

Wealth Creation Application Home Ownership/Reduction of Mortgage – to be completed by Assignee

This application is to be completed by an Applicant on the Register of Yinhawangka Beneficiaries who is listed on the Mortgage of the Property.

1. APPLICANT INFORMATION

Application Date:	Date of Birth:	
Full Name:	Suffix: <input type="checkbox"/> Junior <input type="checkbox"/> Senior	
Street Address:		
City / Suburb:	State:	Postcode:
Email:	Phone:	
<input type="checkbox"/> Please tick if the phone number provided is a new number and you would like us to update your contact details		

2. APPLICATION DETAILS

This is an application for a wealth creation purpose to facilitate the receipt of wealth creation benefits from one or more individual Beneficiaries; as listed in Item 3.

Total Funds Assigned	<i>Max \$20,000 per beneficiary</i>
-----------------------------	-------------------------------------

3. ASSIGNOR DETAILS

Below are the names of those Yinhawangka beneficiaries who are assigning their benefit from the Wealth Creation Policy to me:

Assignor 1		
Full Name	DOB	Suffix: <input type="checkbox"/> Junior <input type="checkbox"/> Senior
Address:		
Phone:		
Assignor 2		
Full Name	DOB	Suffix: <input type="checkbox"/> Junior <input type="checkbox"/> Senior
Address:		
Phone:		
Assignor 3		
Full Name	DOB	Suffix: <input type="checkbox"/> Junior <input type="checkbox"/> Senior
Address:		
Phone:		
Assignor 4		
Full Name	DOB	Suffix: <input type="checkbox"/> Junior <input type="checkbox"/> Senior
Address:		
Phone:		

4. PROPERTY DETAILS

Property Address:	
Name of Assignor as listed on Certificate of Title/Offer and Acceptance	
Name of other Purchaser/Owner, if any	Beneficiary: Yes/ No
Name of other Purchaser/Owner, if any	Beneficiary: Yes/ No
Name of other Purchaser/Owner, if any	Beneficiary: Yes/ No
Ownership Type:	<input type="checkbox"/> Tenants in Common <input type="checkbox"/> Joint Tenants

5. PAYMENT CONDITIONS

Pursuant to cl 6.14 of the <i>Yinhawangka Direct Benefits Trust</i> the following Payment Conditions must be met in order to release distributions to Beneficiaries	<input type="checkbox"/> For Purchase NB: payment will be made to the Settlement Agent acting for the Assignee. <input type="checkbox"/> For reduction of mortgage: NB: payment will be made to the lender.
---	--

6. SUPPORTING DOCUMENTATION – THE FOLLOWING DOCUMENTATION MUST BE PROVIDED:

PURCHASE	<input type="checkbox"/> Documentation confirming finance approval; for balance of the purchase price of the property;
MORTGAGE	<input type="checkbox"/> Offer and Acceptance for the purchase of the property; <input type="checkbox"/> Bank account details of nominated home loan account and mortgage account statement; dated within 1 month of proposed distribution <input type="checkbox"/> Settlement Agent contact details <input type="checkbox"/> Bank (Lender) contact details.

I understand that by signing this application form I am undertaking to use the benefits assigned to me by the assignors identified in Item 3 above, for a wealth creation purpose in the form of a purchase of a property and/or a reduction in my mortgage over the property identified in Item 4 above.

I am not eligible for benefits from any other funding source in relation to this account (e.g. another Trust or a Government agency).

Applicant Signature: **Date:** / /

Please send completed forms and supporting documents to Mutual Trust by:

Fax: (08) 9230 7701 **Email:** perthadmin@mutualtrust.com.au **Mail:** Mutual Trust, PO Box 122, NEDLANDS WA 6909
 If you have any queries, please contact us on (08) 9230 7700