

Cancellation Form



Policy/plan numbers to be cancelled

Details of ALL policy owners

Policy owner 1 Mr/Mrs/Miss/Ms

First name	Last name
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Address

Postcode

Phone	()
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Policy owner 2 Mr/Mrs/Miss/Ms

First name	Last name
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Address

Postcode

Phone	()
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Policy owner 3 Mr/Mrs/Miss/Ms

First name	Last name
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Address

Postcode

Phone	()
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TO IMPROVE THE PRODUCTS AND SERVICES WE OFFER OUR CLIENTS, PLEASE INDICATE YOUR REASON FOR CANCELLING. THANK YOU.

Personal circumstances	<input type="checkbox"/> Retirement	<input type="checkbox"/> Moved overseas	<input type="checkbox"/> Mortgage repaid	<input type="checkbox"/> Change in personal circumstances
Performance	<input type="checkbox"/> Unhappy with the investment performance	<input type="text" value="Please state"/>		
Affordability	<input type="checkbox"/> Affordability of premium due to changes in circumstances (e.g. redundancy)	<input type="checkbox"/> Premium increases	<input type="checkbox"/> Fees or charges too high	
Suitability	<input type="checkbox"/> Policy is not suitable for my/our requirements	<input type="checkbox"/> Policy matured		
Service	<input type="checkbox"/> Adviser service provided was not satisfactory	<input type="checkbox"/> AIA service provided was not satisfactory		
Replacement	<input type="checkbox"/> Replaced with another policy issued by AIA			
	<input type="checkbox"/> Replaced with another policy issued by	<input type="text"/>		
	<input type="checkbox"/> Advised to change policy by my broker			
Other	<input type="checkbox"/> Other, please give details	<input type="text"/>		

Request and acknowledgement

- I/We request that the policy(ies)/plan(s) listed above be cancelled immediately.
- I/We consent to the use of the personal information provided in this form by AIA and/or any of its related companies so that they can process my/our cancellation of the policy(ies)/plan(s) listed above and to determine my/our reasons for cancellation. I/We understand that my/our personal information will be stored at AIA's head office, 74 Taharoto Road, Takapuna and by AIA's data storage providers, including cloud-based data storage providers (whether in New Zealand or elsewhere). I/We understand that AIA will take reasonable steps to keep such information secure. I/We understand that AIA may be required to disclose my/our personal information if disclosure is required by law, including laws of other jurisdictions, for example to government and regulatory authorities. I/We understand access to and correction of my/our personal information may be requested by me/us.
- I/We acknowledge that we no longer have this protection in place and therefore will no longer be covered should an event occur in regards to this policy.

IMPORTANT NOTICE: Signatures are required from ALL policy owners on joint policy(ies)/plan(s). Written confirmation will be sent to the policy owners named above.

Policy owner 1

Date

Policy owner 2

Date

Policy owner 3

Date

AIA House,
74 Taharoto Road,
Takapuna,
Auckland 0622

Private Bag 92499,
Victoria Street West,
Auckland 1142

Phone (Int.): +64 9 487 9963
Freephone: 0800 500 108
Email: enquireNZ@aia.com
Web: aia.co.nz



X00022 001b 2207