North

Change of details for Super Trust/Formal Trust/Company accounts

Information sheet

When to use this form

Use this form to change the Trust address or contact details.

You may also change your address and contact details online on **northonline.com.au**.

Change of details options

The information below will assist you when completing this form.

Trust details

Complete Trust name and existing contact details in this section.

Change of address

Provide both the new business and postal address if different.

Change of contact details

Provide the new contact numbers and email address.

Authorisation

Complete this section to confirm:

- you have read and understood the information provided on this page
- the information you have provided is true and correct.

Privacy and confidentiality

We collect and hold personal information to enable us to provide financial products and services to customers, and to help customers with their ongoing financial needs. If we do not collect this information, we may not be able to provide these services and products.

We may also need to collect personal information in order to meet our obligations under various laws.

We may also use personal information for other related purposes such as enhancing our customer service and product options, and informing customers about opportunities which may be of benefit to them through Direct Marketing. Customers can advise us they do not wish to receive this information via our general customer contact channels.

Personal information may be shared with business areas or companies within the AMP goup. We may also provide information to local and overseas entities which provide AMP with administrative, financial, research or other services, other insurers and credit providers, financial planners, brokers and other organisations authorised by AMP to assist in reviewing customer needs. In all cases we take steps to make sure your privacy is protected.

We may also disclose personal information to courts, tribunals and disputes resolution bodies, government agencies, and other bodies we are required to provide information to under the law.

The AMP Privacy Policy (available at **amp.com.au**) provides more information about how we manage and protect the personal information we hold about individual. It sets out how you can access and update the information that AMP holds about you, and our processes for resolving privacy related enquiries and complaints.

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Please retain this information sheet for your records — do not return it with your completed form(s).

North

Change of details

Use this form to make changes to a Super Trust/Formal Trust/Company address and/or contact details. Please print in CAPITAL LETTERS and place a cross **X** in any applicable boxes.

1. Change of details options						
What do you want to	do?					
☐ Change Trust address			> Complete sections 1, 2, 3, 5 and 6.			
☐ Change Trust contact details			> Complete sections 1, 2, 4, 5 and 6.			
	IT 1/6	1.4.9				
2. Super Trust/Form						
Super Trust/Formal Tru	st/Company name	2				
Title	Date of birth		Title	Date of birth		
		Title	D D M M	/		
Surname			Surname	D D W W		
Given name(s)			Given name(s)			
Business address			Business address			
Suburb	State	Postcode	Suburb	State	Postcode	
Postal address (if different from above)			Postal address (if different from above)			
Suburb	State	Postcode	Suburb	State	Postcode	
Suburb	State	Postcode	Subuib	State	rostcode	
Please use a separate						
Formal Trust/Compar	ny details are requi	red.				

3. Change of address	
New business address	
Suburb	State Postcode
New postal address (if differ	rent from above)
rett postar dadress (ii dirret	
Suburb	State Postcode
Suburb	State Posicode
4. Change of contact deta	ails
Contact phone number	Mobile number
()	7
Email	
Eman	
5. Authorisation	
true and correct. - I/we have provided the rechanges in this form.	ormation I/we have provided is elevant documents to support information and understand
Authorised 1 signature	
Authorised 1 name	
Additionsed 1 harrie	
Authorised 1 signature	
X	
Date	
D D M M Y Y Y Y	
Authorised 2 signature (if	applicable)
Authorised 2 name	
Authorised 2 signature	
X	
Date	

6. Checklist

- ☐ Have you completed all relevant sections of this form?
- ☐ Have you signed this form where indicated?

Where to send this form

Mail, email or fax this completed form to:

North Service Centre

GPO Box 2915 MELBOURNE VIC 3001

Fax 1800 071 329

northonline.com.au north@amp.com.au

Any questions?

1800 667 841