LIC INTERNATIONAL
شركة التأمين على الحياة (العالمية) ش.م.ب (مقفلة)
Life Insurance Corporation (International) B.S.C.(C)

Fund Switching / Redirection Form

For Unit Linked Life Insurance Plans

You can switch or redirect your investment strategy online. Login now with your customer portal at https://ulip.licinternational.com.
Please complete it in capital letters. If you have more than one policy, complete a separate form for each policy.
By completing this form, you will be requesting a change to the funds linked to your policy below.
Any mistakes or incomplete information on this form may result in a switch being delayed.

A. Policy Details

I/We authorized you to change the fund holding of the following policy, as mentioned below.

Policy Number		Date of Instruction	D D M M Y Y Y Y
Name of the Policy Owner	First name	Last name	Mr. ☐ Mrs. ☐ Ms. ☐
Name of the Life Assured	First name	Last name	Mr. ☐ Mrs. ☐ Ms. ☐
Please provide your contact details in the event of a query			
Mobile Number	+		
Email Address			

B. Switch Type

Please choose only 1 option

- ☐ Switch of existing units only (Complete Part "C" only)
- ☐ Redirection of future payment only (Complete Part "D" only)
- ☐ Both Switch of existing units & Redirection of future payment (Complete Both Part "C & D")

C. Switch Instruction

Please note that the proceeds generated from the Switch Out fund(s) will be reinvested as per the percentage split stated in the 'Switch In' section below

Switch Out - Funds to Sell

- ☐ All existing funds
- ☐ Specific funds (Please list down below and ensure all fund code match the fund names)

Fund Code (ISIN)	Name of the Fund to be switched out	Percentage
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%

Switch In - Funds to Buy (Please specify the switch in the split below for the proceeds from the fund(s) specified above.)

Fund Code (ISIN)	Name of the Fund to be switched in	Percentage
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%
	Total	**100 %**

D. Investment of Future Premiums (Redirection)

Please choose only 1 option

☐ Allocate future premiums as per new fund split shown in Switch In (Instruction given on Page 1 of this form)

☐ Allocate future premiums as per fund split in table below

Fund Code (ISIN)	Name of the Fund for future premiums	Percentage
		%
		%
		%
		%
		%
		%
		%
		%
		%
		%
	Total	**100 %**

E. Declaration and Authorization

I hereby request and authorise you to act on the Switch and/or Redirection instruction in accordance with the relevant policy provisions.

Date	D D M M Y Y Y Y	Signature	Policy Owner	Life Assured
Place		Name(s)		

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