

Refinance In Request

Complete this form using **black ink**, CAPITAL LETTERS and mark [x] in the appropriate boxes.

1 Facility Details

Borrower name

Loan account number

Please Note: If you do not have an existing Leveraged Margin Loan, please complete the Margin Loan application form.

2 Details of the Margin Loan to be refinanced

Name of Margin Lender

Account Number

Full name of the existing margin loan

3 Repayment of Loan Balance (select one option only)

- Full refinance – please note the entire margin lending portfolio will be transferred to the Lender. The HIN will be transferred to the Lender where applicable
- Partial refinance – please indicate the security code, security name and number of units you wish to refinance below

Security Code/Security Name	Number of Shares/ Units	Registered Name

4 Guarantor Refinance

Please fill in the details below if the refinance of your Margin Loan includes a guarantor.

Guarantor HIN

Name held on HIN

Acknowledgement

Each Borrower and Guarantor:

- Request the margin lender identified in section 2, to provide Leveraged Equities with all information regarding the margin loan to be refinanced.
- Instruct Leveraged Equities to refinance the loan amount (if any).
- Authorise the transfer of HIN or any other Security to Leveraged Equities, its Sponsor or Nominee to be held as part of the Secured Portfolio.

6 Execution

Signature of Borrower

Print full name

Company/Trust: indicate capacity

Director Sole Director and Secretary Trustee

Date

 / /

Signature of Guarantor

Print full name

Company/Trust: indicate capacity

Director Sole Director and Secretary Trustee

Date

 / /

Signature of Additional Borrower

Print full name

Company/Trust: indicate capacity

Second Director Company Secretary Second Trustee

Date

 / /

Signature of Additional Guarantor

Print full name

Company/Trust: indicate capacity

Second Director Company Secretary Second Trustee

Date

 / /

Submit this form by:

Mail: Leveraged, GPO BOX 5388, Sydney NSW 2001

Email: info@leveraged.com.au

Fax: 02 8282 8383

For any enquiries please contact your Relationship Manager on 1300 307 807

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leveraged.com.au

LE019 (11/15)

Refinance In Request dated 1 November 2015