

Change in Sum Insured

State Life allows its valued policyholders to alter coverage under their policies to match with their changing needs and swings in financial position. Please fill out the form below for change in sum insured of your policy:

Policy No:

Policyholder's Name:

Date of Birth:

NIC No:

Address:

Tel: (Res):

(Off):

(Cell):

Email Address:

Original Sum Insured:

New Sum Insured:

Submit

Your request for change in sum insured is noted and after examining the possibility of affecting the desired change, our Policyholders Service Department will contact you soon for further requirements.