

Change of Details Form

Please complete the relevant section/s & sign on page 2 of this form.

Investor ID

1 Change of Bank Account

Current Bank Account Details

BANK	BRANCH	BSB
<input type="text"/>	<input type="text"/>	<input type="text"/>
ACCOUNT NAME	ACCOUNT NUMBER	
<input type="text"/>	<input type="text"/>	

New Bank Account Details

BANK	BRANCH	BSB
<input type="text"/>	<input type="text"/>	<input type="text"/>
ACCOUNT NAME	ACCOUNT NUMBER	
<input type="text"/>	<input type="text"/>	

2 Change of Contact Details

Current Contact Details

ADDRESS			
<input type="text"/>			
CITY/SUBURB/TOWN	STATE	POSTCODE	COUNTRY
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
WORK PHONE	HOME PHONE	FAX NUMBER	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
MOBILE	EMAIL		
<input type="text"/>	<input type="text"/>		

New Contact Details

ADDRESS			
<input type="text"/>			
CITY/SUBURB/TOWN	STATE	POSTCODE	COUNTRY
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
WORK PHONE	HOME PHONE	FAX NUMBER	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
MOBILE	EMAIL		
<input type="text"/>	<input type="text"/>		

3 Change of Name

FULL FORMER NAME
<input type="text"/>
FULL NEW NAME
<input type="text"/>

A certified copy of your marriage certificate or deed poll must be accompanied as evidence.

4 Tax File Number/ABN

TAX FILE NUMBER	TAX FILE NUMBER	TAX FILE NUMBER
<input type="text"/>	<input type="text"/>	<input type="text"/>
ABN		
<input type="text"/>		

5 Transfer of Units/Ownership

If you wish to transfer your units with Viento Property Ltd or change ownership please contact our Investor Relations Manager on 1300 555 505 or download the transfer form from our website www.vientogroup.com.

6 Viento Diversified Property Fund Distribution Reinvestment

- I wish to reinvest my Viento Diversified Property Fund monthly distribution.
- I wish to cancel the reinvestment of my Viento Diversified Property Fund monthly distribution.

7 Viento Diversified Property Fund Regular Investment Plan

Request and authority to debit the below account to pay Sandhurst Trustees Ltd ACF Viento Diversified Property Fund (APCA User ID: 265753)

Request and authorise **Sandhurst Trustees Ltd ACF Viento Diversified Property Fund** to arrange through its own financial institution for any amount **Sandhurst Trustees Ltd ACF Viento Diversified Property Fund** may debit or charge you to be debited through the bulk electronic clearing system from an account held at the financial institution identified below, and paid to the debit user subject to the terms and conditions of the Direct Debit Request Service Agreement.

- I wish to commence a Regular Investment Plan on the 15th day of each month from the account detailed below.
- I wish to change the current bank account details recorded for my Regular Investment Plan to the account detailed below.
- I wish to cancel my Regular Investment Plan.

Please specify an Australian or New Zealand Financial Institution Account to be debited.

BANK	BRANCH	BSB
<input type="text"/>	<input type="text"/>	<input type="text"/>
ACCOUNT NAME	ACCOUNT NUMBER	
<input type="text"/>	<input type="text"/>	

My regular deposit will be \$ per month, commencing on / /

ACKNOWLEDGEMENT: by signing this Direct Debit Request you acknowledge having read and understood the terms and conditions governing the debit arrangements between you and **Sandhurst Trustees Ltd ACF Viento Diversified Property Fund** as set out in this request and in your Direct Debit Request Service Agreement.

8 Change of Adviser Details

Current Adviser Details

NAME OF ADVISER	NAME OF DEALER GROUP		
<input type="text"/>	<input type="text"/>		
ADDRESS			
<input type="text"/>			
CITY/SUBURB/TOWN	STATE	POSTCODE	COUNTRY
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

New Adviser Details

NAME OF ADVISER	NAME OF DEALER GROUP		
<input type="text"/>	<input type="text"/>		
ADDRESS			
<input type="text"/>			
CITY/SUBURB/TOWN	STATE	POSTCODE	COUNTRY
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
OFFICE NUMBER	DIRECT LINE	FAX NUMBER	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
MOBILE	EMAIL		
<input type="text"/>	<input type="text"/>		

9 Reports and Information

- I would like to receive full printed versions of the financial report, directors report and auditors report. These reports are available on our website www.vientogroup.com
- I would like to receive information about other products or services from Viento Group.

10 Signatures

INVESTOR SIGNATURE	DATE	INVESTOR SIGNATURE	DATE
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
INVESTOR SIGNATURE	DATE	INVESTOR SIGNATURE	DATE
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

If signing for a company, sign and print full name and capacity (ie Director).

FULL NAME	FULL NAME
<input type="text"/>	<input type="text"/>
CAPACITY	CAPACITY
<input type="text"/>	<input type="text"/>