

## BUTLER MCINTYRE MORTGAGE FUND APPLICATION FORM

**Director / Trustee / Controller / Partner / Individual 1**

Title	<input type="text"/>	Surname	<input type="text"/>	Given name(s)	<input type="text"/>
Date of Birth	<input type="text"/> / <input type="text"/> / <input type="text"/>	Occupation	<input type="text"/>		
Country of Birth	<input type="text"/>	Position	<input type="text"/>		
Address	<input type="text"/>				
Phone (Business)	<input type="text"/>	Phone (Mobile)	<input type="text"/>		
		E-Mail	<input type="text"/>		

**Tax Residency Details**

This section is not required to be filled out if the application is for an Australian Registered Superannuation or an Australian SMSF.

*This Individual is only Tax Resident in Australia*

**OR**

*I have included below all countries in which this Individual is Tax Resident (other than Australia)*

Country of Tax Residence <small>(Do not include Australia)</small>	Taxpayer Identification Number (TIN) <small>(or country equivalent)</small>	Reason Code <small>(if TIN not provided)</small>	Explanation <small>(If Reason Code is Z)</small>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Reason codes:**

- A – TIN Not Issued (The Country Does not issue TINs)
- B – TIN Not Required (The Country does not require collection of a TIN)
- C – TIN Applied for (I have applied for a TIN and will inform you upon receipt)
- Z – TIN Unobtainable (I am unable to obtain a TIN) Please provide explanation.

Country of Citizenship

Other Country of Citizenship (if applicable)

**Tax file number quotation or exemption**

Collection of tax file numbers is authorised by law. Quotation is not compulsory, but tax will be taken out of your income distribution if you do not quote your tax file number or exemption.

**Tax file number 1**

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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**Or exemptions (tick one)**

Pensioner     Non-resident     Child under 16 earning less than \$20 pa.

Association or other entity not required to lodge a tax return

**Director / Trustee / Controller / Partner / Individual 2**

Title	<input type="text"/>	Surname	<input type="text"/>	Given name(s)	<input type="text"/>
Date of Birth	<input type="text" value=" / /"/>			Occupation	<input type="text"/>
Country of Birth	<input type="text"/>			Position	<input type="text"/>
Address	<input type="text"/>				
Phone (Business)	<input type="text"/>			Phone (Mobile)	<input type="text"/>
				E-Mail	<input type="text"/>

**Tax Residency Details**

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

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Country of Citizenship

Other Country of Citizenship (if applicable)

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**Tax file number**

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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**Or exemptions (tick one)**

- Pensioner    Non-resident    Child under 16 earning less than \$20 pa.  
 Association or other entity not required to lodge a tax return

Child's DOB:

**Company / Partnership / Trust / Business Name:**

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<i>ACN / ARBN</i>	
<i>Place of Incorporation</i>	
<i>Residential Address</i>	

<i>Mobile</i>	
<i>Telephone</i>	
<i>Mail Address</i>	

**Deposit**

**Deposit amount**

➤ Please make cheques payable to: **Butler McIntyre Mortgage Fund**

Do you want to add this application to your existing account?

 Yes No**Distribution Details** Bank / Credit Union, etc. (complete details below) Reinvest

<i>Institution name</i>	
<i>Account name</i>	
<i>BSB number</i>	
<i>Account number</i>	

**Written Withdrawal Authorisation****Complete for joint applications only** Both to sign     Either to sign**Declaration (Transferring investors)** Please tick**By signing the application form, the investor acknowledges that:**

1. Butler McIntyre Investments Ltd is authorised to retire from the management of the securities in which the investor holds an interest to the extent that such retirement is required to enable the Responsible Entity to perform its duties in relation to the Butler McIntyre Mortgage Fund in accordance with the Corporations Law.
2. The rights of the investor to an interest in the securities as a contributor is exchanged for a right as a contributor to an entitlement to the same dollar value in all the securities comprising the pool of assets of the Butler McIntyre Mortgage Fund held by the Responsible Entity on behalf of all investors.
3. The investor becomes bound by the terms of the PDS and the Constitution of the Butler McIntyre Mortgage Fund.

**Declaration (New investors)** Please tick

**I/We have read the attached PDS for the Butler McIntyre Mortgage Fund and agree to be bound by the provisions of the PDS and Constitution of the Butler McIntyre Mortgage Fund.**

**Shareholders / Beneficiaries / Executor Details**

Please complete for all shareholders or beneficiaries of a trust, partnership or association who own/control more than 25% of the Investor. If these people are listed in the previous section, do not complete their details again in this section.

**Individual 1**

Title and Full Name

DOB  /  /

Country of Birth

Tax File Number or Exemption Reason

Position

Address

Phone (business)

**Individual 2**

Title and Full Name

DOB  /  /

Country of Birth

Tax File Number or Exemption Reason

Position

Address

Phone (mobile)

**Tax Residency Details**

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This Individual is only Tax Resident in Australia

**OR**

I have included below all countries in which this Individual is Tax Resident (other than Australia)

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Country of Citizenship

Other Country of Citizenship (if applicable)

Country of Citizenship

Other Country of Citizenship (if applicable)

Verification of Identity		
Please provide the following:		Tick
<ul style="list-style-type: none"> <li>at least one of the categories of certified documents from the list below for all individuals, including individual directors, partners and trustees; AND</li> <li>at least one certified document from the list below for the relevant entity type listed above.</li> </ul>		
<b>Individuals</b> Directors, Partners, Trustees	Australian Passport (or foreign passport or Australian Evidence of Immigration Status ImmiCard or Australian Migration Status ImmiCard) <u>plus</u> Australian drivers licence or Photo Card <u>plus</u> change of name or marriage certificate	<input type="checkbox"/>
	Australian Passport (or foreign passport or Australian Evidence of Immigration Status ImmiCard or Australian Migration Status ImmiCard) <u>plus</u> full birth certificate or citizenship certificate or descent certificate <u>plus</u> Medicare or Centrelink or Department of Veterans' Affairs card <u>plus</u> change of name or marriage certificate if necessary	<input type="checkbox"/>
	Australian drivers licence or Photo Card <u>plus</u> full birth certificate or citizenship certificate or descent certificate <u>plus</u> Medicare or Centrelink or Department of Veterans' Affairs card <u>plus</u> change of name or marriage certificate if necessary	<input type="checkbox"/>
	(a) Australian Passport (or foreign passport or Australian Evidence of Immigration Status ImmiCard or Australian Migration Status ImmiCard) <u>plus</u> another form of government issued photographic identity Document <u>plus</u> change of name or marriage certificate if necessary	<input type="checkbox"/>
	(b) Australian Passport or foreign passport or Australian Evidence of Immigration Status ImmiCard or Australian Migration Status ImmiCard <u>plus</u> full birth certificate <u>plus</u> another form of government issued identity Document plus change of name or marriage certificate if necessary	<input type="checkbox"/>
	(a) Identifier Declaration <u>plus</u> full birth certificate or citizenship certificate or descent certificate <u>plus</u> Medicare or Centrelink or Department of Veterans' Affairs card <u>plus</u> change of name or marriage certificate if necessary.	<input type="checkbox"/>
(b) Identifier Declaration by a Person specified in Verification of Identity Standard paragraph 4.4(e) <u>plus</u> Medicare or Centrelink or Department of Veterans' Affairs card <u>plus</u> change of name or marriage certificate if necessary.	<input type="checkbox"/>	
<b>Trust / Partnership</b> SMSF, Bare Trust	Certified Trust Deed Extract (cover page, signing page and first two pages)	<input type="checkbox"/>
	Certified Partnership Agreement Extract (cover page, signing page and first two pages)	<input type="checkbox"/>
	Certificate issued by ASIC or other regulator	<input type="checkbox"/>
<b>Company</b> Domestic or Foreign	Certificate of Registration – ASIC	<input type="checkbox"/>
	Licence or other records from AUST regulator	<input type="checkbox"/>
	ASIC company (or other entity) full company search or most recent annual statement	<input type="checkbox"/>
	Registration or Licence from Foreign regulator	<input type="checkbox"/>
<b>Association / Registered Co – ops</b> Incorporated, Unincorporated	Certified Constitution or Rules	<input type="checkbox"/>
	A Certificate issued by ASIC or other regulator	<input type="checkbox"/>
	A certified copy of Minutes of meeting	<input type="checkbox"/>

## Source of Funds

### Source of Funds

This is the main way you earn the money that goes into your investment account. e.g. employment (including job/salary/wages/self-employed), government payments like pensions, investments – dividends/rental income etc. Please select the most relevant one to your circumstances.

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> <i>Employment</i>                                     | <input type="checkbox"/> <i>Spouse or partner / parent or guardian</i> | <input type="checkbox"/> <i>Insurance settlement</i>    |
| <input type="checkbox"/> <i>Dividends or income – business</i>                 | <input type="checkbox"/> <i>Family trust or inheritance</i>            | <input type="checkbox"/> <i>Royalties</i>               |
| <input type="checkbox"/> <i>Pension / social benefits (Centrelink payment)</i> | <input type="checkbox"/> <i>Sale of property</i>                       | <input type="checkbox"/> <i>Lottery win or gambling</i> |
| <input type="checkbox"/> <i>Investments / superannuation account</i>           | <input type="checkbox"/> <i>Donation or gift</i>                       | <input type="checkbox"/> <i>Other, please specify</i>   |
| <input type="checkbox"/> <i>Grant / scholarship / subsidy</i>                  | <input type="checkbox"/> <i>Divorce settlement</i>                     | <input type="text"/>                                    |

### Source of Wealth

This is the source of income that has primarily helped you pay for your assets such as a property, car, shares etc., e.g. salary/wages/income from employment, sale of property or business, inheritance etc. Please select the most relevant one to your circumstances.

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> <i>Employment</i>                                     | <input type="checkbox"/> <i>Spouse or partner / parent or guardian</i> | <input type="checkbox"/> <i>Insurance settlement</i>    |
| <input type="checkbox"/> <i>Dividends or income – business</i>                 | <input type="checkbox"/> <i>Family trust or inheritance</i>            | <input type="checkbox"/> <i>Royalties</i>               |
| <input type="checkbox"/> <i>Pension / social benefits (Centrelink payment)</i> | <input type="checkbox"/> <i>Sale of property</i>                       | <input type="checkbox"/> <i>Lottery win or gambling</i> |
| <input type="checkbox"/> <i>Investments / superannuation account</i>           | <input type="checkbox"/> <i>Donation or gift</i>                       | <input type="checkbox"/> <i>Other, please specify</i>   |
| <input type="checkbox"/> <i>Grant / scholarship / subsidy</i>                  | <input type="checkbox"/> <i>Divorce settlement</i>                     | <input type="text"/>                                    |

## Declaration & Authority

*Please tick*

### Collection, use and disclosure of personal information

Butler McIntyre Investments Limited (**BMI**) is collection your personal information to enable it to process this application and for the purposes described in the product terms and conditions. Without this information BMI may not be able to consider or process your application.

You agree that BMI may disclose your personal information to:

- Any agent, contractor or service provider BMI engages to carry out or assist its functions and activities;
- An organisation that assists BMI to identify, prevent or investigate any fraud, unlawful activity or misconduct (or suspected fraud, unlawful activity or misconduct);
- Any related entity of BMI; and
- Your authorised representative.

BMI may disclose information to recipients (including services providers and related entities) which are (1) located outside Australia and/or (2) not established in or do not carry on business in Australia. you can find details about the location of these recipients in BMI's Privacy Policy.

BMI's Privacy Policy contains information about:

- Any laws that require or authorise BMI to collect certain information from you;
- The circumstances in which BMI may collect your information from other sources (including from a third party);
- how to access your information and seek correction of your information; and
- how you can raise concerns that BMI has breached the Privacy Act or an applicable Code and how BMI will deal with these matters.

### Tax Residency Details

- I/We have obtained the necessary consent and authorisation to allow disclosure and use of the Tax Residency Details provided in this form.
- I/We will notify BMI within 30 days of any change to the Tax Residency Details and/or tax residency status of any person(s) mentioned within this form.

## Terms and Conditions

By signing this application the investor acknowledges and confirms that they:

- Are 18 years of age or over.
- Received an electronic or paper copy of the PDS and Additional Information Booklet (if applicable) before or at the same time as you received this Application Form and have read and understood the PDS and Additional Information Booklet (if applicable) to the relevant Fund(s) to which this Application Form relates.
- Agree to be bound by the terms and conditions of the PDS, Additional Information Booklet, this Application Form and the terms of the Constitution of the relevant Fund(s) in which you are invested (which may be amended from time to time).
- Acknowledge that Butler McIntyre Investments Limited reserves the right to refuse an application for units or interests at its discretion.
- Acknowledge that neither Butler McIntyre Investments Limited nor any other person guarantees the return of capital, or the performance of any Fund.
- Acknowledge that telephone conversations with Butler McIntyre Investments Limited may be recorded.
- Authorise Butler McIntyre Investments Limited to apply the Tax File Number quoted to all investments in the name of the investor.
- Authorise Butler McIntyre Investments Limited to collect, hold, use and disclose personal information about the investor in accordance with Butler McIntyre Investments Limited's Privacy Policy including direct marketing.
- Confirm that they have the proper authority as detailed in the signatories terms and conditions section of the PDS, Additional Information Booklet and Application Form.

## Signature(s)

- **All joint investors must sign.**
- **Corporate investors must sign in accordance with the company's constitution and the Corporations Law**

**Director / Trustee / Controller / Partner / Individual 1**

**Date**

**Director / Trustee / Controller / Partner / Individual 2**

**Date**

**Shareholders / Beneficiaries / Executor 1**

**Date**

**Shareholders / Beneficiaries / Executor 2**

**Date**