

## CHANGE OF NAME FORM

When complete, please sign and date the form, and return.

### SECTION 1. PERSONAL DETAILS

Policy number(s) (if known):	
Policyholder full name:	
Date of Birth ( DD / MM / YYYY ):	
Policyholder full name: (If joint policy)	
Date of Birth ( DD / MM / YYYY ):	
Telephone number(s):	

### SECTION 2. CHANGE OF NAME

Please complete this section and send copies of the relevant documents shown below. Please refer to the leaflet entitled 'Confirming your identity' for guidance on certifying the documents. **If the documents are not available, please contact us.**

1. Due to **MARRIAGE** or **CIVIL PARTNERSHIP**: certified copies of your Marriage/Civil Partnership Certificate, **plus** an original or certified copy of your Passport or Driving Licence
2. Due to **DIVORCE**: certified copies of your Decree Absolute/Dissolution Order, your Passport or Driving Licence **and** your Birth Certificate if you are using your maiden name
3. Due to **CHANGE IN CIRCUMSTANCE(S)**: certified copy of your Deed Poll.

New Name:	New Signature:	Date:
Previous Name:	Previous Signature:	

It's important to include your signature as proof of your request because protecting our customers from potential fraud is something we take very seriously.

There are three possible ways to add your signature.

**Option 1 – Got a printer?**

Add your signature to your printed form(s). You can either scan or take a photo of your paperwork.

**Option 2 – No printer?**

Complete your form(s) online and scan or photo of a handwritten letter asking us to accept your form(s).

Please make sure your signature appears clearly on your handwritten letter.

**Option 3 – Add an electronic signature to your form(s)**

If you can add your signature to your form(s) using a digital pen on the screen, find the Adobe PDF Fill & Sign' feature to draw and add your signature.