

Nomination of beneficiary

Information sheet

When to use this form

Use this form to nominate a beneficiary on a life insurance policy that is held outside superannuation. Generally, your beneficiary will receive the death benefit in the event of the death of the life insured.

If there is no valid nomination in place at the time of the death of the life insured, the proceeds of the policy will be paid to the surviving policy owner, or the policy owner's estate.

Nominating a beneficiary

A nominated beneficiary is a person(s) who has been nominated by the policy owner to receive part or all of the benefits payable in the event of the death of the person insured. A nominated beneficiary has no other rights under the policy.

There are rules around nominating beneficiaries that you need to consider:

- Only individuals as policy owners can nominate beneficiaries.
- Where a policy is jointly owned then all policy owners must be the lives insured in order to jointly nominate a beneficiary.
- A nominated beneficiary can be a natural person, corporation or trust.
- We need to know the full name, date of birth, contact details and the percentage split allotted to each nominated beneficiary.
- All nominations made are unconditional.
- The policy owner can make a nomination or change a nomination at any time provided we receive the request in writing prior to the death of the life insured.
- If the ownership of the policy is assigned or transferred to another person or entity, then any previous beneficiary nomination becomes invalid.
- If a nominated beneficiary dies or the corporation or trustee ceases to exist before the death of the life insured, then the nomination becomes invalid and any benefit that would have been payable to the beneficiary will be paid to the policy owner or the policy owner's estate.

Nomination of beneficiary

You may nominate up to five beneficiaries and the portion of the death benefit each is to receive. Please use whole numbers and ensure the total of the percentages is 100%.

1. Policy details

Policy number

Policy owner 1

Title Date of birth

Surname

Given name(s)

Residential address

Suburb State Postcode

Phone number

Email address

Policy owner 2 (if applicable)

Title Date of birth

Surname

Given name(s)

Residential address (if different to policy owner 1)

Suburb State Postcode

Phone number

Email address

2. Beneficiary details

Beneficiary 1

Full name

Date of birth Gender Male Female

Residential address

Suburb State Postcode

Phone number Proportion of benefit %

Relationship to policy owner(s)

Beneficiary 2

Full name

Date of birth Gender Male Female

Residential address

Suburb State Postcode

Phone number Proportion of benefit %

Relationship to policy owner(s)

2. Beneficiary details (continued)

Beneficiary 3

Full name

Date of birth

Gender

 Male Female

Residential address

Suburb

State

Postcode

Phone number

Proportion of benefit

 %

Relationship to policy owner(s)

Beneficiary 4

Full name

Date of birth

Gender

 Male Female

Residential address

Suburb

State

Postcode

Phone number

Proportion of benefit

 %

Relationship to policy owner(s)

Beneficiary 5

Full name

Date of birth

Gender

 Male Female

Residential address

Suburb

State

Postcode

Phone number

Proportion of benefit

 %

Relationship to policy owner(s)

What you need to know

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AND/OR

Estate/Legal Personal Representative

Proportion
of benefit
 %

Total **1 0 0** %

3. Declaration

By completing this Nomination of beneficiary form, I acknowledge and agree with the following statements:

- I have read and understood the information in the Nomination of beneficiary information sheet and the information I have provided is true and complete.
- I nominate the person(s), corporation or trust named within this form to receive any proceeds that may become payable under this policy as a result of the death of the person insured.
- Payment of benefits will be made on the basis of the latest beneficiary nomination received in writing by Resolution Life.
- If a nominated beneficiary predeceases the person insured, then that nominated beneficiary's benefit will be paid to the policy owner(s) (or their estate).
- I may vary the nomination at any time by completing a new Nomination of beneficiary form and forwarding it to Resolution Life.

Signature of policy owner 1

Date signed

Signature of policy owner 2 (if applicable)

Date signed

Where to send this form

Mail or email this completed form to:

Resolution Life Customer Service
GPO Box 5441
Sydney NSW 2001
insurance@resolutionlife.com.au

Any questions?
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