

Wealth Creation Application Rental Assistance – to be completed by Assignee

This application is to be completed by an Applicant on the Register of Yinhawangka Beneficiaries who is listed as a Tenant of the Property, identified in Item 4.

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: | |

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: | Email Address: | |

Assignor 2

| | | |
|-----------|----------------|---|
| Full Name | DOB | Suffix: <input type="checkbox"/> Junior <input type="checkbox"/> Senior |
| Address: | | |
| Phone: | Email Address: | |

Assignor 3

| | | |
|-----------|----------------|---|
| Full Name | DOB | Suffix: <input type="checkbox"/> Junior <input type="checkbox"/> Senior |
| Address: | | |
| Phone: | Email Address: | |

Assignor 4

| | | |
|-----------|----------------|---|
| Full Name | DOB | Suffix: <input type="checkbox"/> Junior <input type="checkbox"/> Senior |
| Address: | | |
| Phone: | Email Address: | |

4. PROPERTY DETAILS
Property Address:
**Name of Assignor as listed on
Tenancy Agreement**
Name of other Tenant, if any
Beneficiary: Yes No

5. PAYMENT CONDITIONS

 Pursuant to cl 6.14 of the *Yinhawangka Direct Benefits Trust* the following Payment Conditions must be met in order to release distributions to Beneficiaries

- **For Rental Payments** - payment will be made to the Letting Agent / Property Manager / Real Estate Agent

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

- Current Tenancy Agreement
- Payment details of the Letting Agent / Property Manager / Real Estate Agent

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 rent payments for a property as 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