

ALTERATIONS TO YOUR PLAN This form should be used to make any of the changes to your Plan listed below. You should only fill out the Sections of the form which relate to the information you want to update and sign Section 8.

| UPDATE REQUESTED | COMPLETION INSTRUCTIONS |
|--|-------------------------|
| Changing your bank or building society account details. | Complete Section 1. |
| Changing your address. | Complete Section 2. |
| Changing your Guaranteed Income Payments. | Complete Section 3. |
| Requesting a surrender – Partial, Full or Regular Partial Surrender(s). | Complete Section 4. |
| Requesting a Fund Switch. | Complete Section 5. |
| Changing the Fund to which a Guaranteed Benefit is allocated. | Complete Section 6. |
| Moving Funds from inside the Guaranteed Benefit Investment to outside the Guaranteed Benefit Investment. | Complete Section 7. |
| Signatures. | Complete Section 8. |
| Data Protection. | Read Section 9. |

IMPORTANT INFORMATION Please read before completing this form.

- As the Planholder, please sign and date the form where requested. Your adviser may sign the form on your behalf only for transaction types for which you have expressly authorised them during the application process.
For Plans placed in Trust, all trustee signatures are required. If you require more space for the trustees signatures, please copy the pages and sign the copies.
Original signature(s) is/are required before any request can be processed. Photocopies, faxed or scanned forms are therefore not accepted.
- If you make a mistake, please cross it out, put in the correct word(s) and sign your initials next to the correction. Please do not use correction fluid.
- All changes will be made in accordance with the Plan's **Terms and Conditions**.
- For fully completed surrender instructions, please allow 10 – 15 days for the surrender proceeds to be paid into your bank, or building society, account.
- Please read Section 9, "Data Protection", before sending the completed form back to us at:
AXA Life Invest
Wolfe Tone House,
Wolfe Tone Street,
Dublin 1,
Ireland.

1. CHANGING YOUR BANK ACCOUNT DETAILS Please fill out your new bank account details below and sign where indicated.

Please enter your Plan number here:

Full name of your Bank or Building Society:

Name of account holder(s): Sort Code:

Account number: Building Society Roll number:

Please complete Section 8 of this form, otherwise we will not be able to complete your request.

2. CHANGING YOUR ADDRESS Please fill out your new address details below and sign where indicated.

Please enter your Plan number here:

Address:

Postcode:

Please provide certified proof of address, dated within the previous 6 months. Please complete Section 8 of this form, otherwise we will not be able to complete your request.

3. CHANGING YOUR GUARANTEED INCOME PAYMENTS

Please fill out how you would like your Guaranteed Income Payments to be amended below and sign where indicated.

Please enter your Plan number here:

Changing your Guaranteed Income Start Date

If you wish to change your Guaranteed Income Start Date, we will deduct a charge of 0.10% of the value of the Guaranteed Benefit to which the Lifetime Income Benefit is linked from your Plan when we process the change.

Please refer to the **Terms and Conditions** of your Plan for details.

We must receive this completed and signed instruction at least twenty one (21) days before your original Guaranteed Income Start Date. Should we not be in a position to start the Guaranteed Income Payment on the date you request, we will commence the Guaranteed Income Payment at the next available date. The minimum age to start income is 75. If you want to receive Regular Payments in addition to your Guaranteed Income Payment, please complete Section 4.

You will not be able to commence income until you have sent us a completed PLA6 form.

Please select one of the two options below:

- i. I wish to change the Guaranteed Income Payment Start Date for my Plan to the following date in the future.

Please note this date must be after your 75th birthday:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

- ii. I wish to take the Guaranteed Income Payments in full immediately, paid into my bank or building society account.

If you wish to receive any Guaranteed Income Payments immediately, please specify a payment frequency:

Payment frequency (choose one) Monthly Quarterly Half-Yearly Yearly

Please note that if payments have already commenced, the change to your payment frequency will come into effect on the next anniversary of the Plan Effective Date, in accordance with the Plan's **Terms and Conditions**. If you do not choose a frequency, we will pay you on the frequency selected at initial application stage.

Please complete Section 8 of this form, otherwise we will not be able to complete your request.

4. REQUESTING A SURRENDER – PARTIAL, FULL OR REGULAR PARTIAL SURRENDER(S) Please fill out the surrender details below and sign where indicated.

Please enter your Plan number here:

For fully completed surrender instructions, please allow 10 – 15 days for the surrender proceeds to be transferred to your bank account.

NOTES

Surrendering any of the benefits in your Plan

This is a summary of the key tax points to consider before surrendering any of the benefits in your Plan. It is not a complete guide to all of the tax implications that may affect you, as these will depend on your own personal circumstances. We strongly recommend that you seek advice before making any decisions about surrendering any of the benefits in your Plan.

Events that may trigger a tax liability include:

- Partial surrenders across each of the Individual Policies within the Plan where the amount is above 5% of your total investment each Plan Year (on a cumulative basis). You are currently entitled to withdraw a maximum of 5% of the amount you invested every Plan Year, and to defer paying any income tax until you have received back the amount of your investment into the Plan. If you do not use some, or all of the 5% allowance in any Plan Year, the unused element can be carried forward into any future Plan Year.
- Any amount in respect of an Ongoing Adviser Charge, or an Ad Hoc Adviser Charge paid from the Plan will be treated as a partial surrender, in that the payment will count towards the '5% allowance' you are allowed to surrender from your Plan, each Plan Year on a tax-deferred basis.
- Full surrenders of one or more or all of the Individual Policies within the Plan.
- Your death.

These points are based on our interpretation of current law and taxation practices in Ireland and the UK as at May 2016, which may change in the future. Please note that neither AXA Life Invest nor our representatives can provide tax or legal advice. Therefore, we recommend that you contact a financial adviser if you have questions about surrendering any benefits from your Plan.

Important: The following instructions must be followed to request a partial surrender, regular partial surrender, or full surrender.

- Please provide a certified copy of separate documents which confirm your identity and address, if you have not already provided this.
- If you are surrendering your Plan in full, please return your original **Plan schedule** with this request **OR**, alternatively, a completed Lost Policy Declaration form (available on request).
- Please indicate the type of payment you require by ticking ONE option from Part A and then complete Parts B & C and sign Section 8.

Any surrender payment will be taken from the Liquidity Fund. Where the payment cannot be taken in full from the Liquidity Fund, we will take the balance proportionately from the remaining Funds which are not linked to any Guaranteed Benefit(s). Where the payment cannot be taken in full from a combination of the Liquidity Fund and the Funds which are not linked to any Guaranteed Benefit(s), we will take the balance proportionately from the remaining Funds linked to any Guaranteed Benefit(s) on a last-in, first-out basis. If the surrender is made from Funds that are linked to any Guaranteed Benefit(s), the surrender will reduce the Guaranteed Benefits proportionately. If you are currently receiving Guaranteed Income Payments and you request regular partial surrenders, the surrenders will be paid at the same time as your income payments.

Except where the Partial Surrender is to effect a payment in respect of an Adviser Charge, the minimum Partial Surrender Amount that can be requested for a Supplementary Withdrawal is £250.

There is no minimum Partial Surrender Amount for Regular Withdrawals.

Except where a Partial Surrender is to effect a Supplementary Payment in respect of an Adviser Charge, the minimum amount of the Plan Value that must remain after a Payment has been made is £1,000.

If you request a Partial Surrender which would have the effect of reducing the Plan Value to less than £1,000, in these circumstances we will adjust the Partial Surrender to ensure that the Plan Value remaining immediately after payment of the Partial Surrender is not less than £1,000.

Part A

Regular Partial Surrenders of £ per Plan Year (performed as partial surrenders across each of the Individual Policies within the Plan).

Please indicate the frequency of these partial surrenders, noting that if you are receiving Guaranteed Income Payments, the surrenders will be paid at the same time as your income payments.

For instance, if you choose to receive regular partial surrenders of £1,200 per Plan Year and you select monthly surrenders, we will pay you £100 each month.

Monthly Quarterly Half-Yearly Yearly

A single withdrawal to provide a total of £ by a surrender of the maximum possible number of whole Individual Policies and a pro rata reduction in the value of the remaining Individual Policies.

A single withdrawal to provide a total of £ by a pro rata reduction in the value of all the Individual Policies.

The full surrender of one, or more, of the Individual Policies within your Plan.

Please state how many:

The full surrender of the Plan.

(This request would terminate the Plan and any Guaranteed Benefit(s) it was previously providing to you).

Part B

All payments will be made by BACS transfer.

Full name of your Bank or Building Society:

Name of the account holder(s): Sort Code:

Account number: Building Society Roll number:

Part C

If you are fully surrendering within two years of the start of your Plan, please provide the reason(s). **Failure to complete this Section (if required) may delay the processing of the request.**

Please complete Section 8 of this form, otherwise we will not be able to complete your request.

5. REQUESTING A FUND SWITCH

Please enter your Plan number here:

Please specify below your new chosen percentage allocation within the Funds not linked to Guaranteed Benefits.

| | | |
|---|----------------------|------|
| ALI AB GLOBAL STRATEGY 30/70 GBP Fund | <input type="text"/> | % |
| ALI AB GLOBAL STRATEGY 40/60 GBP Fund | <input type="text"/> | % |
| ALI AB GLOBAL STRATEGY 50/50 GBP Fund | <input type="text"/> | % |
| ALI AB GLOBAL STRATEGY 60/40 GBP Fund | <input type="text"/> | % |
| ALI AB GLOBAL STRATEGY 70/30 GBP Fund | <input type="text"/> | % |
| ALI FEDERATED SHORT-TERM STERLING PRIME | <input type="text"/> | % |
| ALI AB GLOBAL EQUITY INCOME PORTFOLIO | <input type="text"/> | % |
| Total | <input type="text"/> | 100% |

Please complete Section 8 of this form, otherwise we will not be able to complete your request.

6. CHANGING THE FUND TO WHICH A GUARANTEED BENEFIT IS ALLOCATED

Please enter your Plan number here:

In accordance with the **Terms and Conditions**, a charge of 0.10% of the relevant Guaranteed Benefit Investment will be applied to your Plan if you want us to take this action.

Please note we will change the allocation of all of your Guaranteed Benefits unless you instruct us otherwise. If you wish to change the allocation of Funds relating to any specific Guaranteed Benefit(s), please state this here:

Please tick the relevant box below to indicate the Fund to which you now wish to link your Guaranteed Benefit(s).

- ALI AB GLOBAL STRATEGY 30/70 GBP Fund
- ALI AB GLOBAL STRATEGY 40/60 GBP Fund
- ALI AB GLOBAL STRATEGY 50/50 GBP Fund
- ALI AB GLOBAL STRATEGY 60/40 GBP Fund

Please complete Section 8 of this form, otherwise we will not be able to complete your request.

7. MOVING FUNDS FROM INSIDE THE GUARANTEED BENEFIT INVESTMENT TO OUTSIDE THE GUARANTEED BENEFIT INVESTMENT

Please enter your Plan number here:

If you choose to move some of your investment from any Fund linked to any Guaranteed Benefit to any Fund(s) not linked to a Guaranteed Benefit on, or after, the Guaranteed Income Start Date:

- The change can only be made to facilitate the payment of any Adviser Charge; or
- The amount switched must be paid from the Plan (as a partial surrender) within the same Plan Year as the switch. If you have not instructed us to pay the amount from your Plan fifteen (15) days from the end of the Plan Year, we will effect a partial surrender and pay the relevant amount to you before the end of the Plan Year.

Any partial surrender of any Fund(s) linked to your Guaranteed Benefit(s) would reduce the Income Base relating to the Guaranteed Benefit(s).

Please specify the percentage, or amount, of your Guaranteed Benefit(s) that you wish to cancel and invest into the Fund(s) not linked to any Guaranteed Benefit(s).

 % £

Please specify below which Fund you wish to invest in.

ALI AB GLOBAL STRATEGY 30/70 GBP Fund

ALI AB GLOBAL STRATEGY 40/60 GBP Fund

ALI AB GLOBAL STRATEGY 50/50 GBP Fund

ALI AB GLOBAL STRATEGY 60/40 GBP Fund

ALI AB GLOBAL STRATEGY 70/30 GBP Fund

ALI FEDERATED SHORT-TERM STERLING PRIME

ALI AB GLOBAL EQUITY INCOME PORTFOLIO

Please complete Section 8 of this form, otherwise we will not be able to complete your request.

8. SIGNATURES

Planholder / Trustee signature:

Date:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

Print name:

Alternatively, if you have nominated an advisor to make decisions on your behalf on your initial application form your adviser must sign here:

Specimen signature only:

Date:

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| D | D | M | M | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|

Print name:

Please provide your email address if you would prefer to receive confirmation that your request has been completed by email, rather than by post.

Note: We will not use your email address for any other purpose than to send you this confirmation. If you take a full or partial surrender of your Plan, we will send you confirmation by post.

9. DATA PROTECTION

The processing of your personal data is governed by the Irish Data Protection Act 1988 and Data Protection (Amendment) Act 2003. The information you provide in this form is required by AXA Life Invest, as data controller, to process this request, administer the product requested, to carry out statistical analysis, and to comply with legal obligations imposed on us. If you do not fully complete the details, it may not be possible for us to process your request.

We store the personal data you provide in this form. If your application is not accepted, we will still retain this information.

After the Plan has terminated, we will continue to hold personal data to satisfy audit and statutory accounting requirements as well as any other requirements of applicable law. All the personal data that is provided will be treated in confidence.

Disclosures of Data

During the course of the Plan, we will pass relevant details to:

- Your appointed financial adviser. We will not pass your personal information to any other party claiming to act for you, unless you give us written authority to do so.
- Any other party claiming to act for you, unless you give us authority in writing to do so.
- Other companies within the AXA Group or other non-AXA Group companies including those located inside or outside the European Economic Area. AXA Life Invest will only pass details to third parties if it is necessary in order to arrange or administer the Plan, for statistical analysis purposes, or to carry out AXA Life Invest's legal, or regulatory, obligations, or as otherwise agreed with you. If we transfer your personal data outside of the European Economic Area, we will ensure that this complies with applicable data protection legislation.
- Interested reinsurers/personal insurers.
- A competent regulatory, or governmental, authority, as required by law, and in response to any reasonable request.

Your Rights

You have the right to access all the personal data we hold about you. If you would like a copy of the details we hold about you, please write to us at the address below.

You also have the right to correct any errors in the information we hold about you, block certain uses, or object to the processing of your personal data. If you exercise your right to block, or object to, our processing of your personal data and this impacts on our ability to administer the Plan, we will not be liable or responsible for any losses you may incur. By signing this form, you are consenting to the use of your personal data as described within this form. You are also confirming that you have fully explained to each person whose personal data is supplied to us in connection with your Plan why we asked for this information, what we will use it for, and that they have agreed to this.

If you require further information about your rights, you may obtain this from either:

**The Data Protection Officer, AXA Life Invest, Wolfe Tone House, Wolfe Tone Street, Dublin 1, Ireland or
The Office of The Data Protection Commissioner, Canal House, Station Road, Portarlington, Co Laois, Ireland.**

The Secure Advantage+ range of plans is underwritten by AXA Life Europe dac. AXA Life Europe dac, trading as AXA Life Invest, is authorised by the Central Bank of Ireland, and is subject to limited regulation by the Financial Conduct Authority and Prudential Regulation Authority. Details about the extent of our regulation by the Financial Conduct Authority and Prudential Regulation Authority are available from us on request. Registered in Ireland under number 410727. Registered office: Wolfe Tone House, Wolfe Tone Street, Dublin 1, Ireland. Member of the AXA Group.