AdviserNET login access request



Please complete this form to setup or amend AdviserNET access.	Checklist				
Complete this form in BLOCK LETTERS and send it to us by either:					
email: <u>useraccess@asgard.com.au</u>	Complete all relevant sections, sign and date this form.				
• mail: Asgard – PO Box 7241, Cloisters Square WA 6850					
Questions? Call Online Services on 1800 060 802	Please ensure the request has been signed by the relevant authorised person.				
Note: • Privacy laws protect your privacy. Please read our Privacy Brochure, for more information. A copy can be obtained from our website at www.asgard.com.au	Attach a copy of the Photo ID such as driver's licence or passport (relevant to the individual under this application).				
1. Your details					
Title Surname					
Given name(s)	Date of birth				
Position held					
Business trading name					
Email					
Phone (Home) Phone (Business	š) 				
2. Setup new access					
Your AdviserNET access details					
Preferred user name: (up to 8 letters and	d/or digits e.g. john123 – subject to availability)				
Access level required:					
Adviser access Adviser Code (BA)	-BA-01				
Office access Office Code (BO)	-BO-O1				
Dealer access Dealer Code (BD)	-BD-01				
Note: The relevant Adviser, Office or Dealer code must be completed You may select more than one option Section 4 must be signed by the appropriate party.					
User access administration rights					
Authority to modify/delete user access and settings: Yes	No				

Note: Where a user is granted access to modify/delete user access and settings, that user will be able to modify other users' transaction permissions and delete their access to AdviserNET.

Full name	Position	User name subject to availability (up to 8 letters or digits)	Phone number	Email address	Access required: Adviser (BA) Office (BO) Dealer (BD)	Relevant code	Authority to modify/delete user access and settings	Authorised by (must be signed by relevant authority)	Name of person authorising	Position of the authorised signatory
John Smith	Adviser assistant	john123	02 9999 9999	john@myweb.com	Adviser (BA)	9999999 –BA- 01	Yes	Signature	James Jones	Director

3. Amend/remove existing access

Complete the following sections to change or remove existing user's access.

Change of access level

Please change the following user(s) access level.

Full name	User name	Relevant code	Access required: Adviser(BA) Office (BO) Dealer (BD)		(must be signed by	Full name of person authorising the request	Position of the authorised signatory
John Smith	john123	9999999 –BA- 01	Office (BO)	Yes	Signature	James Jones	Director

The following user(s) are no longer authorised. Please revoke their access.

Full name	User name	Relevant code
John Smith	john123	9999999 –BA- 01

¹ Any users authorised to modify/delete user access and settings can remove users online via Home > Resources > System and settings > User access and settings.

Adviser (BA) access – Adviser Office (BO) access – Managing Director or Office principal Dealer (BD) access – Managing Director Signature Name of person authorising Email address of person authorising Position of person authorising Note: If we do not have the signature of the authorised person on file additional information may be requested. 5. Your signature Signature	4. Authorised signatory
Office (BO) access – Managing Director or Office principal Dealer (BD) access – Managing Director Signature Name of person authorising Email address of person authorising Position of person authorising Note: If we do not have the signature of the authorised person on file additional information may be requested. 5. Your signature Signature	Who can authorise the request?
Dealer (BD) access – Managing Director Signature Name of person authorising Email address of person authorising Position of person authorising Note: If we do not have the signature of the authorised person on file additional information may be requested. 5. Your signature Signature	Adviser (BA) access – Adviser
Name of person authorising Email address of person authorising Position of person authorising Note: If we do not have the signature of the authorised person on file additional information may be requested. 5. Your signature Signature	Office (BO) access – Managing Director or Office principal
Name of person authorising Email address of person authorising Position of person authorising Note: If we do not have the signature of the authorised person on file additional information may be requested. 5. Your signature Signature	Dealer (BD) access - Managing Director
Email address of person authorising Position of person authorising Note: If we do not have the signature of the authorised person on file additional information may be requested. 5. Your signature Signature	Signature
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Note: If we do not have the signature of the authorised person on file additional information may be requested. Your signature Signature	
5. Your signature Signature	Position of person authorising
5. Your signature Signature	
Signature	1 Note: If we do not have the signature of the authorised person on file additional information may be requested.
	5. Your signature
Date	Signature
Date	
	Date

Contact details:

Asgard Capital Management Ltd ABN 92 009 279 592 AFSL 240695 Online Services 1800 060 802 PO Box 7490, Cloisters Square, WA 6850



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