



Northern Territory Treasury Corporation
ABN 95 073 863 098

Address all correspondence to:
Territory Bonds
PO Box 3722
Rhodes NSW 2138 Australia
Telephone (free call within Australia): +61 1800 111 441
Email: territorybonds@linkmarketservices.com.au
Website: www.linkmarketservices.com.au

Full Name(s) of Registered Holding

Account Designation

Registered Address

 Postcode

Investor Number

CHANGE OF DETAILS

Original form **MUST** be received. Scanned, faxed or photocopied forms will not be accepted.
Please use a black pen, print in CAPITAL letters and mark boxes with an X as required.

A DO YOU WANT THIS CHANGE OF INSTRUCTIONS TO APPLY TO ALL OF YOUR BOND HOLDINGS?

Yes No If no, then please list the holding/s you want this change of instructions to apply to.

If Yes or No is not selected then the instructions on the form will be applied to all Bond holdings held under the Investor Number supplied.

B BANK ACCOUNT DETAILS (for all INTEREST and PRINCIPAL payments)

You **MUST** provide an originally certified copy of the bank statement for the nominated bank account.

What is an original certified copy?

An original certified copy is a copy of the original document certified to be a true and correct copy of the original by an authorised person who can witness a Statutory Declaration such as a Justice of the Peace, Chartered Accountant, Police officer etc. A full list of persons who can certify documents can be found at www.ag.gov.au/statdec

Due to the risks associated with payments to third parties, third party payment instructions will not be accepted.

Name in which account is held (eg JOHN JAMES SMITH)

BSB number (eg 063000)

Account Number

Name of branch or suburb or town

Name of Australian bank or financial institution

C TAX FILE NUMBER (TFN)

Investor may quote their TFN or ABN for this investment. Whilst there is no obligation to provide either a TFN or ABN, where it is not quoted we are required to deduct withholding tax at the highest marginal tax rate.

Bondholder 1 Name

Tax File Number

Company

Bondholder 2 Name

Tax File Number

Partnership

Bondholder 3 Name

Tax File Number

Trust Account

Bondholder 4 Name

Tax File Number

Super Fund

D REGISTERED ADDRESS

Care of (c/-)/Property name/Building name (if applicable)

Unit Number/Level

Street Number

Street Name

Suburb/Town

State

Post Code

Country

E CORRESPONDENCE - ONLY COMPLETE IF DIFFERENT TO REGISTERED ADDRESS

Address Line 1 (PO Box/RMB/Locked Bag if applicable)

Address Line 2

Address Line 3

Suburb/Town

State

Post Code

Country

F CONTACT DETAILS

Telephone Number

Contact Name

Email Address

G SIGNATORY REQUIREMENTS

1. These instructions replace any previous instructions.
2. **Original form must be received by the Registry at PO Box 3722, Rhodes NSW 2138. Scanned, faxed or photocopied forms will not be accepted.**
3. If you would like these changes to take effect before your next payment, please make sure we receive this form at least 14 working days before the payment date.
4. You may be contacted by a Registry Representative via phone or email to verify any changes to your investment details.

Bondholder 1

Sole Director and Sole Company Secretary/
Director (delete one)

Bondholder 2

Director/Company Secretary(delete one)

The Common Seal of the
company was hereunto affixed
in accordance with its Articles of
Association in the presence of:

Bondholder 3

Bondholder 4

Date

Signing Requirements**Individual/Joint Holders** – all stockholders must sign.**Power of Attorney** – should this document be signed under Power of Attorney, the grantee of such power declares that no notice of revocation thereof, by death of the grantor or otherwise, has been received and that the Power has been/will be forwarded to the Registrar for noting. If not already noted by the registry, original certified copies are required.**Deceased Estate** – all executors/administrators must sign. If not already noted by the registry, send originally certified copy of probate or letters of administration to the Registry.**Company** – application must be signed under Common Seal, Power of Attorney or 2 directors, a director or company secretary or, in the case of a company with sole director who is also the sole company secretary. Positions must be stated.