

Fund Switch Investment choice Change Form

Beacon House,
27 Clarendon Road,
Belfast BT1 3BG

www.metlife.co.uk

Before you start

This form can be used to switch between investment funds. It can also be used to change your Investment Choice where you have Secure Income Investments using Active Asset Allocation.

It is essential that you complete all the relevant sections of this form.

Switches/changes will be processed at the applicable unit price for the Investment Fund concerned. If this form is received, correctly completed, before midday, the switch/change will normally take place on the next working day following receipt.

We normally do not charge for switches/changes, but reserve the right to make a charge if more than 12 are made during a calendar year.

All switches/changes will be undertaken in accordance with the applicable terms and conditions. Please note that MetLife reserves the right to defer switches in the event of difficulty in realising the underlying assets.

Please refer to your policy terms and conditions. References to MetLife throughout this form are references to MetLife Europe d.a.c.

Data Protection

MetLife is the data controller in respect of any personal data you provide to us. The ways in which MetLife may collect, share or process your personal data are explained in MetLife's Privacy Notice. MetLife's Privacy Notice also explains your rights regarding your personal data. A copy of MetLife's Privacy Notice is available on our website, www.metlife.co.uk.

Should you have any questions or concerns, please contact the MetLife Data Protection Officer at DataProtectionUK@MetLife.com.

Section 1 - About you

First Policyholder

MetLife policy number

L																				
---	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

National Insurance Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Date of birth

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

Full name

Permanent residential address

City	Country	Postcode									
------	---------	----------	--	--	--	--	--	--	--	--	--

Second Policyholder (if applicable)

National Insurance Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Date of birth

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

Full name

Permanent residential address

City	Country	Postcode									
------	---------	----------	--	--	--	--	--	--	--	--	--

Section 2 - What would you like to do?

Change Investment Choice - complete Sections 3 and 5

(Please note that this option is only available if you are invested in the Secure Income Option through Active Asset Allocation).

Fund switch - complete Sections 4 and 5

Section 3 - Change of Investment Choice

Your guarantee terms such as your Secure Income Base and Guaranteed Income Percentage(s) will remain the same but the guarantee charge will change in line with your new selection. Note that it is only possible to select investment choices that were available at the time you selected your investment choice in 3.1.

If you are making regular contributions and have requested to switch in full out of the current investment fund(s), future regular contributions will be invested according to your selection in section 3.2, unless you instruct us otherwise.

3.1 From - Please indicate below the investment you hold in the Secure Income Option through Active Asset Allocation for which you wish to change the maximum Growth Asset Allocation, and the amount or percentage of it that you wish the change to apply to. You must use whole percentages or amounts, not fractions. You'll find the detail that you need in your Policy Schedule.

Investment Choice to change from**Guarantee ref****Percent**

e.g. 35% GA	e.g. SIO 1	100%

3.2 To - Please indicate below the investment choice(s) and the percentage(s) or amount(s) that you would like to select. You must use whole percentages or amounts, not fractions.

Investment Choice required**Percent**

e.g. 35% GA	100%

Section 4 - Fund switch

If you switch from the Secure Income Option or Secure Capital Option, you will not be able to switch back in to either option and you will lose the guaranteed benefits associated with these investments. If you switch out of the Secure Income Option any Guaranteed Income being paid will cease.

4.1 Switch From - Please state the Investment Fund(s) and the percentage or amount in each to be switched. You must use whole percentages or amounts, not fractions. You'll find the detail that you need in your Policy Schedule.

Investment Funds to switch from**Guarantee ref
(for Active Asset Allocation only)****Percent****Value**

			£
			£
			£
TOTAL			

4.2 Switch to - Please indicate below which investment funds you would like to switch the monies identified in 4.1 into and in what proportions. Further details of the available investment funds can be found in the MetLife Fund List.

All investments must be in whole percentages. The minimum investment is £1,000 per fund.

If you have an ISA Portfolio the only fund available is the MetLife BlackRock Sterling Liquidity Fund.

Other Portfolios (non guaranteed)	Regulars	Singles/Transfers
MetLife Managed Wealth Portfolio - Foundation	%	%
MetLife Managed Wealth Portfolio - Min	%	%
MetLife Managed Wealth Portfolio - Mid	%	%
MetLife Managed Wealth Portfolio - Max	%	%
MetLife Defensive Managed Portfolio	%	%
MetLife Conservative Managed Portfolio	%	%
MetLife Cautious Managed Portfolio	%	%
MetLife Balanced Managed Portfolio	%	%
MetLife Aggressive Managed Portfolio	%	%
MetLife Defensive Index Portfolio	%	%
MetLife Conservative Index Portfolio	%	%
MetLife Cautious Index Portfolio	%	%
MetLife Balanced Index Portfolio	%	%
MetLife Aggressive Index Portfolio	%	%
MetLife BlackRock Sterling Liquidity Fund	%	%
TOTAL (Must add up to 100%)	100%	

Section 5 - Declaration

I declare to the best of my knowledge and belief, that all of the information provided in this form is true, accurate and complete. By submitting this form I request that MetLife carry out my instructions on the terms described in this form.

Policyholder name

Date

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

Policyholder signature

Second policyholder name

Date

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

Second policyholder signature

Power of Attorney / Court Appointed Deputy details (please complete if relevant)

Title
 Mr Mrs Miss Ms Other - *please specify*

First name(s) Surname

Address
City Country Postcode

Capacity

Please provide a certified copy of documentary evidence of your authority to sign for the applicant if this has not previously been provided to us

Section 6 -How to submit this form

You may submit this form either by sending a scanned copy to customerservice@metlife.co.uk or by sending the form in the post to the following address:

MetLife, Beacon House, 27 Clarendon Road, Belfast BT1 3BG.

If you have signed this form on behalf of the policyholder and have any supporting documents to send with the form evidencing your authority, you must send certified copies of your supporting documentation to the above address.

0800 022 4443

customerservice@metlife.co.uk

metlife.co.uk

Products and services are offered by MetLife Europe d.a.c. which is an affiliate of MetLife, Inc. and operates under the "MetLife" brand.

MetLife Europe d.a.c. is a private company limited by shares and is registered in Ireland under company number 415123. Registered office at 20 on Hatch, Lower Hatch Street, Dublin 2, Ireland. UK branch office at One Canada Square, Canary Wharf, London E14 5AA. Branch registration number: BR008866. MetLife Europe d.a.c. (trading as MetLife) is authorised and regulated by Central Bank of Ireland. Deemed authorised by the Prudential Regulation Authority. Subject to regulation by the Financial Conduct Authority and limited regulation by the Prudential Regulation Authority. Details of the Temporary Permissions Regime, which allows EEA-based firms to operate in the UK for a limited period while seeking full authorisation, are available on the Financial Conduct Authority's website.

