

Upon completion, please submit to the following address:

Phillip Securities Pte Ltd
 250 North Bridge Road
 #06-00, Raffles City Tower
 Singapore 179101

Attention: Corporate Development (B2B) Department

To: Phillip Securities Pte Ltd ("PSPL")

CHANGE OF FINANCIAL ADVISER REPRESENTATIVE FORM

1. PARTICULARS OF MAIN APPLICANT / COMPANY

Name of Main Applicant / Company	NRIC/ Passport/ Company Registration No.	Date
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2. PARTICULARS OF FINANCIAL ADVISER REPRESENTATIVE ("FAR") – THE TRANSFEREE

Name of FAR	FA Company Name	FAR Code
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3. ACCOUNTS TO BE TRANSFERRED OUT (*Applicable for Unit Trust Accounts & Managed Accounts Only)

I/We confirm that I/we would like to change the servicing FAR for the following account(s) with immediate effect:

UNIT TRUST

Account Number	Account Type (Non-Wrap or Wrap)	FA Company Name (of Existing FAR)	Existing FAR Name / Code(Transferor)	New FAR Name / Code(Transferee)
	<input type="checkbox"/> Non-Wrap <input type="checkbox"/> Wrap <input type="checkbox"/> Lumpsum ASAP #			
	<input type="checkbox"/> Non-Wrap <input type="checkbox"/> Wrap <input type="checkbox"/> Lumpsum ASAP #			
	<input type="checkbox"/> Non-Wrap <input type="checkbox"/> Wrap <input type="checkbox"/> Lumpsum ASAP #			
	<input type="checkbox"/> Non-Wrap <input type="checkbox"/> Wrap <input type="checkbox"/> Lumpsum ASAP #			

Asset Saving Plan

MANAGED ACCOUNT

Account Number	Account Type	FA Company Name (of Existing FAR)	Existing FAR Name / Code(Transferor)	New FAR Name / Code(Transferee)
	<input type="checkbox"/> PMA <input type="checkbox"/> GEMS <input type="checkbox"/> PPP <input type="checkbox"/> Others _____			
	<input type="checkbox"/> PMA <input type="checkbox"/> GEMS <input type="checkbox"/> PPP <input type="checkbox"/> Others _____			
	<input type="checkbox"/> PMA <input type="checkbox"/> GEMS <input type="checkbox"/> PPP <input type="checkbox"/> Others _____			
	<input type="checkbox"/> PMA <input type="checkbox"/> GEMS <input type="checkbox"/> PPP <input type="checkbox"/> Others _____			

4. DECLARATION AND AGREEMENT BY APPLICANT

To: Phillip Securities Pte Ltd

- I/We fully understand and acknowledge that there is no change to the terms and conditions governing Phillip Securities Pte Ltd Accounts (and as may be amended from time to time) and agree to continue to be bound by such terms;
- I/We understand and agree that PSPL reserve the right to refuse to comply with my/our instructions including, but not limited to, those that in PSPL's sole and absolute discretion, which, in PSPL's opinion, are deemed to be unclear or ambiguous or incomplete or inconsistent with any other instructions, or which might cause PSPL to contravene any law or regulation (whether or not having legal and binding effect) and PSPL shall be indemnified against any losses, damages, costs, charges or expenses which PSPL may incur or suffer arising from the rejection of my/our instructions;
- I/We expressly authorise and permit PSPL to disclose, reveal or divulge any and all information of my/our Account, including but not limited to information relating to me/us, my/our fund investments, or any transactions or dealings between PSPL and me/us to facilitate the operation of the accounts, or for any purpose, whatsoever;
- I/We acknowledge that PSPL may provide communication to me/us (which includes by mail, facsimile or electronic mail) as may be determined by PSPL from time to time at its sole and absolute discretion; and
- I/We acknowledge that investment instructions submitted together with this request to change my/our FAR may not be processed together, without providing any notice and for any reason, whatsoever, until such request for change has been executed or rejected.



 Main Applicant's Signature / Company's Authorised Signatories with Company Stamp

 Date



5. ACKNOWLEDGEMENT BY FAR – THE TRANSFEREE

I, _____, NRIC/Passport No./ Company Registration No. _____ agree to accept the transfer of the abovementioned account(s) to me and assume all responsibility(ies) to the service the client from the effective date of change.

 Name of FAR

 Date

 Signature of FAR

6. ACKNOWLEDGEMENT BY FA COMPANY – THE TRANSFEREE

 Name of FA Company

 Company Stamp of FA Company

 Authorised Signatory(ies) of FA Company

 Date

FOR OFFICIAL USE

Accepted & Checked by : _____ Date : _____

Remarks (if any): _____

Approved by: _____ Date : _____

Processed by : _____ Date : _____