





Policy number

Life insured

**Section A: Annual savings**

Increase  Decrease to \$

Alteration Term/Selected Retirement Age to

**Section B: Addition of single contribution/premium\*/rollover or transfer**

Rollover or transfer/Single contribution/Premium amount \$

Rollover or transfer  Concessional  Non-concessional  Spouse

\*Note: Members must have an existing policy capable of accepting these contributions. Only Provider clients may open a new linked account.

**Section C: Insurance**

Increase (Personal Statement required)  Decrease  Delete  Alter Term

Insurance type	Sum insured		Term	Increased yearly premium
	To	To		
<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	or	<input type="text"/>
<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	or	<input type="text"/>
<input type="text"/>	\$ <input type="text"/>	\$ <input type="text"/>	or	<input type="text"/>

**Section D: Change of portfolio details (Provider only)**

Portfolio	New saving allocation % Future contribution	Lump sum amount (current balance switch)	
		From	To
Cash	<input type="text"/> %	\$ <input type="text"/>	\$ <input type="text"/>
Secure	<input type="text"/> %	\$ <input type="text"/>	\$ <input type="text"/>
Matched	<input type="text"/> %	\$ <input type="text"/>	\$ <input type="text"/>
Managed	<input type="text"/> %	\$ <input type="text"/>	\$ <input type="text"/>
Multi-manager Balanced	<input type="text"/> %	\$ <input type="text"/>	\$ <input type="text"/>
	<input type="text"/> 100%		

**Note: A minimum saving allocation of 10 per cent is required if investing in a new portfolio. Minimum switch amount is \$500.**

**Section E: Change of portfolio details (Goldline and Accelerator only. Please note that capital guarantee is not available for Accelerator.)**

Portfolio	New saving allocation % Future contribution	Lump sum amount (current balance switch)	
		From	To
Cash	<input type="text"/> %	\$ <input type="text"/>	\$ <input type="text"/>
Capital Guaranteed	<input type="text"/> %	\$ <input type="text"/>	\$ <input type="text"/>
Balanced	<input type="text"/> %	\$ <input type="text"/>	\$ <input type="text"/>
Property	<input type="text"/> %	\$ <input type="text"/>	\$ <input type="text"/>
Managed	<input type="text"/> %	\$ <input type="text"/>	\$ <input type="text"/>
Equity	<input type="text"/> %	\$ <input type="text"/>	\$ <input type="text"/>
	<input type="text"/> 100%		

**Note: A minimum saving allocation of 10 per cent is required if investing in a new portfolio. Minimum switch amount is \$500.**

**Section F: Alteration contribution / Premium payer / Frequency / Method of payment**

New premium payer

Address

New method of payment  Direct  Direct debit (new DDR required) Specify date (1st to 28th only)

New frequency  Monthly (direct debit only)  Quarterly  Half yearly  Yearly

Does this change apply to all policies attached to the Billing agreement?  Yes  No (please specify details below)



**Section G: Superannuation policies with employer contributions**

Do the employer contributions being paid to this plan (either before or after the current alteration) comprise of an amount made in accordance with either a Superannuation Guarantee or mandated award requirement?  Yes  No

**Note: If you are unsure of the type of contributions being made to this plan, we recommend that you check with your employer.**

**Section H: CPI options**

CPI removal **or**  CPI reinstated

To be removed from or reinstated to:

Savings component only  Cover component only  Savings and cover components

**Section I: Alteration to paid up policy**

Maintaining sum insured  Deleting sum insured:  
 Death  
 Disablement

**Conditions**

- 1 No further premiums will be payable.
- 2 The option to vary the period in which the sum insured (Death/Disablement) is applicable will cease to be exercisable.
- 3 The options to exercise the 'Benefit Booster Option' and 'Cover Booster Option' will cease.
- 4 All other conditions of the policy will remain unchanged.

**Cover charges will be debited from the account balance.**

**Section J: Reinstatement of paid up policy**

Premium to \$  Per  (Frequency)  
 Sum insured to \$  Cover type   
 (Personal statement required)

**Section K: Adviser details (increases only) and reinstatements**

NPC Adviser No 1  Comm %  NPC Adviser No 2  Comm %

**Note: The minimum commission split is 20%**

Initial application factor  100  80  60  40  20  0

Single premium application factor  100  80  60  40  20  0

**Notes**

**Truth and accuracy** – I have checked the truth, accuracy and completeness of the information submitted with this Alterations/Increases and Additional Policy Condition Advice, and all statements in writing given in support of this application which shall, subject to law, form the basis of the contract of investment and insurance.

I understand that the terms and conditions of my policy will be altered where appropriate in accordance with changes by me in this form.

I understand the alterations selected on this advice will take effect from the time this completed advice is received at AXA Customer Service, in accordance with administrative procedure, and that AXA accepts no responsibility for any delays in post or delivery failure.

I accept responsibility for the investment choices I have made on this form and acknowledge that neither the Trustee nor AXA shall not be liable for any loss due to an inappropriate choice made by me.

I understand the fees and costs that apply to any alterations made to my policy.

**For superannuation policies only:**

I agree to notify the Trustee of the Fund in writing immediately if I cease to be eligible to contribute to the Fund.

I am aware of and agree to be bound by the terms of the applicable Trust Deed and Policy document (including amendments made from time to time).

**Client signatures**

**X**

Signature of policy owner(s)/Member(s)

/ /

Date

**X**

Signature of policy owner(s)/Member(s)

/ /

Date