



Memorandum of Transfer Form

Please fill out this Form in capital letters using a black or blue pen.

1. POLICY DETAILS

To TAL Life Limited, please transfer policy number to the transferee names in Section 3.

2. TRANSFEROR DETAILS

Date of transfer Transferor's name

Transferor's signature Date

Witness' signature Date

Is this a transfer to a financial institution as security for a debt? Yes No

Note: If the transferor is a company, TAL may require confirmation that this has been properly executed.

I am a member of a Fund administered by TAL and I request the trustee of the Fund to transfer the policy as set out in this Form. Yes No

3. TRANSFEREE DETAILS

Title Mr Mrs Miss Ms Other

Surname Given name(s)

Financial institution name

Postal address

Suburb State Postcode

Occupation

Transferee's signature Date

Witness' signature Date

Is this a transfer to a financial institution as security for a debt? Yes No

Note: If the transferor is a company, TAL may require confirmation that this has been properly executed.

4. PRIVACY

The way in which TAL collects, uses and discloses your personal and sensitive information is described in the TAL Privacy Policy available at www.tal.com.au/Privacy-Policy or on request.

5. REGISTRATION OF TRANSFEROR (FOR OFFICE USE ONLY)

Date of registration of transfer by company

Date

DD / MM / YYYY

Signature of Principal Officer of company
or authorised person

X

Note: If the Transferee is a Financial Institution which is taking the transfer of this policy as security for a debt, TAL will continue to send premium notices to the Transferor.

6. CONTACT DETAILS

Please keep a copy of this Form for your records and return your completed Form to:
TAL Life Limited, GPO Box 5380, SYDNEY NSW 2001.

If you have any questions please contact our us on the details below.

Call 1300 209 088

Monday to Friday 9.00am – 5.00pm (AEST/AEDT)

Email: customerservice@tal.com.au

Website: www.tal.com.au