

Third Party Letter of Authority



Step 1: Your personal details

Indicate account/s to be authorised

Middle name

Last name*

Home address* (must not be a PO Box)

Suburb*

State*

Postcode*

Mobile number*

Daytime contact number



Step 2: Authorised party details

2A: Professional

Company name

AFSL/ABN*

Name of authorised person

Entity type

Financial Planner

Other

Please indicate, eg lawyer, accountant

Phone number



Post the form to
this address.