

12.1 Investing in the Funds

The minimum initial investment in each Fund is \$30,000 or as agreed with the Responsible Entity. You may invest in either or both Funds. If you are an Indirect Investor, please contact your IDPS provider for information on how to invest in the Funds. You may be able to negotiate a reduced minimum investment amount through an IDPS provider.

For direct Investors, applications for Units must be made on the Application Form found at the back of this PDS. Include the full amount to be invested on a cheque made payable to the;

1. Resolution Capital Global Property Securities Fund Application Account; and/or
2. Resolution Capital Core Plus Property Securities Fund Application Account,

crossed 'Not negotiable'. If you wish to make a direct deposit, call 1300 133 451. Please mail your cheque along with the completed and signed Application Form to:

Resolution Capital Funds
FundBPO Pty Ltd
GPO Box 4968
Sydney NSW 2001

Applications received and accepted by the Responsible Entity, along with Cleared Funds, prior to 11.00am Australian Eastern Standard Time ('AEST') on a Business Day will be processed using the Unit price for that day. For applications received and accepted after 11.00am AEST on a Business Day or on a non Business Day, the next Business Day's Unit price will apply.

You will receive a letter notifying you of your investment and the Units allocated. Please note that if you make an investment in the month following a distribution period you may experience some delays in receiving notification of your investment.

The number of Units to be allotted in the relevant Fund following receipt and acceptance of an application will be determined by dividing the application amount by the determined Unit price for the relevant Fund (less the buy spread). The number of Units is thereupon determined as a whole number or represented as a fraction of a Unit for less than a whole number and designated to 4 decimal

places by the Responsible Entity. The Responsible Entity reserves the right to refuse applications in accordance with the Constitution.

12.1.1 Additional Investments

Unitholders may make additional investments in a Fund on the Application Form in this PDS, or in a format agreed with the Responsible Entity. Upon finalising your application, a confirmation of your additional investment will be sent to you. The minimum additional investment is \$5,000 or as agreed with the Responsible Entity.

If you are an indirect investor, please contact your IDPS provider for information on how to make an additional investment.

12.2 Making a Redemption

The minimum redemption amount for both Funds is \$5,000 providing a minimum balance of \$30,000 remains invested in the relevant Fund. An Investor wishing to redeem Units should send a written redemption request, signed by the necessary signatories, to the Fund Administrator by mail or by fax to +61 2 9251 3525.

Redemption requests received by the Fund Administrator prior to 11.00am AEST on a Business Day are deemed to be received that day. If an investor invests through an IDPS, master trust or wrap account, the Indirect Investor can only redeem through that service and will need to complete the documents which the operator of such services requires to withdraw from the fund. You may be able to negotiate a reduced minimum redemption amount through your IDPS provider.

Units will be redeemed at the Net Asset Value per Unit at the close of business (less the sell spread), the 'Redemption Date'. Payment of the withdrawal request is dependent on the Fund's cash position, however the Responsible Entity endeavours to effect payment within 10 days from the Redemption Date (the Funds' Constitutions allow up to 40 days). If the current Unit value of all Units in the relevant Fund held by an Investor is less than \$500, the Responsible Entity may compulsorily redeem those Units.

12.3 Completing the Application Form

If an application is completed under a power of attorney, a certified copy of the power of attorney should be attached to the Application Form.

12.3.1 Incomplete applications

Application monies accompanying an incomplete application will be retained in a trust account pending receipt of the required information.

12.3.2 Personal details

Insert your name and personal details into the spaces provided in the Application Form. For joint applications the names of all applicants must be included. A company must provide its Australian Business Number. Please provide information on your residency. If you have an existing fund account and your particulars have not changed, please provide us only with your name and account details, and complete the remainder of the form.

12.3.3 Correct forms of registrable names

Note that only legal entities are allowed to invest in a Fund. An application must be signed in the name(s) of natural persons, companies or other legal entities acceptable to the Responsible Entity. At least one name given in full and the surname is required for each natural person.

The name of the beneficiary or any other non-registrable name may be included by way of an account designation if completed exactly as described in the examples of correct forms of registrable names in the table on page 36.

12.3.4 Investor declaration

Please sign the Application Form including the declaration. All applicants must sign. Corporate applicants may sign under common seal or by their authorised representatives. If signing under a power of attorney, you are certifying that the power of attorney has not been revoked (a certified copy of power of attorney must be submitted with this application unless we have already sighted it).

12.3.5 Tax File Number

Investors have the choice of whether or not to quote their Tax File Number (TFN) when the investor opens an account for a Fund. The investor does not have to quote a TFN, but it is a requirement of relevant taxation laws that the Responsible Entity will withhold tax (plus Medicare levy) from income distributions to the investor if the investor has not quoted their TFN or provided appropriate exemption information. Collection of TFN information is

authorised and its use and disclosure are strictly regulated by the taxation laws and the Privacy Act.

If you are exempt from quoting a TFN, please quote the equivalent ATO code in the TFN space provided (e.g. Aged pension is 444 - 444 - 441).

12.3.6 Effect of the Application Form

In addition to the acknowledgments contained in the Investor declaration on the Application Form, by completing and signing the Application Form the Investor:

- agrees to be bound by the provisions of the relevant Fund's Constitution;
- acknowledges having read and understood the PDS;
- authorises the use of the TFN information provided on the Application Form in respect of the Investor's account;
- acknowledges that neither the Responsible Entity, nor their respective holding companies and officers, nor the Fund Manager, its respective officers or holding companies, guarantees the capital invested by investors or the performance of the specific investments of any Fund;
- acknowledges that the provision of the products available through the PDS should not be taken as the giving of investment advice by the Fund Manager or the Responsible Entity, as they are not aware of the investor's investment objectives, financial position or particular needs;
- acknowledges that they are responsible for ensuring that the information on the Application Form is complete and correct;
- acknowledges that neither the Responsible Entity nor their agents are responsible where a loss may be suffered as a result of providing incorrect or incomplete information; and
- You agree that WHTM Capital Management Limited may:
 - (i) require you to provide any additional documentation or other information and perform any acts to enable compliance with any laws relating to anti-money laundering and counter terrorism financing (AML) or any other law;
 - (ii) at its absolute discretion and without notice to you, take any action it considers appropriate, including blocking or delaying transactions on your account or refuse to provide services to you to comply with any law relating to AML or any other law;
 - (iii) in its absolute discretion and without notice to you report any, or any proposed transaction or activity to any body authorised to accept such reports relating to AML or any other law.

12.3.7 Nature of an investor's interest

Each Investor has a beneficial interest in the assets of the Fund in which they hold Units.

12.3.8 Privacy

When investors apply to invest in a Fund they acknowledge and agree that:

- they are required to provide WHTM Capital Management Limited with certain Personal Information to facilitate this application; and
- WHTM Capital Management Limited may be required to disclose this information to:
 1. third parties carrying out functions on behalf of WHTM Capital Management Limited on a confidential basis;
 2. third parties if that disclosure is required by or to the extent permitted by law; and
 3. an investor's adviser.

All Personal Information will be collected, used and stored by WHTM Capital Management Limited in accordance with the WHTM Capital Management Limited Privacy Policy, a copy of which is available on request or at www.wilsonhtm.com.au.

To ensure that the Personal Information we retain about you is accurate, complete and up to date, please contact us if any of your details change.

12.3.9 Anti-Money Laundering/Counter Terrorism Financing

The prevailing anti-money laundering legislation requires that the identity of an investor is verified. Without this information we may not be able to deal with you and monies cannot be paid to you if and when investments are realised.

Resolution Capital Limited and WHTM Capital Management Limited may require additional information to verify the identity of an investor, any underlying beneficial owner of Units in a fund or trust and the source of any payment. Where we request such information from you, processing of new applications may be delayed until the requested information in a satisfactory form is received.

Please complete the section of the form that applies to you and then return the signed form with the relevant document(s) to the address provided.

12.3.10 Appointment of Authorised Representative

Authorised Representative Form

A person appointed as your authorised representative on the form at the end of this PDS is authorised by you to:

- apply for units in the Funds and sign all documents necessary for this purpose
- make requests to redeem all or some of your units (receipt by the authorised representative or as directed by the authorised representative fully discharges to our redemption obligations to you).

The RE may act on the sole instructions of the authorised representative until we are notified that the appointment of the authorised representative is terminated. You can cancel your appointment of the authorised representative by giving you 14 days prior notice, as permitted by law, including the charging of fees or other charges for use of this service.

Termination of an appointment does not prejudice the following statement. By appointing an authorised representative, you agree to release, discharge and indemnify us from and against any loss, expense, action, claims or other liability which may be suffered by you or brought against us for any actions or omissions by you or your authorised representative, whether authorised or not by you or your authorised representative.

If an authorised representative is a partnership or a company, any one of the partners or any director of the company, is each individually deemed to have the powers of the authorised representative. It is sufficient for us to show that we had reasonable grounds for belief that an action was taken or a request given by or for an authorised representative where determining whether an action or request was taken or given by the authorised representative.

12.4 Identity Verification

Type of Client	Minimum Identification Required
Individuals /Joint Applicants	<p>Verify the customer's name, residential address and date of birth from</p> <p>a) an original or certified copy of a valid drivers licence (Australian State or Territory, or Foreign Country equivalent) with photograph;</p> <p>Or</p> <p>b) both:</p> <p>i. an original or certified copy of a valid primary I.D. document:</p> <ul style="list-style-type: none"> • passport issued by Australian Commonwealth or expired passport which has not been cancelled and was current within the preceding two years; or • passport or similar document issued for the purpose of international travel that contains a photograph and signature of the person and is issued by a foreign government, UN or UN Agency, with English translation by an accredited translator if not in English; or • national Identity Card with a photograph and signature issued by Australian Commonwealth, State or Territory; or • foreign national Identity Card with a photograph and signature issued by a foreign government, UN or UN Agency, with English translation by an accredited translator, if not in English; or • birth certificate or birth extract issued by Australian State or Territory; or • birth certificate issued by foreign government, UN or UN Agency, with English translation by accredited translator if not in English; or • citizenship certificate issued by Commonwealth government; or • citizenship certificate issued by foreign government, with English translation provided by accredited translator if not in English; or • pension card issued by Centrelink; <p>And</p> <p>ii. an original or certified copy of a valid secondary I.D. document:</p> <ul style="list-style-type: none"> • notice issued to an individual by Centrelink within preceding 12 months which records the provision of financial benefits to an individual and the individual's name and residential address; or • notice of a foreign welfare department equivalent within preceding 12 months which records the provision of financial benefits to an individual and the individual's name and residential address; or • notice issued to an individual by the ATO or relevant foreign Taxation authority within the preceding 12 months which records the name and residential address of the individual; or • notice issued to an individual by a local government body or utilities provider within preceding 3 months which records the provision of services to that residential address or that individual; or • <i>For persons under 18, a notice issued by a school principal within the preceding 3 months containing the name of the person and his or her residential address and recording the period of time that the person attended at the school.</i>

Type of Client	Minimum Identification Required
Partnership	<p>Certified copy or extract of:</p> <ul style="list-style-type: none"> • partnership agreement; or • the minutes of a partnership meeting approving the establishment of the business relationship; or • if partnership is regulated by a professional association, then a search of the current membership directory; or • original or certified copy of a certificate of registration of business name issued by a government body; <p>And</p> <ul style="list-style-type: none"> • in respect of one of the partners, identification as per the individual requirements.
Public/Listed Companies	<p>Original or certified copies of:</p> <p>Domestic Listed/Public Company</p> <ul style="list-style-type: none"> • Certificate of Incorporation or recent extract of public company register or document issued by the relevant regulator (including registration Certificate); or • a search of the relevant ASIC database or relevant stock exchange or other appropriate document(s) including reliable independent electronic data (e.g. DnB report); <p>Evidencing:</p> <ul style="list-style-type: none"> • that the company is a listed public company, a majority owned subsidiary of a domestic listed public company or licensed and subject to the regulatory oversight of a Commonwealth, State or Territory statutory regulator in relation to its activities as a Company. <p>Foreign Listed/ Public Company</p> <ul style="list-style-type: none"> • Certificate of Incorporation or recent extract of public company register or document issued by the foreign government (including a registration certificate); or • a search of the relevant government database, a search of the relevant foreign stock exchange, a search of the license or other records of the relevant regulator or other appropriate document(s) including reliable independent electronic data (e.g. DnB report) <p>Evidencing:</p> <ul style="list-style-type: none"> • that the company is a listed public company, a majority owned subsidiary of a listed public company or licensed and subject to the regulatory oversight of a statutory regulator in relation to its activities as a company; and • registered company address; and • whether the company is registered by the relevant foreign registration body; and • any id number issued to the company by the relevant foreign registration body, or ARBN if applicable; and • the full name of each director.
Private/Proprietary Private Companies	<p>Original or certified copies of:</p> <p>Domestic Companies</p> <ul style="list-style-type: none"> • a Certificate of Incorporation, recent registration certificate, search of the relevant ASIC database, search of the licence or other records of the relevant regulator or other appropriate document(s) including reliable independent electronic data (e.g. DnB report); <p>Evidencing:</p> <ul style="list-style-type: none"> • the full name of the company as registered by ASIC; and

Type of Client	Minimum Identification Required
Private/Proprietary Companies continued	<ul style="list-style-type: none"> • whether the company is registered by ASIC as a proprietary company or public company; and • the ACN issued to the company; <p>And</p> <ul style="list-style-type: none"> • in respect of one of the directors, identification as per individual requirements. <p>Australian Registered Foreign Company</p> <ul style="list-style-type: none"> • a Certificate of Incorporation, recent registration certificate, search of the relevant ASIC database, search of the licence or other records of the relevant regulator, other appropriate document(s) including reliable independent electronic data (e.g. DnB report); <p>Evidencing:</p> <ul style="list-style-type: none"> • the full name of the company as registered by ASIC; and • ARBN issued; and • whether the company is registered by ASIC as a proprietary company or public company; • registered company address; and • full address of the company in its country of formation, incorporation or registration; and • the full name of each director; <p>And</p> <ul style="list-style-type: none"> • in respect of one of the directors, identification as per individual requirements. <p>Unregistered Foreign Company</p> <ul style="list-style-type: none"> • foreign registration certificate, certificate of incorporation or recent extract of company register; or • other appropriate document(s) including reliable independent electronic data (e.g. DnB report); <p>Evidencing:</p> <ul style="list-style-type: none"> • whether the company is Public or Private Company; and • and any id number issued to the company by the relevant foreign registration body; and • the full address of the company in its country of formation, incorporation or registration and full address of principal place of business (if different from registered address). <p>And</p> <ul style="list-style-type: none"> • in respect of each of the directors, identification as per individual requirements <p>Beneficial Ownership For proprietary or private companies (except where it is licensed and subject to Australian Regulatory oversight) for each shareholder who owns 25% or more of the issued capital, identification as per Individual Requirements.</p>
Trust and Superannuation Fund	<p>Original or certified copies of:</p> <ul style="list-style-type: none"> • the trust or superannuation deed; <p>And</p> <ul style="list-style-type: none"> • in respect of one of the trustees: <ul style="list-style-type: none"> i. if the trustee is an individual, then ID required as the individual requirements; or ii. if the trustee is a company, then ID required as the company requirements

Type of Client	Minimum Identification Required
Association	<p>Original or certified copies of:</p> <ul style="list-style-type: none"> constitution or rules of association or a certified copy of constitution or rules of association; or minutes of meeting of the association; or information provided by ASIC (ASIC search) by State or Territory bodies responsible for the incorporation of the association; <p>Evidencing:</p> <ul style="list-style-type: none"> the full name of association; and any unique identifying number issued upon incorporation; <p>And</p> <ul style="list-style-type: none"> in respect of the chairman, secretary or treasurer, identification as per individual requirements.
Registered Co-Operative	<p>Original or certified copies of:</p> <ul style="list-style-type: none"> any register maintained by the co-operative or a certified copy or extract of any register; or any minutes of meetings of the co-op or a certified copy or extract of any minutes; or information provided by ASIC or by the State, Territory or overseas body responsible for the co-operative; <p>Evidencing:</p> <ul style="list-style-type: none"> the full name of Co-operative; and any unique identifying number issued upon incorporation; <p>And</p> <ul style="list-style-type: none"> in respect of the chairman, secretary or treasurer, identification as per the individual requirements.
Government Bodies	<p>Original or certified copies of:</p> <ul style="list-style-type: none"> a copy of relevant extract of the legislation under which the government body is established; or review of the relevant Commonwealth, State, Territory or foreign country register of government bodies; or search of the relevant Commonwealth, State, Territory or foreign country website; <p>Evidencing:</p> <ul style="list-style-type: none"> full name of government body; and full address of government body's principal place of operations; and whether the government body is an entity established under legislation of the Commonwealth of Australia, State, Territory or foreign country.
Power Of Attorney/ Account Authority	<p>Original or certified copies of:</p> <ul style="list-style-type: none"> Power of Attorney document and a specimen signature of the relevant attorney(s) (where applicable); <p>And</p> <ul style="list-style-type: none"> in respect of each attorney/account authority identification as per the individual requirements.

Category of Acceptable Referees

Certified copy means a document that has been certified as a true copy of an original document by one of the following referees:

1. a person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described);
2. a judge of a court;
3. a magistrate;
4. a chief executive officer of a Commonwealth court;
5. a registrar or deputy registrar of a court;
6. a Justice of the Peace (including a Commissioner of Declarations);
7. a notary public (for the purposes of the Statutory Declaration Regulations 1993);
8. a police officer;
9. an agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public;
10. a permanent employee of the Australian Postal Corporation with 2 or more years of continuous service who is employed in an office supplying postal services to the public;
11. an Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955);
12. an officer with 2 or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 1993);
13. a finance company officer with 2 or more continuous years of service with one or more finance companies (for the purposes of the Statutory Declaration Regulations 1993);
14. an officer with, or authorised representative of, a holder of an Australian Financial Services Licence, having 2 or more continuous years of service with one or more licensees; or
15. a member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with 2 or more years of continuous membership.

Certified extract means an extract that has been certified as a true copy of some of the information contained in a complete original document by one of the persons described in points 1 - 15.

Please note that pharmacists are not an acceptable referee under Anti-Money Laundering legislation in Australia.

Correct Forms of Registrable Names

An application must be signed in the name(s) of natural persons, companies or other legal entities. At least one name given in full and the surname is required for each natural person.

The name of the beneficiary or any other non-registrable name may be included by way of an account designation if completed exactly as described in the examples of correct forms of registrable names in the following table.

Type of investor	Application Form Section	Correct form of Registrable Title
Individual or Joint Applicants <ul style="list-style-type: none"> • Use given names in full • Do not use initials 	A & B	Mr John Alfred Smith and Mrs Mary Anne Smith
Partnerships <ul style="list-style-type: none"> • Use partners' personal names • Do not use the name of the partnership 	E, A & B	Mr John Smith and Mr Michael Smith < John Smith and Son A/C >
Minor (a person under the age of 18) <ul style="list-style-type: none"> • Use the name of a responsible adult • Do not use the name of the minor 	A & B	Mr John Alfred Smith < John Smith >
Company <ul style="list-style-type: none"> • Use company title • Do not use abbreviations 	C, A & B	ABC Pty Ltd
Trusts <ul style="list-style-type: none"> • Use trustee(s) personal name(s) • Do not use the name of the trust 	D, A & B & C (if necessary)	Mrs Sue Smith < Sue Smith Family A/C >
Deceased Estates <ul style="list-style-type: none"> • Use executor(s) personal name(s) • Do not use the name of the deceased 	A & B	Ms Jane Smith < Est John Smith A/C >
Association <ul style="list-style-type: none"> • Use office bearer(s) personal name(s) • Do not use the name of the club, etc. 	F, A & B	Mr Michael Smith < ABC Tennis Association A/C >
Superannuation Funds <ul style="list-style-type: none"> • Use name of trustees and fund • Do not use the name of fund only 	D, A & B & C (if necessary)	Mr John Henry Smith and Mrs Susan Jane Smith < J & S Smith Super Fund A/C >
Co-operative <ul style="list-style-type: none"> • Use name of co-operative • Do not use abbreviations 	F, A & B	ABC Co-operative Limited
Government Body Use name of government body	G	ABC Department or Department of ABC



A completed application is an instruction to invest funds in the Fund(s) identified in section K of this application form.

To: Resolution Capital Funds
FundBPO Pty Ltd
GPO Box 4968
Sydney NSW 2001

Application Form

Resolution Capital Global
Property Securities Fund
ARSN 128 122 118

WHTM Capital Management Limited
AFSL Number 238371

Resolution Capital Core
Plus Property Securities Fund
ARSN 131 850 363

September 2008

A Details of Applicant 1 / Director 1 / Trustee 1

Title

Mr Mrs Miss Ms Other (e.g. Dr, Prof)

Full Name (e.g. John Alfred Smith)

Date of birth

/ /
D D M M Y Y Y Y

Investor number (if existing investor)

Occupation

Home phone number

Mobile phone number

Work phone number

Fax number

Email address

Residency details

Are you an Australian resident for tax purposes?

Yes No

If no, please state your country of residency

If previously an Australian resident, what was the date you became a non-resident?

/ /
D D M M Y Y Y Y

Tax file number or exemption number

- -

Residential Street Address

Suburb / Town

State

Postcode

Postal Address / PO Box Number (If same as residential address, please write "AS ABOVE")

Suburb / Town

State

Postcode

NOTE: PO Boxes and/or C/- addresses without proof of residential address cannot be accepted.

Company (continued)

Residential Street Address

[Grid of 25 boxes for Residential Street Address]

Suburb / Town

[Grid of 15 boxes for Suburb / Town]

State

[Grid of 3 boxes for State]

Postcode

[Grid of 5 boxes for Postcode]

Principal Place of Business Address (If same as registered address, please write 'AS ABOVE')

[Grid of 25 boxes for Principal Place of Business Address]

Suburb / Town

[Grid of 15 boxes for Suburb / Town]

State

[Grid of 3 boxes for State]

Postcode

[Grid of 5 boxes for Postcode]

NOTE: Please also provide the full names and details of the relevant directors by completing sections A and B of the form.

The company is (as registered with registration body):

[Form with checkboxes for 'A Private Company', 'A Public Company', and 'Other type of Company (please state)' followed by a text box]

For proprietary or private companies, the full name of each director:

Director 1

[Text box for Director 1 name]

Director 2

[Text box for Director 2 name]

Director 3

[Text box for Director 3 name]

Director 4

[Text box for Director 4 name]

(Attach additional page if needed)

For proprietary companies or private companies (except proprietary companies licensed and subject to Australian regulatory oversight), the full name and residential address of each shareholder who owns 25% or more of the issued capital of the company.

Please complete Sections A and B with the full names and details of the relevant shareholders (attach additional page(s) if necessary).

Further Information for Foreign Companies

Business Address in Australia (If applicable)

[Grid of 25 boxes for Business Address in Australia]

Suburb / Town

[Grid of 15 boxes for Suburb / Town]

State

[Grid of 3 boxes for State]

Postcode

[Grid of 5 boxes for Postcode]

NOTE: Please also provide the full names and details of the relevant directors by completing sections A and B of the form.

Country where company was formed, incorporated or registered

[Text box for Country where company was formed, incorporated or registered]

If the company is registered by a relevant foreign registration body, the name of the body and any registration number issued by the relevant foreign body

[Text box for name of foreign registration body and registration number]

Registration Number

[Text box for Registration Number]

D**Trust / Superannuation Fund**

Name of Trust / Superannuation Fund

Tax file number or exemption number

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Australian Business Number

Type of trust (e.g. managed investment scheme, self managed superannuation fund, superannuation fund, etc.)

Country in which Trust was established

All Other Trusts

Type of Trust

Country in which Trust was established

Full name, date of birth and address of each trustee (except trusts that are registered and subject to Australian regulatory oversight).

Please complete Sections A and B with the full names and details of the relevant trustees (attach additional page(s) if necessary).

Please include full names or descriptions of each Trust beneficiary who owns 25% or more of the assets of the Trust or provide details of the class of beneficiaries under Trust.

Beneficiary 1

Beneficiary 2

Please complete Sections A, B and C (if necessary) with the full names and details of the relevant trustees (attach additional page(s) if necessary).

E**Partnership (if applicable)**

Name of partnership

Full registered business name (if any) of partnership

Tax file number or exemption number

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Australian Business Number

Country in which partnership was established

Full name, date of birth and address of each partner (except where the regulated status of the partnership is confirmed by a current membership directory of the relevant professional association).

Please confirm Sections A and B with the full names and details of the relevant partners (attach additional page(s) if necessary) and provide identification for one of the partners as per the individual requirements.

F**Association / Co-operative (if applicable)**

Name of association or co-operative

Tax file number or exemption number

--

Australian Business Number

Other identification number issued upon incorporation

I

Income Distribution

Please specify how you would like any distributions to be paid. Distributions will be reinvested if no option is selected.

	Reinvest in Fund	or	Credit to nominated account
Resolution Capital Global Property Securities Fund	<input type="checkbox"/>	or	<input type="checkbox"/>
Resolution Capital Core Plus Property Securities Fund	<input type="checkbox"/>	or	<input type="checkbox"/>

If the credit to nominated account option is chosen, please ensure you complete your account details in Section H on the previous page.

J

Investor communication

You can choose to receive timely, cost effective and environmentally friendly annual reports and financial statements unless you request a printed version. Please select one of the following options

I/We elect to receive reports electronically via email. I/We elect to receive a printed copy of reports.

If an option is not selected then you will not be sent annual reports and financial statements.

These reports will be available in a timely, cost effective, and environmentally friendly manner via our website at www.resolutioncapital.com.au.

K

Initial and Additional Investment Details

Please make all cheques payable to;

- 1) Resolution Capital Global Property Securities Fund Applications Account; or
- 2) Resolution Capital Core Plus Property Securities Fund Applications Account and crossed 'Not Negotiable'.

If you wish to arrange an electronic transfer, please contact the Fund Administrator on 1300 133 451.

Please note;

- (i) Application monies will not be processed until a completed and signed application form has been received and accepted; and
- (ii) Investments made by cheque may incur a clearance period of between 3 and 5 business days.

Resolution Capital Global Property Securities Fund (if applicable)

Name of drawer of cheque	Cheque No.	BSB No.	Account No.	Amount A\$

Resolution Capital Core Plus Property Securities Fund (if applicable)

Name of drawer of cheque	Cheque No.	BSB No.	Account No.	Amount A\$

Please note that cheques may incur a 3-5 business day clearance period.

Funds to be transferred electronically

Total Amount Enclosed / Transferred

\$



Investor Declaration

The investor declaration is signed by an individual or joint applicants only.

I/We have read and understood the representations and warranties attached to this application form and agree that they are incorporated in this declaration. I/We agree, acknowledge and accept them and declare that all the details given in this application form are true and correct.

Applicant 1

Name

Signature

Joint Applicant 2 (if applicable)

Name

Signature

Date

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D	D		M	M		Y	Y	Y	Y

For joint applicants, both investors are required to sign subsequent instructions to the Fund Manager (e.g. redemption forms).

Yes No

If no selection is made, it will be assumed either party can sign. If applicable, please attach a certified copy of the power of attorney.



Authorised Representative Form

Resolution Capital Global
Property Securities Fund
ARSN 128 122 118

WHTM Capital Management Limited
AFSL Number 238371

Please complete the sections of the form that apply to you and return the form to.

Resolution Capital Core
Plus Property Securities Fund
ARSN 131 850 363

September 2008

To: Resolution Capital Funds
FundBPO Pty Ltd
GPO Box 4968
Sydney NSW 2001

A Appointment of Authorised Representative

To authorise third parties in relation to your account please complete all of the following details and provide the identification for the authorised person(s) as per the individual requirements detailed on page 32 of the PDS.

Authorised Representative 1 (please tick applicable box)

Add Modify Delete

Title

Mr Mrs Miss Ms Other (e.g. Dr, Prof)

Full Name (e.g. John Alfred Smith)

Residential Street Address (must be provided)

Suburb / Town

State

Post Code

Contact Number

Date of birth

/ /
D D M M Y Y Y Y

Signature

Date

/ /
D D M M Y Y Y Y

Authorised Representative 2 (please tick applicable box)

Add Modify Delete

Title

Mr Mrs Miss Ms Other (e.g. Dr, Prof)

Full Name (e.g. John Alfred Smith)

Residential Street Address (must be provided)

Suburb / Town

State

Post Code

Contact Number

Date of birth

/ /
D D M M Y Y Y Y

Signature

Date

/ /
D D M M Y Y Y Y

B Account operating authority

Please indicate how you wish to operate your Account

Any one of us to sign All of us to sign

If you selected 'any one of us to sign', each of you (including any person you appoint as an authorised representative) will be able to transact on or otherwise operate your Account independently of the others.

If you do not select an option we will assume that 'any one of us to sign' option will apply.

C Declaration and signatures

You should read and understand the PDS in full. In particular, your attention is drawn to the section of the PDS titled Appointment of an authorised representative. In signing this form I/we, the undersigned:

1. authorise each representative named in this form to operate my/our account;
2. understand that an authorised representative can act solely on my account subject to section B of this form;
3. understand I/we are liable for any use of your account by an authorised representative;
4. will notify each authorised representative of these terms and conditions and any other items contained in this PDS, and any amendments to them;
5. under that any such appointment continues until I/we cancel the appointment by giving notice in writing; and
6. acknowledge that the instructions provided in this form supercede all prior authorities.

Authorised Customer 1

Name

Corporate title (please indicate – Director/Secretary/Trustee – if applicable)

Signature

Date

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D	D		M	M		Y	Y	Y	Y

Authorised Customer 2

Name

Corporate title (please indicate – Director/Secretary/Trustee – if applicable)

Signature

Date

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D	D		M	M		Y	Y	Y	Y

RESOLUTION CAPITAL Office Use Only

KYC requirements have been collected in accordance with standard guidelines.

Adviser Name

Office

Account Number

Solaris Endorsement

Name

Date

<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	/	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
D	D		M	M		Y	Y	Y	Y

Signature

If you have any queries in relation to the Funds, please contact the Fund Administrator on:

FundBPO Pty Ltd

GPO Box 4968

Sydney NSW 2001

Tel. 1300 133 451 or +61 2 9247 3326

Fax. +61 2 9251 3525

Office hours are Monday to Friday 8.30am - 5.30pm Sydney, Australia time.

Further information on Resolution Capital and the Funds can also be found online at www.resolutioncapital.com.au