

pinnaclelife.co.nz



Pinnacle Life PO Box 1471 Auckland 1140

Fold last and seal down



Non-Smoker Declaration

Once you have been smoke-free and not smoked tobacco, vape or any other substance for 12 consecutive months, you can complete this statement and return it to Pinnacle Life Ltd to make the change on your policy.

Life	Life Ltd to make the change on your policy.	
Full Name	e	
Policy Nu	mber	
This states	ment is to confirm that I (name)	have given up
I have not	smoked tobacco or any other substance since (date)	and
therefore	wish to be assessed as a non-smoker for my insurance premiums.	
Yours Sinc	erely,	
		Fold up first
Signature	e: Date:	

Please check that all details are correct, then print, sign and return this form to Pinnacle Life Ltd, Freepost 114353, PO Box 1471, Auckland 1140, or scan and email it to ask@pinnaclelife.co.nz.

If you have any questions, please call our Customer Service Team on 0800 22 22 23.