

Appendix 2 – Change of name when **deceased**

I, the undersigned Notary _____, holder of ID Card Number _____ 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 transferred to _____ holder of ID Card Number _____, residing at _____ who accepts to be bound by Melita's Standard Terms and Conditions as endorsed by the deceased. An updated version is available at www.melita.com.

The new account holder also accepts that: Change of name shall be effective on the bill cycle following a full verification and confirmation of all documents/declarations included herein. For the purpose of processing this request, Melita is authorized to ask for additional information/documents from the parties; and agrees to indemnify and hold Melita Ltd harmless in respect of claims arising out of the change of name of the above-mentioned account and release Melita Ltd from any responsibility connected with such change of name. All charges and balances on the Account including any amounts due for back billed services shall be at the sole responsibility of the New Account Holder. It shall be the responsibility of the Heirs to inform Melita to cancel any automated payment methods such as direct debit.

Notary's Signature: _____ Customer's Signature: _____

Notary's Stamp: _____

E-mail Address: _____