

## INVESTMENT LOAN CHANGE OF PERSONAL DETAILS FORM

CommSec Adviser Services  
Locked Bag 34  
Australia Square NSW 1214

Phone: 1800 252 351  
Web: [www.CommSecAdviserServices.com.au](http://www.CommSecAdviserServices.com.au)

**Form ID: 2021**

**Where to send this form?**

Please provide your completed and signed form with any relevant supporting documents to your adviser.  
**Adviser use only:** Use this Form ID to securely submit the documents via eSubmit. To use eSubmit, log into the CommSec Adviser Services website and go to: **Administration > eSubmit**

**1 LOAN AND CLIENT DETAILS**

LOAN NUMBER

BORROWER NAME(S)

CLIENT 1 NAME

CLIENT 2 NAME

Borrower

Third Party Mortgagor

Guarantor

Borrower

Third Party Mortgagor

Guarantor

**2 ADDRESS AND CONTACT DETAILS CHANGES**

**CLIENT 1**

NEW RESIDENTIAL ADDRESS (CANNOT BE A PO BOX)



STATE

POSTCODE

COUNTRY (IF OTHER THAN AUSTRALIA)

NEW POSTAL ADDRESS

Please tick this box if same as residential address above



STATE

POSTCODE

COUNTRY (IF OTHER THAN AUSTRALIA)

NEW MOBILE PHONE

NEW HOME PHONE

 ( )

NEW WORK PHONE

 ( )

NEW EMAIL ADDRESS

**CLIENT 2**

NEW RESIDENTIAL ADDRESS (CANNOT BE A PO BOX)



STATE

POSTCODE

COUNTRY (IF OTHER THAN AUSTRALIA)

NEW POSTAL ADDRESS

Please tick this box if same as residential address above



STATE

POSTCODE

COUNTRY (IF OTHER THAN AUSTRALIA)

NEW MOBILE PHONE

NEW HOME PHONE

 ( )

NEW WORK PHONE

 ( )

NEW EMAIL ADDRESS

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### 3 STATEMENT DELIVERY PREFERENCE CHANGES

Statements are sent to all borrowers unless otherwise specified. To nominate which borrower(s) (as listed above) should receive periodic statements, please tick all applicable box(es) below:

**CLIENT 1**
 **CLIENT 2**

*(Note: all borrowers must sign this form for this selection to be valid.)*

Please indicate your statement delivery preferences below:

**ELECTRONIC**
 **PAPER**

*(Note: for the electronic statement selection to be valid, an email address must be provided for all nominated statement recipients.)*

### 4 AUTHORITIES AND SIGNATURES

I/we authorise CommSec Adviser Services to affect all the instructions indicated on this form.

<p><b>CLIENT 1</b></p> <p>PRINT NAME</p> <input style="width: 95%; height: 20px;" type="text"/> <p>SIGNATURE</p> <input style="width: 95%; height: 20px;" type="text" value="x"/> <p>DATE</p> <input style="width: 95%; height: 20px;" type="text" value="DD / MM / YYYY"/>	<p><b>CLIENT 2</b></p> <p>PRINT NAME</p> <input style="width: 95%; height: 20px;" type="text"/> <p>SIGNATURE</p> <input style="width: 95%; height: 20px;" type="text" value="x"/> <p>DATE</p> <input style="width: 95%; height: 20px;" type="text" value="DD / MM / YYYY"/>
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