

Bank of Queensland Bonds Application Form



Bank of Queensland Limited ABN 32 009 656 740 AFSL No: 244616

1. APPLICANT DETAILS

Title	First Names	Surname	D.O.B. (minors)
1. _____	_____	_____	/ /
2. _____	_____	_____	/ /
3. _____	_____	_____	/ /

Company/Incorporated Body/Trust _____

ABN _____ Allocation _____ Reference Number _____

OFFICE USE ONLY

2. ADDRESS DETAILS

Address _____
Postcode _____

3. DOCUMENTS REQUIRED

When you buy Bank of Queensland Bonds from us or at any time you hold Bank of Queensland Bonds, we may ask to see the following documents:

Type of bond holder	Documents required
Company	<ul style="list-style-type: none">• Certificate of incorporation.
Body Corporate (community titles scheme)	<ul style="list-style-type: none">• Registered community titles scheme.
Incorporated Association	<ul style="list-style-type: none">• Certificate of incorporation; and• Current rules of association.
Partnership	<ul style="list-style-type: none">• Partnership agreement (if there is one); and• Certificate of registration of business name (if there is one).
Firm	<ul style="list-style-type: none">• Certificate of registration of business name (if there is one).
Trust	<ul style="list-style-type: none">• A copy of the trust deed and other documents that we specify.
Club, Lodge or Society	<ul style="list-style-type: none">• A copy of the constituent documents, eg by-laws, constitution, rules.
Estate	<ul style="list-style-type: none">• A copy of the will and any codicils.

4. CONTACT DETAILS

Telephone: Home () _____ Business () _____ Fax () _____ Email _____

5. INVESTMENT DETAILS

Amount	Term	Interest Rate % p.a.	Interest Payment Frequency (Monthly/Quarterly/Yearly)
\$			
\$			
\$			

6. PAYMENT DETAILS

Credit all payments to my/our financial institution account detailed below:

Full Account Name _____

Financial Institution _____

Branch Address _____ Postcode _____

Account Number _____ BSB Number _____

7. AUTHORISED SIGNATORIES

Insert the names and details of all persons whom you nominate as your Authorised Signatories in the spaces provided below.

Name _____ Position/Relationship _____

Specimen Signature _____ Date _____

Name _____ Position/Relationship _____

Specimen Signature _____ Date _____

Name _____ Position/Relationship _____

Specimen Signature _____ Date _____

Method of Operation (please tick appropriate box):

either one to sign at least two to sign all to operate

By signing this form in the spaces provided above, each Authorised Signatory acknowledges that they have received, read and understood the terms and conditions of the Bank of Queensland Bonds Product Disclosure Statement and confirm that they agree to be bound by those terms and conditions.

To the fullest extent permitted by law, by signing this form the Authorised Signatory agrees to indemnify and save the Bank harmless from and against any claim, loss, demand or damage sustained or incurred by the Bank directly or indirectly consequential on the Bank acting on instructions given by the Authorised Signatory which are outside the authority conferred on them by the holder of the Bank of Queensland Bonds.

You confirm that each of these person(s) is/are authorised to act on your behalf in relation to your Bank of Queensland Bonds and to provide us with instructions in writing in accordance with the terms and conditions of the Bank of Queensland Bonds Product Disclosure Statement.

8. APPLICANT DECLARATION

I/we have (please tick appropriate box):

enclosed my/our cheque for the full amount of this application

paid the full amount of this application to the Bank by Electronic Funds Transfer

I/We also acknowledge that the Bank reserves the right to refuse my/our application in which case my/our payment will be returned to me/us without negotiation.

I/We declare that the information provided in this document is true and correct and that I/we are authorised to sign this document on behalf of the bondholder.

By signing this form, I/we acknowledge that I/we have received, read and understood the terms and conditions of the Bank of Queensland Bonds Product Disclosure Statement and confirm that the holder(s) and each of the holder(s)' Authorised Signatories agree to be bound by those terms and conditions. In particular, I/we and each of the holder(s)' Authorised Signatories consent to the Bank of Queensland Limited recording our telephone calls to them pursuant to the terms and conditions of the Bank of Queensland Bonds Product Disclosure Statement.

Signature 1 _____

Signature 2 _____

Signature 3 _____

Note: where this form is being signed on behalf of a company, it will need to be signed by either two directors or one director and one company secretary on behalf of the company. If the company has only one director who is also the sole company secretary, then that person may sign this form on the company's behalf.

OFFICE USE ONLY

Lodgement Date _____

Maturity Date _____

Referring Office _____

Broker Code _____

Checked by:

Entered by:

INTERIM ACKNOWLEDGEMENT

Official acknowledgement of your investment will be sent to you following receipt and final acceptance of the application by Bank of Queensland Limited Bond Registry.

Name of bondholder _____

Amount invested \$ _____

Date _____

Interest Rate _____ % p.a.

Term of investment _____

BROKER/RECEIVING OFFICE STAMP

TAX FILE NUMBER/EXEMPTION NOTIFICATION

Note: It is not compulsory to notify your Tax File Number (TFN) or Exemption. However, your interest payments may be taxed at the highest marginal rate if it is not provided for this investment. For more information, please call the Australian Taxation Office.

COMPLETE AS REQUIRED

Name 1 _____

Tax File Number ____/____/____

Reason for Exemption _____

Name 2 _____

Tax File Number ____/____/____

Reason for Exemption _____

Name 3 _____

Tax File Number ____/____/____

Reason for Exemption _____