

Please use blue or black pen and write in BLOCK letters

Send to: email Equity.Lending@nab.com.au
Fax 1300 739 923

Attention
NAB Equity Lending Account Manager

Client Details

Client name

Facility ID

Switch transaction request

The net proceeds from selling nominated *investments* will be applied to purchase other *approved investments*.

I/we request National Australia Bank Limited to sell the *investments* listed below in Table 1, and to apply the net sale proceeds to purchase the *investments* listed in Table 2.

Table 1: First part of switch – *Investments* to be sold

Code	Investment Name	Security Ratio	All (Yes/No)	Current Value

Table 2: Second part of switch – *Investments* to be purchased

Code	Investment Name	Security Ratio	Platform (if applicable)	Expected Value

1. Unless agreed otherwise, a switch transaction should always be into an *investment* with the same or higher *security ratio*.
2. If a switch transaction is required because an *investment* forming part of the *secured property* ceases to be an *approved investment*, the total holding needs to be switched to a different *investment* currently on the Approved Investment List.
3. If you wish to purchase a *managed fund investment*, please complete the fund manager's application form and provide any extra requested paperwork, and include it with this form.
4. All purchases of ASX securities will be transacted at the prevailing market price and will include brokerage.
5. Price movements of an ASX security may result in a different transacted value to that nominated in this form.

Applicant Signatures

This form must be signed by the Applicant or their *authorised representative*.

Individual/Joint Applicants

Signature – first applicant

Signature – second applicant

Full name (BLOCK LETTERS)

Full name (BLOCK LETTERS)

Date

Date

Contact Number

Contact Number

Company Applicant

Executed by

*Name of Company

in accordance with subsection 127(1) of the Corporations Act by authority of its director(s).

Signature of authorised person

Signature of authorised person

Full name (BLOCK LETTERS)

Full name (BLOCK LETTERS)

Office held

Office held

Date

Date

Contact Number

Contact Number

* If the 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, the Application should be signed by two directors or a director and company secretary.