



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):

_____ % _____ (I/R) *

Relationship to insured: _____

_____ % _____ (I/R) *

Relationship to insured: _____

_____ % _____ (I/R) *

Relationship to insured: _____

_____ % _____ (I/R) *

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

* I - Irrevocable, R - Revocable



It is a condition to the directive contained in this notice that if this form is used to alter or revoke the designation of a beneficiary(ies) who was/were originally irrevocably named, then, except where the beneficiary(ies) has/have ceased to be the Owner's spouse, otherwise than by death, the consent of the named beneficiary(ies) for the alteration or revocation must be obtained in writing. If this condition applies, the previous Beneficiary(ies) must give consent below.

I/We, the previous Beneficiary(ies) under the Policy referred to above, having originally been irrevocably named as such by the Owner, hereby consent to the designation of a new Beneficiary(ies) under the said Policy in my place.

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

Signature(s) of Irrevocable Beneficiary(ies)

Justice of the Peace for the Parish of

* I – Irrevocable, R - Revocable