



## Change of Name Form

Use this form if you are an existing investor and wish to change your name. Do not use this form if you wish to transfer your investment to someone else.

Please complete all sections in BLOCK letters and using a black pen. If you make an error while completing this form, do not use correction fluid, cross out your mistake and initial your changes.

### HOW TO COMPLETE THIS FORM

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- Step 1**      **Ensure that you have completed the following:**
- your account number and account name as it appears on your latest statement in **section 1**
  - your 'Existing Details' in **section 2**
  - your 'Name Change Instructions' in **section 3**
  - signed the form as per the 'Signing Instructions' in **section 4**
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- Step 2**      **Provide the required documents needed to identify and verify the name change.**
- Make copies of your change of name document(s) and arrange for them to be certified.
- Certifying copies**
- You must have someone certify the copies you send to us. The following people can certify:
- If you want to change the way your financial adviser is paid from your investment, the following needs to be completed:
- an officer with, or authorised representative of, a holder of an Australian financial services licence, having two or more continuous year of service with one or more licensees
  - an officer with two or more continuous years of service with one or more financial institutions (for the purposes of the Statutory Declaration Regulations 1993)
  - a Justice of the Peace
  - a Notary public (for the purposes of the Statutory Declaration Regulations 1993)
  - an agent of the Australian Postal Corporation who is in charge of an office supplying postal services to the public
  - a permanent employee of the Australian Postal Corporation with 2 or more years of continuous service who is employed in an office supplying postal services to the public
  - a member of the Institute of Chartered Accountants in Australia, CPA Australia or the National Institute of Accountants
  - a person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described)
  - a Judge of a court
  - a magistrate
  - a chief executive officer of a Commonwealth court
  - a registrar or deputy registrar of a court
  - a Police officer
  - an Australian consular officer or an Australian diplomatic officer (within the meaning of the Consular Fees Act 1955).
- What should the person certifying write?**
- I [name] of [address] being [capacity e.g. Justice of the Peace] certify this and the following [x] pages as a true copy of the original document. [sign] [date]
- Not in English?**
- Documents not in English must be accompanied by an English translation prepared by an accredited translator visit AUSTRAC English language translation policy [here](#) and NAATI [here](#) for more information.

**Step 3****Send your documents to us.**

Before you submit your change of name form, please check that you have:

- signed the change of name form as instructed in **Step 1**
- included the certified and supporting documents required

Please post your signed change of name form and supporting, certified copies of the relevant change of name document(s) to us.

**Send by post:**

Newmark RE Limited

GPO Box 804

MELBOURNE VIC 3001

Scan and email to: [newmark\\_transactions@unitregistry.com.au](mailto:newmark_transactions@unitregistry.com.au)

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## 1. INVESTOR DETAILS

Account number

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Investor name

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## 2. EXISTING NAME

Please provide your existing name and title.

Title

Full given name(s)

Surname

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## 3. NAME CHANGE INSTRUCTIONS

Please complete if you are changing the name of an individual or an individual trustee.

Title

Full given name(s)

Surname

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**Reason for name change** - please mark [X] in the box that applies to the reason for this name change.

☐

Change of name due to marriage

☐

Reverting to maiden/former name

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Change of name due to formal name change

**Please provide one of the following documents:**

- a certified copy of Marriage Certificate (issued by the office of Births, Deaths & Marriages)
- a certified copy of Divorce Decree Absolute
- a certified copy of Change of Name Certificate

**And one of the following:**

- a certified copy of your driver's licence for an Identification in your new name; OR
- a certified copy of your current passport

4. SIGNING INSTRUCTIONS

By completing and signing this form, you:

- authorise us to act according with the instructions on this form
- acknowledge that the instructions on this form supersede all previous instructions received by us, and
- agree to indemnify us from and against all losses, costs, expenses, claims, actions or proceedings brought against us in connection with following your instructions on this form.

**Individual** - where the investment is in one name, the account holder must sign.

**Joint Holding** - where the investment is in more than one name, all of the account holders must sign.

**Companies** - where the company has a sole director who is also the sole company secretary, this form must be signed by that person. If the company (pursuant to section 204A of the Corporations Act 2001) does not have a company secretary, a sole director can also sign alone. Otherwise this form must be signed by a director jointly with either another director or a company secretary. Please indicate the capacity in which the form is signed.

**Trust** - the trustee(s) must sign this form. Trustee(s) signing on behalf of the trust confirm that the trustee(s) is/are acting in accordance with such designated powers and authority under the trust deed.

**Power of Attorney** - if you have not already lodged the Power of Attorney with us, please attach a certified copy of the Power of Attorney document that includes Certificate of Witness and Statement of Acceptance and Certified Identification Document of the Power of Attorney. I/we attest that the Power of Attorney has not been rescinded or revoked and that the Donor is still living.

In consideration of amending the register you must agree to indemnify and forever keep indemnified us (including our directors, offices and employees) from and against all losses, claims, actions, proceedings, demands, costs and expenses which may be made or brought against us by reason of compliance with your request.

Old signature

Please print full name

Date signed

D

D

/

M

M

/

Y

Y

Y

Y

New signature

Please print full name

Date signed

D

D

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M

M

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Y

Y

Y

Y