



Responsible Entity
CPT Manager Limited
ABN 37 054 494 307

Centro
Properties Group

Centro Properties Limited
ABN 45 078 590 682
Centro Property Trust
ARSN 091 043 793

All Registry communications to:
Link Market Services Limited
Locked Bag A14
Sydney South NSW 1235 Australia
Telephone: 1300 303 991
+61 2 8280 7111
Facsimile: (02) 9287 0303
ASX Code: CNP

Email: registrars@linkmarketservices.com.au
Website: www.linkmarketservices.com.au

NAME AND ADDRESS OF SECURITYHOLDER

SRN/HIN

A REINVESTMENT PLAN (DRP) – TOP UP APPLICATION

Please use a BLACK pen. Print CAPITAL letters inside the shaded areas.

A B C

1 2 3

This form is to be completed where the Securityholder proposes to TOP UP their participating distribution in order to participate in the Centro Properties Group DRP.
I/We being the above named holder of registered securities wish to TOP UP our participating distribution as indicated below.
I/We hereby agree to be bound by the rules of the DRP.
I/We acknowledge that if the TOP UP amount provided is insufficient when added to my/our participating distribution to meet the minimum reinvestment amount required, that it will not be applied to the reinvestment alternative and will be returned along with the distribution.

TOP UP If your distribution does not meet the minimum reinvestment requirement (if applicable), you will need to TOP UP by making an additional investment. All Investors may TOP UP in addition to their distribution entitlement to the permitted maximum. TOP UP's can only be made by cheque.

NOTE: Cheques must be received by the election date. Please make cheque(s) payable to CPT Manager Limited.

Please attach your cheque to this form and complete the cheque details below. Once completed, please return with DRP form.

Please specify TOP UP amount. **A\$** _____

Cheque 1

Cheque number _____ BSB _____ Account number _____

Drawer Name _____

Cheque 2 (if applicable)

Cheque number _____ BSB _____ Account number _____

Drawer Name _____

B SIGNATURE(S) OF SECURITYHOLDER(S) – THIS MUST BE COMPLETED

Securityholder 1 (Individual)

Joint Securityholder 2 (Individual)

Joint Securityholder 3 (Individual)

Sole Director and Sole Company Secretary/Director (delete one)

Director/Company Secretary (delete one)

Date ___/___/___

Signing Instructions: This form should be signed by the securityholder. If a joint holding, all securityholders should sign. If signed by the securityholder's attorney, the power of attorney must have been previously noted by the registry or a certified copy attached to this form. If executed by a company, the form must be executed in accordance with the securityholder's constitution and the *Corporations Act 2001* (Cwlth) (or for New Zealand companies, the *Companies Act 1993*).

Privacy Clause: Link Market Services Limited advises that Chapter 2C of the *Corporations Act 2001* requires information about you as a securityholder (including your name, address and details of the securities you hold) to be included in the public register of the entity in which you hold securities. Information is collected to administer your securityholding and if some or all of the information is not collected then it might not be possible to administer your securityholding. Your personal information may be disclosed to the entity in which you hold securities. You can obtain access to your personal information by contacting us at the address or telephone number shown on this form. Our privacy policy is available on our website (www.linkmarketservices.com.au).

