

KeyInvest Investment Bonds

Change of Details Form



Please return the completed form to KeyInvest or phone KeyInvest on 1300 658 904.

Member No:

Policy No:

1) POLICY OWNER(S) DETAILS

Policy Owner 1

Title Mr Mrs Ms Miss Dr Other

Surname/Company/Trust Name

Given name(s)

Date of birth If Company, ABN

Policy Owner 2

Title Mr Mrs Ms Miss Dr Other

Surname/Company/Trust Name

Given name(s)

Date of birth If Company, ABN

Contact Details (same as regular withdrawal authority).

I wish to make the following changes to my personal details and/or policy information (tick the relevant boxes):

<input type="checkbox"/>	Change of name	Complete sections	1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>
<input type="checkbox"/>	Change of address	Complete sections	1	<input type="checkbox"/>	2	<input type="checkbox"/>	4	<input type="checkbox"/>
<input type="checkbox"/>	Change of nominated beneficiaries	Complete sections	1	<input type="checkbox"/>	2	<input type="checkbox"/>	5	<input type="checkbox"/>
<input type="checkbox"/>	Set up or change a Regular Savings Plan (RSP)	Complete sections	1	<input type="checkbox"/>	2	<input type="checkbox"/>	6	<input type="checkbox"/>
<input type="checkbox"/>	Set up or change a Regular Withdrawal Plan (RWP)	Complete sections	1	<input type="checkbox"/>	2	<input type="checkbox"/>	7	<input type="checkbox"/>
<input type="checkbox"/>	Application to suspend to RSP or RWP	Complete sections	1	<input type="checkbox"/>	2	<input type="checkbox"/>	8	<input type="checkbox"/>

2) DECLARATION

I/We the policy owner(s), whose signature(s) appear below, hereby understand/acknowledge and agree as follows:

- I/We accept that KeyInvest Ltd may send me/us information about its products or services from time to time.
- I/We understand that I/we may notify you of my/our decision not to receive further information by contacting you directly.
- I declare that the information on this form is true and correct and that the details have been completed by me/us.

Signature of Policy Owner 1

Date

Signature of Policy Owner 2

Date

Company Seal
(if applicable)



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3) CHANGE OF NAME

My name has changed from:

Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Ms	<input type="checkbox"/> Miss	<input type="checkbox"/> Dr	Other	<input type="text"/>
Surname	<input type="text"/>						
Given name(s)	<input type="text"/>						

To:

Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Ms	<input type="checkbox"/> Miss	<input type="checkbox"/> Dr	Other	<input type="text"/>
Surname	<input type="text"/>						
Given name(s)	<input type="text"/>						

New Signature

Previous Signature

Please attach supporting evidence (eg certified copy of marriage certificate or certified copy of Deed Poll etc).

4) CHANGE OF ADDRESS

Previous Contact Details - Residential Address (If supplying post office address, residential address is also required).

Unit No.	<input type="text"/>	Street No.	<input type="text"/>	PO Box	<input type="text"/>
Street Name	<input type="text"/>				
Suburb	<input type="text"/>				
State	<input type="text"/>	Postcode	<input type="text"/>	Country	<input type="text"/>

New Contact Details - Residential Address (If supplying post office address, residential address is also required).

Unit No.	<input type="text"/>	Street No.	<input type="text"/>	PO Box	<input type="text"/>
Street Name	<input type="text"/>				
Suburb	<input type="text"/>				
State	<input type="text"/>	Postcode	<input type="text"/>	Country	<input type="text"/>
Home Phone	<input type="text"/>		Bus/Mobile	<input type="text"/>	
Email	<input type="text"/>		Fax	<input type="text"/>	

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5) CHANGE OF NOMINATED BENEFICIARY (For Life Events Bond, Supersaver and Income Security Fund only)

Beneficiaries can only be nominated where the policy owner(s) is/are also the life/lives insured. This nomination revokes all previous nominations made with respect to this policy.

Beneficiary 1

Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss	<input type="checkbox"/> Other	<input type="text"/>
Surname/Company/ Trust Name	<input type="text"/>				
Given name(s)	<input type="text"/>				
Date of birth	<input type="text" value="DD"/>	<input type="text" value="/"/>	<input type="text" value="MM"/>	<input type="text" value="/"/>	<input type="text" value="YY"/>
					If Company, ABN <input type="text"/>
Unit no.	<input type="text"/>	Street no.	<input type="text"/>		
Street name	<input type="text"/>			Suburb	<input type="text"/>
State	<input type="text"/>	Postcode	<input type="text"/>	Country	<input type="text"/>
Home phone	<input type="text"/>			Bus/Mobile	<input type="text"/>
Email	<input type="text"/>			Fax	<input type="text"/>
	Percentage of total benefit				<input type="text" value=""/>

Beneficiary 2

Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss	<input type="checkbox"/> Other	<input type="text"/>
Surname/Company/ Trust Name	<input type="text"/>				
Given name(s)	<input type="text"/>				
Date of birth	<input type="text" value="DD"/>	<input type="text" value="/"/>	<input type="text" value="MM"/>	<input type="text" value="/"/>	<input type="text" value="YY"/>
					If Company, ABN <input type="text"/>
Unit no.	<input type="text"/>	Street no.	<input type="text"/>		
Street name	<input type="text"/>			Suburb	<input type="text"/>
State	<input type="text"/>	Postcode	<input type="text"/>	Country	<input type="text"/>
Home phone	<input type="text"/>			Bus/Mobile	<input type="text"/>
Email	<input type="text"/>			Fax	<input type="text"/>
	Percentage of total benefit				<input type="text" value=""/>

Beneficiary 3

Title	<input type="checkbox"/> Mr	<input type="checkbox"/> Mrs	<input type="checkbox"/> Miss	<input type="checkbox"/> Other	<input type="text"/>
Surname/Company/ Trust Name	<input type="text"/>				
Given name(s)	<input type="text"/>				
Date of birth	<input type="text" value="DD"/>	<input type="text" value="/"/>	<input type="text" value="MM"/>	<input type="text" value="/"/>	<input type="text" value="YY"/>
					If Company, ABN <input type="text"/>
Unit no.	<input type="text"/>	Street no.	<input type="text"/>		
Street name	<input type="text"/>			Suburb	<input type="text"/>
State	<input type="text"/>	Postcode	<input type="text"/>	Country	<input type="text"/>
Home phone	<input type="text"/>			Bus/Mobile	<input type="text"/>
Email	<input type="text"/>			Fax	<input type="text"/>
	Percentage of total benefit				<input type="text" value=""/>

If you wish to nominate additional beneficiaries, please attach the necessary information. (Total percentage amount of all nominated beneficiaries must equal 100%).

Alternatively, on my death, please pay the proceeds of my policy to my estate

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6) SET UP OR CHANGE TO REGULAR SAVINGS PLAN (RSP)

Please complete this section if you wish to set up or change a Regular Savings Plan. Further information is available in the relevant Product Disclosure Statement (PDS) or Disclosure Statement (DS).

Note: for the Life Events Bond and Supersaver Bond - in order to satisfy the requirements of the 125% rule, the maximum additional investment is 125% of your previous year's contributions. Please check that your new RSP amount does not result in a breach of the 125% rule.

You can request to automatically increase your RSP by a set percentage on the anniversary of your policy each year by

6a) CAPITAL GUARENTEED FUNDS

Investment Fund	New RSP amt	Automatic increase to RSP (Tick your selection)		% Increase pa Max 25%
Supersaver Bond Fund	\$	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
KeyInvest Funeral Bond	\$	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Income Search Fund	\$	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Life Events Bond	Please complete section 6b			

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6b) LIFE EVENTS BOND

No.	Investment Option (min \$25 per investment option)	Fund Manager	New RSP amount	Fund Code KI use only
PART A1 - INDEXED DIVERSIFIED				
1	Conservative indexed	Vanguard	\$	11
2	Balanced indexed	Vanguard	\$	12
3	Growth indexed	Vanguard	\$	13
4	High growth indexed	Vanguard	\$	14
PART A2 - INDEXED SECTOR				
5	Fixed interest indexed	Vanguard	\$	15
6	Australian property securities indexed	Vanguard	\$	16
7	Australian shares indexed	Vanguard	\$	02
8	International shares indexed	Vanguard	\$	17
PART B - DIVERSIFIED				
9	Conservative	Russell	\$	10
10	Balanced	Russell	\$	04
11	Growth	Russell	\$	05
12	High growth	Russell	\$	06
13	Inflation plus assertive	MLC	\$	18
PART C - SECTOR SPECIFIC				
14	Australian cash	Russell	\$	09
15	Term deposit	KeyInvest	\$	01
16	Active cash	Smarter Money	\$	19
17	Fixed interest	Schroder	\$	20
18	Australian property securities	MLC	\$	21
19	Infrastructure	Magellan	\$	22
20	Australian shares	Fidelity	\$	23
21	Australian shares multi	Russell	\$	07
22	Australian shares value	Investors Mutual	\$	24
23	Australian shares industrial	Investors Mutual	\$	25
24	Australian/International shares long-short	Watermark	\$	26
25	Australian shares geared	Perpetual	\$	27
26	International shares multi	Russell	\$	08
27	International shares	Magellan	\$	28
TOTAL LIFE EVENTS BOND			\$	

Deduction Period

Please debit my RSP (if no nomination is made, deductions will be made monthly)

Monthly
 Quarterly
 Half-yearly
 Yearly

Deductions are made on the 15th day of the month or next business day if a weekend or public holiday except Supersaver Bond Fund customers whose deductions are made on the 25th day of the month or next business day if weekend or public holiday.

Automatic Increases to the RSP

Do you want to increase your RSP automatically each policy year?

Yes
 No

Please increase my RSP by % pa (maximum 25%)

Note: The % increase will be applied across all RSP investment options open on the policy anniversary date.

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Nominate Bank Account

Please deduct the total RSP amount nominated in section 6a or 6b to the following bank account

I/We request and advise KeyInvest Ltd (Identification Number 113657) to arrange for any amount KeyInvest Ltd may debit or charge to be debited through the Bulk Electronic Clearing System from an account held at the financial institution identified below

(Note: contributions by credit card are not accepted)

Name of Financial Institution	<input type="text"/>		
Branch	<input type="text"/>		
Account Name	<input type="text"/>		
BSB Number	<input type="text"/>	-	<input type="text"/>
Account Number	<input type="text"/>		
Amount to be Deducted	\$	<input type="text"/>	<input type="text"/>

I/We acknowledge having read and understood the Terms and Conditions governing the debit arrangements as set out in the Direct Debit Request Service Agreement at section 10.

All bank account signatories must sign below.

Signature of Account Holder 1

Date

Signature of Account Holder 2

Date

7) SET UP OR CHANGE TO REGULAR WITHDRAWAL PLAN (RWP)

Please complete this section if you wish to set up or change a Regular Withdrawal Plan. Further information is available in the relevant Product Disclosure Statement (PDS) or Disclosure Statement (DS).

Note: for the Life Events Bond and Supersaver Bond, RWPs in the 10 year period may have personal tax implications. We recommend you get advice from your financial or tax adviser.

You can request to automatically increase your RSP by a set percentage on the anniversary of your policy each year by selecting 'Yes' to the Automatic increase to RSP question in the below tables.

7a) CAPITAL GUARENTEED FUNDS

Investment Fund	New RWP amt	Automatic increase to RWP (Tick your selection)		% Increase pa Max 25%
Supersaver Bond Fund	\$ <input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="text"/>
Income Search Fund	\$ <input type="text"/>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="text"/>
Life Events Bond	Please complete section 7b			

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7b) LIFE EVENTS BOND (Minimum \$100 and \$25 per investment option)

No.	Investment Option (min \$25 per investment option)	Fund Manager	New RWP amount	Fund Code KI use only
PART A1 - INDEXED DIVERSIFIED				
1	Conservative indexed	Vanguard	\$	11
2	Balanced indexed	Vanguard	\$	12
3	Growth indexed	Vanguard	\$	13
4	High growth indexed	Vanguard	\$	14
PART A2 - INDEXED SECTOR				
5	Fixed interest indexed	Vanguard	\$	15
6	Australian property securities indexed	Vanguard	\$	16
7	Australian shares indexed	Vanguard	\$	02
8	International shares indexed	Vanguard	\$	17
PART B - DIVERSIFIED				
9	Conservative	Russell	\$	10
10	Balanced	Russell	\$	04
11	Growth	Russell	\$	05
12	High growth	Russell	\$	06
13	Inflation plus assertive	MLC	\$	18
PART C - SECTOR SPECIFIC				
14	Australian cash	Russell	\$	09
15	Term deposit	KeyInvest	\$	01
16	Active cash	Smarter Money	\$	19
17	Fixed interest	Schroder	\$	20
18	Australian property securities	MLC	\$	21
19	Infrastructure	Magellan	\$	22
20	Australian shares	Fidelity	\$	23
21	Australian shares multi	Russell	\$	07
22	Australian shares value	Investors Mutual	\$	24
23	Australian shares industrial	Investors Mutual	\$	25
24	Australian/International shares long-short	Watermark	\$	26
25	Australian shares geared	Perpetual	\$	27
26	International shares multi	Russell	\$	08
27	International shares	Magellan	\$	28
TOTAL LIFE EVENTS BOND			\$	

Deduction Period

Please process my RWP (if no nomination is made, deductions will be made monthly)

Monthly
 Quarterly
 Half-yearly
 Yearly

Deductions are made on the 15th day of the month or next business day if weekend or public holiday except Supersaver Bond Fund customers whose deductions are made on the 25th day of the month or next business day if weekend or public holiday.

Automatic Increases to the RWP

Do you want to increase your RWP automatically each policy year?

Yes
 No

Please increase my RWP by % pa (maximum 25%)

Note: The % increase will be applied across all RSP investment options to which a RSP is applied, on the policy anniversary date.

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I/We request KeyInvest pay the proceeds of the RWP to the below nominated bank account.

Note: Bank accounts must be in the same name as the policy holders.

Name of Financial Institution	<input type="text"/>		
Branch	<input type="text"/>		
Account Name	<input type="text"/>		
BSB Number	<input type="text"/> - <input type="text"/>	Account Number	<input type="text"/>

8) APPLICATION TO SUSPEND REGULAR SAVINGS PLANS (RSP) OR REGULAR WITHDRAWAL PLANS (RWP)

I wish to permanently stop my RWP RSP

I wish to suspend my:

<input checked="" type="checkbox"/> Regular Withdrawal Plan for my:	<input checked="" type="checkbox"/> Life Events Bond	from	<input type="text"/> / <input type="text"/> / <input type="text"/>	up to and including	<input type="text"/> / <input type="text"/> / <input type="text"/>
	<input checked="" type="checkbox"/> Supersaver	from	<input type="text"/> / <input type="text"/> / <input type="text"/>	up to and including	<input type="text"/> / <input type="text"/> / <input type="text"/>
	<input checked="" type="checkbox"/> Income Security Fund	from	<input type="text"/> / <input type="text"/> / <input type="text"/>	up to and including	<input type="text"/> / <input type="text"/> / <input type="text"/>
<input checked="" type="checkbox"/> Regular Savings Plan for my:	<input checked="" type="checkbox"/> Life Events Bond	from	<input type="text"/> / <input type="text"/> / <input type="text"/>	up to and including	<input type="text"/> / <input type="text"/> / <input type="text"/>
	<input checked="" type="checkbox"/> Supersaver	from	<input type="text"/> / <input type="text"/> / <input type="text"/>	up to and including	<input type="text"/> / <input type="text"/> / <input type="text"/>
	<input checked="" type="checkbox"/> Income Security Fund	from	<input type="text"/> / <input type="text"/> / <input type="text"/>	up to and including	<input type="text"/> / <input type="text"/> / <input type="text"/>
	<input checked="" type="checkbox"/> Funeral Bond	from	<input type="text"/> / <input type="text"/> / <input type="text"/>	up to and including	<input type="text"/> / <input type="text"/> / <input type="text"/>

Note: For the Life Events Bond and Supersaver suspending contributions may affect your ability to make future contributions under the 125% rule. If you make no contributions during a policy year you will not be able to make further contributions without restarting the 10 year period. See the relevant PDS

Signature of Account Holder 1

Date / /

Signature of Account Holder 2

Date / /

9) CONTACT DETAILS

Street Address: KeyInvest Ltd
Level 5, 49 Gawler Place
Adelaide SA 5000

Postal Address: KeyInvest Ltd
PO Box 3340
Rundle Mall SA 5000

Phone: 1300 658 904
Email: info@keyinvest.com.au
Web: www.keyinvest.com.au
Hours of Operation: 8.30am - 5.00pm (CST)

OFFICE USE ONLY

Policy Owner/Member details and signature verified:

Processing of form complete:

Date:

/ /

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10) DIRECT DEBIT REQUEST SERVICE AGREEMENT

Definitions

account means the account held at your financial institution from which we are authorised to arrange for funds to be debited.

agreement means this Direct Debit Request Service Agreement between you and us.

business day means a day other than a Saturday or a Sunday or a public holiday listed throughout Australia.

debit day means the day that payment by you to us is due.

debit payment means a particular transaction where a debit is made.

direct debit request means the Direct Debit Request between us and you (and includes any Form PD-C approved for use in the transitional period).

us or we means KeyInvest Ltd you have authorised by signing a direct debit request.

you means the customer who signed the direct debit request.

your financial institution is the financial institution where you hold the account that you have authorised us to arrange to debit.

1. Debiting your account

- 1.1 By signing a direct debit request, you have authorised us to arrange or funds to be debited from your account. You should refer to the direct debit request and this agreement for the terms of the arrangement between us and you.
- 1.2 We will only arrange for funds to be debited from your account as authorised in the direct debit request. If you have selected automatic increases in the application form we will increase your regular debit amount by the nominated percentage annually from the commencement of the regular debit.
- 1.3 If the debit day falls on a day that is not a business day, we may direct your financial institution to debit your account on the following business day. If you are unsure about which day your account has or will be debited you should ask your financial institution.

2. Changes by us

- 2.1 We may vary any details of this agreement or a direct debit request at any time by giving you at least fourteen (14) days' written notice.

3. Changes by you

- 3.1 Subject to 3.2 and 3.3, you may change the arrangements under a direct debit request by contacting us on 1300 658 904.
- 3.2 If you wish to stop or defer a debit payment you must notify us in writing at least seven (7) days before the next debit day. This notice should be given to us in the first instance.
- 3.3 You may also cancel your authority for us to debit your account at any time by giving us seven (7) days notice in writing before the next debit day. This notice should be given to us in the first instance.

4. Your obligations

- 4.1 It is your responsibility to ensure that there are sufficient clear funds available in your account to allow a debit payment to be made in accordance with the direct debit request.
- 4.2 If there are insufficient clear funds in your account to meet a debit payment:
 - (a) you may be charged a fee and/or interest by your financial institution;
 - (b) you may also incur fees or charges imposed or incurred by us; and
 - (c) you must arrange for the debit payment to be made by another method or arrange for sufficient clear funds to be in your account by an agreed time so that we can process the debit payment.
- 4.3 You should check your account statement to verify that the amounts debited from your account are correct
- 4.4 If Commonwealth Bank of Australia A.B.N. 48 123 123 124 ("CBA") is liable to pay goods and services tax ("GST") on a supply made by the CBA in connection with this agreement, then you agree to pay the CBA on demand an amount equal to the consideration payable for the supply multiplied by the prevailing GST rate.

5. Dispute

- 5.1 If you believe that there has been an error in debiting your account, you should notify us directly on 1300 658 904 and confirm that notice in writing with us as soon as possible so that we can resolve your query more quickly.
- 5.2 If we conclude as a result of our investigations that your account has been incorrectly debited we will respond to your query by arranging for your financial institution to adjust your account (including interest and charges) accordingly. We will also notify you in writing of the amount by which your account has been adjusted.
- 5.3 If we conclude as a result of our investigations that your account has not been incorrectly debited we will respond to your query by providing you with reasons and any evidence for this finding.
- 5.4 Any queries you may have about an error made in debiting your account should be directed to us in the first instance so that we can attempt to resolve the matter between us and you. If we cannot resolve the matter you can still refer it to your financial institution which will obtain details from you of the disputed transaction and may lodge a claim on your behalf.

6. Accounts

- 6.1 You should check:
 - (a) with your financial institution whether direct debiting is available from your account as direct debiting is not available on all accounts offered by financial institutions.
 - (b) your account details which you have provided to us are correct by checking them against a recent account statement; and
 - (c) with your financial institution before completing the direct debit request if you have any queries about how to complete the direct debit request.

7. Confidentiality

- 7.1 We will keep any information (including your account details) in your direct debit request confidential. We will make reasonable efforts to keep any such information that we have about you secure and to ensure that any of our employees or agents who have access to information about you do not make any unauthorised use, modification, reproduction or disclosure of that information.
- 7.2 We will only disclose information that we have about you:
 - (a) to the extent specifically required by law; or
 - (b) for the purposes of this agreement (including disclosing information in connection with any query or claim).

8. Notice

- 8.1 If you wish to notify us in writing about anything relating to this agreement, you should write to
PO Box 3340 Rundle Mall Adelaide SA 5000
- 8.2 We will notify you by sending a notice in the ordinary post to the address you have given us in the direct debit request.
- 8.3 Any notice will be