



REQUEST FOR CHANGE TO ACCOUNT DETAILS FORM



Instructions:

Part A of this form is to be completed by unit holders who wish to change mailing address. Part B of this form is to be completed by unit holders who wish to change dividend mode. Part C of this form is to be completed by unit holders changing any details in A or B. Please note that signatures will be verified against file records before any changes are made.

A REQUEST FOR CHANGE OF MAILING ADDRESS

Tick Where Appropriate FHUT FHPT

ACCOUNT NAME	
ACCOUNT NO.	

Existing Mailing Address

New Mailing Address

B REQUEST FOR CHANGE OF DIVIDEND MODE

Tick Where Appropriate FHUT FHPT

ACCOUNT NAME	
ACCOUNT NO.	

Existing Instructions Reinvest Pay to bank Cheque

New Instructions Reinvest Pay to bank Cheque (Please provide details below)

Account Name		Name of Bank	
Account No.		Branch	

C SIGNATURE OF UNITHOLDERS – THIS MUST BE COMPLETED

Unit holder 1 (Individual)

NAME	SIGNATURE
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Sole Unit holder

Joint Unit holder 3 (Individual)

NAME	SIGNATURE
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Director/Trustee (Delete one)

Joint Unit holder 2 (Individual)

NAME	SIGNATURE
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Director/Company Secretary (Delete one)

Joint Unit holder 3 (Individual)

NAME	SIGNATURE
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Director/Trustee (Delete one)

This form must be signed by the unit holder on the

Office Use Only

Accepted by: _____ (initial & signature) Date & Time: _____

Updated by: _____ (initial & signature) Date & Time: _____