



IOOF ESSENTIAL

17 May 2021

Advice Fee – One-off

Please note: A new request must be supplied each time you wish for the Advice fee – one-off to be applied. In the event your account has insufficient funds, this form will be returned to your financial adviser to re-lodge when your account does have sufficient funds.

Please complete these instructions in BLACK INK using CAPITAL LETTERS.

Account number

Step 1: Your personal details

Part A – Individual Investor

Title (Dr/Mr/Mrs/Ms/Miss) Surname
Given name(s)
Date of birth / /

Part B – Joint Account

Name of Joint Account

Part C – Self Managed Superannuation Fund/Unregulated Trust

Name of Entity/Company/
Corporate Trustee
Name of Trust

Step 2: Advice fee – one-off

- The default value for the advice fee is \$0, unless you agree and specify otherwise below in conjunction with your financial adviser.
- Advice fees can only be deducted from your super/pension account if they relate to advice you receive about your super/pension benefits, insurance and investments.
- Advice fees paid to your financial adviser and their Licensee (and quoted in this section) are inclusive of GST.
- The actual amount deducted from your account may be less than the amount quoted. This is because the Fund may be able to claim a reduced input tax credit (RITC) on some fees. Where the Fund is able to claim an RITC, the benefit is passed on to you which effectively reduces the fee. Note that the RITC rules are subject to change and this may impact the RITC available in the future.

As agreed with my nominated financial adviser, I authorise \$ to be applied to my account for financial advice

The fee should be provided including GST.

We will only deduct a maximum of 10% of the account balance up to a fee of \$11,000 (inclusive of GST), OR a maximum fee of \$3,300 (inclusive of GST) where the fee is greater than 10% of the account balance.

Notes:

- Maximum fee above includes GST.
- For further information on adviser remuneration and advice fees, please refer to the PDS.

Step 3: Client Declaration and signature(s)

Important note: The Trustee/Service Operator collects the information in this form for the purpose of updating the information it holds about you. Any personal information provided in this form will be handled in accordance with the Privacy policy available at www.ioof.com.au/privacy.

Please note: If this form is signed under Power of Attorney, the Attorney declares that they have not received notice of revocation of that power (a certified copy of the Power of Attorney should be submitted with this form unless we have already received it).

- I authorise the Trustee /Service Operator to charge the advice fee selected against my account. This fee, if charged on my Super and Pension accounts is for advice I have or will receive about my superannuation/pension benefits, insurance and investments.
- The amount of any advice fee that is paid to my financial adviser, or their Australian Financial Services Licensee (Licensee) as agreed by me, will be an additional cost to me and charged against my account. An advice fee will not be charged unless I tell the Trustee/ Service Operator to do so.
- Any agreed advice fee will be charged to my account and paid in full to the financial adviser or their Licensee.

Individual Investor

Signatory 1 Date / /

Full name

Joint investors, Self Managed Superannuation Funds, and Unregulated trusts

Signatory 1 Date / /

Title (such as Director/Trustee as applicable)

Full name

Signatory 2 Date / /

Title (such as Director/Trustee as applicable)

Full name

Signatory 3 Date / /

Title (such as Director/Trustee as applicable)

Full name

Signatory 4 Date / /

Title (such as Director/Trustee as applicable)

Full name

Signatory 5 Date / /

Title (such as Director)

Full name

Signatory 6

Title (such as Director)

Full name

Common seal (of company) if required

Date / /

Step 5: Adviser declaration

I confirm that fees have been fully explained to the applicant and that any advice fees charged on the Super and/or Pension accounts relate to advice about the applicant's superannuation or pension benefits, insurance and investments in the Fund.

Adviser name

Licensee name

Contact name

AFS license number Adviser code

Adviser signature

Date / /

Please forward all correspondence and enquiries to

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