

RISK ADDRESS NOMINATION FORM

(To be completed by the policy owner)

Details of policy owner

Policy no.	_____	Tel no.	_____
Policy owner	_____	Cell no.	_____
Email	_____		
Name of insured	_____		

Risk Address

I, the policy owner, hereby cancel all previous risk addresses (if any) in respect of this policy and appoint the following risk address under this policy.

Risk Address

NOTE: A Holiday home is not covered on the above policy.

Risk Address

Signature (policy owner)	_____	Date	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y				
Signature (spouse)	_____	Date	<table border="1"><tr><td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr></table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y				

NOTE: Signature of spouse required for policy owners married in community of Property.

