

# JBWere Client Agreement

JBWere

## Application Form

Issued by: JBWere Limited (JBWere), ABN 68 137 978 360, AFSL 341162 and WealthHub Securities Limited (WealthHub Securities), ABN 83 089 718 249, AFSL No. 230704

Advisory Services provided by JBWere Limited, and if applicable, Broking Services provided by WealthHub Securities Limited, ABN 83 089 718 249, AFSL No. 230704

**29 March 2018**

## How to complete the Application Form

### General instructions for completing your Application Form

- Please print using a black or blue pen.
- A separate Application Form must be completed for each additional Account you wish to open.
- Each Applicant must be over 18 years of age.
- If an item is not applicable, please leave the boxes unmarked.
- If you make an error, please have all parties initial the change. Please do not use correction fluid.
- We can only accept this form if it is completed correctly so please use the checklist in section 13 to ensure you have completed the Application Form properly and attached any additional documents in section 14.
- Please contact your JBWere Advisor if you require any assistance completing this form.
- This Application Form applies to the JBWere Client Agreement, which includes the Broker Agreement.
- Terms used in this Application Form have the same meaning as those defined in the JBWere Client Agreement.

## Instructions for completing name and account descriptions in sections 2 & 3

Type of Investor	Correct example of name in section 2(a) and 2(b)	Correct example of account description in section 3
<b>Individual and joint</b> Use given names, not initials of each applicant.	Peter Alfred Brown Sue Ellen Brown	
<b>Individual(s) acting as trustee(s) of trust and superannuation funds</b> Use personal name(s) of trustee(s) (unless a company). Do not use the name of the trust or superannuation fund.	Sue Brown	<Sue Brown Family A/C>*
<b>Partnership</b> Use partners' personal names. Do not use the name of the partnership.	Peter Brown Brian Brown	<Peter Brown & Son A/C>
<b>Estate</b> Use the executor(s) personal name(s). Do not use the estate name.	Josie Brown	<Estate of Peter Brown A/C>
<b>Company</b> Use company title, not abbreviations.	P Brown Pty Ltd	
<b>Company acting as trustee of a trust or superannuation fund</b> Do not use the name of the trust or superannuation fund.	P Brown Pty Ltd	<Brown Super Fund A/C>*
<b>Incorporated association</b> Use full name and complete as for a company.	Metro Soccer Club Inc.	

Please return your completed form to: **JBWere Investor Services, Reply Paid 4595, Melbourne VIC 8060**

### Client Identification Form

If you are opening a new account and have not had dealings with JBWere under the name(s) in which this Application Form has been completed, you might need to complete a Client Identification Form. Please contact your JBWere Advisor for clarification.

Please refer to instructions on the first page for completing name and account descriptions. The name and account description must match that shown on the holding statement for any shares the applicant owns.

### Quotation of a Tax File Number, Australian Business Number or Exemption

JBWere is authorised under the Income Tax Assessment Act 1936 to ask for your Tax File Number (TFN). You are not required to provide your TFN, ABN or exemption to JBWere or anyone else and it is not an offence if you decide not to. However, if you don't provide them, any withholding tax required by law to be deducted may be deducted at the highest marginal rate. You are entitled to quote an ABN instead of a TFN where your investment(s) is made in the course or furtherance of an enterprise you carry on. You should seek professional advice about your entitlement to quote an ABN, and only provide it below if you are entitled to quote it. If you provide your TFN or exemption below, you authorise JBWere to use it in acting on your behalf, including disclosure of it to third parties, where doing so is in accordance with taxation law. This also includes disclosing it to other NAB Group entities such as WealthHub Securities, who are also involved in assisting to administer your affairs, and quoting the number to issuers, where this is permitted or required by relevant TFN legislation. See the JBWere Client Agreement for more information.

## Your Details

### 1. Entity Type

Please select the appropriate entity type for which the account is being opened, by ticking one of the boxes below.

- Individual or joint individuals
- Individual or joint individuals acting as trustee of a trust or superannuation fund, or as executor of an estate
- Company
- Company acting as trustee of a trust or superannuation fund
- Association (Unincorporated or Incorporated)
- Partnership
- Other (please specify)

### 2. Personal, company or organisation details

Please complete the relevant fields below. The details provided will be used for CHESS registration purposes where applicable.

#### 2(a) Individual Applicants

##### 1st Individual applicant or company director/secretary

###### Capacity

- Individual     Director     Sole director and sole secretary     Individual trustee

###### Title

- Mr     Mrs     Miss     Ms     Other

First name(s)

Surname

Residential address (not a PO Box)

Suburb

State

Postcode

Country

Postal Address  Same as Residential address

Suburb

State

Postcode

Country

Email address

Phone number

TFN\* or exemption status\*

\*Please refer to 'Quotation of a Tax File Number' on page 2 for details about the collection and use of TFNs (or ABNs where relevant).

Are you an Australian resident for tax purposes?

Yes  No – If 'No', please supply country of residence

**2nd Individual applicant or company director**

**Capacity**

Individual (personal)  Director  Individual trustee  Secretary

**Title**

Mr  Mrs  Miss  Ms  Other

First name(s)

Surname

Residential address (not a PO Box)

Suburb

State

Postcode

Country

Postal Address  Same as Residential address

Suburb

State

Postcode

Country

Email address

Phone number

TFN\* or exemption status\*

\* Please refer to 'Quotation of a Tax File Number' on page 2 for details about the collection and use of TFNs (or ABNs where relevant).

Are you an Australian resident for tax purposes?

Yes  No – If 'No', please supply country of residence

**3rd Individual applicant or company director**

**Capacity**

Individual (personal)  Director  Individual trustee  Secretary

**Title**

Mr  Mrs  Miss  Ms  Other

First name(s)

Surname

Residential address (not a PO Box)

Suburb

State

Postcode

Country

Postal Address  Same as Residential address

Suburb	State	Postcode	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Email address

Phone number	TFN* or exemption status*
<input type="text"/>	<input type="text"/>

\* Please refer to 'Quotation of a Tax File Number' on page 2 for details about the collection and use of TFNs (or ABNs where relevant).

Are you an Australian resident for tax purposes?

Yes  No – If 'No', please supply country of residence

### 2(b) Company/Organisation

*Company/Incorporated associations*

Company name in full

Registered Office Address or Principal Place of Business (not a PO Box)

Suburb	State	Postcode	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

ACN	ABN*	TFN or exemption status*
<input type="text"/>	<input type="text"/>	<input type="text"/>

\*Please refer to 'Quotation of a Tax File Number' on page 2 for details about the collection and use of TFNs (or ABNs where relevant).

### 3. Account description (including name of Trust, Superannuation Fund, Estate or Partnership)

Where applicable, the name of your trust, super fund or estate will be used as the description on your account. This should match existing holding registration details. Please provide a current certified copy of the Trust Deed and any supplemental Deed that shows the name of the Trust or Fund and the Trustee's details.

Trust  Superannuation Fund  Estate  Partnership

Account description <  A/C >

TFN* or exemption status*	ABN*
<input type="text"/>	<input type="text"/>

\* Please refer to 'Quotation of a Tax File Number' on page 2 for details about the collection and use of TFNs (or ABNs where relevant).

#### 4. Registered Address and Original Correspondence

This address will be the primary address and will be used for all original correspondence. The address may be a PO Box.

Postal address

Suburb

State

Postcode

Country

Email address#

# If you include an email address, we will use it to send you electronic communications like contract notes, and to notify you when your reports are available to view on the JBWere secure website. See the 'Online communication' section of the Applicant Acknowledgement (at the end of this form) for more detail about our online communication policy.

#### 5. Address for receipt of Regulated Documents

Please note that you must provide us with an address that belongs to, or is directly accessible by, an Account holder named in Section 2 of this Application form. You can provide this in either Section 4 or immediately below.

Please ensure you tick only one of the boxes below.

I confirm that the postal address and email address provided in Section 4 belong to, or are directly accessible by an Account holder named in Section 2 of this Application Form.

**OR**

The following Postal address and Email address belong to, or are directly accessible by an Account holder named in Section 2 of this Application Form

Postal Address

Suburb

State

Postcode

Country

Email address

If you include an email address, we will use it to send you electronic communications like contract notes, and to notify you when your reports are available to view on the JBWere secure website. See the 'Online communication' section of the Applicant Acknowledgement (at the end of this form) for more detail about our online communication policy.

#### 6. Additional copies of Correspondence

Please select below if you would like additional copies of correspondence relating to this JBWere Account to be sent to Applicants named in Section 2, at the Postal Address or Email provided in Section 2.

1st Applicant

Postal Address **OR**  Email address

2nd Applicant

Postal Address **OR**  Email address

3rd Applicant

Postal Address **OR**  Email address

## 7. Authorised Person

This section is not required to be completed if you are the client of an external financial planner.

An Authorised Person is someone who can give trading instructions to or obtain information from JBWere and WealthHub Securities on this account. Each person listed in section 2(b) will be regarded as an Authorised Person (unless you advise otherwise in writing). If you would like to appoint an additional Authorised Person, please complete the information below. This section is optional.

The Authorised Person below must provide 100 points of identification which can include current certified copies of any two of their:

- passport;
- citizenship certificate; or
- driver's license.

### Title

Mr  Mrs  Miss  Ms  Other

First name(s)

Surname

Residential address

Suburb

State

Postcode

Country

Date of birth (DD/MM/YYYY)

Email address

Phone number

Relationship to account holder

I would like copies of all correspondence relating to this JBWere Account to be sent to my Authorised Person by:

Email **OR**  Post

**Signature of Authorised Person** – to be signed by the person being nominated as an Authorised Person.

By signing below, I, the Authorised Person named above, acknowledge that:

- the information collected by JBWere in this form is being used for the purposes of my appointment as an Authorised Person in relation to the account nominated on this form. I understand that I may not be able to be appointed as an Authorised Person if this information is not provided;
- personal information provided on this form will be collected, used and disclosed by JBWere, WealthHub Securities and other members of the NAB Group in the ways set out in the NAB Group Privacy Notification (available at [nab.com.au/privacynotification](http://nab.com.au/privacynotification)), and the JBWere Privacy Notification and Privacy Policy (available at [jbwere.com/general/privacy](http://jbwere.com/general/privacy)); and
- I will access the NAB Group Privacy Notification and JBWere's Privacy Policy and Privacy Notification, and can also request copies from the Privacy Officer, JBWere Limited, Level 16, 101 Collins Street, Melbourne, Vic 3000.

Signature of Authorised Person

	Date signed (DD/MM/YYYY)
	<input type="text"/>

## 8. Cash Account to settle Financial Product transactions

To nominate a JBWere Cash Trust as your Cash Account for use to settle Financial Product transactions, please complete section 8(a) below. To nominate an external financial institution account, please complete section 8(b).

### 8(a) Using a JBWere Cash Trust facility

If you do not have a JBWere Cash Trust account, then we will send you a JBWere Cash Trust Product Disclosure Statement and Application Form for you to complete and return to us.

If you would like to use a JBWere Cash Trust facility to settle your Financial Product transactions, you must have a settlement authority. If you have an existing facility and this was not nominated by you when the facility was established, we will send you a Product Disclosure Statement and the Cash Trust Application for Additional Facilities form for you to complete and return to us.

I already have a **JBWere Cash Trust** account and the investor number is

I would like to open a **JBWere Cash Trust** account and the JBWere Cash Trust Application Form has been completed and attached

### 8(b) Using an external financial institution account facility

If you have not completed 8(a) above and would like to use an account held at your financial institution to settle your Financial Product transactions, you must provide us with a direct debit authority.

At least one financial institution account holder must be named in section 2 of this Application Form. Please complete the information below.

#### **Direct debit and credit request**

I authorise and request:

- JBWere (User ID 415930) to arrange through its own institution to direct debit, through the Bulk Electronic Clearing System in accordance with the Direct Debit Request Service Agreement contained in Part C of the JBWere Client Agreement, any amount owed to JBWere, and for JBWere to direct credit this account with any amount it owes to me.
- WealthHub Securities (User ID 453439) to arrange through its own institution to direct debit, through the Bulk Electronic Clearing System in accordance with the Direct Debit Request Service Agreement contained in Part C of the JBWere Client Agreement, any amount owed to WealthHub Securities, and for WealthHub Securities to direct credit this account with any amount it owes to me.

Name of financial institution

BSB (branch number)

Name of account

Account number

Address of financial institution

  

Suburb

State

Postcode

Country

#### **Acknowledgement of financial institution account holder(s)**

By signing this request, I acknowledge that:

- I have read, understood and agreed to the terms and conditions governing the debit arrangements between me and JBWere and WealthHub Securities as set out in this request and in the Direct Debit Request Service Agreement contained in Part C of the JBWere Client Agreement;
- to establish the direct debit facility, JBWere and WealthHub Securities need to collect personal information about me in this request and to disclose my nominated account details to the financial institution used to arrange the direct debit;
- if I do not provide the above information, JBWere and WealthHub Securities may not be able to establish a direct debit facility;

- JBWere and WealthHub Securities are not responsible for any loss, cost or expense suffered by me as a result of this request including where I have provided the incorrect or incomplete account details or JBWere and WealthHub Securities are unable to arrange the relevant credit.

**Signature(s) of financial institution account holder(s)**

In the case of a joint financial institution account, this form must be signed by all owners of the financial institution account. If the other financial institution account owner is not an existing JBWere client, please enclose a current certified copy of that account owner’s driver’s licence or passport with this Application Form.

In the case of companies, this form must be executed by two directors or a director and a secretary unless it is a company with a sole director and sole secretary. Please indicate in which capacity you are signing by selecting the appropriate box below.

**1st Individual**

**Capacity (if applicable)**

Director                     
  Sole Director and Sole Secretary                     
  Trustee  
 Duly authorised representative (attach authority)                     
  Other (please specify)

Signed by: Full name

Signature

Date signed (DD/MM/YYYY)

**2nd Individual**

**Capacity (if applicable)**

Director                     
  Company Secretary                     
  Trustee  
 Duly authorised representative (attach authority)                     
  Other (please specify)

Signed by: Full name

Signature

Date signed (DD/MM/YYYY)

**3rd Individual**

**Capacity (if applicable)**

Director                     
  Company Secretary                     
  Trustee  
 Duly authorised representative (attach authority)                     
  Other (please specify)

Signed by: Full name

Signature

Date signed (DD/MM/YYYY)

**8(c) Authorisation for payment of dividends, distributions, interest and income payable**

Complete this section if you would like JBWere to arrange for dividends, distributions, interest and income payable in respect of Financial Products that are sponsored in CHESS by WealthHub Securities to be credited to the account nominated in 8(a) or 8(b):

I authorise each of CHESS and WealthHub Securities severally to advise the issuer of any Financial Product that is sponsored in CHESS on my behalf by WealthHub Securities, or the Issuer's nominee, to pay all cash dividends, distributions, interest or income payable in respect of that Financial Product to me by direct credit to my financial institution account, which is nominated on this Application Form; and

I acknowledge that this instruction:

- i. supersedes and has priority over all previous directions from me about the payment of cash dividends, distributions, interest or income to the relevant issuer.
- ii. does not affect my existing participation in any Dividend Reinvestment Plans or Bonus Share Plans.

## 9. CHESS Sponsorship for Australian listed Financial Products

### 9(a) CHESS sponsorship

Yes, I would like to be CHESS sponsored by WealthHub Securities (go to section 9(b) or 9(c) as applicable)

No, this account is to be sponsored by the party identified below.

Third party provider

Third party facility number

Participant ID (PID)

OR  (go to section 10)

No, I do not wish to be CHESS sponsored and acknowledge that I will be issuer sponsored (go to section 10)

CHESS sponsorship will be automatic if you do not select any of the above.

### 9(b) Conversion of issuer sponsored holdings to CHESS

I hold issuer sponsored stock that I wish to convert to CHESS holdings with WealthHub Securities.

(Please attach copies of recent issuer sponsored holding statements for each company to be converted to CHESS Sponsorship).

### 9(c) Transfer of existing CHESS sponsored holdings – release advice

Please complete the information below if you are currently CHESS sponsored with another CHESS sponsoring participant and wish to transfer all or some of your holdings to WealthHub Securities.

Please transfer all my holdings and Holder Identification Number (HIN) to WealthHub Securities (PID 1226)

Please transfer some of my holdings to WealthHub Securities (PID 1226). Please list the holdings to be transferred below.

CHESS sponsored holdings to be transferred to WealthHub Securities		
ASX Code	Security Name	Quantity

For this transfer request to be successful, the CHESS registration details (name, address and account designation) at your existing CHESS sponsoring participant must match the details that you are providing on this form. If your details have changed, you will need to advise your CHESS sponsoring participant of the changes before the transfer can be processed. Please make sure that you have no open orders or unsettled trades for the investments you would like to transfer.

**Important:** Please also attach copies of your latest CHESS Holding Statement(s).

Name of existing sponsoring participant

Account number

Holder Identification Number (HIN)

CHESS Sponsor ID (PID)

## 10. Marketing consent

If you are the client of a financial planner other than JBWere, this section does not apply to you, and you will not be contacted by members of the NAB Group to offer other services or products unless you have separately given your consent, and this consent has not been withdrawn.

- Unless I indicate otherwise, I consent to JBWere and other members of the NAB Group contacting me to offer other services or products which may be of interest to me.
- I acknowledge that I may withdraw my consent at any time by contacting JBWere at 1800 812 267 or in writing addressed to:

Privacy Officer  
JBWere Limited  
Level 16, 101 Collins Street  
Melbourne, Vic 3000.

I do not wish to receive communications about other services or products that may be of interest to me.

## 11. Applicant Acknowledgement

By completing and signing this Application Form, I:

- confirm that I have received, read and understood the JBWere Client Agreement, which includes the JBWere Agreement and the Broker Agreement, the associated documents referred to in the JBWere Client Agreement and the JBWere Financial Services Guide, WealthHub Securities Financial Services Guide and Best Execution Policy and agree to be bound by the provisions of the documents set out therein upon acceptance by JBWere and WealthHub Securities;
- understand that failure to provide information required in this application may affect the success of this application or any further application I may make to JBWere;
- agree that JBWere may act on instructions given on my behalf by my JBWere Advisor or my Authorised Person; and if I have a Margin Lending Facility, JBWere:
  - a. may only act on instructions from me, my JBWere Advisor or my Authorised Person to acquire investments using the Margin Lending Facility or to deal in my secured assets with the prior approval of my Margin Lender; and
  - b. may act on the instructions of my Margin Lender notwithstanding any contrary instructions given by me, my JBWere Advisor or my Authorised Person;
- represent and warrant:
  - a. that all information provided by me in the Application Form or as notified to JBWere from time to time is complete and correct and is not misleading and I agree that JBWere may rely on that information, unless and until written notice is received from me or my JBWere Advisor of any change;
  - b. I have the legal right and power to enter into this JBWere Client Agreement;
  - c. if a body corporate, I am duly incorporated and validly existing; and
  - d. if a trustee:
    - i. I agree that the JBWere Client Agreement will bind me in both a personal capacity and in my capacity as trustee;
    - ii. I represent and warrant that:
      1. I can be indemnified out of the assets of the trust for all liabilities incurred under this JBWere Client Agreement;
      2. I have properly exercised the trust powers and have full authority under the trust to enter into the JBWere Client Agreement; and
      3. I am properly authorised to hold in my name any financial products that constitute trust property which are traded or CHESS sponsored under this JBWere Client Agreement.

## Online communication

I agree that:

- The reports given to me, and any other document or information that the law permits at any time, may be delivered electronically via **jbwere.com** or my nominated electronic address, and that I will not receive paper copies of documents delivered electronically.
- I will receive my contract notes via my nominated electronic address.
- I will check my email accounts regularly for electronic communications.
- I acknowledge that I can change my electronic address, withdraw my consent to receive information via **jbwere.com** or my electronic address or receive paper copies of documents at any time by informing my JBWere Advisor.

## Privacy

I acknowledge that:

- I have read and understood the NAB Group Privacy Notification contained in Part D of the JBWere Client Agreement and available at **nab.com.au/privacynotification**; and
- personal information that I provide on this form will be collected, used, disclosed and handled in the way set out in the NAB Group Privacy Notification, and in the JBWere Privacy Notification and Privacy Policy available at **jbwere.com/general/privacy**.

## 12. Applicant Signature

Instructions for signing the Application Form:

- If the account is in joint names, all account holders must sign the Application Form.
- If the applicant is a Company, the Application Form must be signed by:
  - o two directors;
  - o a director and a company secretary;
  - o a sole director (who is also the sole company secretary); or
  - o a duly authorised representative(s) of the company (a current certified copy of the authority to sign on behalf of the company must be attached to the Application Form).
- If the applicant is an Incorporated Association, the Application Form must be signed by the authorised office bearers and a current certified copy of the Incorporated Association's Constitution or Rules must be attached to the Application Form.
- If signed under Power of Attorney, Attorneys must attach a current certified copy of the Power of Attorney if not already supplied (Power of Attorney documents cannot be accepted by fax). The Attorney hereby certifies that he/she has not received notice of any limitation or revocation of his/her Power of Attorney and is also authorised to sign this form.

### 1st Individual

#### Capacity (if applicable)

Director       Sole Director and Sole Secretary       Trustee  
 Duly authorised representative (attach authority)       Other (please specify)

Signed by: Full name

Signature

Date signed (DD/MM/YYYY)  

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**2nd Individual**

**Capacity (if applicable)**

Director
  Company Secretary
  Trustee  
 Duly authorised representative (attach authority)
  Other (please specify)

Signed by: Full name

Signature

Date signed (DD/MM/YYYY)

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**3rd Individual**

**Capacity (if applicable)**

Director
  Company Secretary
  Trustee  
 Duly authorised representative (attach authority)
  Other (please specify)

Signed by: Full name

Signature

Date signed (DD/MM/YYYY)

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**13. Checklist**

**Please check that:**

- All amendments or corrections are crossed and initialled by all applicants.
- All applicants have signed the Application Form in section 12.
- All holders of any financial institution account nominated in section 8(b) have signed in the designated signature blocks in the section.
- You have completed all the questions (as appropriate) by printing clearly in the spaces provided and have signed the relevant section(s). We can only accept this form if it is completed correctly.
- You have read and understood the **JBWere Cash Trust** PDS (if opening a new cash facility).
- Completed **JBWere Cash Trust** Application for Additional Facilities (if using existing Cash Account).

**Checklist for additional documents:**

- You have completed a Client Identification Form (if applicable).
- Copies of issuer sponsored statements (for conversion to CHES Sponsorship with WealthHub Securities).
- Original or current certified copy of Power of Attorney (if applicable).

**14. Additional Information**

Please use this form to provide any additional information required.

## Corporate directory

You can contact JBWere using the details below.

### Melbourne

Level 16, 101 Collins Street  
Melbourne Vic 3000

**Telephone:** +61 3 9906 5000

**Fax:** 1300 798 149

### Sydney

Level 42, Governor Phillip Tower  
1 Farrer Place  
Sydney NSW 2000

**Telephone:** +61 2 9325 2600

**Fax:** 1300 307 307

### Adelaide

Level 6, 22 King William Street  
Adelaide SA 5000

**Telephone:** +61 8 8407 1111

**Fax:** +61 8 8407 1112

### Brisbane

34th Floor, Riverside Centre  
123 Eagle Street  
Brisbane Qld 4000

**Telephone:** +61 7 3258 1111

**Fax:** +61 7 3258 1112

### Canberra

Level 3, 60 Marcus Clarke Street  
Canberra ACT 2600

**Telephone:** +61 2 6218 2000

**Fax:** +61 2 6218 2001

### Perth

Level 11, 100 St Georges Terrace  
Perth WA 6000

**Telephone:** +61 8 9212 7900

**Fax:** +61 8 9212 7999