



REPLACEMENT CERTIFICATE REQUEST - AUSTRALIAN

Statutory Declaration and Statement Pursuant to section 1070D of the Corporation Act 2001

To _____
(Insert name of Company in which the Investment is held)
(PLEASE USE BLOCK LETTERS)

I/We _____
(See reverse for instructions)

of _____

Hereby make application for the issue of a duplicate certificate in the name of the undermentioned holder as specified below:

In support of this Application I/We hereby state that:

1. The certificate(s) has/have been:
 - (a) lost, and all proper searches have been made for it/them without success; or
 - (b) destroyed.
2. The certificate(s) has/have not been pledged, sold or otherwise disposed of.

I/We undertake that if the certificate(s) is/are ever found or received by me/us such certificate(s) will immediately be returned to the Company for cancellation.

Full Name(s) & Current Address		Full Name(s) & Previous Address (if applicable)
Tel (work)	(home)	

Certificate Number	Number of Units	Class

In consideration of the Company issuing a new certificate to replace the said lost certificate(s) I/we hereby covenant to indemnify and forever keep indemnified the Company and its Agents, from and against all losses in respect thereof and all claims, actions, proceedings, demands, costs and expenses whatsoever which may be made or brought against it by reason of compliance with this request.

To be Completed by Witness(es)

Signature of Securityholder(s)

(All joint holders must sign)

✕ -----
Signature(s) Date

✕ -----
Signature(s) Date

✕ -----
Name(s)

✕ -----
Signature(s) Date

✕ -----
Address(es)

✕ -----
Signature(s) Date

Witness(es) to signature(s) who certifies that the person(s) who has/have signed this statement is/are known to him/her and has/have signed with his/her normal signature(s) in his/her presence.

Note: If signed under Power of Attorney, a Certified Copy of the relevant Power of Attorney document must be exhibited to the Registry. The Attorney declares that he/she has had no notice of revocation of the Power of Attorney.

Where this form is completed on behalf of a COMPANY, the indemnity on the reverse of this form must also be completed.

