

Updating your account details

MLC Nominees Pty Limited
ABN 93 002 814 959
AFSL No. 230702 RSE L0002998

The Universal Super Scheme R1056778
ABN 44 928 361 101
Superannuation Fund Number 281 440 944

IMPORTANT INFORMATION

This form can be used to update your account details and/or change your investments.

Please use the table below to determine what sections of this form you would like to complete.

Section	Question(s)	Page
Change of name	4	1
Change of address	5	2
Change of contact details	6	2
Supplying your tax file number	7	2
Authorised representative	8	2
Change of investment options	9, 10, 11, 12	3
Beneficiary nomination	13	4
Adviser service fee	14 and 15	5
Linking for MasterKey fee refunds	16	5

For your request to be accepted, you must sign the declaration on page 6.

Providing your Tax File Number

Providing your tax file number (TFN) is optional. We are required to tell you the following things before you provide your TFN:

- your TFN is confidential,
 - we are authorised to collect your TFN(s) by tax laws, the Superannuation Industry (Supervision) Act 1993 and the Privacy Act 1988.
- You should be aware that:
- you are not obliged to provide a TFN however if you do not provide your TFN we will hold your money in trust and contact you or your financial adviser to obtain your TFN. If we do not receive your TFN within 14 days we will return any contributions or rollovers,
 - we are allowed to use your TFN only for lawful purposes, in particular paying out monies, identifying and amalgamating superannuation benefits for surcharge purposes and for other approved purposes. The approved purposes and consequences of not providing a TFN may change in the future as a result of legislative changes,
 - your TFN may be disclosed to the trustee of another Fund or RSA provider if your benefits are transferred, unless you request in writing that it not be disclosed to any other trustee and to the Commissioner of Taxation but will not otherwise be disclosed to any person or body.

Please provide responses in clear PRINT.

YOUR ACCOUNT DETAILS

1 Account number (MANDATORY)

MLC MasterKey Customer Number (if known)

2 Surname (Family name) (MANDATORY)

Given name(s) (MANDATORY)

3 Date of birth / / (MANDATORY)

CHANGE OF DETAILS

4 Change of name

Please provide your new name

Mr Mrs Miss Ms Other

Surname (Family name)

Given names

Please attach evidence of your change of name and date of birth, such as an original certified copy of your marriage certificate or deed poll.

Please sign using your previous and new signatures to enable MLC to cross-check your request.

Previous signature

New signature

5 Change of address

Residential address

.....

.....

Postcode

Postal address (if different to above)

Note: your postal address cannot be your financial adviser's address.

.....

.....

Postcode

6 Change of contact details

Home phone ()

Work phone ()

Mobile

Fax ()

Email

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

No I have read the important information on page 1 on providing my TFN and do not wish to provide it.

Yes I have read the important information on page 1 on providing my TFN and wish to provide my TFN

Tax File Number

AUTHORISED REPRESENTATIVE

8 Please complete the following section if you wish to appoint an Authorised Representative in respect of your account (ie to access information, switch investments and/or contribute).

An Authorised Representative is **not** permitted to perform any other actions in respect of your account (eg make a 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.

Surname of the Authorised Representative (Family Name) (MANDATORY)

Given name(s) (MANDATORY)

Date of Birth (MANDATORY)

/
/

Company name (if applicable)

MLC MasterKey Customer Number (if existing customer)

Residential address

.....

.....

Postcode

Home telephone ()

Work telephone ()

Facsimile ()

Mobile

Email

Signature of Authorised Representative

X
Date / /

YOUR BENEFICIARY NOMINATION

13 Do you wish to make a beneficiary nomination?

No **Go to Question 14**

Yes **Please tick only one of the options below:**

A Non-lapsing binding death benefit nomination **B** Non-binding benefit nomination

If you have ticked option A above, your nomination will not be accepted unless two witnesses have signed the witness declaration below.

	Name of the beneficiary (Please print full name)	Date of birth	Relationship to you	Portion of total benefit
1			<input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Financial dependant <input type="checkbox"/> Interdependency relationship	%
2			<input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Financial dependant <input type="checkbox"/> Interdependency relationship	%
3			<input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Financial dependant <input type="checkbox"/> Interdependency relationship	%
4			<input type="checkbox"/> Spouse <input type="checkbox"/> Child <input type="checkbox"/> Financial dependant <input type="checkbox"/> Interdependency relationship	%
5	Legal Personal Representative	Not applicable	Not applicable	%
Total				100%

The sum of each of your portions of total benefit must equal 100%.
These portions are restricted to whole numbers.


Agreement and declaration:

I have read and understand the information provided in the Product Disclosure Statement on beneficiary nominations.

I request that the Trustee accept my beneficiary nomination for my MLC MasterKey Business Super / MLC Masterkey Personal Super account.

I understand I should review my nomination regularly and as my circumstances change (eg marriage, having children, or any other life changing event) to ensure my nomination is always up to date.

Signature of applicant

 Date / /

Witness declaration

I declare that:

- I am over 18 years of age;
- I am not a nominated beneficiary of the Applicant and I am not one of the beneficiaries named above; and
- This form was signed and dated by the Applicant in my presence.

Witness 1

Surname

Given name

Signature of witness

 Date / /

Witness 2

Surname

Given name

Signature of witness

 Date / /

ADVISER SERVICE FEE

14 Do you wish to pay your adviser for advice provided in relation to your account?

No **Go to question 16**

Yes **Complete the details below**

Note: Any Adviser service fee agreed between you and your adviser must comply with laws governing the use of superannuation investments and can only relate to advice and service in regard to your MLC MasterKey Business Super / MLC MasterKey Personal Super account. The fee must not relate to advice or service provided in relation to any matter that is not directly connected with your account. For further information refer to the 'Fees and costs' section of the MLC MasterKey Business Super Member Guide.

Do you wish to pay your Plan adviser that is attached to your account*?

No **Go to question 15**

Yes **Complete the details below and go to question 16**

[^] This would be the adviser listed on your welcome kit or most recent annual statement and is referred to as a Plan adviser.

I request until further notice from me that, MLC deduct an Adviser service fee of the following amount from my account to pay my Plan adviser for advice provided in relation to my account.

Percentage based fee % pa* of my account balance

OR

Dollar based fee \$ pa*

AND/OR

One off fee \$ *

* The amount payable will be inclusive of GST.

15 Please complete the below if you want to pay an adviser that is not attached to your account.

I request that MLC deduct an Adviser service fee of the following amount from my account to pay my financial adviser, listed below, for advice provided in relation to my account.

One off fee \$ *

* The amount payable will be inclusive of GST.

Adviser to complete:

Name of financial adviser

Division

Financial Adviser Number

Business telephone

Fax

 ()
 ()

Email Address

FINANCIAL ADVISER'S STAMP

LINKING FOR MASTERKEY FEE REFUNDS

16 Complete the following details if you wish to link with another MasterKey Investor for the purpose of receiving the benefits of a MasterKey fee refund.

Note: You can only link with one other MasterKey Investor.

Name of nominated person or business for linking

Date of birth of nominated person

 / /

Residential address

Postcode

MLC MasterKey Customer Number of nominated person/business

Relationship to you

Spouse De facto Parent Trust
 Child Sibling Business

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

Date / /

DECLARATION

Marketing consent

So that we can offer you the best products to meet your needs we need your consent to use your personal information for marketing activities. Further information on the types of activities we may engage you in is on mlc.com.au. You can change your consent at any time. If you do not tick a box your consent will be assumed.

Do we have your consent? Yes No

Privacy

I acknowledge that I have access to NAB privacy policy and agree that any member of the NAB 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 the current Product Disclosure Statement 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 the The Universal Super Scheme or have contributions made on my behalf.

Understanding investment risk

I understand that my investment does not represent a deposit with or a liability of the Trustee, NAB Limited, or other member companies of the NAB Group. An investment in MLC Super is subject to investment risk including possible delays in repayment and loss of income and capital invested.

Member declaration

As far as I am aware, everything I have provided in this form is true, and if there are any changes to this information in the future, I will advise MLC as soon as possible.

Offer within Australia

I understand that this offer is made in Australia in accordance with Australian laws and my super 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 MLC to close my account. For further information on Cooling off, please refer to the 'How to' Guide, available on 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 on mlc.com.au and I can obtain a paper copy of these changes on request, free of charge.

In all cases, please provide your signature below.

Member's signature

	Date / /
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If signed under 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.
- If Power of Attorney was established outside of NSW, we will also require the Power of Attorney document to be certified by a legal practitioner who practices in your state.

Please note: To access information or terms and conditions in the current PDS go online at www.mlc.com.au or talk to your financial adviser.

How to contact us

MLC Service Centre

For more information call the MLC Service Centre from anywhere in Australia on **132 652** or contact your Adviser.

Website

For details on MLC's range of products and services visit mlc.com.au

Postal Address

MLC MasterKey Business Super
PO Box 1315
North Sydney NSW 2059

