



Application/Policy #	
Agent #	

PDC AGREEMENT FORM

TO : **New Business Underwriting and Claims/Policy Admin Dept.**

POLICY OWNER : _____

PROPOSED LIFE INSURED : _____

BRANCH : _____

DATE : _____

Dear Sir/Madam,

This is to certify that I have fully explained the requirements for the post-dated check mode of premium payment to my client, Mr. /Ms. _____.

The client is now fully aware that PDC payment requirement for all new business insurance applications opted to be paid through PDC's must be submitted along with the following:

- Client provides 13 cheques **(from one (1) bank account only)**
 - a. One (1) dated cheque to cover the initial premium; and
 - b. Twelve (12) post-dated checks to cover the succeeding monthly premiums for one year
- PDC agreement form
- PDC Certification (PDC listing)
- Provisional receipt from the agent
- Notice and Consent form duly signed by the policy owner or eligible 3rd party payor (TPP) **PDC's will be replenished automatically if the remaining checks are good for three months only.*

The client was also informed of certain conditions in availing of the PDC mode, namely:

- that the PDC's will be warehoused at Security Bank;
- that in the event of any check pull-out for whatever reason, including closed accounts, Security Bank will charge a fee of PhP 100.00 per check to the requesting client;
- that pull-out/deferment requests must be done three (3) to five (5) working days before check maturity; and
- upon the due date of each PDC submitted at the branch, Pru Life UK will issue separate Official Receipts (OR) or electronic Official Receipts (eOR).

With all the foregoing, the client still prefers the PDC mode of payment.

Thank you.

Sincerely yours

Conforme:

Signature over printed name of **AGENT**

Signature over printed name of **Policyowner**

Signature over printed name of
BRANCH MANAGER

Signature over printed name of **Account Owner** (For
Third Party Payor

Note: Please submit this Post-dated check Agreement Form along with the PDC's, PDC Certification (PDC Listing) and the application or amendment form.

Persistency of agent: _____%