STANDARD LIFE

Investment Solutions

Additional Premium payment to a Portfolio RIF Policy

Insurance Representative |_|_|_|_|_|_| Policy Number: _____

Distributor Name _____ Distributor Code |_|_|_|_|_|_|

1 Tell Us About Yourself (Policyholder)

My name is

_____
Last Name *First Name*

_____
Address *City*

_____
Province *Postal Code*

Tel. (Res.) ( ) _____ - _____

Tel. (Bus.) ( ) _____ - _____

2 Source of Funds-Transfer under the Income Tax Act (Canada)

Please attach appropriate form.

❒ T2033 or equivalent ❒ T2030 ❒ T2220 ❒ T2151

If other, please specify:

_____

LRIF, LIF or other only – attach applicable Standard Life endorsement form and specify province of legislation:

_____

3 Would You Like a Rate Basis Guarantee? (Term Funds only)

❒ Yes, apply today's Standard Rate Basis Guarantee (45 days).

❒ No, apply the Rate Basis Guarantee in effect when premiums are received by Standard Life.

See Rate Basis Guarantee Terms in the Contract Provisions.

4 Interest Option (Term Funds only)

Simple interest on Term Funds for terms of less than one year will be credited to the Daily Interest Fund at maturity. For terms of one year or more, simple interest is to be credited to the Daily Interest Fund: ❒ Monthly ❒ Annually

5 Notice of Confirmation

I acknowledge that the information concerning the term and interest given in Sections 3 and 4 of the Application will be binding upon Standard Life only once it has accepted such information. Standard Life will send me a Confirmation Notice, within seven working days after receipt of both the premium payment and this Application, confirming such information. The Notice will also confirm other information given by me in this Application.

6 Premium Payment Information and Allocation Instructions

Make all cheques payable to **Standard Life**.

Portfolio RIF Contract surrender options: (The Portfolio RIF no-load option and the Portfolio RIF back-end load option cannot be part of the same Contract.)

The surrender option will default to the same surrender option selected on the original application.

Ideal Segregated Funds		*Single premium payment of* $ _____ *The premium payment is to be allocated as follows:*	
		Amount	Percent
Money Market		$	%
Canadian Bond		$	%
Corporate High Yield Bond		$	%
International Bond		$	%
Income Balanced		$	%
Monthly Income		$	%
Balanced		$	%
Canadian Dividend Growth		$	%
Canadian Equity		$	%
Canadian Small Cap		$	%
U.S. Equity		$	%
International Equity		$	%
Global Equity		$	%
Conservative Portfolio		$	%
Moderate Portfolio		$	%
Growth Portfolio		$	%
Aggressive Portfolio		$	%
Daily Interest Fund		$	%
Term Funds	❒ 1 ❒ 3 ❒ 6 month	$	%
Term Funds	❒ 1 ❒ 2 ❒ 3 ❒ 4 ❒ 5 year	$	%
Term Funds	❒ 6 ❒ 7 ❒ 8 ❒ 9 ❒ 10 year	$	%

X _____ Date _____ Province _____
Policyholder

For Standard Life use only

Premium amount: _____ Premium payment date: _____