

Service request form Changes to personal client details

MS.SRF.0221.01

Mason Stevens Limited ABN 91 141 447 207 AFSL 351578

Mason Stevens Super ABN 34 422 545 198 RSE Registration Number R1004168

Trustee: Diversa Trustees Limited ABN 49 006 421 638 RSE License Number L0000635 AFSL License 235153

Please use this form if you would like to update any of the following personal details: 1. Address 2. Email 3. Telephone number 4. TFN / Tax residency status 5. Name Checklist: Signed and dated by the client Certified copies of supporting documentation provided (if applicable). Please keep all original documents for your own records Advisers to submit this form online as a service request (Adviser home > Work in progress > Service requests) Client details Client's full name Account number Client ID (optional) Individual POA / Representative Director Capacity Trustee ONLY COMPLETE THE SECTIONS YOU WOULD LIKE TO CHANGE Address change **Previous address** Mailing address Registered address Residential address Suburb State Postcode Country **New address** Residential address Mailing address Registered address Suburb State Postcode Country

Email change	2
Previous email address	New email address
Telephone number change	3
Previous telephone number	New telephone number
TFN / Tax residency change	4
Tax ID number	Tax residency country
Name change	5
Please note, you will need to provide us with certified copies of certification requirements. Reason for name change: Marriage – please attach a certified copy of your birth ce Deed poll – please attach a certified copy of your birth cert Divorce – please attach a certified copy of your birth cert Incorrect spelling of name – please attach a certified cop Change of business name – ASIC change of business nate Existing name	ertificate and marriage certificate ertificate and your change of name registration certificate tificate and your diveroce or new marriage certificate by of either your driver's licence or passport
Existing signature	
New name	
	e updated name (and signature) (located in the literature library)
Authorised signatory form	

Certified copies of documents

Certified copies (no more than 12 months old) must have the certifier's signature, printed name, date, qualification and the following statement: "I, [full name], as [category of persons listed below], certify that this [name of document] consisting of [x] pages, is a true and correct copy of the original". If the number of pages is not stated, each individual page needs to be certified as a true and correct copy of the original.

Documents may be certified by:

- » A permanent employee of Australia Post with two or more years of continuous service
- » Australian Consular Officer or Australian Diplomatic Officer
- » A lawyer, judge, or magistrate
- » A police officer
- » An officer with, or authorised representative of, a holder of an Australian Financial Services Licence (AFSL), having five or more years continuous service with one or more licensees
- » A finance company officer with two or more years of continuous service (with one or more finance companies)
- » A Justice of the Peace
- » A notary public officer

Client's signature

- » CEO of a Commonwealth court
- » A member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants with two or more years of continuous membership

Full name	
Signature	
Date	
DD / MM / YYYY	

Note for advisers:

Please log in online and submit this form via the Service Request screen. (Adviser home > Work in progress > Service requests)