**START HERE 🡪**

**Please Select:**

Individual(s) 🡪 Complete Part A,B,E,F and G

* dsd

Individual(s) Under 16 🡪 Complete Part A,B,E,F and G

* dsd

Company 🡪 Complete Part A,C,E,F and G

* dsd

Trust / Superannuation Fund 🡪 Complete Part A,D,E,F and G

* dsd

**PART A:** Account Contact Details

Please note: For applications for Individuals under 16 please complete this section with the signing parent or guardian’s details. If more than one parent or guardian is to sign please attach another copy of this page with their details

**Account Contact Person**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| Title |  | Given Name(s) |  | Surname |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Work Phone |  | Home Phone |
|  |  |  |
| Mobile |  | Email |

|  |  |  |
| --- | --- | --- |
| **Account Postal Address** |  | **Account Residential Address** |
|  |  |  |
| Street address |  | Street address |
|  |  |  |
| Town |  | Town |
|  |  |  |  |  |  |  |
| State |  | Postcode |  | Postcode |  | Postcode |

**PART B**: Individual(s) Details

**Applicant 1**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| Title |  | Given Name(s) |  | Surname |
|  |  |  |
| Date of Birth |  | TFN or exemption claimed |

**Applicant 2**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| Title |  | Given Name(s) |  | Surname |
|  |  |  |
| Date of Birth |  | TFN or exemption claimed  |

Please advise if you hold an overseas Tax File Number Yes\_\_\_ No\_\_\_

If yes please advise (i) Tax File Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (ii) Country \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PART C**: Company Details

|  |
| --- |
|  |
| Company Name |
|  |  |  |
| ACN |  | ABN |

**PART C**: Continued

**Director 1**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| Title |  | Given Name(s) |  | Surname |

**Director 2**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| Title |  | Given Name(s) |  | Surname |

Please note: If more than 2 directors please attach another copy of this page with their details

**PART D**: Trust / Superannuation Fund Details

|  |  |
| --- | --- |
|  | As Trustee For |
| Trustee(s) Name |  |
|  | Trading As |
| Trust / Superannuation Fund Name |  |
|  |  |
| Trading Name (if applicable) |  |

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

**Trustee / Director 1**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| Title |  | Given Name(s) |  | Surname |

**Trustee / Director 2**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| Title |  | Given Name(s) |  | Surname |

Please note: If more than 2 trustees / directors please attach another copy of this page with their details

**PART E**: Investment Details

**Investment Amount Interest Rate**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **$** |  | **,** |  |  |  | **,** |  |  |  | **.** |  |  |  |  | **.** |  |  | **%** |

**31 Day Access Investment**

 12 month fixed term – 31 day access account \*

* dsd

\* Only available to existing debenture note holders

**Fixed Term Investments**

 3 months \* 12 months

* dsd
* dsd

 6 months \* 24 months

* dsd
* dsd

 9 months \* 36 months

* dsd
* dsd

\* Only available to existing debenture note holders

Please note: For Fixed Term Investments less than 12months, interest payment is only available on maturity. For terms over 12 months interest is credited monthly. Additional interest requirements can be requested below.

**PART F**: Interest Details

 Compound Interest Credit to Other Account

* dsd
* dsd

**Other Account Details**

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Account Name |  | Bank |
|  |  |  |
| BSB |  | Account Number |

**Additional Interest Details**

|  |
| --- |
|  |

Please note: Alternate interest arrangements are available. Please advise your requirements above.

**PART G**: Account Authority and Declaration

* dsd
* dsd

 Any One to Sign Any Two to Sign

* I/We apply for Secured Notes of Anglesey Secured Investments Limited ACN 111 607 606 as detailed in the terms and conditions contained in the Replacement Prospectus No. 10 dated 19th day of September 2019 as well as the Supplementary Prospectus Dated 20th day of December 2019 and on this Application Form.
* I/We consent to the collection, use and disclosure of information as outlined in the Privacy Disclosure Statement in the Replacement Prospectus & that details of my/our investment may be provided to my/our financial advisor as directed by them.
* I/We declare that all statements made by me/us are complete and accurate and agree to be bound by the provisions of the Trust Deed dated 12th December 2006 as amended from time to time.
* I/We have read the Replacement Prospectus No. 10 dated 19th day of Septemberr 2019 as well as Supplementary Prospectus Dated 20th day of December 2019 and agree to be bound by the conditions of the offer set out in that Prospectus & Supplementary Prospectus. This Application Form must not be issued to any person unless accompanied by the Replacement Prospectus No. 10 dated 19st day of September 2019 and Supplementary Prospectus Dated 20th day of December 2019. No Secured Notes will be issued on the basis of the Replacement Prospectus No. 9 dated 1st day of August 2018.
* If signed under power of attorney, I/We have no knowledge of the revocation of that power of attorney.
* I understand that the quotation of my tax file number is not compulsory but that if I do not supply my tax file number or an exemption status, tax will be withheld from interest earned at the top marginal rate plus the Medicare Levy.
* For applicants under 18 years of age, a parent/guardian must sign the application form to open the account and provide appropriate identification for both themselves and the applicant.

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Signature of Applicant / Director / Trustee 1 |  | Signature of Applicant / Director / Trustee 2 |
|  |  |  |
| Date |  | Date |

Please note: If more than 2 applicants, trustees or directors are to sign please attach another copy of this page with their signatures.

On completion of these documents please

* EMAIL to info@nbficapital.com, **AND**
* IMMEDIATELY RETURN the ORIGINAL executed copy by EXPRESS POST to:
Anglesey Secured Investments Ltd
Suite 103, 274-290 Victoria Street
Darlinghurst NSW 2010