

Smart Money Company Pty Ltd



ABN 42 252 917 637
 Corporate Authorised
 Representative No. 001247682 of:
 Pinnacle Securities Pty Ltd
 ABN 61 608 667 778
 AFSL No. 485760
 (Licensee)

Suite 4c
 16 Queensland Avenue
 Broadbeach QLD 4218

PO Box 24
 Mermaid Beach QLD 4218

P: 1300 944 184

CLIENT APPLICATION FORM

All transactions are executed by D2MX Pty Ltd ABN 98 113 959 596 AFSL No. 297950 (Broker) and cleared by Pershing Securities Australia Pty Ltd (Pershing)
 ABN 60 136 184 962 AFSL No 338264 Level 2, 1 Bligh Street, Sydney NSW 2000

Please ensure you have read and understood:

- Pershing Disclosure Statement (Part E)
- Pershings Explanation of CHESSE Sponsorship (Part F)
- Pershing Direct Debit Request and Service Agreement (Part G)
- Pershing Derivatives Client Agreement (Part H)
- Pershing Privacy Policy and Client Statement (Part I)
- Pershing Financial Services Guide (FSG) (Part J)
- D2MX Terms and Conditions (including Derivatives, Warrants & Partly Paid Securities Terms (Part K)
- D2MX Disclosure Statement (Part L)
- D2MX Financial Services Guide (FSG) (Part M)
- Licensee Financial Services Guide (FSG) (Part N)
- Licensee Terms and Conditions (Part O)

In order to process your Application, we will need:

- Completed & signed Client Application Form (Part A)
- Completed & signed Broker to Broker Transfer Authority Form – Equities (Part B)
- Completed & signed Broker to Broker Transfer Authority Form – Options (For Options Clients Only) (Part C)
- Completed & signed Registered Holder Collateral Cover Authorisation Form (Options Clients Only) (Part D)

General Instructions:

- Print in clear BLOCK LETTERS
- If you make a mistake, cross it out and initial the changes. Please do not use correction fluid.

INTERNAL USE ONLY:

Account Number:		HIN:	
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BROKER USE ONLY:

Equities Advisor Code:		Equities Brokerage:	
Options Advisor:		Options Brokerage:	

By signing below, the Broker acknowledges that it has:

- (a) received and retained the original signed Sponsorship Agreement (if the Client has agreed to be CHESSE Sponsored in Part A Section 11)
- (b) verified the signature on the Application Form, and confirm that it matches the Applicant's Identification documents

Name:		Signature:		Date:	
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IDENTIFICATION REQUIREMENTS

Under the Anti-Money Laundering and Counter-Terrorism Financing (AML/CTF) legislative regime, due diligence must be conducted on any prospective client before certain services may be provided. The due diligence includes verifying a prospective client's identity. Applications made without providing this information cannot be processed. The AML/CTF compliance program will also include ongoing customer due diligence and reporting of suspicious matters to AUSTRAC as necessary. This may require the Intermediary and/or Pershing to collect further information.

INDIVIDUALS / COMPANY DIRECTORS / TRUSTEE

Please provide certified copies of one Primary Photographic Documents (List A) **OR** one document from the Primary Non-Photographic list (List B) **AND** Secondary Identification list (List C) for **EACH** individual.

A – Photographic Identification

- Current photographic Australian driver's licence
- Current Australian passport
- Current State or Territory photo ID card
- Current foreign passport^①
- Current foreign driver's licence with photograph & date of birth^①

B – Non Photographic Identification

- Birth certificate or birth extract issued by a State or Territory
- Commonwealth citizenship certificate
- Centrelink Pension card
- Health Care card issue by Centrelink
- Foreign citizenship certificate or birth certificate^①

C – Secondary Identification

- Commonwealth, State and Territory financial benefits notice (less than 12 months old)
- Local government or utilities provider bill (less than 3 months old) recording provision of services to the person at the address
- Notice issued within the last 3 months by school principal for a person under 18, recording period of time person attended school and person's residential address
- ATO Tax notice (less than 12 months old)

^① Documents that are written in a language that is not English must be accompanied by an English translation prepared by an accredited translator.

COMPANY

If you are an Australian company or Corporate Trustee, you need to provide the following documents:

- A full company search of the ASIC database showing:
 - a. the full name of the company;
 - b. the ABN/ACN;
 - c. company type;
 - d. the registered office address of the company;
 - e. the principal place of business of a company;
 - f. the names of each director of the company (only for a proprietary company);
 - g. the name and date of birth of each beneficial owner (non-listed company)
- If the company is a regulated company, a search of the licence or other records of the relevant Commonwealth, State or Territory regulator;
- If the company is listed, a search of the relevant financial market.
- Certified Identification for each director as per requirement for Individuals
- Certified Identification for each beneficial owner as per requirement for Individuals or Company (25% or more ownership)

If you are a Foreign company or Corporate Trustee, you need to provide the following company documents showing:

- a. ARBN or foreign registration number
- b. the names of each director of the company (only for a proprietary company);
- c. registration of the company by a foreign registration body;
- d. Whether the company is private or public;
- e. the name and date of birth of each beneficial owner (non-listed company)
- Certified Identification for each director as per requirement for Individuals
- Certified Identification for each beneficial owner as per requirement for Individuals or Company (25% or more ownership)

TRUST / SUPERANNUATION FUND

If you are a registered managed investment scheme, an unregistered managed investment scheme with wholesale clients only (which does not make small-scale offerings under section 1012E), a regulated trust (e.g. SMSF) or government superannuation fund provide the certified copy or certified extract of the trust deed, ATO or ASIC documents showing:

- a. full name of the trust;
- b. that the trust is a registered scheme, regulated trust or superannuation fund;
- c. type of trust;
- d. the country in which the trust was established;
- e. the full business name (if any) of the trustee in respect of the trust.

If you are opening an account for Other Trust Types (e.g. family, unit, charitable, estate, etc) provide a certified copy or extract of Trust deed showing:

- a. full name of the trust;
- b. the type of trust;
- c. the country in which the trust was established;
- d. the full business name (if any) of the trustee in respect of the trust;
- e. Full name of beneficial owners or trust membership class ;
- f. Name of the Settlor of the trust
- g. Name of all the trustees

Identification requirements -

- a. information relating to all trustees as per "individual" or "company" identification procedure;
- b. information relating to all beneficial owners as per "individual" or "company" identification procedure;
- c. information relating to settlor of the trust as per "individual" or "company" identification procedure.

PART A

1. INDIVIDUAL / JOINT

Please complete this section using your full name. Initials will not be accepted.

Individual 1

Title Date of Birth

Given Name(s)

Surname

Country of Birth Country of Citizenship or lawful permanent residency

Individual 2

Title Date of Birth

Given Name(s)

Surname

Country of Birth Country of Citizenship or lawful permanent residency

Individual 3

Title Date of Birth

Given Name(s)

Surname

Country of Birth Country of Citizenship or lawful permanent residency

2. COMPANY DETAILS

Company Name

ABN / ACN Country of Incorporation

Company Type Proprietary Public Number of Directors

ARBN or foreign registration number Registration Body

DIRECTORS DETAILS

If there are additional Directors, please supply details on a separate page

Director 1 Title Given Name(s)

Surname Date of Birth

Country of Birth Country of Citizenship or lawful permanent residency

Director 2 Title Given Name(s)

Surname Date of Birth

Country of Birth Country of Citizenship or lawful permanent residency

Director 3 Title Given Name(s)

Surname Date of Birth

Country of Birth Country of Citizenship or lawful permanent residency

Company Section Continues on Page 4

6. ADDRESS DETAILS

Residential Address / Registered Office Address for Companies (PO Box is not acceptable in the Residential Address Field)

Street Address (including Suburb)			
State	Post Code	Country	

Postal Address Same as above

Postal Address (including Suburb)			
State	Post Code	Country	

Registration Address

If no registration address is noted, your postal address will be used for your registration address.

Registration Address (including Suburb)			
State	Post Code	Country	

7. AUTHORISED AGENT

If you wish to authorise a third party to operate your account, please complete the below details. Until you notify us in writing that the authority has been revoked, the following person is authorised to act on your behalf, including giving dealing and other instructions, information and requests and/or receive account information.

Title		Date of Birth	
Full Name			
Street Address including Suburb			
Country of Birth	Country of Citizenship or lawful permanent residency		
Position Held		Phone Number	

Do you have Power of Attorney or signatory authority granted to a person with a U.S. address? Yes No

Signature of Authorised Agent

8. AUSTRALIAN TAX FILE NUMBER OR EXEMPTION

Individual 1 TFN		Company TFN	
Individual 2 TFN		Trust TFN	
Individual 3 TFN		Superannuation Fund TFN	

Quotation of your Australian tax file number(s) (TFN) is optional

Pershing is an Australian financial service licensee that is authorised by law to request your TFN. You are not required to provide your TFN and failing to provide your TFN to Pershing is not an offence. If Pershing is unable to quote your tax file number or exemption to registries, it may be obliged to take tax at the highest marginal rate from any dividends, distributions, interest and payments to which you are entitled. Accordingly, failing to provide your TFN or not permitting Pershing to quote it in relation to an investment may have taxation consequences. You may wish to seek independent advice in this regard.

By providing a TFN and signing the Application Form you:

- (a) appoint Pershing as your agent and request and authorise Pershing to;
 - (i) provide your Tax File Number to all investment bodies with whom Pershing acts on your behalf;
 - (ii) apply your TFN to any investment or account which you may in future make or open with or through Pershing (and their related bodies corporate) to which your TFN may lawfully be applied; and

- (b) acknowledge that this authority will apply until such time as it is revoked in writing to Pershing.

Despite the other terms in this section, you may instruct Pershing in writing at the time of making an investment, not to quote your TFN in relation to that investment.

9. STATUS OF APPLICANT

Are any of the Applicants, Directors, Responsible Officials, Partners, Authorised Representatives, Trustees, Beneficial Owners or any other Beneficiaries of this Account: affiliated with any other Participant of ASX Group; ASX Listed Company, a government official; government entity, or having dealings with a government official or any government related entity of any country?

Yes No If Yes, please provide details

10. DELIVERY DETAILS FOR TRADE CONFIRMATIONS

Authorisation of the electronic dispatch of confirmations.

The authorisation and agreement in this section apply if you have provided an e-mail address for the despatch of trade confirmations and signed the Application Form. By doing so you authorise confirmations to be dispatched electronically to:

- (a) you at the e-mail address provided in Section 5
- (b) another person or organisation (as your agent) to whom you have authorised Pershing to send electronic confirmations, at the e-mail address provided in the Application Form.

Additional Copies of Confirmation Notes:

Pershing cannot send your trade confirmations to a third party; however the third party can be provided with a copy of your trade confirmation. If additional copies are required please provide e-mail or fax details:

Additional e-mail / fax

Additional e-mail / fax

Confirmations via Fax

If you wish to receive confirmations via fax, please complete the below details:

Fax Number Attention

Confirmations via Post

Postal Address

11.CHESS SPONSORSHIP

In order to complete this section, you should refer to the Explanation of CHESS Sponsorship Agreement and the Pershing Sponsorship Agreement in Part F of this document.

Would you like Pershing to establish a new Sponsored HIN? Yes No

If a new HIN is being Issued, would you like to convert its Issuer Sponsored holdings of financial products to its Pershing HIN? Yes No
Please attach current copies of Issuer Sponsored Statements for all financial products being converted

Would you like to transfer an existing HIN from another broker/sponsor? Yes No
If yes, please complete the **Broker to Broker Transfer Authority** Form in Part B (page 7)

12. DVP SETTLEMENT

Would you like to settle your transactions via a third party settlement participant (I.e. non CHESS sponsored/DVP/Margin Lending)? Yes No

If yes, please confirm Participant Name PID HIN

Email Address / Fax Number for Confirmation Notes - Trade Confirmations will be sent to the third party settlement participant

13. DIRECT DEBIT / CREDIT AUTHORITY

In order to complete this section, the Applicant should refer to Pershing's Direct Debit Request & Service Agreement [PART G]. For Direct Debits all bank account holders must sign this section. To link as MMKT a Third Party Authority with the CMA provider must have been completed

Default/Nominated Bank Account The Applicant authorises Pershing to directly credit/debit* the Nominated Bank Account

*Please tick applicable box: Credit Debit Both MMKT

Financial Institution Name: Country of Financial Institution

Account Name

BSB Account Number

Bank Account Holder 1 Name Signature

Bank Account Holder 2 Name Signature

Bank Account Holder 3 Name Signature

14. INCOME DIRECTION

Please tick if applicable

I / we will be CHESS Sponsored by Pershing and I/we authorise CHESS and Pershing to severally advise the relevant Issuer or its nominee to pay by direct credit to the Nominated Bank Account(s) (as specified in Section 13 of this Application Form) all cash dividends, distributions, interest or income payable referable to my/our HIN.

By ticking this box, whenever you purchase financial products which are CHESS sponsored by Pershing, Pershing will pass your banking details via CHESS to the issuer's share registry. This instruction will override all previous instructions you may have given Pershing or the relevant issuer. This instruction only applies to holdings sponsored by Pershing in CHESS. For other holdings, contact the Issuer directly. All cash dividends paid for financial products held under your HIN will be directed into the Nominated Bank Account specified in Section 13 of this Application Form. Note that by providing this instruction, it may override your participation in any existing Dividend Reinvestment Plans (DRP) or Bonus Share Plans. There are also no guarantees that all share registries will accept these instructions from Pershing.

15. ACKNOWLEDGEMENTS

The Applicant acknowledges that it has received, read and understood **the** following documentation:

- (a) Pershing Explanation of CHESSE Sponsorship Agreement [Part F] (if the Client has agreed to be CHESSE Sponsored in Part A Section 11)
- (b) Pershing Financial Services Guide [Part J]
- (c) D2MX Terms and Conditions (including Derivatives, Warrants & Partly Paid Securities Terms (Part K)
- (d) D2MX Disclosure Statement (Part L)
- (e) D2MX Financial Services Guide (FSG) (Part M)
- (f) Licencee Financial Services Guide (FSG) (Part N)
- (g) Licencee Terms and Conditions (Part O)

16. AGREEMENT TO BE BOUND BY DOCUMENTATION

By signing the application form below, the Applicant acknowledges that it has received and read, and the Applicant agrees to be bound by, the following documentation

- (a) Pershing Disclosure Statement [Part E]
- (b) Pershing Sponsorship Agreement [Part F] (if the Client has agreed to be CHESSE Sponsored in Part A Section 11)
- (c) Pershing Direct Debit Request and Service Agreement [Part G] (if the Client has provided Pershing with Direct Debit Authority in Part A Section 13)
- (d) Pershing Derivatives Client Agreement – [Part H] for Options clients only
- (e) Pershing Privacy Policy and Client Statement [Part I]
- (f) Authorisation for electronic confirmations [Part A: Section 10 of Client Application Form] (if applicable)
- (g) Tax File Number Details [Part A: Section 8 of the Client Application Form]
- (h) D2MX Terms and Conditions (including Derivatives, Warrants & Partly Paid Securities Terms (Part K)
- (i) Licencee Terms and Conditions (Part O)

17. INDIVIDUAL CLIENTS TO COMPLETE

Individual (1): Full name	Signature	Date
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	/ /
Individual (2): Full name	Signature	Date
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	/ /
Individual (3): Full name	Signature	Date
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	/ /

18. CORPORATE / COMPANY CLIENTS TO COMPLETE

(Please note that two Directors or a director and a Secretary must sign. Indicate if the Company is a Sole Director/Sole Secretary Company.)

Name of Company: (please print)		
<input style="width: 100%;" type="text"/>		
Director : Full name	Signature	Date
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	/ /
Director / Secretary: Full name	Signature	Date
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	/ /

DECLARATION

By signing this application form, you agree, represent and warrant that you:

- Agree to be bound by the terms and conditions contained within the application.
- Are over the age of 18 years and not of any legal disability.

PERSHING USE ONLY:	
Upon acceptance of this application and the opening of an Account for the Applicant by Pershing (and if the Applicant has agreed to be CHESSE sponsored, upon the issue of a HIN), Pershing will be taken to have agreed to be bound by (and for the CHESSE sponsorship agreement, to have signed) the following documentation.	
(a) Pershing Sponsorship Agreement	(d) Pershing Disclosure Statement
(b) Pershing Direct Debit Request and Service Agreement	(e) Pershing Privacy Policy and Client Statement
(c) Pershing Derivatives Client Agreement	

PART B: BROKER TO BROKER TRANSFER AUTHORITY FORM - EQUITIES

Please complete this form if you wish to transfer securities from another Sponsoring Broker to Pershing Securities Australia Pty Ltd (**Pershing**).

Important: PLEASE ATTACH A COPY OF YOUR LATEST CHESS HOLDING STATEMENT

1. PERSHING ACCOUNT DETAILS

Account Number

Account Name

2. DETAILS AT EXISTING SPONSORING BROKER

For your transfer to be successful, your registration details (i.e. your name and address) on this form must agree with the details on your account with Pershing. If not, you will need to advise your existing Sponsoring Broker of any changes before we can process this transfer.

Please ensure that the details supplied below match the details recorded on your latest CHESS Holding Statement

Registered Name

Account Designation or Trust e.g. <X & Y Superfund A/c>

Registered Address

Name of existing Broker

HIN at existing Broker

Existing Broker Account Number

Existing Broker PID

Please select one option:

- Please transfer HIN (and all holdings) from existing broker to Pershing (PID 1792); **or**
 Please transfer only those holdings listed below from existing broker to Pershing (PID 1792)

SECURITIES TO BE TRANSFERRED (Attach a separate sheet if additional securities are required to be transferred)

ASX CODE	SECURITY NAME (E.g. BHP Limited)	QUANTITY (No. Of Shares)

Agreement:

CHESS Sponsorship: Sponsor me/us into the CHESS Settlement Facility in accordance with Pershing's CHESS Sponsorship Agreement Terms and Conditions. I/we authorise Pershing to transfer the existing HIN and all holdings or the above listed Holdings to my/our Pershing account and we agree to be bound by Pershing's Sponsorship Agreement Terms and Conditions.

If the registration details that are being transferred to Pershing do not match the details supplied on Pershing's Sponsorship Agreement, I hereby authorise Pershing to amend the Registration details to match the Sponsorship Agreement.

Signature of Security Holders Requesting Transfer (all security holders must sign):

Full Name Signature Date

Full Name Signature Date

Full Name Signature Date

*ALL ACCOUNT HOLDERS MUST SIGN. FOR COMPANY ACCOUNTS, SIGN IN ACCORDANCE WITH THE COMPANY'S CONSTITUTION

PERSHING USE ONLY

SPONSORSHIP AGREEMENT RECEIVED INITIALS _____ DATE _____

PART C: BROKER TO BROKER TRANSFER AUTHORITY FORM - OPTIONS

Please complete this form if you wish to transfer Options Positions from another Sponsoring Broker to Pershing Securities Australia Pty Ltd (**Pershing**).

Important: PLEASE ATTACH A COPY OF YOUR LATEST POSITION STATEMENT

1. PERSHING ACCOUNT DETAILS

Account Number

Account Name

2. DETAILS AT EXISTING SPONSORING BROKER

For your transfer to be successful, your registration details (i.e. your name and address) on this form must agree with the details on your account with Pershing. If not, you will need to advise your existing Broker of any changes before we can process this transfer.

Please ensure that the details supplied below match the details recorded on your latest Statement

Registered Name

Account Designation or Trust e.g. <X & Y Superfund A/c>

Registered Address

Name of existing Broker

HIN at existing Broker

Existing Broker Account Number

Existing Broker PID

Please select one option:

- Please transfer ALL Options, Cash and Collateral from existing broker to Pershing (PID 1792); or
- Please transfer only those positions shown in the attached statement /confirmation note from existing broker to Pershing (PID 1792); **or**
- Please transfer only those positions listed below from existing broker to Pershing (PID 1792)

OPTIONS POSITIONS TO BE TRANSFERRED (Attach a separate sheet if additional securities are required to be transferred)

CALL / PUT, EXPIRY MONTH, STRIKE	QUANTITY	TRADE PRICE

Agreement:

I/we authorise Pershing to transfer the existing Options Positions as detailed above to my/our Pershing account and we agree to be bound by Pershing's Derivatives Terms and Conditions.

Signature of Account Holders Requesting Transfer (all account holders must sign):

Full Name

Signature

Date

Full Name

Signature

Date

Full Name

Signature

Date

*ALL ACCOUNT HOLDERS MUST SIGN. FOR COMPANY ACCOUNTS, SIGN IN ACCORDANCE WITH THE COMPANY'S CONSTITUTION

PART D: REGISTERED HOLDER COLLATERAL COVER AUTHORISATION

Client Numbers covered by this Authorisation:

Account No:

Account No:

1. I/We

(insert name of Registered Holder/s) (**Registered Holder**)

with Holder Identification Number

authorise my Controlling Participant, to reserve (or withdraw) Financial Products (**Collateral**) registered in the name of the Registered Holder in the ASX Clear Pty Ltd, ABN 48 001 314 503 (**ASX Clear**) Subposition as Collateral Cover for obligations in respect of Options Market Contracts registered in the Client Accounts nominated above with **Pershing Securities Australia Pty Ltd** ABN 60 136 184 962 AFSL No. 338264

2. 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 above¹ for the purposes of accepting paperless lodgements.
3. 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 Clear, 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).
4. In registering Collateral in the ASX Clear Subposition, the Registered Holder acknowledges that the Collateral will be subject to a fixed charge (**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.
5. 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 Accounts nominated above¹ opened by the ASX Clear Participant in accordance with the ASX Clear Operating Rules and Procedures (as amended from time to time).
6. The Registered Holder acknowledges that the Registered Holder has read and understood the ASX Clear Operating Rules and the ASX Settlement Operating Rules, insofar as those rules relate to the Collateral and the Charge, including:
 - (a) ASX Clear's power to deal with the Collateral on default by the ASX Clear Controlling Participant in respect of the Client Accounts nominated above; and
 - (b) in particular, ASX Clear's power of sale in relation to the Collateral without any notice to the Registered Holder.
7. 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 (**Deed of Priority**) or a security interest as permitted under the ASX Clear Operating Rules or the ASX Settlement Rules.
8. If the Registered Holder's Controlling Participant named in this Authorisation 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.
9. If the ASX Clear Participant is unable to insert the Account Numbers 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 Numbers and/or HIN on this agreement and agrees the ASX Clear Participant will insert the Account Numbers 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 Numbers and/or HIN in writing as soon as reasonably possible.
10. Defined terms have the same meaning as defined in the ASX Clear Operating Rules or the ASX Settlement Operating Rules and Procedures (as amended from time to time).

Registered Holder 1:

Signature

Name

Date

Registered Holder 2:

Signature

Name

Date

Witness

Signature

Name

Date