

# Change of Servicing Adviser



## Client Details

Client ID

Full Name

Date of Birth

I hereby authorise for any products that I/we hold with Novia Global Europe Limited to be serviced by:

Adviser Firm Name

## Adviser Contact Details

Adviser Name

Address

Email

Phone

Please supply the above-named adviser with full servicing rights and any information that may be requested.

I understand that any initial or ongoing adviser fees payable following receipt of this instruction will now be directed to the above-named adviser, and NOT my previous adviser. Ongoing fees will remain at the current amount/percentage. If there is to be a change to the ongoing fee, please indicate in the box below.

Important Notes (including details of any fee amendments)

## Client Declaration

### Signature requirements

This form may be signed electronically or with a wet signature. Electronic signatures must:

- ◇ Be applied using recognised e-signature software (e.g. Adobe, DocuSign)
- ◇ Include a certificate of validation
- ◇ Use an email address matching the adviser's registered company email or the client's registered Novia Global email

If signing by hand, please sign, scan, and email the form to [euclientservices@novia-global.eu](mailto:euclientservices@novia-global.eu) or return through the online Secure Mail function.

|                                  |                      |      |                      |
|----------------------------------|----------------------|------|----------------------|
| 1 <sup>st</sup> Client Signature | <input type="text"/> | Date | <input type="text"/> |
| Client Name                      | <input type="text"/> |      |                      |
| 2 <sup>nd</sup> Client Signature | <input type="text"/> | Date | <input type="text"/> |
| Client Name                      | <input type="text"/> |      |                      |