



VMAPS

DECEASED ESTATE NOTIFICATION FORM

VENTURA MANAGED ACCOUNT PORTFOLIOS

Use this form to provide Ventura with
instructions for a deceased estate.
For use by executors or administrators only

Ventura Managed Account Portfolios
ARSN 601 085 410
Administrator:
Praemium Australia Limited
PO Box 322
Collins Street West
MELBOURNE VIC 8007
General number for enquiries: (03) 8622 1222
Email enquiries: support@praemium.com.au

VENTURA FM

Part 1 - Summary of requirements

FOR COMBINED ACCOUNT BALANCES UP TO \$50,000

- Complete Parts **2-5** of this form; and
- Provide an originally certified copy of the client's Death Certificate and Will.

FOR COMBINED ACCOUNT BALANCES OVER \$50,000

- Complete Parts **2-5** of this form;
- Provide an originally certified copy of the client's Death Certificate and Will; and
- Provide either a **Probate** (in case of a Will) or **Letters of Administration** (when the death is intestate) granted in the State of Victoria. In the instance where the Probate or Letters of Administration have been granted in a state other than Victoria, please complete the Corporations Act 2001 Form in **Part 7**.

NOMINATING A PERSON OR COMPANY TO ACT ON BEHALF OF EXECUTOR

Please fill out the **Appointment of representative by executor(s)/administrator(s)** in Part 6 of this document to nominate a person or company to act on behalf of the executor or administrator.

Part 2 - Deceased details

Account Name

Account Number

Part 3 - Executor or administrator details

If there are more than two executors/administrators please provide details on a separate page.

Important: Executors/administrators must sign this form in the presence of a witness.

Name of executor/administrator 1

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

Signature

Date (dd/mm/yyyy)

Witnessed by:

Name of witness 1

Part 3 - Executor or administrator details - witness 1 continued

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

Signature

Date (dd/mm/yyyy)

Name of executor/administrator 2

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

Signature

Date (dd/mm/yyyy)

Witnessed by:

Name of witness 2

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

Signature

Date (dd/mm/yyyy)

Part 4 - Instructions to redeem or retain the estate

As the estate's administrator you are able to make the decision regarding the deceased account holder's investments.

Please select one option below:

Full withdrawal (account closure).

Keep the account open.

Please note: If you select to keep the account open, any changes to the account name must be supported by relevant originally certified documents, (e.g. an updated trust deed in the case of addition/removal of trustees for super funds).

Part 5 - Updating the client bank details

It is Ventura's policy to pay all withdrawal proceeds by direct credit to a bank account in the name of the estate or the solicitor's trust. Requests for payment to third parties will not be actioned.

Bank Name

BSB

Account Name

Account Number

Part 6 - Appointment of representative by executor(s)/administrator(s)

I/we appoint the person/company named below and authorise them to make enquiries regarding the account listed in Part 2 of this document. I/we understand that this authorisation DOES NOT extend to making instructions, such as redemption or transmission instructions, or change of distribution details or address details, on my/our behalf. Ventura Investment Management Limited will continue to act in accordance with this notice until written cancellation of the appointment is received.

Name of nominated representative

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

Phone number

Fax number

All correspondence should be sent to;

The nominated representative

Executor/administrator 1 at the address listed in Part 3 of this document.

Executor/administrator 2 at the address listed in Part 3 of this document.

Other executor/administrator, name and address detailed below:

Other executor/administrator

Name of executor/administrator 1

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

Part 6 - Appointment of representative by executor(s)/administrator(s) continued

Name of executor/administrator 2

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

Authorised by (must be signed by all executors/administrators):

Name of executor/administrator 1

Name of executor/administrator 2

Signature

Date (dd/mm/yyyy)

Signature

Date (dd/mm/yyyy)

Part 7 - Corporations Act 2001 - Section 1071B

Where Probate or Letters of Administration have been granted in an Australian State other than where the securities are registered, a statement in writing as prescribed by Section 1071B of the Corporations Act must be lodged, together with a transfer/transmission within three months of the statement being made.

Name of deceased

Residential street address (PO Box is not acceptable)

Suburb

State

Postcode

Country (if not Australia)

vMAPs Account number

Probate/Letters of Administration number

State where Probate/Letters of Administration were issued

Declaration (must be signed by all executors/administrators)

I/we hereby state that I/we are the personal representative(s), namely the executor(s) of the Will/administrator(s) of the Estate of the deceased person named above, and that to the best of my/our knowledge, information and belief, no grant of representative of the estate has been applied for or made in the State of Victoria and no application for such a grant will be made.

Name of executor/administrator 1

Name of executor/administrator 2

Signature

Date (dd/mm/yyyy)

Signature

Date (dd/mm/yyyy)

Witnessed by (each executor/administrator signature must have its own witness)

Name of witness for executor/administrator 1

Name of witness for executor/administrator 2

Signature

Date (dd/mm/yyyy)

Signature

Date (dd/mm/yyyy)