

NAB Margin Loan Request to establish instalment gearing

Email the completed form to: equity.lendi	ing@nab.com.au								
Attention NAB Equity Lending contact name									
Facility details									
Client/Facility name						F	Facility number		
Instalment gearing investment instru		aroval (the initial s	dvanca ic i	mada an a	unnroval)				
Your monthly instalments commence the mo Alternatively, please nominate the month yo	u wish deductions	s to commence ³ .	iuvance is i	illaue oli a	ipprovat).				
Which managed fund(s) do you wish to inves	t in (this includes a	any existing mana	ged funds	you may h	nave)?				
	Initial instalments ¹ Monthly instalments ^{1,3}								
				Monthly equity Monthly loan					
	Initial equity	Initial	contrib (minim		componer (minimum		New managed	Existing managed	
Name of managed fund	contribution ²	advance	amoun		amount \$2		fund ⁴	fund ⁵	
		-	-						
			_						
		-	_		-				
Total									
Fund managers may impose investment minimum minimums still apply. Please note your initial activities can be provided. Your initial activity contribution can be provided.	dvance investment w	ill be made upon aہ	oproval.		levant fund m	anager(s	s). NAB Equity	Lending	
 Your initial equity contribution can be provided by cheque or direct debit from your nominated account. The monthly loan components will be processed on the date invested by the fund manager, and monthly equity contributions on or about the 10th day of the month. The date the investment occurs is determined by the relevant fund manager. 									
4. New Managed Fund Investments: attach a completed and signed application from the relevant managed fund offer document.									
5. Existing Managed Fund Investments: attach a co									
Instalment gearing direct debit request – initial and monthly equity contributions Please read the Direct Debit Request Service Agreement contained in the NAB Equity Lending Facility Terms before completing this request.									
I/We request and authorise National Australi	_						_		
monthly equity contributions (as defined in I an account held at the financial institution ic instructions provided by me/us below.	NAB Equity Lendin	g Facility Terms)	to be debit	ed throug	h the Bulk El	ectroni	c Clearing Sy	stem from	
Name of financial institution									
Address of financial institution									
Address of finalicial institution									
				Sta	te		Postcode		
Details of account to be debited Name of account			ı	BSB numb	er	Accoun	it number		
				- 02 1101110	-				

Acknowledgment
Before signing this Direct Debit Request you should read and understand the terms and conditions governing the direct debit arrangement between you and National Australia Bank Limited as set out in the Direct Debit Request Service Agreement in the NAB Equity Lending Facility Terms.
Direct debit details
The account nominated may be debited for (tick relevant boxes):
initial monthly equity contribution
monthly equity contribution
Declaration By signing this Direct Debit Request I/we declare that:

- this Direct Debit Request authorises National Australia Bank Limited to instruct the financial institution to debit the account (as described) on my/our behalf;
- all information given to National Australia Bank Limited is accurate and not misleading and that I/we are aware that National Australia Bank Limited is relying on it; and
- I/we will not alter the direct debit arrangements (including closing or changing the account described) set out in this Direct Debit Request without notifying National Australia Bank Limited at least 14 days prior to the next debit day due date.

Applicant signatures

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

I/we acknowledge that National Margin Services Pty Ltd ('NMS') and NMS Nominees Pty Ltd ('Nominees') are wholly owned subsidiaries of National Australia Bank Limited (NAB). NMS and Nominees are not Authorised Deposit Taking Institutions and their obligations do not represent deposits or other liabilities of NAB. NAB does not guarantee the obligations or performance of NMS or Nominees or the products or services these subsidiaries offer.

I/we acknowledge that NAB does not provide any financial advice or recommendation about the Facility (including any specific stock or managed fund investment which may be accessed via the Facility).

NAB recommends that you seek independent legal, tax and financial advice on the suitability of the Facility (including a product if relevant) for you.

Individual/Joint Full name		Full name	
Signature Contact number	Date / /	Signature Contact number	Date / /
Company applicant* Executed by Name of company and ABN			
in accordance with subsection 127 (1) or Full name	f the Corporations Act by author	ity of its director(s). Full name	
Signature of authorised person Control Control	Date / /	Signature of authorised person Control Control	Date / /
Contact number		Contact number	

^{*} 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.