



Equity Trustees

Incorporating



Australian Executor Trustees

CHANGE OF CONTACT DETAILS

PERSONAL DETAILS

Title Given names

Surname

Date of birth

/ /

OLD CONTACT DETAILS

Street address

Suburb

State

Postcode

Mailing Address (if different from above)

Suburb

State

Postcode

NEW CONTACT DETAILS

Street address

Suburb

State

Postcode

Mailing Address (if different from above)

Suburb

State

Postcode

Phone (mobile)

Phone (home)

Email address

By completing this form, I declare that the information provided is true and correct and request that Equity Trustees amend my account details with the information provided.

Please note that we are unable to accept digital signatures, please print and sign this form before scanning or posting back to us.

Signature

Date

/ /

At Equity Trustees, we take the safeguarding of your documents seriously, which is why we ask to see your ID for all updates. Please provide a copy of your ID (ie driver's license or passport) when submitting this form.

Please return this form to us along with a copy of ID by:

Email: documentrelease@eqt.com.au

Mail: Equity Trustees

Att: Estate Planning Document Release Team

GPO Box 546, Adelaide SA 5001

PRIVACY

EQT Legal Services Pty Ltd seeks to maintain the accuracy of the personal information it holds to assist us in providing our services. This information is handled in accordance with our Privacy Statement in order to protect your personal information.

You can view our Privacy Statement on our website: www.eqt.com.au/global/privacystatement