

## **STANDARD LETTER OF AUTHORITY**

I, \_\_\_\_\_, the undersigned, ID number \_\_\_\_\_ confirm, for the purposes of providing said sound and proper financial advice to me, that full permission and authority is granted to Lisa Hudson-Peacock, Angela Sayle, Megan Crafford, and Bernadette Rollinson acting on her behalf, to obtain all relevant policy information

Product providers: ALL

In so doing, I acknowledge the following:

- that sound and proper financial advice can only be provided with full disclosure of relevant information relating to appropriate personal, including private, information for the purposes of determining and advising on my/our financial situation and financial products, including but not limited to any information acquiring, servicing or maintaining any financial products, including but not limited to any information relating to or interest in any long-term insurance, unit trust or any other financial products or services, with any long-term insurer, unit trust manager or other financial institution.
- my interests shall be best served if that information is made available to authorised financial service providers with a legitimate interest in receiving such information for those purposes.
- the information is obtained via The Financial Services Exchange (Pty) Ltd, trading as Astute, or any other institution providing a mechanism for the transmission of such information, and I/we hereby give consent for the long-term insurer, unit trust manager or other financial institution possessing such information to release such information to the said Authorised User via Astute or directly, and I/we confirm that such Authorised User shall be acting on my/our behalf, or in my/our best interest, and I/we waive any right to privacy only for the purposes as stated above.

Signed \_\_\_\_\_

Date \_\_\_\_\_

**Life Assured / Owner**

### **Access to Information**

The intermediary acknowledges that in the course of rendering services in terms of this authority to the client, she shall come into possession of information of a confidential nature. The intermediary shall not, whether during the course of this agreement or at any time thereafter, use or disclose or allow third parties to use or disclose any of the confidential information except to the extent permitted by the client.

I declare that I have informed the policyholder of the implications of this authority.