

## OPTIONS ACCOUNT application form

Please use this form when you wish to:

- add options trading to your existing BOQ Trading Account

In order to process your application we will need:

- your completed application form

**IMPORTANT**

If the account is to be opened in a Company Name, please supply the Director(s) personal information in Sections A & B.

If the account is a Trust Account, please supply the Trustee(s) personal information in Sections A & B.

In order to open your Options Account, you will need to be CHESS Sponsored with CMC Markets Stockbroking, and you will need to open a Money Market Deposit Account (MMDA).

If you need to add these features to your account, please complete a CHESS Sponsorship Agreement Form, and/or a MMDA.

Thank you for choosing BOQ Trading.

If you require assistance when completing this form, please contact our Client Services team on 1800 748 977.

Please mail your completed account form to the address below.

Current Account (if applicable)

BOQ Trading Account Number:

Section A – Account Holder1 / Director 1 / Trustee 1

NB All fields are mandatory.

Mr  Mrs  Miss  Ms  Dr Other: \_\_\_\_\_

Surname \_\_\_\_\_ Given Name(s) \_\_\_\_\_

Residential Address

(PO Box not allowed)

Suburb/Town \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Postal Address

Same as above

Suburb/Town \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Contact Numbers

Work \_\_\_\_\_ Home \_\_\_\_\_

Mobile \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

To comply with the ASIC Market Integrity Rules the first email address must be that of the account holder.

Existing BOQ CAN (if applicable) \_\_\_\_\_

NB If this account has multiple Trustees/Directors, trade confirmations will be sent to the postal address for Account Holder 1.

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_

If this account has an individual Account Holder/Director/Trustee proceed to SECTION C >  
If this account has multiple Account Holders/Directors/Trustees proceed to SECTION B >

Section B – Account Holder 2 / Director 2 / Trustee 2

NB All fields are mandatory.

Mr  Mrs  Miss  Ms  Dr Other: \_\_\_\_\_

Surname \_\_\_\_\_ Given Name(s) \_\_\_\_\_

Residential Address

(PO Box not allowed)

Suburb/Town \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Postal Address

Same as above

Suburb/Town \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Contact Numbers

Work \_\_\_\_\_ Home \_\_\_\_\_

Mobile \_\_\_\_\_ Fax \_\_\_\_\_

Email \_\_\_\_\_

To comply with the ASIC Market Integrity Rules the first email address must be that of the account holder.

Existing BOQ CAN (if applicable) \_\_\_\_\_

NB If this account has multiple Trustees/Directors, trade confirmations will be sent to the postal address for Account Holder 1.

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Proceed to SECTION C >

### Section C – Margin Lender

NB This section is applicable for all Margin Lending Linked Accounts.  
Please supply the details of your Account with your Margin Lender.

Name of Margin Lender: \_\_\_\_\_

Account Number: \_\_\_\_\_  
(with Margin Lender)

Proceed to SECTION D >

### Section D – Company Account

NB This section is applicable for Company Accounts and Trust Accounts where a Company is acting as Trustee.

Please ensure the Director(s) details are supplied in Sections A and B.

Company Name \_\_\_\_\_

Company Address \_\_\_\_\_

Suburb/Town \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Your ACN is required to perform an ASIC check on the company to verify the Company Name and the Directors.

ACN --

If this account is not a Trust Account proceed to SECTION F >  
If this account is a Trust Account proceed to SECTION E >

### Section E – Account Designation

NB This section is applicable for Trust Accounts. Please nominate the name of the Trust.

If you are opening a Superannuation fund account, you would nominate the name of the superannuation fund here.  
For example 'WEST SUPER FUND A/C':

If you are opening the account for a minor, you nominate the name of the minor in this section.  
For example 'EDGAR WEST A/C':

If you are opening the account for any other registered Trust, please nominate the name of that Trust in this section.  
For example 'WEST FAMILY A/C':

Please note that CHESS regulations state that the word 'Trust' is not included in the Designation.

The designation must not be greater than 24 characters and must end in 'A/C' (Account).  
If necessary, you may use abbreviations.

<  A/C >

Proceed to SECTION F >

## Section F – Client Agreement & Declaration

NB This Section is mandatory for all account holders.

Before you complete this part of the Application Form, ensure you have received and read the Exchange Traded Options Product Disclosure Statement (PDS) issued by CMC Markets Stockbroking and the ASX explanatory booklet, 'Understanding Options Trading'. The PDS can be accessed via our website [boq.com.au](http://boq.com.au) and the ASX explanatory booklet 'Understanding Options Trading' can be accessed at [asx.com.au](http://asx.com.au), or contact us and we will send them to you.

By signing below you confirm you have received, read and understood the CMC Markets Stockbroking Exchange Traded Options PDS, the ASX's explanatory booklet 'Understanding Options Trading', the CMC Markets Stockbroking Financial Services Guide and the Bank of Queensland Financial Services Guide. You also agree to be bound by Parts A, D and any other relevant Parts of the BOQ Trading Terms and Conditions.

	Account Holder 1	Account Holder 2
Client Signature(s)	_____	_____
Name(s) (printed)	_____	_____
	Date ____ / ____ / 20 ____	Date ____ / ____ / 20 ____

NB All Account Holders must complete the 'Registered Holder Collateral Cover Authorisation' which appears over the page.

How to complete the 'Registered Holder Collateral Cover Authorisation':

- The name of the option account holder needs to be filled in on the first line of the form.
- The second line of the form refers to name of the shareholder whose shares are being lodged. In most cases the name on this line will be the same as the name on the first line. It would only be different if a third party's shares are being lodged as collateral for the account.
- The Holder Identification Number (HIN) to be used is that of the shareholder(s) on line two of the form.
- The form needs to be signed by the shareholder(s) whose name(s) appear on line two of the form.
- A witness MUST sign the form for the form to be valid.

If you do not understand the form, please contact our Client Services Team on 1800 748 977.

Proceed to Authorisation overleaf >

## REGISTERED HOLDER COLLATERAL COVER AUTHORISATION (original required)

Client Account Name this Authorisation covers: \_\_\_\_\_

1. We/I, \_\_\_\_\_ ('the Registered Holder'),

Holder Identification Number (Leave blank if unknown): \_\_\_\_\_

authorise my/our Controlling Participant, to reserve (or withdraw) Financial Products (the 'Collateral') registered in the name of the Registered Holder in the ASX Clear Pty Limited, ABN 48 001 314 503 ('ASX Clear') Subposition as Collateral Cover for obligations in respect of Options Market Contracts registered in the Client Accounts nominated above with CMC Markets Stockbroking Limited.

2. The Registered Holder acknowledges that ASX Clear may, in its absolute discretion, decline to accept in relation to all or any particular Client Account is nominated above for the purposes of accepting paperless lodgements.
3. The Registered Holder acknowledges that on behalf of the Registered Holder, the Controlling Participant will reserve (or withdraw) Collateral in the ASX Clear Subposition by sending the appropriate Collateral lodgement message so that the Collateral lodged comes under the control of ASX Clear, or Collateral withdrawn leaves the control of ASX Clear, in accordance with the ASX Clear Operating Rules and Procedures (as amended from time to time).
4. In registering Collateral in the ASX Clear Subposition, the Registered Holder acknowledges that the Collateral will be subject to a fixed charge (the 'Charge') in favour of ASX Clear from the time they are reserved to the ASX Clear Subposition in the manner referred to above, and will remain subject to the Charge until ASX Clear permits it to be withdrawn from the ASX Clear Subposition.
5. The Registered Holder acknowledges that the Charge secures all amounts and obligations owing by the ASX Clear Participant to ASX Clear in connection with the Client Accounts nominated above opened by the ASX Clear Participant in accordance with the ASX Clear Operating Rules and Procedures (as amended from time to time).
6. The Registered Holder acknowledges that the Registered Holder has read and understood the ASX Clear Operating Rules and the ASX Settlement Operating Rules, in so far as those rules relate to the Collateral and the Charge, including:
  - (a) ASX Clear's power to deal with the Collateral on default by the ASX Clear Controlling Participant in respect of the Client Accounts nominated above; and
  - (b) in particular, ASX Clear's power of sale in relation to the Collateral without any notice to the Registered Holder.
7. The Registered Holder warrants that unless ASX Clear otherwise agrees in writing, the Collateral is not and may not be subject to any other security interest, other than a security interest provided to a margin lender under a deed of priority, entered into between ASX Clear and the margin lender, which provides that ASX Clear's Charge has priority over the margin lender's security interest ('the Deed of Priority') or a security interest as permitted under the ASX Clear Operating Rules or the ASX Settlement Operating Rules.
8. If the Registered Holder's Controlling Participant named in this Authorisation is a margin lender the Registered Holder warrants that they have signed an acknowledgement regarding the Deed of Priority as set out in Schedule 2 or Schedule 3, as applicable, to the Deed of Priority.
9. If the ASX Clear Participant is unable to insert the Account Numbers and/or HIN at the time the Register Holder signs this form the Registered Holder irrevocably authorises the ASX Clear Participant to insert the Account Numbers and/or HIN on this agreement and agrees the ASX Clear Participant will insert the Account Numbers and/or HIN on the Registered Holder's behalf, prior to lodging this Authorisation with ASX Clear. The ASX Clear Participant agrees that it will notify the Registered Holder of the Account Numbers and/or HIN in writing as soon as reasonably possible.
10. Defined terms have the same meaning as defined in the ASX Clear Operating Rules or the ASX Settlement Operating Rules and Procedures (as amended from time to time).

**Signed by the Registered Holder(s): \***

Registered Holder 1:	Registered Holder 2:	Registered Holder 3:	Witnessed by:
Signature(s) _____ Name(s) (printed) _____ Date(s) ____ / ____ / 20	_____ _____ ____ / ____ / 20	_____ _____ ____ / ____ / 20	The witness must not be the registered holder(s) and/or Power of Attorney nor have any relations.  _____ ____ / ____ / 20

\* If a corporation, must be signed in accordance with the Corporations Act, or if signed under power of attorney, a copy of the power of attorney must also be attached to this Authorisation.