

CHANGE OF SERVICING AGENT (INTERMEDIARY) FORM**POLICY INFORMATION (FOR POLICYHOLDER ONLY)**

*Policyholder's Full Name : _____

*Policyholder's NRIC number : _____

*Mobile Number : _____

*Email Address : _____

CHANGE OF SERVICING REQUEST

I would like to appoint the following servicing agent (intermediary) with immediate effect.

☐ **NEW AGENT (Intermediary)**

Full Name : _____

Intermediary Code : _____

Producer Code : _____

☐ **SOMPO INSURANCE SINGAPORE PTE. LTD.** (as direct customer)

This request applies to:

☐ **ALL** my existing policy(ies) with Sompo Insurance Pte. Ltd.

☐ The policy(ies) listed below (state policy number):

1. _____
2. _____
3. _____

**Please release the relevant policy information to my newly appointed intermediary for his/her easy reference.*

ACKNOWLEDGEMENT FROM POLICYHOLDER

Signature of Policyholder

Date of Acknowledgement (dd/mm/yyyy)