

Credit Card Enrollment form



PRU LIFE INSURANCE CORPORATION OF U.K.

9/F Uptown Place Tower 1, 1 East 11th Drive, Uptown Bonifacio,
1634 Taguig City, Philippines

Customer helpdesk: (632) 8683 9000, (632) 8884 8484, (632) 8887 LIFE
within Metro Manila, 1 800 10 PRULINK for domestic toll-free

Email: contact.us@prulifeuk.com.ph Website: www.prulifeuk.com.ph

Policyowner: _____
Last name First name M.I.

Policy no.: _____

Billing option (Please check)

☐ One-time payment ☐ Recurring payment

Amount to be charged: _____

Primary Card

☐ Visa

☐ Mastercard

Cardholder: _____
Last name First name M.I.

Relationship to Policyowner: _____

Contact nos.: _____

Card no.:

Expiry date:
Month Year

Bank issuer: _____

Cardholder's signature: _____

Effectivity date: _____

Policyowner's signature: _____
(if other than the cardholder)

Cardholder declaration and authorization

- I hereby declare under the penalty of perjury that the information provided above are true and correct.
- I hereby also state that I have read and agreed to the terms and conditions stipulated at the back of this form.
- By signing this form, I hereby authorize Pru Life UK to charge the premiums due for the insurance application or policy number indicated above to my credit card account and agree to hold Pru Life UK free and harmless from any liability arising from its processing and implementation of this credit card enrollment request.
- I likewise confirm that the payments herein charged to my credit card account are valid and accurate, despite the absence of my signature in the sales slip or terminal receipt for such payments.
- I further waive the requirement that Pru Life UK prepare, issue, submit or deliver to me a true and completed copy of the sales slip or terminal receipt covering these payments.
- This authorization will be canceled after five (5) days from receipt by Pru Life UK of my written notice to cancel it.

Alternate card

☐ Visa

☐ Mastercard

Cardholder: _____
Last name First name M.I.

Relationship to Policyowner: _____

Contact nos.: _____

Card no.:

Expiry date:
Month Year

Bank issuer: _____

Cardholder's signature: _____

Effectivity date: _____

Policyowner's signature: _____
(if other than the cardholder)

Credit card enrollment requirements

Card Type	Only Visa and Mastercard Credit Cards are allowed. Local and international debit cards are not allowed
Card Ownership	Valid credit cards for enrollment are those owned by the policyholder or immediate family members (e.g. parents or siblings, if single; spouse or children, if married)
Eligible Plans	All peso and dollar-dominated plans are eligible for enrollment. Single-pay plans are not eligible (i.e. PRULink Investor Account, PRULink Investor Account Plus and PRUMillionaire)
Premium	Credit Card enrollment is applicable for initial and renewal premiums only. APL/Policy Loan Repayment via Credit Card is not permitted.
Requirements	(1) Duly accomplished Credit Card Enrollment Form (2) Photocopy of the credit card's front side (3) KYC for third party payor, if applicable For New Business applications, the credit card enrollment requirements must be attached to the Insurance Application Form

Credit card billing

Credit card billing of policies enrolled to the recurring billing option is done on the policy's due date provided that the policy is updated. If the due date falls on a weekend or a holiday, billing is done the following working day. If the transaction is declined, we will continue to attempt to bill daily for 15 days from the premium due date until successful billing. If subsequent billing attempts are unsuccessful, you will be notified by mail to settle your outstanding premium in cash or check through any of our Pru Life branches or accredited banks and payment channels

Pru Life UK's credit card billing is subject to the security policies of the card issuer-bank. You may be required to call your card issuer to authorize our premium billing in cases involving large amounts, unusual billing locations, unusual transactions or unsettled balances.

Billing of the alternate card is activated in case of declined billing attempt on the primary card. Re-billing is not applicable on policies under one-time billing option.

Purpose Statement

We will process the information you have provided in this form for the purpose of handling your request in accordance with applicable privacy laws and regulations. During processing, we may share the information you provided to our authorized data processors, including couriers and contractors for anti-money laundering systems, photocopying, scanning, indexing and printing services. We may share your information with governmental and other regulatory authorities, or self-regulatory bodies in various jurisdictions as required or allowed by applicable laws and regulations. Any information collected may be retained by Pru Life UK and our authorized data processors until ten (10) years from the date of termination of the policy.

You may revisit our privacy policy through our website at (<https://www.prulifeuk.com.ph/en/footer/privacy-policy/>). For data privacy concerns, please contact our Data Privacy Officer at:

Telephone:	(632) 8887 5433 for Metro Manila, 1 800 10 7785465 via PLDT landline for domestic toll-free
Email:	dpo@prulifeuk.com.ph

Hold or stop billing request

A written request must be submitted to Pru Life UK branches or through your servicing agent at least five (5) working days before the premium due date.

For request to hold billing, effectivity date and duration must be indicated. All unpaid premium dues shall be collected upon resumption of credit card billing.

Request in update of credit card details

To avoid unsuccessful billing due to expired, lost, stolen or replaced credit cards, please update your card details with Pru Life UK by submitting the required documents via any of the following channels: any Pru Life UK branch, your Pru Life agent or via email to: contact.us@prulifeuk.com.ph

Required Documents for update of credit card details:

Change in card expiry date	Written notice or email request for updating new expiry date of credit card by Policyowner or Agent on record
Change in card number	(1) Duly accomplished Credit Card Enrollment Form (2) Photocopy of the credit card's front side

Request for change of payment method

Policyowner must submit a duly accomplished Policy Amendment Request Form at least five (5) working days before premium due date. Enrollment to automatic debit arrangement (ADA) facility or submission of post-dated checks (PDC) is required for policies under monthly mode of payment.