

Perpetual Pure Credit Alpha Fund

Product Disclosure Statement issue number 4 dated 1 March 2021 Perpetual Investment Management Limited ABN 18 000 866 535 AFSL 234426

APPLICATION FOR CLASS W UNITS

Please complete this form using BLACK INK and print well within the boxes in CAPITAL LETTERS. Mark appropriate boxes with a cross like the following X. Start at the left of each answer space and leave a gap between words.

Please ensure this form is fully complete and all required documentation is provided to either your financial adviser or us, so we can process your application.

1. In	vesto	r type
Are y	ou an exis	ting Perp

Are you an existing Perpetu	ıal investor?					
no						
yes	client number					
If yes, would you like to ope	en a new account or make a	ın additional investme	nt into an existing accou	nt?		
new account*						
additional investment	existing account number			olease go to section 2		
Investor type (please selec	t only one investor type)					
individual**	joint**	company	superannuation fund	trust		
partnership	association gov	vernment body	other entity			
** Individual or joint investors 2. Investment am How much would you like to	ount and paymen	or a child under 18 ye				
Source of funds being inve	sted (tick most relevant o	ption)				
retiremer	nt savings	employment inc	come	business activities		
sale	of assets	inheritanc	e/gift	financial investments		
	other					
How will this investment b	e made? NOTE: Cash is no	t accepted.				
cheque make cheque payable to PISTIW – [insert name(s) of applicant(s)] Perpetual will debit your bank account nominated in section 7. I/We acknowledge and accept the terms and conditions of direct debit available at						
direct debit www.perpetual.com.au/pure-credit-alpha-fund						

3. Investor details

Existing investors in the Funds need only complete this section if you wish to change any details provided previously.

A. Individual and joint account holders

Investor 1 (individual account holder) Investor 2 (joint account holder) title title Mr Mrs Miss Ms other Mr Mrs Miss Ms other first name(s) first name(s) last name last name occupation occupation date of birth date of birth aender aender female female male male Residency status for tax purposes Residency status for tax purposes Tax residency rules differ by country. Whether an individual is a Tax residency rules differ by country. Whether an individual is a tax resident of a particular country is often (but not always) based tax resident of a particular country is often (but not always) based on the amount of time a person spends in a country, the location on the amount of time a person spends in a country, the location of a person's residence or place of work. For the United States, of a person's residence or place of work. For the United States, tax residency can also be as a result of citizenship or residency. tax residency can also be as a result of citizenship or residency. Please answer **BOTH** of the following tax residency Please answer **BOTH** of the following tax residency questions: questions: 1. Are you a tax resident of Australia? 1. Are you a tax resident of Australia? (complete the following details and (complete the following details and (proceed to (proceed to then proceed to question 2 below) question 2 below) yes then proceed to question 2 below) question 2 below) ves nο tax file number (TFN) tax file number (TFN) or ٥r TFN exemption code TFN exemption code 2. Are you a tax resident of another country? 2. Are you a tax resident of another country? (complete the following details) (complete the following details) no no If 'yes', please list all relevant countries and provide your tax If 'yes', please list all relevant countries and provide your tax identification number (TIN) for each country. identification number (TIN) for each country. A TIN refers to the number assigned by a country for the purpose A TIN refers to the number assigned by a country for the purpose of administering its tax laws and is the equivalent of a TFN in of administering its tax laws and is the equivalent of a TFN in Australia. If a TIN is not provided, please list one of the three Australia. If a TIN is not provided, please list one of the three reasons specified below (A, B or C) for not providing a TIN. reasons specified below (A, B or C) for not providing a TIN. Country 1 Country 1 TIN If no TIN, list reason A, B or C TIN If no TIN, list reason A, B or C Country 2 Country 2 If no TIN, list reason A, B or C If no TIN, list reason A, B or C If there are more than two countries, provide details on a If there are more than two countries, provide details on a separate sheet and tick this box. separate sheet and tick this box. Reason A: The country of tax residency does not issue TINs to Reason A: The country of tax residency does not issue TINs to tax residents. tax residents. Reason B: I have not been issued with a TIN. Reason B: I have not been issued with a TIN. Reason C: The country of tax residency does not mandate Reason C: The country of tax residency does not mandate provision of the TIN. provision of the TIN.

3. Investor details (continued)

A. Individual and joint account holders

Investor 1 (individu	ual account holder)	Investor 2 (joint account holder)								
Residential address	ss (mandatory)	Residential addr	Residential address (mandatory)							
unit number	street number	unit number	street number							
street name		street name								
suburb (if relevant)	OR city	suburb (if relevan	nt) OR city							
state	postcode	state	postcode							
country		country								
phone (business h	Ours)	phone (business	hours)							
priorie (busiliess ii	oursy	priorie (busiliess	i iours)							
phone (after hours)	phone (after hou	irs)							
mobile		mobile								
email address		email address								
	ur email address, I/we agree to receive any ir ements (including tax statements), reports ar		our investment (such as transaction notifications required by the Corporations Act)							
electronically. This	may include email notifications advising me/	us when new informa	ation regarding my/our investment is available need to send me/us information by mail from							
time to time.	via hyperinik or via myr erpetdal. I/ we ackno	wiedge you may still i	need to send me, as information by mail nom							
D 11 11 77										
po box	different to residential address) unit number street number	po box	etails as investor 1 unit number street number							
atract name		atract name								
street name		street name								
suburb (if relevant)	OR city	suburb (if relevan	nt) OR city							
state	postcode	state	postcode							
oountry.		oountr.								
country		country								

3. Investor details (continued)

B. All other account holders

company name/corpora	ato trustoo					
company name/corpora	ite trustee					
name of aunorounuation	a fund truct northoreh	in acceptation sou	ornment hady	or oo operati	W0	
name of superannuation	riuna, trust, partnersi	lip, association, gov	ernment body	or co-operati	ve	
tax file number			and/or ABN			
principal business activit	ty					
c/-						
po box u	nit number	street number				
street name						
suburb (if relevant) OR c	city					
state po	stcode cou	untry				
phone (business hours)		mobile		fax	:	
email address						

By providing my/our email address, I/we agree to receive any information about my/our investment (such as transaction confirmations, statements (including tax statements), reports and other materials or notifications required by the Corporations Act) electronically. This may include email notifications advising me/us when new information regarding my/our investment is available for viewing online, via hyperlink or via myPerpetual. I/We acknowledge you may still need to send me/us information by mail from time to time.

4. Authorised representative

Existing investors in the Fund need only complete this section if you wish to add or change an authorised representative. Would you like to appoint an authorised representative? Before appointing an authorised representative, refer to the PDS for more details.

no	please g	go to section 5															
yes		complete the details be the terms and conditi		ated with	appoin	ting ar	n aut	horis	ed re	pres	senta	ative	٠.				
myPerp	oetual online	access for my autho	rised repre	sentative													
	view an	d transact (default)	or	view on	nly												
author	ised repres	entative details:															
fir	st name(s)																
	last name																
po box		unit number	street	number													
street n	ame																
suburb	(if relevant) (OR city															
state		postcode	country														
	gnature of authorised																
	esentative									d	ate	4	/		/	_	

5. Features

Existing investors in the Fund need only complete this section if you wish to add any new features or change existing features.

Indicate which optional features you would like applied to your account	
BPAY for additional investments	yes (default) no
Investor myPerpetual online access Note: an email address is required to register you for online account access	view & transact (default)
Adviser myPerpetual online access Note: your financial adviser can access information about your account online	view & transact (default)
Investment information to be sent in the mail Note: most of your investment information is also available through myPerpetual	online only (default)
Annual financial reports to be sent in the mail Note: annual financial reports are also available on our website	yes no (default)
Marketing material I/We would like to receive investment education material and be informed about Perpetual's products, services and offers	yes (default) no

• For each optional feature you have selected, please ensure you have read and understood the 'Operating your account' section in the PDS for that optional feature.

6. Investment allocation

Fund	APIR code	short code	initial investment (minimum \$100,000)	additional investment (minimum \$5,000)	distribu (indicate a preference selection is made, rein	ce with an X). If no
					reinvest	bank account
Perpetual Pure Credit Alpha Fund	PER0669AU	PISTIW	\$	\$		

7. Bank account details

Existing investors in the Fund need only complete this section if you wish to add or change your bank account details. You can only nominate a bank account that is held in your name(s). By providing your bank account details in this section, you accept the terms in the Direct Debit Service Agreement and authorise Perpetual to use these details for all future transaction requests that you nominate.

Bank account

Complete your account details in this section if you would like us and payment of distributions, as applicable. name of financial institution	to debit or credit your bank account for applications, withdrawals
branch name	
branch number (BSB) account number	
name of account holder	
signature of account holder A	signature of account holder B
date / /	

8. Financial adviser use only

Financial adviser details

financial adviser name	
phone (after hours)	phone (business hours)
mobile	fax
AFSL licensee name	AFSL number
either Perpetual adviser number	
or dealer group	dealer branch
email address	
financial adviser signature	date / / ADVISER STAMP
IL GN 🔲 🔲 🗸	Group)
ILAN 🔲 🖂 🗸	Adviser)
IL CN	Client)

9. Declaration and signature

I/We declare and agree that:

- I/we have read the Product Disclosure Statement (PDS), including all supplementary Product Disclosure Statements (SPDSs) (if applicable) and any relevant incorporated material to which this application applies, and have received and accepted the offer to invest in Australia
- all of the information provided in my/our application is true and correct
- I am/we are bound by any terms and conditions in this PDS and all SPDSs (if applicable) and the provisions of the constitution (as amended) of the Fund
- I/we have the legal power to invest and/or are at least 18 years of age
- I/we have read and understood the privacy disclosure as detailed in the PDS. I/We consent to my/our personal information being collected, held, used and disclosed in accordance with the privacy disclosure. I/We consent to Perpetual disclosing this information to my/our financial adviser (named in this form) in relation to the investments described in this form. Where the financial adviser named in this form no longer acts on my/our behalf, I/we will notify Perpetual of the change
- if I/we have received this PDS from the internet or other electronic means, that I/we received it personally or a print out of it, accompanied by or attached to this application form
- if this is a joint application, each of us agrees, unless otherwise indicated on this application, our investment is as joint tenants. Each of us is able to operate the account and bind the other(s) to any transaction including investments or withdrawals by any available method
- in relation to trust investors, only the trustee has rights and obligations under the Fund
- · withdrawals by companies must be signed by an authorised representative or in accordance with the company's constitution or under power of attorney
- I/we confirm that I/we have provided my/our financial adviser with acceptable identification documentation as described in the application form or customer identification form accompanying the PDS OR I/we are not investing through a financial adviser, and therefore have included certified copies of acceptable identification documentation with the completed application form as described in the application form or the customer identification form accompanying the PDS.

9. Declaration and signature (continued)

I/We acknowledge and agree that:

- the information contained in the PDS is not investment advice or a recommendation that the Fund is suitable having regard to my/our investment objectives, financial situation or particular needs
- · Perpetual may be required to pass on my/our personal information or information about my/our investment to the relevant regulatory authorities, including for compliance with income tax law and the Anti-Money Laundering and Counter-Terrorism Act 2006 or associated regulation and any tax-related requirements for tax residents of other countries
- · investments in the Fund are not investments, deposits or other liabilities of Perpetual Limited or its subsidiaries and are subject to investment and other risks, including possible delays in repayment and the loss of income and principal invested
- neither Perpetual Investment Management Limited nor Perpetual Limited or its subsidiaries guarantee the repayment of capital or the performance of the Fund or any particular rate of return from the Fund
- the PDS has referred me/us to additional information or terms and conditions ('information') of this product which may assist me/ us in making my/our investment decision and I/we have referred to this information to the extent I/we considered it was necessary to make my/our investment decision
- · Perpetual may contact me/us where required by using the email address(es) provided on the application form. I/We will notify Perpetual of any change to my/our email address(es). I/We understand that failure to advise such a change may result in me/us not receiving correspondence relating to my/our investment.

Joint applicants must both sign

signature of investor 1 or company officer	signature of investor 2 or company officer
print name	print name
Capacity (company investments only)	Capacity (company investments only)
Sole Director Director Secretary	Director Secretary
date	date
 Important notes: If signing under power of attorney, the attorney certifies that he or she has not received notice of revocation of that power. The power of attorney, or a certified copy, must be sent to Perpetual, if not previously provided. Perpetual has the absolute discretion to accept or reject any application. Investors should retain a copy of the PDS. A business day is a working day for Perpetual in Sydney. 	Final checklist Have you: ☐ Completed all sections of your application form? ☐ Signed your application form? ☐ Provided your financial adviser the customer identification documents requested in this application form or the relevant Customer Identification form? ☐ OR, if you are opening a new account and do not have a financial adviser, completed section 10 of this application form (for individuals) or enclosed the relevant customer identification form (for entities) and certified copies of your identification documents (as requested in section 10 of this application form or the relevant customer identification form)? Please send your completed application form to: Reply Paid 4171 Perpetual Wholesale Funds

Sydney NSW 2001

10. Identification verification for individuals and joint investors

This section is only applicable if you are investing as an individual or joint investor (as selected in section 1 of this form) and have not provided this documentation previously. If you are investing as a company, trust or any other investor type, please complete the relevant 'Customer identification form' available on our website or by contacting us.

The identity documentation requested below is required to meet our obligations under the Anti-Money Laundering and Counter-Terrorism financing Act 2006. We cannot process your application without this information.

Identity documentation

Please provide a document from Part I. If you do not have a document from Part I, please provide the documents listed in Part II OR Part III.

If you are a joint investor, please provide the relevant documents for BOTH investors.

- If you are applying directly with Perpetual You will need to provide a certified copy of the document(s) with your application.
- If you are lodging this application through a financial adviser You may provide a certified copy with your application OR have your financial adviser sight an original or certified copy of your document(s) and complete the 'Record of verification procedure' section in this form.

PART I – Primary ID documents
PROVIDE ONE OF THE FOLLOWING:
current Australian State / Territory driver's licence containing your photograph
Australian passport (current or a passport that has expired within the preceding 2 years is acceptable)
current card issued under a State or Territory law for the purpose of proving a person's age containing your photograph
current foreign passport or similar travel document containing your photograph and signature
OR
PART II – should only be completed if you do not own a document from Part I
PROVIDE ONE OF THE FOLLOWING:
Australian birth certificate Australian citizenship certificate concession card such as a pension, health care or seniors health card issued by the Department of Human Services
(excludes Medicare cards)
AND PROVIDE ONE VALID DOCUMENT FROM THE FOLLOWING:
a document issued by the Commonwealth or a State or Territory within the preceding 12 months that records the provision of financial benefits to you and contains your name and residential address a document issued by the Australian Taxation Office within the preceding 12 months that records a debt payable by you to the Commonwealth (or by the Commonwealth to the individual), which contains your name and residential address. a document issued by a local government body or utilities provider within the preceding 3 months which records the provision of services to your address or to you (the document must contain your name and residential address)
OR
PART III – should only be completed if you do not own document(s) from Part I OR Part II
BOTH DOCUMENTS FROM THIS SECTION MUST BE PROVIDED
foreign driver's licence that contains a photograph of you and your date of birth
national ID card issued by a foreign government containing your photograph and your signature
Any documents written in a language that is not English must be accompanied by an English translation prepared by an

accredited translator.

10. Identification verification for individuals and joint investors (continued)

How to certify your documents

In accordance with the AML Rules, a certified copy means a document that has been certified as a true and correct copy of an original document by a person listed below, including all persons described in the Statutory Declarations Regulations 2018 (Cth). To create a certified copy, one of the persons listed below must write the following on the copy of the document.

- 'I, [full name], [category of persons as listed below], certify that this [name of document] is a true and correct copy of the original. [signature and date]'
- An Australian bank, building society, credit union or finance company officer with a minimum of 2 years continuous service
- A fellow of the National Tax and Accountants' Association
- An Australian judge of a court, Justice of the Peace or magistrate
- · An Australian legal practitioner
- A notary public, patent or trade marks attorney
- An Australian medical practitioner including dentist, nurse, midwife, optometrist, pharmacist, physiotherapist, chiropractor, psychologist, occupational therapist or veterinary surgeon
- A permanent employee or agent of the Australian Postal Corporation with a minimum of 2 years continuous service
- · An Australian federal, state or territory police officer
- An architect

- A teacher employed on a full-time basis at an Australian school or tertiary education institution
- An accountant who is a full member of the Chartered Accountants Australia and New Zealand, CPA Australia, the Institute of Public Accountants or the Association of Taxation and Management Accountants
- · An Australian Consulate or Diplomatic Officer
- · A registered migration agent
- An officer or authorised representative of an Australian Financial Services Licence holder with a minimum of 2 years continuous service with one or more licensees
- · A financial adviser or financial planner
- A person in a country other than Australia who is authorised by local law to administer oaths or affirmations or to authenticate documents (please list the local law providing this authority when certifying the document)

IMPORTANT: Please ensure that you have either

- · enclosed certified copies of your identity documents OR
- · agreed that your financial adviser will complete the 'Record of verification procedure' below.

Record of verification procedure (Financial adviser use only) This section is to be used by financial advisers when a record of verification is provided, rather than certified copies of identity documentation. **ID** document details **Document 1 Document 2** verified from original original certified copy certified copy document name/type document issuer issue date expiry date document number sighted accredited English translation N/A sighted N/A By completing and signing this record of verification procedure I declare that: • an identity verification procedure has been completed in accordance with the AML/CTF rules, in the capacity of an AFSL holder or their authorised representative and · the information provided in relation to the residency status for tax purposes is reasonable considering the identity documentation provided. AFS licensee AFSL number representative/ employee name phone number date verification signature completed