

Personal details update

Please complete this form in **CAPITAL** letters and return it to your local Zurich office. The information you provide will replace the details we have for you.

Please note that if the new residential address of the policy owner(s) is in the United States, including any United States federally controlled territory, there are restrictions on the transactions you can undertake on your policy.

Contact details

We adhere to strict confidentiality procedures when we communicate with our clients. For security purposes, we will regard the details you provide as your authorised contact details; and it is therefore important that they are accurate and that you let us know if any of these details change.

Policy owner(s) details

Policy number

Policy owner 1

Title Mr Mrs Miss Ms Dr Other (please give details)

Family name

Forename(s)

Please give details of any previous names or aliases used (including maiden name)

Place of birth (town or city)

Nationality

Do you hold nationality in another country Yes No

If 'Yes', please confirm the country

Please note my residential address is:

Post code (UK Only)

Date residency effective from

D	D	M	M	Y	Y	Y	Y
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Postal address: Only complete this section if you do not wish for correspondence to be sent to your residential address.

My postal address is:

Please provide a PO Box address for post in the Middle East

Telephone number (include international country code)

Country of telephone number

Policy owner(s) details (continued)

Mobile number (include international country code)

Country of mobile number

Is this a US* based telephone number? Yes No

*The definition of US includes the 50 United States of America, the District of Columbia, Guam, Puerto Rico, US Virgin Islands, American Samoa and the Northern Mariana Islands.

Email address

Note: the email address you supply will be the only one we can automatically correspond with without the need for a further signed instruction.

Please state all countries where you are currently deemed to be resident for tax purposes

If you are currently tax resident in the United Kingdom please provide your National Insurance number, or if Singapore, please provide your National Registration Identity Card number.

Country/Countries of tax residence	Tax reference number(s)*

Policy owner 2

Title Mr Mrs Miss Ms Dr Other (please give details)

Family name

Forename(s)

Please give details of any previous names or aliases used (including maiden name)

Place of birth (town or city)

Nationality

Do you hold nationality in another country Yes No

If 'Yes', please confirm the country

Please note my residential address is:

Post code (UK Only)

Date residency effective from

Postal address: Only complete this section if you do not wish for correspondence to be sent to your residential address.

My postal address is:

Please provide a PO Box address for post in the Middle East

Telephone number (include international country code)

Country of telephone number

Mobile number (include international country code)

Country of mobile number

Is this a US* based telephone number? Yes No

*The definition of US includes the 50 United States of America, the District of Columbia, Guam, Puerto Rico, US Virgin Islands, American Samoa and the Northern Mariana Islands.

Policy owner(s) details (continued)

Email address

Note: the email address you supply will be the only one we can automatically correspond with without the need for a further signed instruction.

Please state all countries where you are currently deemed to be resident for tax purposes

If you are currently tax resident in the United Kingdom please provide your National Insurance number, or if Singapore, please provide your National Registration Identity Card number.

Country/Countries of tax residence	Tax reference number(s)*

Data protection

The personal information supplied in this form and from any background checks carried out by Zurich International Life Limited (the Company) will become part of the data held by the Company and may be:

- used for administration and accounting purposes and for the prevention and detection of fraud and financial crime;
- shared with other members of the Zurich Insurance Group and third parties who provide relevant services to the Company;
- passed to countries outside the Isle of Man (or the Company's regional branches) that may not have equivalent levels of data protection; however the Company would be responsible for ensuring that equivalent levels of protection are maintained;
- passed to any relevant tax authority or governmental, regulatory or other bodies as required by law.

Signature of policy owner 1

Signature of policy owner 2

Date

D	D	M	M	Y	Y	Y	Y
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Date

D	D	M	M	Y	Y	Y	Y
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Zurich International Life Limited is registered in Bahrain under Commercial Registration No. 17444 and is licensed as an Overseas Insurance Firm – Life Insurance by the Central Bank of Bahrain.

Zurich International Life Limited is authorised by the Qatar Financial Centre Regulatory Authority.

Zurich International Life Limited is registered (Registration No. 63) under UAE Federal Law Number 6 of 2007, and its activities in the UAE are governed by such law.

Zurich International Life Limited (Singapore branch) is licensed by the Monetary Authority of Singapore to conduct life insurance business in Singapore. Member of the Life Insurance Association of Singapore. Member of the Singapore Financial Dispute Resolution Scheme.

Calls may be recorded or monitored in order to offer additional security, resolve complaints and for training, administrative and quality purposes.

Zurich International Life is a business name of Zurich International Life Limited which provides life assurance, investment and protection products and is authorised by the Isle of Man Financial Services Authority.

Registered in the Isle of Man number 20126C.

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