partner in the partnership; and</li> <li>the business activity of the partnership.</li> </ol> <p>If the Partnership is <b>regulated</b> by a professional association, identification documents are only required for a minimum of one Partner. Please provide the same type of information requested for an <b>Individual account</b>. Please also provide:</p> <ol style="list-style-type: none"> <li>the name of the professional association; and</li> <li>relevant membership details (e.g. account name and membership number).</li> </ol>

Type of investor	Your account must be in the name of	ABN or ARSN (if applicable)	Signature(s) required	Identification documents required (in support of the Application Form)
<b>Company</b>	The name of the company e.g. Sample Company Pty Ltd	The company's	Two directors; or a director and a company secretary or if there is only one director, by that director	<p>Please provide at least one of the following two documents:</p> <ul style="list-style-type: none"> <li>An original OR a certified copy OR a copy of a certified copy of the Certificate of Registration/Incorporation (or similar) document confirming the company's name, registered business number and whether the company is a public or proprietary company; and/or</li> <li>An original OR a certified copy OR a copy of a certified copy OR a certified extract OR a copy of a certified extract of minutes of meeting.</li> </ul> <p>For each director and/or company secretary, please provide the same type of information requested for an <b>Individual account</b>.</p> <p><b>Note:</b> Where the company is an Australian listed public company, a majority owned subsidiary of an Australian listed public company or is licensed and subject to Commonwealth, state or territory regulatory oversight in relation to its activities as a company, <b>Company</b> documents are not required (unless in circumstances where the documents are not publicly available for us to verify).</p>
<b>Unregulated Trust</b>	The trustee(s) of the Trust or Trust e.g. ABC Trustees ATF for the Citizen Family Trust or Citizen Family Trust	N/A	The trustee(s), 'as trustee(s) for...'	<ul style="list-style-type: none"> <li>An original OR a certified copy OR a copy of a certified copy of the first page and schedule of the Trust Deed.</li> <li>For each trustee, please provide the same type of information for an <b>Individual account</b>.</li> </ul> <p>For Corporate Trustees, please provide the same identification documents and information requested for a <b>Company</b>.</p> <p>For Directors, please provide the same type of documents and information requested for an <b>Individual account</b>.</p> <p>For Settlor of the unregulated trust please provide full name and identification documents as requested for an <b>Individual account</b> unless:</p> <ol style="list-style-type: none"> <li>the material asset contribution by the settlor at the time the trust is established is less than \$10,000; or</li> <li>the settlor is deceased.</li> </ol>
<b>Estate</b>	The executor(s) of the estate e.g. Estate of the late Jane Citizen.	The deceased person's	The executor(s) or administrator(s)	<ul style="list-style-type: none"> <li>An original OR a certified copy OR a copy of a certified copy of the grant of probate or Letters of Administration; or</li> <li>Death Certificate.</li> </ul> <p>For each executor, please provide the same identification documents and information requested for an <b>Individual account</b>.</p>

## 6. Application Form checklist

Ensure you complete the relevant steps according to your investor type outlined in the table below:

Investor type	Application Form (Part A)	Application Form (Part B)
Individual	Complete Steps 1–12	Not Applicable.
Joint	Complete Steps 1–12	Not Applicable.
Partnership - Individual	Complete Steps 1–12	Not Applicable.
Partnership - Corporate	Complete Steps 1–12	Complete relevant steps
Company	Complete Steps 1–12	Complete relevant steps
Unregulated trust	Complete Steps 1–12	Complete relevant steps
Estates – Individual Executor	Complete Steps 1–12	Complete relevant steps
Estates – Corporate Executor	Complete Steps 1–12	Complete relevant steps
Other applicant types	Please contact us on 1300 1300 38 for assistance	

To ensure that we are able to process your Application Form quickly and efficiently, please 'X' that you have completed all of the following:

### Step 1 Product Selection Criteria (non advised clients only)

- Under the Design and Distribution Obligations (DDO) framework, Lifeplan Australia Friendly Society, as Issuer of the Lifeplan Education Bond, is required to ascertain the key criteria on which customers have based their decision to take out the product and their investment choice.

### Step 2 Account details

- Indicate whether you are a new investor or if you have an existing active investor number (mandatory). Please note that if you have an existing investment in the Bond and an existing active investor number with us, you are not required to supply the required identification documents.
- Investors can be individuals aged 16 years or over, companies, trusts or partnerships.
  - Applications in joint names are treated as joint tenants.
  - Please provide your full name, not initials.

### Step 3 Investor details

- Indicate your investment type and provide your personal details (mandatory).

### Step 4 Account contact details

- Provide your contact details for all your correspondence for this account.

### Step 5 Nominated student details

- Please complete the details for your nominated student.

**If you wish to nominate another student, please complete a second Lifeplan Education Bond Application Form – Part A attached.**

Please note there can only be one student nominated per investment.

### Step 6 Contribution, investment allocation details and payment instructions

- Provide details on your initial contribution amount and allocate initial contribution as either a 'dollar' or 'percentage' across the investment menu. A minimum initial contribution of \$1,000 is required.
- Specify how you want to pay for your initial contribution.

**Direct debit:** If you are investing by direct debit, please provide your nominated Australian financial institution account details and sign the Direct Debit Request Authorisation in Step 7.

**BPAY:** If paying by BPAY®, please contact us on 1300 1300 38 to obtain your Customer Reference Number and Lifeplan'

**Cheque:** If paying by cheque, please make the cheque payable to 'Lifeplan Australia Friendly Society Limited, <Investor name>' and cross it 'Not Negotiable'.

### Step 7 Regular savings plan

- If you wish to start a regular savings plan, please specify your regular contribution amount and the contribution frequency to be debited from your nominated Australian financial institution account. A minimum monthly contribution of \$100 per investment option is required.

### Step 8 Australian financial institution account details

- Please provide your nominated Australian financial institution account details and sign the Direct Debit Request Authorisation in this step so that we can debit your initial and any regular savings plan contributions.

### Step 9 Nomination of Plan Beneficiaries (optional)

- Please complete this step if you wish to nominate beneficiaries for your investment.
- Provide the details of any person(s), to receive the proceeds of any residual investment should your current nominated student die after the death of the last surviving joint investor(s).

### Step 10 Nomination of Plan Guardian (optional)

- Please complete this step if you wish to nominate a guardian for your Plan.

### Step 11 Adviser service fee payment instruction

- Please complete this step if any adviser service fee is to be paid to your financial adviser.

### Step 12 Adviser Arrangements (Adviser use only)

Investor identity verification and declaration

- This section is to be completed by your financial adviser. If you are not using the services of a financial adviser, please leave blank.

### Step 13 Declarations and investor signature(s)

- Individual investors** – Provide your signature and date the Form.
- Joint investors** – Provide both signatures and date the Form.
- Partnership** – Provide the signatures and date the Form.
- Corporate partnership** – Provide the signatures of two directors (or a director and a company secretary); or if there is only one director, by that director and date the Form. Ensure you also complete the relevant sections in **Part B**.
- Company** – Provide the signatures of two directors (or a director and a company secretary); or if there is only one director, by that director and date the Form. Ensure you also complete the relevant sections in **Part B**.

- Unregulated Trust** – Provide the signatures of the trustees and date the Form. Ensure you also complete the relevant sections in **Part B**.

- Estate** – Provide the signature of the executor and date the Form. Ensure you also complete the relevant sections in **Part B**.

- Power of Attorney** – Provide your signature and date the Form. Attach a certified copy of the Power of Attorney. A Justice of the Peace, Solicitor or Notary Public must certify the Power of Attorney. You also need to provide the same type of information requested for an Individual account as it relates to the Attorney named in the application. If the Power of Attorney document does not contain a sample of the Attorney's signature, please provide an original OR a certified copy OR a copy of a certified copy of identification documents for the Attorney, containing a sample of their signature, e.g. Driver Licence or passport containing photo identification.

- Your Beneficial Owners** – Certain types of entities may also be required to provide information and identification documents in relation to your Beneficial Owners. You will be required to complete the 'Beneficial Owner Information' Form. See 'Non-individual entities – your beneficial owners' on page 5 for more information.

# Application Form Part A

5 October 2021

## Lifepan Education Bond

This application is for new and additional investments.

Please note:

- You may type your details into the Application Form; or use **BLOCK** letters and a black or blue pen to complete this Application Form.
- Indicate using an 'X' where appropriate. If a section does not apply to you, please indicate using 'N/A'.
- For further information on completing the Application Form please refer to 'Application Form Checklist' on page 9.
- Refer to page 4 for the definition of a Politically Exposed Person.
- **You may also be required to provide information and identification documents in relation to your Beneficial Owners.**  
Refer to 'Non-individual entities - your beneficial owners' on page 5 to assess whether you are required to include a Beneficial Owner Information Form with your Application Form.

Office use only

### Step 1 Product Selection Criteria (non-advised clients only)

#### What level of decision making are you seeking when selecting your investment strategy?

- |  |   |
|--|---|
| <input type="checkbox"/> Extensive investment menu | You seek to invest in a product with investments chosen from an extensive investment menu (more than 15 investment options), with administration provided by the fund |
| <input type="checkbox"/> Limited investment menu   | You seek to invest in a product with investments chosen from a limited investment menu (less than 15 investment options), with administration provided by the fund    |
| <input type="checkbox"/> Default Option only       | You seek to invest in a product with a default investment strategy applied where no investments selection is made. Administration is provided by the fund.            |

#### How long do you intend to hold this investment for?

- |  |  |
|--|--|
| <input type="checkbox"/> Less than 1 year      | You are intending to invest for less than a year       |
| <input type="checkbox"/> 1 to 3 year           | You are intending to invest from 1 to 3 years.         |
| <input type="checkbox"/> 4 to 7 years          | You are intending to invest from 4 to 7 years.         |
| <input type="checkbox"/> 8 to 10 years         | You are intending to invest from 8 to 10 years.        |
| <input type="checkbox"/> Greater than 10 years | You are intending to invest for greater than 10 years. |

#### What is your risk (ability to bear loss) and return profile?

- |                                    |   |
|------------------------------------|---|
| <input type="checkbox"/> Low       | You are naturally conservative or have a low risk appetite, you seek to minimise potential losses (e.g. have the ability to bear up to 1 negative return over a 20 year period) and you are comfortable with a low target return profile.<br>You typically prefer defensive assets such as cash and fixed income.   |
| <input type="checkbox"/> Medium    | You have a moderate or medium risk appetite, you seek to minimise potential losses (e.g. have the ability to bear up to 4 negative returns over a 20 year period) and are comfortable with a moderate target return profile.<br>You typically prefer a balance of growth assets such as shares, property, alternative assets and defensive assets such as cash and fixed income.                        |
| <input type="checkbox"/> High      | You have a higher risk appetite and can accept higher potential losses (e.g. have the ability to bear up to 6 negative returns over a 20 year period) in order to target a higher target return profile.<br>You typically prefer predominantly growth assets such as shares, property and alternative assets with only a smaller or moderate holding in defensive assets such as cash and fixed income. |
| <input type="checkbox"/> Very high | You have a more aggressive or very high risk appetite, seek to maximise returns and can accept higher potential losses (e.g. have the ability to bear 6 or more negative returns over a 20 year period) and possibly other risk factors, such as leverage.<br>You typically prefer growth assets such as shares, property and alternative assets.   |

## Step 2 Account details

**New investor:** Are you a new investor with Lifeplan?

Yes – Go to **Step 3** and complete all details  No – See below

**Existing investor:** Is this investment to be in the same name?

No – Go to **Step 3** and complete all details  Yes – Please specify your existing Policy number and Policy name.

Existing policy number

Existing policy name

Please note we will use the details that you have previously provided to us. If any of your details have changed please provide them below, otherwise go to **Step 5**

## Step 3 Investor details

What type of investment are you opening? (Please indicate using an 'X')

Individual/Joint  Company  Partnership – Corporate  
 Estate  Unregulated Trust  Sole trader  Other (please specify):

**Please complete all sections below that are relevant to your investor type.** Note that all fields that apply to your account type are mandatory.

Please note: **If you wish to invest for an Association or Government Body**, please call us on 1300 1300 38 for details of the additional information we may require from you. **If there are more than two partners in the Partnership**, please call us on 1300 1300 38.

### Investor 1 (Individual/Joint/Partnership/Sole Trader)

Title  Mr  Mrs  Ms  Miss Date of birth   /   /

Surname

Given name(s)

Email

Phone (after hours)   -     -     Phone (business hours)   -     -

Mobile     -     -

Occupation

Are you a Politically Exposed Person?  Yes  No

Please identify the source of your investable assets or wealth  
 Gainful employment  Inheritance/gift  Financial investments  
 Business activity  Superannuation savings  Other – please specify

### Investor 1 Residential address (not a P.O. Box)

Unit     Street number

Street name

Suburb  State

Postcode     Country (if not Australia)



**Registered business address (not a P.O. Box)**

Unit  Street number   
Street name   
Suburb  State   
Postcode  Country (if not Australia)

**Company's/Unregulated Trust /Estate/Sole Trader/Partnership – Corporate principal place of business in Australia (if any or if not the same as above address):**

Unit  Street number   
Street name   
Suburb  State   
Postcode

**Step 4 Account contact details**

Please provide the contact details for your all correspondence for this account

- Same as Investor 1 contact person and residential/business address **or**
- Same as Investor 2 contact person and residential/business address
- Same as Company/Unregulated Trust/Estate/Sole Trader/Partnership – Corporate contact person and registered business address provided.

**Otherwise complete mailing address details below:**

Unit  Street number  P.O. Box   
Street name   
Suburb  State   
Postcode  Country (if not Australia)   
Contact name   
Phone (after hours)  -  -  Phone (business hours)  -  -   
Mobile  -  -   
Email

**(Please add one email address only to receive email alerts)**

**Statements**

Your statements can be accessed by logging into your account on our website portal [australianunity.com.au/wealth/login](http://australianunity.com.au/wealth/login). You will receive an **email alert** to notify you when your statements are available.

Please note, the email alert will be sent to the email address details you have provided in this section of the Application Form. Alternatively, if you wish to receive a printed copy of your statement, please call us on 1300 1300 38.

**Step 5 Nominated student details**

Title  Mr  Mrs  Ms  Miss Date of birth   /   /

Relationship to investor

Surname

Given name(s)

Email

Phone (after hours)   -     -     Phone (business hours)   -     -

Mobile     -     -

Unit     Street number

Street name

Suburb  State

Postcode     Country (if not Australia)



## Step 8 Australian financial institution account details

### Direct Debit Request

The terms of this Direct Debit are for the purpose of an investment into the Lifeplan Education Bond by an initial contribution or Regular Savings Plan. If you would like us to deduct your investment directly from your nominated Australian financial institution account or you have selected the Regular Savings Plan, please complete the section below.

Initial contribution by direct debit to be deducted from my account on / /

Regular Savings Plan direct debits to commence from / /  continuing until:

(Please select one option below)

Date: / /  OR  Cancellation

Providing your nominated Australian financial institution details below means that you authorise the use of this information for all future deposit transaction requests that you initiate.

Name of Australian financial institution	<input type="text"/>
Branch name	<input type="text"/>
Name of account holder(s)	<input type="text"/>
Branch number (BSB)	<input type="text"/> - <input type="text"/>
Account number	<input type="text"/>

### Confirmation

- I/we request and authorise Lifeplan Australia Friendly Society Limited (Lifeplan) ABN 78 087 649 492, User ID 26445 to debit funds through the Bulk Electronic Clearing System (BECS) according to the details specified above from my/our nominated Australian financial institution account and will be subject to the terms and conditions of the *Direct Debit Service Agreement*.
- I/we are authorised to operate my/our nominated Australian financial institution account.
- I/we have read, understood and agree to the terms and conditions set out in this Request and in the *Direct Debit Request Service Agreement* in the PDS dated 5 October 2021.
- I/we acknowledge and agree this Direct Debit arrangement is governed by the *Direct Debit Request Service Agreement*.
- I/we agree to indemnify Lifeplan against all losses, costs, damages and liability (including, without limitation, legal costs and expenses on a full indemnity basis) that Lifeplan may suffer as a result of my/our breach of the *Direct Debit Request Service Agreement*, or providing an invalid or non-binding direct debit request or Lifeplan otherwise acting upon any unauthorised direct debit request. This indemnity is a continuing obligation, separate and independent from other obligations and survives termination of this agreement. It is not necessary for Lifeplan to incur expenses or make payment before enforcing this right of indemnity. I/we agree to pay Lifeplan all or any sum due without deduction or set-off. This indemnity does not apply to the extent of any fraud, negligence or breach of trust by Lifeplan.
- I/we acknowledge and agree that by signing and/or providing Lifeplan with a valid instruction in respect to my/our Direct Debit Request, I/we confirm that I/we have understood and agreed to the terms and conditions governing the debit arrangements between myself/us and Lifeplan as set out in this Direct Debit Request and in my/our *Direct Debit Request Service Agreement*.

All account signatories must sign below.

### Signature of Australian financial institution account holder or company officer

Investor 1 Surname

Investor 1 Given name(s)

Company position (if applicable)

Date / /

### Signature of Australian financial institution account holder or company officer

Investor 2 Surname

Investor 2 Given name(s)

Company position (if applicable)

Date / /

By signing and/or providing us with a valid instruction in respect to your Direct Debit Request, you have understood and agreed to the terms and conditions governing the debit arrangements between you and Lifeplan as set out in this request and in your *Direct Debit Service Agreement*.

### Step 9 Nomination of Plan Beneficiaries (optional)

I/We nominate the following person(s) to receive the proceeds of any residual plan investment should my/our current nominated student die after the death of the last surviving joint investor(s) in accordance with my/our instructions specified below, this PDS dated 5 October 2021 and in the Lifeplan Education Bond benefit fund rules.

#### Nomination of beneficiary 1

Surname	<input type="text"/>		
Given name(s)	<input type="text"/>		
Residential address	<input type="text"/>		
Suburb	<input type="text"/>		
State	<input type="text"/> <input type="text"/> <input type="text"/>	Postcode	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Date of birth	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Relationship to investor	<input type="text"/>
Proportion of proceeds	<input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> %		

#### Nomination of beneficiary 2

Surname	<input type="text"/>		
Given name(s)	<input type="text"/>		
Residential address	<input type="text"/>		
Suburb	<input type="text"/>		
State	<input type="text"/> <input type="text"/> <input type="text"/>	Postcode	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Date of birth	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Relationship to investor	<input type="text"/>
Proportion of proceeds	<input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> %		

#### Nomination of beneficiary 3

Surname	<input type="text"/>		
Given name(s)	<input type="text"/>		
Residential address	<input type="text"/>		
Suburb	<input type="text"/>		
State	<input type="text"/> <input type="text"/> <input type="text"/>	Postcode	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Date of birth	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Relationship to investor	<input type="text"/>
Proportion of proceeds	<input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> %		

### Step 10 Nomination of plan guardian (optional)

I/We nominate the following Plan Guardian who will take administrative control of my/our plan in the event of my/our death or intellectual disability before my/our nominated student has completed their education in accordance with this PDS dated 5 October 2021 and in the Lifeplan Education Bond benefit fund rules. The Plan Guardian must be at least 18 years old.

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss	Date of birth	<input type="text"/>
Relationship to investor	<input type="text"/>		
Surname	<input type="text"/>		
Given name(s)	<input type="text"/>		
Email	<input type="text"/>		
Phone (after hours)	<input type="text"/>	Phone (business hours)	<input type="text"/>
Mobile	<input type="text"/>		
Unit	<input type="text"/>	Street number	<input type="text"/>
Street name	<input type="text"/>		
Suburb	<input type="text"/>	State	<input type="text"/>
Postcode	<input type="text"/>	Country (if not Australia)	<input type="text"/>

### Step 11 Adviser service fee payment instruction

You may instruct us to pay your financial adviser a one-off adviser service fee payment and/or one of the following: (i) a fixed term adviser service fee payment, or (ii) a regular ongoing adviser service fee payment. Please note, you cannot be charged a fixed term and ongoing fee arrangement at the same time.

Please note that the adviser service fee will be deducted from your investment account.

#### A. One-off adviser service fee

I/We agree that the following amount is deducted from my/our initial investment amount as a one-off adviser service fee to my/our financial adviser:

\$ ,  (including GST)

#### B. Fixed term adviser service fee

I/we agree that the following amount is deducted from my/our investment as a fixed term adviser service fee to my/our financial adviser, for a period no greater than 12 months from the date of this application

(Please note – only select one of the following two options.)

% per annum (payable monthly) (including GST) **OR** \$  per month (including GST)

#### C. Regular ongoing adviser service fee

I/We agree that the following amount is deducted from my/our investment account as a regular ongoing adviser service fee to my/our financial adviser.

(Please note – only select one of the following two options.)

% per annum (payable monthly) (including GST) **OR** \$  per month (including GST)

## Step 12 Adviser arrangements (Adviser use only)

If you are an existing financial adviser with us, please provide your name and Lifeplan adviser code. Otherwise, please complete all details below.

Adviser's business name	<input type="text"/>	
Adviser's title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss	
Adviser's surname	<input type="text"/>	
Adviser's given name(s)	<input type="text"/>	
Telephone	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Mobile <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Email	<input type="text"/>	
Dealer Group/Licensee	<input type="text"/>	
Lifeplan Adviser Code	<input type="text"/>	AFS Licence No <input type="text"/>

### Investor identity verification declaration

I certify in accordance with the FSC/FPA Industry Guidance Note 24 ('GN 24'), that I have:  
(Mark the appropriate box with an 'X'.)

1. Collected, verified and retained the appropriate customer identification documentation to confirm the identify of all individuals/investors with this application to meet my obligations in respect of the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 ('AML/CTF laws') and agree to provide access to these records as required.
- OR
2. Attached a copy of the industry 'Customer Identification Form' which confirms that I have sighted and verified all of the documentation required to identify a customer under AML/CTF laws.
- OR
3. Attached a copy of the source documents from which I have identified the customer as required by the AML/CTF laws.

**If no box is marked, I agree that Option 1 applies.**

In addition, as the Investor's financial adviser, I warrant and represent to Lifeplan that I, as applicable:

- have followed and complied with GN 24 and any other applicable AML/CTF laws in identifying and verifying all individuals/investors with this application;
- will continue to comply with GN 24;
- will provide, upon request, original identification and verification records and details of the identification procedures adopted;
- have kept a record of the investor's identification and verification and will retain these for a period of seven years after the investor/adviser relationship has ended;
- will if requested update and re-verify the investor and provide any other additional information regarding the investor;
- will not knowingly do anything to cause Lifeplan to breach AML/CTF laws and will notify Lifeplan if I become aware of anything that would cause Lifeplan to breach AML/CTF laws;
- confirm that the details provided in any identification and verification records are true and correct; and
- have advised my client that Lifeplan communicates via email unless my client has contacted them to opt out.

Please note, Lifeplan reserves the right to reject any applicable GN 24 form attached to this Application Form for whatever reason (for example, if it has been incorrectly completed). The FSC/FPA investor identification forms are available from Lifeplan and online at [australianunity.com.au/wealth](http://australianunity.com.au/wealth). Please ensure the correct form is used for each investor type.

### DDO Target Market Determination declaration

I attest that, in recommending this product:

- I have considered the target market determination for the product.
- I have provided personal advice.
- the client is within the target market determination. Or, where the client is not within the target market determination, I have provided high-level details regarding this outside dealing below (e.g. relating to clients' needs and objectives, financial situation and/or eligibility).

Provide details in this section only where the client is outside the target market (e.g. needs and objectives, financial situation and eligibility):

Adviser signature

X

Date   /   /

### Step 13 Declarations and investor signature(s)

I/We agree and acknowledge:

- to be bound by the terms and conditions of the Product Disclosure Statement (PDS) dated 5 October 2021; the Application Form and in the Lifeplan Education Bond benefit fund rules;
- to be bound by the terms and conditions of the 'Direct Debit Request Service Agreement' in this Application Form, where I/we have opted to use the Direct Debit Service;
- that none of the entities mentioned throughout the PDS and the Application Form guarantee the performance of the Lifeplan Education Bond, payment of interest or any return of capital;
- that monies invested in the Lifeplan Education Bond do not represent investments in Lifeplan nor with a member with Lifeplan;
- that the investment is subject to investment risk including possible delays in repayment, loss of income or principal invested;
- having read and understood the PDS dated 5 October 2021 and the Application Form, and where these documents have been obtained through electronic means, then I/we declare that I/we received a printout which comprised the whole PDS and Application Form before making an application for units in the Lifeplan Education Bond;
- that Lifeplan and its related bodies corporate may offer goods and services appropriate for my needs and interests. I/We consent to my information being disclosed between those entities and to its use for direct marketing (subject to my/our right of opt-out by calling 1300 1300 38, product management and development and for other related purposes;
- that Lifeplan may give information relating to my/our account and investment in that account to my/our adviser whose stamp appears on the Application Form;
- that my/our financial adviser will receive the payments detailed in this PDS and this Application Form;
- that if this application is signed under a Power of Attorney, the Attorney verifies that no notice of revocation of that power has been received at the date of completing this application;
- for all account types other than individual and joint accounts, that the application is signed in accordance with the governing rules and/or constituent documents;
- that all of the information provided in this Application Form is complete and accurate to the best of my/our ability/abilities;
- that I/we will provide any supporting or additional information which might be required in order to process this application, or subsequently, as a consequence of my holding units in the Lifeplan Education Bond;
- that I/we have no reason to suspect that the monies used to fund this application, or any subsequent contributions into the Lifeplan Education Bond; is or will be derived from or related to any money laundering, terrorism financing or other illegal activities;
- that by providing my/our email address at Step 4, Lifeplan may use this address to provide me/us, where permitted by law or regulation, with information via email about my/our investment and the Lifeplan Education Bond, including to satisfy any continuous disclosure requirements;
- that my/our personal information will be collected, used and disclosed by Lifeplan in accordance with its Privacy Policy which can be accessed at [australianunity.com.au/privacy-policy](http://australianunity.com.au/privacy-policy) and in accordance with the law; and
- I/we confirm the information provided in this application form is correct and I/we will inform you within 30 days if there are any changes in circumstances. I/we understand that penalties may apply for providing false information.

## Who signs below?

If the account is held for one or more <b>individuals</b>	THEN	those individuals sign.
If the account is held for a <b>partnership</b>	THEN	all partners or those authorised to sign on behalf of the partnership.
If the account is held for a <b>company or corporate partnership or corporate trustee</b>	THEN	two directors; or a director and a company secretary; or if there is a single director, by that director. By signing as a single director you confirm that your company is a single director company.
If the account is held for an <b>unregulated trust</b>	THEN	the trustee(s), 'as trustee(s) for...'

### Investor 1

Capacity  Individual  Joint  Director  Partner  Trustee  Other

Surname

Given name(s)

Investor signature  Common Seal (if applicable)

Date / /

### Investor 2

Capacity  Individual  Joint  Director  Partner  Trustee  Other

Surname

Given name(s)

Investor signature  Common Seal (if applicable)

Date / /

## Submitting your Application Form

- Corporate – partnership, company, Unregulated trust, unincorporated body, estate or sole trader applications please also complete **Part B**.
- You may also be required to provide information and identification documents in relation to your Beneficial Owners. Refer to 'Non-individual entities – your beneficial owner' on page 5 to assess whether you are required to include a Beneficial Owner Information Form with your Application Form.
- Sign the Application Form.
- Where identity verification as required by Anti-Money Laundering Legislation has not been undertaken by a financial adviser, please enclose the relevant identification documentation outlined in the **'Applying for different types of investment accounts' on page 7 of this Application Form**.
- Complete the Direct Debit details in **Step 8**.
- Please send the completed application with your Direct Debit Request instructions and identification documentation (if relevant) to:
  - By email**  
[enquiries@australianunity.com.au](mailto:enquiries@australianunity.com.au)
  - By post**  
Australian Unity - Investment Bonds  
Reply Paid 89 Adelaide SA 5001 (postage paid)

### Your identification documents can be sent to us by the following means:

#### By email:

- A scanned copy of a certified copy; and/or
- A scanned copy of a certified extract.

#### By post:

- An original; and/or
- A certified copy; and/or
- A certified extract.

# Application Form Part A – Additional nominated student

5 October 2021

## Lifepan Education Bond

Please complete this form if you wish to nominate another student. Please note there can only be one student nominated per investment.

Please note:

- You may type your details into the Application Form; or use **BLOCK** letters and a black or blue pen to complete this Application Form.
- Indicate using an 'X' where appropriate. If a section does not apply to you, please indicate using 'N/A'.
- For further information on completing the Application Form please refer to 'Application Form Checklist' on page 9.
- Refer to page 4 for the definition of a Politically Exposed Person.
- You may also be required to provide information and identification documents in relation to your Beneficial Owners.**

Refer to 'Non individual entities - your beneficial owners' on page 5 to assess whether you are required to include a Beneficial Owner Information Form with your Application Form.

Office use only

### Step 1 Product Selection Criteria (non-advised clients only)

#### What level of decision making are you seeking when selecting your investment strategy?

- |  |   |
|--|---|
| <input type="checkbox"/> Extensive investment menu | You seek to invest in a product with investments chosen from an extensive investment menu (more than 15 investment options), with administration provided by the fund |
| <input type="checkbox"/> Limited investment menu   | You seek to invest in a product with investments chosen from a limited investment menu (less than 15 investment options), with administration provided by the fund    |
| <input type="checkbox"/> Default Option only       | You seek to invest in a product with a default investment strategy applied where no investments selection is made. Administration is provided by the fund.            |

#### How long do you intend to hold this investment for?

- |  |  |
|--|--|
| <input type="checkbox"/> Less than 1 year      | You are intending to invest for less than a year       |
| <input type="checkbox"/> 1 to 3 years          | You are intending to invest from 1 to 3 years.         |
| <input type="checkbox"/> 4 to 7 years          | You are intending to invest from 4 to 7 years.         |
| <input type="checkbox"/> 8 to 10 years         | You are intending to invest from 8 to 10 years.        |
| <input type="checkbox"/> Greater than 10 years | You are intending to invest for greater than 10 years. |

#### What is your risk (ability to bear loss) and return profile?

- |                                    |   |
|------------------------------------|---|
| <input type="checkbox"/> Low       | You are naturally conservative or have a low risk appetite, you seek to minimise potential losses (e.g. have the ability to bear up to 1 negative return over a 20 year period) and you are comfortable with a low target return profile.<br>You typically prefer defensive assets such as cash and fixed income.   |
| <input type="checkbox"/> Medium    | You have a moderate or medium risk appetite, you seek to minimise potential losses (e.g. have the ability to bear up to 4 negative returns over a 20 year period) and are comfortable with a moderate target return profile.<br>You typically prefer a balance of growth assets such as shares, property, alternative assets and defensive assets such as cash and fixed income.                        |
| <input type="checkbox"/> High      | You have a higher risk appetite and can accept higher potential losses (e.g. have the ability to bear up to 6 negative returns over a 20 year period) in order to target a higher target return profile.<br>You typically prefer predominantly growth assets such as shares, property and alternative assets with only a smaller or moderate holding in defensive assets such as cash and fixed income. |
| <input type="checkbox"/> Very high | You have a more aggressive or very high risk appetite, seek to maximise returns and can accept higher potential losses (e.g. have the ability to bear 6 or more negative returns over a 20 year period) and possibly other risk factors, such as leverage.<br>You typically prefer growth assets such as shares, property and alternative assets.   |

## Step 2 Account details

**New investor:** Are you a new investor with Lifeplan?

Yes – Go to **Step 3** and complete all details  No – See below

**Existing investor:** Is this investment to be in the same name?

No – Go to **Step 3** and complete all details  Yes – Please specify your existing Policy number and Policy name.

Existing policy number

Existing policy name

Please note we will use the details that you have previously provided to us. If any of your details have changed please provide them below, otherwise go to **Step 5**

## Step 3 Investor details

What type of investment are you opening? (Please indicate using an 'X')

Individual/Joint  Company  Partnership – Corporate  
 Estate  Unregulated Trust  Sole trader  Other (please specify):

**Please complete all sections below that are relevant to your investor type.** Note that all fields that apply to your account type are mandatory.

Please note: **If you wish to invest for an Association or Government Body**, please call us on 1300 1300 38 for details of the additional information we may require from you. **If there are more than two partners in the Partnership**, please call us on 1300 1300 38.

### Investor 1 (Individual/Joint/Partnership/Sole Trader)

Title  Mr  Mrs  Ms  Miss Date of birth //

Surname

Given name(s)

Email

Phone (after hours) -- Phone (business hours) --

Mobile --

Occupation

Are you a Politically Exposed Person?  Yes  No

Please identify the source of your investable assets or wealth  
 Gainful employment  Inheritance/gift  Financial investments  
 Business activity  Superannuation savings  Other – please specify

### Investor 1 Residential address (not a P.O. Box)

Unit  Street number

Street name

Suburb  State

Postcode  Country (if not Australia)



**Registered business address (not a P.O. Box)**

Unit  Street number   
Street name   
Suburb  State   
Postcode  Country (if not Australia)

**Company's/Unregulated Trust /Estate/Sole Trader/Partnership – Corporate principal place of business in Australia (if any or if not the same as above address):**

Unit  Street number   
Street name   
Suburb  State   
Postcode

**Step 4 Account contact details**

Please provide the contact details for your all correspondence for this account

- Same as Investor 1 contact person and residential/business address **or**
- Same as Investor 2 contact person and residential/business address
- Same as Company/Unregulated Trust/Estate/Sole Trader/Partnership – Corporate contact person and registered business address provided.

**Otherwise complete mailing address details below:**

Unit  Street number  P.O. Box   
Street name   
Suburb  State   
Postcode  Country (if not Australia)   
Contact name   
Phone (after hours)  -  -  Phone (business hours)  -  -   
Mobile  -  -   
Email

**(Please add one email address only to receive email alerts)**

**Statements**

Your statements can be accessed by logging into your account on our website portal [australianunity.com.au/wealth/login](http://australianunity.com.au/wealth/login). You will receive an **email alert** to notify you when your statements are available.

Please note, the email alert will be sent to the email address details you have provided in this section of the Application Form. Alternatively, if you wish to receive a printed copy of your statement, please call us on 1300 1300 38.

**Step 5 Nominated student details**

Title  Mr  Mrs  Ms  Miss Date of birth   /   /

Relationship to investor

Surname

Given name(s)

Email

Phone (after hours)   -     -     Phone (business hours)   -     -

Mobile     -     -

Unit     Street number

Street name

Suburb  State

Postcode     Country (if not Australia)



## Step 8 Australian financial institution account details

### Direct Debit Request

The terms of this Direct Debit are for the purpose of an investment into the Lifeplan Education Bond by an initial contribution or Regular Savings Plan. If you would like us to deduct your investment directly from your nominated Australian financial institution account or you have selected the Regular Savings Plan, please complete the section below.

Initial contribution by direct debit to be deducted from my account on / /

Regular Savings Plan direct debits to commence from / /  continuing until:

(Please select one option below)

Date: / /  OR  Cancellation

Providing your nominated Australian financial institution details below means that you authorise the use of this information for all future deposit transaction requests that you initiate.

Name of Australian financial institution	<input type="text"/>
Branch name	<input type="text"/>
Name of account holder(s)	<input type="text"/>
Branch number (BSB)	<input type="text"/> - <input type="text"/>
Account number	<input type="text"/>

#### Confirmation

- I/we request and authorise Lifeplan Australia Friendly Society Limited (Lifeplan) ABN 78 087 649 492, User ID 26445 to debit funds through the Bulk Electronic Clearing System (BECS) according to the details specified above from my/our nominated Australian financial institution account and will be subject to the terms and conditions of the *Direct Debit Service Agreement*.
- I/we are authorised to operate my/our nominated Australian financial institution account.
- I/we have read, understood and agree to the terms and conditions set out in this Request and in the *Direct Debit Request Service Agreement* in the PDS dated 5 October 2021
- I/we acknowledge and agree this Direct Debit arrangement is governed by the *Direct Debit Request Service Agreement*.
- I/we agree to indemnify Lifeplan against all losses, costs, damages and liability (including, without limitation, legal costs and expenses on a full indemnity basis) that Lifeplan may suffer as a result of my/our breach of the *Direct Debit Request Service Agreement*, or providing an invalid or non-binding direct debit request or Lifeplan otherwise acting upon any unauthorised direct debit request. This indemnity is a continuing obligation, separate and independent from other obligations and survives termination of this agreement. It is not necessary for Lifeplan to incur expenses or make payment before enforcing this right of indemnity. I/we agree to pay Lifeplan all or any sum due without deduction or set-off. This indemnity does not apply to the extent of any fraud, negligence or breach of trust by Lifeplan.
- I/we acknowledge and agree that by signing and/or providing Lifeplan with a valid instruction in respect to my/our Direct Debit Request, I/we confirm that I/we have understood and agreed to the terms and conditions governing the debit arrangements between myself/us and Lifeplan as set out in this Direct Debit Request and in my/our *Direct Debit Request Service Agreement*.

All account signatories must sign below.

#### Signature of Australian financial institution account holder or company officer

Investor 1 Surname

Investor 1 Given name(s)

Company position (if applicable)

Date / /

#### Signature of Australian financial institution account holder or company officer

Investor 2 Surname

Investor 2 Given name(s)

Company position (if applicable)

Date / /

By signing and/or providing us with a valid instruction in respect to your Direct Debit Request, you have understood and agreed to the terms and conditions governing the debit arrangements between you and Lifeplan as set out in this request and in your *Direct Debit Service Agreement*.

### Step 9 Nomination of Plan Beneficiaries (optional)

I/We nominate the following person(s) to receive the proceeds of any residual plan investment should my/our current nominated student die after the death of the last surviving joint investor(s) in accordance with my/our instructions specified below, this PDS dated 5 October 2021 and in the Lifeplan Education Bond benefit fund rules.

#### Nomination of beneficiary 1

Surname	<input type="text"/>			
Given name(s)	<input type="text"/>			
Residential address	<input type="text"/>			
Suburb	<input type="text"/>			
State	<input type="text"/> <input type="text"/> <input type="text"/>		Postcode	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Date of birth	<input type="text"/> <input type="text"/> /	<input type="text"/> <input type="text"/> /	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Relationship to investor <input type="text"/>
Proportion of proceeds	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	%	

#### Nomination of beneficiary 2

Surname	<input type="text"/>			
Given name(s)	<input type="text"/>			
Residential address	<input type="text"/>			
Suburb	<input type="text"/>			
State	<input type="text"/> <input type="text"/> <input type="text"/>		Postcode	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Date of birth	<input type="text"/> <input type="text"/> /	<input type="text"/> <input type="text"/> /	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Relationship to investor <input type="text"/>
Proportion of proceeds	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	%	

#### Nomination of beneficiary 3

Surname	<input type="text"/>			
Given name(s)	<input type="text"/>			
Residential address	<input type="text"/>			
Suburb	<input type="text"/>			
State	<input type="text"/> <input type="text"/> <input type="text"/>		Postcode	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Date of birth	<input type="text"/> <input type="text"/> /	<input type="text"/> <input type="text"/> /	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Relationship to investor <input type="text"/>
Proportion of proceeds	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	%	

### Step 10 Nomination of plan guardian (optional)

I/We nominate the following Plan Guardian who will take administrative control of my/our plan in the event of my/our death or intellectual disability before my/our nominated student has completed their education in accordance with this PDS dated 5 October 2021 and in the Lifeplan Education Bond benefit fund rules. The Plan Guardian must be at least 18 years old.

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss	Date of birth	<input type="text"/>
Relationship to investor	<input type="text"/>		
Surname	<input type="text"/>		
Given name(s)	<input type="text"/>		
Email	<input type="text"/>		
Phone (after hours)	<input type="text"/> - <input type="text"/> - <input type="text"/>	Phone (business hours)	<input type="text"/> - <input type="text"/> - <input type="text"/>
Mobile	<input type="text"/>		
Unit	<input type="text"/>	Street number	<input type="text"/>
Street name	<input type="text"/>		
Suburb	<input type="text"/>	State	<input type="text"/>
Postcode	<input type="text"/>	Country (if not Australia)	<input type="text"/>

### Step 11 Adviser service fee payment instruction

You may instruct us to pay your financial adviser a one-off adviser service fee payment and/or one of the following: (i) a fixed term adviser service fee payment, or (ii) a regular ongoing adviser service fee payment. Please note, you cannot be charged a fixed term and ongoing fee arrangement at the same time.

Please note that the adviser service fee will be deducted from your investment account.

#### A. One-off adviser service fee

I/We agree that the following amount is deducted from my/our initial investment amount as a one-off adviser service fee to my/our financial adviser:

\$   ,    .   (including GST)

#### B. Fixed term adviser service fee

I/we agree that the following amount is deducted from my/our investment as a fixed term adviser service fee to my/our financial adviser, for a period no greater than 12 months from the date of this application

(Please note – only select one of the following two options.)

.   % per annum (payable monthly) (including GST) **OR** \$   ,    .   per month (including GST)

#### C. Regular ongoing adviser service fee

I/We agree that the following amount is deducted from my/our investment account as a regular ongoing adviser service fee to my/our financial adviser.

(Please note – only select one of the following two options.)

.   % per annum (payable monthly) (including GST) **OR** \$   ,    .   per month (including GST)

## Step 12 Adviser arrangements (Adviser use only)

If you are an existing financial adviser with us, please provide your name and Lifeplan adviser code. Otherwise, please complete all details below.

Adviser's business name	<input type="text"/>	
Adviser's title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss	
Adviser's surname	<input type="text"/>	
Adviser's given name(s)	<input type="text"/>	
Telephone	<input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Mobile <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Email	<input type="text"/>	
Dealer Group/Licensee	<input type="text"/>	
Lifeplan Adviser Code	<input type="text"/>	AFS Licence No <input type="text"/>

### Investor identity verification declaration

I certify in accordance with the FSC/FPA Industry Guidance Note 24 ('GN 24'), that I have:  
(Mark the appropriate box with an 'X'.)

1. Collected, verified and retained the appropriate customer identification documentation to confirm the identify of all individuals/investors with this application to meet my obligations in respect of the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 ('AML/CTF laws') and agree to provide access to these records as required.
- OR
2. Attached a copy of the industry 'Customer Identification Form' which confirms that I have sighted and verified all of the documentation required to identify a customer under AML/CTF laws.
- OR
3. Attached a copy of the source documents from which I have identified the customer as required by the AML/CTF laws.

If no box is marked, I agree that Option 1 applies.

In addition, as the Investor's financial adviser, I warrant and represent to Lifeplan that I, as applicable:

- have followed and complied with GN 24 and any other applicable AML/CTF laws in identifying and verifying all individuals/investors with this application;
- will continue to comply with GN 24;
- will provide, upon request, original identification and verification records and details of the identification procedures adopted;
- have kept a record of the investor's identification and verification and will retain these for a period of seven years after the investor/adviser relationship has ended;
- will if requested update and re-verify the investor and provide any other additional information regarding the investor;
- will not knowingly do anything to cause Lifeplan to breach AML/CTF laws and will notify Lifeplan if I become aware of anything that would cause Lifeplan to breach AML/CTF laws;
- confirm that the details provided in any identification and verification records are true and correct; and
- have advised my client that Lifeplan communicates via email unless my client has contacted them to opt out.

Please note, Lifeplan reserves the right to reject any applicable GN 24 form attached to this Application Form for whatever reason (for example, if it has been incorrectly completed). The FSC/FPA investor identification forms are available from Lifeplan and online at [australianunity.com.au/wealth](http://australianunity.com.au/wealth). Please ensure the correct form is used for each investor type.

## DDO Target Market Determination declaration

I attest that, in recommending this product:

- I have considered the target market determination for the product.
- I have provided personal advice.
- the client is within the target market determination. Or, where the client is not within the target market determination, I have provided high-level details regarding this outside dealing below (e.g. relating to clients' needs and objectives, financial situation and/or eligibility).

Provide details in this section only where the client is outside the target market (e.g. needs and objectives, financial situation and eligibility):

Adviser signature

X

Date   /   /

## Step 13 Declarations and investor signature(s)

I/We agree and acknowledge:

- to be bound by the terms and conditions of the Product Disclosure Statement (PDS) dated 5 October 2021; the Application Form and in the Lifeplan Education Bond benefit fund rules;
- to be bound by the terms and conditions of the 'Direct Debit Request Service Agreement' in this Application Form, where I/we have opted to use the Direct Debit Service;
- that none of the entities mentioned throughout the PDS and the Application Form guarantee the performance of the Lifeplan Education Bond, payment of interest or any return of capital;
- that monies invested in the Lifeplan Education Bond do not represent investments in Lifeplan nor with a member with Lifeplan;
- that the investment is subject to investment risk including possible delays in repayment, loss of income or principal invested;
- having read and understood the PDS dated 5 October 2021 and the Application Form, and where these documents have been obtained through electronic means, then I/we declare that I/we received a printout which comprised the whole PDS and Application Form before making an application for units in the Lifeplan Education Bond;
- that Lifeplan and its related bodies corporate may offer goods and services appropriate for my needs and interests. I/We consent to my information being disclosed between those entities and to its use for direct marketing (subject to my/our right of opt-out by calling 1300 1300 38, product management and development and for other related purposes;
- that Lifeplan may give information relating to my/our account and investment in that account to my/our adviser whose stamp appears on the Application Form;
- that my/our financial adviser will receive the payments detailed in this PDS and this Application Form;
- that if this application is signed under a Power of Attorney, the Attorney verifies that no notice of revocation of that power has been received at the date of completing this application;
- for all account types other than individual and joint accounts, that the application is signed in accordance with the governing rules and/or constituent documents;
- that all of the information provided in this Application Form is complete and accurate to the best of my/our ability/abilities;
- that I/we will provide any supporting or additional information which might be required in order to process this application, or subsequently, as a consequence of my holding units in the Lifeplan Education Bond;
- that I/we have no reason to suspect that the monies used to fund this application, or any subsequent contributions into the Lifeplan Education Bond; is or will be derived from or related to any money laundering, terrorism financing or other illegal activities;
- that by providing my/our email address at Step 4, Lifeplan may use this address to provide me/us, where permitted by law or regulation, with information via email about my/our investment and the Lifeplan Education Bond, including to satisfy any continuous disclosure requirements;
- that my/our personal information will be collected, used and disclosed by Lifeplan in accordance with its Privacy Policy which can be accessed at [australianunity.com.au/privacy-policy](http://australianunity.com.au/privacy-policy) and in accordance with the law; and
- I/we confirm the information provided in this application form is correct and I/we will inform you within 30 days if there are any changes in circumstances. I/we understand that penalties may apply for providing false information.

## Who signs below?

If the account is held for one or more <b>individuals</b>	THEN	those individuals sign.
If the account is held for a <b>partnership</b>	THEN	all partners or those authorised to sign on behalf of the partnership.
If the account is held for a <b>company or corporate partnership or corporate trustee</b>	THEN	two directors; or a director and a company secretary; or if there is a single director, by that director. By signing as a single director you confirm that your company is a single director company.
If the account is held for an <b>unregulated trust</b>	THEN	the trustee(s), 'as trustee(s) for...'

### Investor 1

Capacity  Individual  Joint  Director  Partner  Trustee  Other

Surname

Given name(s)

Investor signature  Common Seal (if applicable)

Date / /

### Investor 2

Capacity  Individual  Joint  Director  Partner  Trustee  Other

Surname

Given name(s)

Investor signature  Common Seal (if applicable)

Date / /

## Submitting your Application Form

- Corporate – partnership, company, Unregulated trust, unincorporated body, estate or sole trader applications please also complete **Part B**.
- You may also be required to provide information and identification documents in relation to your Beneficial Owners. Refer to 'Non-individual entities - your beneficial owner' on page 5 to assess whether you are required to include a Beneficial Owner Information Form with your Application Form.
- Sign the Application Form.
- Where identity verification as required by Anti-Money Laundering Legislation has not been undertaken by a financial adviser, please enclose the relevant identification documentation outlined in the **'Applying for different types of investment accounts' on page 7 of this Application Form**.
- Complete the Direct Debit details in **Step 8**.
- Please send the completed application with your Direct Debit Request instructions and identification documentation (if relevant) to:
  - By email**  
[enquiries@australianunity.com.au](mailto:enquiries@australianunity.com.au)
  - By post**  
Australian Unity - Investment Bonds  
Reply Paid 89 Adelaide SA 5001 (postage paid)

### Your identification documents can be sent to us by the following means:

#### By email:

- A scanned copy of a certified copy; and/or
- A scanned copy of a certified extract.

#### By post:

- An original; and/or
- A certified copy; and/or
- A certified extract.

# Application Form Part B

5 October 2021

## Lifepan Education Bond

### Additional information required for special account types

Please note:

- Complete all relevant sections below as incomplete applications may not be accepted. Ensure that you also complete all relevant sections in **Part A**.
- You may type your details into the Application Form; or use **BLOCK** letters and a black or blue pen to complete this Application Form.
- Indicate using an 'X' where appropriate. If a section does not apply to you, please indicate using 'N/A'.
- Refer to page 4 for the definition of a 'Politically Exposed Person'.
- For further information on completing the Application Form please refer to 'Application Form Checklist' on page 9.
- **You may also be required to provide information and identification documents in relation to your Beneficial Owners.**  
Refer to 'Non-individual entities – your beneficial owners' on page 5 to assess whether you are required to include a Beneficial Owner Information Form with your Application Form.

Office use only

#### Account details

What type of investment account are you opening? (Please indicate using an 'X'.)

Please also complete the sections below that are relevant to your investor type.

**Note that all fields that apply to your account type are mandatory.**

Company       Unregulated Trust       Estate       Partnership – Corporate

**Please note:** If you wish to invest for an **Association** or **Government Body**, please call us on 1300 1300 38 for details of the additional information we may require from you.

#### Company/Corporate trustee/Executor (if applicable)/Partnership – Corporate

\*Persons signing this Application Form must confirm their names and Politically Exposed Person ('PEP') status below. If you are a domestic proprietary company or a foreign company please provide the names and PEP status of all directors. If you are applying as a Corporate Partnership or more than four directors exist for a proprietary company or a foreign company, please call us on 1300 1300 38 before you complete **Part B**.

Registered business name

#### Registered business address

Unit          Street number            P.O. Box

Street name

Suburb       State

Postcode          Country (if not Australia)

#### Main Principal place of business (if any and not the same as registered business address)

Unit          Street number

Street name

Suburb       State

Postcode          Country (if not Australia)

ARBN or ABN

Company type  Proprietary  Public company

Beneficial owners  Please fill in the beneficial owner's form

**If you are an overseas company**

Full name of company's local Australian agent (if any)

**Address of company's local Australian agent**

Unit  Street number  P.O. Box

Street name

Suburb  State

Postcode  Country (if not Australia)

Country of incorporation

**Director 1's full name\***

Date of birth //

Are you a Politically Exposed Person?  Yes  No

Please identify the source of your investable assets or wealth  Gainful employment  Inheritance/gift  Financial investments  Business activity  Superannuation savings  Other – please specify

**Residential address (not a P.O. Box)**

Unit  Street number

Street name

Suburb  State

Postcode  Country (if not Australia)

**Director 2's full name\***

Date of birth //

Are you a Politically Exposed Person?  Yes  No

Please identify the source of your investable assets or wealth  Gainful employment  Inheritance/gift  Financial investments  Business activity  Superannuation savings  Other – please specify

**Residential address (not a P.O. Box)**

Unit  Street number

Street name

Suburb  State

Postcode  Country (if not Australia)

**Director 3's full name\***

Date of birth

/ / 

Are you a Politically Exposed Person?

 Yes  No

Please identify the source of your investable assets or wealth

 Gainful employment  Inheritance/gift  Financial investments  
 Business activity  Superannuation savings  Other – please specify

**Residential address (not a P.O. Box)**

Unit

Street number

Street name

Suburb

State

Postcode

Country (if not Australia)

**Director 4's full name\***

Date of birth

/ / 

Are you a Politically Exposed Person?

 Yes  No

Please identify the source of your investable assets or wealth

 Gainful employment  Inheritance/gift  Financial investments  
 Business activity  Superannuation savings  Other – please specify

**Residential address (not a P.O. Box)**

Unit

Street number

Street name

Suburb

State

Postcode

Country (if not Australia)

**Individual trustee/Individual executor (if applicable)**

\* If more than four individual trustees exist for the unregulated trust, please call us on 1300 1300 38 before you complete **Part B**.

**Trustee 1's full name\***

Date of birth

/ / 

Are you a Politically Exposed Person?

 Yes  No

Please identify the source of your investable assets or wealth

 Gainful employment  Inheritance/gift  Financial investments  
 Business activity  Superannuation savings  Other – please specify

**Residential address (not a P.O. Box)**

Unit

Street number

Street name

Suburb

State

Postcode

Country (if not Australia)

**Trustee 2's full name\***

Date of birth

/ / 

Are you a Politically Exposed Person?

 Yes  No

Please identify the source of your investable assets or wealth

 Gainful employment  Inheritance/gift  Financial investments  
 Business activity  Superannuation savings  Other – please specify

**Residential address (not a P.O. Box)**

Unit

Street number

Street name

Suburb

State

Postcode

Country (if not Australia)

**Trustee 3's full name\***

Date of birth

/ / 

Are you a Politically Exposed Person?

 Yes  No

Please identify the source of your investable assets or wealth

 Gainful employment  Inheritance/gift  Financial investments  
 Business activity  Superannuation savings  Other – please specify

**Residential address (not a P.O. Box)**

Unit

Street number

Street name

Suburb

State

Postcode

Country (if not Australia)

**Trustee 4's full name\***

Date of birth

/ / 

Are you a Politically Exposed Person?

 Yes  No

Please identify the source of your investable assets or wealth

 Gainful employment  Inheritance/gift  Financial investments  
 Business activity  Superannuation savings  Other – please specify

**Residential address (not a P.O. Box)**

Unit

Street number

Street name

Suburb

State

Postcode

Country (if not Australia)

**Unregulated Trust beneficiary details**

\* Please specify the beneficiaries of the trust. If more than four individual beneficiaries exist or if the terms of the trust identify the beneficiaries by a membership class, please call us on 1300 1300 38 before you complete **Part B**.

**Beneficiary 1's full name\***

Are you a Politically Exposed Person?  Yes  No

Please identify the source of your investable assets or wealth

<input type="checkbox"/> Gainful employment	<input type="checkbox"/> Inheritance/gift	<input type="checkbox"/> Financial investments
<input type="checkbox"/> Business activity	<input type="checkbox"/> Superannuation savings	<input type="checkbox"/> Other – please specify

**Beneficiary 2's full name\***

Are you a Politically Exposed Person?  Yes  No

Please identify the source of your investable assets or wealth

<input type="checkbox"/> Gainful employment	<input type="checkbox"/> Inheritance/gift	<input type="checkbox"/> Financial investments
<input type="checkbox"/> Business activity	<input type="checkbox"/> Superannuation savings	<input type="checkbox"/> Other – please specify

**Beneficiary 3's full name\***

Are you a Politically Exposed Person?  Yes  No

Please identify the source of your investable assets or wealth

<input type="checkbox"/> Gainful employment	<input type="checkbox"/> Inheritance/gift	<input type="checkbox"/> Financial investments
<input type="checkbox"/> Business activity	<input type="checkbox"/> Superannuation savings	<input type="checkbox"/> Other – please specify

**Beneficiary 4's full name\***

Are you a Politically Exposed Person?  Yes  No

Please identify the source of your investable assets or wealth

<input type="checkbox"/> Gainful employment	<input type="checkbox"/> Inheritance/gift	<input type="checkbox"/> Financial investments
<input type="checkbox"/> Business activity	<input type="checkbox"/> Superannuation savings	<input type="checkbox"/> Other – please specify

**Unregulated trusts**

Settlor full name unless:

- (i) the material asset contribution by the settlor at the time the trust is established is less than \$10,000; or
- (ii) the settlor is deceased.

Are you a Politically Exposed Person?  Yes  No

**Source of investible assets or wealth**

For unregulated trusts whose account is not in the name of the trustee, please provide:

Settlor full name

Are you a Politically Exposed Person?  Yes  No

- Please identify the source of your investable assets or wealth
- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Gainful employment | <input type="checkbox"/> Inheritance/gift       | <input type="checkbox"/> Financial investments  |
| <input type="checkbox"/> Business activity  | <input type="checkbox"/> Superannuation savings | <input type="checkbox"/> Other – please specify |