

Request for access to personal information

Information sheet

When to use this form

This form is used to request access to your own personal information held by us at the Resolution Life Group. You should not use this form to request copies of statements, policies or other account related information.

Your privacy

The Privacy Act permits us to deny or limit requests in certain circumstances.

We usually store information on transaction history, claims, financial planning background and customer background (used for marketing purposes).

We may need to undertake a separate search of our database and other records for each policy you list on this form.

Please ensure you describe exactly what information you want to access from your policies or products and attach the relevant identification documents.

To protect your privacy we will verify your identity before we can disclose information.

For more information about how we protect your privacy, please refer to the Resolution Life Privacy Policy available at [resolutionlife.com.au](https://www.resolutionlife.com.au).

Fees and charges

There is no fee for lodgment of this request, however, there may be a charge for the cost of retrieving the personal information you request. We will provide you with an estimate of how much this service will cost and obtain your agreement before proceeding.

We will acknowledge your request for information within 14 days of receipt of this form.

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Please keep this information sheet for your records—
don't return it with your completed form(s).

Request for access to personal information

Please print in CAPITAL LETTERS and place a cross in any applicable boxes.

1. Personal details

Title	Date of birth	Address		
<input type="text"/>	<input type="text" value="D"/> <input type="text" value="D"/> <input type="text" value="M"/> <input type="text" value="M"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/> <input type="text" value="Y"/>	<input type="text"/>		
Surname	Suburb		State	Postcode
<input type="text"/>	<input type="text"/>		<input type="text"/>	<input type="text"/>
Given name(s)	Contact phone number		Mobile phone number	
<input type="text"/>	<input type="text"/>		<input type="text"/>	
Former name(s) if applicable	Email address			
<input type="text"/>	<input type="text"/>			

2. Resolution Life policies, products or services

Please specify the policy, product or service types you hold and give complete identification details **only** for the Resolution Life policies, products or services you want to access.

I am seeking personal information for my:	Resolution Life product name	Policy or account number	Name of your Resolution Life or other financial planner (if any)
<input type="checkbox"/> Insurance	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Superannuation	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Pension	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Banking	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Investment Products	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Other:	<input type="text"/>	<input type="text"/>	<input type="text"/>

3. Resolution Life property transactions

Please list the name, address of property, tenancy number, date of transaction and type of transaction (eg lease).

4. Access to personal information

Please print the nature of the personal information requested. Attach a separate sheet if necessary.

5. Signature

I understand there may be fees and charges involved in finding and providing the personal information I want to access.

Name (Print in CAPITAL LETTERS)

Signature

X

Date

D	D	M	M	Y	Y	Y	Y
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Where to send this form

Please email or send the completed form to:

Resolution Life Customer Service GPO Box 5441 Sydney NSW 2001 askus@resolutionlife.com.au	Any questions? 133 731
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