



Transfer Form

Transfer of Policy to a new Managing Agent

Postal Address
PO Box 1167
Whangarei NZ 0140

Phone (09) 438 0650
Fax (09) 438 0651
office@rlinz.co.nz

Simply print this form from our website, complete and return to REAL Landlord Insurance NZ Ltd today by

FAX: (09) 438 0651

Name of Real Estate Agent office

From Date / /

(Property Manager's Name)

Please transfer cover on the following property(s)

Landlord's Surname	Property being transferred	Transfer date	Policy	
			Landlords Preferred	

New Managing Agent is

Property Manager's Name