

## Additional Application Form

**Use this form if you are an existing investor and wish to make an additional investment.**

**Please complete all sections in BLOCK letters and using a black pen. If you make an error while completing this form, do not use correction fluid, cross out your mistake and initial your changes.**

This application form relates to the application for units in the ASA Diversified Property Fund (ARSN 106 724 038) as described in the PDS dated 31 October 2024 issued by ASA Funds Management Limited (ACN 079 538 499, AFSL No. 234455), as the responsible entity of the ASA Diversified Property Fund. This form must be accompanied by the PDS when provided to any person.

### HOW TO COMPLETE THIS FORM

**Step 1** Read and ensure you understand the applicable Product Disclosure Statement (PDS) for the Fund you are making an additional investment in.

The PDS is available on our website [www.asarep.com/dpf](http://www.asarep.com/dpf)

If you are unable to access the link or print the document, contact us on 1300 553 122.

**Step 2** Please ensure you have completed the following:

- » written your account number and account name as it appears on the latest statement
- » written the amount in Australian dollars
- » selected the payment method you would like to use
- » signed the form as per the 'Signing instructions' in section 6

**Step 3**

**Send by post:** Investor Services  
ASA Real Estate Partners  
Level 27, 101 Collins Street  
Melbourne VIC 3000

**Scan and email to:** [investorservices@asarep.com](mailto:investorservices@asarep.com)

Please include your account number in the subject line of your email.

**Step 4** Transfer your application money to us.

Please refer to section 4 'Payment of application amount'

## SECTION A: DDO Obligations

The following questions may assist ASA Funds Management Limited in meeting its regulatory obligations by determining whether this financial product is being offered to the stated target market.

The below only needs to be answered where you are a direct [retail] investor (i.e. does not apply to indirect or intermediated investments such as those made by platforms, custodians, etc).

### Was this investment made based on personal advice received from your financial adviser?

☐ **Yes** - Please ensure that details of your financial adviser are completed in section B

☐ **No** - Please complete the questions below:

**Please read and answer the following questions carefully:** It is important for you to consider if the fund you are applying to invest in is in line with your needs and objectives for the portion of your investment portfolio that you intend to invest in this fund. In other words, the questions below should be answered having regard to what you are seeking from this particular investment - not what you may be seeking more generally from your overall investment portfolio as a whole. You should answer these questions based on what you are seeking from an investment (including your tolerance for risk) and your own situation, rather than just what you understand the features of this fund to be. If you do not know how to answer a question, or what you are seeking from the investment, you should consult your financial adviser.

All financial products provide different features, objectives, risks and return profiles.

You can understand more about the specific objectives and outcomes that the fund seeks to accomplish and to determine whether the fund is appropriate for your needs by consulting the fund's PDS and [Target Market Determination](#)

We reserve the right to refuse your application.

### A. What is your primary investment objective in relation to this investment? (select only one option)

#### ☐ You are seeking an investment which provides Capital Growth

Capital Growth, also known as capital appreciation or capital gain, refers to an increase in the value of an asset over time. Capital Growth is not guaranteed, and the value of an investment can also decrease, resulting in capital losses. You should consider the amount of risk you are willing to accept to achieve a capital growth, (or loss) outcome. *If you are primarily seeking capital growth with some income, please select Capital Growth for Question A, and Yes for Question B. If you are instead seeking primarily income (and this is a more important objective to you than Capital Growth) please select Income Distribution for this Question A.*

#### ☐ You are seeking an investment which provides Capital Preservation

A Capital Preservation strategy is a strategy employed by certain types of investment funds with the primary objective of protecting the capital invested. Generally, funds designed to provide capital preservation have a lower risk profile and are less volatile than growth investments. You should consider if you are willing to accept lower returns (growth or income) as a result of choosing a fund with a lower risk profile.

#### ☐ You are seeking an investment which provides Income Distribution

Income Distribution refers to the income generated from the assets within a fund that is regularly paid out or distributed to investors periodically. The level of income generated will typically change each period and there is no guarantee of income being available each period.

### B. Are you seeking a source of supplemental income (which may not be regular or recurrent) in addition to the above investment objective? (select only one option)

Note: If your primary objective is Capital Growth or Capital Preservation, but you are also seeking the potential for income supplemental to those objectives, select 'Yes'. If Income Distribution is your primary investment objective, please select Income Distribution in Question A, and 'No' for Question B.

☐ **Yes**

☐ **No**

**C. What is your investment time frame in relation to this investment? (select only one option)**

- ☐ Equal to 7 years or more (i.e. Long term)
- ☐ Equal to 5 years but less than 7 years (i.e. Medium to long term)
- ☐ More than 2 years but less than 5 years (i.e. Medium term)
- ☐ Up to and including 2 years (i.e. Short term)

**D. Under normal circumstances, within what period do you expect to be able to access your funds for this investment? (select only one option)**

- ☐ At ASA Funds Management Limited's discretion
- ☐ Within ten years of the request
- ☐ Within five years of the request
- ☐ Within one year of the request
- ☐ Within three months of the request
- ☐ Within one month of the request
- ☐ Within one week of the request

**E. In relation to this investment, which investment risk and return profile best describes you? (select only one option)**

We note again, that this question is in relation to this investment in particular, and not to your overall risk and return profile. In other words, what role are you expecting the fund to play in your overall portfolio.

- ☐ **I am seeking a fund with a low risk and return profile:**  
You are looking for an investment that is low risk in nature (e.g. you have the ability to tolerate up to one negative return over a 20-year period and you are comfortable with a low target return from this investment. Funds designed to provide low risk and return typically provide capital preservation and invest in cash or cash like investments).

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- ☐ **I am seeking a fund with a medium risk and return profile:**  
You are looking for an investment that is moderate or medium risk in nature (e.g. you have the ability to tolerate up to four negative returns over a 20-year period and you are comfortable with a moderate target return from this investment. Funds designed to provide a medium risk and return are typically invested in defensive assets, such as fixed income products).

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- ☐ **I am seeking a fund with a high risk and return profile:**  
You are looking for an investment that is higher risk in nature (e.g. you have the ability to tolerate up to six negative returns over a 20-year period in order to achieve a higher target return from this investment. Funds with a high risk and return are typically invested in growth assets which include shares and property investments).

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- ☐ **I am seeking a fund with a very high risk and return profile:**  
You are looking for an investment that is very high risk in nature (e.g. you have the ability to tolerate six or more negative returns over a 20-year period as you are seeking to maximise returns and you can accept higher potential losses. Products with Very High risk and return are typically higher conviction portfolio such as concentrated share funds, hedge funds and other growth alternative assets).

☐

**I am seeking a fund with an extremely high risk and return:**

You are looking for an investment that is extremely high risk in nature (e.g. you can accept significant volatility and losses as you are seeking to obtain accelerated returns (potentially in a short time frame). Products with an extremely high risk and return profile are typically speculative investments in niche asset classes such as crypto assets).

**F. What percentage of your total investable assets are you directing into this fund (i.e. the total assets you have available for investment, excluding your residential home)? (select only one option)**

☐

Satellite Allocation (up to 10%)

☐

Minor Allocation (up to 25%)

☐

Core Component (up to 50%)

☐

Major Allocation (up to 75%)

☐

Solution/Standalone (up to 100%)

**G. Where did you obtain your Application form? (select only one option)**

☐

Fund Manager Website

☐

Financial Adviser

☐

Referred by a Friend / Colleague

☐

Advertisement

☐

Other

**Section B: Financial Adviser Details**

Use this section to tell us about your financial adviser. If you change your financial adviser, it's important to let us know in a timely way. If you would like your financial adviser to receive copies of your statements by email, please enter their email address below.

**Adviser Email Address**

Notice to financial adviser: by completing this section of the application form, you are confirming that you hold a current Australian Financial Services Licence (AFSL), or are otherwise authorised to advise on and arrange this product.

**AFSL Holder Name**

**AFSL Number**

**Adviser Name**

**Advisor code or Authorised Representative Number**

**ABN**

**Property / Building Name**

## Section B: Financial Adviser Details

Unit

Street Number

Street Name

Suburb

State

Post Code

Country

Phone

Mobile

### Performance of Investor Identification & Verification Procedures

Please indicate below whether client identification and verification procedures have been performed:

☐ **Yes** - I have completed the applicable customer identification procedure on this investor.

☐ **No** - I have NOT completed the applicable customer identification procedure on this investor

### Financial Adviser Declaration

Notice to financial adviser: please note that reliance on the KYC performed by the financial advisor is only acceptable if all the criteria below is met.

☐ I hold an AFSL in my own name or have been appointed as an authorised representative by the licensee

☐ I am a reporting entity for AML/CTF purposes

☐ The issuer has reasonable grounds to believe that it is appropriate to rely on the KYC procedure I have undertaken

☐ I have attached the KYC documents to this form

AFSL holder name

AFSL number

Full Name

Signature

## 1. Investor Details

Account Number

Investor Name

☐ I/We confirm there are no changes to our IDENTIFICATION documents previously provided and that these remain current and valid

☐ I/We confirm there are no changes to the INFORMATION in our previous application provided and that it remains current and valid

## 2. Investment Details and Distribution Instructions

Please specify the amount(s) you wish to invest. Please refer to your fund PDS or IM to ensure you meet the minimum additional investment amount.

If you are an existing unit holder in the fund for which you are applying, the distribution choice below will override any pre-existing election. If you have not previously provided your bank account information, please complete a Change of Details form which you can find at [www.asarep.com/dpf](http://www.asarep.com/dpf)

If you do not make an election and have not made one before, distributions will be reinvested.

Fund Name	APIR Code	Investment amount AUD\$ (Minimum investment amount \$1,000)	Distribution Option	
			Pay to my Bank A/C	Reinvest
ASA Diversified Property Fund - Ordinary	YOC0018AU	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>

## 3. Other Instructions

If you wish to change your other instructions (such as your reporting preferences, Financial Adviser information, or contact details), please complete the relevant form, available from our website [www.asarep.com/dpf](http://www.asarep.com/dpf)

## 4. Payment of Application Amount

Select your payment method and complete the relevant section if applicable. All payments must be made in AUD.

☐ EFT      ☐ Direct Debit      ☐ BPay®

EFT	Electronic Funds Transfer
Account name:	ASA Funds Management Limited
BSB:	063-000
Account number:	1455 5423
Your reference:	[please use the name of the investor and investor number]

Direct Debit authority – Australian Bank Accounts Only

You can allow us to deduct your application amount directly from your nominated financial institution account by completing the direct debit authority below. This debit will be made through the Bulk Electronic Clearing System (BECS) from your account held at the financial institution you have nominated below.

ASA Funds Management Limited processes your application and payment. By completing this section, you have understood and agreed to the terms and conditions governing the debit arrangements between you and ASA Funds Management Limited ABN 58 079 538 499, as set out in this request and in your Direct Debit Request Service Agreement.

Financial Institution Name	Branch Name	
<div></div>	<div></div>	
Account Name	BSB Number	Account Number
<div></div>	<div></div>	<div></div>

I/We request and authorise ASA Funds Management Limited ABN 58 079 538 499 (User ID 665021) to arrange, through its own financial institution, a debit to the nominated account as deemed payable by our administrator.

Signature of Primary Account Holder	Signature of Joint Account Holder (if applicable)
<div></div>	<div></div>
Full Name	Full Name
<div></div>	<div></div>
DATE (DD/MM/YYYY)	DATE (DD/MM/YYYY)
<div>  /  /  </div>	<div>  /  /  </div>

BPAY® – Telephone & internet banking

You can make your payment using telephone or internet banking.


You will need to quote the biller code and your account number (for reference) when making this payment.

If this is a new investment, we will notify you of your account number once this is available. Please make your payment within 14 days of this notification.

Contact your bank or financial institution to make this payment from your cheque, savings, debit or transaction account.

More info [www.bpay.com.au](http://www.bpay.com.au)

®Registered to BPAY Pty Ltd ABN 69 079 137 518

Fund	BPAY® details 
ASA Diversified Property Fund	<div>Biller code</div> <div></div> <div>Reference number</div> <div></div>

Fund	BPAY® details	
ASA Diversified Property Fund - Ordinary	<div>Biller code</div> <div></div>	<div>Reference number (Investor number)</div> <div></div>

## 5. Declarations & Acknowledgments

### Please read the declarations below before signing this form

The required signature(s) are detailed at the bottom of this form. When you apply to invest, you (the applicant) are telling us:

- » to the best of your knowledge, all details in this application (including all related documents provided) are true, correct and complete
- » you have received, read and understood the current PDS. You agree to be bound by the constitution of the fund, the PDS as supplemented, replaced or re-issued from time to time
- » you are not bankrupt or a minor, and are authorised to sign this form
- » you have received and accepted this offer in Australia
- » you have read and understood the information relating to privacy in the PDS
- » I understand investment in the fund carries risk
- » I understand that my personal information will be collected and used in a manner consistent with the Australian Privacy Principles
- » If I provided my email address on this application, I am agreeing to receive selected communications electronically, including annual statements
- » I consent to the issuer disclosing my personal information to any issuer's service providers, in relation to any identification and verification that the issuer is required to undertake on me, as required under the AML/CTF Act. This shall include any information:
  - » required by any third party document verification service provider, and/or
  - » provided to any third party document verification service provider.

### By applying to invest you also acknowledge that:

- » monies deposited are not associated with crime, money laundering and/or financing terrorism. We may decide to delay or refuse any request or transaction, including by suspending the issue or redemption of units. If we are concerned that the request or transaction may breach any obligation of, or cause us to commit or participate in an offence under any AML/CTF and Sanctions Law and FATCA/ CRS obligations, we will incur no liability to you if we do so
- » we may take other action we reasonably believe is necessary to comply with AML/CTF and Sanctions Law and FATCA/CRS obligations, including disclosing any information held about you to any of our related bodies corporate or service providers whether in Australia or outside Australia, or to any relevant Australian or foreign regulator, and
- » we collect additional information about you from time to time, from you or from third parties, for the purposes of satisfying AML/CTF and Sanctions Law and FATCA/CRS obligations, and that any such information may be used and disclosed as described in ASA's privacy policy available online at [www.asarep.com/privacy-policy](http://www.asarep.com/privacy-policy) or by contacting us.

### Important information:

- » nothing in this form is advice and 'help' is general guidance only. Seek professional advice to be sure of your answers
- » it is a condition of investing that you keep your details (including tax detail) with us, up to date. We recommend that you review this tax information form at the end of the financial year and update your details if required. You must contact us when you learn new things about the matters in this form. Failing to update us can have tax and other consequences. You can update us by requesting and completing this form and emailing, faxing or posting it to our Administrator.

### By completing and signing this form:

- » you represent having read and understood this form
- » you represent this form is complete and accurate
- » if you have applied for but not received your TIN or GIIN, you undertake to inform us within 30 days of receiving it
- » you undertake that if information in this form changes, you will tell us within 30 days
- » you declare that to the best of your knowledge and belief the information provided in the Global Tax Reporting section is true and correct
- » you agree to notify ASA Funds Management Limited of any changes to your tax residency or that of any beneficial owners or controlling person.



## 6. Signing Instructions

**Individual** - where the investment is in one name, the account holder must sign.

**Joint Holding** - where the investment is in more than one name, all of the account holders must sign.

**Companies** - where the company has a sole director who is also the sole company secretary, this form must be signed by that person. If the company (pursuant to section 204A of the Corporations Act 2001) does not have a company secretary, a sole director can also sign alone. Otherwise this form must be signed by a director jointly with either another director or a company secretary. Please indicate the capacity in which the form is signed.

**Trust** - the trustee(s) must sign this form. Trustee(s) signing on behalf of the trust confirm that the trustee(s) is/are acting in accordance with such designated powers and authority under the trust deed.

**Power of Attorney** - if you have not already lodged the Power of Attorney with us, please attach a certified copy of the Power of Attorney document that includes Certificate of Witness and Statement of Acceptance and Certified Identification Document of the Power of Attorney. I/we attest that the Power of Attorney has not been rescinded or revoked and that the Donor is still living.

### Signature of Investor 1

- Director or Authorised Signatory

Full Name

DATE (DD/MM/YYYY)

 /  / 

Company Officer (please indicate company capacity)

<input type="checkbox"/>	Director	<input type="checkbox"/>	Authorised Representative
<input type="checkbox"/>	Sole Director and Company Secretary		

### Signature of Investor 2

- Director/Company Secretary or Authorised Signatory

Full Name

DATE (DD/MM/YYYY)

 /  / 

Company Officer (please indicate company capacity)

<input type="checkbox"/>	Director	<input type="checkbox"/>	Authorised Representative
<input type="checkbox"/>	Company Secretary		