

**!** Complete this form to grant limited account access to an individual who is not an account owner. Account owners already have account access authority.

## PART 1. ACCOUNT OWNER INFORMATION

First Name:  M.I.:  Last Name:  Account #:

Last 4 SSN:  Date of Birth: (MM/DD/YYYY)  Email Address:

Check here to apply this change to all accounts owned by the above listed account owner.

## PART 2. ADDITIONAL AUTHORIZED INDIVIDUAL INFORMATION

I hereby authorize the below named individual to have the limited access authority indicated until such time as I should notify Digital Trust to remove such account access.

### Pre-Existing Individual Authorization

Keep all previously listed Authorized Individuals.

Remove all previously listed Authorized Individuals.

Remove only the following Authorized Individual:

### Authorized Individual Information *(Authorized Individual cannot be a minor.)*

Add the Authorized Individual listed below:

Full Name:  Email:  Phone:

Address:  City:  State:  Zip:

Please create a 4-Digit PIN:  **!** PIN Numbers should be kept confidential as they can be used in place of verifying personal information.

## PART 3. ACCOUNT OWNER INFORMATION

I certify that all information provided by me is correct and may be relied upon by the Custodian. I understand that I am responsible for determining eligibility requirements related to my account(s) and investments and if necessary have sought assistance from qualified legal, tax, or investment professionals.

Signature of Account Owner:  Account Owner Name: *(Print or Type)*  Date: *(MM/DD/YYYY)*