

Specimen signature

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*Delete as appropriate

Notes

The signature we have on record differs from that recently supplied to us. It is important that you can show us that you are the legal owner of the policy and that we should pay the benefits to you. You would not want us to pay the benefits to a third party who is not entitled to them and we would not want to pay the benefits twice – once to someone falsely claiming under the Policy and then again to you.

It is for this reason that we insist your signature is correctly verified. You must also send us a copy of your passport certified by the Commissioner for Oaths/Solicitor/Notary Public.

Statutory declaration of contract ownership

This declaration must be sworn by you.

This a formal statement made under oath (as if you were giving evidence before a court). In the statement, you are asked to confirm that:

- · The signature provided is your usual signature; and
- · You are entitled to the benefit payable under the Policy; and
- The ownership of the Policy has not been transferred to anyone else; or
- You now own the Policy because it has been transferred to you (for example you are an assignee or the Executor of the original policyholder).

This declaration can only be sworn before a Commissioner for Oaths/Solicitor/Notary Public*. If it is not sworn before a Commissioner for Oaths/Solicitor/Notary Public we cannot accept it.

This statutory declaration is made the	day of	month	year
in relation to Plan/Contract Number ("the Contract")			
on the life (lives*) of			

issued by Friends Provident International Limited ("the Company").

I/We* the undersigned do solemnly and sincerely declare:

- 1. That I am/We are* legally entitled to the above mentioned Contract and to the monies assured thereby and can give an effectual discharge for the same by virtue if my/our* legal title to the contract.
- 2. That the signature(s) provided are my/our* usual signatures.
- 3. That the said Contract has not, to the best of my/our* knowledge and belief, been pledged or otherwise parted with for value or otherwise to any person or persons whomsoever who has or could have any right to title or claim thereto as against or paramount to my/our* title thereto and I/we* have not received notice of and am/are* not aware of any such claim other than indicated below.

Enter details of	any A	Assignn	nent,	rans	ter
Trust affecting	Contr	act ow	nersh	ip	

And I/we* make this solemn declaration conscientiously believing the same to be true and by virtue of the provisions of the Evidence Act 1871 of the Isle of Man.

Signatures		
Signature(s)		
Date (DD/MM/YYYY)		
Surname		
First name(s)		
Address		
Declared		
Before me A Commissioner for Oaths/Solicitor/ Notary Public* duly authorised to administer Declarations (please indicate which and apply the appropriate Authorisation Stamp)		
Signed	Full Name	
Date (DD/MM/YYYY)		
At		

Please ensure certified copies of customer identity are attached: i.e. passport, national identity document.

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