

Switch Instruction Form

Please complete this form using BLOCK CAPITALS. We may return forms that have been incorrectly completed.

| STEP 1 | BOND DETAILS |
|--|--|
| Contract Type (tick one box only) | |
| <input type="checkbox"/> Investment Bond | <input type="checkbox"/> Inheritance Plan |
| <input type="checkbox"/> Universal Capital Account | <input type="checkbox"/> Flexible Investment Plan |
| PLAN NUMBER | <input style="width: 200px; height: 20px;" type="text"/> |

| STEP 2 | OWNERS OF THE BOND - PERSONAL INVESTORS ONLY | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|--------------------------|--------------------------|--------------------------|--------------------------|-----------|-------|--|---------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-----------|--|---------|--|--|--|--|--|--|--|-----------------------|--|--|--|--|--|--|--|------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----------|--|--|--|--|--|--|---|------------------|--|----|-----|----|--|-------|--|---------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-----------|--|---------|--|--|--|--|--|--|--|-----------------------|--|--|--|--|--|--|--|------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----------|--|--|--|--|--|--|
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| If there is an additional owner of the bond, please copy Step 2, complete the corresponding details for the additional owner and attach the completed page to this Switch Instruction Form. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

STEP 3

OWNERS OF THE BOND - TRUSTEE / CORPORATE INVESTORS ONLY

Name of Trust/Corporate Body

Address (for correspondence)

 Postcode

Please complete the details below for all of the Trustees / Authorised Signatories who are authorised to give instructions relating to this bond.

Name of Trustee/
 Authorised Signatory 1

Name of Trustee/
 Authorised Signatory 2 (if any)

Name of Trustee/
 Authorised Signatory 3 (if any)

Name of Trustee/
 Authorised Signatory 4 (if any)

If there is an additional trustee / authorised signatory of the bond, please copy Step 3, complete the corresponding details for the additional trustee / authorised signatory and attach the completed page to this Switch Instruction Form.

STEP 4

SWITCH DETAILS

I confirm that the investment should be switched as follows:
 FROM the following Funds

| Name of Existing Funds | Amount | OR | % of the fund value to be switched* |
|------------------------|----------------------|----|-------------------------------------|
| <input type="text"/> | <input type="text"/> | | <input type="text"/> % |
| <input type="text"/> | <input type="text"/> | | <input type="text"/> % |
| <input type="text"/> | <input type="text"/> | | <input type="text"/> % |
| <input type="text"/> | <input type="text"/> | | <input type="text"/> % |
| <input type="text"/> | <input type="text"/> | | <input type="text"/> % |
| <input type="text"/> | <input type="text"/> | | <input type="text"/> % |

INTO the following Funds

| Name of Funds | Amount | OR | % of the total switch value* |
|----------------------|----------------------|----|------------------------------|
| <input type="text"/> | <input type="text"/> | | <input type="text"/> % |
| <input type="text"/> | <input type="text"/> | | <input type="text"/> % |
| <input type="text"/> | <input type="text"/> | | <input type="text"/> % |
| <input type="text"/> | <input type="text"/> | | <input type="text"/> % |
| <input type="text"/> | <input type="text"/> | | <input type="text"/> % |
| <input type="text"/> | <input type="text"/> | | <input type="text"/> % |

* Whole percentages only

Total 100%

Notes:

1. Switch instructions will normally be carried out on the date as specified in Steps 5 or 6 using the prices available on that date. However, there may be circumstances in which the switch may be delayed - please see the Standard Provisions for more details.
2. The minimum overall amount that can be switched is £1,000/€1,500/US\$1,500.
3. Unless 100% is switched out of a fund, the minimum overall amount that can be left in that fund is £1,000/€1,500/US\$1,500.
4. We will normally allow 12 free switches per year. However, we may apply a charge if we consider the number of switches in any period to be excessive.
5. If you switch out of the With Profits Fund we will adjust the value to take account of any Market Value Reduction or Terminal Bonus that may apply. However, we may not allow switches out of the With Profit Fund unless units have been held for at least 5 years. (The With Profits Fund is not available to the Flexible Investment Plan.)
6. If the bond consists of more than one policy, the alterations will be made to all policies.

STEP 5 DATE OF SWITCH

The switch instruction is to take place on:

The next working day following receipt of the request

OR

A later date (please specify)

STEP 6 DECLARATION

- I declare that I have the authority to give instructions in respect of the above numbered bond.
- I instruct Harcourt Life to carry out the switch in accordance with the details above.

Signature of Owner / Trustee / Authorised Signatory 1

Date

Signature of Owner / Trustee / Authorised Signatory 2 (if any)

Date

Signature of Owner / Trustee / Authorised Signatory 3 (if any)

Date

Signature of Owner / Trustee / Authorised Signatory 4 (if any)

Date

If there are additional owners / trustees / authorised signatories of the bond, please copy this page, complete the corresponding details for each additional owner / trustee / authorised signatory and attach the completed page to this Switch Instruction Form.

PRIVACY STATEMENT

Our Privacy Statement explains when and why we collect personal information about our customers, how we use it, the conditions under which we may share it with others and how we keep it secure. It also explains how long we keep customer information for, how a customer can obtain details of the information we keep and the choices customers have about how we use that information. You can find a copy on our website www.harcourtlife.ie or you can request a copy from our Customer Service Team.

Not for distribution in the USA or Canada.

Address for correspondence: Harcourt Life Ireland Designated Activity Company, 16 Joyce Way, Park West Business Park, Dublin 12, Ireland
Telephone number (+353-1) 804 4000. Telephone calls may be recorded. Fax (+353-1) 804 4005.
Website address: www.harcourtlife.ie

Harcourt Life is a trading name of Harcourt Life Ireland Designated Activity Company. Harcourt Life Ireland Designated Activity Company is regulated by the Central Bank of Ireland and is registered in Ireland (Company No. 242244). The company's registered office is Block 2, Harcourt Centre, Harcourt Street, Dublin 2, Ireland. Directors: William Finn - Chairman, Alan Foley - Chief Executive, Matthew Coffey, Tim Madigan, Ian Maidens (British), Henry O'Sullivan, Paul Thompson (British).

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