

PREMIUM CHANGE REQUEST FORM

The AIG Life Insurance Company of Canada is requested and authorized to make the changes below regarding:

Policy Number(s)

Insured(s)

Policyowner(s)

A. CHANGE OF BANK (PRE-AUTHORIZED WITHDRAWALS)

AIG Life Insurance Company of Canada (AIG Life of Canada) is requested and authorized to draw cheques in its favour under its pre-authorized plan on any account that may be designated from time to time, for the purpose of paying premiums. The bank or financial institution is authorized to deal with such cheques as though they were signed by the depositor(s).

Attach specimen cheque here

Signature of Authorization: _____

Type of Account Chequing OR Chequing Savings

While the pre-authorized cheque plan is in effect, the mode of payment will be monthly. If a pre-authorized payment is returned due to non-sufficient funds, AIG Life of Canada is authorized to retry the payment within 5 business days. This agreement may be terminated upon written notice by the depositor(s) or by AIG Life of Canada if any cheque is not honoured on presentation, or if AIG Life of Canada has refunded the amount of such cheque to the bank or other financial institution.

B. CHANGE PREMIUM MODE TO

Annual Semi-Annual Monthly(complete section A)

C. POLICY LOANS (if applicable)

I/We hereby request a policy loan in the amount of _____
 I understand that I will be charged a rate of interest set by AIG Life Insurance Company of Canada (AIG Life Canada) for this loan.

Irrevocable Beneficiary	Date	Assignee (If Assigned)	Date
Policyowner Signature	Date	Assignee (If Assigned)	Date

D. NON-FORFEITURE OPTION (if applicable)

Reduced Paid-up Extended Term

Irrevocable Beneficiary	Date	Assignee (If Assigned)	Date
Policyowner Signature	Date	Assignee (If Assigned)	Date