

# APPLICATION FORM

To invest in the Fund please complete the attached Application Form. The Application Form, any other documents that need to be provided, together with a cheque made payable to "Sandhurst Trustees Limited – HALIDON A/C" should be forwarded to:

**Attention:**

Halidon Asset Management Ltd  
 Halidon Yield Enhanced Fund Applications  
 Level 31 Rialto North Tower  
 525 Collins Street  
 Melbourne VIC 3000

On receipt of cleared funds and acceptance of the application by the RE, Units in the Fund will be issued. The RE reserves the right to reject any application.

**Income Distributions**

You have the choice to have your distributions reinvested in the Fund, or you may elect to have income distributions paid into your nominated account. Please indicate your preference on the application form. If no preference is shown, your income distributions will be reinvested into the Fund and you will be allocated additional units.

**Completing the Application Form**

Please complete section 2 of the Application Form in the following manner and as detailed in the table below:

- + Individual accounts – complete Personal Investor 1 field only.
- + Joint accounts – complete Personal Investor 1 and Personal Investor 2 fields.
- + Partnership accounts – complete Personal Investor 1 and Personal Investor 2 fields, and insert the partnership name in the name designation field in the Company/Corporate Trustee field.
- + Company/Corporate Trustee – complete Company field.
- + Superannuation Fund or Trust Accounts – Insert the superannuation fund or trust name in the account name designation field. Also complete the trustee's details. Where the trustees are individuals complete Personal Investor 1 and Personal Investor 2 fields. If the trustee is a company complete the details in the Company/Corporate Trustee field.
- + Minor – insert the minor's name in the account designation field. Also complete the Trustee's details. Where an adult/s acts as trustee for the minor complete Personal Investor 1 and/or Personal Investor 2 fields.

| Type of Investor   | Correct   | Incorrect                              | Signature(s) required   |
|--|---|--|---|
| <b>Individual and joint holdings</b><br>Use given names in full, not initials  | John Andrew Smith or John Andrew Smith and Jane Sally Smith   | J.A Smith or J.A. Smith and J.S. Smith | The individual and all joint applicants   |
| <b>Partnership</b><br>Use the partners' personal names, not the names of the partnership                                   | John Andrew Smith & John Smith Jnr                            | John Smith & Son                       | All partners  |
| <b>Companies</b><br>Use the full company title, not abbreviations  | ABC Pty Ltd   | ABC P/L                                | Two directors; or one director and the company secretary or if there is one director, that director |
| <b>Superannuation fund or trust</b><br>Use the name of the trustee(s), not the name of the super fund or trust as investor | John Andrew Smith and Jane Sally Smith <Smith Super Fund A/C> | Smith Super Fund                       | The trustee/s   |
| <b>Minor</b><br>(under 18 years) Use the name of the responsible adult, not the minor as investor                          | John Andrew Smith (John Smith Jnr)                            | John Smith Jnr                         | The adult/s as trustee for the minor  |

Please ensure that when completing the application form that you:

- + Use a pen
- + Write in BLOCK LETTERS
- + Answer all the questions
- + Sign where requested

If you make an error please do not use correction fluid. Instead cross out your mistakes and initial your amendments.

### **Attorneys**

If you are signing under power of attorney please attach a certified copy of the power and specimen signature(s) of the attorney(s).

### **Declaration**

On signing the Application Form you acknowledge, declare and consent to the following as applicable:

- + To be bound by the Constitution (as amended from time to time);
- + To be bound by the fee arrangements as set out on pages 8 to 11 of this PDS;
- + You have read and understand this PDS;
- + For joint investors, unless stated otherwise by both investors, that the signatures of both investors are required when dealing with investment;
- + In the case of partnerships, that the application is duly authorised by, and is made on behalf of, the partners and that subject to the Constitution, all partners are jointly and severally liable in respect of the unit holding;
- + Any monies payable by an Investor in respect of taxes or duties owed by that Investor may be recouped by the RE through the redemption of the Investors units and the deduction of amounts owed from the Investors redemption proceeds;
- + If the application form is signed under power of attorney, the Attorney hereby certifies that they have not received notice of revocation of that power;
- + That the information you have provided in the Application Form is true and correct and that you will inform the RE of changes to the information supplied as and when they occur;

- + You are not aware and have no reason to suspect that:
  - the monies used to fund your investment in the Fund have been or will be derived from or related to any money laundering, terrorism financing or other illegal activities, whether prohibited under Australian law, international law or convention or by agreement; or
  - the proceeds of your investment will be used to finance any illegal activities; and
- + You are not a politically exposed person or organisation as the term is used in the Anti-money Laundering and Counter-Terrorism Financing Rules Instrument 2007 (1).

Units in the Fund are offered by Halidon Asset Management Ltd ABN 26 123 611 978 AFS License 312247. Units will only be issued upon receipt of this form.

**1. Do you have an existing investment in the Halidon Yield Enhanced Fund?**

If yes, and this is an addition to an existing account, please quote your investor number and then complete Sections 3,4 and 6 through to 10.

Yes  No

Investor No.

**2. Investor Details - (please print)**

Type of Investor  Individual  Joint  Company  Trust/Fund  Other

**Personal Investor/Trustee 1**

Title  Mr  Mrs  Ms  Miss  Dr  Other

Surname

Given names(s)

Residential Address

Suburb  State  Postcode

Country

Telephone  DOB  /  /

**Personal Investor/Trustee 2**

Title  Mr  Mrs  Ms  Miss  Dr  Other

Surname

Given names(s)

Residential Address

Suburb  State  Postcode

Country

Telephone  DOB  /  /

**Company/Corporate Trustee**

Name

ACN    ABN

Proprietary or Public Company

*(if Proprietary please provide full name of each director below)*

Registered Office

Suburb  State  Postcode

Country

Telephone

# HALIDON YIELD ENHANCED FUND

## APPLICATION FORM

Principal place of business (if any)

Suburb  State  Postcode

Country

Telephone

### Name of each Company Director

Director 1

Director 2

Director 3

Director 4

Director 5

### Trust, Superannuation or Investment Fund

Name of Trust/Fund   
(eg. <Smith Super Fund A/C>)

Type of Trust

Country where Trust Established

Name of each beneficiary or details of class.

### 3. Contact (please indicate the method via which you would prefer to receive communications from the RE)

By post to residential address  By post to postal address  By post to financial adviser  By email

Postal Address

Suburb  State  Postcode

Country

Email Address

# HALIDON YIELD ENHANCED FUND

## APPLICATION FORM

### 4. Identification

Please attach a copy of identification for each individual, Director/s of the Company or Trustee/s of the Trust or Fund. Acceptable identification is a legible copy of **drivers licence** or **passport page** containing the **signature, photograph, residential address** and **date of birth** of each individual.

### 5. Tax File Number (if exempt please attach proof of exemption, see page 17)

#### Investor 1

Type  Individual  Joint  Company  Trust/Fund  Other  
TFN

#### Investor 2

Type  Individual  Joint  Company  Trust/Fund  Other  
TFN

### 6. Distribution

I/We elect to receive distributions  Distribution Reinvestment Plan  Paid to nominated account (below)  By cheque  
If no preference is selected, your income distribution will be reinvested in units in the fund

### 7. Nominated financial institution account

The following nominated account will be credited with payment of distributions and redemptions (if applicable)

Account Name   
Name of Institution   
Branch   
BSB No.  -  Account No.

### 8. Investment Details

Halidon Yield Enhanced Fund  \$   Cheque  EFT/Direct Deposit

If paying by cheque, please make payable to: Sandhurst Trustees Limited - Halidon Yield Enhanced Fund

If paying by Electronic Funds Transfer/Direct Deposit, please pay to the following bank account:

Bank: Macquarie Bank

Branch: 101 Collins Street, Melbourne VIC 3000

Account Name: Sandhurst Trustees Limited - Halidon Yield Enhanced Fund

BSB: 183 334

Account Number: 119 443 844

Reference: New investors, please use the applicant name in Section 2

Existing investors, please use your unitholder number



## APPLICATION FORM

### 9. Adviser Details

I/We confirm that I/we have agreed to a Contribution Fee of  % + GST (maximum of 2%+ GST) of the total investment amount and direct you to deduct that fee from my/our total investment amount and it to be paid to the nominated adviser below.

Account Name

Advisor Group

AFS Licence No.

ABN

Address

Suburb  State  Postcode

Country

Telephone

Adviser Stamp

### 10. Declaration

- + All details in this application form are true and correct;
- + I/we have read the PDS to which this application form relates and agree to the offer contained in it and to be bound by the provisions of the Constitution (as amended) governing the Fund;
- + I/we have legal power to invest in accordance with this application.

### Joint applicants must both sign

Signature Investor 1 or Director or Trustee

Print name

Date  /  /

Signature Investor 2 or Director/Secretary or Trustee 2

Print name

Date  /  /





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[www.halidonam.com.au](http://www.halidonam.com.au)