

Client Information Update Form Corporate



In this form, **you** and **your** refer to the client/s or the company's authorized signatory/ies, while **we, us, our** and the **Company** refer to Sun Life Investment Management and Trust Corporation (SLIMTC), which is a member of the Sun Life group of companies.

IMPORTANT NOTES & INSTRUCTIONS:

The accomplished and signed **Client Information Update Form - Corporate**, must be submitted via email to your SLIMTC Relationship Manager or to your Certified UITF Sales Personnel, along with the required documents. All signed documents shall be treated as original copies.

Please write legibly using **CAPITAL LETTERS** and write **N/A** if question/item is not applicable. Mark the box(es) with an "✓" to indicate your choice(s) and **sign the form** only when completely filled out.

A GENERAL INFORMATION

IMPORTANT NOTE

Any updates requested in this form will also be reflected in all of your accounts.

1. Business/Company Name

2. Date Accomplished (mm-dd-yyyy)

B BUSINESS/COMPANY INFORMATION CHANGE REQUEST

CHANGE IN BUSINESS/COMPANY NAME

3. Please specify the old and new business/company name

FROM

TO

4. Reason for Change

Update company/business name

For Correction

Other (Please specify)

CHANGE IN BUSINESS/COMPANY CONTACT INFORMATION

5. New Company/Business Phone Number
(e.g. +632XXXXXXXXXX)

6. New Company/Business Mobile
Phone Number (e.g. 9XXXXXXXXXX)

7. New Company/Business Email Address

8. New Company/Business Address (please completely fill out the fields below)

Unit / Floor No., Building Name, Building No., Street, Subdivision/Village, Barangay

City/Municipality

Province/State

Country

Zip Code

9. New Company/Business Mailing Address (please completely fill out the fields below if not same with company/business address)

Same as company/business address

Unit / Floor No., Building Name, Building No., Street, Subdivision/Village, Barangay

City/Municipality

Province/State

Country

Zip Code

C AUTHORIZED REPRESENTATIVE INFORMATION CHANGE REQUEST

CHANGE IN NAME OR AUTHORIZED REPRESENTATIVE

10. Please specify name of the old and new name

FROM

TO

First Name

Middle Name

Last Name

Suffix (e.g., SR., JR., III)

11. Reason for Change

- Marriage
- Annulment
- For Correction
- New Authorized Representative *(please also fill out items 12 to 21)*
- Others *(please specify)*

CHANGE IN AUTHORIZED REPRESENTATIVE'S CONTACT INFORMATION

12. New Work Phone Number
(e.g. +632XXXXXXX)

13. New Work Mobile Phone Number
(e.g. 9XXXXXXXX)

14. New Work Email Address

NEW AUTHORIZED REPRESENTATIVE'S INFORMATION

15. Designation/Job Title*

16. Sex (at birth) *

- Male
- Female

17. Date of Birth (mm-dd-yyyy)

18. Nationality*

19. Valid ID Presented*

20. Valid ID Number*

21. Valid ID Expiry Date* (mm-dd-yyyy)

F ACKNOWLEDGEMENT AND AGREEMENT

By signing, you confirm your understanding and agreement on the following:

- a. All information provided in this form are true, correct, and complete. SLIMTC shall update your records based on the information you provided.
- b. You agree to update SLIMTC within 30 calendar days of any change in the information supplied in this form, including but not limited to your citizenship(s)/nationality/(ies), and tax status. You also agree to submit documents requested by SLIMTC to maintain and update your account.
- c. You acknowledge the Company's statutory responsibility to provide your information, including but not limited to your local or foreign tax status, to the appropriate authority.
- d. You agree that SLIMTC shall process your personal data to: (i) service this account, (ii) process transactions and enforce the contract, and (iii) pursue its legitimate and lawful rights and interests and other purposes allowed under laws and regulations, including, but not limited to, those relating to data privacy and anti-money laundering. SLIMTC may disclose your personal data to its affiliates, service providers, and other third parties for processing consistent with the foregoing purposes, who shall be bound by contractual or other reasonable means to protect your personal data.
- e. Your rights include the right to be informed, access your data, rectify errors, object to processing, and file a complaint. For more information about your rights and how we protect your data, you may access our privacy policy at <https://online.sunlife.com.ph/privacy>. Should you have any concerns in relation to your rights or the processing of your personal data, you may get in touch with our Data Protection Officer at privacy.slimtc@sunlife.com.
- f. You agree to indemnify and hold free and harmless the Company, its affiliates, directors, employees, legal representatives, and assignees against loss and damage from any claims and/or actions made by any third person in relation to the processing of this request.

Authorized Signatory (1)

Printed Name

Signature

Place of signing (City/Municipality, Country)

Date Signed (e.g. mm-dd-yyyy)

(if there are multiple account holders/authorized signatories required to sign, please use the space below)

Authorized Signatory (2)

Printed Name

Signature

Place of signing (City/Municipality, Country)

Date Signed (e.g. mm-dd-yyyy)

Authorized Signatory (3)

<input type="text"/>	<input type="text"/>
Printed Name	Signature
<input type="text"/>	<input type="text"/>
Place of signing (City/Municipality, Country)	Date Signed (e.g. mm-dd-yyyy)

Authorized Signatory (4)

<input type="text"/>	<input type="text"/>
Printed Name	Signature
<input type="text"/>	<input type="text"/>
Place of signing (City/Municipality, Country)	Date Signed (e.g. mm-dd-yyyy)

Authorized Signatory (5)

<input type="text"/>	<input type="text"/>
Printed Name	Signature
<input type="text"/>	<input type="text"/>
Place of signing (City/Municipality, Country)	Date Signed (e.g. mm-dd-yyyy)

LIST OF REQUIREMENTS

Standard Requirements	Accomplished Client Information Update Form - Corporate and Valid ID of Company's authorized representative
Change of Name (For authorized signatories)	
Due to Marriage	Marriage Certificate issued by the Philippine Statistics Authority (PSA)
Due to Annulment (Change to maiden name)	Annulment Decision with Certificate of Finality coming from the Clerk of Court
Due to Name Discrepancy, Addition of Other Legal Name, or A.K.A.	Notarized Affidavit of Identity/Discrepancy Birth Certificate issued by Philippine Statistics Authority
Change of Name (For Business/Company)	
Due to Amendment of Articles of Incorporation or Partnership	Certificate of Filing of Amended Articles of Incorporation or Partnership with SEC Amended Articles of Incorporation or Partnership
For Sole Proprietorship	Certificate of Registration with DTI Business Permit
For Cooperative	Certificate of Registration issued by Cooperative Development Authority (CDA) Amended Articles of Cooperation
Due to Incorrect Spelling	Articles of Incorporation or Partnership

FOR SLIMTC USE ONLY**Signature Verified by**

<input type="text"/>	<input type="text"/>	<input type="text"/>
Printed Name	Signature	Date (e.g. mm-dd-yyyy)

Approved by

<input type="text"/>	<input type="text"/>	<input type="text"/>
Printed Name	Signature	Date (e.g. mm-dd-yyyy)

Sun Life Investment Management and Trust Corporation is a member of the Sun Life group of companies | www.slimtc.ph

For inquiries, feedback, requests, or complaint, you may contact us through (02) 8849 9888 or email us at SLIMTC.Communications.Notice@sunlife.com
 Sun Life Investment Management and Trust Corporation (SLIMTC) is regulated by the Bangko Sentral ng Pilipinas (BSP). BSP Telephone Number (02) 8708 7087; Email: consumeraffairs@bsp.gov.ph; BSP Webchat: <http://www.bsp.gov.ph>