

Account amendments



Please tick where appropriate

- change name (sections 1, 2, 16 and 17)
- change address (sections 1, 3, 16 and 17)
- change pension payment details (sections 1, 4, 16 and 17)
- select, change, or cancel regular withdrawal facility (sections 1, 5, 16 and 17. Section 9 optional)
- change or cancel automatic re-weighting facility (sections 1, 6, 16 and 17)
- select or cancel automatic income distribution facility (sections 1, 7, 16 and 17. Section 9 optional)
- change nominated bank details for payments (sections 1, 9, 16 and 17)
- select or cancel reinvestment of earnings (sections 1, 10, 16 and 17)
- change my Select Margin Loan interest details (sections 1, 8, 16, and 17)
- change sell down priority (sections 1, 10, 16, and 17)
- change ongoing adviser remuneration (sections 1, 11, 16, and 17)
- select, change, or cancel Adviser review fee (sections 1, 12, 16, and 17)
- nominate a fund for cash sweep (Access only) (sections 1, 13, 16 and 17)
- Tax File Number notification (sections 1, 14, 16, and 17)
- change of adviser (sections 1, 15, 16, and 17)

Please note if you wish to make any changes to your current investment allocation, please complete an Additional Investments form.

Please complete these instructions in BLACK INK using BLOCK letters. Return to us at:

GPO Box 2567W
Melbourne Victoria 3001
Tel: 1800 653 710
Fax: 03 9869 1595

1. Investor details

Investor account name

Investor account number

Account type

- | | |
|---|--|
| <input type="checkbox"/> Navigator Personal Investment Plan | <input type="checkbox"/> Navigator Personal Retirement Plan – Superannuation Service |
| <input type="checkbox"/> Navigator Access Investment | <input type="checkbox"/> Navigator Personal Retirement Plan – Pension Service |
| <input type="checkbox"/> Navigator Access Super | <input type="checkbox"/> Navigator Access Pension |

2. Change of name

Please change my name to:

Title

First name

Surname

Please provide a certified copy of the relevant Marriage Certificate or Deed Poll and sign the authorisation section in your new and old names.

3. Change of address

Please change my:

residential address

postal address

Address

Suburb

State

Postcode

Phone number (BH)

(AH or Mob.)

Email

4. Change pension payment details

I require an **annual** amount of \$, .00 Minimum amount

Note: In instances where the pension commences part way through the year, we will automatically pro-rata the annual amount.

To be paid Monthly Quarterly Half-yearly Yearly

Starting from / / Annual increase %

5. Regular withdrawal facility (Personal Investment Plan only)

I require an **annual** amount of \$, .00

To be paid Monthly Quarterly Half-yearly Yearly

Starting from / / Payment escalation % per annum

OR

I would like to cancel the Regular withdrawal facility effective from / /

6. Automatic re-weighting facility

I would like to make the following changes to the automatic re-weight facility

Change the target weight tolerance to % %

Change the Automatic re-weight frequency to Quarterly Half-yearly Yearly

Suspend the Automatic re-weight facility until / /

OR

I would like to cancel the automatic re-weight facility

16. Authorisation

I/we:

- have read the current Product Disclosure Statement or IDPS Guide applicable to my investment, as well as any additional disclosure documents for the underlying investments; and
- have read and understood the separate terms and conditions outlined in the Select Margin Loan Booklet (if applicable).

Privacy - I understand that by completing this form, I am consenting to my personal information being used and disclosed as outlined in Aviva's privacy policy, which I can obtain by contacting Investor Services or on avivagroup.com.au

Important - If you have not changed your nominated bank details, please place a line through section 9, for security reasons.

Print name

Signature of Investor 1/Authorised Person

Date

Print name

Signature of Investor 2/Authorised Person

Date

17. Adviser details

Adviser name

Contact name (if different)

Contact phone number