

Life & Pensions

Notice of Pledge of a Life Policy to Nordea Life & Pensions Limited, Isle of Man

1. Policyholder/Employer

_____ (the "Policyholder");
Name of the Policyholder/Employer (Arbetsgivare)

2. Life Assured/Employee

_____ (the "Pledgee")
Name of the Life Assured/Employee (Anställd)

3. Date of agreement/Pledge

Date of Direktpension agreement/Pledge: ____ ____ 20 ____ ("the Effective Date")

4. Policy number

Policy number: _____ ("the Policy")

To Nordea Life & Pensions Limited

The Pledgee hereby gives you notice that by a pledge completed on the Effective Date and made between the Pledgee and the Policyholder, the Policy was pledged by the Policyholder to the Pledgee absolutely and the Pledgee hereby requests that Nordea Life & Pensions Limited provides written acknowledgement of the receipt of the notice. The Pledgee hereby agrees to be bound by the Terms of Acceptance in relation to Direktpension, a copy of which is attached hereto (the "Terms").

Date: _____ Signature of the Pledgee (Anställd/säkerhetsinnehavare)

To Nordea Life & Pensions Limited

The Policyholder hereby confirms having pledged the Policy to the Pledgee and instructs Nordea Life & Pensions Limited to note this pledge on its records and to send an acknowledgement of notice of pledge to the Pledgee. The Policyholder hereby agrees to be bound by the Terms, (a copy of which is attached hereto).

Date: _____ Authorised signature(s) of the Policyholder (Arbetsgivare/försäkringstagare)

To the Pledgee

On behalf of Nordea Life & Pensions Limited, we hereby acknowledge receipt of your notice of pledge in respect of the Policy and confirm that we have noted the pledge on our records. Our agreement to acknowledge notice of pledge is subject to the provisions set out in the Terms.

Date: _____ Authorised Signature of Nordea Life & Pensions Limited