

## **Change of Adviser Form**

## 01. Introduction

The Change of Adviser form should be completed by the Member and, where applicable, the Adviser. It should be returned in conjunction with any other documentation required by the Investment company.

Please ensure that all sections are completed. Failure to provide all relevant information and supporting documentation may result in a delay in the instruction being processed.

02. Member Details				
Surname	Forename(s)	Date of Birth		
Underlying Investment Platform		Plan Number		
03. New Professional Ac	lviser Details			
I wish to appoint a new Profes	sional Adviser as per k	below details.		
Company Name		Adviser's Name		
Email Address		Telephone Number		
		_]		
Business Address				
	- 1 ···			
04. Professional Advise	Declaration			
We confirm that:  • We confirm that there are no	significant changes that	at iPensions Group should be made aware of since the signing		
of the Terms of Business.				
• If Terms of Business are not a change to be processed.	already in place, we unc	derstand that Terms of Business must be finalised for this		
<ul> <li>We are suitably qualified to print in which the advice is being</li> </ul>		et the licensing and regulatory requirements of the jurisdiction		
<ul> <li>All fees have been disclosed</li> </ul>				
Adviser's Name		Adviser's Signature		
Date				

05. New Investment Adviser Details		
Same as Professional Adviser?	Yes	No
If No, please provide details.		
Company Name	Adviser's Name	
Business Address		
Do you wish the Trustee to consider providing discretionary		
control to your Investment Adviser?	Yes	No
06. Investment Adviser Declaration		
<ul> <li>We confirm that there are no significant changes that ing of the Terms of Business.</li> <li>If Terms of Business are not already in place, we under change to be processed.</li> <li>We are suitably qualified to provide advice and meet in which the advice is being provided.</li> <li>All investment fees have been disclosed to the Members of t</li></ul>	erstand that Terms of Busing the licensing and regulate oer, including any charges Member will be within the regulations issued in respec	ness must be finalised for this ory requirements of the jurisdiction for the underlying investments. Investment Guidelines issued by
Adviser's Name  Date	Adviser's Signature	
The investment company may require the Adviser to sign returned to iPensions Group for counter signing in order		-
07. Member Declaration		
Signature	Print Name	
	Date	