

## Change in Term

State Life allows its valued policyholders to alter coverage under their policies to match with their changing family structures and insurance requirements. You can enhance or reduce the originally selected term of your policy. If you are interested in such a change, please fill out the form below:

Policy No:

Policyholder's Name:

Date of Birth:

NIC No:

Address:

Email Address:

Tel: (Res):

(Off):

(Cell):

Original Term:

New Term:

Submit

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