

Memorandum of Transfer



How to fill in this form

Complete section 1 to change the ownership of this policy. Please state your preferred method of communication in section 2.

Notes

- Section 1 must be completed in full before this assignment can be registered by Asteron Life. By signing section 1 you are agreeing to the Privacy Act provisions overleaf.
- If this policy is owned by a person other than the Person or Persons Insured, or the policy has been previously assigned, the person signing as Transferor must be the owner of the policy or the Transferee named in the last registered Memorandum of Transfer, as appropriate.
- Please advise the Company to whom future communications concerning this policy are to be sent.
- To effect an assignment of this policy, complete the below Memorandum of Transfer.

Print, complete and sign this form. Return to us by: Email (scanned copies) to contactus@asteronlife.co.nz,

Fax 0800 808 116 or +64 4 470 8992

Post to Asteron Life, PO Box 894, Wellington 6140, Freepost 795

Section 1 Memorandum of Transfer

Policy Details

Policy number

Transfer of Ownership

Transferred from	Current owner 1	Signature	<input type="text"/>	Date of transfer	<input type="text"/>
Transferred from	Current owner 2	Signature	<input type="text"/>		
Transferred from	Current owner 3	Signature	<input type="text"/>		

Transferred to New owner 1

Signature Date

Date of birth

Address

Transferred to New owner 2

Signature Date

Date of birth

Address

Transferred to New owner 3

Signature Date

Date of birth

Address

Please ensure that this form is signed by a witness:

Witnessed by Name of witness

Signature Date

Memorandum of Transfer

Privacy Act 1993

For the purpose of the Privacy Act 1993, we confirm that we collect and use your personal information and may disclose your personal information to third parties for the purpose of administering your policy or in order to comply with legal requirements. Your details are stored securely with companies within the Suncorp Group and you can contact us at any time to request access to and correction of your personal information. The collection of this information is required under the terms of your policy.

For further information, please refer to the "Asteron Life Privacy Statement" which is specific to New Zealand law and the Suncorp Group's "Suncorp Privacy Policy". Both are available at www.asteronlife.co.nz, by phoning 0800 808 101, or by writing to Asteron Life Limited, PO Box 894, Wellington 6140.

I/We confirm that by transferring my/our ownership of the above policy, the new policy owner(s) may be able to access some of my/our personal information held by Asteron Life.

If I/we fail to provide any information requested in this Memorandum of Transfer, Asteron Life may be unable to process the Transfer.

Section 2 Preferred method of communication

My preferred method of communication:

Please tick one Email Phone Letter Fax

Contact details for communications
