

## **NAB Equity Builder** Request to close loan facility

Send the completed form to: equity.lending@nab.com.au		Attention NAB Equity Lendir	ng contact name
Facility details Client/Facility name			Facility number
Facility closure instructions  I/we wish to close my/our NAB Equity Builder Facility in accordance	with the instructions provide	ded by me/us belov	N.
Facility in debit  If your Facility has a debit balance:			
Debit my/our nominated bank account for the amount required (please er	nsure there are sufficient funds)		
Redeem the managed funds held in my/our facility (please also complete			
☐ I/we will sell shares held in my/our facility (please also complete the NAB			
Name of financial institution		•	
Name of account		BSB number	Account number
Facility in credit  If your Facility has a credit balance:  Credit the balance to my/our nominated bank account  Credit the balance to the following bank account:  Name of financial institution			
Name of account		BSB number	Account number
Important note: the bank account must be held in the borrower's na	ame, and a recent bank stat	ement must be pro	vided for a non-NAB account.
Transfer of ASX listed securities			
If there are any ASX listed securities remaining in your Facility, pleas	se select one of the followin	g options:	
Transfer securities out issuer sponsored			
Transfer all my securities (HIN) to another broker	Double in cont I double on /DID	1144-014-016	nation Number (LUNA
Name of broker	Participant Identifier (PID)	Holder Identific	cation Number (HIN)
Transfer of managed funds  If there are managed funds remaining in your Facility, please advise Nominees Pty Ltd (ABN 62 088 233 792) into the name of the benefi	icial owner.	r all managed fund	investments from NMS

## Applicant signatures

I/We consent to companies of the National Australia Banking Group using and disclosing my/our personal information as contemplated in the section titled 'NAB Privacy Notification' in the NAB Equity Builder Facility Terms.

I/we acknowledge that I/we have not been given or relied upon any financial advice or recommendation about the Facility (including any specific stock or managed fund investment) from NAB Equity Lending, a division of National Australia Bank Limited.

I/we acknowledge that NAB has recommended to me/us that I/we seek independent legal, tax and financial advice on the suitability of the Facility (including a product if relevant) for me/us.

Individual/Joint			
Signature – first applicant	Signature – second applicant		
×	X		
Full name	Full name		
Date / /	Date / /		
Contact number	Contact number		
Company applicant*  Executed by  Name of company and ABN  In accordance with subsection 127 (1) of the Corporations Act by authori	ty of its director(s)		
Signature of authorised person	S ACL by authority of its director(s).  Signature of authorised person		
X	X		
Full name	Full name		
Office held (Director/Secretary)	Office held (Director/Secretary)		
Date	Date		
/ /	/ /		
Contact number	Contact number		

<sup>\*</sup> If the company applicant is a proprietary company with a sole director who is also the sole company secretary, that person states that they sign as both the sole director and the sole company secretary. In all other cases, this application should be signed by two directors or a director and company secretary.