

Request for Change

*Only applicable to Singapore policies starting with '00'

Policy No.*	Plan Name
Policy Owner (if other than Life Assured)	Life Assured

*cross out as applicable

1

Change of Address / Contact Details

New Address is for Residential / Mailing *

Postal Code

Home Telephone Number

Mobile Phone Number

Office Telephone Number

Email Address

*cross out as applicable

2

Change of Personal Particulars

Change Name of *Policyowner / Life Assured / Trustee to

Change ID number of *Policyowner / Life Assured / Trustee to

Change Nationality / Citizenship / Residency Status of *Policyowner / Life Assured / Trustee to

3

 Change of Signature of Policy Owner

Old Signature		New Signature	
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4

 Change of Payment Changes

Change Mode (Please select GIRO method if monthly mode is chosen)

Yearly Half-Yearly Quarterly Monthly

Change Method

Cheque GIRO

5

 Policy Changes

Change of Basic Plan Sum Assured to	
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Change of Basic Regular Premium (for ILP) to	
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Change of Supplementary Benefits

Add	Delete	Supplementary Benefit	Sum Assured
<input type="radio"/>	<input type="radio"/>		
<input type="radio"/>	<input type="radio"/>		
<input type="radio"/>	<input type="radio"/>		
<input type="radio"/>	<input type="radio"/>		

Termination of Policy (only applicable for Term plan)

6

Declaration and Consent

I request that the above change(s) be made to the policy. I understand that certain alteration(s) are not automatic and will not be effective until I have received an official letter from Zurich Life Insurance (Singapore) Pte Ltd (Zurich) confirming the change(s). I understand that Zurich may require further information or documentation.

I declare the information is true and complete. **For any change of personal particulars, I attach a certified true copy of NRIC, passport or deed poll for verification.**

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DD

MM

YYYY

Signature of Policy Owner/Trustee/ Assignee

Name of Adviser and Organisation