

Change of Details



This form is to provide IJ Financial Services Limited (ACN 162 530 449, AFSL 443031) (IJ Capital) with updates to an investment account

This is an editable PDF and can be completed on your computer. If you prefer to complete a printed version, please write in BLOCK letters using either a blue or black pen only. Print ✓ in the appropriate boxes to indicate your response. Do not use whiteout on this form. If you need to correct a mistake, cross out the section to be corrected, accompanied with your full signatures.

Please provide your IJ capital registered email address and then complete all relevant sections, ensuring Section 6 is completed.

Section 1: Individual details

If you have an investment account in the name of a superannuation fund, company, trust, or partnership you must complete both section 1 & 2; to include the directors of proprietary companies and trustee. If there are more than two (2) individuals to include in this section (including trustee, company directors, partners, or beneficiaries), please download and complete an Additional Individuals Form at <http://ijcapital.com.au/forms/> or call Investor Relation on **1300 533 776**.

Registered email address for the investment account

Investor 1

Individual type:	<input type="checkbox"/> Individual/ Joint investor <input type="checkbox"/> Individual trustee <input type="checkbox"/> Company director <input type="checkbox"/> Partner <input type="checkbox"/> Beneficiary		
Title:		Date of birth: (DD/MM/YYYY)	
Given name:		Surname:	
Detail of class, if any (beneficiaries only)		US citizen or resident of the US for tax purposes (if applicable)	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If YES, please download and complete a FATCA form available at http://ijcapital.com.au/forms/</i>
Non-resident of Australia, other than US citizen or tax resident (if applicable)	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If YES, please download and complete a Self- Certification Declaration Form available at http://ijcapital.com.au/forms/</i>	Politically exposed person (PEP) details	<input type="checkbox"/> Yes, please describe your position <input type="checkbox"/> No <i>Please see www.austrac.gov.au for PEP definition</i>
Residence Address:			
Suburb:		State:	
Postcode:		Country:	
Email:		Mobile number:	
Telephone:		Occupation:	

Additional information for sole traders

Full Business Name (if any)	
ABN (if obtained)	
Registered Address of Principal Place of the Business	

Identification requirements

There are two methods that may be used to verify your identity for Anti-Money Laundering and Counter-Terrorism Financing (AML/CTF) purposes. You may either complete the fields within this form to have your identification verified online or attach certified copies of the documents outlined in the further identification checklist at back of this Form. IJ Capital is required by AML/CTF laws to identify and verify your identity before providing financial services to you. Please see IJ Capital's privacy policy on the website www.ijcapital.com.au in relation to our use of your personal information.

Driver Licence

Driver licence no.:		Drivers licence expiry date:	
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Change of Details



Card number		State of issue:	
Your name, exactly as it appears on your licence			

Australian passport

Passport number		Expiry date	
Your name, exactly as it appears on your passport		Place of birth (as shown on your passport)	
Country			

Foreign passport

Passport number		Expiry date	
Your name, exactly as it appears on your passport		Place of birth (as shown on your passport)	
Country			

Investor 2

Individual type:	<input type="checkbox"/> Individual/ Joint investor <input type="checkbox"/> Individual trustee <input type="checkbox"/> Company director <input type="checkbox"/> Partner <input type="checkbox"/> Beneficiary		
Title:		Date of birth: (DD/MM/YYYY)	
Given name:		Surname:	
Detail of class, if any (beneficiaries only)		US citizen or resident of the US for tax purposes (if applicable)	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If YES, please download and complete a FATCA form available at http://ijcapital.com.au/forms/</i>
Non-resident of Australia, other than US citizen or tax resident (if applicable)	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If YES, please download and complete a Self-Certification Declaration Form available at http://ijcapital.com.au/forms/</i>	Politically exposed person (PEP) details	<input type="checkbox"/> Yes, please describe your position <input type="checkbox"/> No <i>Please see www.austrac.gov.au for PEP definition</i>
Residence Address:			
Suburb:		State:	
Postcode:		Country:	
Email:		Mobile number:	
Telephone:		Occupation:	

Identification requirements

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Driver Licence

Driver licence no.:		Drivers licence expiry date:	
Card number		State of issue:	

Change of Details



Your name, exactly as it appears on your licence	
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Australian passport

Passport number		Expiry date	
Your name, exactly as it appears on your passport		Place of birth (as shown on your passport)	
Country			

Foreign passport

Passport number		Expiry date	
Your name, exactly as it appears on your passport		Place of birth (as shown on your passport)	
Country			

2 Superannuation fund/ company/ trust/partnership details

If you have an investment account in the name of a company, trust or partnership, please complete Section 1 for the directors and beneficiaries (i.e., individuals) relevant to the company (including corporate trustee), trust or partnership, and this Section (2) for the details of the investor company, trust or partnership.

Partnership

Account Number (If applicable)	
Full Name of the Partnership	
Registered business name of the Partnership (if any)	
ABN, ARBN or other	
ACN	
TFN	

Company

Account Number (If applicable)	
Full name of the company	
ABN	
ACN	
TFN	

Identification requirements

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Select one of the following options to verify the company

- Perform a search of the ASIC database (unit registry to perform on behalf of the investor); or

Provide a certified copy of the certification of registration issued by ASIC or the relevant foreign registration body (must show full name of company, name of registration body, company identification number and type of company – private or public).

Trust/Superannuation Fund with individual trustee (s) or Trust/Superannuation Fund with corporate trustee

Account Number (If applicable)			
Full name of the trust			
Full name of the individual trustee		TFN of individual trustee	
Full name of the corporate trustee		ACN of the corporate trustee	

Identification requirements

If changing the Individual or Corporate trustee(s) refer to identification requirements for individuals in Section 1 and Beneficial owners below. An original or certified copy of the Trust Deed of Variation or if not reasonably available an original or certified extract of the Trust Deed of Variation. Extracts of the Deed of Variation must include the name of the Trust, Trustees, Beneficiaries and Appointers (where applicable).

Beneficial Owners

For a company, beneficial owners are all individuals who hold one or more shareholdings of more than 25% of the company's issued capital. For a Trust, a beneficial owner is the person who controls the activities of the Trust (directly or indirectly including control by acting as trustee; or by means of Trusts, agreements, arrangements, understandings and practices; or exercising control through the capacity to direct the trustees; or the ability to appoint or remove the Trustees).

Please list the beneficial owners below. If there are more than two (2) beneficial owners, please download and complete the relevant sections of an Additional Individuals Form at <http://ijcapital.com.au/forms/or> call Investor Relations on **1300 533 776**.

Beneficial owner 1

same as individual 1

Title:		Date of birth: (DD/MM/YYYY)	
Given name:		Surname:	
Tax file number (TFN)		US citizen or resident of the US for tax purposes (if applicable)	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If YES, please download and complete a FATCA form available at http://ijcapital.com.au/forms/</i>
Non-resident of Australia, other than US citizen or tax resident (if applicable)	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If YES, please download and complete a Self-Certification Declaration Form available at http://ijcapital.com.au/forms/</i>	Politically exposed person (PEP) details	<input type="checkbox"/> Yes, please describe your position <input type="checkbox"/> No <i>Please see www.austrac.gov.au for PEP definition</i>

Identification requirements

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Card number		State of issue:	
Your name, exactly as it			

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appears on your licence	
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Passport number		Expiry date	
Your name, exactly as it appears on your passport		Place of birth (as shown on your passport)	
Country			

Foreign passport

Passport number		Expiry date	
Your name, exactly as it appears on your passport		Place of birth (as shown on your passport)	
Country			

Beneficial owner 2

same as individual 2

Title:		Date of birth: (DD/MM/YYYY)	
Given name:		Surname:	
Tax file number (TFN)		US citizen or resident of the US for tax purposes (if applicable)	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If YES, please download and complete a FATCA form available at http://ijcapital.com.au/forms/</i>
Non-resident of Australia, other than US citizen or tax resident (if applicable)	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If YES, please download and complete a Self-Certification Declaration Form available at http://ijcapital.com.au/forms/</i>	Politically exposed person (PEP) details	<input type="checkbox"/> Yes, please describe your position <input type="checkbox"/> No <i>Please see www.austrac.gov.au for PEP definition</i>

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Foreign passport

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Passport number		Expiry date	
Your name, exactly as it appears on your passport		Place of birth (as shown on your passport)	
Country			

3 PRIVACY

Please tick the box if you consent to your personal information being used and disclosed for marketing purposes.

I/we wish to receive information regarding future investment opportunities.

4 PAYMENT INSTRUCTION DISTRIBUTIONS AND WITHDRAWALS FOR WHOLESALE FUNDS

Financial Institution Account Details

Please indicate the fund that you would like to nominate a new bank account for the credit of distributions and withdrawals.

Please provide account details for the credit of withdrawals and credit of distributions of the fund that you have specified above. Unless requested otherwise, this will be the bank account we credit any withdrawal proceeds.

Please mark the right bank type and fill in the bank account details accordingly.

Paid to Australian Bank Account

Account Name	
Account Number	
BSB	
Bank/Institution	
Branch	

Paid to International Bank Account

Account Name			
Country of Bank		Branch Name	
Bank Account Currency		Bank SWIFT Code	
Local Bank Code		Bank Account Type	<input type="checkbox"/> Single Currency Account <input type="checkbox"/> Multi-Currency Account

Please fill the contact form as the information you provided to your bank where you first opened your account.

Contact Address	
State/City	
Country/Region	

5 PAYMENT INSTRUCTION DISTRIBUTIONS AND WITHDRAWALS FOR REALIAL FUNDS

Please indicate how you would like your distributions of below investment to be paid. There may be periods in which no distribution is payable, or we may make interim distributions. We do not guarantee any particular level of distribution:

Reference ID	Current holding	Payment instruction
		<input type="checkbox"/> Reinvest in Fund (default if no selection is made); OR <input type="checkbox"/> Pay to my/our account (Please provide your financial institution account details as per below).

Financial Institution Account Details

Please provide account details for the credit of withdrawals and credit of distributions. Unless requested otherwise, this will be the bank account we credit any withdrawal proceeds.

Account Name	
Account Number	
BSB	
Bank/Institution	
Branch	

6 INVESTOR DECLARATION AND SIGNATURES

Signature of Investor 1*	Signature of Investor 2*
Full name	Full name
Date	Date
Tick capacity (mandatory for companies): <input type="checkbox"/> Director and Company Secretary <input type="checkbox"/> Director <input type="checkbox"/> Secretary	Tick capacity (mandatory for companies): <input type="checkbox"/> Director and Company Secretary <input type="checkbox"/> Director <input type="checkbox"/> Secretary
Company Seal (if applicable)	Company Seal (if applicable)

*Joint applicants must both sign;

*Company applications must be signed by two Directors, a Director and Secretary or the Sole Director and Secretary of the company, details of which appear in Section 3.1; or

*For trust/superannuation fund applications each individual trustee must sign.

How to submit your form

Please email your form and all required documents to:

IJ Financial Services Limited (ACN 162 530 449, AFSL 443031) (Issuer)

Level 7, 199 George St, Brisbane city, QLD 4000, Australia

contact@ijcapital.com.au

Please contact us if you have any questions about the process.

Phone Investor Relations on **1300 533 776** or email contact@ijcapital.com.au