

PROLONGATION- Information sheet

1. What is a "prolongation"?

➔ Prolongation is the extension of an endowment life insurance policy without paying premiums in the form of a special single premium rate.

2. What is the term and duration of a prolongation?

- → The prolongation starts from the expiry date of the contract and lasts for a fixed period of 5 years.
- → This option is available for contracts in USD and EUR.

3. What is the benefit of a prolongation?

- ➔ As a policyholder, you are entitled to receive the sum insured and profit to maturity on the originally agreed upon expiry date.
- Prolongation is ideal for you if you cannot or do not want to receive a payout and want to stay invested for the next 5 years.

4. What applies to surrender during those 5 years?

- ➔ If you need the money urgently, you can also cancel the contract during the five-year prolongation period.
- ➔ As a surrender value, you will receive at least the amount of the expired contract payout plus profit.

5. How do I get the amount of contract payout at the end of the prolongation period?

Before your 5-year prolongation period ends, you will receive a receipt with your payout amount.

6. How can I conclude a prolongation?

You will then find a form which you must complete and send to Medlife no later than 2 weeks BEFORE the contract expires.

A prolongation is NOT possible if the form is received by Medlife after the contract has expired. This does not apply to contracts that expired after February 2022.

7. Do I have to continue paying premiums?

→ There is no longer a premium to pay for the contract.

8. How do I know the surrender value of the contract?

→ You will find a table with the guaranteed surrender value in your policy.

9. How will I know that the prolongation has been carried out?

Medlife will send you a corresponding policy with new number, the old policy is no longer valid.

10. Can I add another prolongation after the first prolongation has expired?

→ No, a prolongation can be applied once for 5 years.



Application for prolongation

(Please fill in, sign and send this sheet to Medlife together with a recent Photo-ID)

Policy-no:	
Policyholder:	
d.o.b.:	
Insured Person:	
d.o.b.:	
Expiry date:	
Expiry amount:	
Premium credit:	

I wish to prolong my contract starting with expiry date mentioned above for 5 years using the sum of expiry amount and premium credit.

I have read and understood the Infosheet as enclosed and accept the conditions of the prolongation.

Date

Signature of policyholder