# **Transfer** Form



#### TRANSFER FORM INFORMATION

The Transfer Form is to be used if you wish to transfer your investment(s) within the RMBL Mortgage Income Investments Fund ARSN 091 248 289 (Fund) to another person or entity.

This Transfer Form must be accompanied by the Product Disclosure Statement dated 1 February 2023 (PDS) and Supplementary Product Disclosure Statement dated 1 March 2024 (SPDS), which is issued by the Responsible Entity of the Fund, RMBL Investments Limited (ACN 004 493 789 AFSL number 223246 (Us, We, Our)). If you have any questions about completing this Transfer Form, please contact Us on (03) 9213 5700 or email team@rmbl.com.au.

#### IMPORTANT: TRANSFEREE (BUYER) INFORMATION

You must read the PDS prior to applying to invest in the Fund. You should also review the Target Market Determination (TMD) which is available on Our website at www.rmbl.com.au/TMD.

If You are unsure whether the Fund is suitable for Your particular personal circumstances, needs or objectives,

You should seek advice from an independent financial planner as We are unable to provide You with financial advice.

Once Your funds are invested into a Loan, You are not able to withdraw your funds, except in the circumstances set out on page 19 of the PDS.

#### **PRIVACY ACT - COLLECTION STATEMENT**

This Transfer Form, once completed, will contain personal information about You. We will use Your personal information to process Your transfer to manage Your investment in the Fund and as otherwise outlined in Our Privacy Policy, which is available on Our website at <a href="https://www.rmbl.com.au/rmbl-privacy.">www.rmbl.com.au/rmbl-privacy.</a>

Our general Privacy Policy details why We collect personal information, who We may disclose it to (including whether We are likely to disclose it to overseas recipients), and the main consequences (if any) if We do not collect Your Personal Information, which include Us being unable to process Your transfer request. Our general Privacy Policy also contains information about how You may seek access to, or correction of, the personal information held about You, and Our complaint resolution procedures.

If You have concerns or wish to make a complaint about how We treat Your personal information, please contact Our Privacy Officer at <a href="mailto:privacy@rmbl.com.au">privacy@rmbl.com.au</a> for assistance.

### **RELEVANT DEFINITIONS**

- Transferor means the individual or entity who is making the transfer of the investment to another party.
- Transferee means the individual or entity who is receiving the transfer from another entity.

HOW TO COMPLETE THIS TRANSFER FORM >>			
PAR	T 1: TRANSFEROR		
1.1	TRANSFEROR & TRANSFEREE DETAILS		
1.2	TRANSFER AMOUNT		
1.3	TRANSFEROR AUTHORISATION		

#### **AND**

PART 2: EXISTING TRANSFEREE (if applicable)		
2.1	EXISTING TRANSFEREE DETAILS	
2.2	TARGET MARKET QUESTIONS	
2.3	LOAN DETAILS	
2.4	DECLARATION AND CONSENT	

#### OR

PAR	T 3: NEW TRANSFEREE (if applicable)	
3.1	TARGET MARKET QUESTIONS	
3.2	CONTACT PREFERENCES	
3.3	INVESTOR DETAILS	
3.4	COMPANY/PARTNERSHIPS	
3.5	TRUSTS	
3.6	APPLICATION DETAILS	
3.7	BANK DETAILS	
3.8	LOAN DETAILS	
3.9	DECLARATION AND CONSENT	

# PART 1: Authority to Transfer



# Transferor

1.1. TRANSFEROR AND TRANSFEREE DETAILS		
Transfer from (Transferor)		
Deposit ID:		
Name of Account:		
Reason for Transfer:		
Date Transfer to be Executed:		
Transfer to (Transferee)		
Name(s):		
Deposit ID(s) (if known):		
Email:		
Phone:		

OFFICE	USE ONLY
Comments:	Date:
	Staff Initials:

### 1.2 AMOUNT TO BE TRANSFERRED

Capacity:

Date:

1.2. AMOUI	NI IO DE IKANSFE	KKED			
Amount to be Transferred: \$					
that the Tra		e tick); or complete the below to s must be in multiples of \$1,000.00 erest, or distributions received from the		Γransfer.	Please note
Please tick if	f you wish to transfe	r Your interest in the Trust Accoun	t (if applicable) 🗆		
Loan No	Borrower		Partial Transfer		Full Transfer
			\$		
			\$		
			\$		
			\$		
			\$		
			\$	OR	
			\$		
			\$		
			\$		
			\$		
Total Transfer Amount:		\$			
			1		
Any Other In	nstructions:				
	EROR AUTHORISA				
facilitating the Important: C Superannual By requesti Limited (RN Superannual for this transportant)	nis transfer request. Confirmation by Trus tion Industry (Superv ng a transfer to a t IBL) that this trans ation Industry (Sup usfer as trustee/s of permitted by law, w	tee as to compliance with the Super vision) Regulations 1994: hird party, we, as trustees of the fer does not contravene the Sup ervision) Regulations 1994 (SIS f the superannuation fund includ	and portfolio holdings with the Transannuation Industry (Supervision) Acsuperannuation fund confirm to legannuation Industry (Supervision) Legislation). We understand that ling ensuring that the payment medium that the pay	t 1993 an RMBL Inv n) Act 19 we are ul eets SIS I	d vestments 93 or the timately liable Legislation. To
Signature 1		S	ignature 2		
Full Name:		F	full Name:		

Capacity:

Date:

# PART 2: Application for Investment



# Existing Transferee

2.1. EXISTING TRANSFEREE DETAILS			
Deposit ID:			
Name of Account:			
Address:			
2.2. TARGET MARKET QUESTIONS			
Will You be investing in the Fund as a W	holesale Investor?	□ Yes	□No
If you answered No, please answer the	below Target Market Questions.		
	have not invested in the fund since 5 OCTOBER 2021 only. You do not ne ur objectives, financial situation or needs change.	ed to comp	olete this
These questions are designed to see if You are in the <b>Excluded Target Market</b> as defined in the TMD for the Fund. You are likely to be in the <b>Excluded Target Market</b> if You answer any of the below questions "Yes".			
	ou should seek financial advice from an independent financial planner before suitable for Your objectives, financial situation and needs.	ore comple	ting Your
As explained in Section 10 of the PDS, Your capital may be at risk in the event that the Borrower defaults on the Loan and RMBL must enforce its mortgage against the Security Property. As a result of this process, RMBL may be unable to recover the full amount lent to the Borrower, leaving a shortfall in funds available to repay to Investors. In that situation You may lose some of Your capital invested in that Loan. While we have risk management measures in place to mitigate the risk of capital loss, we do not guarantee return of Your Capital in the event of a default situation.			
If a decrease in your capital were to o	ccur, would it lead to substantial financial difficulties for you?		
Do you require access to Your investi	ment amount in the short-term (less than 1 year)?	□ Yes	□No
	and SPDS, in some cases beyond Our control, a Borrower may not means that there may be a delay between the Maturity Date for a	☐ Yes	□No
If this was to occur, would this cause	You financial or other hardship?		

### 2.3. DETAILS OF LOAN(S)

You must complete this section by listing the specific Loan(s) into which funds are to be invested.		
Loan No	Borrower	Contribution Amount
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
Total Amou	nt:	\$

By completing and signing this Transfer Form, You declare and consent that:

- a) You have received, read and understood a copy of the Product Disclosure Statement (PDS) dated 1 February 2023 and Supplementary Product Disclosure Statement (SPDS) dated 1 March 2024.
- b) You understand that You are bound by the terms and conditions of the RMBL Mortgage Income Investments Fund Constitution.
- c) All the details You have provided are true and correct to the best of Your knowledge.
- d) You understand that We have collected personal information for the purposes of being able to process Your application and administer Your investment in the Fund.
- e) You understand that Your investment is subject to the risk of loss of capital and/or interest as the return of Your funds and the payment of interest is linked to the Borrower's repayment of capital and/or payment of interest as explained in Section 10 of the PDS.
- f) You understand that Your funds are invested into a Loan, You are unable to redeem Your funds prior to maturity or repayment except at Our discretion as set out in Section 8.17 of the PDS.
- g) You understand that in the circumstances of a Borrower requesting an extension to a Loan where the value of the Security Property results in a breach of the LVR, Your funds will be unable to be returned and will remain in the Loan until the Borrower has provided additional capital or security to bring the LVR back within guidelines as explained in Section 8.16 of the PDS.
- h) You understand that following the expiry of the term of a Loan, there may be a delay between the Maturity Date and the return of Your funds due to circumstances beyond Our control as explained in Section 8.16 of the PDS.
- i) Where a Borrower requests an extension to a Loan, we will write to you advising the renewal terms. You understand that in the circumstance of a Borrower requesting an extension to a Loan, we will write to you to seek you consent to renew your Investment in that Loan. If you have not responded to two requests seeking consent, we will subsequently confirm with you in writing that you have deemed consent to remain invested in the Loan. Your investment in the Loan will remain invested for the renewal term unless you elect in writing to re-allocate your investment to another Loan(s) or to have your funds repaid. Refer to the PDS for an explanation on Loan renewals and deemed consent.
- j) I/We have received, read, and Understood the Supplementary Product Disclosure Statement(s) related to the specific Loan(s) into which funds are to be invested.
- k) You acknowledge and accept that the Supplementary Product Disclosure Statement(s) provided reflect the current status of the loan(s) at as at the date of the transfer.
- I) I/We consent to the Loan(s) into which funds are to be invested.

Signatures by Applicants	
Individuals: (including Individual Trustees)	All Applicants / Trustees
Companies: (including Corporate Trustees)	Two Directors / Director & Company Secretary or Sole Director
Partnerships:	All Partners or as per Companies for Company Partners
Signature 1	Signature 2
Full Name:	Full Name:
Capacity:	Capacity:
Date:	Date:
	OFFICE USE ONLY
Comments:	Date: Staff Initials:

# PART 3: Application for Investment



# New Transferee

3.1. TARGET MARKET QUESTIONS			
Will You be investing in the Fund as a Wholesale Investor?		☐ Yes	□No
If you answered No, please answer the below Target Market Questions.			
These questions are designed to see if You are in the <b>Excluded Target Market</b> as det the <b>Excluded Target Market</b> if You answer any of the below questions "Yes".	fined in the TMD for the Fund. You	are likely t	to be in
If You are in the <b>Excluded Target Market</b> , You should seek financial advice from Your Application Form as the Fund is unlikely to be suitable for Your objectives, fire		before con	npleting
As explained in <u>Section 10</u> of the PDS, Your capital may be at risk in the event the Loan and RMBL must enforce its mortgage against the Security Property. A RMBL may be unable to recover the full amount lent to the Borrower, leaving a repay to Investors. In that situation You may lose some of Your capital investor risk management measures in place to mitigate the risk of capital loss, we do not Capital in the event of a default situation.	s a result of this process, shortfall in funds available to d in that Loan. While we have	□ Yes	□No
If a decrease in your capital were to occur, would it lead to substantial fi	nancial difficulties for you?		
Do you require access to Your investment amount in the short-term (less	s than 1 year)?	☐ Yes	□No
As explained in <u>Section 8.16</u> of the PDS and SPDS, in some cases beyond Our crepay the Loan by the Maturity Date. This means that there may be a delay betw Loan and the repayment of Your capital.		□ Yes	□No
If this was to occur, would this cause You financial or other hardship?			
3.2. CONTACT PREFERENCES			
Main Contact Person:			
Residential Address:			
Postal Address:			
Same as Residential $\square$			
Email:	Phone:		
Contact Preference:	□ Post		

### 3.3. NEW TRANSFEREE DETAILS

Investor 1 (Individual, Trustee, Partner, Director)	Investor 2 (Individual, Trustee, Partner, Director)
Full Name:	Full Name:
Date of Birth:	Date of Birth:
Residential Address:	Residential Address:
Postal Address:	Postal Address:
Same as Residential □	Same as Residential $\square$
Phone:	Phone:
Email:	Email:
Occupation:	Occupation:
TFN*:	TFN*:
*If exempt, please provide reason.	*If exempt, please provide reason.
Investor 3 (Individual, Trustee, Partner, Director)	Investor 4 (Individual, Trustee, Partner, Director)
Full Name:	Full Name:
Date of Birth:	Date of Birth:
Residential Address:	Residential Address:
Postal Address:	Postal Address:
Same as Residential □	Same as Residential □
Jame as Nesidential	Same as residential
Phone:	Phone:
Email:	Email:
Occupation:	Occupation:
TFN*:	TFN*:
*If exempt, please provide reason.	*If exempt, please provide reason.

## 3.4. COMPANY/PARTNERSHIP

Full Company Name/Partnership:			
(including Corporate Trustees)			
ACN:	ABN:		
TFN:			
Registered Office Address:			
Principal Place of Business:			
Company Type:	☐ Public (Listed)	☐ Public (Unlisted) ☐ Proprietary	
Country where Partnership was established:	☐ Australia	☐ Other (specify):	
Is Partnership regulated by a professional association?	☐ Yes	$\square$ No (please provide details below)	
Name of Association:	Membership Detai	ls:	
Shareholder Beneficial Owners			
Complete for Public (Unlisted), Proprietary Companies and Partr	nerships.		
Please provide details of individuals who ultimately own 25% or moshareholdings). Where Beneficial Owner is also a Director, only pro-		ssued share capital (through direct or indirect	
For a Partnership provide details of individuals who ultimately own 25% or more of the Partnership or are entitled to exercise 25% or more of the voting rights, including power of veto OR directly or indirectly Control the Partnership. Where Beneficial Owner is also a Partner, only provide the Full Name.			
Beneficial Owner 1	Beneficial Owner	•2	
Full Name:	Full Name:		
Date of Birth:	Date of Birth:		
Residential Address:	Residential Address:		
Beneficial Owner 3	Beneficial Owner	. 4	
Belleticial Owiler 3	Belleficial Owller	4	
Full Name:	Full Name:		
Date of Birth:	Date of Birth:		
Residential Address:	Residential Addre	ess:	

### **3.5. TRUSTS**

Name of Trust:					
Trust Type:	□ SMSF		☐ Charitable Trust	☐ Testamentary Trust	
	☐ Discretionary (Family)		☐ Other (specify):		
Trust ABN:					
TFN:					
Country where Trust was estab	olished:	☐ Australia		☐ Other (specify):	
Is the Settled Sum greater than \$10,000? ☐ Yes (please profor unregulated Trusts)		rovide details below)	□ No		
Settlor 1			Settlor 2		
Full Name:			Full Name:		
Date of Birth:			Date of Birth:		
Residential Address:			Residential Address:		
Phone:			Phone:		
Beneficiary Details					
Primary beneficiaries are individuals named in the Trust Deed.					
Primary Beneficiaries					
Full Name:			Full Name:		
Full Name:			Full Name:		
Full Name:			Full Name:		
Full Name:			Full Name:		

### 3.6. APPLICATION INFORMATION

Investment Information				
Interest Instructions:	☐ Reinvest	☐ Pay into nominated bank account		
Joint Applicants Only	Who will <b>operate</b> the account?			
	☐ Any to sign	☐ Both to sign		
Anti Money Laundering & Counter	Terrorism Financial Related C	Questions		
Politically Exposed Persons:	Are any people noted in this Transfer Form a <b>Politically Exposed Person</b> ?			
	□No	$\square$ Yes (please state the name of the individual)		
Foreign Tax Questions				
Is any Applicant a tax resident of another country?	□No	☐ Yes (please complete the Foreign Tax Form)		
Investor Nominated Representativ	e Details (if applicable)			
Please refer to Section 20 of the PDS, noting that Investor Nominated Representatives will have access to Your personal information and can act on Your behalf. Verification of Identification Documentation is required for Investor Nominated Representatives.				
Full Name:				
Date of Birth:				
Residential Address:				
Email:		Phone:		
Capacity:	Authority	□ Limited Authority		
Signature:				
3.7. INTEREST PAYMENTS BANK ACCOUNT				
Complete this if You would like interest payments to be paid to You each month, and do not want Your interest to be reinvested.				
Bank:		BSB:		
Account Name:		Account Number:		

### 3.8 DETAILS OF LOAN(S)

You must complete this section by listing the specific Loan(s) into which funds are to be invested.		
Loan No	Borrower	Contribution Amount
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
Total Amou	nt:	\$

By completing and signing this Transfer Form, You declare and consent that:

- a) You have received, read and understood a copy of the Product Disclosure Statement (PDS) dated 1 February 2023 and Supplementary Product Disclosure Statement (SPDS) dated 1 March 2024.
- b) You understand that You are bound by the terms and conditions of the RMBL Mortgage Income Investments Fund Constitution.
- c) All the details You have provided are true and correct to the best of Your knowledge.
- d) You understand that We have collected personal information for the purposes of being able to process Your application and administer Your investment in the Fund.
- e) You understand that Your investment is subject to the risk of loss of capital and/or interest as the return of Your funds and the payment of interest is linked to the Borrower's repayment of capital and/or payment of interest as explained in Section 10 of the PDS.
- f) You understand that Your funds are invested into a Loan, You are unable to redeem Your funds prior to maturity or repayment except at Our discretion as set out in Section 8.17 of the PDS.
- g) You understand that in the circumstances of a Borrower requesting an extension to a Loan where the value of the Security Property results in a breach of the LVR, Your funds will be unable to be returned and will remain in the Loan until the Borrower has provided additional capital or security to bring the LVR back within guidelines as explained in Section 8.16 of the PDS.
- h) You understand that following the expiry of the term of a Loan, there may be a delay between the Maturity Date and the return of Your funds due to circumstances beyond Our control as explained in Section 8.16 of the PDS.
- Where a Borrower requests an extension to a Loan, we will write to you advising the renewal terms. You understand that in the circumstance of a Borrower requesting an extension to a Loan, we will write to you to seek you consent to renew your Investment in that Loan. If you have not responded to two requests seeking consent, we will subsequently confirm with you in writing that you have deemed consent to remain invested in the Loan. Your investment in the Loan will remain invested for the renewal term unless you elect in writing to re-allocate your investment to another Loan(s) or to have your funds repaid. Refer to the PDS for an explanation on Loan renewals and deemed consent.
- j) I/We have received, read, and Understood the Supplementary Product Disclosure Statement(s) related to the specific Loan(s) into which funds are to be invested.
- k) You acknowledge and accept that the Supplementary Product Disclosure Statement(s) provided reflect the current status of the loan(s) at as at the date of the transfer.
- I) I/We consent to the Loan(s) into which funds are to be invested.

Signatures by Applicants	
Individuals: (including Individual Trustees)	All Applicants / Trustees
Companies: (including Corporate Trustees)	Two Directors / Director & Company Secretary or Sole Director
Partnerships:	All Partners or as per Companies for Company Partners
Signature 1	Signature 2
Full Name:	Full Name:
Capacity:	Capacity:
Date:	Date:

	OFFICE USE ONLY	
Comments:		Date:
	S	Staff Initials:

### 4. VERIFICATION OF IDENTITY

Applicant Type	Verification of Identification (VOI) Requirements			
Individuals:	Certified VOI Documents for each Applicant.			
Companies:	Certified VOI Documents for each Director and Beneficial Owner identified			
Trusts:		VOI Documents for each Individual Trustee and/or Beneficial Owners and Settlor where settled sum is greater than \$10,000 <b>PLUS</b> an original <b>OR</b> certified copy of the Trust Deed or an original or certified extract of the Trust Deed.		
	If the Trustee is a Corporate then we require VOI for the Directors of the Company.			
Partnerships:	VOI Documents for Individual Partners and Beneficial Owners <b>PLUS</b> verification of Part Name and membership of Professional Association.	VOI Documents for Individual Partners and Beneficial Owners <b>PLUS</b> verification of Partnershi Name and membership of Professional Association.		
	If the Trustee is a Corporate then we require VOI for the Directors of the Company.			
VOI Requirements for Indiv	luals, Directors, Partners and Beneficial Owners			
Please choose either 1 docu	ent from Option 1 <b>OR</b> 2 documents from Option 2.			
OPTION 1				
Primary Documents - Docu provide <b>ONE</b> of these Docu	ents containing a photograph Please ents			
Australian State/Territ	y Driver's Licence (Front and Rear)			
Australian Passport*				
Card issued under a Sta	or Territory for purpose of providing a person's age			
Foreign Passport - Nor	English Passports to be accompanied by an English Translation			
* Passports with an expiry d	e under 2 years are acceptable.			
OPTION 2				
Secondary Documents - Do	ıments without a photograph			
Please provide <b>TWO</b> of thes	Documents - One from each column			
One from this column	One from this column			
Australian Birth Certif	A document issued by the Commonwealth (including the ATO) of a State or Territ within the preceding 12 months which contains the individual's name and resident address			
Australian Citizenship Certificate	A document issued by a local government body or utilities provider within preceding 3 months which records the provision of services to that address of t person (must contain the individual's name and residential address)			
Pension Card issued by Department of Human				

VOI	Document Requirements for Trusts, Partnerships and Associa	ation	s	
Trus	sts			
	Original or Certified Copy of Trust Deed; <b>OR</b>			
	Original or Certified Copy of extract of Trust Deed including name of the Trust, Trustees, Beneficiaries or Members, Settlor/s and Appointers (where applicable).			
Part	nerships			
Prov	vide <b>ONE</b> of these Documents		vide ONE of these Documents if Partnership is regulated by a fessional Association	
	Original or Certified copy or Certified Extract of Partnership Agreement		Original current membership certificate	
	A Certified copy of Certified extract of minutes of a Partnership Meeting		Membership details independently sourced from professional association	
	Search of relevant ASIC, government or other regulators database (such as ABN lookup)			
	Notice issued by the Australian Taxation Office within the last 12 months			
	Original or Certified copy of a certificate of registration of business name issues by an Australian government or government agency			