



Please complete all sections. Use BLOCK LETTERS in black or blue pen, or complete digitally and sign electronically. If a section does not apply, write N/A. Blank fields may delay your application. This certificate is valid for two years from the date signed.

01 Investor / Account Holder

Full name of individual or entity

Contact person (if entity)

Contact email

02 Account designation

- **Joint accounts.** A separate certificate is required for each holder.
- **Company accounts.** Certificate must be in the name of the corporation, not the directors.
- **Superannuation or family trust.** Certificate must be in the name of the trustee, not the fund.
- **Person acting as trustee.** A certificate is required for each trustee.
- **Company acting as trustee.** Certificate must be in the name of the corporation.

03 Registered accountant's details

Accountant's full name

Firm / company

Email

Firm address

04 Qualified accountant's certification

Section 1. I confirm that I am a qualified accountant within the meaning of section 9 of the *Corporations Act 2001* (Cth), hold a recognised membership designation, and comply with continuing professional education requirements under ASIC Class Order [CO 01/1256].

☐ I am a qualified accountant within the definition of section 9 of the Corporations Act 2001 (Cth).

Section 2. In accordance with sections 708(8)(c) and 761G(7)(c) of the *Corporations Act 2001* (Cth) (as amended by regulation 7.6.02AC of the Corporations Regulations 2001) and regulation 7.1.28 of the Regulations, I certify that the investor or account holder named above is my client and meets at least one of the following criteria. *Tick all that apply.*

- ☐ Has net assets of at least **AUD \$2.5 million**.
- ☐ Has a gross income of at least **AUD \$250,000 per annum** for each of the last two financial years.

05 Accountant signature

SIGNATURE OF ACCOUNTANT



DATE SIGNED (DD / MM / YYYY)



06 Controlled entities (where applicable)

As the holder of this certificate, the investor or account holder named above controls the following entities (trust or company). "Control" has the meaning given in section 50AA of the Corporations Act, that is, the capacity to determine the outcome of decisions about the entity's financial and operating policies.

Full name of controlled entity 1

Full name of controlled entity 2

Full name of controlled entity 3

Full name of controlled entity 4

07 Investor signature

INVESTOR OR AUTHORISED SIGNATORY



DATE SIGNED (DD / MM / YYYY)

Print name

Capacity (e.g. director, trustee, individual)

08 Co-trustee declaration (where applicable)

This section applies only to superannuation funds or family trusts with individuals as trustees, where not all trustees meet the wholesale criteria. Each trustee who does not qualify as wholesale must sign below to confirm the qualifying trustee has financial control of the fund or trust.

As co-trustee of the controlled entities named above, I confirm that the qualifying investor named above has control of the entities and determines the financial and operational decisions of the entities.

Full name of co-trustee 1

Date

SIGNATURE OF CO-TRUSTEE 1



Full name of co-trustee 2

Date

SIGNATURE OF CO-TRUSTEE 2

