

Policy Loan Form

Policy Number

Agent Code

Please fill in block letters & tick appropriate boxes and circles. Requests received by FWD service counters within the cut-off time of 2:00 PM will be processed within the day. Requests received beyond said cut-off may be processed the next day.

1.) Personal Data of Policy Owner (Your personal information in our database shall be updated based on the details you provide below.)

Title	Last Name	First Name	Ext Name	Middle Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Contact Information:		Country Code	Area Code	Telephone/Mobile Number
<input type="radio"/> Residential Telephone Number		(<input type="text"/>)	(<input type="text"/>)	<input type="text"/> ex: (63)(43)765-4321
<input type="radio"/> Business/Office Telephone Number		(<input type="text"/>)	(<input type="text"/>)	<input type="text"/> ex: (63)(2)765-4321
<input type="radio"/> Mobile Phone Number		(<input type="text"/>)	(<input type="text"/>)	<input type="text"/> ex: (63)917-7654321
Preferred Mailing Address:		<input type="radio"/> Email	<input type="radio"/> Business/Office	<input type="radio"/> Residence
E-mail Address		<i>If you want to receive notices through e-mail, please be advised that NO hardcopy will be sent to your residence or office.</i>		
<input type="text"/>		<input type="text"/>		
No. and Street		Barangay/Subdivision		
<input type="text"/>		<input type="text"/>		
Municipality, Town/City		Province/Country		Zip Code
<input type="text"/>		<input type="text"/>		<input type="text"/>

2.) Service Request/s

Request for Policy Loan	
<input type="radio"/> Desired Amount	<input type="text"/>
<input type="radio"/> Maximum Loanable Amount	<input type="text"/>
IMPORTANT NOTICE	
Request for "Maximum Loanable Amount" will supersede any amount you indicate under the "Desired Amount" option and may include earned dividends, if any. If you wish to request for Dividend Withdrawal only, please fill out a Dividend Withdrawal form. Further, please be reminded that Documentary Stamp Taxes will be added to your loan amount.	

3.) Pay Out Option

Credit to my Bank Account	
Bank:	<input type="radio"/> BPI <input type="radio"/> BDO <input type="radio"/> Metrobank <input type="radio"/> Others <input type="text"/>
Account Name:	<input type="text"/>
Type of Account	<input type="radio"/> Savings <input type="radio"/> Checking <input type="radio"/> Currency: <input type="radio"/> Dollar <input type="radio"/> Peso
Others	<input type="text"/>
<p>In this option, I authorize FWD to credit the proceeds to the Bank Account with details specified above. I certify that I am a Policy Owner of the FWD policy with number indicated above. I certify too that I am the owner of the aforementioned bank account number. I acknowledge that the payment by FWD of the proceeds of this application through option I have designated above, shall release and forever discharge FWD from all actions, claims and demands on all matters involving the said benefit or amount. Further, I certify the correctness and accuracy of the above information I provided to FWD and I understand that any discrepancy may cause delay in the disbursement of the proceeds.</p>	

