

## Individual Tax Residency Self-Certification / Supplementary Form

			Policy Number (if available):												
Applicant 1 Name			Applicant 2 Name												
Residential Address			Residential Address												
Correspondence address (if different from residential address)			Correspondence address (if different from residential address)												
Are you a US citizen?  Are you a US resident for tax purposes?  Yes  No  If the answer to either of these questions is Yes, please provide  US Tax Identification Number (TIN) in the field below in addition to details of any other country of tax residence.			Are you a US citizen?  Are you a US resident for tax purposes?  Yes  No  If the answer to either of these questions is Yes, please provide  US Tax Identification Number (TIN) in the field below in addition to details of any other country of tax residence.												
		ated Tax Identification Nu a new country of tax reside										lease p	rovid	le an	
Country (1)	TIN(1)	Effective date	Country (1)	TIN(1)						Effective date				:e	
Country (2)	TIN(2)	Effective date	Country (2)	TI	TIN(2)						Effective date				
Country (3)	TIN(3)	Effective date	Country (3)	TI	TIN(3) Effective						e dat	date			
If a TIN is unavailable please provide the appropriate reason			If a TIN is unavailable please provide the appropriate reason												
form, I undertake to i	nform SEB Life Interna	rmation is true and com ational of said changes v cordance with all releval	vithout delay. I unde	erstan	d tha	at ir	nfor	mati	on p	orovi					
Applicant 1 Signature	Applicant 2 Signature														
X Drint None	X														
Print Name		Date dd/mm/yy	Print Name							Date dd/mm/yy					