


**Please remember to...**

-  Countersign any amendments
- Ensure that the appropriate boxes are checked
-  Note that submission cut-off time is 3pm

**And for Corporate Policies...**

- Enclose list of authorized signatories and specimen signatures of authorized signatories
- Enclose photocopies of NRIC/Passport of authorised signatories
- Enclose a copy of the latest ACRA business profile (or its equivalent for foreign corporations) extracted not more than 6 months from submission date of this form

# 1 POLICY INFORMATION

Full Name of Owner \_\_\_\_\_ NRIC/Passport No. \_\_\_\_\_

Policy Number \_\_\_\_\_

# 2 GUARANTEED WITHDRAWAL AMOUNT (GWA)/INCOME FOR LIFE (IFL) OPTIONS

## A. Commence GWA/IFL Option (For Policies that have not elected GWA/IFL)

**GWA Option 1: GWA entitlement divided by the following frequency**

- Annually    
  Semi-Annually    
  Quarterly    
  Monthly

**GWA Option 2: Specified amount of US/\$\$ \_\_\_\_\_ at each frequency**

- Annually    
  Semi-Annually    
  Quarterly    
  Monthly

**IFL Option: IFL entitlement divided by following frequency**

- Annually    
  Semi-Annually    
  Quarterly    
  Monthly

- For GWA Option 1 & IFL Option : If there is any prior withdrawal in this Policy Year, we will pay you the remaining GWA/IFL entitlement.
- For GWA Option 2 : If total withdrawals in the Policy Year exceed the GWA entitlement, redemption charges will be imposed on the excess.
- For IFL option : It is only applicable from the Life Insured's 65th birthday.
- Withdrawals are payable in US\$ (for US\$ denominated policy) and S\$ (for S\$ denominated policy).
- Semi-annual, quarterly and monthly modes - we will only process if amount per frequency is at least US\$/S\$1000.

## B. Switch from GWA Option to IFL Option

**Switch from GWA option to IFL option**

- If there is any prior withdrawal in this Policy Year, we will pay you the remaining IFL entitlement.
- Where you elect to switch to IFL option, your entitlement in this Policy Year will be the IFL entitlement. As such, if the total withdrawals in this Policy Year had exceeded the IFL entitlement, payment will only commence the next Policy Year.
- If you are currently under the semi-annual, quarterly or monthly mode and the IFL entitlement divided by frequency is less than US\$/S\$1000, we will change the frequency to annual.

## C. Change Amount and/or Frequency of Payments (For Policies that have already elected GWA/IFL Options)

**Change amount for payment under GWA option to US\$/S\$ \_\_\_\_\_ at each frequency**

- The amount indicated will be payable in addition to any prior withdrawal in this Policy Year. If total withdrawals in the Policy Year exceed the GWA entitlement, redemption charges will be imposed on the excess.
- Semi-annual, quarterly and monthly modes- we will only process if amount per frequency is at least US\$/S\$1000.

**Change the frequency of payment under GWA/IFL option to**

- Annually    
  Semi-Annually    
  Quarterly    
  Monthly

- Payment will commence on current due date. *For e.g. current due date under annual is 31 Dec 2012. Request made on 31 Mar 2012 to change to semi-annual. First semi-annual payment will fall on 31 Dec 2012.*
- Semi-annual, quarterly and monthly modes- we will only process if amount per frequency is at least US\$/S\$1000.

VA-2025-04



PA041A

### 3 DECLARATION & AUTHORISATION

1. I/We understand the contents of this form and confirm that I/we wish to perform the transaction selected above.
2. I/We confirm that this Policy is not assigned to any other party or is assigned only to the assignee who has signed this form.
3. I/We confirm that I/we/the beneficiaries am/are not undischarged bankrupts), in winding up, receivership or judicial management and there are currently no pending or threatened bankruptcy proceedings, winding up proceedings, receivership or judicial management proceedings against me/us/ the beneficiaries.
4. I/We am/are aware that this form will not be effective until it is formally accepted by Manulife.
5. I/We confirm that the above information is true and correct, and I/we authorise Manulife to effect the request on my/our policy(ies).
6. Applicable for submission via Facsimile / Electronic mail ("Electronic Services") -  
I/We hereby authorise Manulife to carry out the above-mentioned policy transaction(s) on my/our Policy received via Electronic Services. I/We acknowledge that Manulife is not responsible for verifying the authenticity of the instructions given by me/us or purported to be given by me/us. Manulife reserves the right to withhold or disallow the execution of instructions for verification or other purposes and shall not be liable for any losses incurred in consequence. I/We agree that Manulife shall not be liable for any losses arising from instructions lost in transmission whether due to breakdown in the system or otherwise. Manulife retains full authority and discretion to amend the terms and manner of use of the Electronic Services (including terminating the use of such Electronic Services) at all times. Please note the transmission of instructions via Electronic Services shall be evidenced by the receipt of a successful transmission report(in the case of facsimile) or message (in the case of electronic mail).
7. I/We agree to indemnify and hold harmless Manulife from and against any and all demands, claims, actions, damages, suits, proceedings, assessments, judgments, costs, losses (whether direct, indirect, special or consequential) including legal costs, and other expenses arising from or in connection with Manulife accepting and acting on these instructions (including where relevant, the use of the Electronic Services).
8. I/We agree that the personal data collected in this form will be used by Manulife for the purpose of complying with my/our request and other related purposes only.
9. I/We further confirm that I/we have read and understood Manulife Statement of Personal Data Protection which may be amended by Manulife from time to time ("Manulife Statement"), and I/we hereby consent to collection, use, disclosure and processing of personal data in accordance with Manulife Statement and agree to be bound by Manulife Statement. I/We have obtained a hard copy of the Manulife Statement from Manulife and/or downloaded a soft copy of the Manulife Statement from [www.manulife.com.sg](http://www.manulife.com.sg).

Signature of Owner/Assignee

Name \_\_\_\_\_

Contact No. \_\_\_\_\_ Date \_\_\_\_\_

If you wish to understand the list of purposes for which your personal data may be used or disclosed, you may refer to the Statement of Personal Data Protection located at our website ([www.manulife.com.sg](http://www.manulife.com.sg))

#### Need Help?

Please contact your **Financial Representative** for further assistance.

#### Completed?

Submit the completed form with the required documents to us through any of these modes:

- a. Login in to customer portal, MyManulife ([www.mymanulife.com.sg](http://www.mymanulife.com.sg)) under Servicing > Upload Forms > Other transactions to upload your completed form (signature not required)
- b. Mail to 8 Cross Street #15-01, Manulife Tower, Singapore 048424 (with matching wet-inked signature and subject to operational hours)
- c. Walk-in: Client Service Centre  
8 Cross Street  
#13-01, Manulife Tower  
Singapore 048424