Dlegalsuper

Request for Adviser access to legalsuper Guaranteed Income quotation platform

Return this completed form to either:

Email: mail@legalsuper.com.au

OR Post: legalsuper Locked Bag 5081 Parramatta NSW 2124 Phone: 1800 060 312

Planner and/or representative

First name	Surname		
Email address		Phone	
is an Authorised Representative of:			
Company Name			
ABN	ASIC Registration Number	AFSL	
Registered Address			
Suburb	State	Post Code	

Request to grant the person above with access to the legalsuper Guaranteed Income Account Adviser portal for the purpose of providing the (below member) with quotations.

Member	
Member's first name	Surname
Date of birth (dd/mm/yyyy)	Member number
of Address	
Town or Suburb	State Post Code

Planner or Authorised representative

Signature

Date	e		

IMPORTANT: This authority is valid for use until otherwise advised or expires.

Terms and Conditions

- 1. Agree to abide by the terms and conditions of the legalsuper Guaranteed Income portal.
- 2. Declare that the information in this form is correct.
- 3. Acknowledge that legalsuper Guaranteed Income accounts are only available to legalsuper members.

EGS 9155