



CLIENT SERVICES DEPARTMENT

Name: _____

Address: _____

Dear Policyholder:

Please review the following instructions prior to completing the attached Change of Ownership form. If you have any questions, please call our Client Services Department at (877)624-2249.

INSTRUCTIONS

1. Use the attached form to change the ownership on life insurance policies or annuity contracts owned by you. If the change of ownership is to apply to more than one policy or annuity, list all applicable policy numbers and insured names.
2. Use complete names (*John J. Smith, not J. J. Smith*).
3. Provide the street address (*and mailing address if different*), date of birth, and tax identification number of the new owner(s). Use Social Security numbers for individuals or Federal Tax I.D. numbers for business entities.
4. The **spouse** of the owner must also sign if any policy was issued in a **community property state**. (**CA, ID, NV, NM, WA, or WI**. Also in **LA**, but **ONLY** if the new owner will be "The Estate".) If the spouse is dead, a death certificate is required. If there has been a divorce, please furnish a certified copy of the divorce decree **and** property settlement agreement.
5. Because of their inability to legally exercise their ownership rights, it is recommended that a minor not be named owner.
6. **Juvenile Policies** - Unless otherwise endorsed, our juvenile policies stipulate that the insured shall become owner when he or she attains the age of majority. This change of ownership does not alter that stipulation, but only refers to that period prior to the insured reaching the age of majority.
7. It is not necessary to mail your policy, unless requested.

Please mail or fax the completed form to Boston Mutual Life Insurance Company, Attn.: Client Services Department, 120 Royall Street, Canton, MA, 02021. Or fax to (781)770-0490. A recorded copy will be returned to be attached to your policy.

To avoid delays, please be sure that the following signatures are completed, and signed by all necessary parties:

- **The current and new owners in all cases.**
- **The current beneficiary if designated as irrevocable; or, the current absolute assignee, if any.**
- **A witness other than the new owner and not having a personal interest (*insured, assignee, beneficiary, etc.*) in the contract.**



- CHANGE OF OWNERSHIP -

Please list the numbers and names on those policies you wish to change.

POLICY #: _____ INSURED: _____

As owner of the policy(ies) noted above, I hereby revoke the current ownership, and name as the new owner or owners the following:

NEW OWNER	Name	Date of Birth	Tax Identification Number
	Street Address	Mailing Address if Different	
NEW CONTINGENT OWNER	Name	Date of Birth	Tax Identification Number
	Street Address	Mailing Address if Different	

REQUEST FOR RETENTION OF OWNERSHIP *(on Juvenile Policies Only)*

As the current owner/payor of the above policy(ies), I respect retention of ownership of said contract(s) notwithstanding the insured(s) attaining the age of majority. Upon my death, the rights of ownership will pass to the contingent owner, if designated, or to the insured if he or she survives.

GENERAL PROVISIONS

The new owner or owners shall be entitled to exercise all rights and privileges of the policy(ies), subject to the provisions contained in the Ownership section thereof, and shall also be entitled to all proceeds and benefits due or to become due under the policy(ies), including deposits with the Company for payment of future premiums. **This change of ownership, however, shall not change any present beneficiary.**

If there is more than one owner, the ownership shall be shared jointly, unless specifically stated otherwise, and the consent of all joint owners will be necessary to exercise any right. Upon the death of a joint owner, the remaining owner or joint owners shall succeed to the rights and privileges of the deceased joint owner. Upon the death of the owner or all joint owners, any contingent owner or owners designated above shall become the owner or owners, succeeding to all the rights and privileges of ownership. If no contingent owner is designated, the estate of the owner, or the estate of the last joint owner to die will succeed to all the rights and privileges of ownership. If a corporate owner is dissolved or not in existence, the rights of the corporation hereunder, if any, shall pass to those entitled to receive such rights by law.

This change of ownership will take effect when recorded by the Company at its Home Office only if the policy or annuity is in force or is being continued under a nonforfeiture option on the date of this request. After recording, this change of ownership will relate back and take effect as of the date of this request, without prejudice to any payments made by the Company before recording.

Dated at _____ this _____ day of _____ year _____ .
City and State

 Signature of Beneficiary/Spouse *(if a community property state)*

 Signature/Social Security # of Present Owner

 Signature of Witness or Absolute Assignee *(if applicable)*

 Signature of New Owner

<p>This change of ownership has been recorded at the Home Office of BOSTON MUTUAL LIFE INSURANCE COMPANY</p> <p>Date Recorded: _____ By: _____ <small>Secretary</small></p>
