

# Switch/Redirection Request

## Please return the completed form

Either via hardcopy to the following address:

**Switches Department**  
**Friends Provident International Limited**  
**Royal Court**  
**Castletown**  
**Isle of Man**  
**British Isles**  
**IM9 1RA**

OR simply email a scanned copy to [ccs@fpiom.com](mailto:ccs@fpiom.com)

Our Switches Department will confirm receipt of each instruction by automated email. If you do not receive an automated acknowledgment from us, your instruction is deemed not to have been received and has not been processed.

If you need any assistance in completing the form, please contact us via:

Telephone: +44(0) 1624 821 212

Fax: +44(0) 1624 824 405

Email: [ccs@fpiom.com](mailto:ccs@fpiom.com)

**Please complete this form in English, using block capitals.**

If you make a mistake, please cross it out and correct it, initialling any amendments. Please do not use correction fluid or any other method for deleting incorrect information.

## Checklist

Please tick to confirm the following before submitting your instruction.

**Correct fund code**

☐

**Your fund selections are available** (for information on our fund range, please visit or speak to your financial adviser)

☐

**The total switch in and/or redirection percentages add up to 100%**

☐

**From the combination of requested new funds and allocated future premiums, the instruction will not result in the policy holding more than 10 funds**

☐

**You have not included separate instructions for Initial Units and Accumulation Units** (these cannot be switched separately)

☐

**The instruction has been signed by all policyholders and assignees if applicable, or by a third party who has been granted Optional Management Authority**

☐

## Important notes

### Processing fund switches

We will process your instruction on the day which we receive it, subject to:

- **Your instruction being received by 12pm (UK time) on that day**
- **Our office being open for work on that day**
- **All necessary documentation being supplied**
- **Compliance with your policy Terms and Conditions.**

If, for whatever reason and further to the aforementioned criteria, we are unable to process your instruction on the day which we receive it, we will process it on our first working day thereafter.

Policy number

Full name(s)  
of policyholder(s)

**If we have a query regarding your instruction, we may need to contact you.**

Please provide us with details of the easiest method of contacting you (telephone or email).

**Name of contact person**

**Telephone number (inc. dialling code)**

**Email address**

### Option 1: Switch instructions

Please note that the proceeds generated from the Switch Out fund(s) will be reinvested as per the percentage split stated in the 'Switch In' section below.

**Switch Out (Funds to sell)** (Please tick only one box to switch out)

☐ **ALL existing funds**

☐ **Specific funds** (Please list down funds in the below boxes and ensure all fund codes match the fund names)

Fund Code (Max 10)	Fund Name	Percentage Switch Out

**Switch In (For proceeds raised above, please specify switch in split in below boxes)**

Fund Code (Max 10)	Fund Name	Percentage Switch In
		100%

## Option 2: Investment of future premiums (Redirection)

(Please only tick one box)

☐ Allocate future premiums as per new fund split shown in Switch In (Instruction given on Page 2 of this form)

☐ Allocate future premiums as per fund split in table below

Fund Code (Max 10)	Fund Name	Reallocation Percentage
		100%

### Reminder:

The policy can only hold a maximum of 10 funds. Should this instruction result in more than 10 funds being held at any time, including the consideration of the investment of future premiums, all instructions will be declined.

### Signatures

I hereby request and authorise you to act on the Switch and/or Redirection instruction in accordance with the relevant policy provisions.

	Policyholder(s)	Optional Management Authority
Signature(s)	<input type="text"/>	<input type="text"/>
Name(s) (block capitals)	<input type="text"/>	<input type="text"/>
Date	<input type="text" value="D D M M Y Y Y Y"/>	<input type="text" value="D D M M Y Y Y Y"/>

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### Privacy policy

Our full privacy policy can be viewed at <https://www.fpinternational.com/legal/privacy-and-cookies> or can be obtained by requesting a copy from our Data Protection Officer.