

MEMORANDUM OF TRANSFER

Step 1 Policy details	Policy number <input style="width: 100%;" type="text"/>	Date of transfer <input style="width: 100%;" type="text"/>	Lives insured <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/>
Step 2 Current owner details <i>If there is more than one policy owner then both owners must sign. All signatures must be witnessed by another person.</i>	Full name (Current owner) <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/>	Signature (Owner 1) <input style="width: 100%; height: 20px;" type="text"/>	Full name (Current owner 2) <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/>
Step 3 Witness details <i>To be completed by third party, other than policy owner(s)</i>	Full name (Witness) <input style="width: 100%; height: 20px;" type="text"/>	Signature (Witness) <input style="width: 100%; height: 20px;" type="text"/>	
Step 4 New owner details <i>The new policy owner can be a person, a company or a bank. The new owner cannot be a family trust, however ownership can be transferred to individual trustees without mentioning the trust or the fact that individuals are trustees. If the new owner is a bank, the bank must stamp and sign the form.</i>	Full name (New owner 1) <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/>	Mailing address (New owner 1) <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/>	
	Date of birth <input style="width: 100%; height: 20px;" type="text"/>	Daytime contact number <input style="width: 100%; height: 20px;" type="text"/>	
	Occupation <input style="width: 100%; height: 20px;" type="text"/>	Email address <input style="width: 100%; height: 20px;" type="text"/>	
	Signature <input style="width: 100%; height: 20px;" type="text"/>	Mailing address (New owner 2) <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/>	
	Full name (New owner 2) <input style="width: 100%; height: 20px;" type="text"/> <input style="width: 100%; height: 20px;" type="text"/>	Daytime contact number <input style="width: 100%; height: 20px;" type="text"/>	
	Date of birth <input style="width: 100%; height: 20px;" type="text"/>	Email address <input style="width: 100%; height: 20px;" type="text"/>	
	Occupation <input style="width: 100%; height: 20px;" type="text"/>	Signature (Witness) <input style="width: 100%; height: 20px;" type="text"/>	
	Signature <input style="width: 100%; height: 20px;" type="text"/>	Full name (Witness) <input style="width: 100%; height: 20px;" type="text"/>	

For use by CIGNA

Registered (Stamp and number)

Signature (Authorised Officer)

 Date _____

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Please retain this page as it is an important part of your policy document. If you require a Memorandum of Transfer to be registered, please complete this form and return to CIGNA Life Insurance Limited, P O Box 24-031, Wellington, Freepost Authority Number 118004. Should you require personal assistance please contact CIGNA Life Insurance Limited on **0800 270 714**.

Instructions for Completing the Memorandum of Transfer Form

We will require the following information to be included as follows. (We are unable to accept photocopied or faxed versions of this document)

Step 1- Policy details section

Date of transfer -Insert the date the existing policy owner(s) complete the Memorandum of Transfer
Names of lives insured – provide names of current life insureds

Step 2 – Current owner details

Full name of owner and signature – insert name of current policy owner or owners, if more than one then each owner is required to sign the form

Step 3 – Witness details (a witness must be an adult not associated with the policy)

Full name and signature –the witness must be a third person (not a policy owner or insured) to verify that the owner is the person who signed the form. A signature is also required.

Step 4 – New owner details

Full name and signature – insert name of the **new** policy owner or owners, each owner required to sign the form.

Date of birth – each new policy owner is required to provide their date of birth

Mailing address – the address where correspondence is to be sent

Phone number and email address- Current contact details as appropriate

Step 5 - Witness details (a witness must be an adult not associated with the policy)

Full name and signature – the witness must be a third person (not a policy owner or insured) to verify that the **new** owner is the person who signed the form. A signature is also required.

Once the form is fully completed, please return to our office **along with your original policy documents** at your earliest convenience.