GDA Diversified Property Trust ARSN 108 321 651

Application Form

This Application Form relates to the application for units in the GDA Diversified Property Trust (ARSN 108 321 651) under the PDS dated 25 July 2025 issued by GDA Securities Ltd (ABN 58 105 612 600, AFSL 233013). Unless otherwise defined, capitalized terms in this Application Form have the meaning given to them in this PDS. You should read the PDS dated 25 July 2025 in full and consider the Trust's TMD and most recent RG46 Benchmarks and Disclosure Principles before completing this application form.

Complete this form using BLACK or BLUE INK and write clearly within the boxes in CAPITAL LETTERS. Mark appropriate answer boxes with a tick \checkmark .

PART 1: INVESTMENT AMOUNT

Investment Amount

Minimum application is \$10,000 and thereafter multiples of \$1,000.

Regular Investment Plan

If you wish to participate in the Regular Investment Plan, complete the details in this section and additional investments can be debited from your bank account and added to your investment in the Trust on a regular basis. The minimum amount for regular investment is \$100 per month.

Investment Amount:

•

0 0 0

0 0

Regular Investment Amount:

\$,

0 0

I/We wish to participate in the Regular Investment Plan and I/we agree to be bound by the service agreement terms and conditions outlined in the Direct Debit Request Service Agreement. Direct Debits are processed on the 1st of each month. I/we wish our regular investment to commence on:

0 1 / /

Complete the Direct Debit Request Form. If you do not complete the Direct Debit Request form, your Regular Investment Plan investment will not be processed.

Source of Investment Funds

Indicate the source of funds being invested (select the ONE most relevant option).

Gainful Employment

Sale of Assets (e.g. shares, property)

Business Income

Inheritance / Gift

Savings

Superannuation Savings

Investment Income

Other

Please specify:

Purpose of this Investment

Indicate the purpose of this investment (select the ONE most relevant option).

Savings

Growth

Income

Retirement

PART 2: APPLICATION TYPE

Select only ONE of the following categories.

Are you a new Investor (or investing in the Trust under a different name)? Got to Part 3

Are you an existing Investor? Complete details below and got to Part 10.

Investor Number:

Investment Name (example "John Citizen" or "John Citizen ATF John Citizen Super Fund"):

PART 3: INVESTOR IDENTIFICATION

Select only ONE of the following categories

What type of investor are you?

Individual / Joint holding Go to Part 3.1

Australian Company Go to Part 3.2

Australian Regulated Trusts (including Self-Managed Superannuation Funds) Go to Part 3.3

Unregulated Australian Trusts and Foreign Trusts Go to Part 3.4

Other Contact us for further information

3.1 Individual / Joint holding

Individual 1	
Title:	
Given Name(s):	Surname:
Date of birth (dd/mm/yyyy):	Occupation:
/ /	
Residential Address (Post Office Box not acceptable) Street:	City:
	,
State:	Country:
Postcode:	
Are you an Australian resident for tax purposes?	
Yes Provide Tax File Number or exemption to ensur	re tax is not deducted from distribution
No Complete Part 4.1	
Are you a Politically Exposed Person (as defined in Part 12)?	
Yes Provide details on how you meet the definition	of Politically Exposed Person
, , , , , , , , , , , , , , , , , , ,	
No	

Individual 2	
Title:	
Given Name(s):	Surname:
Date of birth (dd/mm/yyyy):	Occupation:
Residential Address (Post Office Box not acceptable) Street:	City:
State:	Country:
Postcode:	
Are you an Australian resident for tax purposes?	
Yes Provide Tax File Number or exemption to ensur	re tax is not deducted from distribution
No Complete Part 4.1	
Are you a Politically Exposed Person (as defined in Part 12)?	
Yes Provide details on how you meet the definition	of Politically Exposed Person
No	
If there are more individuals, provide details on a separate sh	eet and tick this box.
Complete an Identification Form for each Individual.	

If an Individual is NOT an Australian resident for tax purposes go to Part 4.1, otherwise go to Part 5.

3.2 Australian Company 3.2.1 General information Name (as registered by ASIC): ACN: Registered office address (Post Office Box not acceptable) Street: City: Country: State: Postcode: Principal place of business (if different) Street: City: State: Country: Postcode: Provide ABN and/or Tax File Number to ensure tax is not deducted from distributions: ABN: TFN: or TFN exception: 3.2.2 Type of company Select only ONE of the following categories Public Go to Part 3.2.3 Proprietary Go to Part 3.2.4 3.2.3 Regulatory / Listing details If the company is regulated or listed, select the relevant category and provide the information requested Regulated company (licensed by an Australian Commonwealth, State or Territory statutory regulator) Regulator Name: Licence details (e.g. AFSL, ACL, RSE):

Australian listed company

Name of market/exchange:

Majority-owned subsidiary of an Australian listed company

Australian listed company name:	Name of market/exchange:
f company is a corporate trustees go to Part	4.3 otherwise, go to Part 4.2.
3.2.4 Directors	
To be completed for proprietary companies onl	y, not required for public companies as per Part 3.2.2.
How many directors are there?	
Provide full name of each director below:	
. Given Name(s):	Surname:
2. Given Name(s):	Surname:
3. Given Name(s):	Surname:
4. Given Name(s):	Surname:
5. Given Name(s):	Surname:

If there are more directors, provide details on a separate sheet and tick this box.

3.2.5 Beneficial Owners

To be completed for proprietary companies only, not required for public companies as per Part 3.2.2.

Provide details of ALL individuals who are ultimately Beneficial Owners through one or more share holdings of more than 25% of the company's issued capital (through direct or indirect shareholdings).

Beneficial Owner 1 Title:		
Given Name(s):	Surname:	
Date of birth (dd/mm/yyyy):	Occupation:	
/ / /	оссиранот.	
Residential Address (Post Office Box not acceptable) Street:	City:	
State:	Country:	
State.	Country.	
Postcode:		
Are you a Politically Exposed Person (as defined in Part 12)?		
Yes Provide details on how you meet the definition of	of Politically Exposed Person	
No		

Beneficial Owner 2 Title:	
Given Name(s):	Surname:
Date of birth (dd/mm/yyyy): ///	Occupation:
Residential Address (Post Office Box not acceptable) Street:	City:
State:	Country:
Postcode:	
Are you a Politically Exposed Person (as defined in Part 12)? Yes Provide details on how you meet the definition of Politically Exposed Person	
No	

Beneficial Owner 3 Title:	
Given Name(s):	Surname:
Date of birth (dd/mm/yyyy): / /	Occupation:
Residential Address (Post Office Box not acceptable) Street:	City:
State:	Country:
Postcode:	
Are you a Politically Exposed Person (as defined in Part 12)? Yes Provide details on how you meet the definition of Politically Exposed Person	
No Complete an Identification Form for each Beneficial Owner.	

If company is a corporate trustees go to Part 4.3 otherwise, go to Part 4.2.

3.3 Australian Regulated Trusts (including Self-Managed Superannuation Funds)

3.3.1 General information

Name:	Business Name (if applicable):	
Country where trust established:		
Address (Post Office Box not acceptable) Street:	City:	
State:	Country:	
Postcode:		
Provide ABN and/or Tax File Number to ensure tax is not deducted from distributions: ABN:		
TFN:	or TFN exception:	
Complete an Identification Form for the trust.		

3.3.2 Type of registered trust

Select only ONE of the following categories and provide the information requested

Self-managed superannuation fund

Registered managed investment scheme Provide Australian Registered Scheme Number ("ARSN"):

Unregistered managed investment scheme (a managed investment scheme that is not registered by ASIC, that only has wholesale clients and does not make small scale offerings to which section 1012E of the Corporation Act 2001 applies)

Government superannuation fund Provide name of the legislation establishing the fund:

Other regulated trusts (a trust that is subject to the regulatory oversight of a Commonwealth, State or Territory statutory regulator, e.g. APRA - regulated superannuation fund)

Provide name of regulator (e.g. APRA, ASIC, ATO):

3.3.3 Type of trustee	
Individual Go to Part 3.3.4	
Australian company Go to Part 3.3.5	
3.3.4 Individual Trustee(s)	
Individual Trustee 1	
Title:	
Given Name(s):	Surname:
Date of birth (dd/mm/yyyy):	Occupation:
/ /	
Residential Address (Post Office Box not acceptable)	
Street:	City:
State:	Country:
Postcode:	
Postcode.	
Are you a Politically Exposed Person (as defined in Part 12)?	
Yes Provide details on how you meet the definition of	of Politically Exposed Person
No	

Individual Trustee 2 Title: Given Name(s): Surname: Date of birth (dd/mm/yyyy): Occupation: Residential Address (Post Office Box not acceptable) City: State: Country: Postcode: Are you a Politically Exposed Person (as defined in Part 12)? Yes Provide details on how you meet the definition of Politically Exposed Person No If there are more individuals, provide details on a separate sheet and tick this box.

Go to Part 4.3

Complete an Identification Form for each individual trustee.

3.3.5 Australian company trustee(s)	
3.3.5.1 General information	
Name (as registered by ASIC):	ACN:
Registered office address (Post Office Box not acceptable) Street:	City:
State:	Country:
Postcode:	
If there are more corporate trustees, provide details on a sepa Go to Part 3.2.2	arate sheet and tick this box.
3.4 Unregulated Australian Trusts and Foreign Tr	rusts
3.4.1 General information	
Name:	Business Name (if applicable):
Country where trust established:	
Address (Post Office Box not acceptable) Street:	City:
State:	Country:
Postcode:	

Name of appointer of trust:	
Given Name(s):	Surname:
Date of birth (dd/mm/yyyy):	
/ /	
Residential Address (Post Office Box not acceptable) Street:	City:
State:	Country:
Postcode:	
Complete an Identification Form for the appointer.	
Name of settlor of trust:	
Given Name(s):	Surname:
Unless:	
• the material asset contribution to the trust by the settlor a	at the time the trust is established is less than \$10,000;
or	
the settlor is deceased	
Provide ABN and/or Tax File Number to ensure tax is not dec ABN:	lucted from distributions:
TFN:	or TFN exception:

Complete an Identification Form for the trust.

3.4.2 Type of unregulated trust

Select only ONE of the following categories:

Family trust

Charitable trust

Testamentary trust

Unit trust

Other trust type

Provide description:

3.4.3 Beneficiary details

Do the terms of the trust identify the beneficiaries by reference to membership of a class?

Yes Provide details of the membership class/es (e.g. unit holders, family members of named person, charitable purpose)

No

How many beneficiaries are there?

Provide full name of each beneficiary below:

1. Surname (or Company Name): Given Name(s) (or ACN):

2. Surname (or Company Name): Given Name(s) (or ACN):

3. Surname (or Company Name): Given Name(s) (or ACN):

4. Surname (or Company Name): Given Name(s) (or ACN):

5. Surname (or Company Name): Given Name(s) (or ACN):

If there are more beneficiaries, provide details on a separate sheet and tick this box.

3.4.4 Type of trustee

Select only ONE of the following categories.

Individual Go to Part 3.4.4.1

Australian company Go to Part 3.4.4.2

3.4.4.1 Individual trustee(s) Individual Trustee 1 Title: Given Name(s): Date (dd/mm/yyyy): of birth / / / Residential Address (Post Office Box not acceptable) Street: State: Country: Postcode: Are you a Politically Exposed Person (as defined in Part 12)? Yes Provide details on how you meet the definition of Politically Exposed Person

No

Individual Trustee 2	
Title:	
Given Name(s):	Surname:
Date of birth (dd/mm/yyyy):	Occupation:
/ /	
Decidential Address (Dect Office Day not accomtable)	
Residential Address (Post Office Box not acceptable) Street:	City:
State:	Country:
	•
Postcode:	
Are you a Politically Exposed Person (as defined in Part 12)?	
Yes Provide details on how you meet the definition of Politically Exposed Person	
No	
If there are more individuals, provide details on a separate she	eet and tick this box.

Go to Part 4.3

Complete an Identification Form for each individual trustee.

3.4.4.2 Australian company trustee(s)

3.4.4.2.1 General information		
Name (as registered by ASIC):	ACN:	
Registered office address (Post Office Box not acceptable Street:	City:	
State:	Country:	
Postcode:		
If there are more corporate trustees, provide details on a sep	arate sheet and tick this box.	
Go to Part 3.2.2		
PART 4: TAX INFORMATION		
Collection of tax status in accordance with the United States Foreign Account Tax Compliance Act ("FATCA") and Common Reporting Standard ("CRS").		
4.1 Individuals		
Tax Residency rules differ by country. Whether an individual is on the amount of time a person spends in a country, the local residency can be as a result of citizenship or residency.	s tax resident of a particular country is often (but not always) based ation of a person's residence or place of work. For the US, tax	
	/ each country for the purposes of administering tax laws. This is ecurity Number in the US. If a TIN is not provided, list which one of not providing a TIN.	
Reason A The country of tax residency does not issue TINs to tax residents.		
Reason B The individual has not been issued with a TIN.		
Reason C The country of tax residency does not require	the TIN to be disclosed.	
Individual 1		
Is the individual a tax resident of a country other than Australi	ia?	
Yes - provide their TIN or equivalent below. If a tax recountries below.	esident of more than one other country, list all relevant	
No – go to Part 5.		
Country:		
	If no TIN, list reason A, B, C:	
Country: TII	N: If no TIN, list reason A, B, C:	

TIN:

If no TIN, list reason A, B, C:

If there are more countries, provide details on a separate sheet and tick this box.

Country:

Individual 2

Is the individual a tax resident of a country other than Australia?

Yes - provide their TIN or equivalent below. If a tax resident of more than one other country, list all relevant countries below.

No - go to Part 5.

Country:

TIN:

If no TIN, list reason A, B, C:

Country:

TIN:

If no TIN, list reason A, B, C:

TIN:

If no TIN, list reason A, B, C:

If no TIN, list reason A, B, C:

If there are more countries, provide details on a separate sheet and tick this box.

If there are more individuals, provide details on a separate sheet and tick this box.

Go to Part 5

4.2 Company

4.2.1 Tax status

Select only ONE of the following categories and provide the information requested.

Financial Institution (A custodial or depository institution, an investment entity or a specified insurance company for FATCA/CRS purposes)

Provide the company's Global Intermediary Identification Number ("GIIN"), if applicable:

If the company does not have a GIIN, provide its FATCA status

If the company is a Financial Institution, Part 4 is now complete, proceed to Part 5.

Non-Financial Public Company (Public companies as per Part 3.2.3 that are not Financial Institutions as described above or a company that is an Australian Registered Charity)

If the company is a Public Company, Part 4 is now complete, proceed to Part 5.

An Active Non-Financial Entity ("NFE") (Active NFEs include entities where, during the previous reporting period, less than 50% of their gross income was passive income (e.g. dividends, interests and royalties) and less than 50% of assets held produced passive income. For other types of Active NFEs, refer to Section VIII in the Annexure of the OECD 'Standard for Automatic Exchange of Financial Account Information' at www.oecd.org.) (Proprietary companies as per Part 3.2.2 that are not Financial Institutions as described above)

If the company is an Active NFE, proceed to Part 4.2.3 (Country of Tax Residency).

Other (Entities that are not previously listed - Passive Non-Financial Entities).

Proceed to Part 4.2.2 (Foreign Beneficial Owners).

4.2.2 Foreign beneficial owners (Individuals)

Are any of the company's Beneficial Owners tax residents of countries other than Australia?

Yes - provide the details of these individuals below. For each individual provide their country of tax residency and Tax Identification Number ("TIN") or equivalent below. If a tax resident of more than one country, list all relevant countries below. If a TIN is not provided, list which one of the three reasons specified below (A, B or C) is applicable for not providing a TIN.

No

Reason A The country of tax residency does not issue TINs to tax residents.

Reason B The individual has not been issued with a TIN.

Reason C The country of tax residency does not require the TIN to be disclosed.

Given Name(s):	Surname:
Role (e.g. Managing Director):	Country:
TIN:	If no TIN, list reason A, B, C:
Given Name(s):	Surname:
Role (e.g. Managing Director):	Country:
TIN:	If no TIN, list reason A, B, C:

If there are more Beneficial Owners provide details on a separate sheet and tick this box

Proceed to Part 4.2.3 (Country of Tax Residency).

4.2.3 Country of Tax Residency

Is the Company a tax resident of a country other than Australia?

Yes - provide the Company's country of tax residence and Tax Identification Number ("TIN") or equivalent below. If a tax resident of more than one country, list all relevant countries below. If a TIN is not provided, list which one of the three reasons specified below (A, B or C) is applicable for not providing a TIN.

No - go to Part 5.

Reason A The country of tax residency does not issue TINs to tax residents.

Reason B The individual has not been issued with a TIN.

Reason C The country of tax residency does not require the TIN to be disclosed.

Country:	TIN:	
		If no TIN, list reason A, B, C:
Country:	TIN:	
		If no TIN, list reason A, B, C:
Country:	TIN:	
		If no TIN, list reason A, B, C:

If there are more countries, provide details on a separate sheet and tick this box.

Go to Part 5

4.3 Trusts

4.3.1 Tax status

Regulated super funds (Self-Managed Superannuation Funds, APRA regulated super funds, government super funds or pooled superannuation trusts) are not required to complete Part 4 and can proceed to Part 5.

Select only ONE of the following categories and provide the information requested.

Financial Institution or Trust with a trustee that is a Financial Institution (A custodial or depository institution, an investment entity or a specified insurance company for FATCA/CRS purposes)

Provide the trust or trustee's Global Intermediary Identification Number ("GIIN"), if applicable:

If the trust or trustee is a Financial Institution but does not have a GIIN, provide its FATCA status (select one of the following statuses):

Deemed Compliant Financial Institution

Excepted Financial Institution

Exempt Beneficial Owner

Non Reporting IGA Financial Institution

Nonparticipating Financial Institution

Other (describe the FATCA status):

ANSWER THE QUESTION BELOW FOR ALL FINANCIAL INSTITUTIONS

Is the Financial Institution an Investment Entity located in a Non-Participating CRS Jurisdiction and managed by another Financial Institution?

Yes - Proceed to Part 4.3.2 (Foreign Controlling Persons).

No - Part 4 is now complete, proceed to Part 5.

CRS Participating Jurisdictions are on the OECD website at www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/crs-by-jurisdiction

Australian Registered Charity or Deceased Estate

If the trust is an Australian Registered Charity or Deceased Estate Part 4 is complete, proceed to Part 5.

A Foreign Charity or an Active Non-Financial Entity ("NFE") (Active NFEs include entities where, during the previous reporting period, less than 50% of their gross income was passive income (e.g. dividends, interests and royalties) and less than 50% of assets held produced passive income. For other types of Active NFEs, refer to Section VIII in the Annexure of the OECD 'Standard for Automatic Exchange of Financial Account Information' at www.oecd.org).

If the Trust is a Foreign (non-Australian) Charity or an Active NFE, proceed to Part 4.3.3 (Country of Tax Residency).

Other (Trusts that are not previously listed - Passive Non-Financial Entities).

Proceed to Part 4.3.2 (Foreign Controlling Owners).

4.3.2 Foreign controlling persons (Individuals)

A Controlling Person is any individual who directly or indirectly exercises control over the trust. For a trust, this includes all trustee's, appointors, settlors, protectors or beneficiaries.

For a trustee company this includes any Beneficial Owners controlling more than 25% of the shares in the company or senior managing officials.

Are any of the trust's Controlling Persons tax residents of countries other than Australia?

Yes No

If the trustee is a company, are any of this company's Controlling Persons tax residents of countries other than Australia?

Yes No

If you answered "Yes" to either of the two questions above, provide the details of the Controlling Persons below. For each Controlling Person provide their country of tax residency and Tax Identification Number ("TIN") or equivalent below. If a tax resident of more than one country, list all relevant countries below. If a TIN is not provided, list which one of the three reasons specified below (A, B or C) is applicable for not providing a TIN.

Reason A The country of tax residency does not issue TINs to tax residents.

Reason B The individual has not been issued with a TIN.

Reason C The country of tax residency does not require the TIN to be disclosed.

Given Name(s):	Surname:
Role (e.g. Managing Director):	Country:
TIN:	
	If no TIN, list reason A, B, C:
Given Name(s):	Surname:
Role (e.g. Managing Director):	Country:
TIN:	
	If no TIN, list reason A, B, C:
If there are more controlling persons provide details on a sep	parate sheet and tick this box
Proceed to Part 4.3.3 (Country of Tax Residency).	
4.3.3 Country of Tax Residency	
Is the trust a tax resident of a country other than Australia?	
	d Tax Identification Number ("TIN") or equivalent below. If a tax buntries below. If a TIN is not provided, list which one of the three not providing a TIN.
No - Part 4 is now complete, proceed to Part 5.	
Reason A The country of tax residency does not issue TI	Ns to tax residents.
Reason B The individual has not been issued with a TIN.	
Reason C The country of tax residency does not require	the TIN to be disclosed.
Country:	N:
	If no TIN, list reason A, B, C:
Country: TII	N: If no TIN, list reason A, B, C:
Country: TII	
	If no TIN, list reason A, B, C:

If there are more countries, provide details on a separate sheet and tick this box.

Go to Part 5

PART 5: DISTRIBUTION PAYMENTS

You are required to provide your bank account details for payment of distributions. Distributions will not be paid by cheque. We can only accept Australian bank account details.

This account must be in the investor's name. Payment to a third party is not permitted.

inis account mi	ust be in the investor's name. Paym	ent to a tnird party is not permitted.
Account Name:		
BSB:	Account Number:	Financial Institution:
Distribution R	einvestment Plan	
If you would like	your distribution reinvested as add	litional Units then tick this box
PART 6: APP	LICANT(S) CONTACT DETAIL	LS [MUST NOT BE ADVISER DETAILS]
Enter contact de	etails, including phone numbers in o	case we need to contact you in relation to your application.
Adviser details a	are not acceptable unless your Adv	iser holds a power of attorney, a certified copy of which must be provide
These contact of	details will be used for all administra	ation correspondence.
Address Street:		City:
State:		Country:
Postcode:		
Phone:		Mobile:
Email:		
	er notifications required by the Corp	we all communications, including transaction confirmations, statements, porations Act, by email. From time to time, we may still need to send
Would you like t	to be advised of other offers from G	GDA Securities? Yes No

How did you hear about the Trust?

PART 7: ADDITIONAL QUESTIONS

This section is mandatory for all Investors. The following questions assist us to meet regulatory obligations to assess whether the Trust is being offered to the stated target market.

Are you investing in this Trust on the advice of a licensed financial services provider who has provided investment advice having regard to your personal objectives, financial situation and needs?

Go to Part 8 (ensure Adviser Details are completed in full)

Complete all questions in this section

Q1. What is your primary investment objective in applying to invest in the Trust? Select the ONE most relevant option:

Regular income and potential capital growth (i.e. periodic income distributions with or without the value of the investment increasing over time); or

Capital growth (i.e. an increase in the value of the investment over time); or

Capital guaranteed (i.e. the investment value is shielded from any loss of value over time).

Q2. While the Trust may offer a Limited Three-Monthly Withdrawal Offer liquidity facility, these are not guaranteed and if offered, any withdrawal request you make may be subject to a scale-back depending on demand. Do you accept that the Limited Three-Monthly Withdrawal Offer withdrawal facility is not a withdrawal guarantee?

Yes No

Q3. The Trust will use some debt to acquire assets. Do you accept that because the Trust uses debt (or gearing) any capital gains or losses (which are determined by changes in value of the underlying Properties) will be magnified depending on the level of gearing employed?

Yes No

Q4. Do you accept the capital value of your investment is not guaranteed?

Yes No

Q5. Are you aware that the income paid by this Trust is not guaranteed and may vary over time?

Yes No

Q6. Indicate the percentage your investment in the Trust represents of the assets you have available for investment, excluding your residential home:

Less than 10% 10-25% 25-50%

50-75% more than 75% I prefer not to provide this information

Additional Information

If you have answered "No" to one or more of the above questions or if you are investing more than 25% of your assets available for investment in the Trust then the Trust may not be suitable for you.

Before proceeding with your investment, we recommend you do one or more of the following:

- a. Review the target market determination for the Trust which can be found at www.gdagroup.com.au/property-funds/dpt/documents or by contacting GDA to request a copy.
- b. Review the PDS which can be found at www.gdagroup.com.au/property-funds/dpt or by contacting GDA to request a copy.
- c. Seek advice from your financial adviser or other investment professional.

PART 8: ADVISER DETAILS

If you use a financial adviser and/or your financial adviser is providing us with your identification documents, have them complete and sign this section to confirm they hold a current AFSL and are authorized to deal in or advise on managed investment products.

\$	
	Initial Advice Fee (if applicable) (Max 3.3% incl GST):
AFSL Name:	AFSL Number:
Adviser Phone:	Adviser Email:
ASIC Adviser Number:	Adviser Company (if applicable):
Adviser Given Name(s):	Adviser Surname:

As the financial adviser of the Applicant, by signing on this page, I represent to the Responsible Entity that I:

- have followed the FSC/FPA Industry Guidance Note No. 24 (May 2017 version) or other applicable current guidance issued by the FSC ("FSC Guidance"), and other applicable AML Legislation in submitting the relevant identification documents with this Application Form;
- will make available to the Responsible Entity, on request, original verification and identification records obtained by me in respect of the Applicant, being those records referred to in the FSC Guidance;
- will provide details of the customer identification procedures I adopted in relation to the Applicant;
- have kept a record of the Applicant's identification and verification and will retain these on file for a period of seven years after my relationship with the Applicant has ended;
- will use reasonable efforts to obtain additional information from the Applicant if the Responsible Entity requests me to do so;
- will not knowingly do anything to put the Responsible Entity in breach of AML Legislation; and will notify the Responsible Entity immediately if I become aware of anything that would, or may potentially, put the Responsible Entity in breach of AML Legislation.
- have reviewed the TMD in providing personal financial product advice to the Applicant in relation to their investment in the Trust and further represent that I:
 - have product governance arrangements in place to ensure compliance with my distribution obligations in Part 7.8A of the Corporations Act;
 - will provide to the Responsible Entity the reports specified in the TMD within the timeframes specified in the TMD;
 - will not knowingly do anything to put the Responsible Entity in breach of Part 7.8A of the Corporations Act; and
 - will notify the Responsible Entity immediately if I become aware of anything that would, or may potentially, put the Responsible Entity in breach of Part 7.8A of the Corporations Act.

ecommendations I

, ,	ssional fee for service specified in Part 9 o client in respect of the Trust and not for a	of the Application Form is only for advice and reny other advice or service.
Adviser Name:		Adviser Signature:
Date (dd/mm/yyyy):		
/	/	

PART 9: ADVISER PROFESSIONAL FEE FOR SERVICE DETAILS

If you have negotiated a professional fee for service with your financial adviser, you need to complete and sign this section.

I request that the Responsible Entity deduct a professional fee for service from my Application Amount as set out below. I acknowledge that this fee will be paid to my financial adviser as specified in section 8 of this Application Form and that the balance of my Application Amount will be invested in the Trust.

Upfront professional fee for service

Either a percentage of your Application Amount or a fixed amount up to a maximum of 3.3% (including GST) of your Application Amount:

Percentage %	Amount \$
Applicant Name:	Applicant Signature:
Date (dd/mm/yyyy): / /	
Applicant Name:	Applicant Signature:
Date (dd/mm/yyyy):	
/ /	

PART 10: DECLARATION AND AUTHORISATION

I/we declare that I/we have received, read and understood the PDS and agree to be bound by it and the Constitution (as amended from time to time). I/we acknowledge that we have read and understood the TMD. I/we declare that the offer was received and accepted in Australia and all information in this Application Form is true and correct. I/we indemnify GDA Securities against any liabilities whatsoever arising from acting on any information I/we provide in connection with this application. I/we have legal power to invest in accordance with this application and have complied with all applicable laws in doing so. I/we acknowledge that the Trust is subject to investment and other risks, set out in the PDS, and that neither GDA Securities nor any of its associates, directors, employees or related entities (including its directors and employees) guarantee the Trust's performance, the repayment of capital, any particular rate of return or any distribution. In case of joint applications, the joint applicants agree that unless otherwise indicated on the Application Form, the units will be held as joint tenants and either investor is able to operate the account and bind the other investor for future transactions. If this application is signed under Power of Attorney, the Attorney declares that they have not received notice of revocation of the power. I/we acknowledge that we have read and understood the Privacy section in the PDS. Until I/we inform GDA Securities otherwise, I/ we will be taken to have consented to all uses of our personal information (including marketing) contained under that heading and to our adviser providing further personal information to GDA Securities as required or reasonably deemed necessary by GDA Securities. Any application can be accepted or rejected by GDA Securities. I/we understand that if we fail to provide any information requested or do not agree to any of the possible uses or disclosure of our information as detailed in this PDS, our application may be rejected by GDA Securities and GDA Securities is released and indemnified in respect of any loss or liability arising from its inability to accept an application due to inadequate or incorrect details having been provided. I/we acknowledge that if an electronic copy or printout of the Application Form is introduced as evidence in any judicial proceeding, it will be admissible as any original Application Form record. I/we acknowledge that GDA Securities may deliver and make reports, statements and other communications available in electronic form, such as email or by posting on the Trust's website. I/we agree that GDA Securities may provide details of our investment to the adviser group or adviser nominated by the method and in the format that they direct. I/we authorise GDA Securities to calculate and pay the nominated advice fee, up to 3.3%

Trustee

of the application monies, to the nominated adviser/adviser group from our application monies. I/we understand that the advice fee cannot be refunded once paid. I/we declare the tax information provided is accurate. I/we will promptly notify GDA Securities of any change to the information I/we have previously provided to GDA Securities, including any changes which result in a person or entity controlling, owning or otherwise holding an interest in the Applicant.

If the application is signed by more than one person, w	ho will operate the account:	Any to sign	All to sign
Name:	Signature:		
Date (dd/mm/yyyy): /			
If a company officer or trustee, you MUST specify you	ur title:		
Director	Sole Director and Co	ompany Secretary	
Trustee	Other (please specif	Ty):	
Name:	Signature:		
Date (dd/mm/yyyy): /			
If a company officer or trustee, you MUST specify you	ur title:		
Director	Sole Director and Co	ompany Secretary	

Other (please specify):

PART 11: PAYMENT DETAILS

These details are required so your payment can be matched to your application form.

Indicate which payment method you have used:

Cheque Made payable to: GDA Diversified Property Trust

Electronic Funds Transfer

BSB: 083-253

Account: 84-662-0035

Account Name: GDA Diversified Property Trust

Account Reference: Applicant Name

Direct Debit Complete the Direct Debit Request Form (maximum \$500,000)

PART 12: DEFINITIONS

Beneficial Owner

A beneficial owner:

- of a person who is a reporting entity, means an individual who owns or controls (directly or indirectly) the reporting entity;
- of a person who is a customer of a reporting entity, means an individual who ultimately owns or controls (directly or indirectly) the customer;
- in this definition, control includes control as a result of, or by means of, trusts, agreements, arrangements, understandings and practices, whether or not having legal or equitable force and whether or not based on legal or equitable rights, and includes exercising control through the capacity to determine decisions about financial and operating practices;
- in this definition, owns means ownership (either directly or indirectly) of 25% or more by a person.

Politically Exposed Persons

A Politically Exposed Person ("PEP") is an individual who holds a prominent public position or role in a government body or international organisation, either in Australia or overseas. Immediate family members and/or close associates of these individuals are also considered PEPs. This extends to:

- immediate family members (parents, siblings, spouse/partner, children, spouse/partner of children) and close associates;
- individuals with a prominent public position with significant authority or influence, such as heads of state, government ministers, senior government officials, highranking judges, senior foreign representatives, and senior military officers;
- Australian government agencies or international organisations like the United Nations; and
- Officeholder, senior executive or any other position that has comparable influence in any State enterprise or international organisation.