

1. General Information		Name of Life Insured (Last, First, MI)	Place of birth	Citizenship
		Name of Policy Owner, if different from Life Insured, (Last, First, MI)	Place of birth	Citizenship
		Mailing Address	Policy Number	
		Address Abroad (If applicable)	Email Address	
		Telephone No./Mobile No.	Telephone No. Abroad (if applicable)	TIN

2. Details of request

Dividend withdrawal

Currency:

Peso (Php) Dollar (USD)

Amount in words *in words* _____
in figures _____

Apply to premium due on Policy Number(s) _____

Please deposit to my Chinabank Bank Account:

Bank branch: _____

Account: _____

Swift Code (Dollar): _____

Other instructions _____

Requirements:

1. Duly filled out Policy Loan Agreement form
2. Policy Contract
3. Photocopy of Two (2) Valid IDs
4. SLPO (*Self Liquidating Premium Option*) Waiver Form (If policy is under SLPO)

Self Liquidating Premium Option (SLPO)

Effective this date and every policy anniversary thereafter, kindly withdraw from the accumulated dividends the amount required for the annual premium due. Please notify me when the total accumulation is used up and additional premium payments become necessary.

3. Signatures

Date signed

Place signed

Name and signature of Policy Owner/Payor

Name and signature of Life Insured

Name and signature of Agent/Witness

Agent's Code

4. For company use only

Original documents presented:

Policy Contract

Valid ID(s)

Documents received/Signature verified by:

Branch

Date

Send Check to *Branch*

BOA name

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