Approved form of notification of address where financial records are kept

*Life Insurance Act 1995*

To: The Registrar
Australian Prudential Regulation Authority (APRA)
GPO Box 9836
Sydney NSW 2001
AUSTRALIA

Name of life company
..........................................................................................................................................................................................

ABN
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Address where financial records of the life company are located
(Specify the principal address below and specify all other addresses where financial records of the life company are kept, using an attachment to this form if necessary.)

Number and street address ..................................................................................................................................................................................

Suburb……………………………......................................................................    City…………………………….......................................................................    

State…………….........................................................................................….    Postcode………......................................................................………….

If this is a new address since the last notification state ‘Yes’ here………………

Country (if written approval has been given by APRA under subsection 76A(1) of the Act):
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Signature of Authorised Officer          Full name of Authorised Officer

Date.............................................................................................................

**Interpretation**

*Life company* has the meaning given in the Schedule to the *Life Insurance Act 1995* (the Act).

*Authorised Officer* means an officer of the life company who is authorised to sign this approved form.

*Financial records* means the records the life company is required to keep under 76A of the Act.

*Note*: Giving false or misleading information is a serious offence (see section 1371 of the *Criminal Code*).