



Investment Transaction Service Form
For Global Savings/Investment Plans

3) Change of Regular Premium (For regular premium plans only)

Increase / Reduce* Premium Amount (in contract currency) from _____ to _____

* Please delete accordingly.

4) Change frequency of premium payment to:

Yearly Half-yearly Quarterly Monthly

* Please tick (✓) appropriate box and complete the request accordingly.

5) Apply for Premium Holiday (For regular premium plans only)

Commence Premium Holiday with effect from _____

Cease Premium Holiday with effect from _____

Declaration

I declare that no material facts, that is, any facts likely to influence the assessment and acceptance of this application have been withheld and to the best of my knowledge and belief, the information furnished is true and complete. A photographic copy of this authorisation shall be as valid as the original.

I further declare I am not an undischarged bankrupt and that I have committed no act of bankruptcy within the last twelve months and no bankruptcy order has been made against me during that period. I authorise Aviva Ltd to act upon instructions given by facsimile or by electronic means with regard to the Units subscribed for (and any further Units purchased) or any matter in connection with them or any of them without liability in respect of any transfer, payment or any other act done according to such instructions and notwithstanding that it shall be shown the same was not signed or sent by me. I agree to indemnify Aviva Ltd in respect of any loss arising in respect of acting on instructions given by facsimile or by electronic means or a decision not to act on the basis of such instructions or for any loss arising from the non-receipt of such instructions. I am aware that insurance is a long term financial commitment and I am aware that I can seek advice from a licensed Financial Adviser before I sign this application. Should I choose not to, I take sole responsibility to ensure that this application is appropriate to meet my financial needs and insurance objectives.

If a material fact is not disclosed in this application, any policy issued may not be valid. If you are in doubt as to whether a fact is material, you are advised to disclose it. This includes any information that you may have provided to the adviser but was not included in the application. Please check to ensure you are fully satisfied with the information declared in this application.

Signature of Assured / Assignee / Beneficiary
Name :
Identity / Passport No. :
Date :

Signature of Joint Assured / Assignee / Beneficiary
Name :
Identity / Passport No. :
Date :

Signature of Trustee / Beneficiary
Name :
Identity / Passport No. :
Date :

Signature of Trustee / Beneficiary
Name :
Identity / Passport No. :
Date :



Investment Transaction Service Form

For Global Savings/Investment Plans

Useful & Important Information

General

1. The application will be processed upon receipt of this request and other documentation or written information as the Company may require (including the delivery of the Policy if required).
2. Please complete one form per Policy.
3. To qualify for the next available pricing, request must be received by our Registered Office before 12 noon.
4. Please ensure the correct signatories[^] sign on the Investment Transaction Service form:
 - a) Assured and/or Joint Assured only (if it is **NOT** a Trust policy or Assigned policy); or
 - b) Assured and/or Joint Assured and all Trustees (if policy is written under Section 73 of the Conveyancing and Law of Property Act (CLPA)); or
 - c) Assured and/or Joint Assured and any Trustee (if policy is written under Section 49L of the Insurance Act); or
 - d) Assured and/or Joint Assured and all beneficiaries (if policy is written under Section 49L of the Insurance Act); or
 - e) Assignee (if policy is assigned)

Do note that all signature(s) must be consistent with our records.

[^] Signatories must have attained the age of 18. Otherwise, the consent from a parent or legal guardian (other than the Assured) is required.

^{^^} If the policy is written under Section 73 of the CLPA, the cheque will be payable in the names of all the trustees/beneficiaries. As such, a joint account is required for cheque clearance if there is more than one trustee/beneficiary.

Fund Switch

1. Fund switch is subject to Aviva's terms, conditions and guidelines (including any limit on the number of free fund switches introduced by Aviva) prevailing on the date of your instruction for fund switch, including the Minimum Fund Switch amount stated in the Schedule of Minimum and Maximum Limits in the policy contract provision.
2. Units will be sold and replaced based on the Bid price of the respective Funds on the next appropriate Fund Valuation Date following the date the Units are cancelled. Please note that the fund valuation date may vary with different fund houses.

Premium Redirection of Future Renewal Premium

1. Premium redirection will be effected from the next premium due date.

Change of Regular Premium

1. The request to increase or reduce in regular premium is subject to the approval of Aviva and to Aviva's terms, conditions and guidelines prevailing on the date Aviva accepts your request to vary the regular premium amounts.
2. The regular premium amount may be increased at any time and with effect from the next appropriate premium due date, provided that at the time of the request to increase the regular premium amount, the policy has a remaining term satisfies the prevailing minimum requirement of Aviva.
3. The regular premium amount may be reduced with effect from the next premium due date after the Initial Contribution Period.
4. The amount of the increase in the regular premium must be equal to or more than the Minimum Regular Premium Increase as stated in the Schedule of Minimum and Maximum Limits in the policy contract provision.
5. The amount of the regular premium after a reduction must be equal to or more than the Minimum Regular Premium Installment as stated in the Schedule of Minimum and Maximum Limits in the policy contract provision.
6. If the regular premium amount is increased, the Initial Contribution Period in respect of the increased portion of the regular premium will take effect from the next premium due date following the date on which the increased portion is received by Aviva.
7. The current premium allocation of unit will remain unchanged unless premium redirection for future renewal premiums is initiated by you.

Premium Holiday

1. Premium Holiday will commence on next premium due date and after the Initial Contribution Period.
2. For cessation of Premium Holiday, please pay all outstanding regular premiums in arrears or by resuming premium payment starting from the next premium due date.