

# Westpac Margin Lending Third Party Security Provider Application Form

Complete this form when security for your Westpac Margin Loan Facility is being provided (owned) by someone other than the borrower – i.e. a third party security provider. Please note that in the case of joint borrowers, where the security being provided is owned by one of the borrowers only, that borrower must also complete a Third Party Security Application Form.

#### Form instructions

### Before you complete this Third Party Security Provider Application, please ensure that you read:

- 1. the Westpac Margin Lending Margin Loan Product Disclosure Statement;
- 2. the Westpac Margin Lending Facility Agreement;
- 3. the BT Securities Limited Financial Services Guide; and
- 4. the CHESS explanation, Supplementary risk disclosure statement and Third Party Security Provider additional risk disclosure statement each of which are found in the Westpac Margin Lending Facility Agreement.

You can download the above documents from our website <u>westpac.com.au/marginloan</u> or you can phone us on 1800 816 222 for more information.

### Who can provide third party security on a Westpac Margin Loan Facility.

Westpac Margin Lending will accept Third Party Security Applications from:

- 1. Individuals who are Australian residents for tax purposes and reside in Australia.
- 2. Australian proprietary companies which are not subsidiaries of listed companies. The company directors must be Australian residents for tax purposes and reside in Australia.

## How to complete this Third Party Security Provider Application Form.

- 1. This form contains mandatory sections to complete, which are dependent on the entity providing the third party security ie individual or company.
- 2. The checklist opposite will assist you to complete this Third Party Security Provider Application Form accurately. You may care to tick v the relevant sections as you go, to ensure that you are accurately completing the form, and that you are providing any additional attachments required to support this application.
- 3. Please use BLACK PEN and print in clear CAPITAL LETTERS.

## Mandatory Sections for Completion per Third Party Security Provider Type.

Third Party Security Provider Type	Complete	Description/Comment
Individual Third Party Security Providers	Section 1	Name of Applicant
	Section 2	Individual Third Party Security Provider - Personal Details
	Section 6	Third Party Security Provider Signing Section
Company Third Party Security Providers	Section 1	Name of Borrower
	Section 3	Company Third Party Security Provider Details
	Section 6	Third Party Security Provider Signing Section



# Form instructions (continued)

## Approval of your Third Party Security Provider Application.

Please note that all applications are subject to our approval.

Westpac Margin Lending will contact you, the borrower or any nominated financial adviser to notify you of the decision and/ or any additional information and conditions. We may require evidence of independent legal advice prior to accepting you as a Third Party Security Provider.

# Submitting your Third Party Security Provider Application Form.

The **original** of this form and any other required information must be sent to:

1. Name of borrower to whom Third Party Security is to be applied

Westpac Margin Lending GPO Box 3917, Sydney NSW 2001

#### **Questions?**

If you have any questions regarding completing this form, please call us on 1800 816 222. Phone lines are available Mon - Fri from 8.30am - 5.30pm (Sydney time).

Borrower's name(s)			
Borrower's client code			
2. Individual Third Party Security Providers - personal	details		
For a Third Party Security Application consisting of more than additional Third Party Security Application Form, and attach a Westpac Margin Loan Facility.			
2A. Individual Third Party Security Provider 1.			
Title: Mr Mrs Miss Ms Other			
Given name(s) (include first and middle names)			
Surname			
Daytime contact number	Date of birth		
( )	/ /		
Email address*			
* In the future, we may elect to email correspondence to you.  Current residential address (PO Box is not acceptable)			
Current residential address (FO Box is not acceptable)			



2. Individual Third Party Security Providers - personal details (continued)		
Mailing address (write 'AS ABOVE' if the same as your current residential address. We may use this address for future correspondence, including for CHESS purposes.)		
Tax file number (TFN) or exemption code <sup>1</sup>		
2B. Individual Third Party Security Provider 2.		
Given name(s) (include first and middle names)		
Surname		
Daytime contact number	Date of birth	
( )	/ /	
Email address*		
* In the future we proved out to enseil correspondence to your		
* In the future, we may elect to email correspondence to you.  Current residential address (PO Box is not acceptable)		
Mailing address (write 'AS ABOVE' if the same as your current residential address. We may use this address for future correspondence, including for CHESS purposes.)		
Tax file number (TFN) or exemption code <sup>1</sup>		
3. Company Third Party Security Provider		
3A. Company details.		
Full name of company as registered by ASIC		
Australian Company Number (ACN)	Australian Business Number (ABN) or exemption code <sup>1</sup>	
Tax file number (TFN) or exemption code <sup>1</sup>		



3. Company Third Party Security Provider (continued)		
Mailing address (We may use this address for future correspondence, including for CHESS purposes.)		
Name of contact person		
Daytime contact number		
Email address*		
* In the future, we may elect to email correspondence to you.		
3B. Company Third Party Security Provider director details.		
How many directors are there?		
All company directors are to complete this section. If there are more than two company directors, attach a separate sheet.		
Director 1.		
Title: Mr Mrs Miss Ms Other		
Given name(s) (include first and middle names)		
Surname		
Daytime contact number Date of birth		
( ) / /		
Email address*		
* In the future, we may elect to email correspondence to you.  Current residential address (PO Box is not acceptable)		
Mailing address (write 'AS ABOVE' if the same as your current residential address. We may use this address for future correspondence, including for CHESS purposes.)		



3. Company Third Party Security Provider (continued)		
Director 2.		
Title: Mr Mrs Miss Ms Other		
Given name(s) (include first and middle names)		
Surname		
Daytime contact number Date of birth		
( ) / /		
Email address*		
* In the future, we may elect to email correspondence to you.		
Current residential address (PO Box is not acceptable)		
Mailing address (write 'AS ABOVE' if the same as your current residential address. We may use this address for future correspondence, including for CHESS purposes.)		

I. We are authorised by Australian tax laws to collect your Tax File Number ('TFN'). If you quote your TFN, Exemption Code or ABN, you authorise us, the nominee and the sponsor to disclose it on your behalf in connection with all transactions under the facility and in respect of the mortgaged property. Providing your TFN, Exemption Code or ABN is not compulsory, but if you do not provide the applicable information, tax may be taken out of dividends and distributions at the highest marginal tax rate plus Medicare levy or you will need to supply your TFN or Exemption Code to share registries, fund managers and other parties directly for any holdings to avoid tax being withheld at the highest marginal rate from any dividends or other payments. It is not an offence to not provide your Tax File Number.

Any details you do provide us (including your TFN) that are personal information will be collected, used and disclosed in accordance with our Privacy Statement (in particular please see Section 11 as regards TFNs) which is available at <a href="https://westpac.com.au/privacy/privacy-statement">westpac.com.au/privacy/privacy-statement</a> or by calling us on 132 032.

## 4. Privacy statement

All personal information and credit-related information we collect about you is collected, used and disclosed by us in accordance with our Privacy Statement which is available at <a href="westpac.com.au/privacy/privacy-statement">westpac.com.au/privacy/privacy-statement</a> or by calling us on 132 032. Our Privacy Statement also provides information about how you can access and correct your personal information, and make a complaint. You do not have to provide us with any personal information or credit information but, if you don't, we may not be able to process your application or request.



## 5. Anti-Money Laundering and Counter-Terrorism Financing Act requirements

You confirm that:

- The account(s) will be held in the name of a person;
- The account(s) will not be held in trust; and
- If you are known by any other name, you have already provided your other name(s) to us or you will contact us to provide your other name(s) as part of your application for the account(s).

Note: It is an offence under the Anti-Money Laundering and Counter-Terrorism Financing Act 2006 to:

- give false or misleading information;
- receive a loan, credit card or deposit account in a false name.

# 6. Third Party Security Provider signing section

This section of the application comprises a deed.

#### 6A. Power of Attorney.

Without limiting any power of attorney given by me under the Westpac Margin Lending Facility Agreement (**Facility Agreement**), I appoint BT Securities Limited ABN 84 000 720 114 (the **Lender**) and BT (Queensland) Pty Limited ABN 49 009 818 875 (the **Nominee**) and each person who is at any time authorised by the **Lender** or a related body corporate of the **Lender** to exercise the powers contained in this power of attorney separately as my attorneys.

- 1. I agree to approve anything an attorney does under this power of attorney, until this power of attorney is revoked in accordance with its terms and each attorney becomes aware that it has been revoked.
- 2. I agree that this power of attorney cannot be revoked by me without the written consent of the Lender.
- 3. I give the authorisations, consents and acknowledgments set out in the Third Party Security Provider Application Form attached to this power of attorney.
- 4. I declare that the information given in the Third Party Security Provider Application Form is correct and that this power of attorney is given for valuable consideration.
- 5. I declare that the attorneys are authorised to do any act as a result of which a benefit may be conferred on an attorney.
- 6. An attorney may delegate to another person a power under this power of attorney and may appoint an attorney to act on their behalf, as a sub-attorney.
- 7. An attorney may, in my name:
  - (a) do everything needed (including completing any blanks) to execute and deliver the **Facility Agreement** and other documents listed in the Schedule in the Signing Section to this power of attorney and any other documents connected with them; and
  - (b) stamp and register at my cost any of the documents listed in the Schedule in the Signing Section to this power of attorney and any other document connected with them.
- 8. Without limiting clause 7, an attorney may also in my name execute any document or do any act in connection with:
  - (a) any notification to a share registry, **securities** issuer or CHESS of a change of registration details (including the registered name) of any of my **securities** to correspond with the details advised by me to the **Lender** from time to time;
  - (b) any conversion request form, transfer form or other document, in relation to any **securities** for the purpose of converting or transferring those **securities** to or from my participant holding with the **Nominee** or the **Lender** and/or an agent of either of them;
  - (c) any document which relates in any way to my **securities** or entitlements that form part of the loan portfolio or that are otherwise related to the **Facility Agreement** including:
    - (i) directions to a company or share registry as to the address for payment of entitlements; and
    - (ii) any application for the issue of share certificate or other documents evidencing title pursuant to section 1070D of the Corporation Act in respect of **securities**; and



## 6. Third Party Security Provider signing section (continued)

- (d) any direction to the Nominee as nominee under the Facility Agreement; or
- (e) stamping and registering any documents; or
- (f) any instructions to a sponsor of my participant sponsored holding.
- 9. I declare that:
  - (a) I am the legal owner of the **securities** and entitlements that form the part of the loan portfolio applicable to me and am entitled to authorise the attorney to act in accordance with this power of attorney;
  - (b) anything done in exercising the powers given under this power of attorney will be as binding on me and anyone else as if I had done the acts myself; and
  - (c) any person who deals with the attorneys in good faith may accept as true, a statement the attorney signs which says:
    - (i) an act of the attorney is a proper exercise of the powers under this power of attorney; or
    - (ii) this power of attorney has not been revoked.
- 10. I agree to indemnify the attorneys against, and I must therefore pay the attorneys on demand for any reasonable loss or costs they suffer or incur in exercising powers under this power of attorney.
- 11. The meaning of the words printed **like this** and some other important words are explained in the section Meaning of words and interpretation in the **Facility Agreement** or in this power of attorney.
- 12. I, me, mine and similar terms are references to each person identified as a **Third Party Security Provider** in the Westpac Margin Lending Loan Application and executes this power of attorney separately.

#### 6B. Signing section.

#### Schedule.

- a) a Westpac Margin Lending Facility Agreement between me, the **Lender**, the **Nominee**, Value Nominees Pty Limited ABN 90 001 827 998 and anyone else who is joined in the agreement, in whatever capacity.
- b) one or more CHESS sponsorship agreements substantially in the form set out in the **Facility Agreement** relating to securities and entitlements I hold either alone or together with another person.
- c) any instrument and any form dealing in any way or relating to the **mortgaged property** including transfers, exercises of options, redemption requests and any controlling participant arrangement in relation to uncertificated securities.

## By signing below, you acknowledge, declare and confirm that:

- you have read and accept the terms of the Westpac Margin Lending Margin Loan Product Disclosure Statement, the
  Westpac Margin Lending Facility Agreement (Facility Agreement), the Supplementary risk disclosure statement, the
  Third Party Security Provider additional risk disclosure statement, the BT Securities Limited Financial Services Guide,
  the CHESS explanation and the power of attorney conditions,
- you accept the risks of margin lending and your obligations if we approve your application, and acknowledge that we have recommended you obtain independent legal and financial advice prior to becoming a Third Party Security Provider,
- you give our officers and us the power to enter into agreements, which bind you and do other things on your behalf without referring to you, including to complete your HIN details in your sponsorship agreement,
- you grant the Power of Attorney in Section 6A of this Third Party Security Provider Application Form,
- all the information you have provided on this Third Party Security Provider Application Form is true and correct,
- · you are an Australian resident for tax purposes residing in Australia, and
- you acknowledge receiving a copy of the sponsorship agreement contained in the Westpac Margin Lending Facility Agreement for your records.
- Where the Third Party Security Provider in this application is a company, you consider that the provision of the third party security is considered to be in the best interest of the company because: (Company Third Party Security Providers must complete this)



# 6. Third Party Security Provider signing section (continued)

For Company Third Party Security Providers, either two Directors, or one Director and the Secretary, or the Sole Director and Sole Secretary must sign. Indicate your company capacity by marking the appropriate box below your signature.

Company Third Party Security Providers do not need to have their signatures witnessed in this section. Signed, Sealed and Delivered as a Deed on (The date must be completed):

Date		
/ /		
Signature of <b>Third Party Security Provider 1</b>	Date	
X	/ /	
Full name of <b>Third Party Security Provider 1</b> (please print)		
☐ Director ☐ Sole Director and Secretary		
Signature of <b>Witness</b>	Date	
X	/ /	
Full name of <b>Witness</b> (please print)		
	to this own live tion 7	
[Witness must be 18 years and over and an independent party	to this application.]	
Signature of <b>Third Party Security Provider 2</b>	Date	
X	/ /	
Full name of <b>Third Party Security Provider 2</b> (please print)		
☐ Director ☐ Company Secretary		
Signature of <b>Witness</b>	Date	
X	/ /	
Full name of Witness (please print)		

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[Witness must be 18 years and over and an independent party to this application.]