Fund variation request

Application form





Please read the IMPORTANT NOTES before completing this Request. P	Please use BLOCK CAPITALS throughout
---	--------------------------------------

То	Friends Life, Customer Services Department,		
	PO BOX 1550, Salisbury SP1 2TW		
Name of person(s) authorising this request			
Name of authorised firm (if applicable)			
Contact telephone number			
Policyholder name(s) if different from above			
Policy number(s)			
If you would like existing units to be reallocated			
A Requested distribution of existi		- d b - l	
shown. Please use whole percentages only.	g in the policy/policies numbered above into the funds liste	ed below at the percentages	
Fund name		Percentage investment	
		Total 100%	
	nd holdings so that the funds after the switch match your would prefer to move investments within one or more existox below.		
If you are unable to express your instructions i	n the above format, please give details here.		
Policy number(s)			

If you would like future payments to be reallocated, please complete the section below.

B Requested distribution of **future** units

I request Friends Life to allocate future payments to the policy/policies numbered above to the funds listed below at the percentages shown. I wish this to be done at the next allocation of units after the date that Friends Life receives these instructions at the address on the previous page. Please use whole percentages only.

Fund name		Percentage investment		
		Total 100%		
C Declaration				
I confirm that I am entitled to give this authorisation for the above request(s) and understand that the instructions will operate in accordance with the current terms and conditions for fund variation.				
Signature(s)				
Date				

Important notes

Signatures

This request must be signed by either:

- a the policyholder(s). If the policy is assigned or written under trust, it is the signatures of the assignees or the signatures of all the trustees that are required, unless the trust form specifically allows the person who set up the trust to vary funds acting alone
- b someone authorised by every relevant person in (a) to give instructions on their behalf, such authorisation being given in a form of authority lodged with Friends Life.

Fund Links

The choice of links must be in accordance with the terms of your policy.

Varying funds

Any switching instructions will be carried out at the next published bid prices following receipt of this form, correctly completed and signed, at Friends Life's Salisbury Head Office, unless it is considered necessary to defer switching of units in accordance with the policy conditions.

Friends Life FP With Profits Fund

Please note that where a customer switches out of With Profits Series 1 the 'guaranteed growth rate' of 3% will be lost, and customers will not be able to return to this series at a later date.

Investment bonds: The FP With Profits Fund is only offered under some policies. Where available the terms on which FP With Profits Fund units will be allocated or cancelled will depend on the series of units applicable to that policy.

In all cases where a switch out of FP With Profits Fund units is possible, a Market Value Reduction (MVR) may apply to reduce the value of the units before the switch.

If you have any queries regarding this fund variation form please contact your financial adviser or Friends Life.

Friends Life, PO Box 1550, Milford, Salisbury SP1 2TW. Telephone number 0845 602 9199.

Friends Life Limited

An incorporated company limited by shares and registered in England and Wales, number 4096141. Registered office: Pixham End, Dorking, Surrey RH4 1QA. Authorised by the Prudential Regulation Authority and regulated by the Financial Conduct Authority and the Prudential Regulation Authority.

Telephone calls may be recorded.

Friends Life is a registered trade mark of the Friends Life group.

