Lifetime
INVESTMENTS

Please send this completed form and supporting documents to:

lifetime@linkmarketservices.com

Lifetime Asset Management, PO Box 91976, Victoria Street West, Auckland 1142.

If you have any questions when completing this form, please call Customer Services on 0800 266 268.

SUPERANNUATION MASTER TRUST

Changing your Investment Portfolio

Use this form to switch your existing investments to a different investment portfolio and/or change where your future contributions will be invested.

This form can be completed on-screen by typing content directly into the PDF document. Once you have completed and signed this form, please send it and any supporting documentation to the address above.

*These sections must be completed

*(a) Your personal details

Plan number (if known)

Title

☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Dr ☐ Other

Date of birth

D D M M Y Y Y Y

First names

Surname

Personal email address

Postal address

Postcode

Please provide at least one contact phone number

Home phone

( )

Work phone

( )

Mobile phone

( )

IRD number

(**Please note:** We cannot process your application until we receive your IRD number.)

Prescribed Investor Rate (PIR)

☐ 10.5% ☐ 17.5% ☐ 28%

To help determine your PIR, go to **ird.govt.nz**. If a PIR is not selected or you supply an incorrect IRD number, the default rate of 28% will apply. Inland Revenue may also instruct Lifetime to apply a different PIR.

*(b) Privacy

The personal information you are providing in this form, (or in connection with this form) is being collected for the main purpose of effectively administering and managing your Superannuation Master Trust account in compliance with all relevant law. If you do not provide us with your personal information, we may not be able to process or may refuse your contribution or withdrawal. The information may also be used for the purpose of verifying your identity electronically or providing you with information about products and services we think might be of interest to you (including from our parent company Lifetime Asset Management Limited). The information may be used by, and disclosed to the Manager, Lifetime Asset Management Limited, the Administration Manager, or other entity involved in the administration and management of the Superannuation Master Trust (including Inland Revenue and any regulatory body) or your financial adviser. The information you provide may also be used by external agencies appointed by us for the purposes of verifying your identity.

☐ **I agree that this information may be collected, held and disclosed for these purposes.**

The information is being collected by the Manager, whose address is Lifetime Asset Management, PO Box 10760, Wellington 6140, and will be held by Link Market Services Limited who you can contact at PO Box 91976, Victoria Street West, Auckland 1142. You can request access to your personal information and can ask that it is updated by calling 0800 266 268.

*(c) New investment instructions

Please make the following changes to the Investment Portfolios in which my total accounts and/or contributions are invested.
I confirm that these changes are consistent with the options available to me in the plan.

Please tick (you can tick more than one)

A ☐ Switch **only** my current balance to the Investment Portfolio(s) selected below.
B ☐ Invest **only** my future regular contributions in the Investment Portfolio(s) selected below.
C ☐ Switch **both** my current and future contributions in the Investment Portfolio(s) selected below.

and/or

D ☐ Invest a lump sum contribution in the Investment Portfolio(s) selected below.

Funds will be transferred from ______________________ (e.g. ABC Superannuation Fund).

Investment options	% of total accounts
Diversified Portfolios	
Lifetime Conservative Fund[1]	%
Lifetime Balanced Fund[2]	%
Lifetime Growth Fund[3]	%
Sector Portfolios	
Lifetime Cash Fund[4]	%
Lifetime UK Cash Fund[5]	%
Lifetime NZ Bond Fund[6]	%
Lifetime Overseas Bond Fund[7]	%
Lifetime International Property Fund[8]	%
Lifetime Australasian Property Fund[9]	%
Lifetime Australasian Shares Fund[10]	%
Lifetime Australasian Shares Fund No. 2[11]	%
Lifetime International Shares Fund No. 2[12]	%
Lifetime International Shares Fund No. 3[13]	%
Lifetime Overseas Shares Fund[14]	%
Total Contributions	**100%**

[1] Formerly AMP Conservative Fund
[2] Formerly AMP Balanced Fund
[3] Formerly AMP Growth Fund
[4] Formerly AMP Cash Fund
[5] Formerly AMP UK Cash Fund
[6] Formerly AMP High Growth Fund
[7] Formerly AMP Capital NZ Fixed Interest Fund
[8] Formerly AMP Global Fixed Interest Fund
[9] Formerly ANZ International Property Fund
[10] Formerly ANZ Australasian Property Fund
[11] AMP Australasian Shares Fund
[12] Formerly AMP Australasian Shares Fund No. 2
[13] Formerly AMP International Shares Fund No. 2
[14] Formerly AMP International Shares Fund No. 3

Do you have an Adviser?
(i.e. an individual who is authorised to provide financial advice to you in relation to Lifetime products.)

☐ Yes ☐ No

If **yes**, please ensure your Adviser completes section (e).

*(d) Your signature

To: Lifetime Asset Management

1. I understand that if Lifetime accepts these investment instructions, they will be implemented as soon as possible after Lifetime has received them, and will apply until I advise Lifetime otherwise.
2. I acknowledge that any fees payable will be deducted from my account.
3. I acknowledge that tax will be calculated and debited (where appropriate) at my recorded PIE tax rate and that it is my responsibility to notify Lifetime of my correct PIR.
4. I acknowledge that if for any reason Lifetime is not able to accept or process these investment instructions, Lifetime will contact me. Until such time as these investment instructions are accepted and processed by Lifetime, any contributions I make will be invested in accordance with the existing investment instructions.
5. I acknowledge that none of my employer, the Supervisor, or the Manager guarantee the performance of the investment funds selected.

I confirm that the above information is correct and I request that Lifetime update its records to reflect the changes specified in this form.

Member's signature

SIGN HERE

Date

D D M M Y Y Y Y

(e) Adviser use only

Adviser name

B	L	O	C	K		L	E	T	T	E	R	S				

Adviser code

Adviser's business name

I certify that I have completed the most recent training provided by Lifetime for this product, and have complied with the requirements of the Financial Markets Conduct Act 2019, and all other applicable laws.

Signature of Adviser

SIGN HERE

Date

D	D	M	M	Y	Y	Y	Y

***Checklist:**

Please check you have completed the form correctly

- [ ] Have you completed all sections with an *?
- [ ] Have you selected either A, B, C or D in section (c)?
- [ ] Have you signed and dated section (d)?
- [ ] If you have received financial advice, has your Adviser completed section (e)?

Once you have completed all items on the checklist please post your documents to:

Lifetime Asset Management, PO Box 91976, Victoria Street West, Auckland 1142.

For more information call free **0800 266 268** or email **lifetime@linkmarketservices.com**