

Agent Code



**POLICY NUMBER**

NOTE: Fill out  with block letters. Put  on the tick boxes representing options.

**PART I - CONTACT INFORMATION UPDATE**

LAST NAME

FIRST NAME

MIDDLE NAME

Telephone :  Residence  Office

(   )   -     ex: (044) 123-4567

Mobile Phone

+ 6 3 -   -       ex: +63-900-1234567

E-Mail Address

**PART II - REQUESTED TRANSACTION**

**TRANSFER OF OWNERSHIP**

Fill out this portion with information about the NEW OWNER.

LAST NAME

FIRST NAME

MIDDLE NAME

Telephone :  Residence  Office

(   )   -     ex: (044) 123-4567

Mobile Phone

+ 6 3 -   -       ex: +63-900-1234567

E-Mail Address

Preferred Mailing Address:  Residence  Office

House / Building / Lot No.,  
Name of Street

District  City  Province  Zip Code

Date of Birth

m m d d y y y y  
 /  /

Sex

Male  
 Female

Relationship to the Insured

Relationship to Previous Owner

**PART III - SIGNATURE**

I/We hereby agree that should above request be approved by the Company, such request shall, from the date of such approval, amend in accordance with the terms thereof so approved the Policy to which the request refers.

Place Signed

Date: m m d d y y y y  
 /  /

New Owner's Signature

Previous Owner's Signature

Irrevocable Beneficiary

Assignee

PLEASE DO NOT SIGN ON A BLANK FORM.

**PART IV - ACKNOWLEDGEMENT**

Republic of the Philippines

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_) s.s.

Before me, the undersigned Notary Public in and for \_\_\_\_\_ personally appeared \_\_\_\_\_ with Competent Evidence of Identity: \_\_\_\_\_

known to me and to me known to be the same person who executed the foregoing Agreement, and acknowledged to me that they executed the same as their own free and voluntary act and deed.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my seal at \_\_\_\_\_, Philippines, this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

Doc. No. \_\_\_\_\_  
Page No. \_\_\_\_\_  
Book No. \_\_\_\_\_  
Series of 20 \_\_\_\_\_

\_\_\_\_\_  
**NOTARY PUBLIC**  
My commission expires December 31, 20 \_\_\_\_\_