

Additional Unit Application Form



This application form is for existing investors in the Cromwell Direct Property Fund who wish to apply for additional units in the Fund. The additional investment amount will be added to your existing investment in the Fund. You can only use this form if your application details are unchanged.

Please complete this form using BLACK INK and write clearly within the boxes in CAPITAL LETTERS. Mark appropriate answer boxes with a tick (✓). You should read the PDS dated 17 November 2020, issued by Cromwell Funds Management Limited ABN 63 114 782 777, AFSL 333214, before completing this investment application form.

PART 1 INVESTOR IDENTIFICATION

These details can be found on the welcome letter which confirmed your initial investment in the Fund.

Investor Number Investment Name (Example: "John Smith" or "John Smith ATF John R Smith Super Fund")

PART 2 INVESTMENT AMOUNT

Enter the amount you would like to increase your investment by.

Additional Investment Amount: \$

PART 3 ADVISER DETAILS

If an Initial Advice Fee is nominated we will deduct this amount from your application amount and pay this fee to your Adviser.

Adviser given name Adviser surname
 Adviser company (if applicable) Adviser Phone -
 Adviser email
 Licensed Dealer Licence No: Initial Advice Fee (if applicable): % (Max 3.3%, incl. GST)

PART 4 DECLARATION AND AUTHORISATION

I/we declare that I/we have received and read the current PDS and agree to be bound by it and the Constitution (each as amended from time to time). I/we declare that the offer was received and accepted in Australia and all information in this application is true and correct. I/we indemnify CFM against any liabilities whatsoever arising from acting on any information I/we provide in connection with this application. I/we have legal power to invest in accordance with this application and have complied with all applicable laws in doing so. I/we acknowledge that neither CFM or any other member of the Cromwell Property Group (including its directors and employees) guarantee the Fund's performance, the repayment of capital, any particular rate of return or any distribution. In the case of joint applications, the joint applicants agree that unless otherwise indicated on the application form, the units will be held as joint tenants and both investors will be required to operate the account and bind the other investor for future transactions. If this application is signed under Power of Attorney, the Attorney declares that he/she has not received notice of revocation of the power. I/we acknowledge that we have read and understood the 'Privacy Statement' in the current PDS. Until I/we inform CFM otherwise, I/we will be taken to have consented to all uses of our personal information (including marketing) contained under that heading and to our adviser providing further personal information to CFM as required or reasonably deemed necessary by CFM. Any application can be accepted or rejected by CFM. I/we understand that if we fail to provide any information requested or do not agree to any of the possible uses or disclosure of our information as detailed in the PDS, our application may be rejected by CFM and CFM is released and indemnified in respect of any loss or liability arising from its inability to accept an application due to inadequate or incorrect details having been provided. I/we agree that CFM may provide details of our investment to the adviser group or adviser nominated by the means and in the format that they direct. I/we authorise CFM to calculate and pay the nominated advice fee, up to 3.3% of the application monies, to the nominated adviser /adviser group from our application monies. I/we understand that the advice fee cannot be refunded once paid. I/we declare the tax information provided is accurate.

SIGNATURE Date / / SIGNATURE Date / /
 Name Name

PART 5 PAYMENT DETAILS

These details are required so your payment can be matched to your application form.

Please indicate which payment method you've used:

Cheque > Made payable to: **CFM DPF APPLICATION**
 BPAY® > Biller Code: 299727 Reference Number:
 Direct Debit > Complete Direct Debit Request form and attach
 Electronic Transfer > BSB: 084 004 Account: 87 512 5930
 Account Name: CFML DPF Application Account
 Account Reference: Applicant Name

INTERNAL USE ONLY

IMPORTANT INFORMATION REQUIRED – FATCA/CRS

Cromwell is required to collect and report to the Australian Taxation Office (ATO) certain information about the tax residency of our unitholders. If you have not supplied Cromwell with your tax residency status previously, please do so by one of the following methods:

- Online via your registered InvestorServe Access - Visit www.investorserve.com.au → My Details → FATCA-CRS Information
 - Email or Post a FATCA/CRS Form - Call Cromwell's Investor Services Team on 1300 268 078 to obtain a copy of the Automatic Exchange of Information (AEOI) Form for you to complete and return
- Not providing this information to Cromwell may delay the processing of your transaction.



Send your completed application forms to the Fund's registrar:
 Email: cromwell@boardroomlimited.com.au
 Fax: 02 9252 1987
 Post: Boardroom Pty Limited
 GPO Box 3993
 Sydney NSW 2001