

Scotiabank Centre, 5th Floor, Corner Duke & Port Royal Streets, Kingston, Jamaica W.I.
Telephone: (876) 922-3765, 1-888-467-5542; email: sjlic.service@scotiabank.com

Policy Owner/Plan Member: _____ Policy/Plan No: _____
Insured's Name (if other than Policy Owner): _____
Mailing Address: _____
Email address: _____ TRN: _____
Telephone Contact: (Home) _____ (Cell) _____ (Work) _____

Select [v] the appropriate box to indicate the change required. Please attach certified copies of all relevant legal documents.

- NAME CHANGE/CORRECTION** (Marriage Certificate, Deed Poll, Decree Absolute, Identification)
- Policy Owner/Plan Member Life Insured Beneficiary Contingent Owner
 Trustee Other (specify) _____

Previous Name _____

Current Name _____

Reason for change:

- Marriage Correction Other (explain) _____

- DATE OF BIRTH CORRECTION** (Birth certificate or Passport to be attached)
- Policy Owner/Plan Member Life Insured Beneficiary Other

Dated at _____ this _____ day of _____ 20 _____

Signature of Policy Owner/Plan Member

Signature of Witness
(SJLIC Representative, Justice of the Peace, Notary Public)