



AMENDMENT REQUEST FORM

POLICY HOLDER:	
MAIN LIFE (ID no.):	
POLICY NUMBER:	
EFFECTIVE DATE OF AMENDMENT:	

AMENDMENT REQUIRED

1. Amend Category	☐	2. Amend Personal / Contact Details	☐
3. Increase Cover Amount	☐	4. Change of Beneficiary	☐
5. Decrease Cover Amount	☐	6. Add on Benefit	☐
7. Add Dependants	☐	8. Payment Method	☐
9. Add Extended's	☐	10. Replace Main Member	☐

AMENDMENT DETAILS

	CURRENT	NEW
• Category		
• Cover amount		
• Premium payable		
• Payment method		
** Provide applicable Mandate, if payment is changed to either Stop Order or Debit Order.		

REPLACE MAIN MEMBER WITH SPOUSE OR EXTENDED MEMBER THAT IS COVERED ON THE POLICY

	CURRENT	NEW
Name and Surname		
ID Number		
Reason for Replacement		
Relationship to Main Member		

UPDATE BENEFICIARY

Name	Surname	ID number / Date of Birth	Relationship to Main Member

ADD DEPENDENT/EXTENDED



Name	Surname	ID number / Date of Birth	Relationship to Main Member	Cover Amount

REMOVE DEPENDANTS

Name	Surname	ID number / Date of Birth	Relationship to Main Member

REMOVE EXTENDED

Name	Surname	ID number / Date of Birth	Relationship to Main Member	Cover Amount

ADD ON BENEFITS

Meat (Cow)	☐	Bus (R10 000)	☐	Grocery (R3 000)	☐	CPC (R5)	☐
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AMENDMENT NOTES

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Signed at _____ on this _____ day of _____ 20____

Applicant Signature: _____

Lion of Africa Life Assurance Company Limited • Reg No. 1942/015587/06 • FSP No. 15283
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CEO: Paul Myeza

LionLife is an authorised financial services provider FSP 15283, and a licensed insurer licensed to conduct life insurance business.
For more information visit www.lionlife.co.za