



APPLICATION FORM



Please complete form in BLACK INK using CAPITAL letters.
 Please ensure ALL information is completed as indicated in this form for the relevant customer type. If information is incomplete, your application will not be processed.

APPLICANT TYPE (Please tick one)

- SINGLE INDIVIDUAL OR JOINT ACCOUNT FOR INDIVIDUALS (non-business/non-trustee)**
 ↳ complete Section 1 and then the relevant Sections from 5 onwards
- SOLE TRADER**
 ↳ complete Sections 1 and 3 and the relevant Sections from 5 onwards
- SOLE INDIVIDUAL TRUSTEE OR MULTIPLE INDIVIDUAL TRUSTEES (including trustee/trustees of a self-managed superannuation fund)**
 ↳ complete Section 1 and then the relevant Sections from 3 onwards
- COMPANY (non-trustee)**
 ↳ complete Sections 1, 2.1 and 2.2 and then the relevant Sections from 4 onwards
- COMPANY TRUSTEE (including company trustee of a self-managed superannuation fund)**
 ↳ complete Section 2 and then director details in Section 1 and the relevant Sections from 3 onwards
- ASSOCIATION**
 ↳ complete Sections 1 and 2.3 and then the relevant Sections from 5 onwards
- PARTNERSHIP**
 ↳ complete Sections 1, 2.1 and 2.2 and then the relevant Sections from 5 onwards

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INDIVIDUALS (Including Individual Customers, Directors, Sole Trader, Individual Trustees, Association Member, Partner)

INDIVIDUAL A

Individual Customer
 Individual Trustee
 Company Director/Sole Trader
 Association Member
 Partner

Mr
 Mrs
 Miss
 Ms
 Dr
 Other: _____

First Name (s) _____ Middle Name (s) _____

Surname _____ Date of Birth _____ / ____ / ____

Tax File Number _____ OR Reason for Exemption _____

Residential Address (PO Box is not acceptable) _____

_____ Post Code _____

Email Address _____

Phone (business hours) () _____ Mobile _____

Occupation _____

Are you known by any other names? Yes No

If yes, please specify: _____

Gender: Male Female Do you reside permanently in Australia? Yes No

Online Services

Enquiry Access Only Enquiry Access and withdrawals in accordance with the terms and conditions of the product

If you wish to add this account to an existing Online Services login. Provide the current username: _____

Are you a potential Politically Exposed Person*? Yes No

*A Politically Exposed Person is an individual, or close family member or close associate of an individual, who holds a prominent public position or function in an Australian government body, a foreign government body, or an international organisation.

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INDIVIDUALS (CONT)

INDIVIDUAL B

Individual Customer
 Individual Trustee
 Company Director/Sole Trader
 Association Member
 Partner

Mr
 Mrs
 Miss
 Ms
 Dr
 Other: _____

First Name (s) _____ Middle Name (s) _____

Surname _____ Date of Birth _____ / ____ / ____

Tax File Number _____ OR Reason for Exemption _____

Residential Address (PO Box is not acceptable) _____

_____ Post Code _____

Email Address _____

Phone (business hours) _____ Mobile _____

() _____

Occupation _____

Are you known by any other names? Yes No

If yes, please specify: _____

Gender: Male Female
 Do you reside permanently in Australia? Yes No

Online Services

Enquiry Access Only
 Enquiry Access and withdrawals in accordance with the terms and conditions of the product

If you wish to add this account to an existing Online Services login. Provide the current username: _____

Are you a potential Politically Exposed Person*? Yes No

*A Politically Exposed Person is an individual, or close family member or close associate of an individual, who holds a prominent public position or function in an Australian government body, a foreign government body, or an international organisation.

INDIVIDUAL C

Individual Customer
 Individual Trustee
 Company Director/Sole Trader
 Association Member
 Partner

Mr
 Mrs
 Miss
 Ms
 Dr
 Other: _____

First Name (s) _____ Middle Name (s) _____

Surname _____ Date of Birth _____ / ____ / ____

Tax File Number _____ OR Reason for Exemption _____

Residential Address (PO Box is not acceptable) _____

_____ Post Code _____

Email Address _____

Phone (business hours) _____ Mobile _____

() _____

Occupation _____

Are you known by any other names? Yes No

If yes, please specify: _____

Gender: Male Female
 Do you reside permanently in Australia? Yes No

Online Services

Enquiry Access Only
 Enquiry Access and withdrawals in accordance with the terms and conditions of the product

If you wish to add this account to an existing Online Services login. Provide the current username: _____

Are you a potential Politically Exposed Person*? Yes No

*A Politically Exposed Person is an individual, or close family member or close associate of an individual, who holds a prominent public position or function in an Australian government body, a foreign government body, or an international organisation.

2.1 ENTITY DETAILSFull Name Full Business Name Any other name(s) under which the business trades under
If the Company is Listed on an Australian Stock Exchange – name of Exchange
ACN Tax File Number ABN **Company Type/Entity Type** Public Proprietary Association PartnershipRegistered Address (PO Box is not acceptable)
Post Code Principal Place of Business/Agent Address/Administration Address (as applicable) Same as Registered Address
Post Code **2.2 PROPRIETARY COMPANIES AND PARTNERSHIPS**

Full Names and residential address of Pty Company Directors/Partners (as applicable)

1	<input type="text"/>	Residential Address	<input type="text"/>
2	<input type="text"/>	Residential Address	<input type="text"/>
3	<input type="text"/>	Residential Address	<input type="text"/>
4	<input type="text"/>	Residential Address	<input type="text"/>

For partnerships, please also provide the details for 1 partner. If the partner is an individual, complete Section 1. If the partner is a company, complete an additional Section 2 and attach it to this form.**Please add any additional director/partner by way of an attachment to this form.**Is the Partnership regulated by a Professional Body? Yes NoIf Yes, which one? If Regulated, the membership number **2.3 ASSOCIATIONS****Association Type** Incorporated UnincorporatedUnique Identifying Number (issued by the relevant registration body - applies to Incorporated Associations only)
Full Name and Position of the Association office bearers listed belowFull Name – Chair
Full Name – Secretary
Full Name – Treasurer

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SELF MANAGED SUPER FUND, TRUST, SOLE TRADER OR OTHER ENTITY DETAILS

3.1 SELF MANAGED SUPER FUND, TRUST, SOLE TRADER OR OTHER ENTITY DETAILS

Full Name																								
Any other name(s) under which the trust is known																								
Registered Business Name (if different from Full Name otherwise specify 'As above').																								
ACN												Tax File Number												
ABN																								
Country of Establishment												(not required for sole traders)												
Principal place of business/administration (PO Box is not acceptable)												Post Code												
Type of Trust																								
<input type="checkbox"/>	SMSF			<input type="checkbox"/>	Family Trust			<input type="checkbox"/>	Unit Trust			<input type="checkbox"/>	Other (Please specify)											

3.2 BENEFICIARIES/CLASS DETAILS (AS APPLICABLE)

Please collect the full name of each beneficiary or details of the class as per Trust Deed (as applicable)

<input type="checkbox"/> Beneficiaries	<input type="checkbox"/> Class
Full Name (s) of Beneficiaries	Details of Class
Full Name (s) of Beneficiaries	Details of Class
Full Name (s) of Beneficiaries	Details of Class
Full Name (s) of Beneficiaries	Details of Class

3.3 DETAILS OF SETTLOR (APPLICABLE TO TRUSTS ONLY)

Full Name(s) of Settlor

The settlor (or creator of the trust) creates the trust by providing (or 'settling') an initial sum of money or property to the trustee of the trust to 'hold or invest' on behalf of the beneficiaries.

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BENEFICIAL OWNERSHIP

Please provide details of all beneficial owners. A Beneficial Owner is any individual who holds 25% or more beneficial interest in the entity and control (either directly or indirectly) of the entity. Control includes the capacity to influence the way in which the entity conducts its affairs, including by having the ability to determine decisions about the entity's financial and operating policies. This includes, but is not limited to Chairman or equivalent, secretary, treasurer or appointer of a trust.

This section is required to be completed to capture the beneficial ownership details for all entities excluding self managed super funds.

Full Name (s)																					
Are you known by any other names?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No																	
If yes, please specify																					
Date of Birth			/			/															
Residential Address (PO Box is not acceptable)												Post Code									
Full Name (s)																					
Are you known by any other names?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No																	
If yes, please specify																					
Date of Birth			/			/															
Residential Address (PO Box is not acceptable)												Post Code									

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BENEFICIAL OWNERSHIP (CONT)

Full Name (s)

Are you known by any other names? Yes No

If yes, please specify

Date of Birth

 / /

Residential Address (PO Box is not acceptable)

Post Code

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ACCOUNT DESCRIPTION

*An account description is for your own account reference. For example 'Holiday Account'

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ACCOUNT INFORMATION

Account Mailing Address (can be address of your Financial Adviser/Stockbroker)

Post Code

Statements & Communications

Please specify the frequency for your account statement (if no selection is made, statements will be issued quarterly):

Quarterly Semi-annually

Please tick this box if you prefer correspondence via Online Services

Select CMA

Initial Investment Amount \$

Select TD (must have Select CMA to open Select TD)

Initial Investment Amount \$ (Minimum \$5000) Term

Maturity Date / / Interest Rate %

Initial Deposit to be made by

Cheque attached (please make cheques payable to Select CMA – insert account name)

Electronic Funds Transfer (EFT)

Via Direct Debit from the first nominated account below. (You must include a statement of the account to be debited that is no more than 6 months old and is in exactly the same name(s) as you Select CMA).

Source of Funds

Source of Wealth

Interest Instructions

Reinvest Credit to the Pre-Nominated Account below

Nominated Account

If you wish to have interest or withdrawals credited to your bank, building society or credit union account, please provide the following information:

Bank, building society or credit union name

Account name

Branch number (BSB) Account number / membership number

Additional Nominated Account

Bank, building society or credit union name

Account name

Branch number (BSB) Account number / membership number

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ACCOUNT INFORMATION

If you would like to appoint an individual as your Authorised Signatory to operate your Select CMA (and any Select TDs you subsequently establish) you need to complete the following section of this form and arrange for the Authorised Signatory to sign in the space provided. If you wish to appoint two authorised signatories, please complete a separate 'Appointing an Authorised Signatory Form'.

I/We appoint (Full Name)

as my/our Authorised Signatory to operate my/our account on my behalf.

I/We understand the Authorised Signatory can do anything which I/we could do in relation to my/our account, including transferring money to themselves or closing the account.

I/We release Westpac and DDH from, and indemnify Westpac and DDH against, all losses and liabilities arising from any payment that Westpac or DDH make or action Westpac or DDH take relying on this appointment.

All account holders must sign.

Customer Name	<input type="text"/>	Date	<input type="text"/>
Customer Signature	<input type="text"/>		
Customer Name	<input type="text"/>	Date	<input type="text"/>
Customer Signature	<input type="text"/>		
Customer Name	<input type="text"/>	Date	<input type="text"/>
Customer Signature	<input type="text"/>		

Any Individual Authorised Signatory who you appoint must sign below. By signing in this section the Authorised Signatory agrees to be bound by the Select CMA Terms and Conditions.

Signature of Authorised Signatory

I (Full Name)

accept appointment as an Authorised Signatory to this account and agree that I am bound by the Select CMA Terms and Conditions.

I indemnify Westpac and DDH against all losses and liabilities arising from them acting on instructions given by me under this appointment.

Certified identification is required to be supplied for all Authorised Signatories, in accordance with the 'An Individual' section of the Identification Guide.

Signature	<input type="text"/>		
Full Name	<input type="text"/>		
Relationship	<input type="text"/>	Date	<input type="text"/>
Address (PO Box is not acceptable)			
<input type="text"/>			
			Post Code
			<input type="text"/>

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APPOINTING A FINANCIAL ADVISER/STOCKBROKER TO OPERATE YOUR ACCOUNTS

If you would like to appoint your financial adviser's/stockbroker's company or firm to operate your Select CMA (and any Select TDs you subsequently establish) you need to complete the following section of this form. When you make such an appointment, any authorised signatory of your financial adviser's/stockbroker's company or firm can operate your accounts, provided they are registered with DDH as an authorised signatory.

You can specify the level of authority you wish to give your financial adviser's/stockbroker's company or firm by indicating in the boxes below. If no election is made, your financial adviser's/stockbroker's company or firm will be given Standard Adviser Authority. Refer to the Select CMA Terms and Conditions for full details of each level of authority.

I/We appoint (Entity Name)

to operate my/our account on my/our behalf in accordance with the following level of authority:

Full Authority Standard Adviser Authority Fee Authority Tax Authority Enquiry Authority

Where you give your financial adviser's/stockbroker's company or firm Full Authority they can do anything which you could do in relation to your account, including transferring money to themselves or closing the account.

I release Westpac and DDH from, and indemnify Westpac and DDH against, all losses and liabilities arising from any payment that Westpac or DDH make or action Westpac or DDH take relying on this appointment.

All account holders must sign.

Customer Name	<input type="text"/>	Date	<input type="text"/>
Customer Signature	<input type="text"/>		
Customer Name	<input type="text"/>	Date	<input type="text"/>
Customer Signature	<input type="text"/>		
Customer Name	<input type="text"/>	Date	<input type="text"/>
Customer Signature	<input type="text"/>		

Personal information collected by Westpac

Westpac collects personal information from you to process your application, provide you with your product or service, and manage your product or service. Westpac may also use your information to comply with legislative or regulatory requirements in any jurisdiction, prevent fraud, crime or other activity that may cause harm in relation to their products or services and help them run their businesses.

If you do not provide all the information Westpac requests, Westpac may need to reject your application or may no longer be able to provide a product or service to you.

Westpac may disclose your personal information to other members of the Westpac Group, DDH, anyone else Westpac engages to do something on its behalf, and other organisations that assist it with its business.

Westpac may disclose your personal information to an entity which is located outside Australia. Details of the countries where the overseas recipients are likely to be located are in Westpac's privacy policy.

As a provider of financial services, Westpac has obligations to disclose some personal information to government agencies and regulators in Australia, and in some cases offshore. Westpac is not able to ensure that foreign government agencies or regulators will comply with Australian privacy laws, although they may have their own privacy laws. By using Westpac's products or services, you consent to these disclosures.

Westpac is required or authorised to collect personal information from you by certain laws. Details of these laws are in Westpac's privacy policy.

Westpac's privacy policy is available at westpac.com.au or by calling (02) 8253 5055. It covers:

- how you can access the personal information Westpac holds about you and ask for it to be corrected;
- how you may complain about a breach by Westpac of the Australian Privacy Principles or a registered privacy code and how Westpac will deal with your complaint;
- how Westpac collects, holds, uses and discloses your personal information in more detail.

Westpac will update its privacy policy from time to time.

Personal information collected by DDH

DDH collects, uses, maintains and discloses personal information in accordance with its privacy policy and collection statement, which are available at ddhgraham.com.au.

Personal information held by DDH or your Financial Adviser/Stockbroker

DDH or your Financial Adviser/Stockbroker may disclose to Westpac or DDH your personal information relevant to the establishment, operation or administration of your Select CMA (or linked Select TDs) whether or not this information was collected by DDH or your Financial Adviser/Stockbroker in connection with your Select CMA (and linked Select TDs) and whether or not this information was collected before or after the date of this application.

Other acknowledgments and consents

- Westpac and DDH may confirm the details of the information provided in this application.
- Where you have provided information about another individual, you must make them aware of that fact and the contents of the Privacy Statement.

Definitions

In this privacy statement:

"DDH" means DDH Graham Limited ABN 28 010 639 219.

"Westpac" means Westpac Banking Corporation ABN 33 007 457 141.

"Westpac Group" means Westpac and its related bodies corporate.

"You" means any person who signs this application.

DECLARATION OF OVERSEAS TAX STATUS

Please complete this section if an individual or beneficial owner* that are party to this application has an overseas tax status.

If the Individual or Entity is a tax resident of any other country outside of Australia, please indicate the country(ies) in which they are a resident for tax purposes and each country's associated Tax Identification Number (TIN).

If a TIN is not available, please tick the appropriate reason.

Name

Country

Tax Identification Number (TIN)

Reason if no TIN provided (please tick one)

Foreign TIN not issued by this country Individual is under age Foreign TIN pending issue by the country's tax authority

Name

Country

Tax Identification Number (TIN)

Reason if no TIN provided (please tick one)

Foreign TIN not issued by this country Individual is under age Foreign TIN pending issue by the country's tax authority

Name

Country

Tax Identification Number (TIN)

Reason if no TIN provided (please tick one)

Foreign TIN not issued by this country Individual is under age Foreign TIN pending issue by the country's tax authority

*A beneficial owner is any individual who has control (direct or indirectly) of an entity. Control includes the capacity to influence the way the entity conducts its affairs through trusts, formal or informal agreements, arrangements, understandings and practices:

- For companies, where an individual who owns 25% or more (directly or indirectly) or has control (directly or indirectly) of the company.
- For partnerships this includes but is not limited to partners who hold 25% or more beneficial interest in the partnership.
- For unincorporated/incorporated association/cooperative entity this includes but is not limited to the Chairman (or equivalent), secretary or treasurer who holds 25% or more beneficial interest in the entity.
- For trusts this includes but is not limited to beneficiaries who hold more than 25% or more beneficial interest in the trust property and the appointer who has the power to appoint or remove trustee of the trust.

Note: if there is insufficient space to complete this section, please photocopy this section to provide additional details.

DECLARATION AND AGREEMENT

By signing below I/we declare and agree that:

- the information provided in this application is true and correct;
- I/we consent to receive an electronic version of the Select CMA Terms and Conditions by downloading it from www.ddhgraham.com.au/Westpac-Select-CMA;
- I/we have received and read a copy of the Select CMA Terms and Conditions and agree that those Terms and Conditions apply to my/our Select CMA and any Select TDs I/we subsequently establish;
- my/our Financial Adviser/Stockbroker specified above is being given the authority specified above regarding my Select CMA and any linked Select TDs I/we subsequently establish;
- I/we agree to all other transactions and arrangements specified above;
- I/we have read and understood the privacy statement in Section 9 and consent to the collection, use, maintenance and disclosure of personal information in accordance with the privacy statement;
- where I/we are applying in the capacity as a trustee/trustees of a trust:
 - the trust is validly constituted and has not terminated;
 - I am/we are the sole trustee/trustees of the trust; and

- I/we have power under the trust deed under which the trust was established to establish a Select CMA and Select TDs, agree to the Select CMA Terms and Conditions applying to those accounts and give my/our Financial Adviser/Stockbroker specified above the authority specified above.

Notes and warranties regarding execution:

- Where this form is signed on behalf of a company, it needs to be signed by the sole director/secretary if there is one or otherwise by two directors or a director and a secretary of the company.
- Where this form is signed on behalf of an association, it needs to be signed by two office bearers of the association. Those office bearers warrant that they have power and authority under the rules or constitution of the association to sign this application on behalf of the association.
- Where this form is signed on behalf of a partnership, it needs to be signed by one or more of the partners. Those partners warrant that they have power and authority to sign this application on behalf of the partnership and to bind the partnership and each of the partners of the partnership.

Signature (Individual A)

Name

Position Sole Director

Date *Please note all signatures must be dated*

Signature (Individual B)

Name

Position

Date *Please note all signatures must be dated*

Signature (Individual C)

Name

Position

Date *Please note all signatures must be dated*

Account Signing Instructions

Any One to sign All to sign Other (Please specify):

***If you do not tick a box we will assume either party is to sign.** If you tick the box 'all signatories to sign' and you have also elected for instructions regarding withdrawals to be given by telephone, it will be deemed that any party can instruct via telephone, but that written instructions will need to be provided by all parties.

ADVISER USE

Adviser Name Adviser Company Name

Contact Details

Phone ()

Email Address Broker Reference

GUIDE TO SOURCE OF FUNDS / SOURCE OF WEALTH

SOURCE OF FUNDS:

Salary/Wages
Commission
Bonus
Business income/earnings
Business profits
Investment income/earnings
Corporate investments earnings
Rental income
Superannuation/pension
Loan
Ext investment/Capital Injection
Insurance payment

Compensation payment
Government benefits
Government grant
Sale of assets
Liquidation of assets
Mergers & Acquisitions
Controlled money account
Redundancy
Inheritance
Gift/Donation
Windfall
Tax refund

SOURCE OF WEALTH:

Business income/earnings
Business profits
Investment income/earnings
Corporate investments earnings
Rental income
Insurance payment
Compensation payment
Owns real estate/property
Sale of assets
Liquidation of assets
Mergers & Acquisitions
Controlled money account

Gift/Donation
Employment Income/Earnings
Government Benefits
Inheritance
Redundancy
Superannuation/Pension
Windfall
Other (please specify)

IDENTIFICATION GUIDE

ACCOUNT TYPE:

CERTIFIED COPIES OF IDENTIFICATION REQUIRED:*

An Individual or sole trader and; Beneficial Owners - for all entity types

- Australian drivers licence; or
- Australian passport (a passport which has expired within the last 2 years is acceptable); or
- Australian State/Territory ID card that contains a photo or signature

If you cannot satisfy the above, then:

- Australian birth certificate; or
- Australian citizenship certificate; or
- Pension card issued by Department of Human Services; or
- Health card issued by Department of Human Services

And

- A document issued by the Commonwealth or State or Territory including the ATO within the last 12 months including name and residential address; or
- A document issued by a local government body or utilities provider within the last 3 months showing provision of services containing name and residential address

A Company

- A copy of the relevant ASIC database search showing all officers and shareholders

And

- Identification for each account signatory and beneficial owner as per 'An Individual'

Australian Trusts & Trustees (eg superannuation fund)

- A copy of the Trust Deed; or
- A copy of an extract of the Trust Deed where the name of the trust, beneficiaries, settlors, trustee, country of establishment, beneficial owners and execution pages are evident

And

- Individual Trustees – as per 'An Individual'
- Corporate Trustee – as per 'A Company' (not required for SMSF Corporate Trustees)
- Beneficial Owners – as per 'An Individual'

A Partnership

- Partnership agreement

And

- Identification for ONE partner as per 'An Individual'; and
- Identification for ALL beneficial owners as per 'An Individual'

An Incorporated Association

- Certificate of Incorporation; or
- Copy of the relevant ASIC search or search of the relevant body responsible for incorporation

And

- Identification for all signatories as per 'An Individual'; and
- Identification for ALL beneficial owners as per 'An Individual'

An Unincorporated Association

- Constitution or rules of the association; or
- Minutes of a meeting of the association, including which officers can operate the account

And

- Identification for ONE member as per 'An Individual'; and
- Identification for ALL beneficial owners as per 'An Individual'

* Additional documentation may be required in some circumstances. We do not accept self-certified documents, documents certified with a direct interest in the entity or documents certified by a relative of the natural person. Should you wish to open an account for an account Type not listed above, please contact us for current requirements. We reserve the right to vary these requirements at any time.