

NON-FORFEITURE OPTION CHANGE

Insurance Company Name

Policy Information

Policy Number:

Policyholder Name:

Current Non-Forfeiture Option

Current Option:

- ☐ Cash Surrender ☐ Reduced Paid-Up ☐ Extended Term
☐ Unknown

New Non-Forfeiture Option

Desired Option:

- ☐ Cash Surrender ☐ Reduced Paid-Up ☐ Extended Term

Policyholder Signature:

Date:
