

Representative/Agent Change



Complete form and mail to address located on the bottom of this form.

Representative must be appointed with Allianz Life Insurance Company of North America. For Licensing, call 800.226.0574.

If not appointed, complete the Representative Appointment Request Form.

Representative's name (print)

Name of broker/dealer

Representative's business address

Street, City, State, ZIP code

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Business telephone number

Business fax number

Individual changes

Contract owner name

 Contract number

I (we) the contract owner(s), want my (our) new representative to have telephone transfer access to my contract. Contract owner's initials: _____

Block changes

This is a block/bulk change — attach list of contract owners' names

This is a block/bulk transfer — attach list of contract numbers

Signatures

Individual changes

Contract owner's signature

Date

OR

Previous branch manager's signature

Date

Block changes

Accepting branch manager's signature Date

Fax to: 610.251.2337 Mail to: Allianz Life - Allianz Service Center, PO Box 1122, Southeastern, PA 19398-1122

Questions: Call the Allianz Service Center at 800.624.0197, Monday-Friday between 8:00 a.m. and 7:00 p.m. Eastern time