

Contact Us

If you bought your coverage through an Independent Insurance Advisor, contact your Advisor or contact:
 1-800-387-4483 • Fax 1-866-716-8999
insurance.clientservices@bmo.com

If you bought your coverage directly through BMO Insurance, contact:
 1-800-387-9855 • Fax 1-877-279-2656
insurance.DirectAdmin@bmo.com

NAME CHANGE OR CORRECTION

- 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, please 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](#).

Section A – Policy Information

Policy Number(s)

| | |
|--|--|
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| | |

Section B – Name Change

Name Change of:

| | |
|--------------------|-----|
| Policy Owner from: | To: |
| Life Insured from: | To: |
| Annuitant from: | To: |
| Beneficiary from: | To: |

Reason for Change

- Marriage
 Correction
 Divorce
 Adoption
 Other: _____

Section C – Signatures

| | |
|--|--------------------|
| Signature of Policy Owner #1 and Title (if applicable) | Date (dd/mmm/yyyy) |
| X | |
| Signature of Policy Owner #2 and Title (if applicable) | Date (dd/mmm/yyyy) |
| X | |