



# Updating your account details

MLC MasterKey Business Super  
MLC MasterKey Personal Super

We can only accept your request if the form is correctly completed.

## 1. Your current details

Account number	Customer number (if known)	Contact telephone (business hours)
<input type="text"/>	<input type="text"/>	<input type="text"/>
Title	First name	
Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="text"/>	<input type="text"/>	
Middle name	Family name	
<input type="text"/>	<input type="text"/>	
Date of birth (DD/MM/YYYY)*	Email	
<input type="text"/>	<input type="text"/>	

\*If you are updating your date of birth you will need to enclose an original certified copy of your identification. For more information on acceptable ID and a list of certifiers refer to the Proof of Identity Guide on [mlc.com.au](http://mlc.com.au)

## 2. Your changes

Please select and complete **the sections where you want to add or make changes** then sign **Section 10** to authorise the changes.

- |                             |                          |                    |
|-----------------------------|--------------------------|--------------------|
| Change your name            | <input type="checkbox"/> | Complete Section 3 |
| Change your address         | <input type="checkbox"/> | Complete Section 4 |
| Change your contact details | <input type="checkbox"/> | Complete Section 5 |
| Tax File Number (TFN)       | <input type="checkbox"/> | Complete Section 6 |
| Authorised representative   | <input type="checkbox"/> | Complete Section 7 |
| Financial adviser details   | <input type="checkbox"/> | Complete Section 8 |
| Client Linking              | <input type="checkbox"/> | Complete Section 9 |

For Adviser Service Fee changes, please speak with your financial adviser and complete the Adviser Service Fee form available at [mlc.com.au/asfconsentform](http://mlc.com.au/asfconsentform)

For beneficiary nominations and to make changes to your existing or future investments, please complete the Beneficiary Nomination form and/or Switch and Investment Strategy form available at [mlc.com.au/forms\\_and\\_brochures](http://mlc.com.au/forms_and_brochures)

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### 3. Change your name

Title	First name
Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other <input type="text"/>	<input type="text"/>
Middle name	Family name
<input type="text"/>	<input type="text"/>

Please provide an original certified copy of your marriage certificate, change of name certificate or divorce decree. We can only accept a marriage certificate issued by the appropriate State or Territory Registry of Births, Deaths and Marriages. Certification that the document is a true and complete copy of the original must appear on each page with an original signature and the title of the person who endorses the document. We can't accept change of name documents via fax or email. If these documents are not showing your previous and current name, we require a copy of your current photo identification and statutory declaration certified stating both names belong to the same person.

#### Previous signature

<input type="text"/>	Date (DD/MM/YY)
X	<input type="text"/>

#### New signature

<input type="text"/>	Date (DD/MM/YY)
X	<input type="text"/>

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### 4. Change your address

#### Residential/Company address

(Your residential address can't be a PO Box)

Unit number	Street number	Street name	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Suburb	State	Postcode	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

#### Postal address

(If different to your residential address)

Unit number	Street number	Street name	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Suburb	State	Postcode	Country
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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### 5. Change your contact details

Mobile phone number	Business telephone
<input type="text"/>	<input type="text"/>

Home telephone
<input type="text"/>

Email
<input type="text"/>

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### 6. Tax file number (TFN)

Do you wish to supply your Tax File number (TFN)?

No  I have read the important information on page 3 on providing my TFN and do not wish to provide it.

Yes  I have read the important information on page 3 on providing my TFN and wish to provide my TFN.

Tax File Number (TFN)

<input type="text"/>
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## 6. Tax file number (TFN) continued

You don't have to provide your TFN and it isn't an offence if you don't, however if you don't:

- personal contributions will be rejected
- additional tax will apply to employer and salary sacrifice contributions
- any withdrawals may be taxed at the highest marginal tax rate inclusive of the Medicare levy.

Your TFN is confidential, and the Trustee is authorised to collect and disclose your TFN under the Superannuation Industry (Supervision) Act 1993 and Privacy Act. The Trustee must use your TFN only for lawful reasons, in paying out monies, identifying or combining superannuation benefits. Your TFN may be disclosed to the Trustee or another Fund or RSA provider if your benefits are transferred, unless you request in writing for it not to be disclosed.

## 7. Authorised representative

Complete this question if you want to appoint another person to access information or transact on your account. Your authorised representative is not permitted to perform any other actions in respect of your account, eg make withdrawal or roll over from your account.

Do you wish to?

- Establish a **new** authorised representative on your account.
- Replace an **existing** authorised representative on your account.

What level of authority will this person have on your account?

- My authorised representative is able to make enquiries only on my account.
- My authorised representative is able to make enquiries and transact on my account.

Applicants must be at least 18 years of age.

Existing MasterKey Customer number (if known)

Company (if applicable)

Title

Mr  Mrs  Miss  Ms  Other

First name

Middle name

Family name

Date of birth of authorised representative  
(DD/MM/YYYY)

Email

### Residential address

Your residential address can't be a PO Box

Unit number

Street number

Street name

Suburb

State

Postcode


Country

Mobile phone number

Business telephone

Home telephone

### Signature of authorised representative

	Date (DD/MM/YY)
	<input type="text"/>

## 8. Financial adviser details

### Use this section if you are:

- nominating an adviser not attached to your account.
- a MasterKey Personal Super member and want to change your financial adviser details

### Adviser to complete

You must obtain and document the client's clear consent where the adviser service fee is received by your Licensee and subsequently paid to you.

Name

Division number

Adviser number

 - 

Business telephone

Facsimile

Email

Financial adviser's stamp

## 9. Client linking

Please complete the following details if you want to link with one other investor with an eligible MLC MasterKey account, for the purpose of receiving the benefits of a fee refund. This is a refund of the Administration fee.

If you're eligible, the refund will automatically be applied to the relevant accounts. Your MLC MasterKey Business Super account or MLC MasterKey Personal Super account is counted towards the calculation of the refund, but the refund is only applied to other eligible MLC MasterKey accounts that you have.

Please see the relevant **How to Guide** at [mlc.com.au](http://mlc.com.au) for more information on eligible MLC MasterKey products.

Name of investor you'd like to link to

We may accept the nomination of a family trust, superannuation fund or business.

Address

Unit number

Street number

Street name

Suburb

State

Postcode

Country

Customer number of nominated investor

Date of birth of nominated investor (if applicable) (DD/MM/YYYY)

Relationship to you

Spouse

De facto

Parent

Trust

Child

Sibling

Business

Signature of person or representative of the business or trust nominated above.

	Date (DD/MM/YY)
	<input type="text"/>

## 10. Your agreement and declaration

### Marketing consent

We always seek to better understand and serve your financial, e-commerce and lifestyle needs so we can offer you other products and services that aim to meet those needs as well as promotions or other opportunities. This applies to each organisation within Insignia Financial Ltd and its related bodies corporate (Insignia Financial Group including its financing, funds management, financial planning, superannuation, insurance, broking and e-commerce organisations).

We request your consent to Group marketing activities. By giving your consent, that you agree to receiving information about the products and services we have described, including by telephone calls to the numbers provided by you in this application or numbers you may provide later, and by email if you have provided us with an email address. For this purpose, we may need to use and disclose your personal information amongst the Group, to your financial adviser, if any, and to service providers (for example, posting services). Your consent therefore includes the authority to use and disclose your personal information as described. We will not disclose health information.

Your consent will not change any specific product or service consent that you have given or will give in the future (for example, for a loyalty program or online direct marketing).

Do we have your consent? Yes  No

If you do not answer your consent will be presumed.

Your consent will continue until you withdraw it. You can withdraw your consent at any time by contacting the MLC Service Centre on **132 652**.

### Privacy

I acknowledge that I have access to Insignia Financial Group's Privacy Policy and agree that any member of the Insignia Financial Group may collect, use, disclose and handle my personal information in a manner set out in the Group's Privacy Policy available on **mlc.com.au**

### Member acceptance

I have received and read the current **Product Disclosure Statement**, available on **mlc.com.au**, and agree to be bound by the provisions of the Trust Deed. I understand this will form the basis of the contract between myself and the Trustee. I am eligible to contribute to MLC Super Fund ABN 70 732 426 024 or have contributions made on my behalf. I acknowledge that it is my responsibility to be fully informed about any investment I consider for inclusion in my portfolio at all times.

### Understanding investment risk

An investment in MLC MasterKey Business Super and Personal Super is subject to investment risk including possible delays in repayment and loss of income and capital invested.

I acknowledge and accept that where I have invested into an illiquid investment option or an investment option I have has become illiquid, then the Trustee may take longer than 30 days in which to transfer out my investment option.

### Offer within Australia

I understand that this offer is made in Australia in accordance with Australian laws and my account will be regulated by these laws.


### Cooling-off

I understand that if this investment does not suit me, I have 14 days after opening the account to advise the Trustee to close my account. For further information on cooling-off, please refer to the **How to Guide** at **mlc.com.au**

### Notification of changes

I understand that I will not be given advance notice of any product changes that are not materially adverse. I am aware that any non-material changes will be available at **mlc.com.au** and I can obtain a paper copy of these changes on request, free of charge.

### Signature of Applicant or Power of Attorney

	Date (DD/MM/YY)					
	<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>					

**If signed under the Power of Attorney:** Attorneys must attach a certified copy of the Power of Attorney. The Attorney hereby certifies that he/she has not received notice of any limitation or revocation of his/her Power of Attorney and is also authorised to sign this form.

Power of Attorney documents can't be accepted via fax.

## Send us your form

Please mail or email your completed, signed and dated form to:

**MLC**  
**PO Box 200**  
**North Sydney NSW 2059**

**Email: [contactmlc@mlc.com.au](mailto:contactmlc@mlc.com.au)**

If you have any questions, please speak with your financial adviser, call us on **132 652** Monday to Friday between 8 am and 6 pm (AEST/AEDT) or visit **mlc.com.au**