



WealthHub Securities Limited ABN 83 089 718 249 AFSL No. 230704

nabtrade GPO Box 4545 Melbourne VIC 3001 Telephone 13 13 80 nabtrade.com.au



Please use black or blue pen and write in CAPITALS. If you need help completing this form, please call us on 13 13 80.

Please don't use photocopies of this form — it includes unique information to help us process your application faster.

ASX Clear number – FOR OFFICE USE ONLY

Section 1 Account Details	
Your Account Number	Holder Identification Number (HIN)
NT	
Name	
Section 2 Declaration	

I/We acknowledge and agree that:

- authorise my Controlling Participant to, without limitation, reserve, withdraw, transfer or otherwise deal with the Financial Products (the "Collateral") registered in the name of the Registered Holder in the ASX Clear Pty Limited, ABN 48 001 314 503 ("ASX Clear") Subposition as Collateral Cover for obligations in respect of Options Market Contracts registered in my accounts (Accounts) with a Clearing Participant (ASX Clear Participant).
- 3. The Registered Holder acknowledges that on behalf of the Registered Holder the Controlling Participant will reserve, withdraw, transfer or otherwise deal with the Collateral in the ASX Clear Subposition, by sending the appropriate Collateral lodgement message in accordance with the ASX Clear Operating Rules and Procedures (as amended from time to time).
- 4. In registering Collateral in the ASX Clear Subposition, the Registered Holder acknowledges that the Collateral will be subject to a security interest in favour of ASX Clear, from the time they are reserved to the ASX Clear Subposition as in the manner referred to above, and will remain subject to the security interest until ASX Clear permits it to be withdrawn from the ASX Clear Subposition.
- 5. The Registered Holder acknowledges that the security interest secures all amounts and obligations owing by the ASX Clear Participant to ASX Clear in connection with the Accounts.
- 6. The Registered Holder warrants that, the Collateral is not and must not be subject to any other security interest, other than where the parties to the security interest agree between themselves in writing that ASX Clear's security interest in respect of the Collateral has priority over that security interest, and the parties hold the benefit of such agreement on trust for the benefit of ASX Clear, unless ASX Clear otherwise agree in writing.
- 7. If the Controlling Participant is unable to insert the HIN at the time the Register Holder signs this form, the Registered Holder irrevocably authorises the Controlling Participant to insert the HIN on this agreement on the Registered Holder's behalf. The Controlling Participant agrees that it will notify the Registered Holder of the HIN in writing as soon as reasonably possible.
- 8. Defined terms have the same meaning as defined in the ASX Clear Operating Rules or the ASX Settlement Operating Rules and Procedures (as amended from time to time).
- 9. If the ASX Clear Participant is unable to insert the Account Numbers and/or HIN at the time the Registered Holder signs this form, the Registered Holder irrevocably authorises the ASX Clear Participant to insert the Account Numbers and/or HIN on this agreement and agrees the ASX Clear Participant will insert the Account Numbers and/or HIN on the Registered Holders behalf, prior to lodging this Authorisation with ASX Clear. The ASX Clear Participant agrees that it will notify the Registered Holder of the account numbers and/or HIN in writing as soon as reasonably possible.

Section 3

Signatures

Please provide signatures of all persons registered to operate the Trading Account.

Person 1:*

Given name(s) / Family name (PLEASE PRINT)	Signature	
	×	Date / /
Person 2:*		
Given name(s) / Family name (PLEASE PRINT)	Signature	
	×	Date / /
Person 3:*		
Given name(s) / Family name (PLEASE PRINT)	Signature	
	×	Date / /
* If a corporation must be signed in accordance with	the Corporations Act 2001 (Cth) or	if signed under Power of Attorney

* If a corporation, must be signed in accordance with the Corporations Act 2001 (Cth), or if signed under Power of Attorney, a copy of the Power of Attorney must also be attached to this Authorisation.

Witnessed by: Mandatory Given name(s) / Family name (PLEASE PRINT)	Signature	
	×	Date / /

Section 4

Next Steps

Please complete and return this form (copies or faxes won't be accepted) and any attachments by **post** to:

Post:

nabtrade GPO Box 4545 Melbourne VIC 3001

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