

UNIVERSAL FIDELITY LIFE INSURANCE
 Policy Owner Service Department
 Duncan, Oklahoma 73533

For H.O. Use Only

Name of Insured				Policy Number
Name of Owner				Telephone No. Of Owner
Address of Owner	City	State	Zip Code	() _____

<input type="checkbox"/> POLICY LOAN	<input type="checkbox"/> I hereby apply for a loan on my policy in accordance with the policy loan provisions in the amount of \$ _____, or maximum amount.
<input type="checkbox"/> SURRENDER OF POLICY	<input type="checkbox"/> I, the undersigned, hereby request the surrender of this policy. Any cash value or premium refunds will be sent to the policy owner at address listed. _____ Initials

<input type="checkbox"/> NONFORFEITURE OPTION ELECTED	<input type="checkbox"/> Paid-up Insurance	Amount:	Effective Date:
	<input type="checkbox"/> Extended Term Insurance	Amount:	Expiry Date:
<input type="checkbox"/> DIVIDEND CHANGE	Present Dividends To Be: <input type="checkbox"/> Paid to me in cash <input type="checkbox"/> Used to reduce policy loan <input type="checkbox"/> Used to pay premiums <input type="checkbox"/> Used to purchase paid-up additions		

 Signature of Owner / SS #

 Date

 Signature of Irrevocable Beneficiary

 Date

Approved by: _____
 Universal Fidelity Life Insurance

 Date

UFL3080.1-01

#100/100'B 8161#

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