

## CHANGE OF ADDRESS REQUEST

Date:

The Resident Manager  
LIC International BSC (c)  
P.O. Box – 60793, Dubai,  
United Arab Emirates.  
Tel: (+971) 4 3354858  
Fax: (+971) 4 3354684  
Email: [mail@licinternationaluae.com](mailto:mail@licinternationaluae.com)

Dear Sir,

**Re: Change of Address – Policy No.....**

With reference to the above policy I hereby request you to change the address as mentioned below:

Name of the policyholder	
Address	
Telephone (Mobile)	
Telephone (Office)	
Telephone (Residence)	
Email ID	

Kindly make all future communications at the above mentioned address.

Thanking you,

Yours truly,

Signature of the policyholder:

Name: