

F&G Annuities & Life

Change Mode of Premium Payment/Planned Premium

Fidelity & Guaranty Life Insurance Company and Fidelity & Guaranty Life Insurance Company of New York

INSTRUCTIONS

USE THIS FORM TO UPDATE THE MODE OF PAYMENT WITH RESPECT TO YOUR LIFE INSURANCE POLICY.

RETURN COMPLETED FORM TO:

Fidelity & Guaranty Life
Insurance Company
Service Center,
P.O. Box 81497
Lincoln, NE
68501-1497



U.S. Mail

Fidelity & Guaranty Life
Insurance Company
Service Center,
777 Research Drive
Lincoln, NE
68521



Overnight

New York Residents:

Fidelity & Guaranty Life
Insurance Company of
New York Service Center,
P.O. Box 81337
Lincoln, NE
68501-1337



U.S. Mail

Customer
Service:
888-513-8797



Phone

Life Insurance:
800-281-5777



Fax

If your address has changed please fill out our Change of Name or Mailing Address form that can be found at www.fglife.com. Please reference form ADMIN 5743.

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OWNER

Policy Number	Name: First / Middle Initial / Last		
Phone Number	Email Address		

NEW PREMIUM MODE

Select the mode of payment to receive a premium notice annually, semi-annually, quarterly or monthly bank draft from your checking or savings account.

Change to: (select one) ☐ Annual ☐ Semi-Annual ☐ Quarterly ☐ Monthly*

* If you have selected monthly payments, you must also complete the Pre-Authorized Check (PAC) Authorization Form that can be found on www.fglife.com. Please reference form ADMIN 5617.

CHANGED PLANNED PREMIUM

Use this form to update the planned premium amount with respect to your Universal Life Insurance policy. Indicate the amount of premium you plan to pay.*

Change Universal Life Planned Premium to: \$ _____

* The planned premium must meet the minimum premium requirements and you will be notified if the premium selected does not meet the requirements.

Under penalties of perjury,
I certify that the information
provided above is correct
and true.



Owner(s) and/or Assignee(s) Signature(s)	Date
Joint Owner (if any) Signature(s)	Date
Other Required Signature (if any)	Date