



To whom it may concern

REQUEST TO CHANGE SERVICING

We/I, _____

of (address) _____

Phone Number: _____ Fax Number: _____

D.O.B. _____

write to advise and confirm that I/we wish to appoint Wissam Abou-Eid as my/our Insurance Broker.

Policy Owner: _____

Life Insured: _____

Policy Number: _____

Insurance Company: _____

Commencement Date: _____

I/We request that all policies held with you be transferred to the following:

- Broker No. : _____

<p>Wissam Abou-Eid Abou-Eid Enterprises No.2 Pty. Ltd 83 Sydney Rd Coburg, VIC. 3058</p> <p>Authorised Representatives of: Apogee Financial Planning ABN 28 056 426 932 Australian Financial Services Licensee (AFSL number 230689) Life Insurance Broker Level 1, 105 – 153 Miller Street North Sydney NSW 2060</p>
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Please also accept a photocopy or facsimile of this letter as authority, as the original will stay on file at Abou-Eid Enterprises No.2 Pty Ltd

Yours faithfully

Signature

Please print name

Date: _____