

Broker Nomination Form



As your discount broker, InvestSMART™ will provide this form to your Insurance Provider and start collecting and tracking trailing commissions in your My TrailCap™ on eligible AIA, TAL and Zurich Life Insurance Policies.
www.investsmart.com.au.

To start receiving your rebates and to join the TrailCap program, please complete and return this form to:

FAX: 1300 880 260 or MAIL: InvestSMART Financial Services Pty Limited, Reply Paid 4477, Sydney NSW 2001

Your details

First name or company name			
Family name or director's name			
Address			
Suburb	State	Postcode	
Contact phone			
E-mail address	<input type="checkbox"/> Please tick here if you do not wish to receive email from InvestSMART		
Previous adviser/fund broker			
How did you find out about InvestSMART?			

Details of your existing policies

Insurance Provider Eg: 'Colonial First State'			
Account Name Eg: 'John Smith'	Policy Number	Approximate Annual Premium	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Signatures

I/We request that the Insurance Provider named above amend their records to indicate that InvestSMART Financial Services Pty Limited is the appointed broker for the policy listed above. I/We understand that InvestSMART will receive a trailing commission based on my/our investment amount. I/We have read and agree to the InvestSMART terms and conditions

Signature		Signature	
Name (please print)		Name (please print)	
Date		Date	

