

# IconiQ

## Power of Attorney form

### Instructions

Use this form to assign a Power of Attorney (POA) to your account. You should read the relevant Disclosure Document(s) before completing this form.

### How to return this form

Provide to your Adviser: Provide this completed form to your Financial Adviser to upload on your behalf, to your Document Library via the online portal.

If required, you may post this form to:

GPO Box 1657  
Melbourne VIC 3001

### Documents required

- A certified copy of the POA documentation.
- A copy of photographic identification for the Attorney showing their signature (Australian State/Territory driver's licence, Australian passport or card issued under a law of a State or Territory for the purpose of providing a person's age which contains a photograph of the person).

# Section 1

## Attorney details

Title

Dr  Mr  Mrs  Ms  Miss  Other

Date of birth

First name

Surname

Gender  Male  Female  X  I'd rather not say

Country of birth

# Section 2

## Attorney contact information

### Primary residential address

Street number and name

Suburb

State

Postcode

Country

### Postal address (if different from home address)

Street number and name

Suburb

State

Postcode

Country

Email Address

Mobile

Home phone (optional)

Business phone (optional)

Preferred contact method  Email  Mobile  Phone (Home)  Phone (Business)

## Section 3

### Regulatory check information

Primary country of citizenship

Australia  Other

Primary country of tax residency

Australia  Other

## Section 4

### Your details and Portfolio information

Your name

Date of birth

D	D	M	M	Y	Y	Y	Y
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### Portfolio number(s) and name(s)

Portfolio number (Account number eg. IQ1234567)

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

Portfolio name

<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>
<input type="text"/>

Account access level

Read and write  Read only

## Section 5

### Your Privacy

When you provide instructions by completing this form, personal information about you and your attorney is being collected. If you hold an IconiQ Investment and/or IconiQ Super Wrap portfolio, information about how the Operator and/or Trustee collects, uses and discloses your and your attorney's personal information is set out in the Operator's Privacy Policy available at [www.iconiqwrap.com.au](http://www.iconiqwrap.com.au) and the Trustee's Privacy Statement at [www.eqt.com.au](http://www.eqt.com.au).

### Declaration and signature

By signing below:

- I confirm that the details on this form are true and correct;
- I have read and understood the relevant Disclosure Document(s);
- I understand that the information provided in this form will be provided to third party providers for the purposes of verifying my and my attorney's identity;
- I have obtained consent from my attorney to provide their personal details in relation to this form;
- I confirm the Power of Attorney referred to in this form (POA) is active and has not been withdrawn;
- I understand the POA assigned to my account will stay active until the expiration date or it is revoked.

Full name

Signature

Date

D	D	M	M	Y	Y	Y	Y
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IconiQ Investment issued by the Operator:

Ventura Investment Management Ltd  
ABN 49 092 375 258 AFSL 253045

IconiQ Super Wrap issued by the Trustee of WRAP Super:

Equity Trustees Superannuation Limited  
ABN 50 055 641 757 AFS Licence No 229757 RSE Licence No L0001458

Ventura Investment Management Ltd is also the Promoter of IconiQ Super Wrap and a wholly owned subsidiary of Centrepont Alliance Limited ABN 72 052 507 507.