

# Investment Bonds



Flexible tax effective investing for all life stages

LifeBuilder 

ChildBuilder 

FuneralBond 

## Contact details

### Postal Address

GPO Box 263  
Collins Street West  
Melbourne VIC 8007

### Telephone

Investor services: 1800 806 362  
Adviser services: 1800 333 657  
Facsimile: (03) 9200 2281

**Email:** [enquiry@genlife.com.au](mailto:enquiry@genlife.com.au)

[genlife.com.au](http://genlife.com.au)

This booklet contains an Application Form for the Generation Life Investment Bonds Product Disclosure Statement dated 4 December 2017 ('PDS'). An application to invest in the Generation Life Investment Bonds can only be made using this form.

Please ensure you read and understand the PDS before applying. Generation Life Limited (ABN 68 092 843 902 AFS Licence 225408) ('Generation Life', 'we', 'us', 'our' in this Application Form) is the issuer of interests in the Generation Life Investment Bonds.

## Privacy collection statement

This privacy collection statement relates to personal information collected by Generation Life.

You can contact us at enquiry@genlife.com.au or by calling 1800 806 362 (Monday to Friday).

## The facts and circumstances of collection

Where it is practical to do so we will collect personal information directly from the person to whom the information relates. However sometimes information might need to be collected from a third party and it is the third party's responsibility to notify the person about the disclosure of their personal information to us.

## The purpose of collection

We collect personal information for the primary purpose of providing financial products and services. This may include verifying identity, managing your investment, managing and resolving complaints, and providing notices and statements.

## The consequences if personal information is not collected

If we are unable to collect personal information it may prevent or delay processing the application or requests, prevent us contacting you, or cause tax consequences.

## Other entities to which personal information is usually disclosed

We engage a number of third party service providers to assist us in providing products and services. We may disclose personal information to these service providers, which will usually include your financial adviser (if nominated) an administrator, our legal advisers, auditors, mail houses, research companies, and information technology providers. When disclosing personal information to third party service providers we will seek to ensure that they comply with the Privacy Act 1988. We may also disclose personal information to Government bodies, or other entities as required by law.

## Our Privacy Policy

More information on our Privacy Policy is available on our website [www.genlife.com.au](http://www.genlife.com.au) or by calling 1800 806 362 (Monday to Friday). It also contains information about how you can get access to information we hold about you, how to seek correction of that information, how to make complaints about privacy and how we will deal with those complaints.

## Anti-Money Laundering and Counter-Terrorism Financing Act 2006

Under Australia's Anti-Money Laundering and Counter Terrorism Financing Laws (AML/CTF Laws) we are required to verify the identity of all new investors. This means we must verify certain information about you, and to do this we need to obtain certain identity verification documentation.

For certain types of investors, such as politically exposed persons we may need additional information. In certain circumstances, AML/CTF Laws may require us to seek further information from you in relation to the source of your funds for this investment.

If we do not receive the necessary identity verification documents with your Application Form, or we are unable to verify your identity at any time, we might be delayed or not able to establish your investment. In addition, withdrawals, investment switches or transfers may not be processed if we do not receive further information or documents reasonably requested. This also applies to individuals who are authorised third party signatories on your account.

We will be unable to process your Application without a completed customer identification details and adequate identification documentation.

We may also ask for further information and documents from you at any time. If you do not provide the documents, we may refuse to accept an investment application or to pay a withdrawal.

You must not knowingly do anything to put us in breach of the AML/CTF Laws. You agree to notify us if you are aware of anything that would put us in breach of AML/CTF Laws. If requested, you agree to provide additional information and assistance and comply with all reasonable requests to facilitate our compliance with AML/CTF Laws in Australia or an equivalent overseas jurisdiction. You represent and warrant that you are not aware and have no reason to suspect that:

- the money used to fund the investment is derived from or related to money laundering, terrorism financing or similar illegal activities; and
- proceeds of investments made under this Application Form will fund illegal activities.

We are subject to AML/CTF Laws. In making an application pursuant to these terms and conditions, you consent to us disclosing in connection with AML/CTF Laws any of your personal information (as defined in the Privacy Act 1988 (Cth)) we have.

In certain circumstances we may be obliged to freeze or block access to your investment where it is used in connection with illegal activities or suspected illegal activities. Freezing or blocking can arise as a result of the account monitoring that is required by AML/CTF Laws. If this occurs, we are not liable to you for any consequences or losses whatsoever and you agree to indemnify us if we are found liable to a third party in connection with the freezing or blocking of your account.

We retain the right not to process any application at our sole discretion.

## Key beneficial ownership

Under AML/CTF Laws, we are required to verify the identity of certain individuals, who ultimately control and/or own (either directly or indirectly) a company or trust that is making an application. We refer to them as "Key Beneficial Owners" because under AML/CTF Laws, they:

- have ultimate "control" of the company or trust as a result of, or by means of, trusts, agreements, arrangements, understandings and practices and this includes them exercising control through the capacity to determine decisions about financial and operating policies; or
- own (either directly or indirectly) 25% or more of the company or trust.

Individual identification documentation will also be required for Key Beneficial Owners.

## Politically exposed persons

To comply with AML/CTF Laws, we require you to disclose whether you (or any key beneficial owners are) or you 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 acceptable under circumstances permitted under AML/CTF Laws. Please contact us for further 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 us, 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

A certified true copy is a copy of a document that has been certified as a true copy of the original, by a person authorised to certify documents. It may include a certified true copy of a print out from an electronic source such as a website.

Persons authorised to certify documents are:

- an officer with, or authorised representative of, a holder of an Australian financial services licence (AFSL), having two or more continuous years of service with one or more licensees;
- a finance company officer with two or more continuous years of service with one or more finance companies (for the purposes of the Statutory Declaration Regulations 1993);

- 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);
- a permanent employee of the Australian Postal Corporation with two or more years of continuous service who is employed in an office supplying postal services to the public;
- an agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public;
- 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 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.

### 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 it (including a specimen signature of the attorney). If the power of attorney does not contain a sample of the attorney's signature, please provide a certified copy of his/her driver's licence or passport containing a sample of his/her signature.

# Instructions for completing the application form

To apply to invest complete the relevant sections of the Application Form included in this booklet using a black pen.

Please print in **CAPITAL LETTERS**.

Indicate your choices with a cross (x).

If you make an error, do not use correction fluid. Simply cross out the mistake and initial your change.

If you have a financial adviser who has advised you to invest, they should complete sections 14 and 16 of the Application Form.

**Your application will be delayed if we do not receive a fully completed Application Form and your relevant identity verification documentation.**

For FuneralBond applications, joint ownership investment benefits can only be used to pay for the expenses of a single funeral. If you would like to cover the cost of both funerals, a separate FuneralBond will need to be applied for.

Your investment can be made by cheque, direct debit or electronic funds transfer (please refer to page 20 for instructions).

Mail your Application Form, your cheque (if applicable) and your identification verification documents to:

Freepost  
Generation Life  
Reply Paid 263  
Collins Street West  
Melbourne VIC 8007

## Section 1 - Type of application

### 1A Are you an existing investor?

Yes. Please provide your client number (if known)

#### Client Number

No. Continue.

### 1B Please indicate what type of investor you are

**Individual/Joint Investors** – Go to Section 2.

**Company** – Go to Section 3.

**Trust** (Including trusts with individual trustees or corporate trustees) – Go to Section 4.

**Deceased Estate** – Go to Section 4

*Please contact us if you are investing as another investor type not described above.*

### 1C What type of investment bond are you applying to invest in? (You can select more than one)

#### Sections to complete

<input type="checkbox"/>	<b>LifeBuilder</b>	Required	2, 3 or 4 AND 5, 9,10,15
		Optional	8,11,12,13,14
<input type="checkbox"/>	<b>ChildBuilder</b>	Required	2 or 4 AND 6, 9,10,15
		Optional	12,13,14
<input type="checkbox"/>	<b>FuneralBond</b>	Required	2 AND 7, 9, 10,15
		Optional	12,13,14

## Section 2 - Individual and joint investors

If there are more than two joint investors you will need to complete a separate form for the additional joint investor.

### 2A Applicant 1 (Refer to page 7 for identification requirements, applicants must be at least 10 years of age)

#### Personal Details

(The investment confirmation, payments, correspondence and statements will be sent to this investor)

Title	<input type="text"/>	Given Name(s)	<input type="text"/>				
		Surname	<input type="text"/>				
Occupation	<input type="text"/>	Date of Birth	<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>

(If aged between 10 and 16 years then a parent or guardian must provide their details in the Applicant 2 section, provide identification documents and must also sign this form)

#### Residential Address (A PO Box / RMB / Locked Bag is not acceptable)

Unit/Street number	<input type="text"/>	Street Name	<input type="text"/>	Suburb	<input type="text"/>
Post Code	<input type="text"/>	State	<input type="text"/>	Country	<input type="text"/>

#### Postal Address (if different to residential address)

All correspondence will be sent to your postal address

c/- (if applicable)	<input type="text"/>				
Unit/Street number	<input type="text"/>	Street Name	<input type="text"/>	Suburb	<input type="text"/>
Post Code	<input type="text"/>	State	<input type="text"/>	Country	<input type="text"/>

#### Contact Details

Home number	( <input type="text"/> ) <input type="text"/>	Mobile number	<input type="text"/>
Email address	<input type="text"/>		

This email address may be used for investor correspondence

#### Identification information

AML/CTF Laws require that we collect this information. Your application cannot be processed without this information.

Are you a Politically Exposed Person? (Refer to page 2 for further information)  Yes  No

#### Please select the origin and source of funds being invested

<input type="checkbox"/> Income from regular employment	<input type="checkbox"/> Investments	<input type="checkbox"/> Business income	<input type="checkbox"/> Borrowed funds
<input type="checkbox"/> Windfall (e.g. gift, lottery winnings)	<input type="checkbox"/> Sale of assets	<input type="checkbox"/> Other (please specify)	<input type="text"/>

#### What is the purpose of investment?

<input type="checkbox"/> Savings	<input type="checkbox"/> Retirement	<input type="checkbox"/> Estate Planning	<input type="checkbox"/> Other (please specify)	<input type="text"/>
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#### Residency status for tax purposes

Under FATCA and Common Reporting Standard ("CRS") laws, we are required to ask all investors to provide additional information about their tax residency.

Are you a tax resident of Australia?  Yes  No

Are you a tax resident of a country other than Australia or a Specified U.S Person?  Yes  No

If YES, you will need to complete a separate FATCA/CRS Form

**Are you completing this section as a:**

Joint investor       Parent/Guardian of Applicant 1

**Personal Details**

Title       Given Name(s)   
Surname   
Occupation       Date of Birth  /  /

**Residential Address (A PO Box / RMB / Locked Bag is not acceptable)**

Unit/Street number       Street Name       Suburb   
Post Code       State       Country

No

**Postal Address (if different to residential address)**

*All correspondence will be sent to your postal address*

c/- (if applicable)   
Unit/Street number       Street Name       Suburb   
Post Code       State       Country

**Contact Details**

Home number (  )      Mobile number   
Email address

*This email address may be used for investor correspondence*

**Identification information**

AML/CTF Laws require that we collect this information. Your application cannot be processed without this information.

**Are you a Politically Exposed Person?** (Refer to page 2 for further information)       Yes       No

**Please select the origin and source of funds being invested**

Income from regular employment       Investments       Business income       Borrowed funds  
 Windfall (e.g. gift, lottery winnings)       Sale of assets       Other (please specify)

**What is the purpose of investment?**

Savings       Retirement       Estate Planning       Other (please specify)

**Residency status for tax purposes**

Under FATCA and Common Reporting Standard ('CRS') laws, we are required to ask all investors to provide additional information about their tax residency.

Are you a tax resident of Australia?       Yes       No

Are you a tax resident of a country other than Australia or a Specified U.S. Person?       Yes       No

*If YES, you will need to complete a separate FATCA/CRS Form*

## 2C Authority to instruct on the investment (Joint applicants only)

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

All applicants (**default**)     Applicant 1     Applicant 2     Either Applicant

## 2D Are you a sole trader?

No.

Yes. If you are a sole trader you will need to provide the following additional details.

Business name

*(if applicable)*

Australian Business Number (ABN)

### Business address (if different from residential address above. PO Box not accepted)

Unit/Street number

Street Name

Suburb

Post Code

State

Country

### Required Identification Documents for Individual or Joint Investors

Certified copies of the following identification documents are required for each individual

- a current driver's licence or passport **OR**
- a birth certificate **and**
- either a tax assessment (less than 12 months old), council rates notice or utilities provider account (less than 3 months old).

**For other acceptable forms of identification, please visit our website or contact us on 1800 806 362.**

## Section 3 - Company (Not applicable for FuneralBond)

### 3A Company details

Full Name of Company

ABN/ACN

#### Contact Person

Title

Given Name(s)

Surname

Business number (  )

Mobile number

Email address

*This email address may be used for investor correspondence*

#### Registered Office Address (A PO Box / RMB / Locked Bag is not acceptable)

Unit/Street number

Street Name

Suburb

Post Code

State

Country

#### Postal Address (if different to above)

*All correspondence will be sent to your postal address*

c/- (if applicable)

Unit/Street number

Street Name

Suburb

Post Code

State

Country

### 3B Residency status for tax purposes

Under FATCA and Common Reporting Standard ('CRS') laws, we are required to ask all investors to provide additional information about their tax residency.

Is the company a tax resident of Australia?  Yes  No

You will need to complete a separate FATCA/CRS Form if any of the following apply to the company:

- a tax resident of a country other than Australia or a Specified U.S. Person?  Yes  No
- a U.S. Company, U.S. Trust or U.S. Partnership?  Yes  No
- an Australian Financial Institution ('AFI') or Other Partner Jurisdiction Financial Institution ('FI')?  Yes  No

*If you answered YES to any of the above, you will need to complete a separate FATCA/CRS Form*

### 3C Director details

Is the company a proprietary/private company (i.e. a Pty Ltd company)?

Yes  No Please go to Section 5 (Life insured and investment term)

#### Director 1

Title

Given Name(s)

Surname

Are you a Politically Exposed Person? (Refer to page 2 for further information)  Yes  No

Are you a Specified U.S. Person?  Yes  No

If Yes, please provide your Taxpayer Identification Number (TIN)



### 3C Director details

#### Director 2

Title  Given Name(s)

Surname

Are you a Politically Exposed Person? (Refer to page 2 for further information)  Yes  No

Are you a U.S. citizen or U.S. tax resident  Yes  No

If Yes, please provide your Taxpayer Identification Number (TIN)

**If there are more than two directors please attach their details to the Application Form.**

### 3D Beneficial owners (proprietary companies only)

#### Beneficial owner 1

Title  Given Name(s)

Surname

Unit/Street number  Street Name  Suburb

Post Code  State  Country

Are you a Politically Exposed Person? (Refer to page 2 for further information)  Yes  No

#### Beneficial owner 2

Title  Given Name(s)

Surname

Unit/Street number  Street Name  Suburb

Post Code  State  Country

Are you a Politically Exposed Person? (Refer to page 2 for further information)  Yes  No

#### Beneficial owner 3

Title  Given Name(s)

Surname

Unit/Street number  Street Name  Suburb

Post Code  State  Country

Are you a Politically Exposed Person? (Refer to page 2 for further information)  Yes  No

*If there are more than three beneficial owners please attach their details to the Application Form.*

#### Required Identification Documents

Certified copies of the following identification documents are required for each individual

- a certificate of registration issued by ASIC **OR**
- a current company search from the ASIC database

**For other acceptable forms of identification, please visit our website or contact us on 1800 806 362.**

## Section 4 - Trusts (Not applicable for FuneralBond)

### 4A Trust details

Trust/Fund/Estate name

Business name (if applicable)

ABN (if applicable)

### 4B Type of trust

Please select the type of trust and provide the relevant information

Family trust or discretionary trust  Unit trust  Foreign trust  Testamentary trust (i.e. under a will)

Other (please specify)

### 4C Trust Beneficiaries

Does the trust deed name the beneficiaries?  No  Yes

If Yes, please list their full names

	Full name (or entity name)	Are they Key Beneficial Owners? (please refer to page 2)	
1	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
2	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
3	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
4	<input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If there are more than four beneficiaries / unit holders, please provide details on a separate attachment to this Application

For any of the above trust beneficiaries/unit holders identified as being a Key Beneficial Owner, is that person(s) a Politically Exposed Person? (Refer to page 2 for further information)  Yes  No

If the trust identifies its beneficiaries/unit holders by specified classes and/or by names and specified classes, please list the class below and also the beneficiaries named (if any) within specified classes:

- 
- 

### 4D Trust Settlor Details

If the initial settled sum to establish the trust is \$10,000 or more, please provide name and address of the settlor(s)\* of the trust:

Name of settlor

Address of settlor

\* A settlor is the person or entity that subscribes for or settles the initial sum to create the trust

### 4E Are you an individual trustee? (including trustee of a deceased estate)

Yes. Go to Item 4J.  No. Please continue.

## 4F Company as trustee

Full Name of Company

ABN/ACN

### Contact Person

Title  Given Name(s)

Surname

Business number (  ) Mobile number

Email address

*This email address may be used for investor correspondence*

### Registered Office Address (A PO Box / RMB / Locked Bag is not acceptable)

Unit/Street number  Street Name  Suburb

Post Code  State  Country

### Postal Address (if different to above)

*All correspondence will be sent to your postal address*

c/- (if applicable)

Unit/Street number  Street Name  Suburb

Post Code  State  Country

## 4G Residency status for tax purposes

Under FATCA and Common Reporting Standard ('CRS') laws, we are required to ask all investors to provide additional information about their tax residency.

Is the company a tax resident of Australia?  Yes  No

You will need to complete a separate FATCA/CRS Form if any of the following apply to the company:

- a tax resident of a country other than Australia or a Specified U.S. Person?  Yes  No
- a U.S. Company, U.S. Trust or U.S. Partnership?  Yes  No
- an Australian Financial Institution ('AFI') or Other Partner Jurisdiction Financial Institution ('FI')?  Yes  No

## 4H Director details

Is the company a proprietary / trustee company (i.e. a Pty Ltd company)?

Yes  No Please go to Section 5 (Life insured and investment term)

### Director 1

Title  Given Name(s)

Surname

Are you a Politically Exposed Person? (Refer to page 2 for further information)  Yes  No

Are you a Specified U.S. Person?  Yes  No

If Yes, please provide your Taxpayer Identification Number (TIN)

## 4H Director details continued

### Director 2

Title  Given Name(s)   
Surname

Are you a Politically Exposed Person? (Refer to page 2 for further information)  Yes  No

Are you a U.S. citizen or U.S. tax resident  Yes  No

If Yes, please provide your Taxpayer Identification Number (TIN)

*If there are more than two directors please attach their details to the Application Form.*

## 4I Beneficial owners

Please provide full name and address details of those persons who own or control 25% or more of the issued capital of the company.

### Beneficial owner 1

Title  Given Name(s)   
Surname

Unit/Street number  Street Name  Suburb

Post Code  State  Country

Are you a Politically Exposed Person? (Refer to page 2 for further information)  Yes  No

### Beneficial owner 2

Title  Given Name(s)   
Surname

Unit/Street number  Street Name  Suburb

Post Code  State  Country

Are you a Politically Exposed Person? (Refer to page 2 for further information)  Yes  No

### Beneficial owner 3

Title  Given Name(s)   
Surname

Unit/Street number  Street Name  Suburb

Post Code  State  Country

Are you a Politically Exposed Person? (Refer to page 2 for further information)  Yes  No

*If there are more than three beneficial owners please attach their details to the Application Form.*

## 4J Individual(s) as trustee(s)

### Trustee 1

Title  Given Name(s)

Surname  Date of Birth  /  /

**Residential Address (A PO Box / RMB / Locked Bag is not acceptable)**

Unit/Street number  Street Name  Suburb   
Post Code  State  Country

**Postal Address (if different to residential address)**

*All correspondence will be sent to your postal address*

c/- (if applicable)   
Unit/Street number  Street Name  Suburb   
Post Code  State  Country

**Contact Details**

*This email address may be used for investor correspondence*

Home number (  )  Mobile number   
Email address

**Trustee 2**

Title  Given Name(s)   
Surname  Date of Birth  /  /

**Residential Address (A PO Box / RMB / Locked Bag is not acceptable)**

Unit/Street number  Street Name  Suburb   
Post Code  State  Country

**Postal Address (if different to residential address)**

*All correspondence will be sent to your postal address*

c/- (if applicable)   
Unit/Street number  Street Name  Suburb   
Post Code  State  Country

**Contact Details**

*This email address may be used for investor correspondence*

Home number (  )  Mobile number   
Email address

**Required Identification Documents**

For trusts that do not have an ABN:

a certified copy of extracts of the trust deed showing the name of the trust, name and address of the settlor, amount of the initial settled sum, name(s) and address(es) of the trustee(s), the beneficiaries / unitholders names / class(es) and the trust's execution page.

For all of the individual trustees (including trustee of a deceased estate) certified copies of:

a current driver's licence or passport **OR**

a birth certificate **AND**

a tax assessment (less than 12 months old), council rates notice or utilities provider account (less than 3 months old).

**For other acceptable forms of identification, please visit our website or contact us on 1800 806 362.**

## Section 5 - Life insured (LifeBuilder applicants only)

### 5A Investor(s) as the life insured

Do you want the LifeBuilder applicant(s) named in Section 2 to be the life / joint lives insured?

- Yes **(default)** Each LifeBuilder applicant will be registered as the life / joint lives insured.
- No. Please provide life insured details for other persons below. At least one life insured must be nominated.

### 5B Other persons as the life insured

#### Life insured 1

(If different to LifeBuilder applicant(s). Also for company or trust applicants where a natural person is required as the life insured)

Title  Given Name(s)   
Surname   
Occupation  Date of Birth  /  /

#### Residential Address (A PO Box / RMB / Locked Bag is not acceptable)

Unit/Street number  Street Name  Suburb   
Post Code  State  Country

#### Life insured 2

(if required)

Title  Given Name(s)   
Surname   
Occupation  Date of Birth  /  /

#### Residential Address (A PO Box / RMB / Locked Bag is not acceptable)

Unit/Street number  Street Name  Suburb   
Post Code  State  Country

### 5C Nominate the preferred life insured event (optional)

I/We nominate the following nominated life insured event to effect a benefit payment:

- the death of the last surviving life insured (default)
- the occurrence of the first death of a named life insured
- the death of the following life insured (insert full name)

# Section 6 - ChildBuilder

## Are you applying to invest in ChildBuilder?

Yes. Continue.  No. Go to Section 7 if investing in FuneralBond or Section 8 if investing in LifeBuilder (depending on your selected investment type)

If you want to set up more than two ChildBuilder investments, a separate application is required. Your nominated child must be under age 16 at the time of the application. Each nominated child will automatically be the life insured under the respective ChildBuilder bond.

	Child 1	Child 2
<b>Title</b>	<input type="text"/>	<input type="text"/>
<b>Surname</b>	<input type="text"/>	<input type="text"/>
<b>Full Given Name(s)</b>	<input type="text"/>	<input type="text"/>
<b>Address</b>	<input type="text"/>	<input type="text"/>
<b>Date of birth</b>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
<b>Relationship to applicant</b>	<input type="checkbox"/> None <input type="checkbox"/> Child <input type="checkbox"/> Grandchild <input type="checkbox"/> Other, please specify <input type="text"/>	<input type="checkbox"/> None <input type="checkbox"/> Child <input type="checkbox"/> Grandchild <input type="checkbox"/> Other, please specify <input type="text"/>
<b>Vesting date</b> If a valid age is not recorded, age 25 will be the age that the investment will be transferred	On attaining <input type="text"/> years (10-25 years) <b>OR</b> <input type="text"/> / <input type="text"/> / <input type="text"/> Not being before the child's 10 <sup>th</sup> birthday or after the child's 25 <sup>th</sup> birthday.	On attaining <input type="text"/> years (10-25 years) <b>OR</b> <input type="text"/> / <input type="text"/> / <input type="text"/> Not being before the child's 10 <sup>th</sup> birthday or after the child's 25 <sup>th</sup> birthday.
<b>Access to funds on vesting</b>  <b>You can nominate how and when funds can be accessed by the child</b>	<input type="checkbox"/> No restrictions. The child will be able to access the investment immediately on vesting. <b>(Default)</b>	<input type="checkbox"/> No restrictions. The child will be able to access the investment immediately on vesting. <b>(Default)</b>
	<b>OR</b> <input type="checkbox"/> Restrictions on withdrawals \$ <input type="text"/> .00 p.a. <b>OR</b> <input type="text"/> % of investment balance p.a. Restrict withdrawals for <input type="text"/> years from vesting date.	<b>OR</b> <input type="checkbox"/> Restrictions on withdrawals \$ <input type="text"/> .00 p.a. <b>OR</b> <input type="text"/> % of investment balance p.a. Restrict withdrawals for <input type="text"/> years from vesting date.
<b>Intended purposes (Optional)</b> These are non-binding and can be noted on the confirmation statement (e.g. home deposit, education costs)	Note intended purposes on certificate? <input type="checkbox"/> No specific purpose <b>(Default)</b> <input type="checkbox"/> Yes. Please specify the intended purpose <input type="text"/>	Note intended purposes on certificate? <input type="checkbox"/> No specific purpose <b>(Default)</b> <input type="checkbox"/> Yes. Please specify the intended purpose <input type="text"/>
<b>Investment amount</b>	\$ <input type="text"/> .00	\$ <input type="text"/> .00

## Please also complete Section 10 - Investment Allocation

If you are nominating more than one child, your investment will be automatically allocated equally between the nominated children. The same investment allocation (refer Section 10) will be applied to each of the ChildBuilder investments set up. If you want to nominate different investment allocation strategies for each child, then please complete the investment allocation form available from our website or attach an additional copy of Section 10. By completing this section you declare and direct that the ChildBuilder applied for:

- is to be established as a Children's Advancement Policy in accordance with the Product Rules and provisions of the Life Insurance Act 1995
- is for the benefit of the nominated child (described above) and that the child will be the life insured under the ChildBuilder bond.

## Section 7 - FuneralBond

**Are you applying to invest in FuneralBond?**  Yes. Continue.  No. Go to Section 8 - EstatePlanner

By completing this form you direct, agree and declare that:

- the FuneralBond applied for is to be established as a funeral bond in accordance with the Product Rules and provisions of the Life Insurance Act 1995
- the amount invested in the FuneralBond together with that paid to other funeral funds does not exceed the amount reasonably required to meet the cost of your desired funeral arrangement
- no amount can be withdrawn from the FuneralBond until a benefit arises on death, except in accordance with any applicable cooling-off period
- we will act, including making any benefit payments, on the basis that the information provided by your nominated funeral director or estate representative is true and accurate
- you understand that each FuneralBond application can only be used to pay for the costs of a single funeral.

**Are you a resident of Queensland?**  Yes. You will also need to complete and attach a Client Care Statement to this application. A copy is available on our website [www.genlife.com.au](http://www.genlife.com.au)  
 No

**Do you want to transfer your FuneralBond to a funeral director as part of a pre-paid funeral contract or other arrangement?**

Yes. Continue.  No. Go to Section 9.

Complete this section if you want your FuneralBond investment transferred to a funeral director as part of a pre-paid funeral contract or other arrangement. You can only assign your FuneralBond as part of a pre-paid funeral contract or arrangement.

Generation Life does not accept any liability or responsibility to ensure that such contract, arrangement or other obligations are met in part or in full. These are your private arrangements between you and your funeral director.

**I/We wish to transfer ownership of the FuneralBond to:**

Name of funeral director	<input type="text"/>
Address of funeral director	<input type="text"/>
ACN or ABN of funeral director	<input type="text"/>
Phone number (BH)	<input type="text"/>
Email address of funeral director	<input type="text"/>

Pre-paid funeral contract/arrangement number this application relates to if applicable):

Applicant 1 - Signature  Date  /  /

Applicant 2 - Signature  Date  /  /   
*(If applicable)*

Funeral director signature  Date  /  /

Funeral director position  Date  /  /

The funeral director can only be a natural person or a company. The funeral director will also be required to complete identity verification documentation as part of the transfer process



## Section 8 - EstatePlanner (LifeBuilder optional)

Are you applying to invest in LifeBuilder?  Yes. Continue.  No. Go to Section 9 - Investing

This section will help you establish your EstatePlanner preferences for your LifeBuilder investment. EstatePlanner can only be used with a LifeBuilder investment and cannot be used for ChildBuilder or FuneralBond. If you do not complete this section your LifeBuilder investment proceeds will pass under your Will and legal estate.

### 8A Select your EstatePlanner preference (choose one only)

**Future Event transfer feature.** Your investment will be transferred to the specified transferees on the selected event. Please complete section 8B.

**OR**

**Nominated Beneficiaries.** Your investment proceeds will be distributed on death of the nominated life insured to the nominated beneficiaries. Please complete section 8C.

### 8B Future Event Transfer facility

Select the date or event that the future transfer of your LifeBuilder investment is to occur:

The following date  /  /

Please select how you would like your transfer to be handled in the event of your death prior to the selected transfer date (select one).

Transfer on the selected date above (**default**) **OR**  Transfer on death

If you have selected 'Transfer on the date above' do you wish to restrict your estate representative from making a withdrawal, create a charge over the investment or transferring or assigning ownership. You may change this instruction at any time prior to your death.

Yes (Default)

No

**OR**

On death of the LifeBuilder owner. In the event of joint owners, the transfer will occur on the death of the last surviving joint owner. Please complete the transferee details below. The transferee(s) can only be a natural person or a company (including a corporate trustee).

I/We wish to transfer ownership of the my LifeBuilder investment to:

#### Transferee 1 (Person)

Title  Given Name(s)   
Surname  Date of Birth  /  /   
Email address

#### Residential Address (A PO Box / RMB / Locked Bag is not acceptable)

Unit/Street number  Street Name  Suburb   
Post Code  State  Country

## 8B Future Event Transfer facility continued

### Transferee 2 (Person)

Title  Given Name(s)   
Surname  Date of Birth  /  /   
Email address

### Residential Address (A PO Box / RMB / Locked Bag is not acceptable)

Unit/Street number  Street Name  Suburb   
Post Code  State  Country

### Transferee 3 (Company - including corporate trust)

Full Name of Company   
ABN/ACN

### Contact Person

Title  Given Name(s)   
Surname   
Business number (  ) Mobile number   
Email address

*This email address may be used for investor correspondence*

### Registered Office Address (A PO Box / RMB / Locked Bag is not acceptable)

Unit/Street number  Street Name  Suburb   
Post Code  State  Country

### Access to funds on transfer

You can nominate how and when funds can be accessed by the transferee(s) under the Future Event transfer facility.

No restrictions (the transferee(s) will be able to access the investment's funds immediately on transfers)

Access to funds after the following date  /  /

Annual maximum withdrawal limit (select amount)

Fixed dollar amount of \$  .00

**OR**

% of the investment account balance p.a.

Restrict withdrawals for  years from transfer date.

### Transferee authorisation

The new owners (transferee(s)) will be required to complete all identification verification requirements and any other requirements we may have prior to us registering the transfer. The transferee(s) will also be registered as an additional life insured.

The future event or date will be the Operative Date under the Product Rules. The transfer will be completed once the future Operative Date has been attained and we have registered the transfer.

## 8C Nominating a beneficiary(ies) feature

**Beneficiary nominations can only be made by individuals. Companies and trusts are not able to nominate beneficiaries. A life insured cannot be nominated as a beneficiary.**

*You can make a partial nomination by indicating (below) a total percentage (%) of your benefits less than 100% that will apply to this nomination, with the balance of the benefit proceeds to pass under your will and legal estate.*

"I/We nominate the following person(s) or entity(ies) to receive the proceeds of the investment benefits balance in the event of the death of the life insured in accordance with the instructions in section 5 and in accordance with the PDS and product rules."

	Full name	Address	Date of birth	% of benefit payable
1	<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> %
2	<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> %
3	<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> %
4	<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>	<input type="text"/> %

### Nominated beneficiary details (Corporate - such as companies, trusts, partnerships)

6 Entity name  ABN/ACN   %  
Address/registered office

If you are nominating a legal entity, such as a company or incorporated association, please take care to correctly name and identify the legal entity – we recommend that you obtain legal advice with these kinds of nominations.

If there is insufficient space to identify all nominated beneficiaries, please provide details on a separate attachment to this Application.

If a nominated beneficiary, who is an individual person predeceases me/us, then the nominations will be dealt as follows (select one only):

**Joint survivorship (default)** - the portion of benefit allocated to the deceased beneficiary(ies) will lapse and be allocated on a joint survivorship basis to the remaining individual person nominee or nominees on a pro-rata basis in accordance with their applicable proportional entitlement derived from the percentages of benefits indicated above.

**OR**

**Down-the-line** – their respective share or shares shall be distributed to their respective legal personal representative (being the person duly appointed as their executor, administrator or legal estate trustee).

### Declaration

You agree that if you transfer your investment by way of assignment, then this nomination will be cancelled and revoked with effect as from the date of the transfer, except where the transfer relates to a transfer into a Bonds Custodian bare trust.

## Section 9 - Investing

### 9A Investment amount

The minimum initial investment amount for each investment bond is \$1,000. The minimum additional investment amount is \$500 for each investment bond.

	Investment amount	Progressive investing (dollar cost averaging) - optional*	
<b>LifeBuilder</b>	\$ <input type="text"/> .00	<input type="checkbox"/> No	<input type="checkbox"/> Yes \$ <input type="text"/> per month
<b>ChildBuilder</b> The total amount invested for all children in Section 6 - \$1,000 minimum per child	\$ <input type="text"/> .00	<input type="checkbox"/> No	<input type="checkbox"/> Yes. \$ <input type="text"/> per month
<b>FuneralBond</b>	\$ <input type="text"/> .00	<input type="checkbox"/> No	<input type="checkbox"/> Yes. \$ <input type="text"/> per month

\* Progressive investing (dollar cost averaging) is available where a minimum of \$25,000 is invested (either initial or additional). Your contribution will initially be invested in the cash investment option (Macquarie Treasury Fund).

### 9B Payment arrangements (please select)

- Direct debit Please complete the direct debit authorisation at Section 12.
- Cheque Please make the cheque payable to Generation Life Limited and cross it "Not negotiable"
- EFT / Direct Credit Please contact us for our bank account details to electronically transfer funds into. Include your investor name in the reference details.

### 9C Regular Savings Plan facility

#### Do you want to start a Regular Savings Plan?

- No (Default)
- Yes. Continue.

If you establish a Regular Savings Plan you agree to be bound by the service agreement terms and conditions outlined in the Direct Debit Request Service Agreement. (Please complete the Direct Debit Authorisation section).

	LifeBuilder	ChildBuilder	FuneralBond
<b>Saving Plan frequency</b>	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Half yearly <input type="checkbox"/> Annually	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Half yearly <input type="checkbox"/> Annually	<input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Half yearly <input type="checkbox"/> Annually
<b>Direct debit amount</b>	\$ <input type="text"/> .00	<b>Child 1</b> \$ <input type="text"/> .00 <b>Child 2</b> \$ <input type="text"/> .00	\$ <input type="text"/> .00

The total annual minimum regular contribution is \$1,200 per investment bond.

The Regular Savings Plan amount will normally be deducted from your nominated Australian financial institution account on the 15th day of each month or the next business day.

## 9D Selecting investment options for your Regular Savings Plan

Please advise how your Regular Savings Plan investment will be allocated.

### Select one

I will use the investment allocations as provided in Section 10 – Investment allocation (**default**)

### OR

I will attach a separate Regular Savings Plan investment allocation form (available from our website).

Each investment options selected under the Regular Savings Plan must have an initial investment amount of \$500.

## 9E Regular Savings Plan Automatic Escalation (LifeBuilder and ChildBuilder only)

Do you want to automatically increase the amount of your regular savings contributions annually?

No (**Default**)

Yes. Please select the annual regular savings plan increase amount:

5%    10%    15%    20%,    25%

Other (between 1% and 25%)    .0%.

By selecting this facility you understand that the Regular Savings Plan contributions will be automatically increased at the start of each investment anniversary year by the selected percentage amount. It is important to consider the 125% limit when making any additional contributions to your account.

## 9F Regular Withdrawal facility (LifeBuilder and ChildBuilder only)

The Regular Withdrawal facility provides a convenient way for you to receive automatic payments from your investment for pre-determined amounts at regular intervals. You can choose regular withdrawals to be paid from your selected investment options monthly, quarterly half-yearly or yearly – the default frequency.

Do you want to establish a Regular Withdrawal facility?

No (**Default**)

Yes. Please complete the Regular Withdrawal Facility form available from our website.

### Declaration (LifeBuilder only)

By completing this section you declare and direct that the LifeBuilder applied for (if applicable) is to be established as a LifeBuilder Bond in accordance with the Product Rules and provisions of the Life Insurance Act 1995.

# Section 10 - Investment Allocation

## 10A Initial or additional investment

Allocate your investment amount for each investment bond applied for here. The minimum allocation to an individual investment option is \$500. For Regular Savings Plans the minimum allocation to an individual investment option is \$50.

			Amount to be invested \$ or %					
			LifeBuilder		ChildBuilder		FuneralBond	
	Investment option	Code						
Indexed	iShares Wholesale Australian Bond Index Fund	UF12A	\$	%	\$	%	\$	%
	iShares Wholesale Australian Equity Index Fund	UF11	\$	%	\$	%	\$	%
	iShares Wholesale International Equity Index Fund	UF11A	\$	%	\$	%	\$	%
	iShares Hedged International Equity Index Fund	UF12	\$	%	\$	%	\$	%
	iShares Wholesale Australian Listed Property Index Fund	UF12B	\$	%	\$	%	\$	%
Active	AMP Capital Dynamic Markets Fund	UF10B	\$	%	\$	%	\$	%
	AMP Capital Global Property Securities Fund	UF05A	\$	%	\$	%	\$	%
	Bennelong Concentrated Australian Equities Fund	UF38	\$	%	\$	%	\$	%
	Dimensional Global Small Company Trust	UF09	\$	%	\$	%	\$	%
	Dimensional World Allocation 50/50 Trust	UF40	\$	%	\$	%	\$	%
	Dimensional World Allocation 70/30 Trust	UF24	\$	%	\$	%	\$	%
	Ellerston Australian Market Neutral Fund	UF6A	\$	%	\$	%	\$	%
	EQT Wholesale Mortgage Income Fund	UF25	\$	%	\$	%	\$	%
	Generation Life Sectoral Blend Fund	UF10	\$	%	\$	%	\$	%
	Generation Life Term Deposit Fund	UF14A	\$	%	\$	%	\$	%
	Investors Mutual Australian Shares Fund	UF06	\$	%	\$	%	\$	%
	Investors Mutual Wholesale Future Leaders Fund	UF07	\$	%	\$	%	\$	%
	Kapstream Absolute Return Income Fund	UF10A	\$	%	\$	%	\$	%

## 10A Initial or additional investment

		Amount to be invested \$ or %						
	Investment option	Code	LifeBuilder		ChildBuilder		FuneralBond	
			\$	%	\$	%	\$	%
Active	Legg Mason Martin Currie Emerging Markets Fund	UF36	\$	%	\$	%	\$	%
	Legg Mason Martin Currie Real Income Fund	UF05	\$	%	\$	%	\$	%
	Macquarie Treasury Fund	UF01	\$	%	\$	%	\$	%
	Magellan Global Fund	UF08	\$	%	\$	%	\$	%
	Magellan Infrastructure Fund	UF05B	\$	%	\$	%	\$	%
	MFS Concentrated Global Equity Wholesale Trust	UF08A	\$	%	\$	%	\$	%
	MLC Horizon 2 Income Portfolio	UF32	\$	%	\$	%	\$	%
	MLC Horizon 3 Conservative Growth Portfolio	UF33	\$	%	\$	%	\$	%
	MLC Horizon 4 Balanced Portfolio	UF22	\$	%	\$	%	\$	%
	MLC Horizon 6 Share Portfolio	UF34	\$	%	\$	%	\$	%
	MLC Wholesale IncomeBuilder™	UF23	\$	%	\$	%	\$	%
	Mutual 50 Leaders Australian Shares Fund	UF14	\$	%	\$	%	\$	%
	Mutual ADI/Bank Securities	UF14B	\$	%	\$	%	\$	%
	Pendal Enhanced Credit Fund	UF03	\$	%	\$	%	\$	%
	Pendal Sustainable Australian Share Fund	UF39	\$	%	\$	%	\$	%
	Pendal Sustainable Balanced Fund	UF41	\$	%	\$	%	\$	%
	Perpetual Wholesale Australian Share Fund	UF15	\$	%	\$	%	\$	%
Perpetual Wholesale Balanced Growth Fund	UF19	\$	%	\$	%	\$	%	
Perpetual Wholesale Conservative Growth Fund	UF26	\$	%	\$	%	\$	%	

## 10A Initial or additional investment

			Amount to be invested \$ or %					
			LifeBuilder		ChildBuilder		FuneralBond	
	Investment option	Code						
Active	Perpetual Wholesale Ethical SRI Fund	UF21						
	Perpetual Wholesale Geared Australian Share Fund	UF16	\$	%	\$	%	\$	%
	Perpetual Wholesale Industrial Share Fund	UF20	\$	%	\$	%	\$	%
	Perpetual Wholesale International Share Fund	UF17	\$	%	\$	%	\$	%
	PIMCO Wholesale Australian Bond Fund	UF02	\$	%	\$	%	\$	%
	PIMCO Wholesale Global Bond Fund	UF04	\$	%	\$	%	\$	%
	Schroder Absolute Return Income Fund	UF13	\$	%	\$	%	\$	%
	Vanguard Diversified Conservative Index Fund	UF12C	\$	%	\$	%	\$	%
	Vanguard Diversified Balanced Index Fund	UF31	\$	%	\$	%	\$	%
	Vanguard Diversified Growth Index Fund	UF12D	\$	%	\$	%	\$	%
	Vanguard Diversified High Growth Index Fund	UF30	\$	%	\$	%	\$	%

## 10B Auto-rebalancing facility

Do you want your portfolio automatically rebalanced annually?

No (Default)

Yes

Your portfolio will be rebalanced in accordance with your investment weightings provided in Section 10A. If you select auto-rebalancing, any additional investments you make will be invested in line with these selected investment option weightings. Your auto-rebalancing weightings and any regular savings plan allocations or regular withdrawal investment allocations must be the same.



## Section 11 - Bonds Custodian Trust (Optional - LifeBuilder individual or joint applicants only)

### Are you applying to invest in LifeBuilder as an individual or joint applicant?

- No. Go to Section 12 – Direct debit authorisation.
- Yes. Continue.

Please complete this section if you want to establish a bare trust under the Bonds Custodian Trust (BCT) facility to hold your LifeBuilder investment.

### 11A Setting up a BCT

Do you want to establish a trust under the Bonds Custodian Trust facility to hold your LifeBuilder investment?

- Yes. Continue.
- No. Go to section 12.

Do you have an existing Bonds Custodian Trust already established that you would like to transfer your new LifeBuilder investment to?

- Yes. Please provide details of the your trust's name in Section 11B.
- No.

### 11B Name of your BCT trust

Please provide a name for your trust (e.g. Mary Smith Special Purpose Trust)

### 11C Term of your new BCT trust

The Bonds Custodian Trust master deed has a fixed term ending 21 January 2092. This will be the term of the Bonds Custodian Trust that will be established for you unless you nominate an earlier date.

Other termination date (if required)  /  /

### 11D Declaration

By completing this section you:

- request and direct that your Bonds Custodian bare trust be established to hold your LifeBuilder investment applied for under the Application Form.
- consent to the transfer of your LifeBuilder investment to Bonds Custodian Pty Ltd in its capacity as trustee of the Bonds Custodian Trust to hold on bare trust as your property.
- acknowledge that the transfer of your LifeBuilder investment to the Bonds Custodian Trust does not take effect until it is registered by Generation Life.

#### OFFICE USE

Authorised signature - BCT  Date  /  /

Register of LifeBuilder bond assignment number  Date  /  /

## Section 12 - Direct Debit Authorisation

This section is to be completed if you are arranging for funds to be deducted from your Australian financial institution account as part of an initial or additional investment or Regular Savings Plan.

Name of Australian financial institution

Branch

Account name

BSB number

Account number

I/We request Generation Life Limited (Direct Debit User ID 263858) to arrange for funds to be debited from my/our account as described above and in the Application Form. I/We have read and understood the terms and conditions of the Direct Debit Service Agreement contained in the PDS dated 4 December 2017 and agree to them.

**At least one account holder must be an applicant under this Form.**

Signature of Account Holder 1

Date

 /  / 

Signature of Account Holder 2

Date

 /  /

## Section 13 - Authorised Representative Facility

Would you like to appoint your financial adviser as an authorised representative? Before appointing an authorised representative, refer to the PDS for more details.

No (**Default**)

Yes. I have read the terms and conditions associated with appointing an authorised representative. The financial adviser nominated in Section 14 will be my authorised representative.

Signature of authorised representative

Date

 /  /

## Section 14 - Financial adviser details (if applicable)

### 14A Details of your financial adviser

Name of financial adviser

Dealer group name (if applicable)

Dealer group AFSL

Name of financial advisory firm (if applicable)

Postal address

Email of financial adviser firm  
(for general and client correspondence)

Email of financial advisory  
(for access to the Adviser Portal)

Business telephone

Financial adviser mobile

### 14B Adviser remuneration

Complete this section only if you have agreed to have financial adviser service fees deducted from your investment. You can agree with your financial adviser to change these fees at any time.

#### Initial Advice Fee

I/We have agreed to the payment of an Initial Advice Fee inclusive of GST to be deducted from the following investment contribution amounts (per investment bond).

Initial investment	<input type="text"/>	%	OR	\$	<input type="text"/>	.00
Future Additional investments	<input type="text"/>	%	OR	\$	<input type="text"/>	.00
Regular savings plan	<input type="text"/>	%	OR	\$	<input type="text"/>	.00

#### Adviser Service Fee

I/We have agreed to the payment of a dollar based (\$) and/or percentage based (%) Ongoing Adviser Service Fee inclusive of GST to be deducted from my/our investment balance.

% p.a. OR \$  .00

# Section 15 - Applicants declaration and signatures

## (All applicants must complete)

I/We:

- acknowledge that I/we have read and understood the entire PDS to which this Application Form relates and agree to be bound by the terms and conditions of the offer set out in the PDS, this Application Form, and the terms of the Benefit Fund Product Rules in which I/we are invested (as amended from time to time).
- have read and received in Australia the PDS to which this Application Form relates.
- acknowledge that if a transaction request is invalid, it will not be processed and therefore not be effective until valid documentation is received.
- acknowledge that if Generation Life, its representatives or agents reasonably believes a signature on a document (e.g. a withdrawal request) to be genuine, Generation Life or its representatives and agents is entitled to rely on that signature and will not be liable for any loss I/we may suffer if it is later found that the signature was fraudulent.
- agree that if Generation Life makes an incorrect payment to me/us that I/we will promptly repay any payment notified by Generation Life to me/us as being made in error, and that Generation Life will be entitled to either reverse any crediting of my financial institution account or deduct the amount incorrectly paid from any of my investment(s) in any of the Generation Life investment bonds.
- authorise Generation Life to lodge a withdrawal request as attorney for me/us if any relevant minimum investment balance requirements are not attained or maintained.
- agree that future transactions in the Generation Life investment bonds will be made on the terms of the then current PDS and Product Rules and that the declarations and acknowledgements made in this Application Form will also apply to all such future transactions.
- declare that I/we have the legal capacity and power to make an investment in the Generation Life investment bonds in accordance with this Application Form.
- acknowledge and agree that I/we have read and understood the Generation Life Privacy Policy available at [www.genlife.com.au](http://www.genlife.com.au)
- declare that all the details given in this Application Form are true and correct.
- acknowledge that Generation Life retains the right not to provide services or issue products to any Applicant that Generation Life decides, in its sole discretion, that it does not wish to supply.

If I/We are giving instructions under authority of a power of attorney, I/we declare that:

- at the relevant time I/we are acting in that capacity and that the power of attorney is current and valid
- have not received notice of revocation of that power and agree to provide a certified copy of the power of attorney if requested by Generation Life.
- the instructions I/we have given are not inconsistent with the powers granted to me/us under the power of attorney
- the power of attorney will not be used to directly or indirectly negate or be used in a fashion contrary to the Will or interests of the beneficiaries of the legal estate of the applicant, as donor of the power of attorney.

### Signature of Applicant Holder 1

- Investor
- Trustee
- Director/Company secretary
- Parent/Guardian
- Power of attorney
- Trustee of deceased estate

Date  /  /

### Signature of Applicant Holder 2

- Investor
- Trustee
- Director/Company secretary
- Parent/Guardian
- Power of attorney
- Trustee of deceased estate

Date  /  /

## Section 16 - Financial adviser declarations (if applicable)

When you sign this Application Form you declare that you have read and agree to the declarations below in addition to the Declarations.

### Adviser service fees declarations

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

- you acknowledge that a percentage advice service fee cannot be paid on a borrowed amount used to make an investment. I/You confirm that you have made reasonable enquiries to determine that the investment has not been made with borrowed amounts.
- you will promptly notify Generation Life if an ongoing member advice fee instruction is terminated by the investor or under the fee disclosure or opt in requirements of Division 3 of Part 7.7A of the Corporations Act (Future of Financial Advice).
- you confirm that any adviser service fees payable to you as agreed by the applicant are for financial services relating solely to the investment bond(s).
- you confirm that any changes to adviser service fees will be signed off in writing by your client as the investor prior to making such change.

### General declarations

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

- you confirm that you hold an Australian Financial Services License (AFSL), or you are authorised through a holder of a current AFSL.
- you confirm that your license 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 adviser service fees payable to you as agreed by the applicant are for financial services relating solely to the investment bond(s).
- you confirm that any changes to adviser service fees 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 7 years and supply the original to Generation Life if requested.
- if you have been nominated as the client's authorised representative under the Authorised Representative Facility, you agree to the terms and conditions of the Authorised Representative Facility as amended from time to time.

### Customer identification procedure (Please tick one of the two boxes below)

You have completed an appropriate Customer Identification Procedure (CIP) on this investor(s) which meets the requirements (per type of investor) set out above in the Application Form **AND EITHER**

You have attached the relevant CIP documents; **OR**

You have not attached the CIP documents however you will retain them and agree to provide them to the Generation Life on request. You also agree to forward these documents to Generation Life if you ever become unable to retain the documents.

### Financial adviser signature

Date

 /  /

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 Application Booklet | 21 November 2018

## Contact details

**Postal Address**

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**Telephone**

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