

Sample Nominee Details Update Document for Term Policy

Policy Holder Details

Policy Number: _____

Full Name: _____

Date of Birth: _____

Contact Number: _____

Email Address: _____

Address: _____

Updated Nominee Details

Nominee Full Name: _____

Relationship with Policy Holder: _____

Date of Birth of Nominee: _____

Nominee Address: _____

Contact Number: _____

Email Address: _____

If Nominee is a Minor

Appointee Full Name: _____

Relationship with Nominee: _____

Contact Number: _____

Declaration:

I hereby request the insurance company to update the nominee details in my term policy as per the information provided above. I confirm that all the details furnished are true and correct to the best of my knowledge.

Policy Holder's Signature

Date