

<b>Contact Us</b>	If you bought your coverage through an Independent Insurance Advisor, contact your Advisor or contact: 1-800-387-4483 • Fax 1-866-716-8999 <a href="mailto:insurance.clientservices@bmo.com">insurance.clientservices@bmo.com</a>	If you bought your coverage directly through BMO Insurance, contact: 1-800-387-9855 • Fax 1-877-279-2656 <a href="mailto:insurance.DirectAdmin@bmo.com">insurance.DirectAdmin@bmo.com</a>
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### CHANGE OF ADDRESS

- Use this form to advise BMO Life Assurance (BMO Insurance) to change the address on one or more policies.
- For any address changes outside of Canada, please also complete the following:
  - For an Individual – Declaration of Tax Residence for Individuals – Part XVIII and Part XIX of the Income Tax Act form [RC518](#)
  - For an Entity – Declaration of Tax Residence for Entities – Part XVIII and Part XIX of the Income Tax Act form [RC519](#)

#### Section A – Policy Information

##### Policy Number(s)


##### Policy Owner

Name of Policy Owner	Date of Birth (dd/mmm/yyyy)
Name of Policy Owner	Date of Birth (dd/mmm/yyyy)

#### Section B – Address Change

Effective Date of Change (dd/mmm/yyyy)

##### Previous Address

Address (street number and name)			Apt. #
City	Province/State	Postal/Zip Code	Country
Home phone number			

##### New Address

Address (street number and name)			Apt. #
City	Province/State	Postal/Zip Code	Country
Home phone number	Email Address	Business phone number and extension	

#### Section C – Signatures

Signature of Policy Owner #1 X	Date (dd/mmm/yyyy)
Signature of Policy Owner #2 X	Date (dd/mmm/yyyy)