

Change of Servicing Adviser Request Form.



This form is to be used to authorise **Integrity Life Australia Limited (Integrity Life)** ABN 83 089 981 073 AFSL 245492 to transfer your Integrity's Here for You life insurance Policies to a new nominated Financial Adviser (Adviser).

Please return this completed form to hello@integritylife.com.au

New Adviser Details

Name of Adviser:

Authorised Rep Number:

Mobile / Office Phone Number:

Email:

Address:

State:

Postcode:

Licensee Name:

AFSL Number:

Integrity Life Dealer Group Code:

Client Approvals to Transfer

Please note that all Policies owned by the Policy Owner(s) listed below will be transferred to the nominated Adviser listed above.

Policy Owner 1	Policy Owner 2
Title:	Title:
Surname:	Surname:
Given name:	Given name:
Position:	Position:
Mobile:	Mobile:
Email:	Email:
Address:	Address:
State:	State:
Postcode:	Postcode:
Date of birth:	Date of birth:
Policy Number(s):	Policy Number(s):

Privacy

Integrity Life collects, uses and discloses your personal and sensitive information during the course of business, the way in which we do this is available in our Privacy Policy at <https://integritylife.com.au/privacy-policy>

Declaration

I have informed my existing Adviser of my decision to change Advisers and understand once the transfer is complete, my existing Adviser:

- will not have access to my Policies;
- will not need to review my Cover based on my needs; and
- will not be remunerated for my Policies by Integrity Life.

I understand I should seek advice in line with my changing needs and my new Adviser will:

- have access to my Policies; and
- receive remuneration in relation to my Policies.

I understand that:

- If my Adviser is not currently registered with Integrity Life, there may be a delay with actioning my request.
- If Integrity Life is unable to proceed with actioning my request, they'll notify me in writing as to the reasons why.

Signing instructions: If this authority relates to multiple policies that are owned by different Policy Owners each relevant Policy Owner needs to sign this authority form.

If a Policy Owner is a company (including a corporate trustee), the form should be signed on its behalf by:

- Two (2) Directors; or
- One (1) Director and a Company Secretary; or
- The Director for a proprietary company that has a sole director who is also the sole company secretary.

If the Policy Owner is one (1) or more individual trustees, this form should be signed by all individual trustees.

Policy Owner 1

Policy Owner 2

Name:

Name:

Signature:

Signature:

Date:

Date:

Adviser Name:

Signature:

Date:

Please return this completed form to hello@integritylife.com.au