



APPLICATION FORM

Tidswell Investment Plan

If you are an existing investor in the Tidswell Investment Plan you should complete the Additional Investment Form. Please print clearly in the spaces provided using **CAPITAL** letters and a black or blue pen. Place a tick (✓) in any applicable boxes.

1. Investor Details

Name of Investor

Account name

Type of Investor

What type of entity is applying? Please select one box only.

Type of investor	Sections to complete
<input type="checkbox"/> Individual, Joint or Sole Trader	2 and 5-7
<input type="checkbox"/> Company, Association or Other Incorporated Body	2 (Directors and beneficial owners), 3 and 5-7
<input type="checkbox"/> Trust/Super Fund with Individual Trustee(s)	2 (Trustees and beneficiaries) and 4-7
<input type="checkbox"/> Trust/Super Fund with Corporate Trustee(s)	2 (Directors), 3 (Corporate trustee) and 4-7
<input type="checkbox"/> Partnership	2 (Individuals), 3 (Companies) and 4-7
<input type="checkbox"/> Deceased Estate	2 (Executors), and 4-7

If none of these categories are apply to you, or if you have any questions relating to this Application Form, please contact Tidswell Financial on (08) 8223 1676.

Office Use Only

Client Group	
Participant Number	
Deposit	
Investment Option(s)	
AML/CTF ID check	
Access	
XPlan	
Confirmation	

2. Individual(s)

Complete this section if you are an individual or joint investor(s), including individuals who are acting as trustees, corporate directors, partners, sole traders or as trustee for a minor.

Individual 1

<input type="text"/>	<input type="text"/>	<input type="text"/>
Title	Given name(s)	Surname
<input type="text"/>	<input type="text"/>	
Date of birth (DD/MM/YYYY)	Country of citizenship (if not Australia)	
<input type="text"/>		
Residential address		
<input type="text"/>	<input type="text"/>	<input type="text"/>
Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	
Phone number (business hours)	Phone number (home)	
<input type="text"/>	<input type="text"/>	
Mobile	Email address	
Residential status for Australian tax purposes	<input type="checkbox"/> Resident <input type="checkbox"/> Non-resident	
<input type="text"/>	<input type="text"/>	
Tax File Number or reason for exemption	Country of residence (if not Australia)	

Individual 2

<input type="text"/>	<input type="text"/>	<input type="text"/>
Title	Given name(s)	Surname
<input type="text"/>	<input type="text"/>	
Date of birth (DD/MM/YYYY)	Country of citizenship (if not Australia)	
<input type="text"/>		
Residential address		
<input type="text"/>	<input type="text"/>	<input type="text"/>
Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	
Phone number (business hours)	Phone number (home)	
<input type="text"/>	<input type="text"/>	
Mobile	Email address	
Residential status for Australian tax purposes	<input type="checkbox"/> Resident <input type="checkbox"/> Non-resident	
<input type="text"/>	<input type="text"/>	
Tax File Number or reason for exemption	Country of residence (if not Australia)	

Sole Trader (if applicable)

<input type="text"/>
Business name
<input type="text"/>
ABN

Identification Documents

The Anti-Money Laundering and Counter Terrorism Financing Act 2006 (**AML/CTF**) requires us to collect certain information from prospective investors (and beneficial owners) supported by original certified copies of relevant identification documents for all investors (and beneficial owners). Please refer to the AML/CTF section in the Product Disclosure Statement for more information.

You must attach **ORIGINAL CERTIFIED COPIES** of the following document(s):

Option 1:

- An Australian driver's licence containing a photograph of the person; **OR**
- An Australian passport; **OR**
- An identification card issued by a state or territory that contains the date of birth and a photograph of the card holder; **OR**
- A foreign government issued passport or similar travel document containing a photograph and signature of the person.

Note: If you cannot provide a document listed above, please provide a document from Option 2A and 2B below.

Option 2A:

- An Australian birth certificate; **OR**
- An Australian citizenship certificate; **OR**
- A pension card issued by Centrelink; **OR**
- A foreign drivers licence that contains a photograph of the person;

AND

Option 2B:

- A notice issued by the Commonwealth or a State or Territory within the preceding 12 months that records the provision of financial benefits and contains the individual's name and residential address; **OR**
- A notice issued by the Australian Taxation Office within the preceding 12 months that records a debt payable to or by the person by or to the Commonwealth; **OR**
- A notice issued by local government body or utilities provider within the preceding 3 months that records the provision of services to that address or to that person (the notice must contain the individual's name and residential address); **OR**
- A National Identity Card issued by a foreign government that contains a photograph signature.

Individual(s) Acting in the Capacity of a Sole Trader

- A business or partnership name registration certificate; **AND**
- Documents required for an individual (e.g. Option 1 or Option 2A and 2B above).

3. Company, Association or Other Incorporated Body

Please complete this section if you are a company (including a company acting as a trustee of a superannuation or other trust), association or other incorporated body.

Company Details

Company, association or incorporated body name (in full)

Business name (if applicable)

ABN or ACN (if applicable)

Tax File Number or reason for exemption

Registered address

Suburb

State

Postcode

Principal place of business (if different to registered address)

Suburb

State

Postcode

Directors

You must also complete Section 2 for AT LEAST ONE director or officeholder of the company, association or incorporated body and provide the relevant identification documents.

Identification Documents

The Anti-Money Laundering and Counter Terrorism Financing Act 2006 (AML/CTF) requires us to collect certain information from prospective investors (and beneficial owners) supported by original certified copies of relevant identification documents for all investors (and beneficial owners). Please refer to the AML/CTF section in the Product Disclosure Statement for more information.

You must attach **ORIGINAL CERTIFIED COPIES** of the following document(s):

Australian Company

- An ASIC Company Extract showing the company name, ACN, registered office address, the names and addresses of the directors and shareholders; **OR**
- The company's certificate of registration or corporation issued by ASIC, and a document setting out the full name and residential address of each director and the full name and residential address of each shareholder who owns, through one or more shareholdings, more than 25% of the company's issued capital.

Incorporated/Unincorporated Association

- Certificate of incorporation or equivalent document issued by the relevant registration body outside Australia; **OR**
- Constitution or rules or minutes of a meeting of the association or relevant extract where the full name and registration number (if applicable) of the association are evident; **OR**
- Disclosure certificate from the association signed by the chairman, secretary or treasurer of the incorporated association to verify any information relating to the association other than the name of the incorporated association and the unique identifying number issued to the association or incorporation; **OR**
- Letter from a solicitor or qualified accountant that confirms the name of the Unincorporated Association.

4. Trust, Superannuation Fund or Other Entity

Complete this section if you are a trust or wish to add an account designation. This section must be completed for the account designation types listed below and ensure you have also completed Sections 2 or 3 (where applicable).

Type of Trust

- Discretionary/Unit Trust
 Superannuation fund
 Partnership
 Deceased Estate
 Child/Minor
 Other

Account Designation

Trust name and/or account designation

ABN or ACN (if applicable)

Tax File Number or reason for exemption

Trustee/Partner/Executor Details

You must complete Section 2 for ALL individual trustee(s)/partner(s)/executor(s) of the trust/partnership/estate and provide relevant identification documents.

You must complete Section 3 for the corporate trustee/partner(s) of the trust/partnership AND Section 2 for AT LEAST ONE director/beneficial owner/officeholder of the corporate trustee/partner(s) and provide the relevant identification documents for each section.

Identification Documentation

The Anti-Money Laundering and Counter Terrorism Financing Act 2006 (**AML/CTF**) requires us to collect certain information from prospective investors (and beneficial owners) supported by original certified copies of relevant identification documents for all investors (and beneficial owners). Please refer to the AML/CTF section in the Product Disclosure Statement for more information.

You must attach **ORIGINAL CERTIFIED COPIES** of the following document(s):

Trust/Superannuation Fund

- A copy of search results from ASIC or Relevant Regulator Website (e.g. Superfund lookup at www.abn.business.gov.au); **AND**
- Trust deed, or extract, where the names of the trust, names of the trustees, names of the beneficiaries and the execution page are evident; **OR**
- Notice issued by the Australian Taxation Office within the last 12 months (e.g. notice of assessment); **OR**
- Letter from a solicitor or qualified accountant that confirms the name of the trust and all trust information required to be collected; **OR**
- Disclosure certificate, signed by a trustee of the trust, to verify any information relating to the trust other than the name of the trust and the trustees' details.

Partnership

- Partnership agreement, or extract, where the full name of the partnership, names of the partners and execution page are evident; **OR**
- Minutes of a partnership meeting; **OR**
- Notice of Assessment issued by the Australian Taxation Office dated within the last 12 months; **OR**
- Current membership certificates (or equivalent) of a professional association; **OR**
- Certificate of registration of business name; **OR**
- Disclosure certificate signed by a partner, to verify the partnership's membership of a professional association; **OR**
- Disclosure certificate signed by a partner, to verify any information relating to the partnership other than the name of the partnership and the partners' details; **OR**
- Letter from a solicitor or qualified accountant that confirms the name of the Unregulated Partnership

Deceased Estate

- Death Certificate; **AND**
- The Will; **OR**
- Letters of Administration (where there is no Will); **OR**
- Grant of Probate.

Additional Identification Documents for Individuals under 18 Years Old

- A current Australian Medicare Card; **OR**
- A current Debit ATM card (issued by an Australian Financial Institution); **OR**
- Other Financial Institution Record (e.g. Bank Statement, Term Deposit Certificate, Passbook) – current or issued within last 3 months; **OR**
- A current school identification card containing your photograph; **OR**
- Immunisation History Statement; **OR**
- A letter from your school principal, with your name and residential address, written in the last 3 months, recording how long you attended that school.

5. Account Details

Contact Details

<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>		
Title	Given name(s)	Surname		
<input style="width: 100%; height: 20px;" type="text"/>				
Postal address				
<input style="width: 100%;" type="text"/>	<input style="width: 15%; height: 20px;" type="text"/>	<input style="width: 15%; height: 20px;" type="text"/>	<input style="width: 15%; height: 20px;" type="text"/>	
Suburb	State	Postcode	Country	
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>			
Phone number (business hours)	Phone number (home)			
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>			
Mobile	Email address			

Investment Details

Initial investment amount

A minimum initial investment of \$10,000 applies to the TIP.

Please indicate how your initial investment will be made:

EFT / Direct Deposit

Bank: Bank of South Australia
 BSB: 105-067
 Account Number: 025 235 340
 Account Name: AET (SA) Ltd ACF Tidswell Investment Plan

Please include your account name in the reference of your transfer.

Cheque

Make your cheque payable to **AET (SA) Ltd ACF Tidswell Investment Plan** and attach to this Application Form.

Transfer from an existing Tidswell Investment Plan account

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Participant number

Account name

TIDSWELL INVESTMENT PLAN

Source of Investment Funds

Please identify the source of the funds you are providing. (Select all options that apply.)

Gainful employment Inheritance/gift Business activities Retirement savings Financial investments

Other (Specify)

Please identify the purpose of this investment. (Select all options that apply.)

Savings Growth Income Retirement Business account

Other (Specify)

Investment Option(s)

Please indicate the fund(s) you would like to invest in and the amount you wish to invest. Note: Minimum investment amounts for each investment option(s) may apply.

Investment option	APIR Code	Amount
Sector options		
Cash		
Cash Account	N/A	\$
Mortgages		
Direct Mortgage Managed Investment Scheme	N/A	\$
Pooled Mortgage Managed Investment Scheme	N/A	\$
Australian fixed interest		
Nikko AM Australian Bond Fund	TYN0104AU	\$
PIMCO Australian Bond Fund - Wholesale Class	ETL0015AU	\$
Vanguard® Australian Government Bond Index Fund	VAN0025AU	\$
International fixed interest		
Franklin Templeton Multisector Bond Fund - W Class	FRT0011AU	\$
PIMCO Global Bond Fund - Wholesale Class	ETL0018AU	\$
Australian property		
Vanguard® Australian Property Securities Index Fund	VAN0004AU	\$
International property		
UBS Clarion Global Property Securities Fund	HML0016AU	\$
Australian shares		
BT Wholesale Smaller Companies Fund	RFA0819AU	\$
Fidelity Australian Equities Fund	FID0008AU	\$
Nikko AM Tyndall Australian Share Wholesale Portfolio	TYN0028AU	\$
Perpetual Wholesale Australian Share Fund	PER0049AU	\$
International shares		
Aberdeen Emerging Opportunities Fund	ETL0032AU	\$
Baker Steel Gold Fund	SLT0006AU	\$
BlackRock International Gold Fund - Class D	MAL0016AU	\$
Colonial First State Wholesale Global Resources Fund	FSF0038AU	\$
Franklin Global Growth Fund - W Class	FRT0009AU	\$
Ironbark Copper Rock Emerging Markets Opportunities Fund	MGL0019AU	\$
Magellan Global Fund	MGE0001AU	\$

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Investment option	APIR Code	Amount
Platinum Asia Fund	PLA0004AU	\$
Platinum European Fund	PLA0001AU	\$
Platinum International Fund	PLA0002AU	\$
Platinum International Technology Fund	PLA0101AU	\$
Platinum Japan Fund	PLA0003AU	\$
Multi-sector options		
Conservative		
Perpetual Wholesale Conservative Growth Fund	PER0077AU	\$
Balanced		
BlackRock Global Allocation Fund - Class D	MAL0018AU	\$
Perpetual Wholesale Balanced Growth Fund	PER0063AU	\$
Schroder Balanced Fund - Wholesale Class	SCH0102AU	\$
Other		
		\$
		\$
		\$
TOTAL INITIAL INVESTMENT		\$

Notes

Income Distribution Option

For investments in the Pooled Mortgage Managed Investment Scheme (**PMMIS**) and/or the Direct Mortgage Managed Investment Scheme (**DMMIS**) only, after the end of each quarter we will calculate the amount of income received before deducting fees for the quarter to give us a net income amount. The net income amount will then be allocated in accordance with your instructions as follows:

I/we wish to have the net income amount paid into my/our nominated bank account.

OR

I/we wish to have the net income amount reinvested into the PMMIS.

If the amount of the reinvestment into the PMMIS is less than \$100 for a particular month, we may not be able to carry out your reinvestment instructions, and the amount will remain in your Cash Account.

Important note: If no selection is made, your net income amount will remain in your Cash Account.

Nominated Bank Account

Please provide your nominated bank account details for crediting income distribution payments and/or withdrawals. The details provided must be for an account with an Australian domiciled bank.

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Name of financial institution

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Branch address

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BSB

Account number

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Account name

Certification of US Tax Status

We are required to identify certain US persons in order to meet account information reporting requirements under local and international laws.

If you or (where you are applying on behalf of an entity) the entity and/or any office bearer¹ of the entity and/or any individual who holds an interest in the entity of more than 25% (a **Controlling Person**) are a US citizen or US tax resident, you must phone Tidswell Financial on (08) 8223 1676 at the time of completing this application. When you contact us you will be asked to provide additional information about your US tax status and/or the US tax status of the entity and/or any Controlling Person which will constitute certification of US tax status for the purposes of this application.

Unless you notify us that you or (where you are applying on behalf of an entity) the entity and/or any Controlling Person are a US citizen or US tax resident as specified above, by completing this application you certify that you or (where you are applying on behalf of an entity) the entity and/or any Controlling Person are not a US citizen or US tax resident.

If at any time after opening your account, information in our possession suggests that you, the entity and/or any Controlling Person may be a US citizen or US tax resident, you may be contacted to provide further information on your US tax status and/or the US tax status of the entity and/or any Controlling Person. Failure to respond may lead to certain reporting requirements applying to the account.

Politically Exposed Persons

A "politically exposed person" (**PEP**) is an individual who holds a prominent public position or function in a government body or international organisation, both within and outside Australia. This definition also extends to their immediate family members or close associates.

Please provide the name of any person named in this Application Form who is a PEP or is an immediate family member or close associate of a PEP.

6. Declaration

I/we agree and declare that:

- All details in this Application Form are true and correct.
- I/we have received, read and understood the current Product Disclosure Statement (**PDS**) and any Supplementary Product Disclosure Statement (**SPDS**) and Investment Guide to which this Application Form applies and agree to be bound by the terms and conditions of the PDS and the Constitutions (as amended from time to time) governing the Tidswell Investment Plan and, if applicable, the Pooled Mortgage Managed Investment Scheme (**PMMIS**) and/or Direct Mortgage Managed Investment Scheme (**DMMIS**).
- I/we am/are an individual over 18 years of age, or a duly incorporated body;
- If this Application Form is signed under Power of Attorney, the Attorney declares that he/she has not received notice of revocation of that power (an original certified copy of the Power of Attorney must be submitted with this Application Form);
- If signing on behalf of a company as a sole signatory, that I am signing as a sole director and sole secretary of the company; and
- If investing as trustee, on behalf of a superannuation fund or trust, that I/we am/are acting in accordance with my/our designated powers and authority under the applicable trust deed. In the case of a superannuation fund, I/we also confirm that it is a complying fund under the Superannuation Industry (Superannuation) Act 1993.
- I/we authorise the Tax File Number(s) on this Application Form to be used with this account.
- I/We hereby authorise the nominated investment option(s) to be made on my/our behalf in accordance with my/our investment instructions and acknowledge that this authority is provided on the basis that Tidswell will affect them in accordance with the terms and conditions of this PDS and the Constitutions for the TIP and, if applicable, the PMMIS and DMMIS.
- I/We have received a PDS (if applicable) for each underlying investment option(s) I/we have selected and I/we understand that Tidswell does not guarantee the performance of the investment option(s) I/we have selected.
- Investments in the TIP are subject to investment risk, including possible delays in repayment and loss of income and capital invested. Neither Tidswell or any related bodies corporate, affiliates, associates or officers of any of the above entities guarantees any particular rate of return or the performance of the TIP, nor do they guarantee repayment of capital from the investment option(s) I/we have selected; and
- Investments in the TIP are not deposits with or other liabilities of the Tidswell or related bodies corporate, affiliates, associates or officers of any of the above entities.
- Tidswell reserves the right to not accept any Application Form in its absolute discretion;
- If my/our Application Form is incomplete or monies are dishonoured, Tidswell will not process my/our Application Form and will notify me/us. I acknowledge that a completed application comprises a valid Application Form, certified copies of investor identification documents and cleared funds in the TIP bank account;

¹ Director of a company, partner in a partnership, trustee of a trust, chairman, secretary or treasurer of an association or co-operative.

TIDSWELL INVESTMENT PLAN

- I/we have read the information on privacy and personal information contained in the PDS and consent to my/our personal information being collected, used and disclosed in accordance with the PDS and Tidswell's Privacy Policy; and
- Application monies will be held in a bank account until invested in the TIP or returned to me/us. Any interest paid on that account will be paid to the Tidswell and not to the applicants regardless of whether their Application Form is not successful.

I/we warrant that:

- I/we will comply and will continue to comply with applicable anti-money laundering and counter-terrorism financing laws and regulations, including but not limited to the law and regulations of Australia in force from time to time (**AML/CTF Law**);
- I/we am/are not aware and have no reason to suspect that the moneys used to fund my/our investment have been or will be derived from or related to any money laundering, terrorism financing or similar activities illegal under applicable laws or regulations ('illegal activity'); or that the proceeds of my/our investment in the TIP will be used to finance any illegal activities;
- I/we will provide Tidswell with all additional information and assistance Tidswell may request in order for it to comply with any AML/CTF Law;
- I/we am/are not a politically exposed person or organisation for the purposes of any AML/CTF Law; and
- I/we am/are not investing on behalf of a US taxpayer. If I/we am/are investing on behalf of a US taxpayer, then I/we understand the US tax consequences of such an investment. I/we agree to provide Tidswell with any additional tax information as they may request from time to time.

Investor 1/Director 1/Trustee 1

Signature

Full name

Date (DD/MM/YYYY)

Investor 2/Director 2/Trustee 2

Signature

Full name

Date (DD/MM/YYYY)

Authority to Operate

We authorise Tidswell to act upon instructions signed by the number of signatories indicated below:

- Only one Always two More than two

If there are more than two investors/signatories, please copy this page and attach any other details. If no selection is made, Tidswell will only act on instructions signed by ALL investors.

7. Lodgement

Checklist

Have you:

- read the Tidswell Investment Plan PDS?
- completed all relevant sections of the Application Form according to your Investor Type outlined on page 1?
- signed and dated the declaration in Section 6?
- attached original certified copies of identification and supporting documents depending on your Investor Type?

Your completed Application Form, supporting documents and cheque (if applicable) should be mailed to:



Tidswell Financial
50 Hindmarsh Square
Adelaide SA 5000

We cannot accept faxed or scanned copies of this Application Form.

If you require any assistance while completing this Application Form please contact Tidswell Financial on (08) 8223 1676.