

Application Form

Investment bonds

LifeBuilder | ChildBuilder | FuneralBond

5 October 2021

Contact details

Postal address

GPO Box 263 Collins Street West Melbourne VIC 8007

Enquiries

Investor services 1800 806 362 Adviser services 1800 333 657

Email

enquiry@genlife.com.au

This booklet contains an Application Form for the Generation Life Investment bonds Product Disclosure Statement dated 23 June 2021 (PDS). An application to invest in the Generation Life Investment bonds can only be made using this form.

Before completing the Application Form you must read the PDS available at www.genlife.com.au or request a copy from your financial adviser. 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.

Completing the application form

Payment options

Your investment can be made by BPAY, cheque or direct debit.



BPAY®

You will be provided with the Biller Code and Customer Reference Number once your application has been submitted. Allow up to three (3) Melbourne business days for your funds to clear.

You can make a contribution if this facility is available from your nominated financial institution. Payments via credit cards are not accepted.

® Registered to BPAY Pty Ltd ABN 69 079 137 518

Direct debit

Please complete the direct debit authorisation at Section 12. Allow up to three (3) Melbourne business days for your funds to clear.

Cheque

Please make the cheque payable to Generation Life Limited <investor name> and cross 'not negotiable'.

Mailing

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

Instructions

To apply to invest, please follow the following instructions:

- 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 13 and 14 of the Application Form.

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

Your step by step checklist

Step 1	Target market confirmation - If you do not have a financial adviser acting for you, please confirm your reason for investing	Page 6
Step 2	Select investment bond type and complete applicable sections	Section
	LifeBuilder - select to apply as:	
	Individual or joint investors	Section
	Company	Section
	Trust or Deceased Estate	Section
	Nominate life insured	Section
	EstatePlanner (Optional)	Section
	Bonds Custodian Trust (Optional)	Section
	ChildBuilder - select to apply as:	
	Individual or joint investors	Section
	Trust or Deceased Estate	Section
	Select your vesting date and nominated child	Section
	FuneralBond	
	Individual and joint investors	Section
	FuneralBond details	Section
Step 3	Set your investment amount, Regular Savings Plan and payment method	Section
Step 4	Set your Default Investment Allocation	Section
Step 5	Provide direct debit authorisation details (if applicable)	Section
	Provide your financial adviser's details (if applicable)	Section
	Provide financial adviser's declaration and signature (if applicable)	Section
Step 6	Provide your declaration and signature	Section

Things to know

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 our administrators, 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 (Cth). 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

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 Act 2006 (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 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 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) 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 are (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 accepted under circumstances permitted under AML/CTF Laws. Please refer to the 'Completing proof of identity' 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 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 and date the document. Please refer to the 'Completing proof of identity' document 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.

Target market confirmation

Please complete this section if you do not have a financial adviser.

Before you start your application, we need to find out your reason(s) for investing. Your responses to the following questions are required to

and Distrib 2019 to as with your s	ed for the purpose of the <i>Treasury Laws Amendment (Design aution Obligations and Product Intervention Powers) Act</i> sist us in determining whether your application is consistent selected product's target market. A copy of the relevant ket determination is available at www.genlife.com.au.
Please cor are applyir	nplete the following where applicable for the product you ng for.
LifeBui	lder
This inves	tment will be (select one):
m	y primary non-superannuation investment
pa	art of my overall non-superannuation investment portfolio
My invest	ment time horizon is (select one):
SI	hort (less than 2 years)
M	ledium (2 to less than 5 years)
Lo	ong (5 years or more)
I want to (more than one can be selected):
m	anage or reduce tax incurred on my investment earnings
m	anage or defer my taxable income level
	eate certainty when passing on my wealth as part of my state planning
1 1 .	ualify for, manage or improve my entitlements to overnment social security benefits
0	ther (please specify)

I want the flexibility to (more than one can be selected):			
	select different investment options to suit my desired level of investment risk and investment needs		
	change my investment options as my circumstances and investment objectives change		
	make unlimited investments (including regular investments)		
	access my funds at any time		
	make regular withdrawals		
	Other (please specify)		

ChildBuilder

My investment time horizon is (select one):		I want to (more than one can be selected):		
	Short (less than 2 years)	have funds available for my estate on my death to fund funeral expenses		
	Medium (2 to less than 5 years)	assign ownership to a funeral director as part of a pre-paid		
	Long (5 years or more)	funeral arrangement manage or reduce tax incurred on my investment earnings		
I want t	o (more than one can be selected):	manage of reduce tax incurred of my investment carmings		
	manage or reduce tax incurred on my investment earnings	manage or defer my taxable income level		
	manage or defer my taxable income level	qualify for, manage or improve my entitlements to government social security benefits		
	create certainty when passing on my wealth to a child	Other (please specify)		
	provide financial assistance or a head start for a child			
	Other (please specify)	I want the flexibility to (more than one can be selected):		
		I want the nexibility to (more than one can be selected).		
		select different investment options to suit my desired level of investment risk and investment needs		
I want t	he flexibility to (more than one can be selected):	change my investment options as my circumstances and investment objectives change		
	select different investment options to suit my desired level of investment risk and investment needs	make additional investments (including regular investments)		
	change my investment options as my circumstances and investment objectives change	Other (please specify)		
	make unlimited investments (including regular investments)			
	access my funds at any time			
	make regular withdrawals	Note: In collecting this information and processing your application we have not taken into consideration your personal objectives, financial		
	Other (please specify)	situation or needs. Our acceptance of your application should not be taken as financial or investment advice or a recommendation that the product is appropriate for your needs.		
		We recommend that you consult with a licensed financial adviser to determine whether the selected product is suitable for your specific needs.		

FuneralBond

1. Starting your application

Type of application
Are you an existing investor? Yes No
If YES, please provide your client number
Please indicate what type of investor you are
Individual and joint investors Please go to Section 2 on page 9.
Company Please go to Section 3 on page 12.
Trust (including trusts with individual trustees or corporate trustees) Please go to Section 4 on page 15.
Deceased Estate Please go to Section 4 on page 15.
Please contact us on 1800 806 362 if you are investing as another
investor type.

2. Individual and joint investors

Guide to completing this section

- If there are more than two joint investors you will need to complete a separate form for the additional joint investor.
- Refer to the 'Required identification documents' section below for identification requirements.
- Applicants must be at least 10 years of age.

Required identification documents			
Certified copies of the following identification documents are required for each individual.			
	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 months old), council rates notice or utilities provider account statement (less than 3 months old).		
	er accepted forms of identification, please refer to the eting proof of identity' document on our website.		

2.1 Investor details

Investor 1

Personal details (all correspondence will be sent to this investor)

	, , , , , , , , , , , , , , , , , , , ,
Title	
Given name(s)	Surname
Date of birth (dd/mm/yyyy)	Occupation

Important: If Investor 1 is aged from 10 to less than 16 years old then a parent or guardian must provide their details in the Investor 2 section, provide identification documents and must also sign this form.

Mobile number		
Phone number		
Email address		
This email address may be used for	or investor correspo	ondence.
Residential address Address (PO Box / RMB / Locked	Bag is not accepte	d)
Suburb/City/Town	Postcode	State
Country		
Postal address (if different to residual	dential address)	
C/- (if applicable)	acritial addicss)	
Address		
Suburb/City/Town	Postcode	State
Country		
Identification information		
AML/CTF Laws require that we co		
Are you a Politically Exposed Pers	on (refer to page 5)	?

No

Please select the origin and source of funds being invested	Mobile number	
Income from regular Investments		
employment Business income Borrowed funds	Phone number	
Windfall (e.g. gift or		
Sale of assets lottery winning)	Email address	
Other (please specify)		
	Residential address	
What is the purpose of investment?	Address (PO Box / RMB / Locked Bag is not accepted)	
Savings Retirement Estate planning		
Other (please specify)		
	Suburb/City/Town Postcode State	
Residency status for tax purposes		
Under the Foreign Account Tax Compliance Act (FATCA) and Common	Country	
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?	Postal address (if different to residential address)	
Yes No	C/- (if applicable)	
TGS NO		
Are you a tax resident of a country other than Australia or a Specified U.S Person?	Address	
Yes No		
If YES, you will need to complete a separate FATCA/CRS Self-Certification Form available on our website.	Suburb/City/Town Postcode State	
Investor 2		
Investor type	Country	
Are you completing this section as a		
Joint investor	Identification information	
	AML/CTF Laws require that we collect this information. Your	
Parent/Guardian of Investor 1	application cannot be processed without this information.	
Personal details	Are you a Politically Exposed Person (refer to page 5)?	
Title	Yes No	
	Please select the origin and source of funds being invested	
Given name(s) Surname	Income from regular Investments	
	employment Business income Borrowed funds	
Date of birth (dd/mm/yyyy) Occupation	Business income Borrowed runds Windfall (e.g. gift or	
	Sale of assets lottery winning)	
	Other (please specify)	

What is the purpose of investment?	2.3 Sole trader (optional)
Savings Retirement Estate planning	Are you a sole trader?
Other (please specify)	Yes No
	Business name (if applicable)
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 investors to	
provide additional information about their tax residency.	Australian Business Number (ABN)
Are you a tax resident of Australia? Yes No Are you a tax resident of a country other than Australia or a Specified	Business address (if different to residential address) Address (PO Box / RMB / Locked Bag is not accepted)
U.S Person?	
Yes No	
If YES, you will need to complete a separate FATCA/CRS Self-Certification Form available on our website.	Suburb/City/Town Postcode State
2.2 Authority to instruct on the investment	Country
To be completed by joint investors only.	
Please elect which joint investors have authority to instruct on the investment and bind the other joint investor(s) for future transactions (including additional investments, switches and withdrawals).	
All investors (default) Investor 1	
Investor 2 Either investor	

3. Company

Guide to completing this section

- This section is not applicable for ChildBuilder and FuneralBond.
- 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.

Require	ed identification documents
Certifie	d copies of the following identification documents are
require	d.
	a certificate of registration issued by ASIC
OR	
	a current company search from the ASIC database.
Certifie	d copies of the following identification documents are
require	d 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 months old), council
	rates notice or utilities provider account statement (less that 3 months old).
	er accepted forms of identification, please refer to the eting proof of identity' document on our website.
3.1 C	ompany details
Compa	any details
Full nam	ne of company

Australian Business Number (ABN) or Australian Company Number (ACN)

Company contact person		
Title	1	
Given name(s)	Surname	
Mobile number		
Business number		
Email address		
This email address may be used f	for investor correspon	dence.
Company registered office add	ress	
Address (PO Box / RMB / Locked	Bag is not accepted	
Suburb/City/Town	Postcode	State
Suburb/City/Town	Fosicode	State
Country	1	
Postal address (if different to cor	mpany registered offic	e address)
C/- (if applicable)		
Address		
Suburb/City/Town	Postcode	State
		1

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 investors to provide additional information about their tax residency. Is the company a tax resident of Australia? Yes No 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 on our website. Is the company a tax resident of a country other than Australia or a Specified U.S Person? Yes No Is the company a U.S. Company, U.S. Trust or U.S. Partnership? No Yes Is the company an Australian Financial Institution or Other Partner Jurisdiction Financial Institution? Yes No Company type Is the company a proprietary/private company (i.e. a Pty Ltd company)? Yes. Continue to No. Proceed to Section 3.2. Section 5.

3.2 Director details

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 details

	٦
Given name(s)	Surname
Politically Exposed Person or L	J.S. Person
Is the director a Politically Expose	ed Person (refer to page 5)?
Yes No	
Is the director a Specified U.S. Pe	erson?
Yes No	
If YES, please provide their Taxpa	ayer Identification Number (TIN)
	1
Title	Surname
Title	Surname
Title Given name(s)	
Title Given name(s) Politically Exposed Person or U	J.S. Person
Title Given name(s) Politically Exposed Person or U	J.S. Person
Title Given name(s) Politically Exposed Person or Us the director a Politically Exposed Yes No	J.S. Person ed Person (refer to page 5)?
Director 2 details Title Given name(s) Politically Exposed Person or Use the director a Politically Exposed Yes No Is the director a Specified U.S. Person or Use the director and U.S. Person or Use the U.S. Person or U.S. Person or Use the U.S. Person or Use the U.S. Person or Use the U	J.S. Person ed Person (refer to page 5)?

3.4 Beneficial Owners

Please refer to page 5 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 details		
Title]	
Given name(s)	Surname	
Address		
Suburb/City/Town	Postcode	State
Country		
Politically Exposed Person or U	.S. Person	
Is the beneficial owner a Politically	y Exposed Person (ref	fer to page 5)?

No

Beneficial owner 2 details

Title					
Given name(s)			Surname		
Address					
Suburb/City/Town			Postcode		State
Country					
Politically Expose	ed Persoi	n or U.	S. Person		
Is the beneficial ov				(refe	er to page 5)?
Yes		No			

4. Trust or Deceased Estate

Guide to completing this section

- This section is not applicable for FuneralBond.
- This includes trusts and deceased estates with individual trustees or corporate trustees.
- Refer to the 'Required identification documents' section below for identification requirements.

Required identification documents

3 months old).

For the trust

a certified copy of the trust deed or 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 individual Key Beneficial Owners (refer to page 5) of the Trust and individual trustees (including trustee of a deceased estate) certified copies of the following identification documents are required for each individual.

OR	a current driver's licence or passport (current or expired passport within the last 2 years)
	a birth certificate and
	either a tax assessment (less than 12 months old), council rates notice or utilities provider account statement (less than

For company Key Beneficial Owners (refer to page 5) and company trustees (including trustee of a deceased estate), please provide the identification documents as listed on page 10 under 'Required identification documents'.

For other accepted forms of identification, please refer to the 'Completing proof of identity' document on our website.

4.1 Trust information

Trust details Trust/Fund/Estate name Business name (if applicable) Australian Business Number (ABN) (if applicable)

Type of trust

Please	select the type of trust	
	Family trust or discretionary trust	Unit trust
	Foreign trust	Testamentary trust (i.e. under a Will)

	Other (please specify)
L	

4.2 Trust beneficiaries

Does the trust deed name the beneficiaries?		
Yes	No	

If YES, please list their full names.

Yes

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

Nο

Beneficiary 1 full name (or entity name) Are they Key Beneficial Owners (refer to page 5)?

Beneficiary 2 full name (or entity name)	Address of settlor	
Are they Key Beneficial Owners (refer to page 5)?		
Yes No	Suburb/City/Town	Postcode State
Beneficiary 3 full name (or entity name)		
	Country	7
Are they Key Beneficial Owners (refer to page 5)?		
Yes No		
Beneficiary 4 full name (or entity name)	4.4 Type of trustee	
	Are you an individual trustee? (ind	cluding trustee of a deceased estate)
Are they Key Beneficial Owners (refer to page 5)?	Yes. Continue to Section 4.5.	No. Proceed to Section 4.6.
Yes No	Section 4.5.	Section 4.6.
For any of the above trust beneficiaries/unitholders identified as being a Key Beneficial Owner, is that person(s) a Politically	4.5 Individual trustee(s	s)
Exposed Person (refer to page 5)?	If there are more than two trust	tees please complete a separate
Yes No	form for the additional trustees Application Form.	and attach their details to the
If the trust identifies its beneficiaries/unit holders by specified classes	Trustee 1 details	
and/or by names and specified classes, please list the class below and also the beneficiaries named (if any) within specified classes:	Title	_
1.		
	Given name(s)	Surname
2.		
	Date of birth (dd/mm/yyyy)	٦
4.3 Trust settlor information		
Trust settlor details	Mobile number	
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.	Phone number	
A settlor is the person or entity that subscribes for or settles the initial sum to create the trust.		
Name of settlor	Email address	
	This email address may be used	for investor correspondence.

Residential address	Mobile number
Address (PO Box / RMB / Locked Bag is not accepted)	
	Discussion of the second of th
	Phone number
Suburb/City/Town Postcode State	Email address
Country	
	Residential address
	Address (PO Box / RMB / Locked Bag is not accepted)
Postal address (if different to residential address)	
C/- (if applicable)	
	Suburb/City/Town Postcode State
Address	State State
	Country
Suburb/City/Town Postcode State	
	Postal address (if different to residential address) C/- (if applicable)
Country	(Mappingare)
Country	
	Address
Politically Exposed Person or U.S. Person	
Is the trustee a Politically Exposed Person?	
Yes No	Suburb/City/Town Postcode State
Is the trustee a Specified U.S. Person?	
Yes No	Country
165	
If YES, please provide their Taxpayer Identification Number (TIN)	
	Politically Exposed Person or U.S. Person
	Is the trustee a Politically Exposed Person (refer to page 5)?
Trustee 2 details	Yes No
Title	
	Is the trustee a Specified U.S. Person?
	Yes No
Given name(s) Surname	If VES, places provide their Texposor Identification Number (TIA)
	If YES, please provide their Taxpayer Identification Number (TIN)
Date of birth (dd/mm/yyyy)	

4.6 Company as trustee

4.6 Company as truste	e •	Postal address (if different to comp. C/- (if applicable)	any registered office address)
Company details		0/- (п аррпсаве)	
Full name of company			
		Address	
Australian Business Number (ABN)		0.1.1.000.75	
		Suburb/City/Town	Postcode State
Company contact person		Country	
Title			
Given name(s)	Surname	Residency status for tax purposes	í
		Under the Foreign Account Tax Com	
Mobile number		Reporting Standard (CRS) laws, we a provide additional information about	
WOONE HUMBER			
		Is the company a tax resident of Aus	tralia?
Business number		Yes No	
		Important: You will need to complet	e a separate FATCA/CRS
Email address		Self-Certification Form if any of the f	
		This form is available on our website	ł .
This email address may be used for	or investor correspondence	Is the company a tax resident of a co	ountry other than Australia or a
		Specified U.S Person?	
Company registered office address (PO Box / RMB / Locked		Yes No	
/ tadiose (i o box / timb / bookea	Dag to flot acceptody		O. To all and I.O. Davida and blood
		Is the company a U.S. Company, U.	5. Trust or U.S. Partnership?
		Yes No	
Suburb/City/Town	Postcode State	Is the company an Australian Financ	ial Institution or Other Partner
		Jurisdiction Financial Institution?	
		Yes No	
Country			
		Company type	
		Is the company a proprietary/private	company (i.e. a Pty Ltd
		company)?	
		Yes. Please	No. Proceed to
		continue below.	Section 5.

Director

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 details

Title		
Given name(s)	Surname	
Politically Exposed Person or U	.S. Person	
Is the director a Politically Expose	d Person (refer to page 5)?	
Yes No		
Is the director a Specified U.S. Pe	rson?	
Yes No		
If YES, please provide their Taxpa	yer Identification Number (TIN)	
Director 2 details		
Title		
Given name(s)	Surname	
Politically Exposed Person or U	.S. Person	
Is the director a Politically Expose	d Person (refer to page 5)?	
Yes No		
Is the director a Specified U.S. Person?		
Yes No		
If YES, please provide their Taxpa	yer Identification Number (TIN)	

Beneficial Owner

Please refer to page 5 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 details

Title			
Given name(s)		Surname	
Address			
0 to 1/0" /T-		Destant	Obsta
Suburb/City/Town		Postcode	State
Country			
Politically Exposed Per	son or U.S	. Person	
Is the beneficial owner a	Politically E	Exposed Person (r	efer to page 5)?
Yes	No		

Beneficial owner 2 details

Title		
Given name(s)	Surname	
Address		
Suburb/City/Town	Postcode	State
Country		
,		
Politically Exposed Person or U	J.S. Person	
Is the beneficial owner a Politicall	y Exposed Person (r	efer to page 5)?
Yes No		

5. Life insured

This section is only applicable to LifeBuilder applicants. Life insured 2 (if required) Title 5.1 Electing life insured Investor(s) as the life insured Given name(s) Surname Do you want the LifeBuilder applicant(s) named in Section 2 to be the life / joint lives insured? Date of birth (dd/mm/yyyy) Yes (default). Each LifeBuilder applicant will be registered as the life / joint lives insured. No. Please provide life insured details for other persons Residential address below. At least one life insured must be nominated. Address (PO Box / RMB / Locked Bag is not accepted) 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. Suburb/City/Town Postcode State If there are more than two lives insured please complete a separate form for the additional lives insured and attach their details to the Application Form. Country Title Given name(s) Surname 5.2 Electing the preferred life insured event Nominate life insured event Date of birth (dd/mm/yyyy) Please select one only. I/We nominate the following nominated life insured event to effect a benefit payment: Residential address Address (PO Box / RMB / Locked Bag is not accepted) the death of the last surviving life insured (default). the occurence of the first death of a named life insured. the death of the following nominated life insured: Suburb/City/Town Postcode State Please specify name of nominated life insured Country

6. ChildBuilder

Guide to completing this section

- This section is only applicable to ChildBuilder applicants.
- 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 investment.

ChildBuilder (Child 1)

Child details

Surname	
Relationship to	applicant
Bag is not accepte	ed)
Postcode	State
	Relationship to

Vesting date

age 25.					
On attaining age					
years old (10-25 years old)					
OR					
Set a vesting date, on					
Vesting date must not be before the child's 10th birthday or after the child's 25th birthday.					
Select how funds will be accessed on vesting					
No restrictions on withdrawals					
The child will be able to access the investment immediately on					
vesting (default).					
OR Annual maximum withdrawal limit					
You can nominate how and when funds can be accessed by					
the child.					
Select a fixed dollar amount limit					
\$ p.a.					
OR					
Select % of investment balance limit					
% p.a.					
(Optional)					
Restrict withdrawals for the following number of years from					
vesting date					
years					
Intended purposes (optional)					
These are non-binding and can be noted on the confirmation statement (e.g. home deposit, education costs).					
Would you like to specify the intended purpose on the investment					
confirmation statement?					
Yes No (default)					

If YES, please specify the intended purpose

If a valid age or date is not recorded, investment will be transferred at

ChildBuilder (Child 2)

Child details Title Given name(s) Surname Date of birth (dd/mm/yyyy) Relationship to applicant Address (PO Box / RMB / Locked Bag is not accepted) Suburb/City/Town State Postcode Country Investment amount \$ Must be a minimum of \$1,000.00 **Vesting date** If a valid age or date is not recorded, investment will be transferred at age 25. On attaining age years old (10-25 years old) OR

Vesting date must not be before the child's 10th birthday or after the child's 25th birthday.

Select how funds will be accessed on vesting

	No restrictions on withdrawals					
	The child will be able to access the investment immediately o					
	vesting (default).					
R						
	Annual maximum withdrawal limit					
	You can nominate how and when funds can be accessed by					
	the child.					
	Select a fixed dollar amount limit					
	\$ p.a.					
	OR					
	Select % of investment balance limit					
	% p.a.					
	(0.11)					
	(Optional)					
	Restrict withdrawals for the following number of years from					
	vesting date					
	years					
	youro					

Intended purposes (optional)

Yes

These are non-binding and can be noted on the confirmation statement (e.g. home deposit, education costs).

Would you like to specify the intended purpose on the investment confirmation statement?

No (default)

If YES, please spec	cify the intended purpos	se

Important: Please also complete Section 10 - Default Investment Allocation.

When setting up more than one ChildBuilder:

If percentage allocation is chosen, the same Default Investment Allocation will be applied to each ChildBuilder investment. If dollar amount allocation is chosen, the amount allocated for each investment option will be allocated to each ChildBuilder account in proportion to the respective investment amount. If you want to nominate different Default Investment Allocation strategies for each child, then please attach an additional copy of Section 10 for each child.

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.

Set a vesting date, on

7. FuneralBond

This section is only applicable to FuneralBond applicants.

7.1 Agreement and declaration

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.

7.2 Residency

Are you a resident of Queensland? Yes. All Queensland resident FuneralBond investors must complete and attach a Client Care Statement to this application. A copy is available on our website www.genlife.com.au No.

7.3 Transferring your FuneralBond to a funeral director

Complete this section if you want your FuneralBond investment transferred to a funeral director as part of a prepaid funeral contract or 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.

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

Yes. Please	No. Proceed to
continue below.	Section 9.

Funeral director details

Important: 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.

Name of funeral director business	3
Australian Business Number (ABN (ACN) (if applicable)	N) or Australian Company Number
Pre-paid funeral contract/arrange to (if applicable)	ment number this application relates
Title	
Given name(s)	Surname
Mobile number	
Business number	
Email address	
Linaii address	
This email address may be used to Postal address Address	for investor correspondence.
Suburb/City/Town	Postcode State
Construction :	
Country	

Signature of Investor 1
Name (please print)
Signature
Date (dd/mm/yyyy)
Signature of Investor 2 (if applicable)
Name (please print)
Signature
Date (dd/mm/yyyy)
Funeral director signature
Important: 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.
Name (please print)
Signature
Date (dd/mm/yyyy)

8. EstatePlanner

Guide to completing this section

- This section is applicable to LifeBuilder applicants only.
- 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.

8.1 EstatePlanner preference

Select your EstatePlanner preference. Choose one only. Future Event transfer. Your investment will be transferred to the specified transferee(s) on the selected event. Please continue to Section 8.2. Nominated beneficiaries. Your investment proceeds will be distributed on death of the nominated life insured to the nominated beneficiaries. Please continue to Section 8.3.

8.2 Future Event transfer

	the date or event that the future transfer of your LifeBuilder nent is to occur:				
	Date of future transfer				
	Please select how you would like your transfer to be handled in the event of your death (in the event of joint owners, the death of the last surviving joint owner) prior to the selected transfer date (select one). Important: This is applicable to individual or joint owners only.				
	Transfer on the selected date above (default).				
	Transfer on death of the LifeBuilder owner(s).				
	If you have selected 'Transfer on the selected 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(s). In the event of joint owners, the transfer will occur on the death of the last surviving joint owner. Important: This is applicable to individual or joint owners only.				
	complete the transferee details below. The transferee(s) can only tural person, trust, or a company (including a corporate trustee).				
I/We w	rish to transfer ownership of the my LifeBuilder ment to:				
Primar	y transferee details				
Title					
Given n	ame(s) Surname				
Date of	birth (dd/mm/yyyy)				

Mobile number		Address (PO Box / RMB / Locked Bag is not accepted)		
Phone number				
			Suburb/City/Town	Postcode State
Email address				
			Country	
Address (PO Box / RMB / Locked B	Bag is not accepted	d).		
			Company including corpora	te trustee
Suburb/City/Town	Postcode	State	Please provide company details only if you wish to transfer ownership of your LifeBuilder investment to a company.	
			Company details	a company.
Country			Full name of company	
Joint transferee (person)				
Please provide joint transferee deta investment to be transferred to a jo			Australian Business Number (ABN)	or Australian Company Number (ACN)
Important: Joint ownership transfe				
investment to a joint ownership and LifeBuilder investments.	d not split into sepa	rate individual	Company contact person detail	ls
Title			Title	1
Given name(s)	Surname		Given name(s)	Surname
Date of birth (dd/mm/yyyy)			Mobile number	
Mobile number			Business number	
Phone number			Email address	
Email address			Company registered office add	
			Address (PO Box / RMB / Locked	d Bag is not accepted)
			Suburb/City/Town	Postcode State
			Country	

8.3 Nominating a beneficiary(ies) feature

Access to funds after transfer

Nominate how and when funds can be accessed by the transferee(s)		Important: Beneficiary nominations can only be made by individuals.			
under the Future Event transfer feature.		Companies and trusts are not able to nominate beneficiaries. A life			
	No restrictions on accessing funds		insured cannot be nominated as a beneficiary.		
	The transferee(s) will be able to access the investme	ent's funds	You can make a partial nominati	on by indicating (below) a total	
	immediately on transfer.		percentage (%) of your benefits	less than 100% that will apply to this	
O D			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		
OR	Destrict second to finds				
	Restrict access to funds	antia francia			
	The transferee(s) will be able to access the investme based on the below restrictions.	ent s iunas	0 1	, ,	
	based off the below restrictions.		proceeds of the investment benefits balance in the event of the death of the nominated life insured in accordance with the instructions in Section 5 and in accordance with the PDS and Product Rules.		
	Access to funds after the following date				
	Access to fullus after the following date	ning date	dection 3 and in accordance will	artifier DS and Floudet nules.	
			Beneficiary 1 details		
			Title		
	Annual maximum withdrawal limit (option	nal)	Title		
	7 amaa maxman mararar mii (opas	····			
	Select a fixed dollar amount limit	it	Given name(s)	Surname	
	\$ p.a.		(-)		
	'				
	OR		Date of birth (dd/mm/yyyy)	Benefit payable	
	Select % of investment balance limit		, 33337	7	
	% p.a.			9/	
			Address		
	(Optional)				
	Restrict withdrawals from funds access date	e for			
	Vooro				
	years				
Important: Transferee authorisation		Suburb/City/Town	Postcode State		
Natura	I nerson transferee(s) will be registered as an addition:	al life			
Natural person transferee(s) will be registered as an additional life			Country		

insured to this LifeBuilder investment.

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 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.

Beneficiary 2 details			partnerships)	orporate -	sucn as compa	nies, trusts,	
Title			If you are nominating a le	egal entity s	uch as a compa	any or incorporated	
			association, please take				
Given name(s)	Surname		entity – we recommend that you obtain legal advice with these kinds of nominations.				
			Entity name				
Date of birth (dd/mm/yyyy)	Benefit payable	!					
		%					
Address							
			ABN or ACN		Benefit payable	е	
] [%	
Suburb/City/Town	Postcode	State	Address/registered office	e			
Country							
			Suburb/City/Town		Postcode	State	
	_						
Beneficiary 3 details			Country				
Title	$\overline{}$						
Given name(s)	Surname		Important: If there is ins beneficiaries, please pro				
			this Application form.	vido dotalio	orra doparato a		
Date of birth (dd/mm/yyyy)	Benefit payable)					
		%	Beneficiary change ins	tructions			
Address			If a nominated beneficial				
			me/us, then the nominat				
						f benefit allocated nd be allocated or	
			a joint survivors	hip basis to	the remaining in	ndividual person	
Suburb/City/Town	Postcode	State		,		accordance with	
			their applicable percentages of			ived from the	
Country			OR				
					ective share or sl		
					ve legal personations		
			administrator or			,	

8.4 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.

9. Setting up your investment

9.1 Initial investment

Minimum initial investment of \$1,000 per investment bond is required.

Dollar Cost Averaging is available up to a maximum of 12 equal payments on a monthly basis, where a minimum of \$25,000 is invested for each investment bond.

Your contribution will initially be invested in the cash investment option (Macquarie Treasury Fund) and progressively invested according to the Default Investment Allocation weighting as provided in Section 10.

The first Dollar Cost Averaging payment will occur when this application is finalised and second and subsequent payments will normally occur on the 24th of each following month or the next Melbourne business day.

Important: If the auto-rebalancing facility is selected in Section 9.6, the annual auto-rebalancing will not occur while a current active Dollar Cost Averaging facility is in place.

Investr	nent amoi	unt			
\$					
Dollar	Cost Ave	raging (optional)		
Do you	want to d	dollar co	st averag	e your init	ial investn
accord	ng to you	ır Defaul	t Investm	ent Alloca	ation?
	Yes		No		
If YES,	please sp	ecify the	e number	of equal	Dollar Cos
Averag	ng paym	ents to b	e made		
		(maximu	ım of 12	oayments)
ChildB	uilder				
Investr	nent amou	unt			

The total amount invested for all children nominated in Section 6. \$1,000 minimum per ChildBuilder.

Dollar Cost Averaging (optional)

Do you want to dollar cost average your initial investment according to your Default Investment Allocation?

	Yes		No		
If YES	, please :	specify the n	umber	of equal D	ollar Cos
Avera	ging payr	ments to be r	made		
		(maximum	of 12 p	ayments)	

Tulleraiboliu
Investment amount
\$
Dollar Cost Averaging (optional)
Do you want to dollar cost average your initial investment
according to your Default Investment Allocation?

If YES, please specify the number of equal Dollar Cost Averaging payments to be made

No

	(maximum of 12 payments
	`

9.2 Payment Option

Please refer to	page 2 on	how to	make	payment
-----------------	-----------	--------	------	---------

Pleas	e select your paym	nent o	ption	
	BPay		Cheque	Direct debit. Complete
				Section 12.

Important: Please note we cannot establish your investment until we have received cleared funds from you.

9.3 Setting up a Regular Savings Plan

Important: 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 also complete Section 12 - Direct Debit Authorisation.

Do you want to sta	rt a Regular Savings Plan
Yes	No (default)

Frequency and amount of Regular Savings Plan

The total annual minimum regular contribution is \$1,200 per investment bond. For example, \$100 per month or \$300 per quarter.

Important: The deduction of your Regular Savings Plan amount from your nominated Australian financial institution account will normally be initiated on the 15th day of each month or the next Melbourne business day. Funds may take up to three (3) Melbourne business days to be received by us.

Your Regular Savings Plan amount will be invested according to the Default Investment Allocation weighting as provided in Section 10.

LifeBuilder	Important: By selecting this facility you understand that the Regular
Select Regular Savings Plan frequency	Savings Plan contributions will be automatically increased at the start of each investment anniversary year by the selected percentage
Monthly Quarterly	amount.
Half yearly Annually	It is important to consider the 125% limit when making any additional contributions to your investment bond.
Direct debit amount	
\$	9.5 Regular Withdrawal facility
	LifeBuilder and ChildBuilder applications only
ChildBuilder	The Regular Withdrawal facility provides a convenient way for you to
Select Regular Savings Plan frequency	receive automatic payments from your investment for pre-determined
Monthly Quarterly	amounts at regular intervals. You can choose regular withdrawals to be paid from your selected investment options monthly, quarterly, half-
Half yearly Annually	yearly or yearly.
	Do you want to establish a Regular Withdrawal facility?
Direct debit amount	Yes. Please complete the Regular Withdrawal facility form
ChildBuilder 1 \$	available from our website.
ChildBuilder 2 \$	No (default).
FuneralBond	9.6 Auto-rebalancing facility
Select Regular Savings Plan frequency	Do you want your portfolio automatically rebalanced annually?
Monthly Quarterly	
	Yes. Your portfolio will be rebalanced annually in accordance with your Default Investment Allocation at that time.
Half yearly Annually	
Direct debit amount	No (default).
\$	Important: If you have an active Dollar Cost Averaging facility in
	place, the annual auto-rebalancing WILL NOT OCCUR . However,
9.4 Regular Savings Plan automatic	your annual auto-rebalance preference will remain active for the next scheduled auto-rebalance date.
escalation instructions	9.7 Declaration
LifeBuilder and ChildBuilder applications only	
Do you want to automatically increase the amount of your Regular	LifeBuilder only
Savings Plan contributions annually?	By completing this section you declare and direct that the LifeBuilder applied for (if applicable) is to be established as a LifeBuilder Bond
Yes No (default)	in accordance with the Product Rules and provisions of the Life
Please select the annual Regular Savings Plan increase amount	Insurance Act 1995.
5% 10% 15% 20%	
25% other % (between 1% and 25%)	

10. Default Investment Allocation

Guide to completing this section

- 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.
- The Default Investment Allocation will be used for your initial and additional contributions.
- The Default Investment Allocation will also be used for the auto-rebalancing facility, Regular Savings Plan and Dollar Cost Averaging facility (where applicable).

Select whether to allocate in \$ or %		\$		% (Allocation percentage must total 100%)
---------------------------------------	--	----	--	---

	Investment option	Fund code	LifeBuilder	ChildBuilder	FuneralBond
	iShares Hedged International Equity Index Fund	UF12			
	iShares S&P/ASX20 ETF Portfolio	UF14			
ndexed	iShares Wholesale Australian Bond Index Fund	UF12A			
lnd	iShares Wholesale Australian Equity Index Fund	UF11			
	iShares Wholesale Australian Listed Property Index Fund	UF12B			
	iShares Wholesale International Equity Index Fund	UF11A			
	Affirmative Global Bond Fund	UF49			
	AMP Capital Global Property Securities Fund	UF05A			
	Ardea Real Outcome Fund	UF37			
	Bennelong Concentrated Australian Equities Fund	UF38			
Active	BlackRock High Conviction Australian Equity Fund	UF20			
Ac	Dimensional Global Small Company Trust	UF09			
	Dimensional Sustainability World Allocation 70/30 Trust	UF50			
	Dimensional World 50/50 Portfolio	UF40			
	Dimensional World 70/30 Portfolio	UF24			
	Dimensional World Equity Portfolio	UF28			

	Investment option	Fund code	LifeBuilder	ChildBuilder	FuneralBond
	EQT Wholesale Mortgage Income Fund	UF25			
	Evergreen Responsible Growth Model	UF27			
	Firetrail Absolute Return Fund	UF06A			
	Generation Life Term Deposit Fund	UF14A			
	Generation Life Tax Effective Australian Share Fund	UF35			
	GMO Systematic Global Macro Trust	UF47			
	Hyperion Global Growth Companies Fund	UF53			
	Investors Mutual Australian Shares Fund	UF06			
	Investors Mutual Future Leaders Fund	UF07			
	Kapstream Absolute Return Income Fund	UF10A			
	Macquarie Treasury Fund	UF01			
ø	Magellan Global Fund	UF08			
Active	Magellan Infrastructure Fund	UF05B			
	Martin Currie Emerging Markets Fund	UF36			
	Martin Currie Equity Income Fund	UF23			
	Martin Currie Real Income Fund	UF05			
	MFS Concentrated Global Equity 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			
	Mutual ADI/Bank Securities	UF14B			
	Pendal Enhanced Credit Fund	UF03			
	Pendal Sustainable Australian Share Fund	UF39			
	Pendal Sustainable Balanced Fund	UF41			

	Investment option	Fund code	LifeBuilder	ChildBuilder	FuneralBond
	Perpetual Wholesale Australian Share Fund	UF15			
	Perpetual Wholesale Balanced Growth Fund	UF19			
	Perpetual Wholesale Conservative Growth Fund	UF26			
	Perpetual Wholesale Ethical SRI Fund	UF21			
	Perpetual Wholesale Geared Australian Share Fund	UF16			
	Perpetual Wholesale International Share Fund	UF17			
	PIMCO Wholesale Australian Bond Fund	UF02			
	PIMCO Wholesale Global Bond Fund	UF04			
Active	Russell Investments Balanced Fund	UF10			
A	Schroder Absolute Return Income Fund	UF13			
	Schroder Real Return Fund	UF10B			
	Stewart Investors Worldwide Sustainability Fund	UF29			
	Vanguard Balanced Portfolio	UF31			
	Vanguard Conservative Portfolio	UF12C			
	Vanguard Growth Portfolio	UF12D			
	Vanguard High Growth Portfolio	UF30			
	Walter Scott Global Equity Fund (Hedged)	UF52			

11. Bond Custodian Trust

This section is optional only for LifeBuilder individual or joint applicants only.

Please complete this section if you want to establish a bare trust under the Bonds Custodian Trust facility to hold yourLifeBuilder investment.

Setting up your Bonds Custodian Trust

Establish a trust under the Bonds Custodian Trust facility

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 your Bonds Custodian Trust's name (e.g. Mary Smith Special Purpose Trust)
No Please provide a name for your new Bonds Custodian Trust (e.g. Mary Smith Special Purpose Trust)

Term of your new Bonds Custodian 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	termina	tion d	ate (if	requi	rec

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.

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 a Regular Savings Plan amount.

Financial institution details

Please provide your Australian financial institution information.	Name (please print)
Bank and branch name	
	Signature
Account name	
BSB number	Date (dd/mm/yyyy)
Account number	
	Account holder 2
10 11 11 11 11 11 11 11 11 11 11 11 11 1	Name (please print)
I/We request Generation Life Limited (Direct Debit User ID 263858) to	
arrange for funds to be debited from my/our account as described	Circustours
above and in the Application Form. I/We have read and understood the	Signature
terms and conditions of the Direct Debit Service Agreement contained	
in the PDS and agree to them.	
Please ensure you have sufficient funds in your bank account. Allow	
up to three (3) Melbourne business days for your funds to clear. Please	
note that only a bank account can be nominated for direct debits. We	Date (dd/mm/yyyy)
cannot direct debit from any other facility (e.g. credit card, mortgage	

Form.

Account holder 1

Signature of account holder(s)

At least one account holder must be an investor under this Application

account).

Financial adviser contact details

13.1 Financial adviser details

13. Financial adviser details (if applicable)

Financial adviser details Mobile number Title Business number Given name(s) Surname Correspondence email address ASIC Authorised Representative/Adviser number This email address will be used for general and client correspondence. Generation Life Adviser code **Adviser Online access** This email address will be used for your Adviser Online access. Adviser Online email address **Australian Financial Services Licensee information** AFS Licensee name If you are already registered for Adviser Online (Adviser Portal), please ensure you provide the same email address used currently to access AFS Licensee number this service. Name of financial advisory firm (if applicable) 13.2 Target market confirmation Is the applicant within the target market as identified in the most current target market determination for the selected product? Postal address Our target market determinations can be found on our website at Address www.genlife.com.au. Yes (default) No. Please state below the reason why the applicant is not in the target market for the product applied for. Suburb/City/Town Postcode State Country

13.3 Adviser Representative facility

Would you like to appoint your financial adviser as an Adviser Representative?

Please refer to the PDS for term and conditions.

	Yes (default)
	I have read the terms and conditions associated with
	appointing an Adviser Representative. The financial adviser
	nominated in Section 13 will be my Adviser Representative
	until I advise otherwise.
	No

13.4 Adviser remuneration

You may agree with your financial adviser for fees for agreed advice services provided by your financial adviser to be deducted from your investment. You can cancel or vary your fee arrangements at any time by notice in writing to us or your financial adviser.

If you are applying for more than one investment bond account, any fee(s) advised will be applied to each investment bond account.

Initial advice fee

Please deduct the following initial advice fee (inclusive of GST) from the initial investment contribution amount to be paid to my/our financial adviser.

%

initial advice fee (please select one only)			
%	of total contribution amount		
OR			
\$			
Future additional contribution fee (excludes Regular Savings			
Plan contributions)			

of future additional contribution amount

Adviser service fee

Adviser service fees will be deducted from your account and paid to your financial adviser monthly in arrears.

Please	select one adviser service fee arrangement option.
	Option 1 - Fixed Term Arrangement
	A Fixed Term Arrangement is for agreed advice services provided within 12 months from the fee Start Date. The deduction of the advice fee will last for a period of up to 12 months as agreed between you and your adviser.
	Start Date (dd/mm/yyyy)
	End Date (dd/mm/yyyy) (no more than 12 months from the Start Date)

The actual Start Date for the calculation and deduction of fees will be the later of the Start Date nominated or the establishment date of the investment. Your financial adviser will require you to agree to a fee arrangement after the nominated period if you want to continue receiving the agreed advice services from your financial adviser.

This application form must be signed within 90 days of the Fixed Term Arrangement Start Date.

I/We have agreed to the payment of the following fixed term adviser service fee (inclusive of GST) to be deducted from my/our investment balance.

p.a.

Please select one only.

(calculated based on you	(calculated based on your daily account balance)		
OR			
\$	annual amount		

Based on your total initial investment amount, your adviser has estimated a fee across your total nominated investments of:

\$	per month
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Option 2 - Consent to ongoing fee arrangements

You may agree with your financial adviser to consent to the payment of a fee for agreed ongoing advice services provided by your financial adviser. Your financial adviser is required by law to obtain your written consent before the adviser service fee can be deducted from your account.

The adviser service fee will be deducted from your account and paid to your financial adviser monthly in arrears. You can withdraw your consent, cancel or vary your ongoing fee arrangements at any time by notice in writing to us or your financial adviser.

Agreed fee consent period for ongoing fee arrangement

Start Date (e.g. 15/07/2021) (d	d/mm/yyyy)
Consent Anniversary Date (e.g	g. 15/07/2022) (dd/mm/yyyy)

The actual Start Date for the calculation and deduction of fees will be the later of the Start Date nominated or the establishment date of the investment.

The Consent Anniversary Date is 12 months from the nominated Start Date. Your consent to the deduction of your ongoing fee arrangement will expire 150 days after your Consent Anniversary Date.

Your financial adviser will require your consent to continue this fee arrangement after this period if you want to continue receiving the agreed advice services from your financial adviser.

Ongoing adviser service fee

I/We consent to the payment of the following ongoing adviser service fee (inclusive of GST) to be deducted from my/our investment balance.

Please select one only.

		%	p.a.	
--	--	---	------	--

(calculated based on your daily account balance)

OR

	1
\$	annual amount

Based on your investment balance of: \$ Your adviser has estimated a fee of:

\$ per month

Ongoing Regular Savings Plan contribution fee

I/We consent to the payment of the following ongoing Regular Savings Plan contribution adviser service fee (inclusive of GST) to be deducted from my/our Regular Savings Plan contribution payable following each Regular Savings Plan contribution.

%	of the contribution amount

Based on your scheduled regular contribution, your adviser has estimated a fee per Regular Savings Plan contribution of:

\$

14. Financial adviser declaration

Declarations

General

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 confirm that if no personal financial advice has been provided that the relevant product's current target market determination has been considered.
- you confirm that if personal financial advice has been provided the application for investment supports the implementation of personal financial product advice provided by you.
- 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 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.

Adviser service fees

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 Generation Life within five (5) Melbourne business days if any advice fee arrangements are 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 client as the investor prior to making such change.

You have completed an appropriate Customer Identification Procedure

Customer identification procedure

Date (dd/mm/yyyy)

CIP) on this investor(s) which meets the requirements (per type of						
nvestor) 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 Generation Life on request. You also agree to forward these documents to Generation Life if you ever become unable to retain the documents.						
Signature of financial adviser						
Financial adviser name (please print)						
Signature						

15. Applicant declaration and signature(s)

Important: 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
- 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
- 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.
- have agreed with my nominated financial adviser to pay the advice fees as agreed and I/we authorise and direct Generation Life to deduct these amounts from my/our contribution and/or investment balance (as applicable) and pay these amounts to the nominated financial adviser or Australian Financial Services (AFS) Licensee for whom my nominated financial adviser acts as an authorised representative (whoever that may be from time to time) and I/we consent to some or all of this amount being paid by the AFS Licensee to my nominated financial adviser (or their nominee). This authority will continue unless revoked in writing by me/us or for any consent provided for ongoing fee arrangements, 150 days after the Consent Anniversary Date for the ongoing fee arrangement, whichever is earlier.
- confirm that any advice fees agreed are for financial product advice provided to me/us by my/our nominated financial adviser relating solely to my/our Generation Life investment.

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 1								
Name (please print)								
Signature								
Date (dd/mm/yyyy)								
Please select appropriate bo	х							
Investor	Director		Trustee					
Power of attorney	Trustee of deceased estate							

Signature of Applicant 2

Name (please print)							
Signature							
Date (dd/mm/yyyy)							
Please select appropriate box							
	Investor		Director		Trustee		
	Power of attorney		Trustee of deceased estate		Parent/ Guardian		

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Application Form

Please retain a copy of this form for your records.

Form to be sent to

Generation Life

Reply Paid 263
Collins Street West
Melbourne VIC 8007



Outthinking today.

Contact details

Postal address

GPO Box 263 Collins Street West Melbourne VIC 8007

Email

enquiry@genlife.com.au

Enquiries

Investor services 1800 806 362 Adviser services 1800 333 657

Investment Bonds

LifeBuilder | ChildBuilder | FuneralBond

genlife.com.au

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