

SURRENDER / LOAN / DIVIDEND REQUEST

Name of Owner and Mailing Address For Insurance Purposes (type or print)

Date

Policy Number

Name of Insured

Telephone Number of Owner

 Is this a change of address? Yes No

 Do you want your check mailed to this address? Yes No

If no, give delivery instructions: _____

This Surrender/Loan/Dividend Request form has been provided to you to enable the Company to process your requested transaction. If the completed form is not received within 30 days, your coverage will continue according to the provisions of your policy and your current elections; however, if automatic bank account deductions for premium payments were suspended due to your request for a surrender of policy values, a bill for the premium will now be mailed directly to the payor's address.

 DIVIDENDS (Not Applicable To Universal Life)

Dividend Amount Available \$ _____

Surrender \$ _____ for:

- | | |
|--|---|
| <input type="checkbox"/> Payment in Cash | <input type="checkbox"/> Loan Interest - Due Date _____ |
| <input type="checkbox"/> Reduction of Loan Balance | <input type="checkbox"/> Premium - Due Date _____ |

GIVE POLICY NUMBER IF VALUE SURRENDERED IS TO BE APPLIED TO POLICY OTHER THAN THE ONE ABOVE

POLICY #:

Future dividends earned are to be used as follows:

- | | | |
|---|--|---|
| <input type="checkbox"/> Continue Unchanged | <input type="checkbox"/> Reduce Premium | <input type="checkbox"/> Pay in Cash |
| <input type="checkbox"/> Reduce Loan | <input type="checkbox"/> Purchase Paid-Up Insurance* | <input type="checkbox"/> Additional Protection Benefit* (Priority Only) |
| <input type="checkbox"/> Other _____ | | |

** Evidence of insurability may be required.*

IMPORTANT: Surrender of dividends may affect any guaranteed and any non-guaranteed values, including cash surrender value and the death proceeds.

 POLICY LOAN (All Plans of Insurance with Cash Value)

Amount \$ _____

The available loan value will be the cash value, less any indebtedness to the Company and less loan interest until the next policy anniversary. Interest on the loan shall be payable in advance from the date thereof to the next anniversary date of the policy, and annually in advance thereafter.

IMPORTANT: Policy loans may affect your policy's guarantee features or cause your policy to terminate without value. For Altis® II, Altis® 100 Plus, Living Legacy® II, Living Legacy® III and Legacy Solution®, this includes the possibility that the death benefit may no longer be guaranteed. For any policy, proceeds paid at death will be reduced by a loan balance. Please read your policy or consult your agent or the home office to understand the charges associated with a loan and how a loan will affect your policy.

PARTIAL SURRENDER (Except Legacy Solution® II and Legacy Solution® III)

Amount \$ _____

The partial surrender may be any amount not exceeding the current surrender value less \$250.00. There will be a surrender fee of \$25 deducted from the policy value.

IMPORTANT: Partial surrenders may affect your policy’s guarantee features or cause your policy to terminate without value. For Altis® II, Altis® 100 Plus, Living Legacy® II, Living Legacy® III and Legacy Solution®, this includes the possibility that the death benefit may no longer be guaranteed. Please read your policy or consult your agent or the home office to understand the charges associated with a partial surrender and how a partial surrender will affect your policy.

PARTIAL SURRENDER (Legacy Solution® II and Legacy Solution® III)

Amount \$ _____

IMPORTANT NOTICES REGARDING SURRENDER OF POLICY CASH VALUE:

Partial Surrenders are not permitted during the first policy year or during the premium-paying period. The minimum partial surrender is \$500, the maximum varies by policy year. A surrender fee of \$25 will be deducted from the surrender amount, and the face amount reduces by more than the partial surrender.

Partial Surrenders affect the face amount, cash value, and death proceeds. Please read your policy’s “Partial Surrender” provision or consult your agent or the home office for more information.

For Legacy Solution® III only: Any dividend values will be surrendered first, unless otherwise requested, and the balance will be surrendered from the policy cash value. There is no fee for surrendering dividends but, guaranteed and non-guaranteed values, cash surrender value, and the death proceeds may be affected.

PAR RIDER SURRENDER (Whole Life)

- Single Par Rider Scheduled Par Rider **

** *Last Rider added will be surrendered, unless specified:* _____

IMPORTANT: Surrender of this rider may affect the guaranteed and any non-guaranteed policy values, including face amount, cash value, and death proceeds.

TOTAL SURRENDER (Whole Life, Endowment, Term or Universal Life) – POLICY MUST BE RETURNED

Any indebtedness to the Company under the policy will be deducted from the cash value. On Whole Life, Endowment, and Term, dividends, if any, are included in the cash value. For Universal Life, a surrender charge may apply.

IMPORTANT: In totally surrendering this policy, it is understood that all rights, privileges and benefits under said policy, except the right to receive the amount of cash surrender value, are hereby cancelled.

LOST POLICY CERTIFICATION

By my signature on page 3 of this form, I certify that any policy listed on this form which is not returned with this form has been lost or destroyed. I also certify that no persons, corporations, or associations have any claim or interest in said policy(ies) by virtue of sale, assignment, gift, or pledge thereof, or otherwise. I agree that should said policy(ies) be found or come into my possession, I will immediately return it to the insurer. I hereby release the insurer from any obligation under this policy(ies) and will hold insurer harmless from all loss or injury which may result from its payment of the surrender value or proceeds of the policy(ies) to me.

ASSIGNMENT AND BANKRUPTCY CERTIFICATIONS

The undersigned hereby certify that said policy is not assigned or pledged other than to Shenandoah Life Insurance Company, except as indicated below by the signature of the assignee, if any, and further certify that no proceedings under the United States Bankruptcy Law have ever been instituted by or against any of the undersigned or contemplated by any of the undersigned.

W-9 CERTIFICATION

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), **and**
2. I am not subject to backup withholding because: **(a)** I am exempt from backup withholding, or **(b)** I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or **(c)** the IRS has notified me that I am no longer subject to backup withholding, **and**
3. I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item **2** above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest or dividends on your tax return. For real estate transactions, item **2** does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN.

NOTICE OF WITHHOLDING ON DISTRIBUTIONS OR WITHDRAWALS

The withdrawals you receive from the above-mentioned policy may be subject to Federal income tax withholding unless you elect not to have withholding apply by checking the appropriate block below. If the appropriate block is not checked, the payment of the cash surrender value may be delayed. If you do not respond by the date of your distribution, 10% of the amount, if any, will be deducted.

If you elect not to have withholding apply to these funds, if any, or if you do not have enough Federal income tax withheld, you may be responsible for payment of estimated tax. You may incur penalties under the estimated tax rules if your withholding and estimated tax payments are not sufficient.

- I do not** want any Federal income tax withheld **I do** want the 10% Federal income tax withheld

Witness the signatures of the undersigned this _____ day of _____, _____

<p>X _____ Signature of Owner</p>	<p>_____ Pin Number, <i>if applicable</i></p>	<p>_____ Social Security Number of Owner</p>
<p>X _____ Signature of Co-Owner, <i>if any</i></p>	<p>_____ Pin Number, <i>if applicable</i></p>	<p>_____ Social Security Number of Co-Owner</p>
<p>X _____ Signature of Witness</p>	<p>X _____ Signature of Assignee, <i>if any</i></p>	
<p>X _____ Signature of Irrevocable Beneficiary, <i>if any</i></p>		

PAGES 1, 2 AND 3 MUST BE COMPLETED AND RETURNED TO THE HOME OFFICE