

## PERIODIC DEBIT AUTHORITY FORM

### UBS Protected Geared Investment - Interest Payments

#### Return original to:

OTC Operations  
UBS AG, Australia Branch  
GPO BOX 4151  
SYDNEY NSW 2001

If you wish to make your Protected Geared Investment Product interest payments by direct debit from your bank account, please fill in the details below and return this form to UBS. P

#### Investor details:

Name (As per your Original Application):

Client Reference number:

#### Direct Debit Request

**Please note:** Bank account name(s) must match the Investor Name(s) as per your original Application Form and be signed by that person(s). In the case of joint accounts, both signatures are required. If a Company or Corporate Trust is applying, this form must be signed by either the sole director (if there is only one) OR two directors (if there are two or more). **Please request a third party request form if the bank details you are supplying are for a third party account.**

Request and Authority to debit the account named below to pay UBS AG, Australia Branch	
<b>Request and Authority to debit</b>	<p>Surname / company name _____</p> <p>Given names / ACN / ABN _____ ("you")</p> <p>request and authorise UBS AG, Australia Branch (User ID number 181243) to arrange, through its own financial institution, for any amount UBS AG, Australia Branch 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 UBS AG, Australia Branch, subject to the terms and conditions of the Direct Debit Request Service Agreement.</p> <p>UBS AG, Australia Branch will only arrange for funds to be debited from your account if we have sent to the address nominated by you, a billing advice which specifies the amount payable by you to us and when it is due.</p>
<b>Insert details of account to be debited</b>	<p><b>Please note:</b> The account name below must match the Applicant name(s) given in Section 1A of your original Application Form (e.g. same individual name if an individual applicant or same company name if a company applicant)</p> <p>Name of account _____</p> <p>Financial institution name _____</p> <p>BSB number            _ _ _ _  -  _ _ _ _ </p> <p>Account number      _ _ _ _ _ _ _ _ _ _ _ _ _ _ </p>

<p><b>Acknowledgment</b></p>	<p>By signing this Direct Debit Request you acknowledge having read and understood the terms and conditions governing the debit arrangements between you and UBS AG, Australia Branch as set out in this Request and in your Direct Debit Request Service Agreement (<b>refer to Appendix 1 of the Loan Agreement</b>).</p>
<p><b>Insert your signature and address</b></p> <p><i>If signing for a company please print full name and capacity for signing (eg. Director).</i></p> <p><i>In the case of joint accounts, <b>BOTH</b> signatures are required.</i></p>	<p><b>Signature Applicant 1/(Sole) Director</b></p> <p>_____</p> <p><b>Address</b> _____</p> <p>_____</p> <p><b>Signature Applicant 2/Director/Company Secretary</b></p> <p>_____</p> <p><b>Address</b> _____</p> <p>_____</p> <p><b>Date</b>     ___ / ___ / ___</p>