

The Guardian Insurance & Annuity Company, Inc.

change of address

Regular Mail - Send To:

The Guardian Insurance & Annuity Company, Inc. Retirement Solutions P. O. Box 26210 Lehigh Valley, PA 18002-6210

Express Mail - Send To:

The Guardian Insurance & Annuity Company, Inc. Retirement Solutions 3900 Burgess Place, 3 South Bethlehem, PA 18017 Questions / Customer Service
Call (800) 221-3253, Options 1,0
M - F, 8:30 a.m. - 7:00 p.m. ET or
Visit www.guardianinvestor.com
Fax (610) 807-6083 or (610) 807-7841

Use this form to request a change of address only. To request name, ownership or contract registration changes you must use form: GIAC-47. In most cases, if you currently have a user ID and password for My Account Manager, you can change your address online at http://www.guardianinvestor.com/public/account.

Confirmation statements can only be sent to one address.

Note: State tax is based on your primary residential address.					
I. OWNER INFORMATION					
Contract Number (I)	Contract Number (2)	Contract Number (3)	Contract N	lumber (4)	
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Print Contractowner's Name Social Security/Tax ID #		Daytime Telephone	E-Mail	E-Mail	
Print Joint Contractowner's Name (if applicable)	Social Security/Tax ID #	Daytime Telephone	E-Mail		
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2. TYPE OF CHANGE (Check one)					
☐ Contractowner Address ☐ Annuitant Address ☐ Mailing Address Only (Skip Section 3 and Complete Section 4.a.)					
3. NEW PRIMARY RESIDENTIAL ADDRESS INFORMATION (Complete this section to change the primary residential address.)					
Primary Residential Address		City	State	Zip	
4.a NEW MAILING ADDRESS (If different from new primary residential address.)					
Mailing Address		City	State	Zip	
Street Address (If mailing address is a P.O. Box)		City	State	Zip	
4.b ALTERNATE TEMPORARY MAILING ADDRESS*					
* Use only to redirect all mail from The Guardian Insurance & Annuity Company, Inc. for a specified period of time. Instructions must include month, date and year.					
General or open-ended instructions will not be processed.)					
Mailing Address		City	State	Zip	
Street Address (If mailing address is a P.O. Box)		City	State	Zip	
ou cer resistant (if maining sections is 2 minutes)					
Use alternate temporary mailing address from: to to					
mm/dd/yyyy mm/dd/yyyy					
5. SIGNATURES					
I hereby authorize The Guardian Insurance & Annuity Company, Inc. to process the change(s) requested above.					
Signature of Contractowner			Date	Date	
Simple was at laint Continue at a way (if any)			Date	Date	
Signature of Joint Contractowner (if any)		Date			