# shadforth

19 September 2024

# Advice Fees – Wholesale Clients (for Investment accounts only)

Please complete these instructions in BLACK INK using CAPITAL LETTERS.

•	
Step 1: Account details	
Account number	
Account name	
Step 2: Wholesale Client st	atus (applies to Investment accounts only)
For financial adviser completion: Is the Advice	Fee selected and completed below for personal advice to a Wholesale Client in an Investment account?
VAC	nolesale Client, and will provide sufficient information to the account provider on request to substantiate rovider if my client ceases to be a Wholesale Client.
Note: If the above selection is made it will be t	taken that the selected Advice Fee is for a Wholesale Client.
Step 3: Advice fees	
Choose your fee option. Fees should be provide	ded including GST. Blank boxes will default to nil.
<ul> <li>account, via the options at the end of however any amounts paid before yo</li> <li>On termination of a fee arrangement</li> <li>Where advice fees are deducted mon</li> <li>Advice fee(s) paid to your financial account</li> </ul>	onsent to the fee being deducted. Ime by contacting Navigator Australia Limited (NAL), the service operator of your investment this form. Once your consent is revoked, no further fees will be deducted from your account u revoke your consent will not be automatically refunded. It, accrued but undeducted Advice Fees may be deducted after the termination date. In the pare deducted monthly in arrears. It is and their Licensee (and quoted in this section) are inclusive of GST. It is a please refer to the Offer Document.
Which fee type would you like t	co establish?
Advice Fee – One-off (please complete S	ection A)
Advice Fee – Ongoing (please complete	Section B)
Advice Fee - Unfront (please complete S	raction ()

		optional, if no start date is provid ees. This form must be signed no					start date applying to all
Start date (o	ptior	nal) / / /					
Section	<b>A</b> –	Advice fee – One-off					
As agreed with my nominated financial adviser, I authorise \$ (inclusive of GST) to be applied to my account for financial advice.							
		act a maximum of 10% of the acc where the fee is greater than 10			(inclu:	sive of GST), OR a maximu	m fee of \$3,300
Section	В-	Advice Fee – Ongoing					
The available	e fee	options are:					
(a) Percen	tag	e based fee options – flat p	erce	entage or tiered percent	tage		
Flat percen	age	fee					1 oz
Up to a maxi	mun	n of 2.2% per annum (inclusive of	GST)	of your account balance			% per annum (inclusive of GST)
OR							
Tiered perc	enta	ge fee					
		num of 2.2% per annum (inclusiv num of 7 tiers.	e of G	ST) of your account balance c	can be	applied to the amount for	each tier.
		Balance from		Balance to		% per annum (inclusive of GST)	
Tier 1	\$		\$				
Tier 2	\$		\$				
Tier 3	\$		\$				
Tier 4	\$		\$				
Tier 5	\$		\$				
Tier 6	\$		\$				
Tier 7	\$		\$				
This fee will I		elculated daily using the percenta	age fe	e above applied against your	daily a	ccount balance and will b	e charged to your
AND/OR							
(b) Flat do	llar	fee					
Up to a maximum of \$18,000 per annum (inclusive of GST). \$							
This fee will I	oe pr	o-rated based on the number of	days	in the month and deducted n	nonthl	у.	
Note: An Ad	vice I	Fee – Ongoing cannot be used in	conju	unction with a Fixed Term Adv	/ice Fe	e.	
Section C – Advice fee – Upfront							
Up to a maximum of 5.5% of each deposit. Deposits received % (inclusive of GST).							
This fee will be calculated using the percentage fee above applied against your deposit amount and will be charged to your account as							

deposits are received.

## Step 4: Client declaration and signature(s)

**Important note:** NAL collects the information in this form for the purpose of applying the requested advice fee(s) against your account. Any personal information provided in this form will be handled in accordance with the privacy policy available at **sfg.com.au/privacy**.

If you are updating the advice fees on an account and the account is held jointly or is a trust with multiple trustees/directors, all investors or trustees/directors must sign.

- I/We authorise NAL to charge the advice fee selected against my/our account.
- The amount of any advice fee(s) that are paid to my financial adviser, as agreed by me/us, will be an additional cost to me and charged against the account. An advice fee will not be charged unless I/we tell NAL to do so.
- Any agreed advice fee(s) will be charged to the account and paid in full to the financial adviser, until I/we instruct NAL to cease payment.
- I/We understand I/we can withdraw my/our consent or vary the ongoing fee arrangement at any time by notice in writing to my/our adviser, or by contacting ClientFirst.
- I/We understand I/we can withdraw my/our consent at any time before the cost is passed on to me/us by contacting NAL before the fee is paid.
- If an investment account referred to in this form is transferred to another investment account on the same or a different platform (subject to the agreement of the receiving operator), you agree that you consent to the fee continuing to be deducted in the subsequent investment account.
- By signing this form, I consent to my financial adviser and/or the licensee named in Step 4, providing NAL (on its request) all the necessary
  documentation to support or substantiate the fee deduction from my Shadforth Portfolio Service account, including but not limited to a
  Statement of Advice, a Record of Advice, Fee Disclosure Statement(s), and any other agreements or consent forms relating to the payment of
  advice fees.

**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 and it has not been varied or revoked).

#### **Signature**

This form must be signed with	in 90 days of the start date of the advice fee.			
				<b></b>
Signatory 1		Date	/	
Role (such as Investor/Director/ Trustee as applicable)				
Full name				

# Additional signatures (if required)

This form must be signed within 90 days of the start date of the advice fee.

	1
Signatory 2	Date / /
Role (such as Investor/Director/ Trustee as applicable)	
Full name	
Signatory 3	Date / /
Role (such as Investor/Director/ Trustee as applicable)	
Full name	
	1
Signatory 4	Date
Role (such as Investor/Director/ Trustee as applicable)	
Full name	
l	1
Signatory 5	Date / /
Role (such as Investor/Director/ Trustee as applicable)	
Full name	
l	1
Signatory 6	Date / /
Role (such as Investor/Director/ Trustee as applicable)	
Full name	
l	
Common seal (of company) if required	

### **Step 5: Adviser declaration (mandatory)**

I confirm that fees have been fully explained to the applicant and that I can demonstrate my client is a Wholesale Client, and will provide sufficient information to the account provider on request to substantiate this, and I will notify the account provider if my client ceases to be a Wholesale Client.

#### I can confirm:

- Either a Statement of Advice (SOA) has or will be provided to the member, or a Record of Advice (ROA) has or will be made available to the member relating to this fee request;
- I am required to provide the advice services outlined in the agreement between myself and the member, and as detailed in this form;
- The advice fee charged is within the agreed limits contained in this form or any other agreement as amended or varied from time to time between the AFS Licensee named in Step 4 and NAL;
- NAL reserves the right to decline requests to deduct advice fee(s) from the member's Expand account(s) (including any future requests) where required to comply with relevant laws or where the fee deduction is not permitted or inconsistent with any agreement between the AFS Licensee named in Step 4 and NAL; and
- Upon request from NAL, I will provide all the necessary documentation to support or substantiate the fee deduction from the member's Expand account(s), including but not limited to a Statement of Advice, a Record of Advice, Fee Disclosure Statement(s), and any other agreements or consent forms relating to the payment of advice fees.

Adviser name	
Licensee name	
Contact name	
Phone (bh)	Phone (mobile
Email	
AFS license number	
Adviser signature	Date / /

#### Please forward all correspondence and enquiries to

PostShadforth Portfolio ServiceTelephone1800 931 792

GPO Box 264, Melbourne VIC 3001 Web portfolio.sfg.com.au

Email portfolioservice@sfg.com.au