

# Specimen of Signature Request Form



## GULF OPERATIONS

P.O. Box 371916, Dubai, United Arab Emirates  
Tel +971 4 415 4555 Fax + 971 4 415 4445

**INSTRUCTIONS:** Use this form to provide your new signature. Please complete this form in its entirety to avoid any delays in processing. If you need any assistance in completing this form, please contact our customer service representatives.

**REQUIREMENTS:** (1) Specimen of Signature form; (2) Copy of Valid Passport or Copy of Valid I.D.; (3) Copy of Valid Residency (if applicable)

First Name of Policy Owner  Middle Name  Last Name   
 Policy No.(s)

**Old Signature (Arabic)**

**New Signature (Arabic)**

**Old Signature (English)**

**New Signature (English)**

**DECLARATION:** I certify that the above signatures belong to me and accurate to the best of my knowledge.

Signed at     20      
 City Country Day Month Year

Full Name of Witness / Agent  Full Name in his/her own handwriting Signature

Agent Code

### NEED HELP?

HOW TO CONTACT US						
COUNTRY	UAE	Kuwait	Oman	Bahrain	Qatar	Any other Country
CALL US	800 - MetLife (800 - 6385433)	+965 2 208 9333	800 70708	800 08033	800 9711	+971 4 415 4555
MAIL US	P.O. Box 371916, Dubai – U.A.E.					
E-MAIL US	CustomerServices.Gulf@metlife.ae					
WEBSITE	www.metlife-gulf.com					

**HOW TO SUBMIT THE FORM**

Please send **original** documents to:

**Customer Care - MetLife**  
P.O. Box 371916  
Dubai – U.A.E.

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