

REQUEST FOR PAYMENT ON SURRENDER OR MATURITY

Please read the following important notes before completing this form.

IMPORTANT NOTES

1. As early encashment charges may apply, we strongly recommend you obtain a surrender quotation before completing this form.
2. You should pay particular attention when you are surrendering the plan if you intend to take out another one. Not only will you pay charges on some contracts when you surrender your current plan but you will incur more charges when you enter into a new plan. For this reason you are strongly advised to speak to your professional adviser when considering a change.
3. Please note that no action will be taken on any request to surrender until written notification, signed by all policyholders, has been received by Friends Provident International Limited.
4. We will accept faxed instructions, however no money will be released until all original documentation has been received and verified. Please fax to + 44 (0) 1624 821142.
5. Please note that the payment of surrender benefits may be delayed until all necessary documentation has been received.
6. If you wish to surrender individual policies, which make up part of the Plan or Bond, you should specify the policies to be surrendered, and also provide dealing instructions to cancel sufficient units to cover the value of the policies being surrendered.
7. Please note that surrender of your contract may have taxation consequences. We therefore suggest that you contact your professional financial adviser to discuss these implications.
8. UK RESIDENTS' REPORTING REQUIREMENTS – Any policyholder who is UK resident has an obligation, under the UK self-assessment tax regime, to report to the UK Inland Revenue any chargeable event arising in relation to the contract. Under UK law we have a statutory requirement to supply information to the UK Inland Revenue about UK resident policyholders in certain circumstances.

CHECKLIST

Please include with your claim:

Please tick

Fully completed Payment on Surrender/Maturity Payment form.

Policy schedules of any policies being fully surrendered.

If any policies are lost, a Lost Policy Declaration form needs to be completed.

Have all relevant policyholders signed this form?

If you are fully surrendering your plan within two years of its commencement date please complete reasons why you are surrendering below.

Please note that failure to complete this section (if required) will delay the processing of any claim.



FRIENDS PROVIDENT
INTERNATIONAL

PLAN DETAILS

Full name(s) of Policyholder(s)

Plan Number/Plan Type (IIA, FGP, MPA etc)

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Policy numbers (if individual policies to be surrendered)

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Address

Daytime telephone number (incl std code).

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Fax number (if applicable) In case of queries

--

E mail address

--

Is the above your residential address

Yes

If not, in which country are you resident

No

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DECLARATIONS

Please complete the following declarations:

I/We* request that Friends Provident International Limited surrenders the Policies listed above in accordance with the Policy conditions. I/We* acknowledge that a payment by Friends Provident International Limited in accordance with the information contained in this form will discharge Friends Provident International Limited's liability for all claims under the Policies.

I/We* certify that*

- I am/We are* entitled to receive the payment requested above
A receiving order has not been made against me/any of us*
A bankruptcy order has not been made against me/any of us*

* Delete as applicable

SIGNATURES

Signature 1 Date Policyholder/Trustee/Assignee [Date input box]

Signature 2 Date Policyholder/Trustee/Assignee [Date input box]

Signature 3 Date Policyholder/Trustee/Assignee [Date input box]

Signature 4 Date Policyholder/Trustee/Assignee [Date input box]

Signature 5 Date Policyholder/Trustee/Assignee [Date input box]

Signature 6 Date Policyholder/Trustee/Assignee [Date input box]

Witnessed by Date [Date input box]

Name of Witness [Text input box]

Occupation [Text input box]

Address [Three stacked text input boxes]

PLEASE NOTE. Witness must not be related to the Policyholder/Claimant.

We will calculate the surrender value based on the value of the units at the next appropriate dealing day(s) and in accordance with the Policy Provisions, after the receipt of this request form satisfactorily completed and accepted by Friends Provident International Limited. Payments will not be released until all necessary original documentation and settlement of funds have been received.

PAYMENT OPTIONS

PLEASE NOTE. Surrender Proceeds will be paid in the Plan currency unless otherwise requested.

PAYMENT TYPE

Transfer of assets (bonds only) If yes, state re-registration name

Please complete back page if all assets are not transferred

BACS (£ UK only) BACS has three day clearance

Telegraphic Transfer TT charges will be incurred by yourself

Payment Details BACS/TT

Payment should be made direct to my/our* bank or building society account (must be policyholders account):

Name of bank or building society

Address

Sort Code/Swift Code

Postcode

Account holder(s) name(s)

Account number



FRIENDS PROVIDENT
INTERNATIONAL

Friends Provident International Limited

Registered & Head Office: Royal Court, Castletown, Isle of Man, British Isles, IM9 1RA

Telephone: +44 1624 821212 Facsimile: +44 1624 824405

Incorporated company limited by shares. Registered in the Isle of Man No. 11494

Regulated by the Financial Services Authority for UK business. Provider of life assurance and investment products.