Capped Withdrawal Facility Booklet

Please use BLOCK letters and a black or blue pen to complete this Form.
Please indicate using an “X” where appropriate.

Office use only

Capped Withdrawal Facility

The maximum total amount available for withdrawals each liquidity event under the Capped Withdrawal Facility is 2.5% of the Fund’s net asset value as at the Closing Date (although we have the discretion to alter this amount).

If the amount available for the Capped Withdrawal Facility is less than the total of withdrawal requests, investors will receive a pro-rata amount of their withdrawal request.

Carry forward facility

Investors are able to elect to utilise the Fund’s ‘carry forward facility’ under which any unfulfilled part of a withdrawal request will continue to be automatically carried forward to the next Capped Withdrawal Facility and treated as a new withdrawal request for any unfulfilled amount. See election in step 5 of the form.

Lodgement

Withdrawal requests will be accepted from the Opening Date until each Closing Date. Refer to the Fund’s PDS for more information in respect of the Opening Dates and Closing Dates.

Withdrawal requests lodged after 3:00pm Melbourne time on a Closing Date will be deemed received on the Opening Date of the following Capped Withdrawal Facility.

If you submit more than one request we only accept the last received request, and will disregard previous requests.

We will endeavour to make withdrawal payments within five business days after the Closing Date.

Step 1. Provide your Australian Unity Diversified Property Fund account details

Account name
Account number
Daytime telephone number

It is important to provide your account number so that we can identify you, and phone number so that we can call you if we need more information to complete your request.

Step 2. Provide the amount you wish to withdraw

If/We request a withdrawal in accordance with the Capped Withdrawal Facility terms and conditions.

Amount in Dollars
Amount in Units (number)
Full investment (Tick box)

$__, ____, ____, ____, OR ____, ____, ____, ____, OR

If you wish to participate in the carry forward facility, please complete Step 5.

The carry forward facility is an easy way to automate your withdrawal requests. It allows us to resubmit your next withdrawal request on your behalf until you choose to cancel the carry forward facility, or when your withdrawal is paid in full.
**Step 3. Provide details of your Australian financial institution account so that we can pay your withdrawal request.**

All proceeds will be paid to the account you nominate below. **Please note that cheque payments and third party deposits will not be made.** The name of your Australian financial institution account must be in the same name as your investment.

Pay to the Australian financial institution account I/we have previously provided for distribution payments.

- ☐ Yes – Please proceed to Step 4.
- ☐ No – If No, please complete details below and provide original certified copies of identification documents.

<table>
<thead>
<tr>
<th>Name of Australian financial institution</th>
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<tbody>
<tr>
<td>Branch name</td>
<td></td>
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<tr>
<td>Name of account holder(s)</td>
<td></td>
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<tr>
<td>Branch number (BSB)</td>
<td></td>
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<tr>
<td>Account number</td>
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**Step 4. Provide your declaration to acknowledge you have understood this form and the request you have made**

I/We:

- have read and understood the terms of the PDS (and any supplementary PDS); and
- acknowledge and agree that neither Australian Unity Property Limited nor any other person will (to the extent the law allows) be liable to me/us and I/we will not bring any claim or action against Australian Unity Property Limited nor any other person, by reason of, or in connection with this Capped Withdrawal Facility Request, including the providing Australian Unity Property Limited with a limited Power of Attorney at my/our election.

All account signatories must sign below.

![Signature](signature.png)

**Signature of account holder or company officer**

Surname:

Given name(s):

Date:  

**Please note:** All account holders must sign for a joint account. If signed under a Power of Attorney, the Attorney verifies that no notice of revocation of that power has been received. An original or certified copy of the Power of Attorney must be provided if not provided previously.

Company withdrawal requests must be signed in accordance with their constitution. Sole signatories signing on behalf of a company must confirm that they are signing as Sole Director and as Sole Secretary of the company.
Step 5. Automate withdrawal requests by participating in the carry forward facility – limited power of attorney

Do you wish to automate withdrawal requests by participating in the carry forward facility – limited power of attorney.

☐ Yes – Please complete the relevant Capped Withdrawal Facility Power of Attorney below.

☐ No – If No, send this Capped Withdrawal Facility Booklet to the address details below.

Investors are able to elect to utilise the Fund's 'carry forward facility' under which any unfulfilled part of a withdrawal request will continue to automatically be carried forward to the next Capped Withdrawal Facility and treated as a new withdrawal request for any unfulfilled amount.

To take advantage of the carry forward facility, the investor must grant the Responsible Entity a limited power of attorney by completing and signing the section below as a deed. This limited power of attorney enables the Responsible Entity to apply on behalf of the investor for any unfulfilled part of a withdrawal request at the next available Capped Withdrawal Facility. The Responsible Entity will continue to apply for withdrawals on an ongoing basis until the full amount of the withdrawal request is fulfilled; the investor notifies the Responsible Entity in writing to terminate the carry forward facility; the investor makes a new withdrawal request, thereby cancelling any outstanding unfulfilled request (utilising the carry forward facility); or the Capped Withdrawal Facility is cancelled.

To carry forward your withdrawal request, please read the following and tick the relevant box(es) below in one of the three options depending on how you hold your investment.

Pursuant to Part 2 of the Powers of Attorney Act 2014, I/we appoint Australian Unity Property Limited ACN 079 538 499 (AUPL) to be my/our attorney in accordance with the terms and conditions of this Capped Withdrawal Facility booklet and the current PDS (and any supplementary PDS) of the Fund and authorise AUPL to act in my/our name as my/our attorney:

• to sign all documents necessary to submit the unfulfilled part of my/our withdrawal request in the next Capped Withdrawal Facility (generally the next quarter) and subsequent Capped Withdrawal Facilities until;
  • my/our original withdrawal request is paid in full,
  • I/we notify the Responsible Entity in writing to terminate the carry forward facility,
  • I/we make a new withdrawal request; or
  • the Capped Withdrawal Facility is cancelled;
• to generally do all other acts or things that I/we may lawfully authorise an attorney to do on my/our behalf which AUPL may consider advisable, desirable or necessary in connection or in relation to the withdrawal request.

I/we agree to ratify and confirm whatever AUPL does under this power of attorney, and be bound, together with any person claiming under or through me/us, by anything AUPL does in exercising powers under this power of attorney and that this power of attorney begins immediately.

Tick the relevant box(es) in one of the following three options to confirm acceptance below.

This general non-enduring limited power of attorney is made under Part 2 of the Powers of Attorney Act 2014 and has effect as a deed.
Option 1 - Individual / joint holders or trustees: Capped Withdrawal Facility Power of Attorney

Option 1 only needs to be completed by accounts held individually or jointly or by a trust which has individuals who are trustees. You must tick the box to utilise the carry forward facility.

Investor 1 / individual trustee 1 tick box to confirm acceptance that this document is being executed with the intention that it will act as a separate limited power of attorney:

Signed, sealed and delivered as a deed by an individual or individual trustee(s) in the presence of:

Signature of investor 1 / individual trustee 1 (delete as applicable)

Surname (print)

Given name(s) (print)

Witness for individual or joint investors

Each signature above must be witnessed.

Signature of witness for investor 1

Name of witness (please print)

Date

Signature of investor 2 / individual trustee 2 (delete as applicable)

Surname (print)

Given name(s) (print)

Option 2 – Companies: Capped Withdrawal Facility Power of Attorney

Option 2 only needs to be completed by accounts which have a company as a signatory.

The company confirms acceptance that this document is being executed with the intention that it will act as a separate limited power of attorney:

Signed, sealed and delivered by the company in accordance with section 127 of the Corporations Act 2001 (Cth) by being signed by the following officer(s):

I am signing as sole director and secretary of the company

I am signing as director 1 of the company

I am signing as director 2 of the company

I am signing as company secretary

Name of (please print)

Capacity in which the company is signing (e.g. company, corporate trustee of a trust or self-managed superannuation fund or a platform)

Date
Option 3 - Common seal companies: Capped Withdrawal Facility Power of Attorney

Option 3 only needs to be completed by accounts which have a common seal company as a signatory.

☐ The company confirms acceptance that this document is being executed with the intention that it will act as a separate limited power of attorney.

Signed, sealed and delivered by the company affixing its common seal in accordance with section 127 of the Corporations Act 2001 (Cth).

☐ I am signing as sole director and secretary of the company:

☐ I am signing as director 1 of the company:

☐ I am signing as director 2 of the company:

☐ I am signing as company secretary:

Name of (please print):

Name of (please print):

Capacity in which the company is signing (e.g. company, corporate trustee of a trust or self-managed superannuation fund or a platform)

Date

Date

☐ Tick box to confirm acceptance:

Common seal (if applicable)

Return this Capped Withdrawal Facility Booklet by post
Australian Unity Wealth & Capital Markets, Reply Paid 91914, Melbourne VIC 3000
(no stamp required if mailed in Australia)

OR

Fax or email your Capped Withdrawal Facility Booklet
1300 856 685
investments@australianunity.com.au
Send the original Capped Withdrawal Facility Booklet only if an original certified copy of identification is required, to the address indicated at left. If you are not required to provide an original certified copy of identification you may send the Capped Withdrawal Facility Booklet by fax or email.