

Adelaide Cash Management Trust Account Maintenance Form

This form is used to change your details in relation to your Adelaide Cash Management Trust account (CMT account).

Please use **BLOCK** capital letters and tick (✓) boxes where applicable.

Trust account name

Trust account number

Or customer number and account ID

<input type="text"/>	<input type="text"/>
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A. Update your contact details

New residential address (PO Box is not acceptable)

Town/Suburb	State	Postcode	Country
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<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Phone	Mobile
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<input type="text"/>	<input type="text"/>
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Email

New mailing address (if different to residential address)

Town/Suburb	State	Postcode	Country
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<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Phone	Mobile
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<input type="text"/>	<input type="text"/>
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Email

Foreign Accounts Tax Compliance Act (FATCA)

Investor 1

Are you a US Citizen or Resident of the US for tax purposes? Yes No

If yes – please complete and attach the FATCA Details Form available from your local Bendigo Bank branch or at www.sandhursttrustees.com.au/forms.

Investor 2 (Joint investors)

Are you a US Citizen or Resident of the US for tax purposes? Yes No

If yes – please complete and attach the FATCA Details Form available from your local Bendigo Bank branch or at www.sandhursttrustees.com.au/forms.

Note: Sandhurst is required to comply with the Foreign Account Tax Compliance Act (FATCA). If an investor is, or becomes, a US Citizen or Resident, Sandhurst may be required to report information in relation to the investor and the investment for FATCA purposes. If you are uncertain of your status you should seek specialist taxation advice.

B. Update your name

Only complete this section if your name has changed. Please note we require supporting documentation to action your request.

Previous name(s)

New name(s)

<input type="text"/>	<input type="text"/>
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Previous signature

New signature

<input type="text"/>	<input type="text"/>
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I/we have enclosed one of the following proof of name documents. Please (✓) the appropriate box:

- A **certified copy** of my marriage certificate issued by the Registry of Births, Deaths and Marriages; or
- A **certified copy** of my change of name certificate; or
- A **certified copy** of my marriage certificate and Decree Nisi (Divorce papers)

Change of entity name – Please contact our service centre to discuss required supporting documentation.

C. Add/Delete Transaction Services

Have you previously applied to use Bendigo and Adelaide Bank Limited's (the Bank) transaction services:

- Yes (please proceed to Step 2) No (please complete Step 1 and 2)

Step 1 – This Step allows you to apply for the Bank's transaction services. By ticking the box below, you acknowledge having read a most-up-to-date copy of the Transaction Services Guide – Adelaide Cash Management Trust (the Guide) located at www.sandhursttrustees.com.au/forms/cash and agree to the terms and conditions set out in the Guide.

- I/We will use the Bank's transaction services and agree to the terms and conditions set out in the Guide.

Step 2 – Select which transaction services you wish to add or delete:

Cheque Facility		
<input type="checkbox"/> Add cheque book facility	<input type="checkbox"/> 35 cheques	<input type="checkbox"/> 75 cheques
<input type="checkbox"/> Delete cheque book facility		
Card* Facility		
<input type="checkbox"/> Card	<input type="checkbox"/> Add	<input type="checkbox"/> Delete
Home Banking Services		
<input type="checkbox"/> Phone banking (express line)	<input type="checkbox"/> Online banking	

If you have requested a deposit book, cheque book, Card and/or phone banking service, these will be sent to you separately in the mail.

If you have requested online banking, please call our Customer Service Centre on 1800 224 124 to activate and receive your Online Banking Password.

*Card means a card issued to you or any additional cardholder by us, which can be used to undertake an electronic funds transfer transaction.

Applicant 1

Name to appear on Card

Mothers maiden name (for security/identification purposes)

Applicant 2

Name to appear on Card

Mothers maiden name (for security/identification purposes)

D. Declaration

General

I acknowledge and agree to the maximum extent permitted by law to release discharge and indemnify Sandhurst Trustees Limited (Sandhurst) ABN 16 004 030 737 as responsible entity for the Adelaide Cash Management Trust from and against all actions, proceedings, accounts, costs, expenses, charges, liabilities, claims and demands arising directly or indirectly as a result of the instructions given in this form.

I/We acknowledge the account maintenance requested to my CMT account is subject to the terms and conditions set out in the current Product Disclosure Statement available at www.sandhursttrustees.com.au

Please sign this form where indicated below. This form must be signed as per the current signing instructions we have on record.

If no amendments have been made, the current signatories for the account are the individuals who signed the initial investment application form.

Bendigo and Adelaide Bank Limited transaction services

I/We the undersigned:

- confirm that I/we have received, read and understood the Guide;
- agree to be bound by the provisions of the terms and conditions of the transaction services in the Guide;
- agree to pay the Bank for any service(s) we request it to perform; and
- authorise Sandhurst to redeem units from my/our CMT account to the extent necessary to pay the applicable fee(s) for the service(s) to the Bank and authorise Sandhurst to pay the proceeds of such redemption to the Bank.

Electronic instructions

In respect of electronic instructions (email or fax) you acknowledge, warrant and agree that Sandhurst:

- will determine at its absolute discretion whether it will reject or accept electronic instructions;
- is not responsible for any loss or delay that results from a transmission not being received by Sandhurst;
- will only process electronic instructions if they are received in full and contain all the required information as determined by Sandhurst to validate the instructions;
- may require you to provide a duly executed hard copy of the instructions and/or further information necessary for Sandhurst to validate the instructions;
- will not accept a receipt confirmation from the sender’s facsimile machine or computer as evidence of receipt of the instructions;
- will not compensate you for any losses relating to electronic instructions, unless required to do so by law;
- does not take responsibility for any fraudulent or incorrectly completed electronic instructions; and
- will not process a change in name, until original certified documents are received (refer Step B),

To the maximum extent permitted by law, including in the event of fraud, you hereby irrevocably release Sandhurst from, and indemnify Sandhurst against, all losses and liabilities whatsoever arising from Sandhurst:

- acting in accordance with any instructions received electronically bearing your customer number and/or other information provided to validate the instructions; or
- declining to act on instructions for any reason including because it was unable to validate those instructions to the satisfaction of Sandhurst.

Privacy

I/We have read and understood Sandhurst’s and Bendigo and Adelaide Bank Group’s Privacy Policy which is available at www.sandhursttrustees.com.au and consent to providing Sandhurst and Bendigo and Adelaide Bank Group with personal information and for Sandhurst and Bendigo and Adelaide Bank Group to collect, use, disclose and store personal information in accordance with its Privacy Policy.

Signatures

YOUR REQUEST CANNOT PROCEED IF THIS SECTION IS NOT SIGNED

Applicant 1

Full customer name (given name, middle name/s, family name)

Signature (Individual or person authorised to sign on behalf of the organisation)

If signing on behalf of an organisation, please provide your title / position

Director Company Secretary Trustee Attorney

Sole Director Other, please specify:

Date

Applicant 2

Full customer name (given name, middle name/s, family name)

Signature (Individual or person authorised to sign on behalf of the organisation)

If signing on behalf of an organisation, please provide your title / position

Director Company Secretary Trustee Attorney

Sole Director Other, please specify:

Date

- In the case of corporate signatories, two directors or a director and a company secretary must sign unless you are a sole director and sole secretary.
- If signed under a power of attorney, a certified copy of the power of attorney must be provided (unless already provided to Sandhurst).

(Office use only)

Trust account number

Signature of checking officer

Scan number

<input type="text"/>	<input type="text"/>	<input type="text"/>
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You can return the completed form to:

**Sandhurst Trustees Limited
Adelaide Cash Management Trust
GPO Box 1048**

Adelaide SA 5001; or

Email: moneymat@adelaidebank.com.au; or

Facsimile: (08) 8300 6499

For all queries please contact our Customer Service Centre on 1800 224 124 from Monday to Friday 8.30am to 5.00pm Adelaide time.