

Change of Personal Details Form

Complete this form using black pen - Print in clear CAPITAL LETTERS Change of name - Complete sections 1, 2 and 4 Change of contact details - Complete sections 1, 3 and 4 Questions? Please call our Customer Service department on 1800 035 035, 7am to 7pm (AEST) Monday to Friday. **Contract Number: Vehicle Registration Number:** 1. Borrower Details Title Date Of Birth dd/mm/yyyy Mr Mrs Miss Ms Other First Name Middle Name Last Name 2. Change of Name Title Mr Mrs Miss Ms Other M **New First Name** New Middle Name New Last Name **New Signature** Old Signature X X The reason for the change: Using a new name due to Marriage (original certified copy* of Marriage Certificate^ must be attached) Using a former name (certified copy* of original Birth Certificate and a copy of one of the following certified* document must be attached: Marriage Certificate OR Change of Name Certificate OR Decree Nisi/Divorce Certificate) Using a new name (certified copy* of original Change of Name Certificate must be attached)

*Certified Copies

Certified copy means a document that has been certified as a true copy of an original document by one of the following persons:

^ Marriage certificate must be issued by the state registry office i.e. Births, Deaths and Marriages. Ceremonial

Justice of the Peace

certificate will not be accepted.

- Police Officer
- Solicitor or Barrister

- Dentist or Medical Practitioner
- Pharmacist
- Vet
- Australia Post worker who is in charge or has 5 years continuous service
- Accountant who is a member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practising Accountants or the Institute of Public Accountants

New Residential Address Unit number Street Number Unit number Street Number Street Name Suburb Postcode New Mailing Address Same as residential address Unit number Street Number Street Name Street Name Suburb Postcode

4.	Signature

New Contact Details

Mobile Number

Email Address

I acknowledge it is an offence under the Anti- Money Laundering and Counter Terrorism Financing Act 2006 to provide false or misleading statements or produce misleading documents.

☐ Home

☐ Work

Signature				
y	Date			
		/	/	

Other Phone

Submit the Form

Once all relevant sections have been completed in full, please submit this form with any supporting documents required to:

- Mail Locked Bag Locked Bag 7000, Mount Waverley, Victoria 3149
- Fax 03 9797 4408
- Email <u>nfsa csc@nissan.com.au</u>