

Appendix 2 – Change of name when deceased

I, the undersigned Notary, holder of ID Card N	umber declare
the following:	
On the of of the year, Mr/Mrs/Ms _	, registered
subscriber of the service described below and holder of Account	Number
passed away.	
Service consisted of:	
The Universal heirs of Mr/Mrs/Ms being	:
Signature:	
Signature:	
Signature:	
Signature:	
I hereby declare that they agree that the service described above be	e transferred to
holder of ID Card Number, resi	ding at
who accepts to be bound by Me	lita's Standard Terms and
Conditions as endorsed by the deceased. An updated version is avai	lable at www.melita.com.
The new account holder also accepts that: Change of name shall be effective verification and confirmation of all documents/declarations included herein this request, Melita is authorized to ask for additional information/documents to indemnify and hold Melita Ltd harmless in respect of claims arising out of the mentioned account and release Melita Ltd from any responsibility connected charges and balances on the Account including any amounts due for back the responsibility of the New Account Holder. It shall be the responsibility of the any automated payment methods such as direct debit.	n. For the purpose of processing nts from the parties; and agrees the change of name of the above- ed with such change of name. All pilled services shall be at the sole
Notary's Signature: Customer's Signature:	
Notary's Stamp: E-mail Address:	