



SURRENDER REQUEST FORM

Policy Owner: _____
 Life Proposed: _____
 Policy No: _____ Plan Name: _____
 Correspondence Address: _____

 Contact No: _____ Email: _____
 Bank Name: _____ Account No: _____

Surrender Type

- Policy Surrender Ad-hoc Surrender
 Partial Policy Withdrawal Partial Ad-hoc Withdrawal

Amount in Figures PKR: _____
 Amount in Words: _____

Reason for Policy Surrender / Ad-hoc Surrender / Policy Partial / Ad-hoc withdrawal

- Financial Problem Poor Services from Agent
 Unsatisfactory growth Agent is no longer with the company
 Other (Specify): _____

Zakat Deduction

- I / We Wish to claim exemption of Zakat. The relevant sworn statement is attached
 I / We do not Wish to claim exemption of Zakat. I / We understand that a sum equivalent to 2.5% of amount payable has to be deducted as zakat.

Declaration

I acknowledge that the payment of the requested amount will discharge TPL Life Insurance Ltd. from all liabilities and responsibilities under this withdrawal request. I also understand that by Permanent Withdrawal, my cover under the plan will terminate and I will not be entitled to any payment out of as claim. I certify that I am entitle to the proceeds of this plan and the plan has not been assigned or transferred, nor any other person has right to claim the plan. I hereby confirm that the information provided above is accurate and correct.

 Policy Owner's Signature with Date

 Life Proposed's Signature with Date

Name of Witness: _____
 NIC No: (Witness) _____
 Address: _____

 Contact No: _____

 Signature of Witness: _____

Policy Surrender / Partial withdrawal charges

Plan	Year 1	Year 2	Year 3	Year 4	Year 5
Master Progressive	Not Allowed		25%	Nil	Nil
Master High Ride			25%	5%	
Ultimate Protection			Nil	Nil	
Ultimate Saving			Nil	Nil	
Rock Solid			Nil	Nil	
Grand Plan			Nil	Nil	
Zaryab Plan	Nil				

TPL Life Insurance Limited

33-C, Shahbaz Commercial Area Lane-4, Phase VI DHA, Karachi-75500
 Tel: +92 21 35171701-10 Email: customer.services@tpllife.com