

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 Adviser Details

I wish to appoint a new Professional Adviser as per below details.

| Company Name | Adviser's Name |
|------------------|------------------|
| Email Address | Telephone Number |
| Business Address | |

04. Professional Adviser Declaration

We confirm that:

- We confirm that there are no significant changes that iPensions Group should be made aware of since the signing of the Terms of Business.
- If Terms of Business are not already in place, we understand that Terms of Business must be finalised for this change to be processed.
- We are suitably qualified to provide advice and meet the licensing and regulatory requirements of the jurisdiction in which the advice is being provided (the adviser firm needs to provide the name of the regulator in the jurisdiction the client is residing and provide the registration number or certificate to confirm authorisation).
- All fees have been disclosed to the Member.

| 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 |
| OC Investment Advisor Declaration | | |
| 06. Investment Adviser Declaration | | |

We confirm that:

- We confirm that there are no significant changes that iPensions Group should be made aware of since the signing of the Terms of Business.
- If Terms of Business are not already in place, we understand that Terms of Business must be finalised for this change to be processed.
- We are suitably qualified to provide advice and meet the licensing and regulatory requirements of the jurisdiction in which the advice is being provided.
- All investment fees have been disclosed to the Member, including any charges for the underlying investments.
- We confirm that any investment advice given to the Member will be within the Investment Guidelines issued by iPensions Group as varied from time to time and any regulations issued in respect of pension assets.

| Adviser's Name | Adviser's Signature |
|----------------|---------------------|
| | |
| Date | |
| | |
| | |

The investment company may require the Adviser to sign their specific form too, therefore kindly ensure this is also returned to iPensions Group for counter signing in order for the change in agency to take effect.

07. Member Declaration

Signature

Print Name

Date