

Complete this form when security for your BT Margin Loan Facility is being provided (owned) by someone other than the borrower(s) – i.e. a third party security provider. Please note that in the case of joint borrowers, where the security being provided is owned by one of the borrowers only, that borrower must also complete a Third Party Security Application Form.

FORM INSTRUCTIONS

Before you complete this Third Party Security Provider Application, please ensure that you read:

1. the Guide to BT Margin Lending brochure;
2. the BT Margin Lending – Margin Loan – Product Disclosure Statement;
3. the CHESSEX explanation, Supplementary risk disclosure statement and Privacy disclosure and consent;
4. the BT Margin Lending Facility Agreement;
5. the BT Securities Limited Financial Services Guide; and
6. the Third Party Security Provider additional risk disclosure statement.

You can download the above documents from our website www.bt.com.au or you can phone our BT Customer Relations Consultants on 1800 816 222 for more information.

Who can provide third party security on a BT Margin Loan Facility

BT Margin Lending will accept Third Party Security Applications from:

1. Individuals who are Australian residents for tax purposes and reside in Australia.
2. Australian proprietary companies which are not subsidiaries of listed companies. The company directors must be Australian residents for tax purposes and reside in Australia.

How to complete this Third Party Security Provider Application Form


1. This form contains mandatory sections to complete, which are dependent on the entity providing the third party security i.e. individual or company.
2. The checklist opposite will assist you to complete this Third Party Security Provider Application Form accurately. You may care to tick [✓] the relevant sections as you go, to ensure that you are accurately completing the form, and that you are providing any additional attachments required to support this application.
3. Please use **BLACK PEN** and print in clear **CAPITAL LETTERS**.

Mandatory Sections for Completion per Third Party Security Provider Type

Third Party Security Provider Type	Complete	Description/Comment
Individual Third Party Security Providers	<input type="checkbox"/> Section 1	Name of Borrower
	<input type="checkbox"/> Section 2	Individual Third Party Security Provider – Personal Details
	<input type="checkbox"/> Section 4	Third Party Security Provider Signing Section
Company Third Party Security Providers	<input type="checkbox"/> Section 1	Name of Borrower
	<input type="checkbox"/> Section 3	Company Third Party Security Provider Details
	<input type="checkbox"/> Section 4	Third Party Security Provider Signing Section
	<input type="checkbox"/>	Cheque for \$200 cheque (made payable to BT Margin Lending) for company application fee is attached.

Submitting your Third Party Security Provider Application Form

The **original** of this form and any other required information must be sent to:

 mail BT Margin Lending
GPO Box 3917
Sydney NSW 2001

 fax **This form cannot be faxed**

Approval of your Third Party Security Provider Application

Please note that all applications are subject to our approval.

BT Margin Lending will contact you, the borrower or any nominated financial adviser to notify you of the decision and/or any additional information and conditions.

QUESTIONS?

If you have any questions regarding completing this form, and:

You are the third party applicant or borrower:

- call BT Customer Relations Consultants on 1800 816 222, or
- email us at client.marginlending@btfinancialgroup.com

You are the nominated financial adviser:

- Please call BT Adviser Relations on 1800 671 409, or
- Email us at adviser.marginlending@btfinancialgroup.com

Phone lines are available Mon–Fri from 8.00am to 6.30pm (Sydney time).

1. NAME OF BORROWER TO WHOM THIRD PARTY SECURITY IS TO BE APPLIED

Borrower's name

Borrower's client code (for existing BT Margin Loan Facilities only)

2. INDIVIDUAL THIRD PARTY SECURITY PROVIDERS – PERSONAL DETAILS

For a Third Party Security Application consisting of more than two individual security providers, please complete an additional Third Party Security Application Form, and attach a letter confirming all third party security providers to the BT Margin Loan Facility.

2A INDIVIDUAL THIRD PARTY SECURITY PROVIDER 1

Title

Mr Mrs Miss Ms Other

Given name(s) (include first and middle names)

Surname

Date of birth (dd/mm/yyyy)

Drivers licence number

State of issue

Home phone number

Mobile phone number

Work phone number

Fax number

Email address*

** In the future, BT may elect to email correspondence to you.*

Current residential address (PO Box is not acceptable)

Mailing address (write "AS ABOVE" if the same as your current residential address. We may use this address for future correspondence, including for CHESSE purposes.)

Tax file number (TFN)¹

2B INDIVIDUAL THIRD PARTY SECURITY PROVIDER 2

Title

Mr Mrs Miss Ms Other

Given name(s) (include first and middle names)

Surname

Date of birth (dd/mm/yyyy)

Drivers licence number

State of issue

Home phone number

Mobile phone number

Work phone number

Fax number

Email address*

** In the future, BT may elect to email correspondence to you.*

Current residential address (PO Box is not acceptable)

Mailing address (write "AS ABOVE" if the same as your current residential address. We may use this address for future correspondence, including for CHESSE purposes.)

Tax file number (TFN)¹

3. COMPANY THIRD PARTY SECURITY PROVIDER

3A COMPANY DETAILS

Full name of company as registered by ASIC

Australian Company Number (ACN)

Australian Business Number (ABN)¹

Tax file number (TFN)¹

Registered office address (PO Box is not acceptable)

Form with three rows for address, including fields for State and Postcode.

Principal place of business (if any – PO Box is not acceptable)

Form with three rows for address, including fields for State and Postcode.

Mailing address (We may use this address for future correspondence, including for CHES purposes.)

Form with three rows for address, including fields for State and Postcode.

Name of contact person

Form for contact person name.

Home phone number

Form for home phone number.

Mobile phone number

Form for mobile phone number.

Work phone number

Form for work phone number.

Fax number

Form for fax number.

Email address*

Form for email address with grid.

* In the future, BT may elect to email correspondence to you.

3B COMPANY THIRD PARTY SECURITY PROVIDER DIRECTOR DETAILS

How many directors are there?

Form for number of directors.

All company directors are to complete this section. If there are more than two company directors, attach a separate sheet.

DIRECTOR 1

Title

Form for title with options: Mr, Mrs, Miss, Ms, Other.

Given name(s) (include first and middle names)

Form for given name(s).

Surname

Form for surname.

Date of birth (dd/mm/yyyy)

Form for date of birth with grid.

Drivers licence number

Form for drivers licence number with grid.

State of issue

Form for state of issue.

Home phone number

Form for home phone number.

Mobile phone number

Form for mobile phone number.

Work phone number

Form for work phone number.

Fax number

Form for fax number.

Email address*

Form for email address with grid.

* In the future, BT may elect to email correspondence to you

Current residential address (PO Box is not acceptable)

Form with three rows for address, including fields for State and Postcode.

Mailing address (write "AS ABOVE" if the same as your current residential address. We may use this address for future correspondence, including for CHES purposes.)

Form with three rows for address, including fields for State and Postcode.

Tax file number (TFN)¹

Form for tax file number with grid.

DIRECTOR 2

Title

Form for title with options: Mr, Mrs, Miss, Ms, Other.

Given name(s) (include first and middle names)

Form for given name(s).

Surname

Form for surname.

Date of birth (dd/mm/yyyy)

Form for date of birth with grid.

Drivers licence number

Form for drivers licence number with grid.

State of issue

Form for state of issue.

Home phone number

Form for home phone number.

Mobile phone number

Form for mobile phone number.

Work phone number

Form for work phone number.

Fax number

Form for fax number.

Email address*

Form for email address with grid.

* In the future, BT may elect to email correspondence to you

Current residential address (PO Box is not acceptable)

Form with three rows for address, including fields for State and Postcode.

Mailing address (write "AS ABOVE" if the same as your current residential address. We may use this address for future correspondence, including for CHES purposes.)

Form with three rows for address, including fields for State and Postcode.

Tax file number (TFN)¹

Form for tax file number with grid.

4. THIRD PARTY SECURITY PROVIDER SIGNING SECTION

4A POWER OF ATTORNEY

Without limiting any power of attorney given by me under the BT Margin Lending Facility Agreement (**Facility Agreement**), I appoint BT Securities Limited ABN 84 000 720 114 (**the Lender**) and each person who is at any time authorised by **the Lender** or a related body corporate of **the Lender** to exercise the powers contained in this power of attorney separately as my attorneys.

1. I agree to approve anything an attorney does under this power of attorney, until this power of attorney is revoked in accordance with its terms and each attorney becomes aware that it has been revoked.
2. I agree that this power of attorney cannot be revoked by me without the written consent of **the Lender**.
3. I give the authorisations, consents and acknowledgments set out in the BT Margin Lending Loan Application attached to this power of attorney.
4. I declare that the information given in the BT Margin Lending Loan Application is correct and that this power of attorney is given for valuable consideration.
5. I declare that the attorneys are authorised to do any act as a result of which a benefit may be conferred on an attorney.
6. An attorney may delegate to another person a power under this power of attorney and may appoint an attorney to act on their behalf, as a sub-attorney.
7. An attorney may, in my name:
 - (a) do everything needed (including completing any blanks) to execute and deliver the **Facility Agreement** and other documents listed in the Schedule in the Signing Section to this power of attorney and any other documents connected with them; and
 - (b) stamp and register at my cost any of the documents listed in the Schedule in the Signing Section to this power of attorney and any other document connected with them.
8. Without limiting clause 7, an attorney may also in my name execute any document or do any act in connection with:
 - (a) any notification to a share registry, **securities** issuer or CHESS of a change of registration details (including the registered name) of any of my **securities** to correspond with the details advised by me to **the Lender** from time to time;
 - (b) any conversion request form, transfer form or other document, in relation to any **securities** for the purpose of converting or transferring those **securities** to or from my participant holding with BT (Queensland) Pty Limited ABN 49 009 818 875 (**the Nominee**) or **the Lender** and/or an agent of either of them;
 - (c) any document which relates in any way to my **securities** or entitlements that form part of the loan portfolio or that are otherwise related to the **Facility Agreement** including:

- (i) directions to a company or share registry as to the address for payment of entitlements; and
 - (ii) any application for the issue of share certificate or other documents evidencing title pursuant to section 1070D of the Corporation Act in respect of **securities**; and
 - (d) any direction to **the Nominee** as nominee under the **Facility Agreement**; or
 - (e) stamping and registering any documents; or
 - (f) any instructions to a sponsor of my participant sponsored holding.
9. I declare that:
- (a) I am the legal owner of the **securities** and entitlements that form the part of the loan portfolio applicable to me and am entitled to authorise the attorney to act in accordance with this power of attorney;
 - (b) anything done in exercising the powers given under this power of attorney will be as binding on me and anyone else as if I had done the acts myself; and
 - (c) any person who deals with the attorneys in good faith may accept as true, a statement the attorney signs which says:
 - (i) an act of the attorney is a proper exercise of the powers under this power of attorney; or
 - (ii) this power of attorney has not been revoked.
10. I agree to indemnify the attorneys against, and I must therefore pay the attorneys on demand for any loss or costs they suffer or incur in exercising powers under this power of attorney.
11. The meaning of the words printed **like this** and some other important words are explained in the section Meaning of words and interpretation in the **Facility Agreement** or in this power of attorney.
12. I, me, mine and similar terms are references to each person identified as a third party security provider in the BT Margin Lending Loan Application and executes this power of attorney separately.
13. Where the third party security provider in the BT Margin Lending Loan Application is a company, I confirm that the directors of the company authorised me to advise that the provision of the third party security is considered to be in the best interest of the company because:

4B SIGNING SECTION

SCHEDULE

- a) The **Facility Agreement** between me (possibly together with other borrowers and third party security providers), **the Lender and the Nominee**;
- b) one or more CHESS sponsorship agreements substantially in the form set out in the facility relating to **securities** and entitlements I hold either alone or together with another person.

BY SIGNING BELOW, YOU ACKNOWLEDGE, DECLARE AND CONFIRM THAT:

- you have read and accept the terms of the BT Margin Lending – Margin Loan – Product Disclosure Statement, the BT Margin Lending Facility Agreement (**Facility Agreement**), the Supplementary risk disclosure statement, the Third Party Security Provider additional risk disclosure statement, the BT Securities Limited Financial Services Guide, the Privacy disclosure and consent, the CHESS explanation and the power of attorney conditions,
- you accept the risks of margin lending and your obligations if we approve your application,
- you give our officers and us the power to enter into agreements, which bind you and do other things on your behalf without referring to you, including to complete your HIN details in your sponsorship agreement,
- you acknowledge that you have read and accepted the information under the heading Privacy disclosure and consent in the BT Margin Lending Loan Application, and consent to the collection, use and disclosure of personal information in accordance with the Privacy disclosure and consent,
- you grant the Power of Attorney in Section 4A of this Third Party Security Provider Application Form,
- all the information you have provided on this Third Party Security Provider Application Form is true and correct,
- you are an Australian resident for tax purposes residing in Australia, and
- you acknowledge receiving a copy of the sponsorship agreement contained in the BT Margin Lending Facility Agreement for your records.

For Company Third Party Security providers, either two Directors, or one Director and the Secretary, or the Sole Director and Sole Secretary must sign. Indicate your company capacity by marking the appropriate box below your signature.

Company Third Party Security providers do not need to have their signatures witnessed in this section.

Signature of Third Party Security Provider 1

Full name of **Third Party Security Provider 1** (please print)

Director Sole Director/Sole Secretary

Signature of Witness

Full name of **Witness**(please print)

[Witness must be an independent party to this application.]

Signature of Third Party Security Provider 2

Full name of **Third Party Security Provider 2** (please print)

Director Sole Director/Sole Secretary

Signature of Witness

Full name of **Witness**(please print)

[Witness must be an independent party to this application.]

Date (dd/mm/yy)

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1 You are not required by law to provide your TFN or ABN, however if you do not provide one, tax may be deducted from your dividends and distributions at the highest marginal tax rate (plus Medicare Levy). If you quote your TFN or ABN, you authorise BT Securities Limited ABN 84 000 720 114 to disclose it to its related bodies corporate, BT (Queensland) Pty Limited ABN 49 009 818 875, ASX Settlement Pty Limited ABN 49 008 504 532, fund managers, trustees, sponsors of your shareholdings and their agents and other issuers of securities for purposes relating to the securities in the loan portfolio.