

Application Form

Investment Bonds

LifeBuilder | ChildBuilder | FuneralBond

28 February 2023

Contact details

Postal address

PO 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 28 February 2023 ('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

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	EstatePlanner (Optional)	Section 8
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Step 3	Set your investment amount, Regular Savings Plan and payment method	Section 9
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Things to know

Privacy collection statement

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

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.

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. For the United States of America (US), tax residency can be as a result of citizenship or residency.

FATCA and CRS are regulatory requirements that aim to deter tax evasion by US and other foreign taxpayers. The Australian and many other foreign governments have agreements through their tax offices where reporting financial institutions are required to collect and report to the Australian Taxation Office (ATO) certain information about the tax residency of account holders. The ATO shares this information with the tax authorities of other jurisdictions. For more information, visit www.ato.gov.au.

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 be collected for the purpose of the Treasury Laws Amendment (Design and Distribution Obligations and Product Intervention Powers) Act 2019 to assist us in determining whether your application is consistent with your selected product's target market. A copy of the relevant target market determination is available at www.genlife.com.au

	stent with your selected product's target market. A copy of the nt target market determination is available at www.genlife.com.au				
	Please complete the following where applicable for the product you are applying for.				
Lifel	LifeBuilder				
This i	nvestment will be (select one):				
	my primary non-superannuation investment				
	part of my overall non-superannuation investment portfolio				
My in	vestment time horizon is (select one):				
	Short (less than 2 years)				
	Medium (2 to less than 5 years)				
	Long (5 years or more)				
I wan	t to (more than one can be selected):				
	manage or reduce tax incurred on my investment earnings				
	manage or defer my taxable income level				
	create certainty when passing on my wealth as part of my estate planning				
	qualify for, manage or improve my entitlements to government social security benefits				
	Other (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 funeral expenses	
	Medium (2 to less than 5 years)		assign ownership to a funeral director as part of funeral arrangement	
	Long (5 years or more)		manage or reduce tax incurred on my investme	
I wan	t to (more than one can be selected):		manage or defer my taxable income level	
	manage or reduce tax incurred on my investment earnings		qualify for, manage or improve my entitlements social security benefits	
	manage or defer my taxable income level		Other (please specify)	
	create certainty when passing on my wealth to a child			
	provide financial assistance or a head start for a child			
	Other (please specify)	I wan	t the flexibility to (more than one can be selec	
			select different investment options to suit my do of investment risk and investment needs	
			change my investment options as my circumsta investment objectives change	
l wan	t the flexibility to (more than one can be selected):		make additional investments (including regular	
	select different investment options to suit my desired level of investment risk and investment needs		Other (please specify)	
	change my investment options as my circumstances and investment objectives change			
	make unlimited investments (including regular investments)			
	access my funds at any time		In collecting this information and processing you	
	make regular withdrawals	situati	ive not taken into consideration your personal ob ion or needs. Our acceptance of your application	
	Other (please specify)		as financial or investment advice or a recommen ct is appropriate for your needs.	
		to det	commend that you consult with a licensed finance ermine whether the selected product is suitable ficeneeds.	

FuneralBond

i wan	it to (more than one can be selected).
	have funds available for my estate on my death to fund funeral expenses
	assign ownership to a funeral director as part of a pre-paid funeral arrangement
	manage or reduce tax incurred on my investment earnings
	manage or defer my taxable income level
	qualify for, manage or improve my entitlements to government social security benefits
	Other (please specify)
I wan	t 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 additional investments (including regular investments)
	Other (please specify)
we ha situat taken	In collecting this information and processing your application ave not taken into consideration your personal objectives, financial ion or needs. Our acceptance of your application should not be as financial or investment advice or a recommendation that the act is appropriate for your needs.
	commend that you consult with a licensed financial adviser termine whether the selected product is suitable for your

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			
G	uide 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 (both front and back must be provided) 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)			
	For other accepted forms of identification, please refer to the 'Completing proof of identity' document on our website.			
2.1	Investor details			
	Investor 1			
	Personal details			
	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 investor correspondence.			
Residential address Address (PO Box / RMB / Locked Bag is not acceptable)			
Suburb/City/Town	Postcode	State	Country
Postal address (if different to residential address) (C/- if applicable)			
Address			
Suburb/City/Town	Postcode	State	Country
This postal address will be used for mailed correspondence.			
Identification information			
AML/CTF Laws require that we collect this information. Your application	on cannot be process	ed without this inform	ation.
Are you a Politically Exposed Person (refer to page 5)?			
Yes No			
Please select the origin and source of funds being invested (select or	ne only)		
Income from regular employment			
Business income			
Sale of assets			
Investments			
Borrowed funds Windfall (a.g. eith av letter uninging)			
Windfall (e.g. gift or lottery winning) Other (please specify)			
Other (please specify)			
What is the purpose of investment? (select one only)			
Savings Retirement Estate planning			
Other (please specify)			

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. Please refer to the 'Things to know' section for more information. Are you a tax resident of Australia? No Yes Are you a tax resident of a country other than Australia or a Specified U.S Person? Yes If YES, you will need to complete a separate FATCA/CRS Self-Certification Form available on our website. **Investor 2** Investor type Are you completing this section as a Joint investor Parent/Guardian of Investor 1 Personal details Title Given name(s) Surname Date of birth (dd/mm/yyyy) Occupation Mobile number Phone number Email address Residential address Address (PO Box / RMB / Locked Bag is not acceptable) Suburb/City/Town State Postcode Country Postal address (if different to residential address) (C/- if applicable) Address Suburb/City/Town Postcode State Country

Identification information				
AML/CTF Laws require that we collect this inform	tion. Your application	on cannot be processe	ed without this inform	ation.
Are you a Politically Exposed Person (refer to pag	5)?			
Yes No				
Please select the origin and source of funds being	invested (select one	e only)		
Income from regular employment				
Business income				
Sale of assets				
Investments				
Borrowed funds				
Windfall (e.g. gift or lottery winning)				
Other (please specify)				
What is the purpose of investment? (select one or Savings Retirement Estate planni Other (please specify)				
Residency status for tax purposes Under the Foreign Account Tax Compliance Act (It to provide additional information about their tax re				
Are you a tax resident of Australia?	sidericy. I lease refe	To the Things to kild	W Section for more in	normation.
Yes No				
Are you a tax resident of a country other than Aus	ralia or a Specified	U.S Person?		
Yes No				
If YES, you will need to complete a separate FATC	VCRS Self-Certifica	ation Form available o	n our website.	
2.2 Authority to instruct on the investment (se	lect one only)			
To be completed by joint investors only				
Please elect which joint investors have authority to (including additional investments, switches and w		estment and bind the o	other joint investor(s)	for future transactions
All investors (default)				
Investor 1				
Investor 2				
Either investor				
2.3 Sole trader (optional)				
Are you a sole trader?				
Yes No				
res No				
Business name (if applicable)				
Australian Business Number (ABN)	\neg			
Business address (if different to residential addre	ss)			
Address (PO Box / RMB / Locked Bag is not acce	otable)			
Suburb/City/Town		Postcode	State	Country

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.

Required identification documents

Certified copies of the following identification documents are required.

a certificate of registration issued by ASIC

OR

a current company search from the ASIC database

Certified copies of the following identification documents are required for each director and beneficial owner.

a current driver's licence (both front and back must be provided) 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)

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

3.1 Company details

Full name of company
Australian Business Number (ABN) or Australian Company Number (ACN)
Company contact person
Title
Given name(s)
Surname
Mobile number
Business number
Email address

This email address may be used for investor correspondence.

Address (PO Box / RMB / Locked Bag is not acceptable)			
Suburb/City/Town	Postcode	State	Country
Postal address (if different to company registered address) (C/- if applicable)			
Address			
Suburb/City/Town	Postcode	State	Country
This postal address will be used for mailed correspondence.			
Residency status for tax purposes			
Under the Foreign Account Tax Compliance Act (FATCA) and oprovide additional information about their tax residency. Pleas			
Is the company a tax resident of Australia?			
Yes No			
Important: You will need to complete a separate FATCA/CRS This form is available on our website.	Self-Certification Form if	any of the following	g apply to the company.
Is the company a tax resident of a country other than Australia	a or a Specified U.S Perso	n?	
Yes No			
Is the company a U.S. Company, U.S. Trust or U.S. Partnershi	p?		
Yes No			
Is the company an Australian Financial Institution or Other Par	tner Jurisdiction Financial	Institution?	
Yes No			
Company type			
Is the company a proprietary/private company (i.e. a Pty Ltd c	ompany)?		
Yes – Continue to Section 3.2			
No – Proceed to Section 5			
Director details			
If there are more than two directors please complete a separate	te form for the additional	directors and attack	h their details to the Application F
Director 1 details			
Title			
Given name(s)			
Surname			
Politically Exposed Person and residency status for tax pu	rposes (Please refer to th	ne 'Things to know'	section for more information)
Is the director a Politically Exposed Person?			
Yes No			
Is the director a tax resident of Australia?			
Yes No			
Is the director a tax resident of a country other than Australia of	or a Specified U.S Person	?	
Yes No			
If YES, the director will need to complete a separate FATCA/C	RS Self-Certification Form	n available on our v	vebsite.

Director 2 details			
Title			
Given name(s)			
Surname			
Surname			
Politically Exposed Person and residency status for tax purpo	oses (Please refer to t	he 'Things to know'	section for more information)
Is the director a Politically Exposed Person?			
Yes No			
Is the director a tax resident of Australia?			
Yes No			
Is the director a tax resident of a country other than Australia or a	Specified IIS Person	n?	
Yes No	opcomed 0.01 ersor		
	Oak Oakkiaakaa Faa	and a State to a second	ale atte
If YES, the director will need to complete a separate FATCA/CRS	Seif-Certification For	m avallable on our w	ebsite.
Beneficial Owners			
Please refer to page 5 for more information. To be completed	by proprietary com	panies only.	
Important: Please provide full name and address details of those	e persons who own or	control 25% or more	e of the issued capital of the company
If there are more than two beneficial owners please complete a se			
Application Form.	JPG. G.O. 10.11. 10. 11.0 G		
Beneficial owner 1 details			
Title			
Given name(s)			
Civen name(s)			
Surname			
Address			
Suburb/City/Town	Postcode	State	Country
Suburb/Oity/ fown	Fosicode	State	Country
Politically Exposed Person and residency status for tax purpo	oses (Please refer to t	he 'Things to know'	section for more information)
Is the beneficial owner a Politically Exposed Person?			
Yes No			
Is the beneficial owner a tax resident of Australia?			
Yes No			
	tualia au a Casaifia d I I	C D = == 0	
Is the beneficial owner a tax resident of a country other than Aust	лана от а эресптес О.	.o reison?	
Yes No			
If YES, the beneficial owner will need to complete a separate FAT	CA/CRS Self-Certification	ation Form available	on our website.

Beneficial owner 2 details			
Title			
Given name(s)			
Surname			
Address		-	
Suburb/City/Town	Postcode	State	Country
Politically Exposed Person and residency status for tax purposes	s (Please refer to the 'T	hings to know' section	n for more information)
Is the beneficial owner a Politically Exposed Person?			
Yes No			
Is the beneficial owner a tax resident of Australia?			
Yes No			
Is the beneficial owner a tax resident of a country other than Australia	a or a Specified U.S Pe	erson?	
Yes No			
If YES, the beneficial owner will need to complete a separate FATCA	'CRS Self-Certification	Form available on our	website.

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

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.

a current driver's licence (both front and back must be provided) 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)

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 13 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 (select one only)
	Family trust or discretionary trust
	Foreign trust
	Unit trust
	Testamentary trust (i.e. under a Will)
	Other (please specify)
	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. Please refer to the 'Things to know' section for more information.
	Is the trust a tax resident of Australia?
	Yes No
	Important: The trust 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 trust a tax resident of a country other than Australia or a Specified U.S Person?
	Yes No

-	
	Yes No
I	the trust an Australian Financial Institution or Other Partner Jurisdiction Financial Institution?
	Yes No
1	rust beneficiaries
Γ	loes the trust deed name the beneficiaries?
	Yes No
ŀ	YES, please list their full names.
ŀ	there are more than four beneficiaries/unit holders, please provide details on a separate attachment to this Form.
E	eneficiary 1 full name (or entity name)
1	re they Key Beneficial Owners (refer to page 5)?
L	Yes No
E	eneficiary 2 full name (or entity name)
1	re they Key Beneficial Owners (refer to page 5)?
ſ	Yes No
L	
	eneficiary 3 full name (or entity name)
	re they Key Beneficial Owners (refer to page 5)?
	re they Key Beneficial Owners (refer to page 5)? Yes No leneficiary 4 full name (or entity name)
	Yes No leneficiary 4 full name (or entity name)
	Yes No seneficiary 4 full name (or entity name) re they Key Beneficial Owners (refer to page 5)?
	Yes No leneficiary 4 full name (or entity name) re they Key Beneficial Owners (refer to page 5)? Yes No or any of the above trust beneficiaries/unitholders identified as being a Key Beneficial Owner, is that person(s) a Politically Exposed
	Yes No seneficiary 4 full name (or entity name) re they Key Beneficial Owners (refer to page 5)? Yes No or any of the above trust beneficiaries/unitholders identified as being a Key Beneficial Owner, is that person(s) a Politically Exposed erson (refer to page 5)?
	Yes No seneficiary 4 full name (or entity name) re they Key Beneficial Owners (refer to page 5)? Yes No or any of the above trust beneficiaries/unitholders identified as being a Key Beneficial Owner, is that person(s) a Politically Exposed terson (refer to page 5)? Yes No
	Yes No seneficiary 4 full name (or entity name) re they Key Beneficial Owners (refer to page 5)? Yes No or any of the above trust beneficiaries/unitholders identified as being a Key Beneficial Owner, is that person(s) a Politically Exposed erson (refer to page 5)?
	Yes No seneficiary 4 full name (or entity name) re they Key Beneficial Owners (refer to page 5)? Yes No or any of the above trust beneficiaries/unitholders identified as being a Key Beneficial Owner, is that person(s) a Politically Exposed terson (refer to page 5)? Yes No or any of the above trust beneficiaries/unitholders identified as being a Key Beneficial Owner, is that person(s) a tax resident of a
	Yes No leneficiary 4 full name (or entity name) re they Key Beneficial Owners (refer to page 5)? Yes No or any of the above trust beneficiaries/unitholders identified as being a Key Beneficial Owner, is that person(s) a Politically Exposed erson (refer to page 5)? Yes No or any of the above trust beneficiaries/unitholders identified as being a Key Beneficial Owner, is that person(s) a tax resident of a ountry other than Australia or a Specified U.S Person? Yes No
	Yes No seneficiary 4 full name (or entity name) re they Key Beneficial Owners (refer to page 5)? Yes No or any of the above trust beneficiaries/unitholders identified as being a Key Beneficial Owner, is that person(s) a Politically Exposed terson (refer to page 5)? Yes No or any of the above trust beneficiaries/unitholders identified as being a Key Beneficial Owner, is that person(s) a tax resident of a ountry other than Australia or a Specified U.S Person?
	Yes No Interestication of the above trust beneficiaries/unitholders identified as being a Key Beneficial Owner, is that person(s) a Politically Exposed terson (refer to page 5)? Yes No Or any of the above trust beneficiaries/unitholders identified as being a Key Beneficial Owner, is that person(s) a Politically Exposed terson (refer to page 5)? Yes No Or any of the above trust beneficiaries/unitholders identified as being a Key Beneficial Owner, is that person(s) a tax resident of a country other than Australia or a Specified U.S Person? Yes No YES, each Key Beneficial Owner who is a tax resident of a country other than Australia or a Specified U.S Person will need to complete a eparate FATCA/CRS Self-Certification Form available on our website. the trust identifies its beneficiaries/unit holders by specified classes and/or by names and specified classes, please list the class below and
	Yes No leneficiary 4 full name (or entity name) re they Key Beneficial Owners (refer to page 5)? Yes No or any of the above trust beneficiaries/unitholders identified as being a Key Beneficial Owner, is that person(s) a Politically Exposed lerson (refer to page 5)? Yes No or any of the above trust beneficiaries/unitholders identified as being a Key Beneficial Owner, is that person(s) a tax resident of a country other than Australia or a Specified U.S Person? Yes No YES, each Key Beneficial Owner who is a tax resident of a country other than Australia or a Specified U.S Person will need to complete a eparate FATCA/CRS Self-Certification Form available on our website.
	Yes No reneficiary 4 full name (or entity name) re they Key Beneficial Owners (refer to page 5)? Yes No or any of the above trust beneficiaries/unitholders identified as being a Key Beneficial Owner, is that person(s) a Politically Exposed terson (refer to page 5)? Yes No or any of the above trust beneficiaries/unitholders identified as being a Key Beneficial Owner, is that person(s) a tax resident of a ountry other than Australia or a Specified U.S Person? Yes No Yes, each Key Beneficial Owner who is a tax resident of a country other than Australia or a Specified U.S Person will need to complete a eparate FATCA/CRS Self-Certification Form available on our website. the trust identifies its beneficiaries/unit holders by specified classes and/or by names and specified classes, please list the class below and less the beneficiaries named (if any) within specified classes:
	Yes No reneficiary 4 full name (or entity name) re they Key Beneficial Owners (refer to page 5)? Yes No or any of the above trust beneficiaries/unitholders identified as being a Key Beneficial Owner, is that person(s) a Politically Exposed terson (refer to page 5)? Yes No or any of the above trust beneficiaries/unitholders identified as being a Key Beneficial Owner, is that person(s) a tax resident of a ountry other than Australia or a Specified U.S Person? Yes No Yes, each Key Beneficial Owner who is a tax resident of a country other than Australia or a Specified U.S Person will need to complete a eparate FATCA/CRS Self-Certification Form available on our website. the trust identifies its beneficiaries/unit holders by specified classes and/or by names and specified classes, please list the class below and less the beneficiaries named (if any) within specified classes:
	Yes No reneficiary 4 full name (or entity name) re they Key Beneficial Owners (refer to page 5)? Yes No or any of the above trust beneficiaries/unitholders identified as being a Key Beneficial Owner, is that person(s) a Politically Exposed terson (refer to page 5)? Yes No or any of the above trust beneficiaries/unitholders identified as being a Key Beneficial Owner, is that person(s) a tax resident of a ountry other than Australia or a Specified U.S Person? Yes No YES, each Key Beneficial Owner who is a tax resident of a country other than Australia or a Specified U.S Person will need to complete a eparate FATCA/CRS Self-Certification Form available on our website. the trust identifies its beneficiaries/unit holders by specified classes and/or by names and specified classes, please list the class below and iso the beneficiaries named (if any) within specified classes:

4.3 Trust settlor information

Trust settlor details						
lf t	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. A settlor is the person or entity that subscribes for or settles the initial sum to create the trust.					
As						
Na	Name of settlor Address of settlor					
Ac						
Su	uburb/City/Town	Postcode	State	Country		
Ту	/pe of trustee					
Ar	re you an individual trustee? (including trustee of a deceased estate)				
	Yes – Continue to Section 4.5					
	No - Proceed to Section 4.6					
In	dividual trustee(s)					
If t	there are more than two trustees please complete a separate form t	for the additional truste	ees and attach their d	etails to the Application Form.		
Tru Tit	ustee 1 details tle					
Gi	iven name(s)					
Su	urname					
	Date of birth (dd/mm/yyyy) / / / / / / / / / / / / / / / / / / /					
L						
Ph	none number					
En	Email address					
	Titali addi 000					
Re	nis email address may be used for investor correspondence. esidential address ddress (PO Box / RMB / Locked Bag is not acceptable)					
Re	nis email address may be used for investor correspondence.					
Ad	nis email address may be used for investor correspondence.	Postcode	State	Country		
Ad	nis email address may be used for investor correspondence. esidential address ddress (PO Box / RMB / Locked Bag is not acceptable)	Postcode	State	Country		
Re Ad	nis email address may be used for investor correspondence. esidential address ddress (PO Box / RMB / Locked Bag is not acceptable)	Postcode	State	Country		
Su Po	nis email address may be used for investor correspondence. esidential address ddress (PO Box / RMB / Locked Bag is not acceptable) uburb/City/Town ostal address (if different to residential address)	Postcode	State	Country		
Su Po (C,	nis email address may be used for investor correspondence. esidential address ddress (PO Box / RMB / Locked Bag is not acceptable) uburb/City/Town ostal address (if different to residential address)	Postcode	State	Country		
Su Po (C,	nis email address may be used for investor correspondence. esidential address ddress (PO Box / RMB / Locked Bag is not acceptable) uburb/City/Town pstal address (if different to residential address) //- if applicable)	Postcode	State	Country		

		-	n for more information)			
Is the trustee a Politically Exposed Person?						
Yes No						
Is the trustee a tax resident of Australia?						
Yes No						
Is the trustee a tax resident of a country other than Australia or a Spe	Is the trustee a tax resident of a country other than Australia or a Specified U.S Person?					
Yes No						
If YES, the trustee will need to complete a separate FATCA/CRS Self-	If YES, the trustee will need to complete a separate FATCA/CRS Self-Certification Form available on our website.					
Trustee 2 details						
Title						
Given name(s)						
Curanna						
Surname						
Date of birth (dd/mm/yyyy)						
Mobile number						
THOUSE HATTISE						
Phone number						
Email address						
This email address may be used for investor correspondence.						
Residential address Address (PO Box / RMB / Locked Bag is not acceptable)						
Address (FO Box / TIMB / Essived Bag is not acceptable)						
Suburb/City/Town	Postcode	State	Country			
	. 5515545					
Postal address (if different to residential address)			Country			
Postal address (if different to residential address) (C/- if applicable)			Country			
			County			
			Country			
(C/- if applicable)						
(C/- if applicable) Address						
(C/- if applicable)	Postcode	State	Country			
(C/- if applicable) Address Suburb/City/Town						
Address Suburb/City/Town This postal address will be used for mailed correspondence.	Postcode	State	Country			
(C/- if applicable) Address Suburb/City/Town	Postcode	State	Country			
Address Suburb/City/Town This postal address will be used for mailed correspondence.	Postcode	State	Country			
Address Suburb/City/Town This postal address will be used for mailed correspondence. Politically Exposed Person and residency status for tax purposes	Postcode	State	Country			
Address Suburb/City/Town This postal address will be used for mailed correspondence. Politically Exposed Person and residency status for tax purposes Is the trustee a Politically Exposed Person?	Postcode	State	Country			
Address Suburb/City/Town This postal address will be used for mailed correspondence. Politically Exposed Person and residency status for tax purposes Is the trustee a Politically Exposed Person? Yes No	Postcode	State	Country			
Address Suburb/City/Town This postal address will be used for mailed correspondence. Politically Exposed Person and residency status for tax purposes Is the trustee a Politically Exposed Person? Yes No Is the trustee a tax resident of Australia?	Postcode S (Please refer to the 'T	State	Country			
Address Suburb/City/Town This postal address will be used for mailed correspondence. Politically Exposed Person and residency status for tax purposes Is the trustee a Politically Exposed Person? Yes No Is the trustee a tax resident of Australia? Yes No	Postcode S (Please refer to the 'T	State	Country			

4.6 Company as trustee

Company details						
Full name of company						
Australian Business Number (ABN)						
Company contact person						
Title						
TITLE TO THE THE TO THE						
Given name(s)						
Surname						
Mobile number						
Business number						
Sadinese Hamber						
Email address						
This email address may be used for investor correspondence.						
Company registered office address						
Address (PO Box / RMB / Locked Bag is not acceptable)						
Suburb/City/Town	Postcode	State	Country			
			,			
Postal address (if different to company registered address) (C/- if applicable)						
Addison						
Address						
Suburb/City/Town	Postcode	State	Country			
This postal address will be used for mailed correspondence.						
Residency status for tax purposes						
Under the Foreign Account Tax Compliance Act (FATCA) and Commo provide additional information about their tax residency.	n Reporting Standard	(CRS) laws, we are re-	quired to ask all investors to			
Is the company a tax resident of Australia?						
Yes No						
Important: You will need to complete a separate FATCA/CRS Self-Ce This form is available on our website.	rtification Form if any	of the following apply	to the company.			
Is the company a tax resident of a country other than Australia or a Sp	pecified LLS Person?					
	2001100 0.0 1 615011!					
	Yes No					
	Is the company a U.S. Company, U.S. Trust or U.S. Partnership?					
res No	Yes No					
Is the company an Australian Financial Institution or Other Partner Jur Yes No	isdiction Financial Ins	titution?				

Company type
Is the company a proprietary/private company (i.e. a Pty Ltd company)?
Yes - Please continue below
No - Proceed to Section 5
Directors
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 Expected Person and regidency status for tax purposes (Places refer to the 'Things to know' section for more information)
Politically Exposed Person and residency status for tax purposes (Please refer to the 'Things to know' section for more information) Is the director a Politically Exposed Person?
Yes No
Is the director a tax resident of Australia?
Yes No
Is the director a tax resident of a country other than Australia or a Specified U.S Person? Yes No
If YES, the director will need to complete a separate FATCA/CRS Self-Certification Form available on our website.
Director 2 details
Title
Given name(s)
Surname
Politically Exposed Person and residency status for tax purposes (Please refer to the 'Things to know' section for more information)
Is the director a Politically Exposed Person?
Yes No
Is the director a tax resident of Australia?
Yes No
Is the director a tax resident of a country other than Australia or a Specified U.S Person?
Yes No
If YES, the director will need to complete a separate FATCA/CRS Self-Certification Form available on our website.

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 and residency status for tax purpose	s (Please refer to the '	Things to know' section	on for more information)
the beneficial owner a Politically Exposed Person?			
Yes No			
the beneficial owner a tax resident of Australia?			
Yes No			
the beneficial owner a tax resident of a country other than Australia	a or a Specified U.S P	erson?	
Yes No			
YES, the beneficial owner will need to complete a separate FATCA	/CRS Self-Certification	n Form available on ou	ur website.
Beneficial owner 2 details			
itle			
iven name(s)			
urname			
ddress			
uburb /Cit /Tours	Postcode	Stata	Country
uburb/City/Town	Posicode	State	Country
olitically Exposed Person and residency status for tax purpose	s (Please refer to the '	Things to know' section	on for more information)
the beneficial owner a Politically Exposed Person?			
Yes No			
the beneficial owner a tax resident of Australia?			
Yes No			
the beneficial owner a tax resident of a country other than Australia	a or a Specified U.S P	Person?	
Yes No			
YES, the beneficial owner will need to complete a separate FATCA	/CRS Self-Certification	n Form available on ou	ır website.

5. Life insured

Guide to completing this section

This section is only applicable to LifeBuilder applicants.

El	Electing life insured					
W	Who would you like to nominate to be the life / joint lives insured? (select one only)					
	Each LifeBuilder applicant is to be registered as the life / joint li	ves insured (default for	individual / joint appl	icants).		
	Each LifeBuilder applicant is to be registered as the life / joint li					
	Do not register the LifeBuilder applicant(s) as the life / joint lives insured. I would like to provide life insured details of other person(s) only. (At least one life insured must be nominated below).					
Lif	(At least one life insured must be nominated below). ife insured 1					
	ne insured i Iandatory for company or trust applicants where a natural person is required as the life insured.					
	there are more than two lives insured please complete a separate for			sh thair datails to the		
	oplication Form	omi for the additional i	ives insured and attac	of their details to the		
Tit	tle					
L						
Gi	ven name(s)					
Sı	urname					
	inano					
	Residential address Address (PO Box / RMB / Locked Bag is not acceptable)					
Ac		Postcode	State	Country		
Ac	ddress (PO Box / RMB / Locked Bag is not acceptable)	Postcode	State	Country		
Su	ddress (PO Box / RMB / Locked Bag is not acceptable)	Postcode	State	Country		
Su	ddress (PO Box / RMB / Locked Bag is not acceptable) uburb/City/Town fe insured 2 (if required)	Postcode	State	Country		
Su	ddress (PO Box / RMB / Locked Bag is not acceptable) uburb/City/Town fe insured 2 (if required)	Postcode	State	Country		
Su Lift	ddress (PO Box / RMB / Locked Bag is not acceptable) uburb/City/Town fe insured 2 (if required)	Postcode	State	Country		
Su Lift	ddress (PO Box / RMB / Locked Bag is not acceptable) uburb/City/Town fe insured 2 (if required)	Postcode	State	Country		
Su Lift Gir	ddress (PO Box / RMB / Locked Bag is not acceptable) uburb/City/Town fe insured 2 (if required) tle ven name(s)	Postcode	State	Country		
Su Lift Gir	ddress (PO Box / RMB / Locked Bag is not acceptable) uburb/City/Town fe insured 2 (if required)	Postcode	State	Country		
Su Lift Gir	ddress (PO Box / RMB / Locked Bag is not acceptable) uburb/City/Town fe insured 2 (if required) tle ven name(s)	Postcode	State	Country		
Su Lift Gir	ddress (PO Box / RMB / Locked Bag is not acceptable) uburb/City/Town fe insured 2 (if required) tle ven name(s)	Postcode	State	Country		
Su Lift Gir	ddress (PO Box / RMB / Locked Bag is not acceptable) uburb/City/Town fe insured 2 (if required) tle ven name(s)	Postcode	State	Country		
Su Lift Titt Su Da	ddress (PO Box / RMB / Locked Bag is not acceptable) uburb/City/Town fe insured 2 (if required) tle ven name(s)	Postcode	State	Country		
Su Lift Tit Su Da	ddress (PO Box / RMB / Locked Bag is not acceptable) uburb/City/Town fe insured 2 (if required) tle ven name(s) urname ate of birth (dd/mm/yyyy) / / / / /	Postcode	State	Country		
Su Lift Su Da	ddress (PO Box / RMB / Locked Bag is not acceptable) uburb/City/Town fe insured 2 (if required) tle ven name(s) urname ate of birth (dd/mm/yyyy) / / / / esidential address	Postcode	State	Country		
Su Lift Tit Su Da	ddress (PO Box / RMB / Locked Bag is not acceptable) uburb/City/Town fe insured 2 (if required) tle ven name(s) urname ate of birth (dd/mm/yyyy) / / / / esidential address	Postcode	State	Country		

5.2 Electing the preferred life insured event

Nominate life insured event (please select one only).		
I/We nominate the following nominated life insured event to effect a benefit payment:		
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:		
Please specify name of nominated life insured		

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				
Title				
Given name(s)				
Surname				
Date of birth (dd/mm/yyyyy)				
Relationship to applicant				
Address (PO Box / RMB / Locked Bag is not acceptable)				
Address (i o box / Hivib / Econed bag is not acceptable)				
Suburb/City/Town	Postcode	State	Country	
Suburb/City/ IOWII	i ostcode	State	Country	
Email address (optional)				
Email address (optional)				
Email address (optional) Investment amount				
Email address (optional) Investment amount \$				
Email address (optional) Investment amount \$ Must be a minimum of \$1,000.00				
Email address (optional) Investment amount \$ Must be a minimum of \$1,000.00 Vesting date				
Email address (optional) 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 a	t age 25.			
Email address (optional) Investment amount \$ Must be a minimum of \$1,000.00 Vesting date	t age 25.			
Email address (optional) 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 On attaining age	t age 25.			
Email address (optional) 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 On attaining age years old (10-25 years old)	t age 25.			
Email address (optional) 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 a On attaining age years old (10-25 years old) OR	t age 25.			
Email address (optional) 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 On attaining age years old (10-25 years old)	t age 25.			
Email address (optional) 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 a On attaining age years old (10-25 years old) OR				

Account Guardian election (individual or joint individual applicants only)

You can elect to nominate an Account Guardian to hold and manage the ChildBuilder investment in the event of your death prior to the nominated child attaining the nominated vesting age or the vesting date being reached. This election can be made by completing the Account Guardian from available on our website.

If no election is made, your investment will be held by your estate representative on trust until the child reaches the nominated vesting age or the vesting date is reached.

Further information about the Account Guardian facility can be found in the PDS.

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
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 acceptable)
Address (I & Box / TIME / Looked Bag is not acceptable)
Suburb/City/Town Postcode State Country
Suburb/City/Town Postcode State Country
Suburb/City/Town Postcode State Country Email address (optional)
Email address (optional)
Email address (optional) Investment amount
Email address (optional) Investment amount \$
Email address (optional) Investment amount \$ Must be a minimum of \$1,000.00
Email address (optional) Investment amount \$ Must be a minimum of \$1,000.00 Vesting date
Email address (optional) 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.
Email address (optional) Investment amount \$ Must be a minimum of \$1,000.00 Vesting date
Email address (optional) 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
Email address (optional) 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)
Email address (optional) 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
Email address (optional) 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)
Email address (optional) 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
Email address (optional) 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
Email address (optional) 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 Set a vesting date (dd/mm/yyyy)

Guardian from available on our website.

If no election is made, your investment will be held by your estate representative on trust until the child reaches the nominated vesting age or the vesting date is reached.

Further information about the Account Guardian facility can be found in the PDS.

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

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

7. FuneralBond

Guide to completing this section

■ 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	7.2	Resid	dencv
---------------	-----	-------	-------

A	Are you a resident of Queensland?
	No (default)
	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
3 1	ransferring 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.
	Oo you want to transfer your FuneralBond to a funeral director as part of a pre-paid funeral contract or arrangement?
	Yes - Please continue below
	No - Proceed to Section 9
F	Funeral director details
٧	mportant: The funeral director can only be a natural person or a company. The funeral director will also be required to complete identity redification documentation as part of the transfer process.
	Name of fulferal director business
	Australian Business Number (ABN) or Australian Company Number (ACN) (if applicable) Pre-paid funeral contract/arrangement number this application relates to (if applicable)

Funeral director details (continued)	
Title	
Given name(s)	
Surname	
Mobile number	
WODIE HUITIDEI	
D. Constitution of the constitution	
Business telephone number	
Email address	
This email address may be used for correspondence.	
Postal address	
Suburb/City/Town	Postcode State Country
Signature of Investor 1	
Name (please print)	
Signature	Date (dd/mm/yyyy)
X	
Signature of Investor 2 (if applicable)	
Name (please print)	
Signature	Date (dd/mm/yyyy)
X	
Funeral director signature	
Important: The funeral director can only be a natural person or a converification documentation as part of the transfer process.	mpany. The funeral director will also be required to complete identity
Name (please print)	
Signature	Date (dd/mm/yyyy)
X	

8. EstatePlanner

Guide to completing this section

- This section is applicable to LifeBuilder applicants only.
- This section is not available for Company investors.
- 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	Esta	atePlanner preference
	Sele	ct your EstatePlanner preference (select one only)
		Future Event transfer Your investment will be transferred to the specified transferee 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.
		None Your investment proceeds or account will pass under your will and legal estate. Please continue to Section 9.
8.2	Futu	ure Event transfer
	Sele	ct the date or event that the future transfer of your LifeBuilder investment is to occur:
		Date of future transfer (dd/mm/yyyyy)
		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	les (default) 140
		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.
	Acc	ount Guardian election (individual or joint individual applicants only)
	of yo	can elect to nominate an Account Guardian to hold the investment on behalf of the nominated transferee where a transfer occurs as a result our death prior to the nominated transferee attaining 16 years of age on the effective transfer date. This election can be made by completing Account Guardian from available on our website.
	If no	election is made, your investment will be held by your estate representative until your nominated transferee attains 16 years of age.
	Furth	ner information about the Account Guardian facility can be found in the PDS.
	Plea	se complete the transferee details below. The transferee can only be a natural person.
	I/We	wish to transfer ownership of the my LifeBuilder investment to:
	Indiv	vidual transferee details
	Title	
	Give	n name(s)
	Surn	ame

Date of birth (dd/mm/yyyy)

Mobile number				
Phone number				
Email address				
Linaii address				
Address (PO Box /	RMB / Locked Bag is not acceptable)			
Suburb/City/Town		Postcode	State	Country
Access to funds at	fter transfer			
Nominate how and	when funds can be accessed by the transferee	under the Future Event	transfer feature.	
	ns on accessing funds			
	e will be able to access the investment's funds in	nmediately on transfer.		
OR				
	ess to funds (including the ability to set up a F e will be able to access the investment's funds b		•	
	to funds will be available after the following			
This dat	e will be used to determine when unrestricted a			a Regular Income Payment
will com	mence (where selected).			
	/ / /			
Establis	sh a future Regular Income Payment arrange	ment once the transfe	ree has access to fur	nds (optional)
•	jular Income Payment option is only available fo imum Regular Income Payment amount is \$100		unts of \$10,000 and al	oove.
	Income Payment frequency for the transferee to		ect one only)	
		iually	or one orny)	
	Income Payment amount	idany		
	Select the % of the investment balance on trans	for that will be the fixed	ner annum Regular In	come Payment amount to be
	paid equally based on the selected payment free		por armam nogarar m	oome raymont amount to be
	%			
OR				
	Select the fixed dollar amount per Regular Incom	no Dovement		
		ie Payment		
	\$			
Regular	Income Payment period (optional)			
Set a pa	syment period after which the Regular Income Pa	ayment will end.		
	years			
Co-Signatory elec	_ ·			
oo-signatory elec	uon			

You can elect to nominate a Co-Signatory to authorise withdrawal requests made by the transferee before the fund access date or during a Regular Income Payment period. This election can be made by completing the Co-Signatory form available on our website.

If no election is made, your transferee will not be able to access funds until after the fund access date or other than those payable through the Regular Income Payment facility.

Further information about the Co-Signatory facility can be found in the PDS.

Important: Transferee authorisation

The transferee will be registered as an additional life insured to this LifeBuilder investment.

The new owner (transferee) 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.

Danafialani dalatalla

8.3 Nominating a beneficiary(ies) feature

Important: 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 nominated life insured in accordance with the instructions in Section 5 and in accordance with the PDS and Product Rules.

beneficiary i details			
Title			
Given name(s)			
Surname			
Currane			
Date of birth (dd/mm/yyyy)			Benefit payable
			%
			70
Address			
0.1.1/07.75	Б	01.1	0 1
Suburb/City/Town	Postcode	State	Country
Mobile number			
Email address			
Beneficiary 2 details			
Title			
Given name(s)			
Surname			
Guiriaine			
Date of birth (dd/mm/yyyy)			Benefit payable
			%
			,,,
Address			
Culturals (Cit. /Tours	Destanda	Ctata	Country
Suburb/City/Town	Postcode	State	Country
Mobile number			
Email address			

Beneficiary 3 details				
Title				
Given name(s)				
Surname				
Date of birth (dd/mm/yyyy)			Benefit payable	
				%
Address				
Suburb/City/Town	Postcode	State	Country	
Cubulty City, Town	T OSICOGE	Otate	Codinity	
Mobile number				
Email address				
Beneficiary 4 details (Corporate – such as companies, trusts, partner of you are nominating a legal entity, such as a company or incorporate entity – we recommend that you obtain legal advice with these kinds	ed association, please	e take care to corre	ctly name and identify the leg	al
If you are nominating a legal entity, such as a company or incorporate	ed association, please	e take care to corre	ctly name and identify the leg	al
If you are nominating a legal entity, such as a company or incorporate entity – we recommend that you obtain legal advice with these kinds	ed association, please	e take care to corre	ctly name and identify the leg	al
If you are nominating a legal entity, such as a company or incorporate entity – we recommend that you obtain legal advice with these kinds	ed association, please	e take care to corre	ctly name and identify the leg	al
If you are nominating a legal entity, such as a company or incorporate entity – we recommend that you obtain legal advice with these kinds Entity name	ed association, please	e take care to corre		al %
If you are nominating a legal entity, such as a company or incorporate entity – we recommend that you obtain legal advice with these kinds Entity name	ed association, please	e take care to corre		
If you are nominating a legal entity, such as a company or incorporate entity – we recommend that you obtain legal advice with these kinds Entity name ABN or ACN	ed association, please	e take care to corre		
If you are nominating a legal entity, such as a company or incorporate entity – we recommend that you obtain legal advice with these kinds Entity name ABN or ACN Address	ed association, please of nominations.		Benefit payable	
If you are nominating a legal entity, such as a company or incorporate entity – we recommend that you obtain legal advice with these kinds Entity name ABN or ACN	ed association, please	e take care to corre		
If you are nominating a legal entity, such as a company or incorporate entity – we recommend that you obtain legal advice with these kinds Entity name ABN or ACN Address Suburb/City/Town	ed association, please of nominations.		Benefit payable	
If you are nominating a legal entity, such as a company or incorporate entity – we recommend that you obtain legal advice with these kinds Entity name ABN or ACN Address	ed association, please of nominations.		Benefit payable	
If you are nominating a legal entity, such as a company or incorporate entity – we recommend that you obtain legal advice with these kinds Entity name ABN or ACN Address Suburb/City/Town	ed association, please of nominations.		Benefit payable	
If you are nominating a legal entity, such as a company or incorporate entity – we recommend that you obtain legal advice with these kinds Entity name ABN or ACN Address Suburb/City/Town	ed association, please of nominations.		Benefit payable	
If you are nominating a legal entity, such as a company or incorporate entity – we recommend that you obtain legal advice with these kinds Entity name ABN or ACN Address Suburb/City/Town Contact person	ed association, please of nominations.		Benefit payable	
If you are nominating a legal entity, such as a company or incorporate entity – we recommend that you obtain legal advice with these kinds Entity name ABN or ACN Address Suburb/City/Town Contact person	ed association, please of nominations.		Benefit payable	

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

Beneficiary change instructions

lf a n	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).			

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

Guide to completing this section

- 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.

9.1	Initi	al investment
		LifeBuilder
		Investment amount
		\$
		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 number of equal Dollar Cost Averaging payments to be made
		(maximum of 12 payments)
		ChildBuilder
		Investment amount
		\$
		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 number of equal Dollar Cost Averaging payments to be made
		(maximum of 12 payments)
		FuneralBond
		Investment amount
		\$
		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 number of equal Dollar Cost Averaging payments to be made
		(maximum of 12 payments)

9.2	Payment Option					
	Please refer to page 2 on how to make payment.					
	Please select your payment option (select one only)					
	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 start a Regular Savings Plan?					
	Yes No (default)					
	Frequency and amount of Regular Savings Plan					
	The total annual minimum regular contribution is \$600 per investment bond. For example, minimum \$50 per month or \$150 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					
	Select Regular Savings Plan frequency (select one only)					
	Monthly Quarterly Half yearly Annually					
	Direct debit amount					
	\$					
	ChildBuilder					
	Select Regular Savings Plan frequency (select one only)					
	Monthly Quarterly Half yearly Annually					
	Direct debit amount					
	ChildBuilder 1					
	\$					
	ChildBuilder 2					
	\$					
	FuneralBond					
	Select Regular Savings Plan frequency (select one only)					
	Monthly Quarterly Half yearly Annually					
	Direct debit amount					
	\$					
9.4	Regular Savings Plan automatic escalation instructions					
	LifeBuilder and ChildBuilder applications only					
	Do you want to automatically increase the amount of your Regular Savings Plan contributions annually? Yes No (default)					
	Please select the annual Regular Savings Plan increase amount (select one only)					
	5% 10% 20% 25%					
	other (between 1% and 25%)					
	%					

Important: 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 investment bond.

9.5 Regular Withdrawal facility

LifeBuilder and ChildBuilder applications 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.

D	о у	ou want to establish a Regular Withdrawal facility'?
		Yes – Please complete the Regular Withdrawal facility form available from our website
		No (default)

9.6 Auto-rebalancing facility

Do y	ou want your portfolio automatically rebalanced annually?
	Yes – Your portfolio will be rebalanced annually in accordance with your Default Investment Allocation at that time
	No (default)

Important: If you have an active Dollar Cost Averaging facility in place, the annual auto-rebalancing WILL NOT OCCUR. However, your annual auto-rebalance preference will remain active for the next scheduled auto-rebalance date.

9.7 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.

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 \$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).

Investment option	Fund code	LifeBuilder	ChildBuilder	FuneralBond
AB Managed Volatility Equities Fund	UF64			
Affirmative Global Impact Bond Fund	UF49			
Ardea Real Outcome Fund	UF37			
Barrow Hanley Global Share Fund	UF17			
Bennelong Concentrated Australian Equities Fund	UF38			
Dimensional Global Bond Sustainability Trust	UF69			
Dimensional Global Small Company Trust	UF09			
Dimensional Sustainability World Allocation 70/30 Trust	UF50			
Dimensional World 30/70 Portfolio	UF62			
Dimensional World 50/50 Portfolio	UF40			
Dimensional World 70/30 Portfolio	UF24			
Dimensional World Equity Portfolio	UF28			
DNR Capital Australian Emerging Companies Portfolio	UF20			
EQT Wholesale Mortgage Income Fund	UF25			
Evergreen Responsible Growth Model	UF27			
Firetrail Absolute Return Fund	UF06A			

Investment option	Fund code	LifeBuilder	ChildBuilder	FuneralBond
Generation Life Tax Effective Australian Share Fund	UF35			
Generation Life Term Deposit Fund	UF14A			
GMO Systematic Global Macro Trust	UF47			
Hyperion Global Growth Companies Fund	UF53			
Investors Mutual Australian Share Fund	UF06			
Investors Mutual Future Leaders Fund	UF07			-
iShares Hedged International Equity Index Fund	UF12			
iShares S&P/ASX20 ETF Portfolio	UF14			
iShares Wholesale Australian Bond Index Fund	UF12A			
iShares Wholesale Australian Equity Index Fund	UF11			
iShares Wholesale Australian Listed Property Index Fund	UF12B			
iShares Wholesale International Equity Index Fund	UF11A	-		
Kapstream Absolute Return Income Fund	UF10A	-	_	
Macquarie Global Listed Real Estate Fund	UF05A	-		·
Macquarie Treasury Fund	UF01			
Magellan Global Fund	UF08			
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	-		· <u> </u>
MLC Horizon 3 Conservative Growth Portfolio	UF33	-		
MLC Horizon 4 Balanced Portfolio	UF22			
MLC Horizon 6 Share Portfolio	UF34			

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Investment option	Fund code	LifeBuilder	ChildBuilder	FuneralBond
Morningstar Balanced Model	UF55			
Morningstar Growth Model	UF56			
Morningstar High Growth Model	UF57			
Mutual ADI/Bank Securities	UF14B			
Pendal Enhanced Credit Fund	UF03			
Pendal Sustainable Australian Share Fund	UF39			
Pendal Sustainable Balanced Fund	UF41			
Perpetual Australian Share Fund	UF15			
Perpetual Balanced Growth Fund	UF19			
Perpetual Conservative Growth Fund	UF26			
Perpetual ESG Australian Share Fund	UF21			
Perpetual Geared Australian Share Fund	UF16			
PIMCO Wholesale Australian Bond Fund	UF02			
PIMCO Wholesale Global Bond Fund	UF04			
Russell Investments Balanced Fund	UF10			
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

Guide to completing this section

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

Esta	ablish a trust under the Bonds Custodian Trust facility
Do y	ou 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)
Tern	n of your new Bonds Custodian Trust
	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 blished for you unless you nominate an earlier date.
Othe	er termination date (dd/mm/yyyy) (if required)

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

Guide to completing this section

■ 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.	
Bank and branch name	
Account name	
BSB number	
Account number	
•	o arrange for funds to be debited from my/our account as described above ms and conditions of the Direct Debit Service Agreement contained in the
	up to three (3) Melbourne business days for your funds to clear. Please note anot direct debit from any other facility (e.g. credit card, mortgage account).
Signature of account holder(s)	
At least one account holder must be an investor under this Application	on Form.
Account holder 1	
Name (please print)	
Signature	Date (dd/mm/yyyy)
X	
Account holder 2	
Name (please print)	
Signature	Date (dd/mm/yyyy)
X	

13. Financial adviser details (if applicable)

13.1 Financial adviser details

Title			
Given name(s)			
Surname			
ASIC Authorised Representative/Adviser number			
Generation Life Adviser code			
Generation Life Adviser Code			
Australian Financial Services Licensee information			
AFS Licensee name			
AFS Licensee number			
A C LICE ISCC HAMBON			
Name of financial advisory firm (if applicable)			
Postal address Address			
Address .			
Suburb/City/Town	Postcode	State	Country
Mobile number			
Business telephone number			
Correspondence email address			
This email address will be used for general and client correspondence	e.		
Adviser Online access			
This email address will be used for your Adviser Online access.			
Adviser Online email address			

If you are already registered for Adviser Online (Adviser Portal), please ensure you provide the same email address used currently to access this service.

13.2	Targ	get market confirmation
	Is the	e applicant within the target market as identified in the most current target market determination for the selected product?
	Our t	target market determinations can be found on our website at 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.
13.3	Adv	iser Representative facility
	Woul	ld you like to appoint your financial adviser as an Adviser Representative?
	Pleas	se 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	Adv	iser remuneration
		may agree with your financial adviser for fees for agreed advice services provided by your financial adviser to be deducted from your
		stment. You can cancel or vary your fee arrangements at any time by notice in writing to us or your financial adviser.
	If you	u are applying for more than one investment bond account, any fee(s) advised will be applied to each investment bond account.
	Initia	al advice fee
	Pleas advis	se deduct the following initial advice fee (inclusive of GST) from the initial investment contribution amount to be paid to my/our financial ser.
	Initia	I advice fee (select one only)
		%
	of to	tal contribution amount
	OR	
	\$	
	Advis	ser service fee (please select only one of the three available options)
		ser service fee will be deducted from your account and paid to your financial adviser monthly in arrears.
		2: An account can have only one active adviser service fee arrangement at any time. Please ensure you take into account any existing
		pired adviser service fee arrangement when submitting a new arrangement.
		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 few will last for a period of up to 12 months as agreed between you and your adviser.
		Start and End Date for the Fixed Term Arrangement
		Start Date (dd/mm/yyyy)
		End Date (dd/mm/yyyy)

The actual commencement of the calculation and deduction of fees will be the later of the nominated Start Date or the date that this request is received and processed by Generation Life. Your financial adviser will require you to agree to a fee arrangement after this period if you want to continue receiving the agreed advice services from your financial adviser

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

Option 1 - Fixed Term Arrangement (continued)

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.

balance.	
Please select one only.	
%	p.a.
(calculated based on your dail	ly account balance)
OR	
\$	annual amount
Based on your investme	ent balance of:
\$	
Your adviser has estimated	
\$	per month
Option 2 - Consent to Ongo	ing Fee Arrangements
	ncial adviser to consent to the payment of a fee for agreed ongoing advice services provided by your financis required by law to obtain your written consent before the adviser service fee can be deducted from your
	e deducted from your account and paid to your financial adviser monthly in arrears. You can withdraw, canding Fee Arrangement at any time by notice in writing to us or your financial adviser.
Agreed fee Consent Anniver	rsary Date for Ongoing Fee Arrangement (required)
Consent Anniversary Date (dd	J/mm/vvvv)
/ / /	
Your consent to the deduction adviser will require your conse	te is the anniversary of the day you enter into the fee consent arrangement and is the same day each year. In of your Ongoing Fee Arrangement will expire 150 days after your Consent Anniversary Date. Your financiatent to continue this fee arrangement within 120 days of your Consent Anniversary Date if you want to continuervices from your financial adviser.
Agreed fee start date (option	nal)
Choose this option if you wan	t to nominate a Start date for fee deductions.
The commencement of the careceived and processed by Ge	alculation and deduction of fees will be the later of the nominated Start date or the date that this request is eneration Life.
Start Date (dd/mm/yyyy)	
Note: If a Start date is not nor received and processed by Go	minated, then the commencement of the calculation and deduction of fees will be the date that this reques eneration Life.
The nominated Start date can	anot be later than or more than one year before the Consent Anniversary Date provided above.
This form must be signed with	nin 90 days of the nominated Start Date.
Ongoing adviser service fee	
I/We consent to the payment balance.	of the following ongoing adviser service fee (inclusive of GST) to be deducted from my/our investment
Please select one only.	
%	p.a.
(calculated based on your dail	ly account balance)
OR	•
\$	annual amount

Generation Life Limited ABN 68 092 843 902 AFS Licence 225408

Option 2 - Consent to Ongoing Fee Arrangements (continued)

Орі	ion 2 - Consent to Ongo	ing Fee Arrangements (continued)
	Based on your investme	ent balance of:
	\$	
	Your adviser has estima	ted a fee of:
	\$	per month
Ong	going Regular Savings P	lan contribution fee
		of the following ongoing Regular Savings Plan contribution adviser service fee (inclusive of GST) to be ar Savings Plan contribution payable following each Regular Savings Plan contribution.
	%	of the contribution amount
	Based on your schedule	ed regular contribution, your adviser has estimated a fee per Regular Savings Plan contribution of:
	\$	
Opt	ion 3 - Ongoing fee arra	ngement for a wholesale client (for financial adviser completion only)
Only	y select this option if the a	applicant is a wholesale client.
		ent for Consent to Ongoing Fee Arrangement outlined in Option 2 - Consent to Ongoing Fee Arrangements onts where advice is provided to a wholesale client.
•		ou, as the financial adviser, acknowledge that your client is a wholesale client, and you will provide Generation client status declaration form', and you will notify Generation Life if your client ceases to be a wholesale client.
clier		perment for a wholesale client will be processed only after the completed 'Advice fees form' and 'Wholesale are received by Generation Life. A copy of the 'Wholesale client status declaration form' can be obtained via ng Generation Life.
Star	t Date (dd/mm/yyyy) (opti	onal)
	/ / //	
	commencement of the ca	alculation and deduction of fees will be the later of the nominated Start date or the date that this request is eneration Life.
	e: If a Start date is not not eived and processed by G	minated, then the commencement of the calculation and deduction of fees will be the date that this request is eneration Life.
Ong	going adviser service fee	
	e consent to the payment ance.	of the following ongoing adviser service fee (inclusive of GST) to be deducted from my/our investment
Plea	ase select one only.	
	%	p.a.
(cal	culated based on your dai	ily account balance)
OR		
\$		annual amount
Ong	going Regular Savings P	lan contribution fee
		of the following ongoing Regular Savings Plan contribution adviser service fee (inclusive of GST) to be ar Savings Plan contribution payable following each Regular Savings Plan contribution.
	%	of the contribution amount

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.
- If 'Option 3 Ongoing fee arrangement for a wholesale client' is selected, I acknowledge that my client is a wholesale client, and I will provide Generation Life a completed 'Wholesale client status declaration form', and I will notify Generation Life if my client ceases to be a wholesale client.

Customer identification procedure

You have completed an appropriate Customer Identification Procedu investor) set out above in the Application Form AND EITHER: You have attached the relevant CIP documents	re (CIP) on this investor(s) which meets the requirements (per type of	
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	Date (dd/mm/yyyy)	

15. Applicant declaration and signature(s)

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
- 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 box (select one only)	
Investor Director Trustee Power of attorney	Trustee of deceased estate
Signature of Applicant 2	
Name (please print)	
Signature	Date (dd/mm/yyyy)
X	
Please select appropriate box (select one only)	
Investor Director Trustee Power of attorney	Trustee of deceased estate Parent/Guardian

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



Enquiries

Investor services

Adviser services 1800 333 657

1800 806 362

Outthinking today.

Contact details

Postal address

PO Box 263 Collins Street West Melbourne VIC 8007

Email

enquiry@genlife.com.au

Investment Bonds

LifeBuilder | ChildBuilder | FuneralBond

genlife.com.au

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