

Change of Address Form

To: Allianz S.A.L.
Hazmieh – Lebanon

Contract no.: _____ Name: _____

Change of Address of Business
 Residence

Kindly adopt this address as of _____ for all contact or correspondence
and to send any Statement of Account by Postal Mail:

(Bank Domiciliation)

Name : _____

Company Name : _____

Building : _____

Floor : _____

Block : _____ No: _____

Street : _____ No: _____

Neighborhood : _____

District/City/Village : _____

Casa and Country : _____

Mobile (mandatory) : _____

Telephone : _____

P.O. Box : _____

Fax No. : _____

Postal Code : _____

E-Mail (mandatory) : _____

By signing this format, I hereby acknowledge having been provided with Allianz S.A.L.'s Privacy Notice (available at the company's website: www.allianz.com.lb) and thus give my consent to Allianz S.A.L. to process my personal data for the purposes set out therein and to share my personal data with third party entities Allianz S.A.L. treats with.

I am entitled at all times to access and/or rectify and/or complete and/or update my personal information by reaching out to Allianz S.A.L..

I also agree and acknowledge that Allianz S.A.L. may periodically change, modify or otherwise revise the Privacy Notice without prior notification; my right of access, rectification and/or update of my personal data being respected at all times.

Date: _____

Signature: _____

Reserved for Allianz S.A.L.

Submitted by:

Received on:

PIN #

PIN updated on:

Received on: