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Please send this completed form and any supporting documents to:
AMP Services (NZ) Limited
Freepost 170, PO Box 55
Shortland Street, Auckland 1140

If you have any questions please contact your Adviser or call us on 0800 267 111.

AMP Product Transfer Form

Use this form if you would like to transfer from an existing AMP investment product into either the AMP Investment Suite, WealthView, NZRT or the AMP KiwiSaver Scheme. A new application form is also required for transfers to the AMP Investment Trust (AIT); and for transfers to the AMP KiwiSaver Scheme where you are not already invested in these products. For transfers into a WealthView account, your Adviser will inform you if a new application form is required.

Important information:

For details about the investment product you propose to invest in you should refer to the relevant AMP Investment Statement or Product Disclosure Statement, which contains the appropriate application form, or the relevant WealthView disclosure documents. These can be obtained from your Adviser, or where these are available on **amp.co.nz**.

– For transfers from a registered AMP superannuation scheme, the approval of your transfer is at the Manager's discretion.
– Transfers may be subject to an early withdrawal fee. The level of the fee charged is at the Manager's discretion.
– If approved, any transfer of benefits from the Limited Access funds prior to maturity will be determined using the cash value factor.

This form can be completed on-screen by typing content directly into the PDF document. Once you have completed your details, print, sign and send the form and any supporting documents to the address above.

A disclosure statement is available from your Adviser on request and free of charge.

*These fields must be completed

(a) Details – to be completed by the owner(s) of the current investment

Principal account holder/contact person

Title

☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Dr ☐ Other legal entity (e.g. Family Trust, Company etc)

*Full name of other legal entity

*Position of other legal entity representative

*First names

*Surname

Postal address

Postcode

Contact phone

(   )

Email

Secondary account holder/contact person

Title

☐ Mr ☐ Mrs ☐ Ms ☐ Miss ☐ Dr ☐ Other

First names

Surname

Postal address

Postcode

Contact phone

(   )

Email

Transfer instructions

I/we wish to transfer the following AMP Investment product(s):

Client/Member/ Portfolio number	**Investment type** e.g. Personal Retirement Plan (PRP)	**Fund name** State "ALL" or list funds e.g. NZ Shares, Cash Enhanced etc	**Amount** e.g. dollar amount or balance	**Lock-in expiry date** (if applicable)

to:

☐ AMP Personal Retirement Plan (PRP) ☐ AMP Investment Trust (AIT) ☐ Personal Superannuation Plan (PSS) ☐ Wealthview

☐ NZRT (including My Super) ☐ AMP KiwiSaver Scheme

Client/Member/Portfolio number

☐ Transfer total balance and close account (default option) ☐ Transfer total balance and leave account open

Transfers to WealthView

Complete only where transferring from AIT to WealthView.

The transfer to WealthView is to be by way of: Cash ☐ Units ☐

For a 'Cash' transfer all units/investments in AIT will be sold and the cash proceeds transferred to WealthView.

– You cannot transfer the full amount of a locked in superannuation scheme (PRP, PSS) to WealthView.

– You can transfer 20% of a locked in PRP or PSS to WealthView, if you have not already made a 20% withdrawal in the calendar year.

Transfers to an existing AIT account

Please also complete an AIT Additional Contributions Form.

Transfers to KiwiSaver

The KiwiSaver lock-in expiry date is the later of the qualifying age for New Zealand Superannuation (currently at age 65) or after five years membership for people who join after age 60 (unless you qualify for an early withdrawal).

It is not possible to transfer a joint account to the AMP KiwiSaver Scheme.

Transfers to AMP Personal Superannuation Scheme

☐ I/We request that my/our current superannuation scheme lock-in expiry date is carried over to my/our existing investment in PSS.

Please note: Where a previous lock-in has expired a new lock-in may apply to funds transferred to PSS.

Transfers to AMP Personal Retirement Plan

☐ I/We request that my/our current investment is transferred to my/our existing PRP.

Please note: Where a previous lock-in has expired a new lock-in may apply to funds transferred to my/our PRP.

(b) Your declaration (complete or tick the appropriate boxes below)

1. Complete only where the investment selections have been made with advice from an Adviser:

☐ I/We acknowledge that I/we have received a letter or report from:

Adviser name

Adviser number

Adviser business

This is dated

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and is an accurate and complete record of the advice and recommendations given to me/us by my/our Adviser.

☐ I/We have read and understood the advice and recommendations given by my/our Adviser in the above letter/report. The report includes and explains the details of the AMP Investment Trust, Personal Superannuation Scheme, WealthView or AMP KiwiSaver Scheme lock-in provisions, and includes and explains the remuneration and fees (entry, exit, annual management) that my/our Adviser will receive from this transfer and how they differ from my/our existing investments.

☐ I/We am/are aware that my/our Adviser does not give advice on tax and accordingly my/our individual tax situation had not been taken into account in any comparisons between my/our existing AMP investment product and AMP Investment Trust, Personal Superannuation Scheme, WealthView or AMP KiwiSaver Scheme and that I/we have been advised to take independent tax advice.

Continued on the next page

(b) Your declaration – *continued* (complete or tick the appropriate boxes below)

☐ I/We have been advised of the fees and/or commission associated with the transfer into the AMP Investment Trust, Personal Superannuation Scheme, WealthView, NZRT and AMP KiwiSaver Scheme and I/we confirm that I/we wish to transfer from my/our existing investment because of the additional benefits that I/we may derive from the investment strategy recommended by my/our Adviser.

☐ I/We understand that, where I/we am/are not required to complete a new application form, the funds being transferred will be invested as per my/our current fund selection.

Please note: Please ensure your Adviser completes the Adviser Information section of this form.

2. Complete only where investment selections have been made without advice from an Adviser:

☐ I/We have made my/our own investment selection without any reference to investment product advice from an AMP Adviser. I/we accept that neither an AMP Adviser nor any member of the AMP Group can be held responsible for whether or not the investments placed are appropriate for my/our needs or circumstances.

☐ I/We understand that, where I/we am/are not required to complete a new application form, the funds being transferred will be invested as per my/our current fund selection.

Signed (where a Trust, Partnership or Company the name of the authorised signatory(ies) and title(s) must be supplied)

Principal account holder/contact person

Name and title

Date

D D M M Y Y Y Y

Secondary account holder/contact person

Name and title

Date

D D M M Y Y Y Y

Please submit this form together with any supporting documentation (a new application form is required for transfers to AIT or where you do not have an existing AMP KiwiSaver or WealthView account).

(c) For Adviser use only

AMP Adviser name (if applicable)

B L O C K L E T T E R S

AMP Adviser number

FSPN *(please use your QFE's FSPN if you are a QFE Adviser)*

I confirm that I am an

☐ AFA (entitled to sell Category 1 Product)

☐ AMP QFE Category 1 & 2 Adviser

☐ Other ____________________

And I certify that the information provided in this Adviser Information Section is correct and that I have complied with the requirements of the Financial Advisers Act 2008 and all other applicable laws.

Signature of Adviser

SIGN HERE

Date

D D M M Y Y Y Y

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