



Policy Service Request

National Guardian Life Insurance Company (NGL) • P.O. Box 2867, Clinton, IA 52733-2867
Phone: 877-442-6960 • Fax: 608-373-7384 • www.nglic.com

Policy #:

**Annuitant/Owner
Name:**

**Annuitant/Owner
Last 4 SSN:**

Home Phone:

Cell Phone:

1. Name/Address Change Annuitant/Owner

From:			To:		
First	Middle	Last	First	Middle	Last
Street			Street		
City	State	Zip	City	State	Zip
Phone Number			Phone Number		

2. Change of Beneficiary

a. Primary Beneficiary

Name & Address & Phone Number	Social Security #	Date of Birth	Relationship

b. Contingent Beneficiary

3. Lost Policy

Issue Duplicate Policy (Submit \$35.00 fee)

4. Single Premium Annuity Conversion Request

Please change my balloon annuity payment plan to an equal monthly installment payment plan for the remainder of the contract term

I understand that the duration of my contract cannot be changed; therefore if either the monthly annuity payment requested or the final annuity balloon payment amounts exceed the remaining balance of my annuity contract, my request will not be processed.

5. Irrevocable Annuitization Request

- I hereby instruct National Guardian Life Insurance Company (NGL) to make my Single Premium Immediate Annuity irrevocable, non-assignable, and non-commutable. It is understood that this is a one-time, irreversible election. I understand that NGL recommends I consult with my agent or a financial advisor before making this change to my policy.

6. Signatures

Owner/Annuitant's Signature:	Date:

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Instructions for Designating or Changing a Beneficiary

- A primary beneficiary receives the claim proceeds in the event of the Insured's death. If more than one beneficiary is named, proceeds will be split equally unless otherwise specified. List full name and relationship of the beneficiary. If the beneficiary is not related to you, show relationship as "friend".
- We strongly encourage you to name a contingent beneficiary. The contingent beneficiary receives the claim proceeds in the event that the primary beneficiary(s) does not survive the Insured. If more than one beneficiary is named, proceeds will be split equally unless otherwise specified.
- If you wish to name a Trust as a beneficiary, the Trust must exist on the date of the beneficiary designation. Write in the formal name of the Trust (i.e. John Doe Revocable Trust Dated 1/01/2006). Also attach a copy of the Trust Agreement. If you do not wish to provide the entire trust, then please supply the following portions:
 - The name of the Trust
 - The name of the Trustee(s)
 - The date of the Trust
 - Signature(s) of the Trustee(s)
- To name an Estate, write "Estate of the Insured" in the beneficiary designation on the form. (Upon the death of the Insured, a copy of executor papers from Probate Court will be required before proceeds are paid to the Estate.)
- It is inadvisable to name a beneficiary who is a permanent resident of a foreign country. If a foreign resident is named, furnish a full address.
- It is inadvisable to name a minor child. Upon death, legal guardianship papers will be required from court. A legal guardian is not the person with custody of the child, unless specifically named a guardian or custodian by the courts. If a minor child is named, please indicate the date of birth and if proceeds should be held on deposit until the child is the age of majority.
- To name all children the insured currently has, and all future children they may have, list "All children of the Insured Equally". In the event a child does not survive the insured, proceeds will be split equally between the surviving children.
- To name all children of the insured and all future children, including in the event a child does not survive the insured, list "All children of the Insured Equally per Stirpes". If a child does not survive the insured, the portion of that child's proceeds will then be split to their surviving children (the insured's grandchildren).
- It is inadvisable to name "per my last will and testament". If you wish to name the same individuals who are named in your will, but you want benefits paid directly instead of passing through your estate, then you should name the individuals on the form in the same manner as under your will.
- If naming a non-profit organization or charity, please include an address and contact name. If possible, please also include the tax identification number of the organization.
- If the beneficiary designation does not fit on the form provided, write "see attached" on the form. The attached designation form must list each beneficiary as a primary or contingent, and also include the policy number, insured's name, signature of the owner, and date.