

## Change of Agent Form

### **POLICY INFORMATION** *(For Policyholder only)*

Name as shown in NRIC : \_\_\_\_\_

NRIC or FIN number : \_\_\_\_\_

Mobile Number : \_\_\_\_\_

Email Address : \_\_\_\_\_

☐ **Please update my mobile number and email address for all valid policies with Sompo Insurance Singapore**

### **CHANGE OF AGENT REQUEST**

I would like to make the following arrangement with immediate effect:

☐ **Assign new servicing agent**

Name of New Servicing Agent : \_\_\_\_\_

Intermediary Code : \_\_\_\_\_

Producer Code : \_\_\_\_\_

☐ **I do not want to have a servicing agent**

*(By ticking this box, I agree to be a direct customer of Sompo Insurance Singapore Pte. Ltd.)*

Apply changes to all valid policies with Sompo Insurance Singapore?

☐ Yes ☐ No, please provide the policy number(s) which you would like the new information to be effected on.

### **ACKNOWLEDGMENT**

By signing below, I have given consent to Sompo Insurance Singapore to release policy information to the new appointment as stated above.

Signature and signed date