

Surrender/Withdrawal (UK)

Form

Things you need to know:

1. Before you complete this form we recommend you seek professional financial advice. To find a professional adviser near you please visit www.unbiased.co.uk
2. This form must be completed and signed by all Policyholders (and Trustees where applicable) and must be returned by post to the following address:
Canada Life Ltd, Canada Life Place, Potters Bar, Hertfordshire EN6 5BA.
3. Please note that all signatures must be original and we are unable to accept an emailed form.
4. Once we have received all the documentation and signatures of all Policyholders (and Trustees where applicable), we will issue a payment within five working days. Please allow a further three to five working days for the payment to reach your bank account.
5. During the Coronavirus Pandemic any exceptions will be shown on our website
<https://www.canadalife.co.uk/adviser/coronavirus-support-hub/service-support/wealth-management>



Part 1 Personal details

Policy Number(s)

Policyholder/Trustee Names

Daytime Telephone Number

Email Address

Important Information

Please note partial surrenders are not available for all policy types; please refer to your policy provisions for the options available to you. **We are unable to provide financial advice. We would strongly recommend that before selecting your payment option, you discuss the tax implications with your professional adviser.**

Part 2 Surrender options

Please read all options carefully. Once we have carried out your request we will be unable to reverse it. **Select one option only and then go to Section 3.**

Option 1 – Fully surrender **all** policies (segments) within the bond/plan. Tick

For Flexible Investment Bonds with investments made within the last 5 years:
I understand that any outstanding establishment fees will be deducted when the bond is fully surrendered. Tick

Option 2 – Partial surrender equally across all policies (segments) within the bond/plan, a total amount of £

If units are **not** to be withdrawn proportionately across all funds held, please enter the name of the fund(s) and either the percentage or value to be withdrawn in the table below.

Fund Name	Amount (£)	Percentage %
	£	
	£	
	£	
	£	
	£	
	£	
	£	
	£	
	£	
	£	
	£	

Option 3 – Fully surrender individual policies (segments) and partially surrender the remainder across all the remaining policies (segments) to achieve an amount of £

Option 4 – Fully surrender individual policies (segments) within the bond/plan.

Number of policies to be surrendered

OR

Whole policies to achieve a minimum payment amount of £

Part 3 Payee details

Account Holder

Account number (must be 8 digits, including any leading zeros)

Sort code - -

Roll number (for building society accounts)

For payments to overseas or third party accounts, please contact us on 01707 422953 for further guidance. Payment must be to the policyholder/trustee. For payments to a third party please contact us.

Part 4 Discharge & declarations

The information you have provided in this form will be used in accordance with our Data Protection Notice. A copy of this notice can be found on our website, www.canadalife.co.uk, or is available upon request by calling 0345 6060708 or by email to dpo@canadalife.co.uk.

- I/We confirm that I am/we are entitled to claim the proceeds of the policy/policies.
- I/We would like Canada Life Limited (Canada Life) to pay the proceeds of the policy/policies quoted above in accordance with this instruction.
- I/We confirm that I/we have not been declared bankrupt, no receiving order has been made against me/us and I/we have not executed any deed for the benefit of creditors.
- I/We confirm that the policy/policies quoted above has/have not been assigned or transferred and that no other person(s) holds any rights to the policy/policies.
- I/We confirm that the payment made in respect of the total surrender of the policy/policies/ cluster/segment shall discharge Canada Life of its obligation to make the payments under the policy/policies/cluster/segment.

For the avoidance of doubt, this release shall not prevent us from bringing any claim for any act or omission by Canada Life that is not related to Canada Life's obligation to make payments under the policy(ies).

To protect me/us and Canada Life from financial crime, I accept that Canada Life may use reference agencies to source identity information about me.

Applicable only in respect of total surrenders – I/We surrender the policy(ies) to Canada Life and agree that the payment made as requested shall discharge Canada Life of its obligation to make payments under the policy(ies).

For the avoidance of doubt, this release shall not prevent us from bringing any claim for any act or omission by Canada Life that is not related to Canada Life's obligation to make payments under the policy(ies).

This request cannot be processed without full documentation and the signatures of all policyholders, trustees and assignees. **Please complete as appropriate.**

Trustees must ensure that the surrender monies are distributed in accordance with the terms of the trust.


Past performance is not necessarily a guide to future performance. The value of the units can go down as well as up.

	Claimant 1	Claimant 2
Full name including title	<input type="text"/>	<input type="text"/>
Home address (including postcode)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Signature	<input type="text"/>	<input type="text"/>
Date (day, month, year)	<input type="text"/>	<input type="text"/>
	Claimant 3	Claimant 4
Full name including title	<input type="text"/>	<input type="text"/>
Home address (including postcode)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Signature	<input type="text"/>	<input type="text"/>
Date (day, month, year)	<input type="text"/>	<input type="text"/>



Canada Life Limited, registered in England no. 973271. Registered office: Canada Life Place, Potters Bar, Hertfordshire EN6 5BA.
Telephone: 0345 6060708 Fax: 01707 646088 www.canadalife.co.uk Member of the Association of British Insurers.

Canada Life Limited is authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.

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