Guide to Completing the Request for Termination

Before You SignConsider These Facts:	1
 Your life insurance policy is a valuable asset and an important part of your future economic security. Your completion of this form will result in a loss of this asset and the economic security that this policy provides for you and your dependents, as well as tax consequences. If you need cash – our loan option may help you (if available). If your plan no longer suits your needs – we can suggest changes that will be of real benefit to you. We may be able to increase your benefits and/or decrease your premiums. To expedite this process please forward this form to your Advisor/Servicing Agent to be submitted to our Head office. 	
	t & Last name of & Policy Number
I, the Owner named in Policy Number	
(the "Policy") have considered carefully the above facts, understand fully the benefit I can secure in adjusting rather than surrendering this Policy and contract and now instruct The Equitable Life Insurance Company of Canada (the "Company") to terminate the Policy and pay the present cash value as directed below. I fully understand that I have no further protection or benefits under the Policy, and release and discharge the "Company" from all claims and demands with respect to the Policy. Dated at City, Province The "Company" from all claims and demands with respect to the Policy. Owner's Signature Owner's Signature	Owner(s) signature required.
*Owner's Social Insurance No.	SIN of Owner(s)
If this policy is assigned please submit a letter of release from the assignee	required for Whole Life and Universal Life policies.
**I, the Preferred or Irrevocable Benefits the Policy hereby	
consent and agree to this termination of the Policy and the payment of the cash value as directed above. I fully une no further protection or benefits under the Policy. I certify that I am over the age of majority.	A release of
**Beneficiary's Signature	assignment on the lenders letterhead is required to process the termination.
The original contract should be destroyed once the termination form has been submitted. If beneficiary is Preferred or Irrevocable the beneficiary mus complete this section with name and signature.	