



## INDIVIDUAL LIFE E.F.T/R.T.G.S. PAYMENT AUTHORISATION FORM

Policy No(s): .....

I, ..... \***FIRST NAME - MIDDLE NAMES**  
**- SURNAME** ], Owner  Claimant  Other  .....(Tick ✓ and/or write as appropriate) of the policy number(s) above stated, hereby authorize Britam Life Assurance Company (K) Limited to pay by electronic transfer all my current and future benefits, claims and any other proceeds against the stated policies into the following bank account:-

Account Name .....

Name of Bank.....

Bank & Branch code (e.g 03-094).....Branch Name & location (Town).....

Account Number.....

**I understand that all current and future benefits, claims and policy proceeds against the above named policies will be processed into this account unless a different account has been provided by me in writing thirty days (30days) before the benefit/claim/policy proceeds payment due date.**

I hereby attach a copy of my a) ATM card  b) Cancelled cheque  c) Bank Statement  d) Account Opening Card  e) Bank Confirmation Letter  (Tick ✓ where appropriate) as confirmation of my bank account details.

**IMPORTANT NOTICE: I understand that British-American Insurance Co. (Kenya) Ltd. shall not be liable if the bank account details provided above are incorrect and I hereby fully absolve British-American Insurance Co. (K) Ltd. from any liability arising therefrom.**

I confirm that this form has been filled and completed without any alterations

ID No. .... Passport No. .... Passport Expiry Date.....

Personal Mobile No(s):..... Personal landline numbers (Home).....

Office Mobile/Telephone..... Email Address .....

Postal Address ..... Post Code ..... Town/City.....

KRA Pin No .....

Current Occupation/Profession.....Name & Location of your Employer.....

Please *tick ✓ one* most preferred method of us communicating to you among the following options:

SMS  TELEPHONE  EMAIL  POSTAL LETTER

Name of Alternative Contact Person.....Relationship.....Telephone.....

Dated at (town): .....this .....day of ..... 20.....

Customer's Signature .....

Witness Name and Signature (Britam Staff).....