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## Change of Address Notification

### 1.0 Name(s) as currently recorded by Partners Life

#### Life Assured 1 (LA1)

Mr  First Name

Mrs  Middle Name(s)

Miss  Surname

Ms  Previous Name

Other  Male  Female  Date of Birth   
D D M M Y Y

OR  
Company Name

#### Life Assured 2 (LA2)

Mr  First Name

Mrs  Middle Name(s)

Miss  Surname

Ms  Previous Name

Other  Male  Female  Date of Birth   
D D M M Y Y

OR  
Company Name

### 2.0 Your Previous Details

#### Life Assured 1 (LA1)

PO Box  Private Bag  Street Number

Number

Street Name

Rural Delivery No.  Suburb

Town/City  Postcode

Email Address

Business Phone

Home Phone

Mobile Phone

#### Life Assured 2 (LA2)

PO Box  Private Bag  Street Number

Number

Street Name

Rural Delivery No.  Suburb

Town/City  Postcode

Email Address

Business Phone

Home Phone

Mobile Phone

### 3.0 Your New Details

#### Life Assured 1 (LA1)

PO Box  Private Bag  Street Number

Number

Street Name

Rural Delivery No.  Suburb

Town/City  Postcode

Email Address

#### Life Assured 2 (LA2)

PO Box  Private Bag  Street Number

Number

Street Name

Rural Delivery No.  Suburb

Town/City  Postcode

Email Address

First policy owner's name/company details	Second policy owner's name/company details
Signature/authorised signature of first policy owner	Signature/authorised signature of second policy owner
Date <input type="text"/> D D M M Y Y	Date <input type="text"/> D D M M Y Y