

POLICY LOAN REQUEST

(To be prepared in duplicate)



Policy Number: Issue Date:
 (Day Month Year)

Policy Owner: Life Insured:

LOAN AMT. REQUESTED: \$ **STAMP DUTY: \$**

NET CHEQUE: \$ **TOTAL LOAN TO-DATE: \$**

(Loan amt. requested less Stamp Duty)

INITIAL INTEREST RATE: %

I/We hereby apply to Tatil Life Assurance Limited for a loan in the amount shown above in accordance with the terms of the above Policy and hereby agree that:

1. I am/We are of full age and I am/we are legally entitled to the Policy.
2. The amount of the loan shall be added to any previous loan granted under this Policy.
3. The amount of the loan together with any unpaid interest less any repayment will be referred to as the total loan.
4. Interest is payable on the loan on the next Policy anniversary and at each subsequent anniversary until the total loan has been repaid. Any interest, which is not paid when due, will be added to the total loan and will also bear interest.
5. The company will determine the loan interest rate from time to time. The initial interest rate is that shown above.
6. The total loan will be a first charge on the Policy and the Company shall deduct that total loan from the Policy proceeds before settlement of any claim under the Policy.

Mandate For Payment

Please make (crossed) cheque payable to _____
 (If Bank, state Bank Account No.)

and send/deliver to _____

Dated at _____ this _____ day of _____ 20 _____

 Signature of Policy Owner

 Signature of Witness

 Signature of Beneficiary/Trustee

 Signature of Witness

 Signature/Stamp of Assignee

 Signature of Witness

Policy Owner Contact #:

Policy Owner ID/DP/PP #:

Beneficiary 1 Contact #:

Beneficiary 1 ID/DP/PP #:

Beneficiary 2 Contact #:

Beneficiary 2 ID/DP/PP #:

Prepared By:

Date:

Checked By:

Date:

Authorized By:

Date:

Policy document seen:

Statutory Declaration attached:

Lost Policy Fee paid:

Salary Deduction / Banker's Order amended:

Follow-up on Lumpsum required:

Please see reverse for instructions