

ClearView Retirement Solutions - Authority to Enquire

Complete this form to authorise ClearView Financial Management Limited and its representatives to make inquiries and obtain transaction statements in relation to your non-ClearView investments.

Section A: Personal details

Your Investment number

 : : : : : : :
 Mr Mrs Miss Ms Other

Surname/Company/Partnership

Given name(s)

Residential address

 Postcode

Postal address (if different from above)

 Postcode

Home phone number

 ()

Work phone number

 ()

Email

Section B: Policy details

List details of policy/policies that I authorise my ClearView Financial Adviser and representatives of ClearView to make inquiries.

Name of fund	Membership/ policy number

Section C: Financial Adviser details

Financial Adviser number

ClearView Financial Adviser name

Section D: Authority and Signature(s) of policy owner(s)

I/We authorise my/our ClearView Financial Adviser and/or any identified representatives of ClearView Financial Management Limited:

- To make inquiries on my/our behalf in relation to any ClearView 'Transfer request and authority form' submitted for any of the above mentioned investment policy/policies;
- To obtain transaction statements on my/our behalf on the above mentioned investment policy/policies;
- To make any other inquiries on my/our behalf with respect to the provision of financial advice on the above mentioned investment policy/policies.

Signature 1

X

DATE / /

Signature 2

X

DATE / /

Company Seal (if applicable)

If there is more than one investor, all investors must sign (unless you have previously indicated that only certain signatures were required).

Where a company is an investor, a Company Seal must be used along with two signatures. These signatures can be from two directors or a director and a company secretary.

If signed under Power of Attorney, the Attorney verifies that no notice of revocation of that power has been received.



This form can be posted (no stamp required) to:

ClearView
Client Administration
Reply Paid 4232
Sydney NSW 2001

Facsimiles of this document will not be accepted.



If you have any questions about this form,
please call us on

132 977