

Margin Lending Facility

Application Forms

Return completed application forms along with all supporting documentation to:

Morgan Stanley Wealth Management
Attn: Margin Lending
PO Box 360 Collins Street West Vic 8007
Tel 03 9188 2343
Fax 02 9775 2714
Toll Free 1800 062 794
Email marginadmin@morganstanley.com

For investors trading through a party other than Morgan Stanley Wealth Management, please review the checklist before submitting your application.

Checklist

Please review the checklist before submitting your application

All Applicants

Attach copies of identification for all Borrowers

All Borrower Applicants

- Complete Part A: Borrower Application
- Attach copies of proof of income – refer Section 8 of Part A

Company Applicants

Cheque attached for application fee

Trust Applicants

- Legally certified copy of the dated and stamped trust deed including any subsequent amendments
- Cheque attached for application fee

OptionWriter

- Complete Part B: Client Agreement – OptionWriter
- Complete Registered Holder Collateral Authorisation Form

Refinance/Transfer Securities

Complete Part C: Authority to Refinance/Transfer Securities Form

Link Personal Bank Account

Complete Part D: Direct Debit or Credit Account Details Form

GearInvest

Complete Part E: Client Agreement – GearInvest

Information Collection Statement

Morgan Stanley Wealth Management collects, holds, uses and discloses your information (including your personal information) for various purposes including providing you with financial products and services that help meet your financial needs and objectives, administering and operating those services, carrying out credit and other background checks, marketing products and services to you, exercising and defending its legal rights, complying with its legal and regulatory obligations anywhere in the world, improving, supporting and enhancing its products and services, internal training, monitoring and other legitimate business purposes.

Morgan Stanley Wealth Management may disclose your information (including your personal information) to its associated firms, vendors or other persons processing your information on its behalf (e.g. credit reporting agencies). Disclosure to these entities may involve the disclosure of your information outside Australia to countries which do not offer the same level of protection as may be enjoyed in Australia.

Morgan Stanley Wealth Management's privacy policy ("Privacy Policy") contains further details on its information handling practices and explains in more detail what personal information it collects, methods of collection, purposes of collection, retention, use and disclosure, when it may disclose your personal information, who it discloses your personal information to, the countries it may disclose your personal information to and how you may opt out from receiving marketing information. The Privacy Policy also explains your rights including how you may access and request correction of your personal information or complain about a breach of the Australian Privacy Principles by Morgan Stanley Wealth Management. The Privacy Policy is available at www.morganstanley.com.au/privacypolicy.

Before providing us with any information regarding an individual rather than yourself in connection with this document you should ensure that he or she knows that you will be providing his or her information to us and is aware of and has access to the information contained in this Information Collection Statement regarding our collection, use, processing, disclosure and overseas disclosure of his or her information, his or her data protection rights and the possibility of monitoring or recording of his or her communications.

Margin Lending Borrower Application Form

Effective Date: 20 August 2018

Issued by Morgan Stanley Wealth Management Australia Pty Ltd ABN 19 009 145 555 Australian Financial Services Licence No. 240813

How to Establish a Margin Lending Facility

Before you Apply

Ensure that you have read and understood:

- The Morgan Stanley Wealth Management Margin Lending Product Disclosure Statement;
- The Agreement, including the Margin Lending Terms and Conditions;
- The Risk Disclosure Statement (contained in the Margin Lending Terms and Conditions); and
- The Morgan Stanley Wealth Management Financial Services Guide.

In addition, please ensure that you have also checked that your proposed investments form part of the approved list of securities available at <http://www.morganstanley.com.au/marginlending>

To comply with our obligations under the Australian *Anti-Money Laundering and Counter-Terrorism Financing Act (2006)* and *Anti-Money Laundering and Counter-Terrorism Financing Rules (2007) (No.1)* (collectively, “AML/CTF Act and Rules”), we must collect and verify certain information about each of our clients. In some instances enhanced due diligence and additional information may be required in order to complete the account opening process and ensure our continued compliance with the AML/CTF Act and Rules.

Source of Wealth

In complying with our obligations under the AML/CTF Act and Rules we are required to collect source of wealth information for every account. In Section 9 of this application form, please provide as much detail as possible including details of businesses or past businesses and sales proceeds, investments, inheritances, trust distributions, salaries and wages.

Additional Information Required

Individual/Joint Applications

Identification Requirements:

Each account signatory must provide an original or an original certified* true copy of identity document(s) as set out below:

- A valid photo ID issued by the government that bears your signature (e.g. drivers licence, passport);

OR

- A valid non-photo ID issued by the government (e.g. birth certificate together with a marriage certificate if applicable, citizenship card, or pension card) accompanied by:
 - Valid ID that bears your signature; and
 - A rates notice or utility bill that shows your current residential address and is no more than three months old.

If you are not an Australian resident or you are a citizen of another country, you may be required to provide additional documentation. Please speak to your financial adviser for details.

An individual appointed as Power of Attorney or equivalent over an applicant must comply with the identification requirements set out under “Individual/Joint Applications”.

Borrower Sections to complete:

- ✓ Section 1
- ✓ Section 2
- ✓ Section 6 (as relevant)
- ✓ Section 7 (as relevant)
- ✓ Section 8
- ✓ Section 9
- ✓ Section 10
- ✓ Section 11 (as relevant)
- ✓ Section 13
- ✓ Signature page Section 18

Company Applications, Incorporated Associations and Bodies

Identification Requirements:

Each signing Director(s)/Company Secretary/Officeholder must comply with the identification requirements set out under “Individual/Joint Applications”.

Each beneficial owner that ultimately controls or owns (directly or indirectly) 25% or greater of the entity must comply with the identification requirements set out under “Individual/Joint Applications”.

If the issued capital is held for the underlying beneficial owner by a nominee shareholder, a statement which details the underlying beneficial ownership must be attached and the underlying beneficial owner must comply with the identification requirements set out under “Individual/Joint Applications”.

Borrower Sections to complete:

- ✓ Section 1
- ✓ Section 3
- ✓ Section 6 (as relevant)
- ✓ Section 7 (as relevant)
- ✓ Section 8
- ✓ Section 9
- ✓ Section 10
- ✓ Section 11 (as relevant)
- ✓ Section 13
- ✓ Signature page Section 19

Trust Applications

Identification Requirements:

Each signing trustee or signatory must comply with the identification requirements set out under “Individual/Joint Applications”. Where the trustee is a company please also comply with the company identification requirements set out under “Company Applications, Incorporated Associations and Bodies”.

A protector, appointer or beneficiary of a trust that is exercising ultimate effective control over the trust must comply with the identification requirements set out under “Individual/Joint Applications”.

Trusts, including superannuation funds, must supply an original certified* true copy or certified extract of the Trust Deed with subsequent amendments, which identifies the name of the Trust, name of the Trustees, the country where the Trust was established and creation date, the Settlor, the beneficiaries or class of beneficiaries, and the execution page of all parties.

Estates

Estates must supply an original certified* true copy of:

- The Will (where no probate or estate value is less than \$25,000) and Small Estate Indemnity form; or
- The Grant of Probate (where estate value is greater than \$25,000); or
- If no Will, a letter of administration from the court.

Each signing executor must comply with the identification requirements set out under “Individual/Joint Applications”.

Where legal representatives have been appointed to act on behalf of the executors an authority to act document must be signed by all executors.

Where a testamentary trust is to be established and the Certified Will is acting as the trust deed, the Certified Will must be provided.

All other Applicants including Partnerships, Unincorporated Bodies and Clubs, Registered Co-ops or Government Bodies

Identification Requirements:

Each signing applicant/officeholder must comply with identification requirements set out under “Individual/Joint Applications”.

Each beneficial owner that ultimately controls or owns (directly or indirectly) 25% or greater of the entity must comply with the identification requirements set out under “Individual/Joint Applications”.

You must also provide an original certified* true copy of executed documents of formation (e.g. partnership agreement, constitution) with any subsequent amendments.

Borrower Sections to complete:

- ✓ Section 1
- ✓ Section 2 (non corporate trustee)
- ✓ Section 3 (corporate trustee)
- ✓ Section 4
- ✓ Section 6 (as relevant)
- ✓ Section 7 (as relevant)
- ✓ Section 8
- ✓ Section 9
- ✓ Section 10
- ✓ Section 11 (as relevant)
- ✓ Section 13
- ✓ Signature page Section 18 (non corporate trustee)
- ✓ Signature page Section 19 (corporate trustee)

Borrower Sections to complete:

- ✓ Section 1
 - ✓ Section 5
 - ✓ Section 6 (as relevant)
 - ✓ Section 7 (as relevant)
 - ✓ Section 8
 - ✓ Section 9
 - ✓ Section 10
 - ✓ Section 11 (as relevant)
 - ✓ Section 13
 - ✓ Signature page Section 19
-

Tax File Number Collection

Collection of tax file numbers (TFNs) is authorised, the use and disclosure of TFNs are strictly regulated by the tax laws and Privacy Act. It is not compulsory to quote TFNs, however, tax may be deducted at the highest marginal tax rate plus Medicare levy if you do not quote your TFN or claim an exemption.

If you elect to quote your TFN in the Application Form, you appoint Morgan Stanley Wealth Management as your agent and authorise us to apply your TFN to any investment bodies with whom we act on your behalf and apply to all transactions under the Agreement in respect of the mortgaged property. This authority will apply to existing and new investments from the date this form is processed by Morgan Stanley Wealth Management. This authority will apply until such time as it is revoked in writing to Morgan Stanley Wealth Management.

* Certification must either be on each page or you must have the following statement on the front page of the deed: “I hereby certify that this and the following (insert page numbers) pages are a true and correct copy of the original document.” The person certifying must include their full name, date and capacity in which they are certifying the document.

The easiest way to certify your document is to either visit our office in person (where we will sight the documents free of charge), or visit an Australia Post outlet where they can be certified and posted to our office. For a full list of who can certify, visit www.morganstanley.com.au.

Part A: Borrower Application

(It is compulsory to complete Part A.)

Section 1 – Account Details

INTERNAL USE ONLY

ADVISER NAME AND ADVISER COMPANY (IF APPLICABLE)

ADVISER CODE (IF APPLICABLE)

ADVISER PHONE NUMBER

ADVISER MOBILE NUMBER

ADVISER FAX NUMBER

ADVISER EMAIL ADDRESS

ACCOUNT NAME

BORROWER NAME

BORROWER DESIGNATION

POSTAL ADDRESS FOR ACCOUNT (THIS ADDRESS WILL BE USED FOR ALL FUTURE CORRESPONDENCE FROM MORGAN STANLEY)

SUBURB

STATE

POSTCODE

COUNTRY

REGISTRATION ADDRESS FOR ACCOUNT (FOR CORRESPONDENCE FROM SHARE REGISTRIES)

SUBURB

STATE

POSTCODE

COUNTRY

Is any applicant, director, authorised representative or beneficiary named in this application form an employee of Morgan Stanley? Yes No If Yes, please provide MSID: _____

Section 2 – Individual Applicants

Individual 1/Trustee 1 Borrower

Applying as: Individual Trustee

Title: Mr. Mrs. Ms. Miss Dr. Other: _____

GIVEN NAMES (DO NOT USE INITIALS)

SURNAME

CURRENT RESIDENTIAL ADDRESS (CANNOT BE A PO BOX)

TICK IF SAME AS POSTAL ADDRESS ABOVE

TICK IF SAME AS REGISTRATION ADDRESS ABOVE

SUBURB

STATE

POSTCODE

COUNTRY

DATE OF BIRTH

TFN (OR EXEMPTION IF APPLICABLE)

COUNTRY/IES OF CITIZENSHIP

COUNTRY OF BIRTH

Marital Status: Single Married Widowed De Facto Divorced Number of Dependents: _____

OCCUPATION (FORMER, IF RETIRED)

NAME OF EMPLOYER

INDUSTRY

Are you retired Yes No If no, what year do you expect to retire: _____

MSWM0552 08/18

Contact

WORK PHONE _____ HOME PHONE _____ FAX _____

MOBILE PHONE _____ EMAIL ADDRESS _____

Have either you, an immediate family member, or a close associate, ever been entrusted with a prominent public role or function (e.g. a senior official in the executive, legislative, military, administrative or judicial branches of government, a senior executive of a government enterprise/agency, or a member of a ruling royal family)? Yes No

For Notification Purposes (e.g. margin calls, credit limit buffers); please select your preferred method of contact:

- Email SMS Work Phone Home Phone
- YES, I would like to receive "margin buffer notifications"

Individual 2/Trustee 2 Borrower (if applicable)

Applying as: Individual Trustee

Title: Mr. Mrs. Ms. Miss Dr. Other: _____

GIVEN NAMES (DO NOT USE INITIALS) _____ SURNAME _____

CURRENT RESIDENTIAL ADDRESS (CANNOT BE A PO BOX) TICK IF SAME AS POSTAL ADDRESS ABOVE TICK IF SAME AS REGISTRATION ADDRESS ABOVE

SUBURB _____ STATE _____ POSTCODE _____ COUNTRY _____

DATE OF BIRTH _____ TFN (OR EXEMPTION IF APPLICABLE) _____

COUNTRY/IES OF CITIZENSHIP _____ COUNTRY OF BIRTH _____

Marital Status: Single Married Widowed De Facto Divorced Number of Dependents: _____

OCCUPATION (FORMER, IF RETIRED) _____ NAME OF EMPLOYER _____ INDUSTRY _____

Are you retired Yes No If no, what year do you expect to retire: _____

Contact

WORK PHONE _____ HOME PHONE _____ FAX _____

MOBILE PHONE _____ EMAIL ADDRESS _____

Have either you, an immediate family member, or a close associate, ever been entrusted with a prominent public role or function (e.g. a senior official in the executive, legislative, military, administrative or judicial branches of government, a senior executive of a government enterprise/agency, or a member of a ruling royal family)? Yes No

For Notification Purposes (e.g. margin calls, credit limit buffers); please select your preferred method of contact:

- Email SMS Work Phone Home Phone
- YES, I would like to receive "margin buffer notifications"

Individual 3/Trustee 3 Borrower (if applicable)

Applying as: Individual Trustee

Title: Mr. Mrs. Ms. Miss Dr. Other: _____

GIVEN NAMES (DO NOT USE INITIALS) SURNAME

CURRENT RESIDENTIAL ADDRESS (CANNOT BE A PO BOX) TICK IF SAME AS POSTAL ADDRESS ABOVE TICK IF SAME AS REGISTRATION ADDRESS ABOVE

SUBURB STATE POSTCODE COUNTRY

DATE OF BIRTH TFN (OR EXEMPTION IF APPLICABLE)

COUNTRY/IES OF CITIZENSHIP COUNTRY OF BIRTH

Marital Status: Single Married Widowed De Facto Divorced Number of Dependents: _____

OCCUPATION (FORMER, IF RETIRED) NAME OF EMPLOYER INDUSTRY

Are you retired Yes No If no, what year do you expect to retire: _____

Contact

WORK PHONE HOME PHONE FAX

MOBILE PHONE EMAIL ADDRESS

Have either you, an immediate family member, or a close associate, ever been entrusted with a prominent public role or function (e.g. a senior official in the executive, legislative, military, administrative or judicial branches of government, a senior executive of a government enterprise/agency, or a member of a ruling royal family)? Yes No

For Notification Purposes (e.g. margin calls, credit limit buffers); please select your preferred method of contact:

Email SMS Work Phone Home Phone

YES, I would like to receive "margin buffer notifications"

For additional applicants, please complete the "Additional Applicant/Signatory Form" on page 39 and sign under Sections 13 & 18 – Part A and Parts B, C, D & E.

Section 3 – Company Applicants, Incorporated Associations and Bodies

Company Borrower

Type of company: Public Private
Applying as: Company Company Trustee

COMPANY NAME (AS REGISTERED BY ASIC)

ACN/ABN

TFN (OR EXEMPTION IF APPLICABLE)

REGISTERED OFFICE ADDRESS (CANNOT BE A PO BOX) TICK IF SAME AS POSTAL ADDRESS ABOVE TICK IF SAME AS REGISTRATION ADDRESS ABOVE

SUBURB

STATE

POSTCODE

COUNTRY

PRINCIPAL PLACE OF BUSINESS (IF DIFFERENT TO THE REGISTERED ADDRESS) TICK IF SAME AS POSTAL ADDRESS ABOVE TICK IF SAME AS REGISTRATION ADDRESS ABOVE

SUBURB

STATE

POSTCODE

COUNTRY

COMPANY BUSINESS ACTIVITY

Director and Guarantor Details

We require a minimum of two directors or a director and company secretary (unless a sole director) to complete this section. Company and Company Trustee borrowers must have directors guarantee in place prior to the margin lending facility being approved. This guarantee is subject to the declarations within Section 14 of this Application Form and is not limited to the Agreement.

For additional applicants, please complete the "Additional Applicant/Signatory Form" on page 39.

Director 1

Title: Mr. Mrs. Ms. Miss Dr. Other: _____

GIVEN NAMES (DO NOT USE INITIALS)

SURNAME

DATE OF BIRTH

COUNTRY/IES OF CITIZENSHIP

COUNTRY OF BIRTH

TFN

Tick box if exempt
TYPE OF EXEMPTION

If you are **not** an Australian resident for tax purpose, please specify your country of tax residence: _____

OCCUPATION (FORMER, IF RETIRED)

NAME OF EMPLOYER

INDUSTRY

Have either you, an immediate family member, or a close associate, ever been entrusted with a prominent public role or function (e.g. a senior official in the executive, legislative, military, administrative or judicial branches of government, a senior executive of a government enterprise/agency, or a member of a ruling royal family)? Yes No

CURRENT RESIDENTIAL ADDRESS (CANNOT BE A PO BOX) TICK IF SAME AS POSTAL ADDRESS ABOVE TICK IF SAME AS REGISTRATION ADDRESS ABOVE

SUBURB

STATE

POSTCODE

COUNTRY

Contact

WORK PHONE

HOME PHONE

FAX

MOBILE PHONE

EMAIL ADDRESS

MSWM0552_08/18

For Notification Purposes (e.g. margin calls, credit limit buffers); please select your preferred method of contact:

- Email SMS Work Phone Home Phone
- YES, I would like to receive "margin buffer notifications"

Director 2

Title: Mr. Mrs. Ms. Miss Dr. Other: _____

GIVEN NAMES (DO NOT USE INITIALS)

SURNAME

DATE OF BIRTH

COUNTRY/IES OF CITIZENSHIP

COUNTRY OF BIRTH

TFN

Tick box if exempt

TYPE OF EXEMPTION

If you are **not** an Australian resident for tax purpose, please specify your country of tax residence: _____

OCCUPATION (FORMER, IF RETIRED)

NAME OF EMPLOYER

INDUSTRY

Have either you, an immediate family member, or a close associate, ever been entrusted with a prominent public role or function (e.g. a senior official in the executive, legislative, military, administrative or judicial branches of government, a senior executive of a government enterprise/agency, or a member of a ruling royal family)? Yes No

CURRENT RESIDENTIAL ADDRESS (CANNOT BE A PO BOX)

TICK IF SAME AS POSTAL ADDRESS ABOVE

TICK IF SAME AS REGISTRATION ADDRESS ABOVE

SUBURB

STATE

POSTCODE

COUNTRY

Contact

WORK PHONE

HOME PHONE

FAX

MOBILE PHONE

EMAIL ADDRESS

For Notification Purposes (e.g. margin calls, credit limit buffers); please select your preferred method of contact:

- Email SMS Work Phone Home Phone
- YES, I would like to receive "margin buffer notifications"

For Incorporated Associations and Bodies

Please provide the full name and date of birth for each of the officeholders below

Chairman

GIVEN NAME(S), SURNAME

DATE OF BIRTH

Politically Exposed Person (PEP)*

Yes No

Secretary

GIVEN NAME(S), SURNAME

DATE OF BIRTH

Yes No

Treasurer

GIVEN NAME(S), SURNAME

DATE OF BIRTH

Yes No

Additional Director Details

For all Private/Proprietary companies with greater than two directors, provide names of additional directors. If any of these directors will be a signatory on the account, please complete the "Additional Applicant/Signatory Form" on page 39.

Given Name(s), Surname	Date of Birth	Politically Exposed Person (PEP)*
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Have either you, an immediate family member, or a close associate, ever been entrusted with a prominent public role or function (e.g. a senior official in the executive, legislative, military, administrative or judicial branches of government, a senior executive of a government enterprise/agency, or a member of a ruling royal family)?*

Beneficial Owners

Is Director 1 a Beneficial Owner who ultimately controls or owns (directly or indirectly) 25% or greater of the entity? Yes No
 Is Director 2 a Beneficial Owner who ultimately controls or owns (directly or indirectly) 25% or greater of the entity? Yes No
 For Beneficial Owners (other than those that may be detailed above) who ultimately controls or owns (directly or indirectly) 25% or greater of the entity, please complete the “Beneficial Owner Form” on page 38.
 If the issued capital is held for the underlying beneficial owner by a nominee shareholder, a statement which details the underlying beneficial ownership must be attached and the underlying beneficial owner must comply with the identification requirements set out under “Individual/Joint Applications”. Please complete the “Beneficial Owner Form” on page 38.

Section 4 – Trust Applicant

(Trustee details should be completed in Sections 2 or 3, as relevant.)

Trust Borrower

Type of Trust: Family Charitable Estate Other: _____

Trust Description: Discretionary Testamentary Other: _____

TRUST NAME (AS PER THE TRUST DEED)

NAME OF APPLICANT(S) ACTING AS TRUSTEE

COUNTRY ESTABLISHED

NAME OF SETTLOR
 POLITICALLY EXPOSED PERSON (PEP)* YES NO

TFN (OF TRUST, ENTITY OR EXEMPTION IF APPLICABLE)

ABN

Trusts, including superannuation funds, must supply an original certified copy or certified extract of the Trust Deed with subsequent amendments, which identifies the name of the Trust, name of the Trustees, the country where the trust was established and creation date, the Settlor, the beneficiaries or class of beneficiaries, and the execution page of all parties.

A protector, appointer or beneficiary of a trust that is exercising ultimate effective control over the trust must comply with the identification requirements set out under “Individual/Joint Applications”. Please complete the “Beneficial Owner Form” on page 38.

Beneficiaries of the Trust

Given Name(s), Surname	Date of Birth	Politically Exposed Person (PEP)*
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Have either you, an immediate family member, or a close associate, ever been entrusted with a prominent public role or function (e.g. a senior official in the executive, legislative, military, administrative or judicial branches of government, a senior executive of a government enterprise/agency, or a member of a ruling royal family)?*

Section 5 – All Other Applicants

Please select one of the following:

- Partnership Registered Co-ops Unincorporated Association or Body
 Australian Government Body Foreign Government Body

FULL NAME/ACCOUNT DESIGNATION

COUNTRY ESTABLISHED

NAME OF REGULATOR

BUSINESS REGISTRATION NUMBER (IF APPLICABLE: ACN/ABN/ARBN OR FOREIGN)

TFN (OR EXEMPTION IF APPLICABLE)

REGISTERED OFFICE ADDRESS (CANNOT BE A PO BOX)

TICK IF SAME AS POSTAL ADDRESS ABOVE

TICK IF SAME AS REGISTRATION ADDRESS ABOVE

SUBURB

STATE

POSTCODE

COUNTRY

PRINCIPAL PLACE OF BUSINESS (IF DIFFERENT TO THE REGISTERED ADDRESS)

TICK IF SAME AS POSTAL ADDRESS ABOVE

TICK IF SAME AS REGISTRATION ADDRESS ABOVE

SUBURB

STATE

POSTCODE

COUNTRY

COMPANY BUSINESS ACTIVITY

For Registered Co-op or Unincorporated Body

Please provide the full name and date of birth for each of the officeholders below

Chairman

Politically Exposed Person (PEP)*

GIVEN NAME(S), SURNAME

DATE OF BIRTH

Yes No

Secretary

GIVEN NAME(S), SURNAME

DATE OF BIRTH

Yes No

Treasurer

GIVEN NAME(S), SURNAME

DATE OF BIRTH

Yes No

**Have either you, an immediate family member, or a close associate, ever been entrusted with a prominent public role or function (e.g. a senior official in the executive, legislative, military, administrative or judicial branches of government, a senior executive of a government enterprise/agency, or a member of a ruling royal family)?*

Officeholder 1/Applicant 1

Title: Mr. Mrs. Ms. Miss Dr. Other: _____

GIVEN NAMES (DO NOT USE INITIALS)

SURNAME

CURRENT RESIDENTIAL ADDRESS (CANNOT BE A PO BOX)

TICK IF SAME AS POSTAL ADDRESS ABOVE

TICK IF SAME AS REGISTRATION ADDRESS ABOVE

SUBURB

STATE

POSTCODE

COUNTRY

OCCUPATION (FORMER, IF RETIRED)

NAME OF EMPLOYER

INDUSTRY

DATE OF BIRTH

COUNTRY/IES OF CITIZENSHIP

COUNTRY OF BIRTH

Contact

WORK PHONE	HOME PHONE	FAX
MOBILE PHONE	EMAIL ADDRESS	

Have either you, an immediate family member, or a close associate, ever been entrusted with a prominent public role or function (e.g. a senior official in the executive, legislative, military, administrative or judicial branches of government, a senior executive of a government enterprise/agency, or a member of a ruling royal family)? Yes No

Officeholder 2/Applicant 2

Title: Mr. Mrs. Ms. Miss Dr. Other: _____

GIVEN NAMES (DO NOT USE INITIALS) _____ SURNAME _____

CURRENT RESIDENTIAL ADDRESS (CANNOT BE A PO BOX) TICK IF SAME AS POSTAL ADDRESS ABOVE TICK IF SAME AS REGISTRATION ADDRESS ABOVE

SUBURB _____ STATE _____ POSTCODE _____ COUNTRY _____

OCCUPATION (FORMER, IF RETIRED) _____ NAME OF EMPLOYER _____ INDUSTRY _____

DATE OF BIRTH _____

COUNTRY/IES OF CITIZENSHIP _____ COUNTRY OF BIRTH _____

Contact

WORK PHONE	HOME PHONE	FAX
MOBILE PHONE	EMAIL ADDRESS	

Have either you, an immediate family member, or a close associate, ever been entrusted with a prominent public role or function (e.g. a senior official in the executive, legislative, military, administrative or judicial branches of government, a senior executive of a government enterprise/agency, or a member of a ruling royal family)? Yes No

Section 6 – Authorised Representative (if applicable)

By appointing an authorised representative, you agree that Morgan Stanley Wealth Management may discuss your account with that person, and may take instructions for the purchase and sale of securities from that person.

Authorised Representative 1

Title: Mr. Mrs. Ms. Miss Dr. Other: _____

GIVEN NAMES (DO NOT USE INITIALS) _____ SURNAME _____

CURRENT RESIDENTIAL ADDRESS (CANNOT BE A PO BOX) _____

SUBURB _____ STATE _____ POSTCODE _____ COUNTRY _____

DATE OF BIRTH _____ RELATIONSHIP TO APPLICANT _____

COUNTRY/IES OF CITIZENSHIP _____ COUNTRY OF BIRTH _____

Contact

WORK PHONE	HOME PHONE	FAX
MOBILE PHONE	EMAIL ADDRESS	

Have either you, an immediate family member, or a close associate, ever been entrusted with a prominent public role or function (e.g. a senior official in the executive, legislative, military, administrative or judicial branches of government, a senior executive of a government enterprise/agency, or a member of a ruling royal family)? Yes No

Authorised Representative 2

Title: Mr. Mrs. Ms. Miss Dr. Other: _____

GIVEN NAMES (DO NOT USE INITIALS) _____ SURNAME _____

CURRENT RESIDENTIAL ADDRESS (CANNOT BE A PO BOX) _____

SUBURB _____ STATE _____ POSTCODE _____ COUNTRY _____

DATE OF BIRTH _____ RELATIONSHIP TO APPLICANT _____

COUNTRY/IES OF CITIZENSHIP _____ COUNTRY OF BIRTH _____

Contact

WORK PHONE	HOME PHONE	FAX
MOBILE PHONE	EMAIL ADDRESS	

Have either you, an immediate family member, or a close associate, ever been entrusted with a prominent public role or function (e.g. a senior official in the executive, legislative, military, administrative or judicial branches of government, a senior executive of a government enterprise/agency, or a member of a ruling royal family)? Yes No

Section 7 – Authority to Provide Dividend/Cash Payment Instructions to Share Registries

If you would like Morgan Stanley Wealth Management to advise the relevant share registries of your bank account details, for cash dividend payments and other cash payments (e.g. capital returns), please select one of the following options:

Please arrange to have my cash dividends paid to my nominated bank account

ACCOUNT NAME _____

BANK _____ BRANCH _____

BRANCH NO. (BSB) _____ ACCOUNT NO _____

OR:

Please arrange to have my cash dividends paid to my margin lending facility.

NB: Cash dividends paid into your margin lending facility will be paid to your linked Cash Management Account, held in our nominee name.

Section 8 – Credit Assessment Questionnaire

All questions within this section must be completed to apply for a Margin Lending facility. By law, we are required to assess your suitability under the responsible lending obligations. The questions must be answered as per the account type you are applying for, e.g. joint borrowers should provide combined financial position.

Supporting Information required:

Individual/Joint	If salaried , two most recent group certificates, tax returns or pay slips. If self-employed , two most recent tax returns and copy of signed business accounts for the last two years.
Company	The company to provide two most recent tax returns; and financial statements (statements of financial performance and position) for the last two years.
Trust	Trustee(s) to provide two most recent tax returns; and financial statements (statements of financial performance and position) for the last two years.

1. What maximum credit limit are you applying for on your margin loan? _____
2. What is your risk tolerance?
 Low Moderate High
3. What is your level of investment experience?
 None Low Medium High
4. Have you previously operated a margin lending account? (If 'NO,' proceed to Question 5)
 Yes No
 If 'yes,' do you plan to have any other margin loan accounts active outside of Morgan Stanley Wealth Management?
 Yes (provide details below) No

Account 1

NAME OF PROVIDER	MARKET VALUE	TOTAL LOAN
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Account 2

NAME OF PROVIDER	MARKET VALUE	TOTAL LOAN
------------------	--------------	------------

5. Do you plan to have any ASX listed shares that will make up more than 25% of your portfolio? (If 'NO,' proceed to Question 6)
 Yes No

If 'YES,' provide the following details of the ASX listed shares.

ASX Code	Market Value	Approx. %

6. What is your source of initial equity?

Source	Amount (\$)
Refinance*	
Excess security value of current credit limit	
Savings	
Lodging securities	
Drawn from credit card	
Drawn from residential mortgage	
Drawn from investment mortgage	
Drawn from other loan (e.g. personal loan)	
Other (please specify)	

*The refinance amount to equal total market value of your existing portfolio less total loan outstanding with current lender.

7. Annual income (after tax): \$ _____

What is your primary source of income? Business Earnings Salary Investments Retirement Assets

Other (please specify) _____

8. Statement of financial position

ASSETS			
Type	% Owned	Value (\$)	Loan (If Applicable) (\$)
Cash			
Residential Property			
Investment Property(s)			
Other Investment(s) (please specify)			
Motor Vehicle			
Other Assets (please specify)			
Total		\$	\$

LIABILITIES			
Type		Balance (\$)	Total Limit (\$)
Credit Card/Store Cards			
Other Loans (e.g. Personal Loans)			
Other Liabilities (please specify)			
Total		\$	\$

INCOME (ANNUAL)		Amount (\$)
Dividends		
Rental Income		
Other Income (please specify)		
Total		\$

EXPENSES (ANNUAL)		Amount (\$)
Rent/Board		
Living Expenses (e.g. Bills, Transport)		
Mortgage Repayments		
Other Loan Repayments (e.g. Credit Card)		
Other Expenses (please specify)		
Total		\$

Section 9 – Source of Wealth

In complying with our obligations under the AML/CTF Act and Rules we are required to collect source of wealth information for every account.

Financial information for the account entity, inclusive of assets held outside of Morgan Stanley:

What is your primary source of income?

Business Earnings Salary Investments Retirement Assets/Pension Other _____

Annual Income (before tax) \$0 - \$50,000 \$50,000 - \$100,000 \$100,000 - \$200,000
 \$200,000 - \$500,000 \$500,000 - \$1,000,000 > \$1,000,000

	Asset Value (\$)	Borrowings against Asset (\$)
Superannuation Investments	\$ _____	\$ _____
Investments outside superannuation	\$ _____	\$ _____
Other assets (including primary residence)	\$ _____	\$ _____

Do you use or intend to use borrowings to fund future investments in this account? Yes No

Please describe the source of wealth for your investment activity. The source of wealth should disclose the origin of wealth as provided above. Provide as much detail as possible, such as: details and types of businesses or past businesses and sale proceeds; investments; inheritance details; trust distributions; salary and wages; employment or previous employment —include names, dates and amounts.

Example: Mr A Citizen has been an electrician for 10 years and is employed by Sparks & Co on a salary of \$100,000. Mrs M Citizen is a teacher on a salary of \$65,000 in addition to being the primary caregiver for their two children. The majority of assets have been a result of savings built from Mr A Citizen's salary earnings and an inheritance from Mrs M Citizen's parents in 2009. Mrs M Citizen's parents owned a farm which was sold for \$700,000 and proceeds were split equally between Mrs M Citizen and her brother.

Section 10 – Account Profile

Not applicable for investors trading through a party other than Morgan Stanley Wealth Management.

Your financial adviser is required to take into account personal information when preparing recommendations for you. By supplying the following information your financial adviser will be able to give you personal financial product recommendations that are appropriate to your investment objectives, financial situation and particular needs. If you do not provide this information, any advice provided to you will be general advice. *We recommend that you provide this information.*

Please ensure your financial adviser is kept informed of any material changes to the information you have supplied.

Reason(s) for seeking advice

- | | | |
|---|--|---|
| <input type="checkbox"/> ASX Securities investment advice | <input type="checkbox"/> Build wealth | <input type="checkbox"/> Fund retirement |
| <input type="checkbox"/> Diversify investments | <input type="checkbox"/> Charitable giving | <input type="checkbox"/> Comprehensive financial plan |
| <input type="checkbox"/> Superannuation strategies | <input type="checkbox"/> Estate planning | <input type="checkbox"/> Retirement planning |
| <input type="checkbox"/> Ensure adequate insurance cover | <input type="checkbox"/> Financing solutions | <input type="checkbox"/> Other _____ |

Asset classes you are willing to invest in

- Cash Fixed Income Property Securities Domestic Shares International Shares Alternatives

Investment time horizon (select one)

- 1-3 years 3-5 years 5-7 years 7-10 years 10+ years

Income requirement (select one)

To what extent do you currently rely on income from your investments for living expenses?

- Not at all Partially Substantially Entirely

When do you expect you will rely, either entirely or substantially, on your investment income for living expenses?

- Never Currently Reliant Year _____

Investment objectives and risk tolerance (select one)

Select one of the following combinations to specify your risk tolerance and primary investment objective.

Refer to the definitions below for guidance.

Risk Tolerance

- Low (Conservative)
Low (Conservative)
Low (Conservative)
Moderate
Moderate
High (Aggressive)
High (Aggressive)

Primary Investment Objective

- Conservation of capital
Income
Income and long-term capital growth
Income
Income and long-term capital growth
Income and long-term capital growth
Short-term trading / Speculative capital gain

Risk Tolerance

Low (Conservative): You are more concerned with preserving capital than maximising gains and can tolerate infrequent, very moderate negative returns through a market cycle. Typically, the portfolio will consist of investments in cash and fixed income (no equities).

Moderate: You understand that pursuing higher returns means that you may have to tolerate periods of negative returns through difficult phases in a market cycle.

High (Aggressive): Your main objective is maximising capital gains and you can tolerate a sustained period of negative returns through difficult phases of a financial market cycle.

Investment Objective

Conservation of capital: You seek to minimise the probability of loss of capital over time by investing in relatively liquid instruments with limited price fluctuations.

Income: You wish to invest in investments which provide current income in the form of interest or dividends. These investments may be subject to market price fluctuations.

Income and long-term capital growth: You seek to achieve growth of capital over time; associated income generation may also be important. You may experience fluctuations in returns with the possibility of negative returns through difficult phases of a market cycle.

Short-term trading / Speculative capital gain: You seek to achieve a high rate of capital growth. Income is not a consideration. You may experience fluctuations in returns and an increased possibility of negative returns through difficult phases of a market cycle.

Knowledge and experience

Knowledge and experience in asset classes and products are key considerations in determining which investments we consider suitable for you. Refer to the definitions below for guidance.

	None	Minimal	Moderate	Extensive
Equities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fixed Income (Hybrids, Bonds)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Managed Funds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exchange Traded Funds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Derivatives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
International Securities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

None: You have no experience whatsoever regarding this type of investment and therefore have a limited appreciation of the risks and possible losses that could be attributable to trading this product type.

Minimal: You have a very basic understanding and level of experience regarding this type of investment such that the product’s risks are unlikely to be fully appreciated. You have less than two years of experience in trading these products.

Moderate: You have a good understanding and level of experience regarding this type of investment. You understand the product’s key economic features and have a good appreciation for the risks involved in trading this product. You have more than two years of experience in trading these products.

Extensive: You are very experienced and can be considered knowledgeable in trading this product type. You are fully aware of the risks and rewards associated with trading this product. You have more than five years of experience in trading these products.

Investment interests

- Blue Chip
- Property Securities
- Small Cap.
- Fixed Income
- Industrials
- Hybrids
- International Shares
- Managed Funds
- Resources
- New Listings
- Options
- Managed Investments
- Gold
- Franked Dividends
- Warrants
- Margin Lending

Existing investments

- Cash
- Fixed Income
- Property Securities
- Domestic Shares
- International Shares
- Managed Funds
- Options/Warrants
- Superannuation
- Property
- Other _____

Please note any other relevant circumstances we should take into consideration when providing you with advice

You may choose not to complete this account profile. In this event, please tick this box to acknowledge that you have decided not to provide information about your current financial situation and investment objectives and you understand that we are unable to provide you with personal advice. You will only receive general or factual information that is provided as general advice and may not be appropriate to your needs.

Section 11 – Personal Data

You agree that all information (including personal information) relating to you, your accounts, investments or transactions and/or your relationship with Morgan Stanley Wealth Management may be collected, held, used and disclosed for such purposes and to such persons (whether in or outside your jurisdiction of domicile or ordinary residence) in accordance with the Information Collection Statement on page 2 of the Application Forms booklet including the Privacy Policy referenced in that statement and available at www.morganstanley.com.au/privacypolicy.

Direct Marketing

As part of our service to you, we may use personal information we have collected about you to identify a product or service that may benefit you. We may contact you from time to time to tell you about new or existing products and services. We may also disclose your personal information to our associated firms to enable them or us to tell you about a product or service.

Opt-out from use of your personal data in direct marketing

You should tick this box if you do not want us (or our associated firms) to contact you in respect of any financial products or services offered by us or by our associated firms that may be of particular interest to you.

Note – If you do not want us or our associated firms to contact you in respect of any financial products or services that we believe may be of particular interest to you, we may need to limit the range of products and services we or our associated firms offer to you.

The above represents your present choice whether or not to receive direct marketing contact or information. This replaces any choice communicated by you to us prior to this application. If at any time you wish to change your choices for direct marketing, you may send us your written request to the office where your Morgan Stanley financial adviser works.

Overseas Disclosure

You acknowledge and agree that in accordance with the Information Collection Statement on page 2 of the Application Forms booklet, we may disclose your information (including your personal information) to our associated firms, vendors or other persons processing your information on our behalf (e.g. credit reporting agencies). Disclosure to these entities may involve the disclosure of your information outside Australia to countries which do not offer the same level of protection as may be enjoyed in Australia.

The above represents your present consent to the overseas disclosure of your personal information. If at any time you wish to withdraw your consent, you may send us your written request to the office where your Morgan Stanley financial adviser works. However, please note that without such consent, we or our associated firms may need to limit the range of products and services we offer to you or we may not be able to continue our relationship with you.

Section 12 – Power of Attorney

This section of the Application Form comprises a deed, made by you on the day specified at the end of this Application Form.

1. Each person described within the Application Form as the borrower (“you”) for valuable consideration irrevocably appoints Morgan Stanley Wealth Management Australia Pty Ltd (“we,” “us” or “Morgan Stanley Wealth Management”) and each of its related bodies corporate (as defined in the Corporations Act) and each of their respective directors, secretaries or officers (“attorneys”) jointly and each of them severally as its true and lawfully attorneys. Any attorney may appoint sub-attorneys.
2. The attorneys may do in your name everything necessary or expedient to:
 - (a) do all such things required to sign and deliver on your behalf all of the documents in respect of the Margin Lending facility, including the mortgage;
 - (b) do all such things that are required for the conversion of any of your approved securities to the CHESS system;
 - (c) to facilitate the lodgement, variation or revocation of a financing statement, discharge statement or any other document in relation to the Personal Property Securities Register;
 - (d) date and to complete any blanks which may be left in any documents;
 - (e) do anything which you can do or are obliged to do as owner of the mortgaged property (including completing blanks in any of those documents, executing agreements, signing any off market transfers, authorising, instructing or requesting the amendment of your details as necessary, authorising and instructing a person to accept directions in respect of the mortgaged property) or do anything which you can do in respect of the transactions contemplated by those documents;
 - (f) do all things necessary to sign and deliver on your behalf all of the documents needed to enter into a new Margin Lending facility; and
 - (g) do all things necessary to carry out the above purposes including executing all documents and other instruments necessary or proper to carry out the above purposes.
3. The authority of your attorney is subject to any conditions, limitations and exclusions detailed in the Statement of Advice (if applicable) provided to you separately by your financial adviser.

4. You declare that anything the attorneys do in exercising the powers granted to them under this power of attorney will be as binding on you and anyone else as if you had done the act yourself. You agree to ratify and confirm whatever an attorney does under and in accordance with this power of attorney.
5. You indemnify the attorneys against liability, loss or costs they suffer or incur in exercising powers under this power of attorney.
6. You authorise the attorneys to exercise the power under this power of attorney even if it involves a conflict of duty or the attorneys (or the person known to them) have a personal interest in doing so.

Section 13 – Client Directed Payment Consent

In order for Morgan Stanley Wealth Management to pay benefits to your financial adviser, we require your consent.

I/We direct Morgan Stanley Wealth Management Australia Pty Ltd ABN 19 009 145 555 (“Morgan Stanley Wealth Management”) to pay the following benefits to my financial adviser:

- An annual total commission benefit (“Commission”) of between zero and 57% of the fees and other revenue Morgan Stanley Wealth Management receives in relation to my account. The exact rate that is used to calculate the Commission is determined by reference to the brokerage and fee revenue generated by my financial adviser for Morgan Stanley Wealth Management over the course of the financial year.
- An annual incentive benefit (“Incentive”) of up to 20% of the fees and other revenue Morgan Stanley Wealth Management receives in relation to my account. This benefit is subject to the terms of the incentive arrangement offered to my financial adviser by Morgan Stanley Wealth Management (if any) and is based upon factors including but not limited to achievement of revenue targets, regulatory compliance and customer satisfaction.

I agree and acknowledge that:

- (a) the exact amount of Commission and Incentive (if any is payable) is determined in accordance with the remuneration arrangements that my financial adviser has in place with Morgan Stanley Wealth Management (as may be amended from time to time);
- (b) my financial adviser’s benefits will be reduced by any applicable fees and deductions that may include referral fees, business development costs, discount adjustments for fees charged which are below Morgan Stanley Wealth Management’s standard fee schedule as well as any other costs that are incurred by Morgan Stanley Wealth Management;
- (c) payment of the Incentive is conditional upon my financial adviser acting in my best interest and materially complying with all other legal and regulatory obligations and Morgan Stanley Wealth Management’s compliance framework, policies and procedures;
- (d) if my financial adviser performs additional managerial roles for Morgan Stanley Wealth Management, then my financial adviser may be eligible to receive a discretionary bonus in respect of the additional managerial role performed separate to the Commission;
- (e) I can ask my financial adviser for further information about his or her remuneration and can withdraw my consent to the payment of the benefits described above at any time by notifying Morgan Stanley Wealth Management in writing at any time; and
- (f) for the purpose of this direction, ‘my financial adviser’ means my current financial adviser as well as any other representative of Morgan Stanley Wealth Management who is involved (whether now or in the future) in sourcing or servicing my account.

For Individuals/Individual Trustees

SIGNATURE

NAME (PLEASE PRINT)

DATE

SIGNATURE

NAME (PLEASE PRINT)

DATE

SIGNATURE

NAME (PLEASE PRINT)

DATE

For Companies/Directors/Officeholders

DIRECTOR/OFFICE HOLDER SIGNATURE

NAME OF DIRECTOR/OFFICE HOLDER (PLEASE PRINT)

DATE

DIRECTOR/SECRETARY/OFFICE HOLDER SIGNATURE

NAME OF DIRECTOR/SECRETARY/OFFICE HOLDER (PLEASE PRINT)

DATE

MSWM0552 08/18

Section 14 – Declarations & Risk Disclosure

Execute the Application Form after you have read and understood the terms below in relation to the Margin Lending facility.

By signing this Application Form, you agree, represent and warrant to all of the following:

- all the information you have given is correct;
- no proceedings are current, pending, or to your knowledge, threatened which could affect your financial position adversely;
- you have read the Agreement and all documents associated with it, including but not limited to the Margin Lending Product Disclosure Statement, the sponsorship terms, the terms of business and the nominee terms as set out in the Agreement and that you are prepared to comply with those provisions; and
- Directors Guarantee for company accounts—in consideration of Morgan Stanley Wealth Management opening the Margin Lending facility at the request of the company named in this Application Form as the borrower, you the undersigned hereby irrevocably guarantee to Morgan Stanley Wealth Management the payment to Morgan Stanley Wealth Management of each and all sums of money, interest, damages, claims, fees and expenses which the borrower either alone or jointly may become liable to pay Morgan Stanley Wealth Management and the due and punctual performance and observance by the borrower of each of the terms, conditions and obligations contained in each and every agreement or arrangement whatsoever including, but not limited to, the Agreement. This guarantee is a continuing guarantee and shall remain in force so long as any obligation of the borrower to Morgan Stanley Wealth Management remains outstanding.

You understand that:

- if your application is approved, you have appointed an attorney (pursuant to the power of attorney) to accept the Agreement and sign the documents in respect of the Margin Lending facility on your behalf;
- if your application is approved, you mortgage to us any securities which are placed in your CHES account with us or lodged with a nominee;
- we may pay commissions to advisers in relation to unlisted securities you acquire in connection with your Margin Lending facility;
- we may disclose information relating to your application as required by law;
- investment disposals may generate capital gains or losses. You understand that a net gain may result in a capital gains tax liability;
- investments sold or purchased may increase or decrease in value after the transaction and that investments purchased may ultimately prove to be unprofitable; and
- granting of this authority does not in itself impose an obligation on us to consider and review on your behalf each investment opportunity, or any particular investment opportunity, for which the authority might be used.

You acknowledge that:

- you have read and understood the risk disclosure statement contained in the Agreement;
- you are prepared to accept the risks outlined in this statement and all other risks associated with the facility;
- you have read and understood the Information Collection Statement on page 2 of the Application Form including the Privacy Policy referenced in that statement and available at www.morganstanley.com.au/privacypolicy;
- you consent to the collection, use and disclosure of your information (including personal information) for such purposes and to such persons as set out in the Information Collection Statement, the Privacy Policy. Where you have provided information about any other individual, you will make that individual aware of the provision of the Information Collection Statement;
- Morgan Stanley Wealth Management may disclose information relating to your application as required by law;
- communications that we send to you by way of email or other electronic means will not be encrypted;
- Morgan Stanley Wealth Management is entitled to cancel or reverse a transaction or order without notice, where ASX Group or ASIC has recommended or required cancellation for market integrity reasons, or where the market was operating under an error, or where cancellation or reversal is permitted under the Rules;
- that your financial adviser has adequately explained the features, risks and benefits of the Margin Lending facility and has answered your questions (if any) to your complete satisfaction; and
- if you do not provide Morgan Stanley Wealth Management with information as requested or there is a delay in providing Morgan Stanley Wealth Management with information, Morgan Stanley Wealth Management may not be able to open your Margin Lending facility account.

Section 15 – Credit Information

Please note that for the purpose of this declaration, “you” includes a company, its directors, secretary and any other officer.

You agree that we may use the information provided by you in connection with the Margin Lending facility documents, and obtain information about you, in the following ways, and for the duration of the Margin Lending facility documents:

- (a) we may give a credit reporting agency personal information about you, including identity particulars, the fact that you have applied for credit from us and the amount, the fact that we are providing you with credit, if you are overdue in a payment for more than 60 days and when that payment ceases to be overdue, and (only in specified circumstances) that we believe you have committed a serious credit infringement;
- (b) we may obtain personal and commercial credit information about you from a credit reporting agency or any other business that provides information about creditworthiness;
- (c) we may exchange information with credit providers about your creditworthiness, credit standing, credit history or credit capacity. You acknowledge that this information may be used to assess this application, to help you avoid defaults, to notify other credit providers of any default by you, to assess your creditworthiness and to assist in the collection of overdue payments;
- (d) we may give any person you are using, or seek to use, as a guarantor the information we have about your personal and commercial credit history and standing, including any notices we have sent to you; and
- (e) we may ask for any additional information about you at any point in time.

Section 16 – Options — Client Agreement

By signing this Application Form, you are making the following acknowledgments and declarations:

- (a) all the information you have given in this Application Form is correct;
- (b) you have read and understood the provisions of the Margin Lending Terms and Conditions and agree to comply with them;
- (c) you have read and are prepared to accept the risk(s) outlined in the OptionWriter Product Disclosure Statement; and
- (d) you have also received the ASX booklet “Options—Understanding Options Trading.”

Section 17 – Business Purpose Declaration

You should only apply for a Morgan Stanley Wealth Management margin loan if you plan to use the funds for business or investment purposes. You declare that the credit to be provided to you by Morgan Stanley Wealth Management will be applied wholly or predominately for business or investment purposes (or for both purposes).

Important: You should note by signing this declaration you may lose your protection under the national credit code.

Section 18 – Signature Executed as a Deed

Please note by affixing your signature below you are also eligible to open GearInvest pursuant to Part E of the agreement without the need to sign future documentation.

Individual 1/Trustee 1 Borrower

DATE OF SIGNING

SIGNED

IN THE PRESENCE OF

NAME OF APPLICANT (PLEASE PRINT)

NAME OF WITNESS (PLEASE PRINT)

ADDRESS OF WITNESS

NOTE: The witness must be independent to the applicants and any appointed authorised representatives.

Individual 2/Trustee 2 Borrower (if applicable)

DATE OF SIGNING

SIGNED

IN THE PRESENCE OF

NAME OF APPLICANT (PLEASE PRINT)

NAME OF WITNESS (PLEASE PRINT)

ADDRESS OF WITNESS

NOTE: The witness must be independent to the applicants and any appointed authorised representatives.

Individual 3/Trustee 3 Borrower (if applicable)

DATE OF SIGNING

SIGNED

IN THE PRESENCE OF

NAME OF APPLICANT (PLEASE PRINT)

NAME OF WITNESS (PLEASE PRINT)

ADDRESS OF WITNESS

NOTE: The witness must be independent to the applicants and any appointed authorised representatives.

Section 19 – Company Applicant/Other Applicants

Pursuant to Part 2B.1 of the Corporations Act 2001

Director/Officeholder 1

DATE OF SIGNING

SIGNED

NAME OF APPLICANT (PLEASE PRINT)

CAPACITY (PLEASE PRINT)

Director/Officeholder 2

DATE OF SIGNING

SIGNED

NAME OF APPLICANT (PLEASE PRINT)

CAPACITY (PLEASE PRINT)

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Part B

Part B: Client Agreement – OptionWriter

Investment Profile: Mandatory Information

Morgan Stanley Wealth Management reserves the right to refuse your ASX derivatives trading account unless this profile is completed. **Please ensure all account holders also sign the Registered Holder Collateral Authorisation, on page 27, and the Schedule 2 (Clause 12(c)) Form of Acknowledgment from Client, on page 28.**

1. Anticipated Types of Transactions (please tick appropriate boxes)

- A. Writing call options over existing stock holdings and buy/write strategies.** Yes
The maximum profit from the call option you can make is the premium received from writing the call. You risk forgoing any opportunity to benefit from any increase in the value of the underlying share price above the strike price of the call option sold. If you are assigned, you must sell the underlying shares at the strike price. There remains the risk that the value of the shares held will decline.
- B. Purchasing call and put options.** Yes
The maximum loss you may realise is the premium paid, brokerage costs and ASX Clear costs related to the purchase of the option.

Your financial adviser will be pleased to assist you determine the type of transactions appropriate to meet your financial needs and personal acceptance of risk. Please also refer to the ASX booklet “Options—Understanding Options Trading” which explains the risks associated with different types of option transactions.

2. Anticipated strategies you'll use options for (please tick appropriate boxes)

- A. Capital preservation—use options to protect investments from capital losses. Yes
- B. Income generation—use options to enhance portfolio income by potentially forgoing capital gains. Yes
- C. Trading profits*—trade options to generate profits with the risk that losses may occur. Yes

* Using options to generate trading profits is a high risk strategy.

Registered Holder Collateral Authorisation

THIS AUTHORISATION COVERS CLIENT ACCOUNT NUMBER¹

1. You,

(THE REGISTERED HOLDER), *NB: NAME MUST BE THE SAME AS DETAILED ON THE HOLDER IDENTIFICATION NUMBER (HIN)

HIN

- authorise my Controlling Participant, to reserve (or withdraw) Financial Products (the “Collateral”) registered in the name of the Registered Holder in the ASX Clear Pty Limited, ABN 48 001 314 503 (“ASX Clear”) Subposition as Collateral Cover for obligations in respect of Options Market Contracts registered in the Client Account nominated above with Morgan Stanley Wealth Management Australia Pty Ltd (“the ASX Clear Participant”).
- The Registered Holder acknowledges that ASX Clear may, in its absolute discretion, decline to accept in relation to all or any particular Client Account nominated above for the purposes of accepting paperless lodgements.
 - The Registered Holder acknowledges that on behalf of the Registered Holder, the Controlling Participant will reserve (or withdraw) Collateral in the ASX Clear Subposition by sending the appropriate Collateral lodgement message so that the Collateral lodged comes under the control of ASX, or Collateral withdrawn leaves the control of ASX Clear, in accordance with the ASX Clear Operating Rules and Procedures (as amended from time to time).
 - In registering Collateral in the ASX Clear Subposition, the Registered Holder acknowledges that the Collateral will be subject to a fixed charge (the “Charge”) in favour of ASX Clear from the time they are reserved to the ASX Clear Subposition in the manner referred to above, and will remain subject to the Charge until ASX Clear permits it to be withdrawn from the ASX Clear Subposition.
 - The Registered Holder acknowledges that the Charge secures all amounts and obligations owing by the ASX Clear Participant to ASX Clear in connection with the Client Account nominated above¹ opened by the ASX Clear Participant in accordance with the ASX Clear Operating Rules and Procedures (as amended from time to time).
 - The Registered Holder acknowledges that the Registered Holder has read and understood the ASX Clear Operating Rules* and the ASX Settlement Operating Rules, in so far as those rules relate to the Collateral and the Charge, including:
 - ASX Clear’s power to deal with the Collateral on default by the ASX Clear Controlling Participant in respect of the Client Account nominated above; and
 - in particular, ASX Clear’s power of sale in relation to the Collateral without any notice to the Registered Holder.
 - The Registered Holder warrants that unless ASX Clear otherwise agrees in writing, the Collateral is not and may not be subject to any other security interest, other than a security interest provided to a margin lender under a deed of priority, entered into between ASX Clear and the margin lender, which provides that ASX Clear’s Charge has priority over the margin lender’s security interest (“the Deed of Priority”) or a security interest as permitted under the ASX Clear Operating Rules or the ASX Settlement Operating Rules.
 - If the Registered Holder’s Controlling Participant is a margin lender the Registered Holder warrants that they have signed an acknowledgement regarding the Deed of Priority as set out in Schedule 2 or Schedule 3, as applicable, to the Deed of Priority.
 - If the ASX Clear Participant is unable to insert the Account Number and/or HIN at the time the Registered Holder signs this form, the Registered Holder irrevocably authorises the ASX Clear Participant to insert the Account Number and/or HIN on this Agreement and agrees the ASX Clear Participant will insert the Account Number and/or HIN on the Registered Holder’s behalf, prior to lodging this Authorisation with ASX Clear. The ASX Clear Participant agrees that it will notify the Registered Holder of the Account Number and/or HIN in writing as soon as reasonably possible.
 - Defined terms have the same meaning as defined in the ASX Clear Operating Rules and Procedures or the ASX Settlement Operating Rules and Procedures (as amended from time to time).

*You can request a copy of the ASX Clear Operating Rules 14.6 [Cover] and 15 [Default] from your financial adviser

REGISTERED HOLDER 1 SIGNATURE

SURNAME

FIRST NAME

REGISTERED HOLDER 2 SIGNATURE

SURNAME

FIRST NAME

REGISTERED HOLDER 3 SIGNATURE

SURNAME

FIRST NAME

WITNESS SIGNATURE

WITNESS SURNAME

WITNESS FIRST NAME

DATE OF SIGNING

Please ensure that:

- Signature(s) must be witnessed by someone independent of the account. This is required before this form can be processed.
- If the account is for a corporation this Registered Holder Collateral Authorisation must be signed in accordance with the Corporations Act, or if signed under power of attorney, a copy of the power of attorney must also be attached to this addendum.

Schedule 2 (Clause 12(c)) Form of Acknowledgment from Client

To be signed by the Client and returned to the Margin Lender

ASX Clear Pty Limited
C/- Morgan Stanley Wealth Management Australia Pty Ltd
Level 26, Chifley Tower 2 Chifley Square
Sydney NSW 2000

And to:
Morgan Stanley Wealth Management Australia Pty Ltd
Level 26, Chifley Tower 2 Chifley Square
Sydney NSW 2000

And to:
Broker / ASX Clear Participant

Dear Sir/Madam

Client acknowledgment of the Master Priority Deed.

I refer to the Master Priority Deed dated 19 April 2011 (the "**Deed**") between ASX Clear Pty Limited (ABN 48 001 314 503) ("**ASX Clear**") and Morgan Stanley Wealth Management Australia Pty Ltd ABN 19 009 145 555 ("**Margin Lender**"). Terms defined in the Deed have the same meaning in this letter. I am a Client of the Margin Lender and have instructed my Participant, [as above], to register Options Market Contracts with ASX Clear.

I acknowledge, consent to and confirm the following.

1. I indemnify ASX Clear for any costs, charges, expenses, liabilities or loss incurred by it, or its agents or employees in connection with:
 - (a) the execution and stamping of the Deed; and
 - (b) any exercise or non exercise of rights under or any, variation, waiver or discharge in relation to the Deed.
2. I agree to be bound by the Deed and acknowledge and confirm the order of priorities between the ASX Clear Securities and the Margin Lender Securities set out in the Deed.
3. I will co-operate in the implementation, and assist in giving effect to the Deed and will not do anything inconsistent with the terms of the Deed.

Execution by Account Holder(s)

<input type="text"/>	<input type="text"/>
BORROWER 1 SIGNATURE	BORROWER FULL NAME
<input type="text"/>	<input type="text"/>
BORROWER 2 SIGNATURE	BORROWER FULL NAME
<input type="text"/>	<input type="text"/>
BORROWER 3 SIGNATURE	BORROWER FULL NAME
<input type="text"/>	<input type="text"/>
WITNESS SIGNATURE	WITNESS FULL NAME
<input type="text"/>	<input type="text"/>
DATE	ACCOUNT NUMBER (IF AN EXISTING ACCOUNT)

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Part C

Part C: Authority to Refinance/Transfer Securities

Part A: Transfer Details

BORROWER(S) NAME _____

GUARANTOR(S) NAME (IF APPLICABLE) _____

NAME OF MARGIN LENDING/SPONSORING BROKER _____

ACCOUNT NO _____ CHESS HIN _____

Full Refinance Partial Refinance \$ _____ (provide security details below)

Security Code	Security Name	Number of Shares/Units
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Part B: Authorisation

You authorise and instruct the lender/sponsoring participant named in Part A above to: (please tick the relevant boxes):

- Provide Morgan Stanley Wealth Management with any and all information regarding your CHESSE sponsored account and/or margin lending facility.
- You authorise Morgan Stanley Wealth Management to pay out an outstanding loan(s) against any managed fund investments and/or shareholdings held on your existing CHESSE HIN(s).
- Transfer your existing CHESSE HIN to Morgan Stanley Wealth Management.
- Release, effective immediately, any document or notice (including but not limited to any Notice of Mortgages or financing statement, discharge statement or any other document noted/recorded on the Personal Property Securities Register) which is relevant to the account.
- Transfer all open option positions and associated cash and Collateral to Morgan Stanley Wealth Management.
- Close my existing CHESSE sponsored account/margin lending facility.

Borrower

Individual 1/Trustee 1/Director 1

SIGNATURE

NAME

DATE

Individual 2/Trustee 2/Director 2

SIGNATURE

NAME

DATE

Individual 3/Trustee 3 (exc. Director)

SIGNATURE

NAME

DATE

Part D

Part D: Direct Debit or Credit Account Details Form

If you wish to authorise Morgan Stanley Wealth Management (Direct Debit User ID: 142563) to pay funds directly to you from your deposit account or, take funds directly from your designated bank or cash management account for payment as required under your Margin Lending facility please complete the account details below.

- The designated bank/cash management account must be in the same name/s as your Morgan Stanley Wealth Management account (or the same as one of the signatories). Third-party accounts cannot be accepted.
- If a joint bank account is nominated, both parties must sign.

You acknowledge that

- (a) Morgan Stanley Wealth Management will confirm in writing to you, the details of the Margin Lending facility Periodic Payment Plan including the drawing arrangements (amount, frequency, commencement date).
- (b) Morgan Stanley Wealth Management will debit the amount instructed by you from your nominated account on the 10th of every month. Where the due date falls on a weekend or public holiday, you will draw the amount on the next business day.
- (c) Morgan Stanley Wealth Management reserve the right to cancel this agreement if three or more drawings are returned unpaid by your nominated Financial Institution and arrange with you an alternative method. Any dishonour or other fees incurred by Morgan Stanley Wealth Management will be withdrawn from your Margin Lending facility.
- (d) Morgan Stanley Wealth Management processes your personal information in accordance with its privacy policy which is available at www.morganstanley.com.au/privacypolicy.

Your Rights

- (e) You may defer, alter or terminate the periodic drawing arrangements by giving written notice to Morgan Stanley Wealth Management, at least 14 business days prior to the due date.
- (f) Should the basis, by which Morgan Stanley Wealth Management initiate drawings on your nominated account change, including amount or frequency of any drawing, Morgan Stanley Wealth Management will notify you at least 14 days prior to any such change becoming effective.
- (g) When you consider a drawing has been initiated incorrectly (outside the Margin Lending facility Periodic Payment Plan) you should contact a Client Service Executive at Morgan Stanley Wealth Management immediately and Morgan Stanley Wealth Management will attempt to resolve the matter within five business days.
- (h) Due to the nature and procedures involved in settlement of transactions effected on the Australian Securities Exchange, requests or deferment of the payment of your obligation, cannot be accepted.

Your commitment to Morgan Stanley Wealth Management

- (i) It is your responsibility to ensure that sufficient funds are available in your nominated bank account to meet the drawing on the specified date.
- (j) It is your responsibility to ensure that the authorisation given to draw on the nominated account is identical to the account signing held by the Financial Institution, where the account is based.
- (k) It is your responsibility to advise Morgan Stanley Wealth Management if the account nominated by you is transferred or closed.

You acknowledge that

- (l) The Financial Institution may, in its absolute discretion, determine the order of priority of payment by it of any monies pursuant to this request or any authority or mandate.
- (m) The Financial Institution may, in its absolute discretion, at any time by notice in writing to you, terminate this request as to future debits.
- (n) Morgan Stanley Wealth Management may, by prior arrangement and advice to you, vary the amount or frequency of future debits.

Authorisation for Direct Debit

You authorise Morgan Stanley Wealth Management to draw amounts from your bank/cash management account identified below:

ACCOUNT NAME	
BANK	BRANCH
BRANCH NO. (BSB)	ACCOUNT NO.

Please tick one or more options:

Pay monthly interest charges on your Margin Lending facility Pay \$ _____ into your Margin Lending facility monthly

Pay any amount up to a limit of \$ _____ with/without* notification to cover margin calls on your account.

Direct debit upon your future requests. (*Delete where applicable)

Authorisation for Direct Credit

You authorise Morgan Stanley Wealth Management to pay amounts from your deposit under the Margin Lending facility to the account identified below:

ACCOUNT NAME	
BANK	BRANCH
BRANCH NO. (BSB)	ACCOUNT NO.

Applicant Signature

FULL NAME OF APPLICANT/ACCOUNT HOLDER 1	APPLICANT SIGNATURE(S)	DATE
FULL NAME OF APPLICANT/ACCOUNT HOLDER 2	APPLICANT SIGNATURE(S)	DATE
FULL NAME OF APPLICANT/ACCOUNT HOLDER 3	APPLICANT SIGNATURE(S)	DATE

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Part E

Part E: Client Agreement – GearInvest

Please check with the Fund Manager prior to giving us investment instructions, as regular contributions may not be available for the investments you are considering. When determining the investment amounts you should be aware of minimum investment criteria set by the individual Fund Managers, both initially and on a monthly basis.

Do you wish to start GearInvest immediately? Yes No

IF NO, MONTH

YEAR

Fund Manager Details

Please specify the managed funds you would like to invest in. Please complete the necessary fund Application Form once you have read the Product Disclosure Statement of the particular fund.

A. FUND MANAGER

APIR CODE

MANAGED FUND NAME (E.G. XXX AUST SHARE FUND)

B. FUND MANAGER

APIR CODE

MANAGED FUND NAME (E.G. XXX AUST SHARE FUND)

C. FUND MANAGER

APIR CODE

MANAGED FUND NAME (E.G. XXX AUST SHARE FUND)

D. FUND MANAGER

APIR CODE

MANAGED FUND NAME (E.G. XXX AUST SHARE FUND)

E. FUND MANAGER

APIR CODE

MANAGED FUND NAME (E.G. XXX AUST SHARE FUND)

Yes, you have read the relevant product disclosure statement for the above managed investment/s.

How will your initial contribution be made?

Cheque

Existing Security

BPAY—Amount \$ _____ Direct Debit—Amount \$ _____

Investment Amounts

Initial Investment

	Your Own Contribution (e.g. \$50,000)	Margin Loan Advance (e.g. \$50,000)	Total (e.g. \$100,000)
A.	\$ _____	\$ _____	\$ _____
B.	\$ _____	\$ _____	\$ _____
C.	\$ _____	\$ _____	\$ _____
D.	\$ _____	\$ _____	\$ _____
E.	\$ _____	\$ _____	\$ _____
		TOTAL INITIAL INVESTMENT	\$ _____

Regular Monthly Investment

Your Own Contribution (e.g. \$1,000)	Margin Loan Advance (e.g. \$1,000)	Total (e.g. \$2,000)
A. \$ _____	\$ _____	\$ _____
B. \$ _____	\$ _____	\$ _____
C. \$ _____	\$ _____	\$ _____
D. \$ _____	\$ _____	\$ _____
E. \$ _____	\$ _____	\$ _____
TOTAL INITIAL INVESTMENT		\$ _____

Monthly Contribution Direct Debit Details

If you wish to authorise Morgan Stanley Wealth Management (Direct Debit User ID: 142563) to take funds directly from your nominated account for payment as required under the GearInvest Agreement please complete the account details below.
 The nominated account must be in the same name/s as your Morgan Stanley Wealth Management account (or the same as one of the signatories).
 Third-party accounts cannot be accepted. If a joint bank account is nominated, both parties must sign.

You acknowledge that:

- (a) Morgan Stanley Wealth Management will confirm in writing to you, the details of the GearInvest contribution details.
- (b) Morgan Stanley Wealth Management may debit the amount instructed by you from your nominated account on either the 10th or 15th of every month. The debit date will be determined by the periodic investment date. Where the due date falls on a weekend or public holiday, you will draw the amount on the next business day.
- (c) Any dishonour or other fees incurred by Morgan Stanley Wealth Management will be withdrawn from your deposit account and/or your nominated account.
- (d) Morgan Stanley Wealth Management processes your personal information in accordance with its privacy policy which is available at www.morganstanley.com.au/privacypolicy.

Your Rights:

- (e) Should the basis, by which Morgan Stanley Wealth Management initiate drawings on your nominated account change, including amount or frequency of any drawing, Morgan Stanley Wealth Management will notify you at least 14 days prior to any such change becoming effective.
- (f) When you consider a drawing has been initiated incorrectly (outside GearInvest) you should contact a Client Service Executive at Morgan Stanley Wealth Management immediately and Morgan Stanley Wealth Management will attempt to resolve the matter within five business days.

Your commitment to Morgan Stanley Wealth Management:

- (g) It is your responsibility to ensure that sufficient funds are available in your nominated bank account to meet the drawing on the specified date.
- (h) It is your responsibility to ensure that the authorisation given to draw on the nominated account is identical to the account signing held by the Financial Institution, where the account is based.
- (i) It is your responsibility to advise Morgan Stanley Wealth Management if the account nominated by you is transferred or closed.

You acknowledge that:

- (j) The Financial Institution may, in its absolute discretion, determine the order of priority of payment by it of any monies pursuant to this request or any authority or mandate.
- (k) The Financial Institution may, in its absolute discretion, at any time by notice in writing to you, terminate this request as to future debits.
- (l) Morgan Stanley Wealth Management may, by prior arrangement and advice to you, vary the amount or frequency of future debits.

ACCOUNT NAME _____

BANK _____ BRANCH _____

BRANCH NO. (BSB) _____ ACCOUNT NO. _____

You request us, until further notice in writing, to debit your account shown above in accordance with your GearInvest Agreement.

Applicant Signature

_____	_____	_____
FULL NAME OF APPLICANT/ACCOUNT HOLDER 1	APPLICANT SIGNATURE(S)	DATE
_____	_____	_____
FULL NAME OF APPLICANT/ACCOUNT HOLDER 2	APPLICANT SIGNATURE(S)	DATE
_____	_____	_____
FULL NAME OF APPLICANT/ACCOUNT HOLDER 3	APPLICANT SIGNATURE(S)	DATE

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Part F

Additional Beneficial Owner – Borrower

Please complete for all beneficial owners of a Company or all beneficiaries of a Trust (who hold equal to or greater than 25% of the issued capital or distribution rights) other than those that may be detailed in the application form.

If the issued capital is held on behalf of another person(s), a statement of the underlying ownership must be attached and identification documentation provided.

Beneficial Owner/Beneficiary 1

Title: Mr. Mrs. Ms. Miss Dr. Other: _____

GIVEN NAMES (DO NOT USE INITIALS) SURNAME

CURRENT RESIDENTIAL ADDRESS (CANNOT BE A PO BOX)

SUBURB STATE POSTCODE COUNTRY

OCCUPATION (FORMER, IF RETIRED) NAME OF EMPLOYER INDUSTRY

DATE OF BIRTH

COUNTRY/IES OF CITIZENSHIP COUNTRY OF BIRTH

Contact

WORK PHONE HOME PHONE FAX

MOBILE PHONE EMAIL ADDRESS

Have either you, an immediate family member, or a close associate, ever been entrusted with a prominent public role or function (e.g. a senior official in the executive, legislative, military, administrative or judicial branches of government, a senior executive of a government enterprise/agency, or a member of a ruling royal family)? Yes No

Beneficial Owner/Beneficiary 2

Title: Mr. Mrs. Ms. Miss Dr. Other: _____

GIVEN NAMES (DO NOT USE INITIALS) SURNAME

CURRENT RESIDENTIAL ADDRESS (CANNOT BE A PO BOX)

SUBURB STATE POSTCODE COUNTRY

OCCUPATION (FORMER, IF RETIRED) NAME OF EMPLOYER INDUSTRY

DATE OF BIRTH

COUNTRY/IES OF CITIZENSHIP COUNTRY OF BIRTH

Contact

WORK PHONE HOME PHONE FAX

MOBILE PHONE EMAIL ADDRESS

Have either you, an immediate family member, or a close associate, ever been entrusted with a prominent public role or function (e.g. a senior official in the executive, legislative, military, administrative or judicial branches of government, a senior executive of a government enterprise/agency, or a member of a ruling royal family)? Yes No

Additional Applicant/Signatory Form – Borrower

Section 1 – Account Details

ACCOUNT NAME

FINANCIAL ADVISER

Section 2 – Additional Applicant/Signatory

Applicant Signatory

Applying as: Individual Individual Trustee Company Company Trustee Other: _____

Title: Mr. Mrs. Ms. Miss Dr. Other: _____

GIVEN NAMES (DO NOT USE INITIALS)

SURNAME

CURRENT RESIDENTIAL ADDRESS (CANNOT BE A PO BOX)

SUBURB

STATE

POSTCODE

COUNTRY

DATE OF BIRTH

TFN (OR EXEMPTION IF APPLICABLE)

COUNTRY/IES OF CITIZENSHIP

COUNTRY OF BIRTH

Marital Status: Single Married Widowed De Facto Divorced Number of Dependents: _____

OCCUPATION (FORMER, IF RETIRED)

NAME OF EMPLOYER

INDUSTRY

Are you retired Yes No If no, what year do you expect to retire: _____

Contact

WORK PHONE

HOME PHONE

FAX

MOBILE PHONE

EMAIL ADDRESS

UNLESS OTHERWISE INSTRUCTED, ELECTRONIC TRADE CONFIRMATIONS WILL BE SENT TO THE EMAIL ADDRESS NOTED ABOVE

Have either you, an immediate family member, or a close associate, ever been entrusted with a prominent public role or function (e.g. a senior official in the executive, legislative, military, administrative or judicial branches of government, a senior executive of a government enterprise/agency, or a member of a ruling royal family)? Yes No

All Additional Applicants are required to sign under Sections 13 & 18 - Part A and Parts B, C, D & E.

Is any applicant, authorised representative or beneficiary named in this application form an employee of Morgan Stanley? Yes No If Yes, please provide MSID: _____

SIGNATURE OF ADDITIONAL APPLICANT/SIGNATORY

NAME (PLEASE PRINT)

DATE

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Morgan Stanley Wealth Management

Morgan Stanley Wealth Management Australia Pty Ltd
ABN 19 009 145 555

Margin Lending

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Fax 02 9775 2714
Toll Free 1800 062 794
Email marginadmin@morganstanley.com

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2 Chifley Square Sydney NSW 2000
GPO Box 5345 Sydney NSW 2001
Tel 02 9775 2600
Fax 02 9775 2800
Toll Free 1800 808 576
Email sydneywealth@morganstanley.com

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Melbourne Vic 3000
PO Box 360 Collins Street West Vic 8007
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Fax 03 9188 2344
Toll Free 1800 804 697
Email melbournewealth@morganstanley.com

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Adelaide SA 5000
GPO Box 313 Adelaide SA 5001
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Email adelaidewealth@morganstanley.com

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