

Financial adviser code request

Use this form to ask for financial adviser codes. You can do this if you're a financial adviser, practice representative or licensee.



So we can create the adviser codes for you, we need you to:

- complete all the fields in this form, and
- send the completed form to the email address listed below.

Once this form has been processed, you'll be issued with two adviser codes as follows:

Code 1—to be used for Elevate products, and

Code 2—to be used for Mature products

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

Adviser details			Adviser details (continued)	
Title	Date of birth		Address for communications		
Our and			☐ Please cross ▼ if same as business address.		
Surname			Address		
Circon manages					
Given name(s)			Suburb	State	Postcode
Gender					
Male Female			AFS Licensee name		
Business address					
Dusiness address			AFS Licensee ASIC number		
Suburb	State Postcode		Authorised representative ASIC number		
Postal address			Where to send th	nis form	
			Mail or email this com	npleted form to:	
Suburb	State	Postcode	Resolution Life Cust GPO Box 5441 Sydney NSW 2001	tomer Service	Any questions? 133 731
Contact phone number			adviserregisters@re	solutionlife.com.a	au
Mobile number				_	
			Submit via email		
Email ¹ address					
By providing your email address, your communications, including informations offered by Resolution Life, to the a	ation about prod	ucts and services			

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Resolution Life Australasia Limited ABN 84 079 300 379

1 This must be your secure email address for AMP Portal access.

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^{*} We may use or disclose your personal information to contact you for purposes relating to the administration, operation and management of your policies with us. We may also send you information about products and services offered by Resolution Life. You may opt out of receiving directelectronic marketing communications from us at any time.