

# Separately Managed Account Application Form

## How to fill out this form:

Please refer to **Section One ‘Investor Type’** for full details of the sections that you are required to fill out and the supporting documentation required.

## How to fill out ‘Section 5. Investment Details’

Rivkin has developed four portfolio options that are designed for different investor types. The below table shows these options:

Portfolio	Recommended Minimum Timeframe	Investor Type
Smart Growth	3 years	Ideal for an investor looking to invest in Australian stocks and achieve capital growth with a minimal focus on dividends
Defensive Income	1 year	Ideal for an investor looking to invest in Australian stocks and achieve a high dividend yield from the portfolio. Capital growth is a secondary concern for this investor.
Global Growth	3 years	Ideal for an investor looking to invest in Global stocks and achieve capital growth in the portfolio with a minimal focus on dividends.
Capital Stable	1 year	Ideal for an investor looking to preserve capital and achieve a modest return with a low chance of a negative return in any twelve-month period.

The minimum recommended timeframes are only suggestions but aim to reduce the chance of a negative investing outcome for those investors choosing that portfolio.

When filling out section 5, you simply need to specify how much money you wish to invest in each portfolio. It is perfectly acceptable to invest the total amount only in one portfolio as these are designed to be standalone portfolios although you can also allocate funds to more than one option.

It is not necessary to fill out anything in the ‘Standalone Investment Portfolios’ section unless you have specific Rivkin strategies that you would like to invest in.

## How to fill out ‘Section 7. Financial Advisor Details’

Section 7 only needs to be filled out if you are applying through a Financial Planner, otherwise just leave this section blank.

Please also complete the **‘Verification Consent’** section that is included at the end of the form. This allows Rivkin to verify your identity and address.

## Contact Us

If you have any trouble filling out this form, please contact us on 1300 748 546.

# MAINSTREAM SMA

THE TRUST COMPANY (RE SERVICES) LIMITED ABN 45 003 278 831  
MAINSTREAM SEPERATELY MANAGED ACCOUNT (SMA) ARSN 631 635 473



This Initial Application Form relates to a Product Disclosure Statement dated 7<sup>th</sup> May 2019 (“PDS”) issued by The Trust Company (RE Services) Limited ABN 45 003 278 831, for the offer of interest in the Mainstream Separately Managed Account (“SMA”). Terms defined in the PDS have the same meaning in this Initial Application Form. The PDS contains important information about investing in the SMA, and you are advised to read the PDS before completing this Initial Application Form.

If you are an existing investor and this is an additional investment, please use the Additional Investment Form.

If you are a new investor, or if you are an existing investor and this investment is NOT in the same name(s) and strategy as your existing account, please complete the sections of this Initial Application Form and the Identification Forms noted below in Section 1.

If you have not been provided with the Identification Form with this application, you can obtain this at [www.mainstreamgroup.com/SMA](http://www.mainstreamgroup.com/SMA).

## 1. INVESTOR TYPE

Please complete the required Identification Form and provide certified copies of the identification requested on the Identification Form.

INVESTOR TYPE		COMPLETE SECTIONS	IDENTIFICATION FORM
Individual and Joint Investors	A natural person or persons.	2, 4, 5, 6, 7 & 8	Form A – Individuals
Sole Trader	A natural person operating a business under their own name with a registered business name.	3, 4, 5, 6, 7 & 8	Form A – Individuals
Companies	A company registered as an Australian public company or an Australian proprietary company, or a foreign company.	3, 4, 5, 6, 7 & 8	For a Company complete the relevant form based on company type either Forms B or C. All Beneficial Owners named on Form B or C must complete Form A.

INVESTOR TYPE	COMPLETE SECTIONS	IDENTIFICATION FORM
<p>Trusts</p> <p>Types of trusts include self-managed superannuation funds, registered managed investment schemes, unregistered wholesale managed investment schemes, government superannuation funds or other trusts (such as family trusts and charitable trusts).</p>	<p>3, 4, 5, 6, 7 &amp; 8</p>	<p>For the Trust complete either Form D or E; and</p> <p>For an Individual Trustee complete Form A; or</p> <p>For a Company Trustee Complete Form B or C</p> <p>All Beneficial Owners named on Form D or E must be complete Form A</p>
<p>Partnership</p> <p>A partnership created under a partnership agreement.</p>	<p>3, 4, 5, 6, 7 &amp; 8</p>	<p>For the Partnership please complete Form F</p> <p>All Beneficial Owners named on Form F must complete Form A.</p>
<p>Associations</p> <p>Incorporated associations are associations registered under State or Territory based incorporated association statutes.</p> <p>Unincorporated associations are those of persons who are not registered under an incorporated associations statute and thus do not have the legal capacity to enter into agreements.</p>	<p>3, 4, 5, 6, 7 &amp; 8</p>	<p>For the Association please complete Form G.</p> <p>All Beneficial Owners named on Form G must complete Form A.</p>
<p>Registered Co-operative</p> <p>An autonomous association of persons united voluntarily to meet common economic, social and cultural needs and aspirations through a jointly-owned and democratically-controlled enterprise registered under a registry system maintained by a State or Territory. This investor type can include agricultural businesses such as a dairy co-operative.</p>	<p>3, 4, 5, 6, 7 &amp; 8</p>	<p>For the Registered co-operative please complete Form H.</p> <p>All Beneficial Owners named on Form H must complete Form A.</p>
<p>Government Body</p> <p>The government of a country, an agency or authority of the government of a country, the government of part of a country or an agency or authority of the government of part of a country.</p>	<p>3, 4, 5, 6, 7 &amp; 8</p>	<p>For a Government body please complete Form I.</p> <p>All Beneficial Owners named on Form I must complete Form A.</p>

## 2. INDIVIDUALS AND JOINT ACCOUNT HOLDERS INVESTOR DETAILS

### APPLICANT 1

Title                      Given Name                      Surname  
                                           

Occupation                      Australian Tax File Number  
                     

Residential Address  
Street address 1

Street Address 2

Suburb                      State                      Postcode                      Country  
                                                                 

Postal Address if different to Residential Address  
Street address 1

Street Address 2

Suburb                      State                      Postcode                      Country  
                                                                 

Phone Number (business hours)                      Phone Number (non-business hours)  
                     

Mobile Number                      Email Address  
                     

Preferred contact method

I consent to receive all investor correspondence from you by email to the email address provided.

I wish to receive all investor correspondence by post to the address provided in on this Application Form.

I nominate my financial advisor as noted in section 6 to receive all investor correspondence.

## APPLICANT 2 (IF APPLICABLE)

Title  Given Name  Surname

Occupation  Australian Tax File Number

Residential Address  
Street address 1

Street Address 2

Suburb  State  Postcode  Country

Postal Address if different to Residential Address  
Street address 1

Street Address 2

Suburb  State  Postcode  Country

Phone Number (business hours)  Phone Number (non-business hours)

Mobile Number  Email Address

Preferred contact method

I consent to receive all investor correspondence from you by email to the email address provided.

I wish to receive all investor correspondence by post to the address provided in on this Application Form.

I nominate my financial advisor as noted in section 6 to receive all investor correspondence.

### 3. ALL OTHER ACCOUNT HOLDERS INVESTOR DETAILS

Investor Type/Capacity

<input type="checkbox"/>	Company	<input type="checkbox"/>	Sole Trader	<input type="checkbox"/>	Trust	<input type="checkbox"/>	Partnership
<input type="checkbox"/>	Association	<input type="checkbox"/>	Co-operative	<input type="checkbox"/>	Government Body	<input type="checkbox"/>	Other

Full Name of Company / Business if Sole Trader / Trust (including Trustee details) / Partnership/Association/ Cooperative/ Government Body

Tax File Number

ABN (if applicable)

Principle Business Activity

Address

Street address 1

Street Address 2

Suburb

State

Postcode

Country

Phone Number (business hours)

Mobile Number

Fax Number

Email Address

Preferred contact method

I consent to receive all investor correspondence from you by email to the email address provided.

I wish to receive all investor correspondence by post to the address provided in on this Application Form.

## 4. APPOINTMENT OF AUTHORISED REPRESENTATIVE

Complete this section if you wish to appoint a person to act in a legal capacity as your authorised representative and to operate your investment in the Scheme on your behalf. In general, an authorised representative can do everything you can do with your investment, except change bank account details and appoint another authorised representative.

Your Nominated Representative will be permitted to:

- make applications on your behalf;
- provide all instructions relating to your Account and all investments of your Account including (without limitation) selecting and switching Model Portfolios, making additional applications, making withdrawals from your Account, and changing your Account details (except for change in bank details);
- make enquiries regarding your investments and obtaining information about your Account and all assets held;
- provide instructions to the Responsible Entity of the SMA on your behalf including the above and any transactions incidental to any of the above; and
- receive any communication regarding your Account in the SMA on your behalf.

We may act on the sole instructions of the authorised representative until you advise us in writing that the appointment of your authorised representative has terminated. We may also terminate or vary an appointment of an authorised representative by giving you 14 days' prior notice.

If an authorised representative is a partnership or a company, any one of the partners or any Director of the company is individually deemed to have the powers of the authorised representative.

Please attach a certified copy of your Power of Attorney.

For information on how to certify your document please refer to section 10 – Certification Requirements

Given Name

Surname

Signature of Authorised Representative

Date

## 5. INVESTMENT DETAILS

### Preselected Smart Portfolios

While Rivkin's portfolios can be followed on a standalone basis, for greater diversification we have constructed four model portfolio options that each focus on a different investor goal. These options hold pre-set portfolios at pre-set weightings so that the investor isn't burdened with the decision of which portfolios to follow.

Please make at least one selection from either i) or ii) below.

#### i) Please select from the below Rivkin Securities Smart Portfolio

Name	Underlying Portfolios	Amount (\$)
Smart Growth	ASX Momentum (40%-60%) ASX Value (40%-60%)	
Defensive Income	ASX Income (70%-90%) ASX Value (10%-30%)	
Global Growth	ASX Momentum (15%-25%) ASX Value (15%-25%) US Momentum (25%-35%) US Value (25%-35%)	
Capital Stable	Low Volatility (100%)	

#### ii) Standalone Investment Portfolios

Investment Strategy Allocation (Please select model portfolio type and allocation)

Name	Model Portfolio Type	Benchmark	Amount (\$)
ASX Momentum Portfolio	Australian Shares	S&P/ASX 100 Accumulation Index	
ASX Value Portfolio	Australian Shares	S&P/ASX 200 Accumulation Index	
ASX Income Portfolio	Australian Shares	RBA Cash Rate + 6%	
United States Value Portfolio	United States Shares	S&P 500 Accumulation Index	
United States Momentum Portfolio	United States Shares	S&P 500 Accumulation Index	
Low Volatility Portfolio	Australian Shares	RBA Cash Rate + 4%	

Source of funds being invested (choose most relevant)

Retirement Income		Sale of Assets	
Employment Income		Inheritance/gifts	
Business Activities		Financial Investments	
Other			

#### Stock Transfer In

For all stock transfer requests, please complete the attached 'Mainstream SMA Stock Transfer In Form'. This will need to be attached to the completed initial application form.



## 6. PAYMENT METHOD

### **Cheque**

Cheque payable to: The Trust Company (RE Services) Limited RE <Mainstream Separately Managed Account>  
Application Account

### **Direct Credit/Electronic Funds Transfer**

Bank: ANZ Bank  
Account Name: Mainstream Separately Managed Account  
BSB: 012-003  
Account Number: 838123426

### **Direct Debit (Please complete below 11. Direct Debit Agreement)**

Request and Authority to debit the account names below to pay

**Mainstream Fund Services Pty Ltd**

### **Your Nominated bank account for all withdrawals**

The following nominated bank account will be used for payment of any withdrawal proceeds and can only be changed on submission of a signed bank account nomination form or a withdrawal form. This account must be held with an Australian financial institutional and cannot be in the name of a third party. This account must be in the same name as your account in the Service.

Account Name

Bank

BSB

Account Number

## 7. FINANCIAL ADVISOR DETAILS

By filling out this section, you nominate and consent and named Financial Adviser access to your information.

Advisor Name (Full Name)

Name of Advisory Firm

Name of Dealer Group

AFSL or AFSL Representative Number

Address

Street address 1

Street Address 2

Suburb

State

Postcode

Country

Phone Number (business hours)

Mobile Number

Fax Number

Email Address

If you have elected your financial adviser to receive all investor correspondence, please confirm the financial advisors preferred contact method.

I consent to receive all investor correspondence from you by email to the email address provided in section 6.

I wish to receive all investor correspondence by post to the address provided in section 6.

## 8. DECLARATION

I/we declare and agree each of the following:

- I/we have read the current PDS to which this application applies and have received and accepted the offer in it.
- My/our application is true and correct.
- I am/we are bound by any terms and conditions contained in the current PDS and the provisions of the constitution of the Scheme as amended from time to time.
- I/we have legal power to invest.
- If this is a joint application, each of us agrees that our investment is as joint tenants. Each of us is able to operate the account and bind the other to any transaction including investments or withdrawals by any available method.
- If investing as trustee on behalf of a super fund or trust, I/we confirm that I am/we are acting in accordance with my/our designated powers and authority under the relevant trust deed. In the case of a super fund, I/we also confirm that it is a complying fund under the Superannuation Industry (Supervision) Act 1993.
- I/we acknowledge that none of The Trust Company (RE Services) Limited ABN 45 003 278 831 or any of their related entities, officers or employees or any related company or any of the appointed service providers including the investment manager and custodian guarantee the repayment of capital or the performance of the Scheme or of any particular rate of return by the Scheme.
- I/we agree to the anti-money laundering and counter-terrorism financing statements contained in the PDS. I/we agree to provide further information or personal details to The Trust Company (RE Services) Limited and the custodian if required to meet their obligations under any anti- money laundering and counter-terrorism law and regulations, and acknowledge that processing of my/our application may be delayed and will be processed at the unit price applicable for the business day on which all required information has been received and verified.
- I/we have read and understood the privacy disclosure as detailed in the PDS. I/we consent to my/our personal information being collected, held, used and disclosed in accordance with the privacy disclosure. I/we consent to The Trust Company (RE Services) Limited disclosing this information to my/our financial adviser (named in this form) for interest in the Scheme. Where the financial adviser no longer acts on my/our behalf, I/we will notify The Trust Company (RE Services) Limited of the change.
- If I/we have appointed an authorised representative, I/we release, discharge and indemnify The Trust Company (RE Services) Limited from any loss, expense, action or other liability which may be suffered by, brought against me/us or The Trust Company (RE Services) Limited for any action or omissions by the authorised representative whether authorised by me/us or not.
- I/we certify that the information provided in the separate ID forms, including information relating to tax-related requirements, is reasonable based on verifiable documentation.

I/we acknowledge and agree that:

- The Trust Company (RE Services) Limited may be required to pass on my/our personal information or information about my/our investment to the relevant regulatory authorities, including for compliance with anti-Money laundering and counter- terrorism law and regulations as well as any tax-related requirements for tax residents of other countries.

## 9. SIGNATURES

Joint applications must both sign, for Individual Trustee Trust/Superannuation Funds each individual trustee must sign. For Corporate Trustee Trust/Superannuation Funds, 2 directors, a Director and Secretary or Sole Director must sign.

### APPLICANT 1

Full Name

Signature

Date

Tick Capacity (mandatory for companies)

Sole Director	
Director	
Secretary	
Non-Corporate Trustee	
Partner	

### APPLICANT 2

Full Name

Signature

Date

Tick Capacity (mandatory for companies)

Sole Director	
Director	
Secretary	
Non-Corporate Trustee	
Partner	

Post your original signed Initial Application Form, Identification Forms and certified copies of your identification required to:

Mainstream Fund Services Pty Limited  
GPO Box 4968  
Sydney NSW 2000

Please ensure that you have transferred your Application Monies or enclose a cheque for payment.

## 10. CERTIFICATION REQUIREMENTS

All documents must be provided in a certified copy format – in other words, a copy of the original document that has been certified by an eligible certifier.

A 'certified extract' means an extract that has been certified as a true copy of some of the information contained in a complete original document by one of the persons described below.

### **People who can certify documents or extracts are:**

- A lawyer, being a person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described).
- A magistrate, a chief executive officer of a Commonwealth court or a judge, registrar or deputy registrar of a court.
- A Justice of the Peace.
- A notary public (for the purposes of the Statutory Declaration Regulations 1993).
- An agent of the Australian Postal Corporation (APC) who is in charge of, or a permanent employee of the APC with 2 or more years of continuous service who is employed in an office supplying postal services to the public.
- A police officer or an Australian consular officer or an Australian diplomatic officer (under the Consular Fees Act 1955).
- An officer with 2 or more continuous years of service with one or more financial institutions (under the Statutory Declaration Regulations 1993).
- A finance company officer with 2 or more continuous years of service with one or more financial companies (under the Statutory Declaration Regulations 1993).
- An officer with, or authorised representative of, a holder of an Australian Financial Services License, having 2 or more continuous years of service with one or more licensees.
- A member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute Accountants with 2 or more years of continuous membership.

**Please note that we require the copy which was actually signed by the certifier (i.e. the original penned signature of the certifier).**

# 11. DIRECT DEBIT AGREEMENT

## Direct Debit Services Agreement

The following is your Direct Debit Service Agreement with Mainstream Fund Services Pty Ltd ABN 81 118 902 891 (Mainstream) who acts as the administrator for the Mainstream Separately Managed Account. The agreement is designed to explain what your obligations are when undertaking a Direct Debit arrangement with us. It also details what our obligations are to you as your Direct Debit Provider.

We recommend you keep this agreement in a safe place for future reference. It forms part of the terms and conditions of your Direct Debit Request (DDR) and should be read in conjunction with your Direct Debit Request form or additional application form (as applicable).

## Definitions

**Account** means the account held at your financial institution from which we are authorised to arrange for funds to be debited.

**Agreement** means this direct debit request service agreement between you and us.

**Banking day** means a day other than a Saturday or a Sunday or a public holiday listed throughout Australia.

**Debit day** means the day that payment by you to us is due.

**Debit payment** means a particular transaction where a debit is made.

**Direct debit request** means the Direct Debit Request in the application form or additional application form

**Us** or **we** means **Mainstream**, (the Debit User) you have authorised by signing a Direct Debit Request.

**You** means the customer who has signed or authorised by other means the Direct Debit Request.

**Your financial institution** means the financial institution nominated by you on the DDR at which the account is maintained.

## Direct Debit Services Agreement

## Debiting your Account

- a. By signing a *Direct Debit Request* or by providing us with a valid instruction, you have authorised us to arrange for funds to be debited from your account. You should refer to the *Direct Debit Request* and this agreement for the terms of the arrangement between us and you.
- b. We will only arrange for funds to be debited from your account as authorised in the *Direct Debit Request* or we will only arrange for funds to be debited from your account if we have sent to the address nominated by you in the *Direct Debit Request*, a billing advice which specifies the amount payable by you to us and when it is due.
- c. 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.

*The Direct Debit will be made on receipt of your application. It takes three days for the request to be cleared. Upon confirmation that the funds are cleared we will apply the funds on the next Rebalancing Date.*

## Amendments by Us

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

## Amendments by You

- a. You may change, stop or defer a debit payment, or terminate this agreement by providing us with at least fourteen (14 days) notification by writing to:
  - I. Mainstream SMA  
Mainstream Fund Services Pty Ltd  
GPO BOX 4968  
Sydney NSW 2001

or

- II. by telephoning us on 1300 133 451 during business hours;

or

- III. arranging it through your own financial institution.

## Your Obligations

- a. 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*.
- b. If there are insufficient clear funds in *your account* to meet a *debit payment*:
  - I. you may be charged a fee and/or interest by *your financial institution*;
  - II. you may also incur fees or charges imposed or incurred by *us*; and
  - III. 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*.
- c. You should check *your account* statement to verify that the amounts debited from *your account* are correct
- d. If **Mainstream Fund Services Pty Ltd** is liable to pay goods and services tax ("GST") on a supply made in connection with this *agreement*, then *you* agree to pay **Mainstream Fund Services Pty Ltd** on demand an amount equal to the consideration payable for the supply multiplied by the prevailing GST rate.

## Confidentiality

- a. 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.
- b. We will only disclose information that *we* have about *you*:
  - IV. to the extent specifically required by law; or
  - V. for the purposes of this *agreement* (including disclosing information in connection with any query or claim).

## Notice

- a. If *you* wish to notify *us* in writing about anything relating to this *agreement*, *you* should write to  
**Mainstream Fund Services Pty Ltd**  
GPO Box 4968  
Sydney NSW 2001
- b. We will notify *you* by sending a notice in the ordinary post to the address *you* have given *us* in the *Direct Debit Request*.
- c. Any notice will be deemed to have been received on the third *banking day* after posting.

**Request and Authority to debit the account named below to pay Mainstream Fund Services Pty Ltd**

Your Surname or Company Name

Your Given Names or ABN/ARBN

Account Name

Financial Institution

Branch

BSB number (must be 6 digits)

Account Number

**Acknowledgement**

By signing this direct debit request, you authorise and are providing Mainstream Fund Services Pty Ltd (user ID: 524538), in respect to your investment amount, to debit the account as described above, any amount which it may debit or charge through the direct debit system in connection with your existing savings plan investment amount and any future amounts you instruct Mainstream Fund Services Pty Ltd to invest in the Mainstream Separately Managed Account. Also by signing, you certify that you have understood and agreed to the terms governing the direct debit arrangements between you and Mainstream Fund Services Pty Ltd.

Signature

Date

Address

  

Signature

Date

Address



## Verification Consent

### Individual or Joint Application:

I confirm that I am authorised to provide the personal details presented and I consent to my information being passed to and checked with the document issuer, official record holder, a credit bureau and authorised third parties for the purpose of verifying my identity and address.

#### Applicant One

#### Applicant Two (if applicable)

Signed: .....

Signed: .....

Name: .....

Name: .....

Date: .....

Date: .....

### Company or Trust Application:

I confirm that I am authorised to provide the personal details presented and have obtained the consent of the individuals to which the personal details relate for this information to be passed to and checked with the document issuer, official record holder, a credit bureau and authorised third parties for the purpose of verifying my identity and address. I also confirm that if required, evidence of this consent can be produced.

Signed: .....

Name: .....

Date: .....