



# TRANSFER REQUEST FORM

## A Individual/Sole trader

**Complete and go to section 5**

|                                    |  |         |  |            |  |  |  |
|------------------------------------|--|---------|--|------------|--|--|--|
| Title                              |  | Surname |  | DOB        |  |  |  |
| Given name(s)                      |  |         |  |            |  |  |  |
| Business name<br>(for sole trader) |  |         |  | TFN or ABN |  |  |  |

## B Self-managed superannuation fund (attach details of any other Trustees)

**Complete and go to section 5**

|                    |  |  |  |     |  |  |  |
|--------------------|--|--|--|-----|--|--|--|
| Legal name of fund |  |  |  |     |  |  |  |
| ABN                |  |  |  | TFN |  |  |  |
| Name of trustee(s) |  |  |  |     |  |  |  |
|                    |  |  |  |     |  |  |  |

## C Company (attach details of any other directors and shareholders)

**Complete and go to section 5**

Full name of company/corporate trustee (as registered with ASIC)

|  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|

|     |  |  |  |            |  |  |  |
|-----|--|--|--|------------|--|--|--|
| ACN |  |  |  | TFN or ABN |  |  |  |
|-----|--|--|--|------------|--|--|--|

|                      |  |  |  |
|----------------------|--|--|--|
| AFSL (if applicable) |  |  |  |
|----------------------|--|--|--|

|                       |  |  |  |  |  |  |  |
|-----------------------|--|--|--|--|--|--|--|
| Full name of director |  |  |  |  |  |  |  |
|-----------------------|--|--|--|--|--|--|--|

|                       |  |  |  |  |  |  |  |
|-----------------------|--|--|--|--|--|--|--|
| Full name of director |  |  |  |  |  |  |  |
|-----------------------|--|--|--|--|--|--|--|

Shareholder details for proprietary companies

Provide details for all shareholders who own 25% or more of the issued capital of the company (through one or more shareholdings).

|      |  |  |  |  |  |  |  |
|------|--|--|--|--|--|--|--|
| Name |  |  |  |  |  |  |  |
|------|--|--|--|--|--|--|--|

|        |  |  |  |        |  |  |  |
|--------|--|--|--|--------|--|--|--|
| Street |  |  |  | Suburb |  |  |  |
|--------|--|--|--|--------|--|--|--|

|       |  |          |  |         |  |  |  |
|-------|--|----------|--|---------|--|--|--|
| State |  | Postcode |  | Country |  |  |  |
|-------|--|----------|--|---------|--|--|--|

|      |  |  |  |  |  |  |  |
|------|--|--|--|--|--|--|--|
| Name |  |  |  |  |  |  |  |
|------|--|--|--|--|--|--|--|

|        |  |  |  |        |  |  |  |
|--------|--|--|--|--------|--|--|--|
| Street |  |  |  | Suburb |  |  |  |
|--------|--|--|--|--------|--|--|--|

|       |  |          |  |         |  |  |  |
|-------|--|----------|--|---------|--|--|--|
| State |  | Postcode |  | Country |  |  |  |
|-------|--|----------|--|---------|--|--|--|

## D Partnership

**Complete and go to section 5**

One partner must complete section 4A above and provide certified documentation for an individual.

Legal name of partnership

|  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|

Business name of partnership (if applicable)

|  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|

|     |  |  |  |     |  |  |  |
|-----|--|--|--|-----|--|--|--|
| ABN |  |  |  | TFN |  |  |  |
|-----|--|--|--|-----|--|--|--|

Is the partnership governed by a professional association?

Yes – please provide professional association details and go to section 3.

|      |  |  |  |                       |  |  |  |
|------|--|--|--|-----------------------|--|--|--|
| Name |  |  |  | Membership identifier |  |  |  |
|------|--|--|--|-----------------------|--|--|--|

No – please complete the partner details for ALL partners, attach additional details if required.

|       |  |         |  |  |  |  |  |
|-------|--|---------|--|--|--|--|--|
| Title |  | Surname |  |  |  |  |  |
|-------|--|---------|--|--|--|--|--|

|               |  |  |  |  |  |  |  |
|---------------|--|--|--|--|--|--|--|
| Given name(s) |  |  |  |  |  |  |  |
|---------------|--|--|--|--|--|--|--|

|                     |  |  |  |        |  |  |  |
|---------------------|--|--|--|--------|--|--|--|
| Street (not PO Box) |  |  |  | Suburb |  |  |  |
|---------------------|--|--|--|--------|--|--|--|

|       |  |          |  |         |  |  |  |
|-------|--|----------|--|---------|--|--|--|
| State |  | Postcode |  | Country |  |  |  |
|-------|--|----------|--|---------|--|--|--|

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|                     |  |          |  |
|---------------------|--|----------|--|
| Title               |  | Surname  |  |
| Given name(s)       |  |          |  |
| Street (not PO Box) |  | Suburb   |  |
| State               |  | Postcode |  |
|                     |  | Country  |  |

## E Trusts

|   |  |     |  |
|---|--|-----|--|
| Legal name of trust   |  |     |  |
| Business name of trustee (if applicable)  |  |     |  |
| Type of trust   |  |     |  |
| <small>(for example family trust, discretionary trust, fixed trust, protective trust)</small> |  |     |  |
| ABN/ARBN/ACN  |  | TFN |  |
| Country in which the trust was established  |  |     |  |
|   |  |     |  |

## Trustee(s) details

|        |  |          |  |
|--------|--|----------|--|
| Name   |  |          |  |
| Street |  | Suburb   |  |
| State  |  | Postcode |  |
|        |  | Country  |  |

Please attach details of additional trustees. You will also need to complete and provide identification documentation outlined in section 10 if one of the trustees is an individual. If the trustee is a company please complete section 4C.

## Beneficiary details

Do the terms of the trust identify the beneficiaries by reference to membership of a class?

|                          |   |  |
|--------------------------|---|--|
| <input type="checkbox"/> | Yes – please provide details of the class   |  |
| <input type="checkbox"/> | No – please provide the full name and address of each beneficiary in respect of the trust. Please attach details of additional beneficiaries. |  |

|        |  |          |  |
|--------|--|----------|--|
| Name   |  |          |  |
| Street |  | Suburb   |  |
| State  |  | Postcode |  |
|        |  | Country  |  |
| Name   |  |          |  |
| Street |  | Suburb   |  |
| State  |  | Postcode |  |
|        |  | Country  |  |

## SECTION 5 – ELECTRONIC INVESTOR AGREEMENT

By crossing the box below and providing us with your email address you are agreeing to become an electronic investor and will have access to our discounted fees (see *Fees and other costs* in the managed funds product guide (PDS) for more information). This means that you agree to:

- make your investments electronically via BPAY or direct debit
- have income payments (if not re-invested) deposited into your bank or credit union account electronically
- have documents such as your annual statements emailed to you.

To be an electronic investor it is important that you let us know whenever your email address changes.

|                          |  |
|--------------------------|--|
| <input type="checkbox"/> | I / we authorise Australian Ethical to treat me as an electronic investor. |
|--------------------------|--|

|       |  |  |  |
|-------|--|--|--|
| Email |  |  |  |
| @     |  |  |  |





# TRANSFER REQUEST FORM

the arrangement between us and you.

1.2 We will only arrange for funds to be debited from your account as authorised in the Direct Debit Request.

1.3 If the debit day falls on a day that is not a banking day, we may direct your financial institution to debit your account on the following banking day. If you are unsure about which day your account has or will be debited you should ask your financial institution.

## 2. Changes by us

2.1 We may vary any details of this agreement or a Direct Debit Request at any time by giving you at least fourteen (14) days written notice.

## 3. Changes by you

3.1 You may change, stop or defer a debit payment, or terminate this agreement by providing us with at least fourteen (14 day's) notification by writing to:

Australian Ethical Investment c/o Registries Limited  
GPO Box 3993  
Sydney NSW 2001

or

phone us on 1800 021 227 during business hours

or

arranging it through your own financial institution.

## 4. Your obligations

4.1 It is your responsibility to ensure that there are sufficient clear funds available in your account to allow a debit payment to be made in accordance with the Direct Debit Request.

4.2 If there are insufficient clear funds in your account to meet a debit payment:

(a) you may be charged a fee and/or interest by your financial institution

(b) you may also incur fees or charges imposed or incurred by us

(c) you must arrange for the debit payment to be made by another method or arrange for sufficient clear funds to be in your account by an agreed time so that we can process the debit payment.

4.3 You should check your account statement to verify that the amounts debited from your account are correct.

4.4 If Australian Ethical Investment Ltd is liable to pay goods and services tax ('GST') on a supply made in connection with this agreement, then you agree to pay Australian Ethical Investment Ltd on demand an amount equal to the consideration payable for the supply multiplied by the prevailing GST rate.

## 5. Dispute

5.1 If you believe that there has been an error in debiting your account, you should notify us directly on 1800 021 227 and confirm that notice in writing with us as soon as possible so that we can resolve your query more quickly. Alternatively you can take it up with your financial institution direct.

5.2 If we conclude as a result of our investigations that your account has been incorrectly debited we will respond to

your query by arranging for your financial institution to adjust your account (including interest and charges) accordingly. We will also notify you in writing of the amount by which your account has been adjusted.

5.3 If we conclude as a result of our investigations that your account has not been incorrectly debited we will respond to your query by providing you with reasons and any evidence for this finding in writing.

## 6. Accounts

You should check:

(a) with your financial institution whether direct debiting is available from your account as direct debiting is not available on all accounts offered by financial institutions

(b) your account details which you have provided to us are correct by checking them against a recent account statement

(c) with your financial institution before completing the Direct Debit Request if you have any queries about how to complete the Direct Debit Request.

## 7. Confidentiality

We will keep any information (including your account details) in your Direct Debit Request confidential. We will make reasonable efforts to keep any such information that we have about you secure and to ensure that any of our employees or agents who have access to information about you do not make any unauthorised use, modification, reproduction or disclosure of that information.

7.2 We will only disclose information that we have about you:

(a) to the extent specifically required by law, or

(b) for the purposes of this agreement (including disclosing information in connection with any query or claim).

## 8. Notice

8.1 If you wish to notify us in writing about anything relating to this agreement, you should write to:

Australian Ethical Investment c/o Boardroom Pty Limited  
GPO Box 3993  
Sydney NSW 2001

8.2 We will notify you by sending a notice in the ordinary post to the address you have given us in the Direct Debit Request.

8.3 Any notice will be deemed to have been received on the third banking day after posting.