

CHANGE OF ADDRESS FORM

(Please use BLOCK CAPITALS)

To the Registrar: Capita Corporate Registrars Plc
Unit 5, Manor Street Business Park
Manor Street, Dublin 7.

COMPANY NAME: Irish Life & Permanent plc

Investor Code* _____ (if known)

FULL NAME(S)

(The exact full name(s) as registered is/are needed and can be verified by referene to a share certificate, recent dividend, or other such communication from us about this holding.)

1st or sole holder	
2nd holder (if any)	
3rd holder (if any)	
4th holder (if any)	

Please alter the address in the books of the company from;

OLD ADDRESS

(As at present registered and shown on a recent dividend or other such communication.)

To;

NEW ADDRESS

Signed: (1) _____ Signed: (2) _____

Signed: (3) _____ Signed: (4) _____

(Each holder affected by the change should sign)

Date _____

*** This can be obtained from a dividend counterfoil and should be entered if available.**

- NOTES:** (i) If more than one holding in the same company is affected please give full holders names and reference or account numbers of other holdings below.
- (ii) If the change affects holdings in other companies for which we act as Registrars, please give full details below. Specific advice of each company to which a change applies is needed.