

Important Notes:

1. Please use one form per policy. The form must be completed in ink. Any amendments must be countersigned. Signature must be consistent with our record. Names should be written as they appear in NRIC/Passport. Please submit photocopies of NRIC or Passport as documentary evidence if the name per our record is different from the name per your NRIC or passport.
2. For surrender of Policy, Policy contract and photocopy(ies) of NRIC/PP/BC (both sides) of Policy Owner(s), Assignee, Trustee(s) and Life Insured(s) should be submitted with this form.
3. For company-owned policy, please provide a list of signatories authorized to sign this form. This form must bear the company stamp. Please also submit a photocopy of the NRIC/PP of the authorized signatory and a copy of the ACRA business profile (extracted not more than 3 months from the date of submission of this form).

Please read carefully before making a decision on your insurance policy

We wish to highlight to you that an insurance policy is intended to meet your long-term financial needs. Therefore, in surrendering your policy (fully or partially) before its maturity date, you are losing valuable benefits, and it may not be possible for you to obtain a similar level of protection on the same terms in the future.

- **Additional Fees/Charges**
 If you surrender your policy, fully or partially and then buy a new policy or other investment product, you will incur new charges. These may include:
 - (i) Distribution Fee
 Commission is paid to Agents/Financial Representatives on all new insurance policies/investment products.
 - (ii) Policy Fee
 A policy fee is usually incurred for each policy.
- **Other Option**
 If your policy has Net Surrender Value, you may choose to apply for a loan to meet short term financial needs.
- **Change in Terms and Conditions**
 Surrendering your insurance policy for another policy could result in higher premiums and loss of specific policy features due to changes in age or health.

Owner/Assignee/Trustee’s Completion

I/We* wish to apply for Withdrawal/Surrender* of my/our* Heritage Policy as indicated below.

Withdrawal of US\$ _____ .

Note:

- Withdrawal may reduce the Face Amount or the Policy Value depending on the option chosen.
- Withdrawal is allowed only once per Policy Month.
- Please note that Policy will lapse when the maximum amount is withdrawn.

Surrender of Policy

Policyowner/Assignee/Trustee/Beneficiaries’ Declaration

I/We* declare that:

- This Policy is not assigned to any other party.
- I/We* am/are* not an undischarged bankrupt(s), in winding up, receivership or judicial management. There are currently no pending bankruptcy proceedings, winding up proceedings, receivership or judicial management proceedings against me/us*.
- To the best of my/our* knowledge, the beneficiary(ies) is/are* not an undischarged bankrupt(s), in winding up, receivership or judicial management. There are currently no bankruptcy proceedings, winding up proceedings, receivership or judicial management proceedings against him/her/them*.
- I/We* understand and agree that policy proceeds made payable to Trustee(s) are for the benefit of beneficiary(ies).
- I/We* agree to indemnify and hold harmless the Company from and against all demands, claims, actions, damages, suits, proceedings, assessments, judgements, costs and legal and other expenses arising as a result of the Company acting in accordance with these instructions.

1.	This section is applicable for policies NOT under section 49L Insurance Act (including company-owned policies):			
	Signature of Policy Owner/Assignee:	*Representative to sign if submission through Representative		
Name: NRIC/PP No.: Contact No.: Date:		Name: Branch Code: Contact No.: Date:		

Policy proceeds (if any) are payable to policyowner/assignee.

2.	This section is applicable for policies which are under section 49L Insurance Act:			
	Signature Policy Owner:	#Signature of Trustee:	+Signature of Beneficiary/Parent/Guardian:	+Signature of Beneficiary/Parent/Guardian:
Name: NRIC/PP No.: Contact No.: Date:	Name: NRIC/PP No.: Contact No.: Date:	Name: NRIC/PP No.: Contact No.: Date:	Name: NRIC/PP No.: Contact No.: Date:	Name: NRIC/PP No.: Contact No.: Date:
	+Signature of Beneficiary/Parent/Guardian:	+Signature of Beneficiary/Parent/Guardian:	+Signature of Beneficiary/Parent/Guardian:	*Representative to sign if submission through representative
Name: NRIC/PP No.: Contact No.: Date:	Name: NRIC/PP No.: Contact No.: Date:	Name: NRIC/PP No.: Contact No.: Date:	Name: NRIC/PP No.: Contact No.: Date:	Name: Branch Code: Contact No.: Date:

The policy owner must get the consent of:

- (i) **#any** of the trustees but he/she cannot be the policy owner. If there is only 1 trustee and he/she is the policy owner, the policy owner can re-appoint another trustee using a prescribed form which can be obtained from www.manulife.com.sg, the representative or our Customer Service.; **OR**
- (ii) **+all** of the beneficiaries. Each beneficiary must be at least 18 years old. For beneficiary who is below 18 years old, the parent/guardian (who is not also the policy owner) will sign on behalf of the beneficiary. If parent/guardian is signing, please submit proof of relationship.

Policy proceeds (if any) are payable to the trustee signing this form. If the beneficiary/parent/guardian signs the form, we will issue a cheque to each beneficiary/parent/guardian for the beneficiary's share.