14 November 2022

Overseas Investor Form

Important note

All sections must be completed.

Please provide detailed answers to all questions to minimise required follow up. Enter "N/A" where the question does not apply.

If this is signed under Power of Attorney, please enclose certified copy of the Power of Attorney and the proof of identity documents, as outlined in the 'Completing Proof of Identity' document on portfolio.sfg.com.au, for both the Applicant and the Attorney.

This form has been prepared in accordance with Insignia Financial group's AML/CTF Program. The information collected in this form is used for 'Know your client' purposes only. Any personal information provided in this form will be handled in accordance with our privacy policy at sfg.com.au/portfolio/privacy.

Step 1: Account details

Account number

Account name

Date of birth / /

Name of person completing this form (if not the same as the account name)

Title (Dr/Mr/Mrs/Ms/Miss) Surname

Given name(s)

Overseas address

Street

Suburb State/ province Postcode

Country

Email

Phone number

Clear and presentable original certified identification documents have been attached to this Change of address request?

☐ Yes ☐ No ➔ If **'No',** please ensure they are included.

Step 2: Details of overseas domiciled applicants

1 Please list a country of residency and select a reason why.

Country:

Reason:

- [ ] For work purposes
- [ ] Returning to home country
- [ ] To care for a family member / family commitments
- [ ] Sea change / travel
- [ ] Other, please specify

2 For how long can we expect the applicant to be based overseas?

- [ ] Temporary/contract basis for work purposes, please select one below:
  - [ ] More than 3 years
  - [ ] 1–3 years
  - [ ] Less than 12 months
- [ ] Semi-permanently, please select one below:
  - [ ] 3–5 years
  - [ ] More than 5 years
- [ ] Permanently (ie indefinitely)

3 Why are you specifically investing in to this product?

4 Where applicable, what will the nature of the relationship between financial adviser and client be going forward? (ie is the client retaining Australian domiciled investments and therefore retaining the financial adviser's services)

5 Please reconfirm the applicant's source of wealth (how the client has obtained their wealth).

- [ ] Income from employment (eg regular and/or bonus), if yes, please provide home country employer name and details.
- [ ] Investment income (eg rent, dividends, pension)
- [ ] Business income
- [ ] One-off payment (eg matured investment, court settlement, redundancy, inheritance)
- [ ] Sale of assets (eg shares, property)
- [ ] Windfall (eg gift, lottery, gambling)

6 Please reconfirm the applicant's source of funds or intended source of funds?

(Source of funds is where the funds for the opening of the account have originated from or where monies will be sourced for future transactions if they are based overseas)

- ☐ Income from employment (eg regular and/or bonus)
- ☐ Accumulated wealth or investments
- ☐ Investment income (eg rent, dividends, pension)
- ☐ One-off payment (eg matured investment, court settlement, redundancy, inheritance)
- ☐ Sale of assets (eg shares, property)
- ☐ Windfall (eg gift, lottery winnings, gambling)
- ☐ Borrowed funds

7 Please confirm what the expected future transactions will be within this account? (eg. any further deposits or expected withdrawals)

Step 3: Declaration

This form can be completed by either the investor or their authorised financial adviser. Please complete one declaration option below.

Individual Declaration (the person named in this form)

By completing and signing this form I declare that:

- All details in this form are true and correct and I undertake to promptly inform the Trustee/Service Operator of any changes to the information supplied as and when they occur.
- I understand the Trustee/Service Operator may require further information in relation to the information supplied in this form.
- I am the named person above or authorised under Power of Attorney to provide information on their behalf.
- I am aware that information provided in this form and information about the Shadforth Portfolio Service accounts may be provided to the Australian and/or foreign tax authorities.

Please note: If this form is signed under Power of Attorney, the Attorney declares that they have not received notice of revocation of that power (a certified copy of the Power of Attorney should be submitted with this form unless we have already received it). You generally cannot sign under Power of Attorney if acting on behalf on entity.

Signature

Date

Role (such as Investor/Director/Trustee as applicable)

Financial Planner Declaration

By completing and signing this declaration, I certify that the individual named in this form has verbally or in writing confirmed to me the truth of the information provided and I have no reason to doubt its reasonableness.

Licensee name

AFSL No.

Representative

Signature

Date

Please forward all correspondence and enquiries to:

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