

# Transfer Request Form

PLEASE USE BLOCK LETTERS AND BLACK INK TO COMPLETE THIS FORM



To transfer all or part of your units to another person or entity (this includes transfers by way of a gift), please ensure you complete the following steps:

- Complete this Transfer Request Form with the details of the transferor(s)/seller(s) and transferee(s)/buyer(s).
- Complete the relevant Application Form, if applicable, for the transferee(s)/buyer(s)

## Contact details

Mail your completed forms to:

Fidante Partners  
Reply Paid 86049  
Sydney NSW 2001 (no stamp required)

If you have any questions regarding this form, please contact our Investor Services Team on 13 51 53.

## 1 Transferor(s)/seller(s) details

Account name

Account number

## 2 Transferee(s)/buyer(s) details

Transfer to my existing account number (if applicable):

Account name

Account number

Please complete section 3 if you are a transferee/buyer with an existing account.

Transfer to a new account (please complete relevant application form).

### Investor Type

Please indicate (X) the investor type for the transferee

Individual Investor    Joint Investors    Superannuation Fund    Company    Trust

### 2A. Investor 1/Company/Partnership or other entity

Surname/Company/  
Partnership/Entity name

Full given name(s)

Title (Mr/Mrs/Miss/Ms)

Date of birth (dd/mm/yyyy)

Full Business name

ABN

### 2B. Investor 2

Surname

Full given name(s)

Title (Mr/Mrs/Miss/Ms)

Date of birth (dd/mm/yyyy)

### 3 Target Market Determination

From 5 October 2021, before investing in a Fund, investors should ensure they meet the description of the Fund's Target Market as outlined in its Target Market Determination (TMD). TMDs for each Fund are available from your financial adviser, our Investor Services team or [fidante.com.au](http://fidante.com.au).

#### 3A. Adviser use only

**This question is for financial advisers only. If you do not have an adviser, please complete Section 3B.**

This application is necessary to implement the personal advice I have given to the applicant in relation to the acquisition of units in the Fund. I have considered the TMD for the Fund and consider that the applicant is within the Fund's Target Market.

Yes  No

**If you answered YES, please proceed to Section 4 of the application form.**

**If you answered NO, please complete question below.**

**Please only complete this question if you answered NO to question above.**

Please provide the reason(s) why you consider the product is still appropriate for the applicant based on their objectives, financial situation and needs.

#### 3B. Non-Adviser use only

**Please only complete this section if you don't have an Adviser.**

1. I have considered the TMD for the Fund and confirm the Fund's Target Market aligns with my objectives, financial situation and needs.  Yes  No
2. I have read and understood the TMD and PDS of the Fund and confirm the features of the Fund as described in the TMD and PDS aligns with my objectives, financial situation and needs.  Yes  No
3. I confirm I am not investing more of my portfolio into this Fund than what is recommended in the TMD of the Fund (i.e. Small Allocation - no more than 25% of my total investible assets; Core Allocation - up to 75% of my total investible assets; or Standalone Allocation - part or majority (up to 100%) of my total investible assets).  Yes  No
4. I confirm I am comfortable with holding my investment for at least the recommended investment timeframe as outlined in the TMD and PDS of the Fund.  Yes  No
5. I confirm that my risk/return profile when making this investment is consistent with the risk/return profile for the Fund as outlined in the TMD.  Yes  No
6. I confirm I am comfortable with when I can make withdrawals from the Fund as outlined in the PDS of the Fund.  Yes  No

If you do not understand the TMD of the Fund or need further information before proceeding with your investment, please call us on 13 51 53.

If you do not have an adviser and answered NO to any of the questions above, we may call you to confirm additional details before deciding whether to process your investment.

## 4 Consideration details

Name of fund(s)

  
  

Please complete either dollar amount or units to be transferred below (if \$0 please insert this).

Dollar amount (in words)

Amount \$

OR

Number of units  
(amount in words)

Number of units

## 5 Declaration and applicant(s) signature(s)

Please note that joint investments must be signed by both investors.

If you are a corporate investor, this form must be signed either by:

- two Directors under seal;
- two Directors;
- Director and Company Secretary; or
- a Sole Director/Sole Secretary (where applicable).

Please state your name and role in the entity beneath your signature (e.g. Director, Company Secretary, Sole Director, Trustee).

Where signing under Power of Attorney, the attorney confirms that no notice of revocation of that power has been received. An original certified copy of the Power of Attorney, including the appointed Power of Attorney's signature, must be lodged with this form if it has not previously been supplied.

### 5A. Declaration and signature of transferor(s)/seller(s)

I/We, as the registered holder(s) and undersigned transferor(s)/seller(s) for the above consideration noted in section 4:

- transfer to the transferee(s)/buyer(s) the units held in my/our name(s) in the register of the above fund(s).
- agree that this transfer is subject to the same conditions on which I/we held them at the time of signing this transfer.

#### Investor 1

Signature

Date

Surname

Given name(s)

Capacity

- Sole Director     Director  
 Secretary         Trustee

#### Investor 2

Signature

Date

Surname

Given name(s)

Capacity

- Director             Secretary  
 Trustee

COMPANY SEAL

## 5 Declaration and applicant(s) signature(s) (continued)

### 5B. Declaration and signature of transferee(s)/buyer(s)

I/We, the transferee(s)/buyer(s):

- agree to accept the above units subject to the same conditions as applicable to the transferor(s)/seller(s) and acknowledge being bound by the provisions of the constitution(s) of the fund(s).
- confirm that I/we have received and read a copy of the current Product Disclosure Statement and Target Market Determination for the fund(s) if applicable.
- acknowledge that Fidante Partners is not an authorised deposit-taking institution (ADI) for the purpose of the Banking Act 1959 (Cth), and its obligations do not represent deposits or liabilities of an ADI in the Challenger Group (Challenger ADI) and no Challenger ADI provides a guarantee or otherwise provides assurance in respect of the obligations of Fidante Partners. Investments in the Fund(s) are subject to investment risk, including possible delays in repayment and loss of income or principal invested. Accordingly, the performance, the repayment of capital or any particular rate of return on your investments are not guaranteed by any member of the Challenger Group.

#### Investor 1

Signature

Date

Surname

Given name(s)

Capacity  Sole Director  Director  
 Secretary  Trustee

#### Investor 2

Signature

Date

Surname

Given name(s)

Capacity  Director  Secretary  
 Trustee

COMPANY SEAL

Each Fund's Product Disclosure Statement (PDS) includes information about purchasing units in the relevant fund. Any person who gives another person access to the application form must also give the person access to the PDS and any incorporated information. Each person should obtain and consider the Fund's Target Market Determination (TMD) and the Fund's Product Disclosure Statement (PDS) before making a decision about whether to make an investment in the Fund. A copy of any TMD and PDS can be obtained from your financial adviser, our Investor Services team or at [www.fidante.com.au](http://www.fidante.com.au). The responsible entity of each of the Funds is Fidante Partners Limited (ABN 94 002 835 592, AFSL 234668) Fidante Partners Services Limited (ABN 44 119 605 373, AFSL 320505), each referred to as Fidante Partners. Fidante Partners or a financial adviser who has provided an electronic copy of the PDS and any incorporated information, will send you a paper copy of the PDS and any incorporated information and application form free of charge if you so request.

## 6 Adviser use only

All details in section 3A are true and correct and I indemnify the responsible entity of the Fund(s) against any liabilities arising from acting on any of the information provided by me in connection with my clients application which are deliberately false or misleading.

Adviser number	<input type="text"/>			
Office name	<input type="text"/>			
Surname	<input type="text"/>			
Given name(s)	<input type="text"/>			
Title (Mr/Mrs/Miss/Ms)	<input type="text"/>	Phone (business hours)	<input type="text"/>	<input type="text"/>
Email	<input type="text"/>			
Adviser group	<input type="text"/>			
Adviser group AFSL	<input type="text"/>			
Adviser signature	<input type="text"/>			
Date	<input type="text"/>			
Investment Link information				
IL GN (Group)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

### Important notes

This application must not be handed to any person unless the relevant PDS and TMD and access to the information incorporated into the PDS is also being provided. Fidante Partners may in its absolute discretion refuse any application for units. Persons external to Fidante Partners or other entities who market Fidante Partners products are not agents of Fidante Partners. Fidante Partners will not be bound by representations or statements which are not contained in information disseminated by Fidante Partners. Application monies paid by cheques from financial advisers will only be accepted if drawn from a trust account.