Email and Fax Indemnity

This form should be completed if you want us to act on instructions provided to us by you and your financial adviser (if you have appointed one and have indicated that you would like them to provide us with instructions) given by email or facsimile. Instructions can be given by telephone, but will not be acted upon until confirmation has been received confirming the instruction either in writing, or in accordance with the below.

Scheme Member's Full Name

IVCM Plan Reference

Until this mandate is cancelled or superseded by myself, I hereby authorise IVCM (Aust) Pty Ltd and their appointed representatives to act on instructions provided by the following methods:

☐ Email ☐ Facsimile (Please tick as appropriate)

By Email

Please accept email instructions, purporting to come from myself, which are received from the following email addresses:

Personal Email Address 1

Personal Email Address 2

Please accept e-mail instructions, purporting to come from my financial adviser, which are received from the following email addresses (NOTE: this has to be on the domain registered to the IFA company):

Adviser Email Address 1

Adviser Email Address 2

By Facsimile

Please accept instructions purporting to come from myself and, where appropriate, from my financial adviser containing a signature matching that on this authority.

This authority extends to all matters concerning my membership without prejudice to the generality of the foregoing:

a) The transfer of funds, and

b) The completion and submission of investment applications with transfer of funds

I hereby agree to indemnify you and do not hold you responsible in respect of any actions, proceedings, claims, losses, costs, charges or expenses which may be raised against you or incurred by you as a consequence of your acting in accordance with this instruction.

Any instruction provided by Email or facsimile will be followed by any original letter to you clearly marked as 'Confirmation of Fax / Email Instruction' and you shall be entitled but not obliged to treat any such original letter which is not clearly marked as such as a new or further instruction.

Member Authorisation

Sign

Date

Name

IVCM (Aust) Pty Ltd

T. +64 (0) 4 888 1430
F. +61 (0) 8 8178 0257
E. newzealand@ivcm.com
www.ivcm.com

IVCM (Aust) Pty Ltd
Level 5, 20 Bond Street,
Sydney, NSW 2000
Australia

When complete email this form to:
newzealand@ivcm.com