



NOTICE TO DESIGNATE OR ALTER OR REVOKE DESIGNATION OF BENEFICIARY

DATE:

TO: NCB INSURANCE COMPANY LIMITED
"THE ATRIUM"
32 TRAFALGAR ROAD
KINGSTON 10

I, the named Owner of the Insurance Policy described below, hereby revoke all previous designation(s) of beneficiary(ies) under the Policy, and hereby name the following person(s) as my beneficiary(ies) under the Policy, with effect from the date of this Notice.

THE OWNER:

THE INSURANCE POLICY:

PERSON(S) HEREBY DESIGNATED AS BENEFICIARY(IES): \_\_\_\_\_ %

Relationship to insured: \_\_\_\_\_

\_\_\_\_\_ %

Relationship to insured: \_\_\_\_\_

\_\_\_\_\_ %

Relationship to insured: \_\_\_\_\_

\_\_\_\_\_ %

Relationship to insured: \_\_\_\_\_

Sworn by the aforesaid Owner at )
)
in the Parish of )
the day of 200 )
before me: )

Signature of Policy Owner

Justice of the Peace for the Parish of

For policies with PREFERRED BENEFICIARIES (spouse and/or children), the DEED FORM must be completed in conjunction with this form.