

Name Change or Correction

Important Notes:

- Use this form to advise BMO Life Assurance (BMO Insurance) of a change to the first and/or last name of an individual or a corporate name change.
- For an Individual name change, submit a copy of valid government-issued photo identification (e.g. Canadian passport or driver's license).
- For a Corporate name change submit supporting documents (example: Articles of Amendment, copy of the Official Document of Certificate used by Provincial Authority or other applicable legal documents). For Universal Life products, also complete the Verification of Identity and Third Party Determination [form, 576E](#) and Declaration of Tax Residence for Entities [form, RC519](#).
- Do not use this form for a transfer of ownership. Use Change of Policy Ownership [form 409E](#).

Policy Number(s)

Section A - Name Change

Policy Owner (first, middle initial, last or full name for a corporation)	To:
Insured (first, middle initial, last)	To:
Annuitant (first, middle initial, last)	To:
Beneficiary (first, middle initial, last)	To:

Email Address - by providing my email, I consent to receiving documents and information about this policy electronically.

Reason for Change

Marriage
 Correction
 Divorce
 Adoption
 Other: _____

Section B - Signatures

- All persons signing this form have attained the age of majority.
- If there are two or more policy owners, all must sign.
- For a corporately owned policy, signature(s) and title(s) of the signing officer(s) with authority to bind the corporation is required.

Province Signed	Date (DD/MMM/YYYY)	Signature	Print Name
		Policy Owner #1 and Title (if applicable) X	
		Policy Owner #2 and Title (if applicable) X	