

Change Nominated Beneficiaries

Living Annuity Plus

Individuals



This form will only be accepted when submitted with a completed and signed 'Client Details – Existing Individual Investor' form available from our Client Services Centre.

1. Investor details

Investor name

SA ID number

Please note:

- The beneficiaries listed below will replace existing beneficiaries. If you wish to retain some of your previous beneficiary nominations, please include their details on this form
- Beneficiary nominations will only be accepted on written instruction from the investor; persons acting on behalf of the investor may not nominate beneficiaries and may not sign this form
- Your beneficiaries will receive your elected percentage of the total policy benefits upon your death. The balance of your policy benefit is paid out to the insurer, in return for the top-ups received for the duration of the policy
- Please indicate below in what proportion your beneficiaries are to share in these proceeds
- Beneficiary percentage allocation must equal 100%, no decimals allowed

Do you want the beneficiaries nominated herein to apply to all your investment contracts?

☐

Yes

☐

No

If 'No', please provide investment contract number

First beneficiary

Percentage allocation
(no decimals)

%

Relationship

If beneficiary is an individual

Title and surname

First names

Date of birth

SA ID number

Passport number
(if foreign national)

Passport expiry date

Passport country

Nationality

Cell phone number (mandatory)

+

(0)

Alternative contact number

+

(0)

Email address (mandatory)

If beneficiary is a legal entity

Registered name

Registration number

Country of incorporation

Cell phone number (mandatory) + (0)

Email address

Second beneficiary

Percentage allocation (no decimals) % Relationship

If beneficiary is an individual

Title and surname

First names

Date of birth

SA ID number

Passport number (if foreign national)

Passport expiry date Passport country

Nationality

Cell phone number (mandatory) + (0)

Alternative contact number + (0)

Email address (mandatory)

If beneficiary is a legal entity

Registered name

Registration number

Country of incorporation

Cell phone number (mandatory) + (0)

Email address

Third beneficiary

Percentage allocation (no decimals) % Relationship

If beneficiary is an individual

Title and surname

First names

Date of birth

SA ID number

Passport number (if foreign national)

Passport expiry date Passport country

Nationality

Cell phone number (mandatory)

+

(0)

Alternative contact number

+

(0)

Email address (mandatory)

If beneficiary is a legal entity

Registered name

Registration number

Country of incorporation

Cell phone number (mandatory)

+

(0)

Email address

Fourth beneficiary

Percentage allocation (no decimals)%

Relationship

If beneficiary is an individual

Title and surname

First names

Date of birth

D

D

M

M

Y

Y

Y

Y

SA ID number

Passport number (if foreign national)

Passport expiry date

D

D

M

M

Y

Y

Y

Y

Passport country

Nationality

Cell phone number (mandatory)

+

(0)

Alternative contact number

+

(0)

Email address (mandatory)

If beneficiary is a legal entity

Registered name

Registration number

Country of incorporation

Cell phone number (mandatory)

+

(0)

Email address

If you would like to nominate additional beneficiaries, please attach a separate list signed by the investor detailing the information required above