Payment Methods Form

(FOR FAR EAST REGION EXCLUDING HONG KONG BRANCH BUSINESS)

Scottish Provident International Life Assurance Limited is a member of the Royal London 360 group of companies.

This payment methods form should be used to arrange initial (i.e. the first contribution payable), renewal (subsequent contributions) and single contributions into any Scottish Provident International regular contribution plan.

Please complete this form in BLOCK CAPITALS using blue or black ink and return with your plan application form (if applicable), to Royal London 360°, Royal London House, Isle of Man Business Park, Cooil Road, Douglas, Isle of Man, IM2 2SP, British Isles.

Please delete as appropriate where you see*

Section 1

Policyholder Name(s)	
Policy Number (if known)	

Box A

The premium payment options listed in Box A are suitable for **all initial premiums, renewal premiums for annual cases only and all single premium contributions**. If you choose to pay your initial premium using one of the options in Box A you must also choose an option from Box B for your renewal premiums unless your premiums are paid annually.

Box B

The premium payment options outlined in Box B are suitable for **both initial** and **renewal** premiums for any regular premium plan. Please remember to select an option from Box B for renewal premiums if you have selected an option from Box A for initial premiums unless you will be paying premiums annually.

Please select your payment method by ticking the relevant box.

Box A		Box B
By cheque. This method can be used for any of our plan currencies. Please make cheques payable to Scottish Provident International Life Assurance Limited and return with this form.		By UK sterling Direct Debit. This method can be used for sterling denominated policies where a sterling bank account is held within the UK clearing system . Please complete Section 3 overleaf to arrange payment by Direct Debit.
By Banker's Draft. This method can be used for any of our plan currencies. Please complete the appropriate box within Section 2 overleaf to arrange payment by bankers draft. Scottish Provident International will only accept payment by Banker's Draft if the Draft includes proof that it was drawn on the policyholder's		By Credit Card. This method can be used for any of our plan currencies. Please complete Section 4 overleaf to arrange payment by Credit Card. This method is not available for Rand or Zimbabwe Dollar denominated cards.
own bank account. By Telegraphic Transfer. This method can be used for any of our plan currencies. Please complete the appropriate box within Section 2 overleaf to arrange payment by Telegraphic Transfer.		By Standing Order. This method can be used for any of our plan currencies where a bank account is held outside the UK or a non sterling account is held within the UK. Please complete Section 5 overleaf to arrange payment by Standing Order.

Please note that we do not apply a charge for inward payments, with the exception of credit card payments on which a charge applies. Your bank may charge for some transactions. Further details of your bank's transaction charges will be available from your bank.

You can count on us $\frac{ROYAL}{360}$

Section 2 Bank Instruction Letter

Important

We are happy to accept a faxed signed copy of your Bank Instruction, but we will require the original signed request to be sent by post directly to your bank OR to Royal London 360°, Royal London House, Isle of Man Business Park, Cooil Road, Douglas, Isle of Man, IM2 2SP, British Isles.

To the Manager	Bank
Bank Address	
Banker's Draft	
Please prepare a	BP / EUR / USD / JPY / HKD* Draft payable to Scottish Provident International Life Assurance Limited
quoting policy refere	nce number/client name
for exactly the amou	nt detailed.
Amount in figures	
Amount in words	
	ared draft immediately by airmail to Royal London 360°, Royal London House, Isle of Man Business Park, Isle of Man, IM2 2SP, British Isles.
Important Noto: Wo	will not accent payments by Ranker's Draft unless the payment somes directly from the policyholder's

Important Note: We will not accept payments by Banker's Draft unless the payment comes directly from the policyholder's own bank account.

Telegraphic Transfer	
Please remit by Telegraphic Transfer, the exact amount detailed below for credit to the account of Scottish Provident International Life Assurance Limited.	
Please quote policy reference number/client name on trans	sfe
(Please tick the appropriate box for your selected currency)	
Sterling Payment US Dollar Payment Account Number: 511-104226-202 Account Number: 511-104226-201	
To: HSBC, 1 Queens Road Central, Hong Kong. Swift Code: HSBCHKHH	
Euro Payment Account Number: 83031100 IBAN Number: IBAN GB06 BARC 2026 7483 0311 00	
To: Barclays Bank Plc, Swift Code: BARCGB22, For onward payment to: Barclays Bank, Barclays House, Victoria Street Douglas, Isle of Man, British Isles. Sorting Code: 20-26-74, For credit to account: Scottish Provident International Life Assurance Limited.	. ,
Japanese Yen Payment Account Number: 009007014026	
To: HSBC, Building 2F, 11-1, Nihonbashi 3-chome, Chuo-ku, Tokyo 103-0027 Japan. Swift Code: HSBCJPJT	
Amount in figures GBP / USD / JPY / EUR*	
Amount in words	

Section 2 Bank Instruction Letter continued

Please debit the amount of the payment, together with any charges/expenses incurred in the transfer, to my/our* account detailed below.

Account name	
Bank Swift Code (International)	OR Bank Sort Code (UK only) Swift Code must be either 8 or 11 digits
Account number (or IBAN number for Euro payments)	
Signature(s)	
Date (dd/mm/yyyy)	
Address	

Section 3 Sterling Direct Debit Instruction

Important

We are happy to accept a faxed signed copy of your Direct Debit Instruction, but we will require the original signed request to be sent by post directly to your bank OR to Royal London 360°, Royal London House, Isle of Man Business Park, Cooil Road, Douglas, Isle of Man, IM2 2SP, British Isles.

Instruction to your UK Bank or Building Society to pay Direct DebitsOriginator's identification number62453							
Name and full postal address of your	Ban	kо	r Bu	uildi	ng	Society branch	

To the Manager	Bank
Bank Address	
Name(s) of Account Holder(s)	
Branch Swift Code (International)	OR Bank Sort Code (UK only) Swift Code must be either 8 or 11 digits
Account number (or IBAN number for Euro payments)	

Instruction to your Bank/Building Society to pay Direct Debits

This Direct Debit Instruction relates to my policy with Scottish Provident International, policy number

Please pay Scottish Provident International Life Assurance Limited Direct Debits from the account detailed in this Instruction, subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with Scottish Provident International Life Assurance Limited and, if so, details will be passed electronically to my Bank/Building Society.

Signature(s)		
Date (dd/mm/yyyy)		

Escalating contributions will be calculated automatically

Bank and Building Societies may not accept Direct Debit instructions from some types of account

This guarantee should be detached and retained by the Payer.



The Direct Debit Guarantee

- This Guarantee is offered by all Banks and Building Societies that take part in the Direct Debit Scheme. The efficiency and security of the Scheme is monitored and protected by your own Bank or Building Society.
- If the amounts to be paid or the payment dates change, Scottish Provident International Life Assurance Limited will notify you 14 working days in advance of your account being debited or as otherwise agreed.
- If an error is made by Scottish Provident International Life Assurance Limited or your Bank or Building Society, you are guaranteed a full and immediate refund from your branch of the amount paid.
- You can cancel a Direct Debit at any time in writing to your Bank or Building Society. Please also send a copy of your letter to us.

Section 4 Credit Card Authority (not available for Rand and Zimbabwe Dollar denominated cards)

Important

Sign

Date

We are happy to accept a faxed signed copy of your Credit Card Authority - it is not necessary to post the original copy.





Credit/Debit Card Charge Authority

N.B. We are only able to accept Credit/Debit card payments where the card displays one of the above symbols and is prefixed with either a '4' or a '5'. American Express is not accepted.

I authorise you, until further notice in writing, to collect payments from my (please tick appropriate box)

Mastercard/Eurocard OR	Visa account
with the amounts specified as	follows:
Contribution Currency (please tick appropriate box)	Sterling US Dollars Japanese Yen Euro Hong Kong Dollars
The amount in figures	
The amount in words	
Frequency (tick one box)	monthly quarterly half-yearly annually
Mr/Mrs/Miss* (Cardholder's name, initials and address as held by card issuer)	
Mastercard/Eurocard/Visa* Number	
Expiry Date (mm/yyyy)	

I understand that Scottish Provident International Life Assurance Limited will advise me of the amount to be paid and the dates on which payment is due and that Scottish Provident International Life Assurance Limited may only change these after giving me prior notice.

I understand that this authority in favour of Scottish Provident International Life Assurance Limited will remain in force until such time as I cancel it in writing to Scottish Provident International Life Assurance Limited.

ature(s)		
(dd/mm/yyyy)		

Note: A handling fee of 1% for sterling based policies will be levied. However, if the contribution is an annual contribution exceeding £5,000, then a handling fee of 1.45% for sterling policies and 1.9% for non-sterling policies is applied. This fee will be added to the contribution at the time of collection.

Section 5 Banker's Standing Order (for regular contributions funded from bank accounts that are not part of the UK clearing system)

Important

We are happy to accept a faxed signed copy of your Banker's Standing Order, but we will require the original signed request to be sent by post directly to your bank OR to Royal London 360°, Royal London House, Isle of Man Business Park, Cooil Road, Douglas, Isle of Man, IM2 2SP, British Isles.

Part A

To the Manager	Bank
Bank Address	
Banker's Draft	
Please prepare a GBP / USI	D / HKD / JPY / EUR* Draft payable to Scottish Provident International Life Assurance Limited
quoting policy reference num	ber/client name
for exactly the amount detaile	:d.
Amount in figures	
Amount in words	
Frequency (tick month one box)	annually
Please send the prepared draf Cooil Road, Douglas, Isle of Ma	it immediately by airmail to Royal London 360°, Royal London House, Isle of Man Business Park, an, IM2 2SP, British Isles.
Important Note: We will not a own bank account.	accept payments by Banker's Draft unless the payment comes directly from the policyholder's
Telegraphic Transfer	
Please remit by Telegraphic Tr International Life Assurance L	ransfer, the exact amount detailed below for credit to the account of Scottish Provident imited.
Please quote policy reference	number/client name on transfer.
(Please tick the appropriate b	ox for your selected currency)
Sterling Payment Account Number: 511-104	4226-202 US Dollar Payment Account Number: 511-104226-201
To: HSBC, 1 Queens Road	Central, Hong Kong. Swift Code: HSBCHKHH
Euro Payment Account Number: 830311 IBAN Number: IBAN GBC	100 06 BARC 2026 7483 0311 00
To: Barclays Bank Plc, Sw	vift Code: BARCGB22, For onward payment to: Barclays Bank, Barclays House, Victoria Street, ish Isles. Sorting Code: 20-26-74, For credit to account: Scottish Provident International Life
Japanese Yen Payment Account Number: 00900	07014026
To: HSBC, Building 2F, 11- Swift Code: HSBCJPJT	1, Nihonbashi 3-chome, Chuo-ku, Tokyo 103-0027 Japan.
Amount in figures GBP / USI	D / JPY / EUR*
Amount in words	
Frequency (tick month	nly quarterly half-yearly annually
one box)	06 of 08

Section 5 Banker's Standing Order (for regular contributions funded from bank accounts that are not part of the UK clearing system) continued

Part B (Escalating contributio	ons on Moment	um and Quantu	m plans only		
I wish to increase the above s	tated premium	n by 5% / 10%*	p.a. therefore (olease increase this	
monthly / quarterly / half-yearly / yearly*		payment by			on
		and by a furthe	er	each	annually thereafter,
until and including					
Part C					
Please debit the amount of the detailed below.	ne payment, to	gether with any	charges/expenses	s incurred in the tra	nsfer, to my/our* account
Account name					
Bank Swift Code (International)	Swift Code mu	ust be either 8 o		nk Sort Code (UK c	ənly)
Account number (or IBAN number for Euro payments)					
Signature(s)					
Date (dd/mm/yyyy)					
Address					

Important Information

Scottish Provident International Life Assurance Limited ("the Company") will not normally accept payments from third parties. For further details please contact our Customer Service Centre on +44 (0)1624 681682.

Direct Debits

Payments will commence a minimum of 14 days after the Company receive the original Direct Debit Mandate form.

Standing Orders

Should you wish to make amendments to, or cancel a Standing Order you will need to do this directly with your bank. The Company has no authority on this type of payment instruction.

Payment Charges

The Company levies no charges for inward payments, although a charge is applied for credit card payments. Your bank may charge for some transactions. For further details please contact your bank.

Data Protection

By signing this form in the space indicated, you consent to us using the information you provide for the administration of your policy, crime prevention and prosecution of offenders, and market research and statistical purposes.

The information you have provided may be shared with other companies both inside and outside of the Royal London Group, financial intermediaries or agents acting on your behalf. It may be transferred outside the Isle of Man and we may be obliged to disclose it to our regulator and to others as demanded by law.

The Isle of Man's Data Protection Act 2002 entitles you, on payment of a small fee, to obtain a copy of the information we hold on you.

For further information please write to the Data Protection Officer, Royal London 360°, Royal London House, Isle of Man Business Park, Cooil Road, Douglas, Isle of Man, IM2 2SP, British Isles.

Issued by Scottish Provident International Life Assurance Limited, a member of the Royal London 360 group of companies. Registered Office: Royal London House, Isle of Man Business Park, Cooil Road, Douglas, Isle of Man IM2 2SP, British Isles. Telephone: +44 (0)1624 681681. Telephone calls may be recorded. Fax: +44 (0)1624 677336 or Website: www.royallondon360.com. Scottish Provident International Life Assurance Limited is authorised by the Isle of Man Government Insurance and Pensions Authority. Registered in the Isle of Man Number 053002C. A Member of the Association of International Life Offices.

