

Millbrook Credit Fund – Diversified (NZ) Registration Form

MILLBROOK
GROUP

ARSN 125 042 480

Reference: _____

Issued by **Millbrook Asset Management Ltd**
ABN 81 123 219 732 AFSL 335001 NZBN 942905 1372163

INVESTMENT DETAILS

I/We apply for investment of the following amount

\$ _____ (Minimum \$10,000 investment)

Investment distributions payment details

- Reinvest to Diversified (NZ)
 Credit to nominated bank account

MILLBROOK ASSET MANAGEMENT LTD – BANK DETAILS

Electronic Funds Transfers direct to our bank account as detailed below are preferred but **YOU MUST ADVISE US BY PHONE OR EMAIL OF THE DEPOSIT HAVING BEEN MADE AND THE DEPOSIT MUST REFERENCE YOUR NAME**

Account name: Perpetual Corporate Trust Limited ACF Millbrook Credit Fund
BSB: 082-039 Account number: PEMLBNZD01 SWIFT code: NATAAU3303M

INVESTOR DETAILS

Individual

Mr/Mrs/etc	Given names	Surname	Date of birth
_____	_____	_____	_____
Country of birth	Citizen		
_____	_____		

Joint holding

Mr/Mrs/etc	Given names	Surname	Date of birth
_____	_____	_____	_____
Country of birth	Citizen		
_____	_____		

Company/Trustee

_____ Company Name/Partnership/Trust

NZBN _____ Contact name _____

Address

No. and Street _____ Suburb _____ Postcode _____

Country _____ Phone no (office hours) _____

Email _____

LIMITED POWER OF ATTORNEY

I/We hereby irrevocably appoint, Millbrook Asset Management Ltd ABN 81 123 219 732, NZBN 942051372163 (Millbrook) and any Director, agent, attorney or substitute nominated by it to be my/our attorney for the purposes of performing the duties of Responsible Entity under the Constitution of the Millbrook Credit Fund ARSN 125 042 480 and the applicable loan agreement and mortgage security documents in relation to any investment in the Investor Trust Deposit facility and any Fund sub-scheme in which I/we invest.

TAX INFORMATION

For NZ investors we will withhold tax at 10% RWT in terms of the Double Taxation Treaty between Australia and New Zealand. When you do your tax return it will be treated either as a tax credit or refund dependent upon your tax situation.

I confirm I am a tax resident of New Zealand

IRD Number

PAYMENT DETAILS

Unless you choose to have distributions payable from Fund reinvested, they will be paid by direct credit to your nominated account with a financial institution acceptable to Millbrook. Please complete details below and it must be a NZ domiciled bank account in the name of the investor. If an account is not nominated payments will be made by cheque however a fee is payable (refer Part B of the Product Disclosure Statement):

Name of account holder

Bank

Branch

Account number

Suffix

DECLARATION AND ATTESTATION

I/We hereby apply for registration in the Millbrook Credit Fund Diversified (NZ) and acknowledge, agree and understand that:

1. I/we declare that the details given in this form are true and correct.
2. I/we agree to be bound by the terms of the Constitution of the Millbrook Credit Fund ARSN 125 042 480.
3. I/we acknowledge and accept Millbrook may send us at its discretion from time to time one or more SPDSs in respect of Mortgage Investment opportunities.
4. I/we acknowledge that we have received and read a copy of this Product Disclosure Statement and the Target Market Determination issued by the Company.
5. I/we authorise Millbrook to deduct any fee(s) to which it is entitled as stated in Part B of the Product Disclosure Statement on a monthly basis from my distributions.
6. I/we acknowledge Millbrook may accept or reject any registration application.
7. I/we hereby execute the Limited Power of Attorney in favour of Millbrook Asset Management Ltd specified overleaf on this Application Form.
8. **Privacy Statement:** This privacy statement relates to personal information (as that term is used in the *Australian Privacy Act 1988* and *New Zealand Privacy Act 2020*) that you are providing to us by way of this registration and any subsequent personal information which you may provide in the future.
The personal information you have supplied may be used by us for the purposes of enabling us to arrange and manage your investment, to meet our obligations to identify you, to contact you in relation to your investment and to market other products and services to you.
You authorise us to disclose your personal information to the Manager's related entities, to any third parties, as may be needed to perform services by the Manager; to regulatory bodies or law enforcement agencies and to meet the Manager's legal or regulatory obligations. The Manager will provide you (on request) with the name and address of any entity to which information has been disclosed.
You have the right to access all personal information held by us about you. If any of the information is incorrect, you have the right to have it corrected. You acknowledge that you are authorised to provide this personal information. You agree that your name and address may be used by us to provide you with newsletters and other information about the Manager and other products and services offered by the Manager.
9. **Email use:** You consent to receiving financial statements, and other documents which we are required to send to you, electronically at the email address on this form, or another email address advised to us.

Signing instructions for joint applicants and multi-director companies

If the application is signed by more than one person, who is authorised to give instructions to Millbrook?

Signature A	<input type="checkbox"/> Any to sign	<input type="checkbox"/> All to sign	<input type="checkbox"/> Other (specify):
	Name	Date	
	<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature B	If a Company Officer or Trustee, SPECIFY your title:		
	<input type="checkbox"/> Director	<input type="checkbox"/> Sole Director	<input type="checkbox"/> Trustee
	Name	Date	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Signature C	If a Company Officer or Trustee, SPECIFY your title:		
	<input type="checkbox"/> Director	<input type="checkbox"/> Sole Director	<input type="checkbox"/> Trustee
	Name	Date	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
	<input type="checkbox"/> Director	<input type="checkbox"/> Sole Director	<input type="checkbox"/> Trustee

If this form is signed under Power of Attorney, the Attorney certifies that he or she has not received notice of revocation of that power. Trustees of trusts giving a power of attorney certify that they are authorised to do so by their trust deed. A copy of the Power of Attorney must be forwarded to Millbrook Asset Management Ltd with the completed Application form.

I have enclosed all copies of my identity with this form.

RETURNING YOUR COMPLETED FORM

Please send your completed and signed application form with all supporting certified identity documents to:

Millbrook Asset Management Ltd
159 Oxford Terrace, Christchurch 8011 New Zealand

Investor type	Documents required		
INDIVIDUAL/TRUSTEE/ DIRECTOR	<p>You must supply certified copies of documents from either Option 1 or 2 as listed below.</p> <table border="0"> <tr> <td style="vertical-align: top;"> <p>Option 1</p> <p>One certified copy of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> NZ Passport <input type="checkbox"/> NZ Firearms Licence </td> <td style="vertical-align: top;"> <p>Option 2</p> <p><input type="checkbox"/> Certified copy of NZ Driver Licence</p> <p>and one certified copy of:</p> <ul style="list-style-type: none"> <input type="checkbox"/> NZ Bank statement dated within the last 12 months <input type="checkbox"/> NZ valid credit or debit card with name embossed and signature <input type="checkbox"/> NZ Birth certificate <input type="checkbox"/> NZ Citizen certificate <input type="checkbox"/> Government agency letter (IRD, Work & Income, Electoral Commission) dated within the last 12 months <input type="checkbox"/> SuperGold card with photo, name and signature </td> </tr> </table>	<p>Option 1</p> <p>One certified copy of the following:</p> <ul style="list-style-type: none"> <input type="checkbox"/> NZ Passport <input type="checkbox"/> NZ Firearms Licence 	<p>Option 2</p> <p><input type="checkbox"/> Certified copy of NZ Driver Licence</p> <p>and one certified copy of:</p> <ul style="list-style-type: none"> <input type="checkbox"/> NZ Bank statement dated within the last 12 months <input type="checkbox"/> NZ valid credit or debit card with name embossed and signature <input type="checkbox"/> NZ Birth certificate <input type="checkbox"/> NZ Citizen certificate <input type="checkbox"/> Government agency letter (IRD, Work & Income, Electoral Commission) dated within the last 12 months <input type="checkbox"/> SuperGold card with photo, name and signature
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COMPANIES	<p>Provide the following:</p> <ul style="list-style-type: none"> • Option 1 or Option 2 documents (as above) for each director • NZCO Annual Company Statement 		
TRUSTS (INCLUDING SUPERANNUATION FUNDS)	<p>Provide ALL of the documents listed below and attach them to the Registration Form:</p> <ul style="list-style-type: none"> • Certified copy or Certified extract of the Trust Deed • Document listing each beneficiary or the details of each class of beneficiary if not included in the Trust Deed, <p>AND</p> <p>in relation to the trustee, select one of the following appropriate item:</p> <ul style="list-style-type: none"> • if the trustee is an individual, provide verification material for individuals set out above • if the trustee is a company, provide verification material for the type of company set out above. <p>Note: Each director beneficiary with a stake of 25% or greater should be identified with either Option 1 or Option 2 documents.</p>		

PEOPLE AUTHORISED TO CERTIFY DOCUMENTS (Trusted Referees)

Originals can be certified by a Trusted Referee in accordance with the instructions outlined below. Certified copies of identification must be presented to Millbrook Group within three months of certification.

Identification must be certified by one of the following:

- Lawyer with a current practising certificate
- Chartered Accountant
- Member of the Police
- Justice of the Peace
- Registered Teacher
- New Zealand Honorary Consul
- Notary Public
- Registered Medical Doctor
- A person who has the legal authority to take statutory declarations or the equivalent in New Zealand
- If outside New Zealand, a person authorised by law to take a statutory declaration (or equivalent) in that country.

The certifier must:

- For photographic ID, make the statement **"I certify this to be a true copy of the original which I have sighted and represents a true and correct likeness of [name of the person registering]."**
- For certification of other documents, make the statement **"I certify this to be a true copy of the original which I have sighted."**
- Include their **name, occupation and capacity to be a certifier** eg registration number (if applicable), **signature and date** of certification.
- Not be living at the same address, a relative or spouse of the individual presenting the documents or, be involved in the transaction or business requiring the certification.