

# Change of Name Notification

Policy Number(s)

## Your previous details

Title  Mr  Mrs  Ms  Miss  Dr  Other

Surname  First name

Middle name  Date of birth

Previous signature

## Your new details

Title  Mr  Mrs  Ms  Miss  Dr  Other

Surname  First name

Middle name

New signature

**Reason for the name change**  Marriage  Registered name change  Reversion to Maiden Name

Other

## Supporting documentation

Please attach a copy of **one** of the following documents showing your new name to this form:

- A copy of Marriage Certificate
- Birth Certificate
- Certificate showing change of name
- New Zealand Driver License
- New Zealand Passport

## Your current address details

Street address

Suburb/Town  Postcode

Phone

Email

## Returning your form:

Please check that all your details are correct and that you are attached **one** of the required supporting documents that shows your new name. Return to OnePath Life by:

Post: OnePath Life (NZ) Limited,  
Private Bag 92131, Victoria Street West, Auckland 1142

Email: Scan this form and supporting documents and email to [insurance@onepath.co.nz](mailto:insurance@onepath.co.nz)