

Our Product Disclosure Statement (and any supplementary PDS issued) contains important information about the LEB, which you should consider before making an application.

The PDS is available via our website at keyinvest.com.au or you may request a copy from your Financial Adviser.

Completed application forms can be posted to Keylnvest, Reply Paid 3340, Rundle Mall SA 5000 (no stamp required) or emailed to: info@keyinvest.com.au

Important:

If either KeyPlanner, Progressive investing or 'Auto-rebalance' are required in conjunction with this application, it will be necessary to also download a copy of those forms from our website: keyInvest.com.au

Guide to completing this form

- This form is not to be used for Funeral Bond Applications or Child Advancement Policies.
- If there are more than two directors and/or beneficial owners, you will need to complete a separate form for the
 additional directors and/or beneficial owners and attach their details to the Application Form.
- Refer to the 'Required Identification documents' section below for identification requirements.

Required Identification Documents Certified copies of the following identification documents are required; A certified certificate of registration issued by ASIC OR A current company search from the ASIC database. Certified copies of the following identification documents are required for each director and beneficial owner; A current driver's licence or passport (current or expired passport within the last 2 years) OR A birth certificate AND Either a tax assessment (less than 12 mths old), council rates notice or utilities provider account statement (less than 3 mths old) For other accepted forms of identification, please refer to the 'Identification form for Companies' document on our website. Are you an existing KeyInvest investor? Yes If YES, please provide your Policy number or Member number No

1. Investor details

Full Cor	mpany Name												
Busines (if appli	ss Name cable)												
ABN/A	CN/ARBN												
Busines	ss Type												
Compa	ny Contact Per	son											
Title		Mr		Mrs	Ms	3	Miss		Dr	Other			
Surnam	e												
Given N	lames												
Busines	ss Phone						N	1obile					
Email A	ddress												
		This emai	l addre	ess may l	oe used t	or Inves	tor corre	espon	denc	е.			
Compa	Company Registered Office Address (must not be a PO Box, RMB or Locked Bag)												
Unit Nu				Street N									
Street N	lame						Sı	uburb					
State				Postco	de		Co	untry					
Mailing	Address (if diff	erent to al	bove a	ddress. c	:/- if app	licable)							
Unit Nu	mber			Street N	Nο								
Street N	lame						Sı	uburb					
State				Postco	de		Co	untry					
Resider	ncy Status for T	ax Purpos	es										
Under ti (CRS) la	ncy Status for T he Foreign Acco aws, we are requ c residency.	ount Tax C	omplia								d		
Under ti (CRS) la their tax	he Foreign Acco	ount Tax C uired to as	omplia k all in	vestors t							d		

Important:

You will need to complete a **separate FATCA/CRS self-certification Form** if any of the following apply to the company. This form is available from our Client Services on 1300 658 904.

Is the	s the Company a tax resident of a country other than Australia or a Specified U.S Person?									
	Yes	1	No							
Is the	Company a U.S. Cor	npany, l	J.S. Trust or U.	S Partnersh	nip?					
	Yes	1	No							
Is the	company an Austral	ian Fina	ncial Institutio	n or Other	Partner Juriso	diction Fir	nancial Ins	titution?		
	Yes	1	No							
	Company Type Is the company a proprietary/private company (i.e. a Pty Ltd company)? Yes Continue to Section 1.1 No Go to Section 4									
2.	2. Director Details									
If the	If there are more than two directors, please complete a separate form for the additional directors and attach their details to the Application Form. Director 1									
Title		Mr	Mrs	Ms	Miss	Dr	Other			
Surna	ame									
Giver	Names									
Busin	ess Phone				N	/lobile				
Email	Address									
	Th	is email	address may l	oe used for	Investor corr	esponder	nce.			
Resid	lency Status for Tax	Purpose	es							
(CRS	Under the Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) laws, we are required to ask all Policy Owners to provide additional information about their tax residency.									
Is the	Is the Director a tax resident of Australia?									
	Yes	1	No							
Is the	Director a tax reside	nt of a c	country other t	han Austral	lia?					
	Yes	ſ	No							
If YES	If YES, you will need to complete a separate Automatic Exchange of Information (AEOI) Self									

Certification Form. Contact our Client Services team on 1300 658 904 to assist.

Politi	Politically Exposed or Specified U.S. person?										
Is the	s the Director a Politically Exposed Person?										
	Yes		No								
Is the	Director a Specifi	ied U.S. P	erson?								
	Yes If YES, ple	ease prov	ide their	Taxpayer	Identifi	cation I	Number	(TIN)			
	No										
Direc	etor 2										
Title		Mr		Mrs	Ms		Miss	Dr	Other		
Surna	ame										
Giver	Given Names										
Busir	Business Phone Mobile										
Email Address											
	This email address may be used for Investor correspondence.										
Resid	lency Status for T	ax Purpo	ses								
	r the Foreign Acco							-			
) laws, we are requ t their tax residenc		SK all Pol	icy Owne	ers to pr	ovide a	iddillona	ii iniorma	llion		
Is the	Director a tax res	ident of A	Australia?)							
	Yes		No								
Is the	Director a tax res	ident of a	country	other tha	ın Austı	alia?					
16.745	Yes		No						-01) 0 16		
	S, you will need to differentiation Form. Cont								:OI) Self		
Certii	ication i omi. com	act our c	mem ser	vices teari	11 011 130	<i>70</i> 030 S	304 to as	53/31.			
Politi	Politically Exposed or Specified U.S. person?										
Is the	Is the Director a Politically Exposed Person?										
	Yes										
Is the	Director a Specifi	ied U.S. P	erson?								
	Yes If YES, ple	ease prov	ide their	Taxpayer	Identifi	cation I	Number	(TIN)			
	No										

3. Beneficial Owners

Please refer (refer to Section 17) for more information. To be completed by proprietary companies only.

Important:

Please provide full name and address details of those persons who own or control 25% or more of the issued capital of the Company. If there are more than two beneficial owners please complete a separate form for the additional beneficial owners and attach their details to the Application Form.

Beneficial Owner 1										
Title	Mr Mrs	Ms	Miss Dr	Other						
Surname										
Given Names										
Business Phone	Mobile									
Email Address	dress									
This email address may be used for Investor correspondence.										
Residency Status for Tax Purposes										
Under the Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) laws, we are required to ask all Policy Owners to provide additional information about their tax residency.										
Is the Beneficial Owner a tax resident of Australia?										
Yes No										
Is the Beneficial Owner a tax resident of a country other than Australia?										
Yes	Yes No									
-	complete a separate Aut act our Client Services t	_		OI) Self						
Politically Exposed pe	son?									
Is the Beneficial Owne	a Politically Exposed Po	erson?								
Yes	No									
Beneficial Owner 2										
Title	Mr Mrs	Ms	Miss Dr	Other						
Surname										
Given Names										
Business Phone			Mobile							
Email Address										
	This email address may	be used for Inv	estor corresponden	ice.						

Residency Status for Tax Purposes

Under the Foreign Account Tax Compliance Act (FATCA) and Common Reporting Standard (CRS) laws, we are required to ask all Policy Owners to provide additional information about their tax residency.

is the	s the Beneficial Owner a tax resident of Australia?										
	Yes	N	0								
Is the	e Beneficial Owner	a tax reside	ent of a count	ry other tl	nan Austra	lia?					
	Yes	N	o								
	S, you will need to diffication Form. Con				-			EOI) Self			
Polit	ically Exposed pe	rson?									
Is the	e Beneficial Owner	a Politically	Exposed Pe	rson?							
	Yes	N	o								
This You i docu of ide Impe The c the p comp	4. Life Insured details This section is only applicable to Life Events Bond applicants. You must nominate a natural person (s) as life insured and include identification documents for the life insured as per page 1 of this application. For other accepted forms of identification, please refer to the 'Individual Identification' document on our website. In death of the last surviving Life Insured (in case of multiple live insured) will trigger the pay out of the Life Events Bond proceeds. If there are multiple lives insured, please complete a separate form for the additional lives insured and attach their details to the application form.										
Title		Mr	Mrs	Ms	М	iss	Dr	Other			
Surn	ame										
Give	n Names										
Date	of Birth				Gen	der		Female		Male	Other
	dential Address (n Number	nust not be a	a PO Box, RM Street I		ked Bag)						
	et Name		31.00(1			Subur	h				
State			Postco	de		Countr					
							,				

Mailing Address (if diff	erent	to abo	ve ac	aaress)									
Unit Number				Street	Nº								
Street Name								5	Suburb)			
State				Postco	ode			С	ountry	′			
Contact Details													
Daytime Telephone								ı	Mobile)			
Email Address													
Life Insured 2													
Title		Mr		Mrs		Ms		Miss		Dr	Other		
Surname													
Given Names													
Date of Birth							(Gende	r		Female	Male	Other
Residential Address (m	านst r	not be a	PO	Box, RI	MB or	Lock	ed Bag	1)					
Unit Number				Street	Nº								
Street Name								5	Suburb)			
State				Postco	ode			С	ountry	′			
Mailing Address (if diffe	erent	to abo	ve ac	ddress)									
Unit Number				Street	Nº								
Street Name								5	Suburb)			
State				Postco	ode			С	ountry	′			
Contact Details													
Daytime Telephone									Mobile	;			
Email Address													

5. Investment term

You can nominate an investment term between 1 and 99 years. If you do not make a section, the default term is 99 years.

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

Investment Options

- Specify amount to be invested as a lump sum and your Regular Savings Plan (RSP) amount (if applicable).
 Please also complete the attached Direct Debit Request form, if a RSP is to be established.
- Minimum initial lump sum investment is \$500 per investment option and a \$100 minimum additional investment.
- Minimum initial Regular Savings Plan is \$50 pm per investment option and a \$50 minimum additional investment.

Investment Options	UFM	Fund Code (KI use only)	Lump Sum Invested	Regular Savings Plan Per Month
Part A Indexed Diversified				
Conservative Index	Vanguard	LEB1	\$	\$
Balanced Index	Vanguard	LEB2	\$	\$
Growth Index	Vanguard	LEB3	\$	\$
High Growth Index	Vanguard	LEB4	\$	\$
Part B Indexed Sector				
Australian Fixed Interest Index	Vanguard	LEB5	\$	\$
Australian Property Securities Index	Vanguard	LEB6	\$	\$
Australian Shares Index	Vanguard	LEB7	\$	\$
International Shares Index	Vanguard	LEB8	\$	\$
iShares Australian Bond Index	BlackRock	LEB28	\$	\$
iShares Australian Equity Index	BlackRock	LEB29	\$	\$
iShares Australian Listed Property Index	BlackRock	LEB30	\$	\$
iShares International Equity Index	BlackRock	LEB31	\$	\$
iShares Hedged International Equity Index	BlackRock	LEB32	\$	\$
Part C Diversified				
* Wholesale Inflation Plus – Assertive Portfolio	MLC*	LEB13*	\$	\$
Conservative - Class A	Russell	LEB9	\$	\$
Balanced - Class A	Russell	LEB10	\$	\$
Growth - Class A	Russell	LEB11	\$	\$
High Growth - Class A	Russell	LEB12	\$	\$
Part D Sector Specific				
Cash and Fixed Interest				
Real Outcome	Ardea	LEB35	\$	\$
* Smarter Money - Institutional Class A	Coolabah*	LEB16*	\$	\$
Term Deposits	KeyInvest	LEB15	\$	\$
Short Term Income Securities	Pendal	LEB34	\$	\$
Diversified Fixed Interest	PIMCO	LEB36	\$	\$
* Australian Cash - Class A	Russell*	LEB14*	\$	\$
* Fixed Income	Schroder*	LEB17*	\$	\$
Cash **	UBS	LEB33	\$	\$
Australian Equities				

Investment Options	UFM	Fund Code (KI use only)	Lump Sum Invested	Regular Savings Plan Per Month
Managed Volatility Equities	AllianceBernstein	LEB38	\$	\$
Australian Equities	Fidelity	LEB20	\$	\$
Broadcap	Greencape	LEB39	\$	\$
Australian Share	Investors Mutual	LEB22	\$	\$
All Industrials Share	Investors Mutual	LEB23	\$	\$
Wholesale Geared Australian Share	Perpetual	LEB25	\$	\$
* Australian Shares - Class A	Russell*	LEB21*	\$	\$
Property and Infrastructure				
Infrastructure	Magellan	LEB19	\$	\$
Real Income - Class A	Martin Currie	LEB37	\$	\$
Global Equities				
Global - Open Class	Magellan	LEB27	\$	\$
* International Shares - Class A	Russell*	LEB26*	\$	\$
Global Equity - I Class	T Rowe Price	LEB42	\$	\$
Quality Global Growth (Managed Fund)	WCM	LEB41	\$	\$
Part E SRI/ESG				
Sustainable Share Fund	Alphinity	LEB43	\$	\$
Diversified ESG Stable	BlackRock	LEB44	\$	\$
Total Invested (before deducting stamp duty)			\$	\$

^{*} Closed to new investors

Stamp Duty Information

Stamp duty is a Government charge that may be payable in relation to your investment depending on the relevant State/Territory. Any applicable stamp duty will be deducted from your contribution at the time it is made. Please contact Keylnvest or your Financial Adviser if you would like more information on stamp duty.

6. Payment options

Cheque	Make cheques	ake cheques payable to "KeyInvest Ltd"							
Direct Debit	Complete the a	ttached Direct Debit Request (DDR) Form							
BPAY Once we receive your application we will contact either:									
LEB Inve	estor/Owner	To advise you of the biller code and your Customer Reference Number (CRN details to process your initial payment.							
AND/OR									
Your Fin	ancial Adviser								

7. Automatic increases to Regular Savings Plan

You can elect to automatically increase your Regular Savings Plan (see below). This will also be reflected in the Direct Debit Request Form.

Do y	Do you wish to automatically increase your Regular Savings Plan?									
	Yes	No								
Annı	ual percentage increase		% (u	p to a maximum of 25	%)					
By se incre amou conti	ased at the start of eac unt. It is important to co	u understand that the R th investment anniversa onsider the 125% limit v for additional informatio	ary year vhen ma	by the nominated per king any additional	centag	•				
AML	3. Additional identification information AML/CTF Laws require that we collect this information. Your application cannot be processed without this information.									
Pleas	se select the origin an	d source of funds bein	g invest	ed						
	Income from Regular Employment	Investments		Business Income		Borrowed Funds				
	Windfall (e.g. gift or lottery winning)	Sale of Assets		Other (please specify)						
9. Wha	What are your reasons for investing? Please choose one or more Savings Retirement Estate Planning									
	Other (please specify)									

10. Financial Adviser information (if applicable)

Existing KeyInvest Adv	iser Code							
Financial Adviser Deta	ails							
Title	Mr	Mrs	Ms	Miss	Dr	Other		
Surname								
Given Names								
Mailing Address								
Unit Number		Street	Nº					
Street Name				5	Suburb			
State		Postco	ode	С	ountry			
Contact Details								
Mobile					Email			
				This	will be used	d for general and	I client correspondence	
ASIC Authorised Repr Adviser Number	esentative/							
Australian Financial S	ervices Licen	see Inform	ation					
AFS Licensee Name								
AFS Licensee Number								
Name of Financial Advisory Firm								
,	If applicable							
Adviser Online Email Address								
	This will be used for your Adviser Online access							

11. Adviser remuneration

Complete this section only if you have agreed to have financial advice fees deducted from your investment. You can agree with your Financial Adviser to change these fee arrangements at any time.

Financial Adviser Service Fees

I/We have agreed to the payment of a dollar based (\$) or percentage based (%) initial advice fee (below) inclusive of Goods and Services Tax (GST) to be deducted from the following investment contribution amounts:

Initial Investment \$ of contribution amount (inclusive of GST) OR % (inclusive of GST)

I/We consent to the payment of a dollar based (\$) or percentage based (%) ongoing Financial Adviser service fee inclusive of GST to be deducted from my/our investment balance. This fee will be deducted from the investment and paid to the Financial Adviser on a monthly basis (in arrears).

If the fixed dollar ongoing fee option is chosen, you must indicate which investment option* the fees are to be deducted from.

\$	p.a. (inclusive of GST)	Investment Option*	
OR			
	% p.a. (inclusive of GST)		

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

Important:

Your Financial Adviser is required by law to obtain your written consent before the Financial Adviser Service Fees can be deducted from your account. Please attach an "Advice Fee Consent Form" or download a copy here: keyinvest.com.au/financial/forms-tools/

12. Financial Adviser declaration

General

Where you are providing financial advice to your client(s) as the investor(s):

- you confirm that you hold an Australian Financial Services Licence, or you are authorised through a holder of a current Australian Financial Services Licence
- you confirm that your licence or authorisation enables you to deal in and advise on the investment(s) applied for under this Application Form
- you have provided the investor with a Statement of Advice in relation to the selected investment(s) strategy as required
- you have fully disclosed all fees and costs associated with investing in the Investment Bond(s)
- you confirm that any advice fees payable to you as agreed by the applicant are for financial services relating solely to the Investment Bond(s)
- you confirm that any increases to advice fee arrangements will be signed off in writing by the applicant prior to making such change
- you declare that all information provided by you in this Application Form is true and correct
- where you have submitted an electronic copy of this Application Form, you confirm that you will retain the original copy of the form for a minimum period of seven years and supply the original to Keylnvest if requested
- you consent to your personal information being disclosed to the managers of investment options in which your clients are invested for the purpose of them managing their relationship with you.

Financial Adviser Service Fees

Ciamatuma of Financial Advisor

Where an advice fee arrangement has been agreed with your client(s) as the investor(s):

- you acknowledge that a percentage advice fee cannot be paid on a borrowed amount used to make an investment
- you confirm that you have made reasonable enquiries to determine that the investment has not been made with borrowed amounts
- you will notify KeyInvest within five South Australian business days if any advice fee arrangements are varied or terminated by the investor or where consent to renew has not been received from the investor in accordance with the opt in requirements of Division 3 of Part 7.7A of the Corporations Act (2001) or other legislative requirements
- you confirm that any advice fee arrangements payable to you as agreed by the applicant are for financial services relating solely to the Investment Bond(s)
- you confirm that any increases to advice fee arrangements will be signed off in writing by your investor prior to making such change.

13. Customer Identification Procedure

You have completed an appropriate customer identification procedure on this/these investor(s), which meets the requirements, set out above in the Application Form and you have attached the relevant customer identification procedure documents.

Signature of Financial Adviser					
Full Name					
Date					

14. Agreement declaration

If your name appears on this Application Form, or you are the parent or guardian of a minor, or an authorised representative of the company, trust or other type of applicant, you must sign and date this Application Form. KeyInvest cannot process this Application Form without the signature(s) of each applicant (as applicable).

By signing this Application Form, I/we agree and acknowledge:

- I/we have received in Australia, read and understood this Application Form and the entire PDS attached and to which this Application Form relates before applying to invest in the LEB
- 2. to be bound by the terms and conditions of the PDS (including any indemnities and releases set out in the terms of the PDS), this Application Form and the Constitution of KeyInvest (as amended from time to time)
- 3. 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 make a Direct Debit Request
- 4. I/we have not relied on statements or representations made by any person, other than those made in the PDS to which this Application Form relates
- 5. I/we authorise and instruct KeyInvest to complete my/our investment instructions in accordance with the instructions in this Application Form.
- 6. that an investment in the LEB Investment Bond (a) does not represent an investment in KeyInvest or any subsidiary of KeyInvest; and (b) is subject to investment and other risks, including possible delays in repayment and loss of income and capital invested
- 7. that neither KeyInvest, nor any of its subsidiaries, guarantees the performance of the LEB, the Investment Options (or its underlying managed funds), or any particular rate of return
- 8. in the event that Keylnvest is wound up and unable to meet its liabilities, I/we will contribute to the sum of \$1.00 only, towards the meeting of Keylnvest's liabilities
- 9. I/we shall be responsible for any stamp duty payable on the issue of my/our LEB or any subsequent assignment or my/our LEB
- 10. I/we confirm that where this investment has been recommended to me/us by a financial adviser, that financial adviser has explained to me/us the features and risks of the products details in the PDS
- 11. that my/our Financial Adviser will receive the payments detailed in this PDS and this Application Form where I/ we have agreed with my/our Financial Adviser to such service fees; and I/we acknowledge that these payments as detailed in this Application Form represent a deduction from the value of my investment in the LEB and will be paid by KeyInvest as agent of the recipient Financial Adviser nominated in this Application Form or as otherwise notified by me/us to KeyInvest
- 12. that if this Application Form 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 Form
- 13. for all account types other than individual and joint accounts, that this Application Form is signed in accordance with the governing rules and/or constituent documents I/we authorise the collection, use and disclosure by KeyInvest of my/our personal information in accordance with the KeyInvest Privacy Policy that is available on the KeyInvest website www.keyinvest.com.au, and to its use for direct marketing (subject to my/our right of opt-out at any time), the management and administration of those KeyInvest products and services in which I/we have invested or for which I/we wish to apply (including the disclosure of information with the Financial Adviser and/or Australian Financial Services Licensee nominated in this Application for and/or subsequently notified to KeyInvest) and for other reasonable purposes

- 14. I/we declare that any documentation or information that I/we have provided in or in connection with this Application Form (a) is complete, true and correct and I/we will inform KeyInvest within 30 days if there are any changes in circumstances; and (b) if such information is about another person or party, it is provided with the express authority of that person or party where required by law. I/we understand that penalties may apply for providing false information
- 15. I/we will provide any supporting or additional information which might be required in order to process this Application Form, or subsequently, as a consequence of my/our holding of units in an Investment Bond
- 16. I/we have no reason to suspect that the capital used to fund this investment, or any subsequent contributions into the LEB, is or will be derived from or related to any terrorism financing, money laundering or other illegal activities if I am/we are (a) a resident of a foreign country, other than Australia for tax purposes or (b) a Controlling Person(s) that is a tax resident of a country other than Australia, I/we will submit the completed AEOI Self-Certification Form; and I/we acknowledge that units in Investment Bond(s) cannot be issued to me/us until I/we have provided a completed AEIO Self-Certification Form, and that penalties may apply under local and other laws if I/we provide false or misleading information.

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

Signatory 1		Signatory 2		
	Power of Attorney (tick if applicable)	Power of Attorney (tick if applicable)		
Signa	ature	Signature		
Full N	lame	Full Name		
Date		Date		

15. Direct Debit Request Form

Request and authority to debit the account named below to pay Keylnvest Ltd.

Please PRINT clearly using blue or black pen, and mark boxes using crosses "x" where appropriate. If a section or box does not apply, please place N/A or NOT APPLICABLE in that box rather than leaving it blank.

Please return the completed form to Keylnvest or phone Keylnvest on **1300 658 904** with any enquiries.

Names and contact details **Account Holder 1** Title Mr Ms Miss Dr Other Mrs Surname/Company/ Trust Name Given Names **Account Holder 2** Title Mr Mrs Ms Miss Dr Other Surname/Company/ Trust Name Given Names If Company, ABN or Trust Suburb Address State Postcode Country Nominated financial institution account Name of financial institution Branch **Account Name**

Account Number

BSB Number

Frec	uency of debits a	and amount						
	The RSP amount of \$			will b	e deducted monthly			
	Lump Sum Contribution — this authority is for one payment only of \$							
Do you wish to automatically increase your RSP?								
	Yes	No						
Annual percentage increase % (up to a maximum			um of 25%)					
Direct Debit Declaration								
Clearing to the instrument of the terms of t	ing System from an accepterms and conditions ctions provided. In this Direct Debit rums and conditions go to out in this Request Formaniated financial instancial for signing e.g., nominated financial instancial instanci	debit or charge to be debit count held at the financial of the Direct Debit Request Request Form, I/we acknowning the debit arrange orm and in the Direct Debit titution account is a computation account is a joint stitution account is a joint	al institution est Service A nowledge ha ements betwo it Request S pany accoun	identif Agreen aving reveen m Service at, sign	nent and any further ead and understood ne/us and KeyInvest Agreement. and print full name			
Signa	ture of Account Holde	er 1	Sig	nature	of Account Holder 2			
Full N	lame and Capacity for	Signing	Full	Name	and Capacity for Signing			
Date			Dat	:e				

You can submit this form by:

Email

info@keyinvest.com.au

Mail

PO Box 3340 RUNDLE MALL SA 5000

16. Direct Debit Request Service Agreement

Definitions

account means the account held at your 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 that is not a Saturday, Sunday or bank or public holiday in South Australia.

debit day means the day that payment by you to us is due under your Direct Debit Request and this agreement.

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

direct debit request means the direct debit request between us and you (and includes any form PD-C approved for use in the transitional period). us our we means Keylnvest Ltd.

you means the person or entity providing the Direct Debit Request.

your financial institution is the financial institution where you hold the account that you have authorised us to arrange to debit.

1. Debiting your account

- 1.1 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.
- 1.2 We will only arrange for funds to be debited from your account as authorised in the Direct Debit Request. If you have selected automatic increases in the Section 3 of the Direct Debit Request, you authorise us to increase your regular debit payment by the nominated percentage each year from the date of the Direct Debit Request.
- 1.3 If the debit day falls on a day that is not a business day, we may direct your financial institution to debit your account on the following business day. If you are unsure about which day your account has or will be debited you should ask your financial institution.

2. Changes by us

2.1 We may vary any details of this agreement or a Direct Debit Request at any time by giving you at least 14 days' prior written notice.

3. Changes by you

- Subject to 3.2, you may change the arrangements under a Direct Debit Request by contacting us on 1300 658 904.
- 3.2 If you wish to stop or defer a debit payment, or cancel your authority, you must notify us in writing at least seven days before the next debit day. This notice should be given to us in the first instance.

4. Your obligations

- 4.1 It is your responsibility to ensure that there are sufficient clear funds available in your account to allow a debit payment to be made in accordance with the Direct Debit Request and this agreement.
- 4.2 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) you may also incur fees or charges imposed or incurred by us; 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.
- 4.3 You should check your account statement to verify that the amounts debited from your account are correct.
- 4.4 If Commonwealth Bank of Australia ABN 48 123 123 124 (CBA) is liable to pay Goods and Services Tax (GST) on a supply made by the CBA in connection with this agreement, then you agree to pay CBA on demand an amount equal to the consideration payable for the supply multiplied by the prevailing GST rate.

5. Dispute

- 5.1 If you believe that there has been an error in a debit payment from your account, you should notify us directly on 1300 658 904 and confirm that notice in writing with us as soon as possible so that we can resolve your query more quickly. Alternatively, you may take this up with your financial institution directly.
- 5.2 If we conclude as a result of our investigations that your account has been incorrectly debited we will respond to your query by arranging for your 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.
- 5.3 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 with reasons and any evidence for this finding.
- 5.4 Any queries you may have about an error made in debiting your account should be directed to us in the first instance so that we can attempt to resolve the matter between us and you. If we cannot resolve the matter you can still refer it to your financial institution which will obtain details from you of the disputed

6. Accounts

- 6.1 Prior to completing your Direct Debit Request, you should check:
 - a) with your financial institution whether direct debiting is available from your account as direct debiting is not available on all accounts offered by financial institutions;
 - b) your account details which you have provided to us are correct by checking them against a recent account statement; and
 - c) with your financial institution if you have any queries about how to complete the Direct Debit Request.

7. Confidentiality

- 7.1 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.
- 7.2 We will only disclose information that we have about you:
 - a) to the extent specifically required by law; or
 - b) for the purpose of this agreement (including disclosing information in connection with any query or claim).

8. Notice

- 8.1 If you wish to notify us in writing about anything relating to this agreement, you should write to us at: PO Box 3340, Rundle Mall, Adelaide, South Australia, 5000 or email: info@keyinvest.com.au
- 8.2 We will notify you by sending a notice in the ordinary post to the address you have given us in the Direct Debit Request.
- 8.3 Any notice will be deemed to have been received on the date that is three business days after it is posted.

17. Additional Information

Beneficial Owners

A Beneficial owner is an individual who ultimately owns or controlls the unregulated trust or Company that acts as trustee for a Trust.

A Beneficial Owner includes:

- control by acting Trustee
- control through capacity to direct trustees or appoint or remove trustees
- control by menas of trust, agreements, arrangements, understandings and practices
- ownership by holding 25% or more of the issued shares in the companby either directly or indirectly e.g. through Trusts.

Specified U.S. Person

The term U.S. individual means any private individual who is a U.S. citizen or U.S. resident for tax purposes.

Holder of a U.S TIN or U.S Reportable Account

Entities that are U.S Specified Persons

Non - U.S entities with U.S controlling persons

Politically Exposed Persons

To comply with AML/CTF Laws, we require you to disclose whether you (or any Key Beneficial Owners), have an association with, a politically Exposed Person.

A Politically Exposed Person is an individual who:

- holds a prominent public position or function in a government body or an international organisation (such as a government minister or senior government official, a high ranking member of the armed forces, or a Chairman, CEO or CFO of an international organisation); or
- is an immediate family member of a person referred to above or is a close associate of that person.

Where you identify as a Politically Exposed Person, or you have an association with a Politically Exposed Person, we may request additional information from you and this may cause a delay in processing your application.

Identity Verification Documents

Under AML/CTF Laws, we may need additional identity verification documents and/or information about you or anyone acting on your behalf. You should be aware that we may be required to pass information that we hold about you or your investment to the relevant government authority.

You have verification options for the kind of identity verification documentation that can be provided. Alternative types of identification may be accepted under circumstances permitted under AML/CTF Laws. Please refer to the "Identification form for Trusts' document available on our website or contact us for more information.

Identification Through a Financial Adviser

If you have a financial adviser acting for you they may be able to assist with your identity verification documents to be lodged with this application. To do this, your financial adviser may need to sight your original documents or may assist you with making certified copies.

Your financial adviser might also retain the certified copies and send them to us with your Application Form. Alternatively, they may have entered into arrangements with Keylnvest, for them to collect and verify your information on our behalf. If these arrangements are in place, you do not have to attach your identity verification documents as your financial adviser will provide us with the required documentation.

Identification Without a Financial Adviser

If you are investing directly (without a financial adviser) you will need to obtain and provide us with certified copies of your identity verification documents with your application. Please refer to the 'Document Certification' section for a list of qualified people who can certify copies of your original documents.

Do not provide original documents as we will not return documents provided by you for the purposes of client identification.

Document Certification

Authorised Person Who Can Certify Customer Identification Documents

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

an officer with, or authorised representative of, a holder of an Australian Financial Services Licence, having two or more continuous years of service with one or more licensees (e.g. financial adviser)	an officer with two or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 1993)		
an authorised Australian Post Office permanent employee	a nominated employee of Keylnvest		
a Justice of the Peace	a person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described)		
a judge of a court	a magistrate		
a lawyer	a chief executive officer of a Commonwealth court		
a registrar or deputy registrar of a court	an Australian police officer		
an Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955)	a member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with two or more years of continuous membership; or		
a notary public officer (for the purposes of the Statutory Declaration Regulations 1993)			

The person certifying the document must see the original and the copy they are to certify. We suggest that the person certifying your identity verification documentation use a statement such as: "I certify this to be a true copy of the corresponding pages of the original document, which was produced to me at the time of signing".

The authorised person should also print their name and position/capacity and date the document. Please refer to the 'Identification forms for Trusts, Companies and Individuals' documents available on our website for more information.

Investing Under a Power of Attorney

If your application is being signed under a power of attorney, you need to provide us with a certified copy of the document (including a specimen signature of the attorney). A certified copy of the proof of identity for the holder of the power of attorney is also required.