

Client Services contact details

Phone

+61 3 9046 4057

Email

atlas.transactions@unitregistry.com.au

Switch request

Use this form if you are an existing investor and wish to switch your investment between Funds.

Please complete all sections in BLOCK letters using a black pen. If you make an error while completing this form, do not use correction fluid. Cross out your mistakes and initial your changes.

1. Read and ensure you understand the product disclosure statement (PDS) for each Fund you are switching to.

The PDS is available on our website <https://www.atlasinfrastructure.com/documents> or from your financial adviser.

2. Please ensure that you have completed the following:

- entered your investor number and investor name in section 1 as they appear on your latest statement
- entering your switching details, including the dollar value you wish to switch
- ticked the 'Existing instructions' box (if applicable) in section 4 and
- signed the form as per the 'Signing instructions' in section 5

3. Send your documents to us.

You can return your form by post or email.

Send by post: ATLAS Infrastructure
GPO Box 804
MELBOURNE VIC 3001

Scan and email to: atlas.transactions@unitregistry.com.au

1 Investor details

Investor number

Account name

2 Switch from

Please select the Fund(s) and specify the number of units or dollar amount you wish to switch. If you wish to switch your entire unit holding, please tick the box provided next to the applicable Funds(s).

The minimum switch amount is \$5,000. Please refer to the Fund's PDS. If your switch request will cause your balance in a Fund to be lower than the minimum we will contact you as we will be unable to process your request.

Fund name	APIR code	Dollar amount to be switched \$AUD	Number of units to be switched	Full switch (x)
				<input type="checkbox"/>
				<input type="checkbox"/>

3 Switch to

Please select the Fund(s) you wish to switch to and specify the number of units or dollar amount to be invested in each Fund. Minimum balances apply for each Fund. Please refer to the Fund's PDS.

Fund name	APIR code	Total balance of units as indicated above	Distribution option*	
			Reinvest	Paid to nominated bank account**
			<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>

* The distribution choice above will override any pre-existing election.

** Distributions will be deposited into your nominated financial institution account. If you have not previously nominated a financial institution account or wish to change your nominated account, please complete a 'Change of details' form available at <https://www.atlasinfrastructure.com/documents>.

4 Existing instructions

If you tick this box, you confirm that your existing instructions (reporting preferences and financial institution account details) continue to apply to your investment in the Fund(s) you are switching to. If you wish to change your instructions, please complete the change of details form, available at <https://www.atlasinfrastructure.com/documents/>.

5 Signing instructions

By completing and signing this form, you are telling us:

- you have received, read and understood the current PDS
- monies deposited are not associated with crime, money laundering or terrorism financing, nor will monies received from your account have any such association
- you are not bankrupt or a minor, and you agree to be bound by the constitution of the Fund and the PDS as supplemented, replaced or re-issued from time to time.

Individual – where the investment is in one name, the account holder must sign.

Joint Holding – where the investment is in more than one name, all of the account holders must sign.

Companies – where the company has a sole director who is also the sole company secretary, this form must be signed by that person. If the company (pursuant to section 204A of the Corporations Act 2001) does not have a company secretary, a sole director can also sign alone. Otherwise this form must be signed by a director jointly with either another director or a company secretary. Please indicate the capacity in which the form is signed.

Trust – the trustee(s) must sign this form. Trustee(s) signing on behalf of the trust confirm that the trustee(s) is/are acting in accordance with such designated powers and authority under the trust deed.

Power of Attorney – if you have not already lodged the Power of Attorney with us, please attach a certified copy of the Power of Attorney document that includes Certificate of Witness and Statement of Acceptance and Certified Identification Document of the Power of Attorney. I/we attest that the Power of Attorney has not been rescinded or revoked and that the Donor is still living.

Signature of investor 1, director or authorised signatory

Full name (please print)

Date (DD/MM/YYYY)

 / /

Company officer (please indicate company capacity)

- Director
- Sole director and company secretary
- Authorised signatory

Signature of investor 2, director/company secretary or authorised signatory

Full name (please print)

Date (DD/MM/YYYY)

 / /

Company officer (please indicate company capacity)

- Director
- Sole director and company secretary
- Authorised signatory