

Change of name

Information sheet

When to use this form

Use this form to provide the information we need to change your name and verify your identity to meet our legal obligations (including those under the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006*).

Verifying a customer's identity

We need to verify or confirm your identity by checking that certain details you provide in this form **match** the details that are in certain documents you need to attach to this form.

! Please send us **original certified copies** of your original documents—don't send us the original documents.

If the document is not written in English, then you must also attach an English translation prepared by an accredited translator.

Getting your copies certified

A copy of a document must be certified to be a true and correct copy of the original document. Only certain people can certify copies including:

- police officer or sheriff
- justice of the peace or notary public
- legal practitioner, magistrate, judge or registrar/deputy registrar of a court
- pharmacist, physiotherapist or veterinary surgeon
- optometrist, dentist, medical practitioner or nurse
- member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising Accountants or the National Institute of Accountants.

You can see the full list of people who can certify documents or extracts at amp.com.au/identification.

Example:

I certify that this is a true and correct copy of the original document.

John Citizen

John Citizen, Justice of the Peace
10 Other Street
Suburb NSW 2000

02 9999 9999 30 May 2015

Customer identification

So we can verify your new identity, you will need to attach us the documents shown under option A (change of name documents), B and/or C:

Option A

If you have changed your name or are signing on behalf of the applicant, you will need to provide a linking document. A linking document is a document that proves a relationship exists between two (or more) names.

All copied pages of original documents need to be certified as true copies by any individual approved to do so.

The following table contains information about suitable linking documents.

| Purpose | Suitable linking documents |
|-----------------------------------|--|
| Change of name | Certified copy of Marriage certificate, deed poll or change of name certificate from the Births, Deaths and Marriages Registration Office. |
| Signed on behalf of the applicant | Certified copy of guardianship papers or Power of Attorney. |

Option B

One of these:

- current Australian state or territory driver licence that has your photo
- Australian passport that is current or expired within the last two years
- card issued under a state or territory law to prove your age that has your photo
- current foreign government passport (or similar international travel document) that has your photo and signature
- current foreign driver licence that has your photo
- current national identity card that has your photo.

Option C

One of these:

- Australian or foreign birth certificate
- Australian or foreign citizenship certificate
- birth certificate extract
- pension card issued by Department of Human Services
- health card issued by Department of Human Services.

Plus

 The documents listed below are only **valid** if they include the customer's full name and residential address.

One of these:

- a document issued by the Commonwealth or a state or territory within the last 12 months that shows financial benefits paid to you
- a document issued by the ATO within the last 12 months that shows money to be paid to you or that you need to pay to them (make sure you cross out your TFN)
- a document issued by a local government body or utility provider within the last three months that shows the services provided to you at your address
- if you're under 18 years old, a notice issued by a school principal within the last three months that shows how long you attended that school.

Privacy – use and disclosure of personal information

The privacy of your personal information is important to us.

We collect and hold personal information about you so we can provide you with financial products and services and assist you with your ongoing financial needs. If we do not collect this information, we may not be able to provide you with these products and services. We may also use your personal information for other purposes, such as enhancing our customer service and product options, and to inform you of opportunities which may be beneficial to you via direct marketing. Please contact us if you do not want to receive this information.

Personal information may be shared with business areas or companies within the AMP group. We may also provide information to local and overseas entities which provide AMP with administrative, financial, research or other services, other insurers and credit providers, financial advisers, brokers and other organisations authorised by AMP to assist in reviewing customer needs. A list of countries where these providers are likely to be located can be accessed via our privacy policy.

We may also disclose personal information to courts, tribunals and disputes resolution bodies, government agencies, and other bodies we are required to provide information to under the law.

The AMP privacy policy (available at amp.com.au) provides more information about how we manage and protect your personal information. It sets out how you can access and correct your information, how you may complain about a breach of privacy and our process for resolving privacy related enquiries and complaints.

Please retain this information sheet for your records.
Do not return it with your completed form(s).



Change of name

Use this form to provide the information we need to change your name and verify your identity to meet our legal obligations (including those under the *Anti-Money Laundering and Counter-Terrorism Financing Act 2006*).

Please print in CAPITAL LETTERS and place a cross in any applicable boxes.

1. Member details

Member number

Title

Date of birth

Surname

Given name(s)

Address (PO Box not acceptable)

Suburb

State

Postcode

Contact phone number

Mobile phone number

2. Requirements

- I have attached the original certified copy of the documents (as explained in the **Information sheet**) as evidence of the registration of change of name from the Registry of Births, Deaths & Marriages.

3. Former name details

Title

Surname

Given name(s)

Former signature

4. New name details

Title

Surname

Given name(s)

New signature

Where to send this form

Mail or email this completed form to:

AMP Customer Service Centre
PO Box 14330
MELBOURNE VIC 8001
askamp@amp.com.au

Any questions?
131 267