

Policy Loan Request Form

(See Instruction page)

Policy Number	//	Suffix) Sales Office & FRN_		
Policyowner's Name(Please Print)	First	M.I.	Last	
Address			Telephone #	
Insured's Name(If different from above)			Date Prepared	
Please check this box if th	is information is different from	that on Company records. If so, a	lso complete Form 1900010087 Change of	

Name/Mailing Address/Telephone Number.

If a partial loan is requested, Metropolitan will borrow against the base policy value first, and then, if necessary, against any dividend value. If there is not sufficient value to meet the specific dollar amount, a loan for the largest amount available will be granted. If a full value loan is requested, you must specify whether the loan will borrow against policy dividends, or if dividends should be withdrawn.

If a loan is requested to pay premium(s), specify the policy number/suffix, the first premium due date, and the number of premiums to be paid. If you are including a check to be used in conjunction with this loan to pay premiums, enter the check amount in the space provided.

F	Partial Loan For \$				
F	Full Value Loan — Include Value of Dividends				
F F	Full Value Loan — Do Not Include Value of Dividends				
F F	Full Value Loan — Withdraw Accumulated Dividends				
F F	Full Value Loan — Include Value of Dividends and Paid-Up Additions Rider				
_ ι	Loan to pay Premiums on Policy No./Suffix:				
ſ	Number of Premiums to be Paid:				
[Due Date of First Premium:				
I	Include Amount Paid by Check: \$	Cash (if applicable) \$			
This lo	oan will be in accordance with the policy's loan provision. By signing below, I agr an.	ee to assign the policy to Metropolitan as security for			

Withholding Election

Under current Federal Income Tax Laws, certain policy payments, may be taxable. See Federal Income Tax Withholding Notice below.

Check one of the boxes below provide the owner's Social Security Number and sign at the bottom. Failure to provide your Social Security Number may require us to withhold Federal and, in some cases, State Income Tax from any payment.

Please withhold 10% of any taxable portion of the amount payable.

Do not withhold (your Social Security Number must be provided below or this election is void).

Policyowner's Social Security No. (or Taxpayer Identification No.):_

I certify, under penalties of perjury, that my taxpayer identification number is correctly shown on this form, and if this policy was issued after December 31, 1983, I also certify I **am not** subject to a back up withholding order issued by the Internal Revenue Service. (Cross out any part of this statement that is not correct and sign below).

FEDERAL INCOME TAX WITHHOLDING NOTICE

Under current Federal Income Tax law, any taxable portion of the amount you request is subject to Federal Income Tax withholding at the rate of ten percent (10%). You may elect not to have withholding apply. To make this election, please complete the Withholding Election portion of this form. You must also sign and date the form and provide your Taxpayer Identification Number. In making your election, please be aware that even if you elect not to have withholding apply, you are liable for the payment of Federal income tax on any taxable portion of the payment. If you are required to file an estimated tax return under the estimated tax payment rules, you may be subject to penalties if your tax payments, in addition to any amounts withheld by us, are not sufficient to satisfy your tax liabilities. If you do not complete the election request, we may have to withhold Federal income tax from any taxable portion of your payment.

Please Sign and date below if any sections on this side of the form have been completed.

Х		Х			
	Signature (See Instructions)		(Witness)	(Date)	
Х		Х			
	Signature (See Instructions)		(Witness)	(Date)	
		P	age 1 of 2		

□ Additional Instructions

Please sign and date below if any sections on this side of this form have been completed.

Х		Х		
	Signature (See Instructions)		(Witness)	(Date)
Х		Х		
	Signature (See Instructions)		(Witness)	(Date)

INSTRUCTIONS FOR COMPLETION OF LOAN REQUEST FORM

LOAN REQUEST

To request a loan, select either a (1) partial loan for a specific amount, (2) full value loan, or (3) a loan to pay a premium(s).

- If a partial loan is requested, Metropolitan will borrow against the policy loan value first, and then, if necessary, against any dividend value. Metropolitan will not withdraw dividends unless directed. To authorize a dividend withdrawal along with a loan from the base policy, the appropriate selections must be made on the request form. If there is not sufficient value to meet the specific dollar amount, a loan for the largest amount available will be granted, borrowing against available dividends where available.
- 2. If a full value loan is requested, the loan will borrow against policy dividends unless you indicate otherwise. Check the appropriate box.
- 3. If a loan is requested to pay a premium(s), specify the policy number, the first premium due date, and number of premiums paid. If a cash payment is being combined with the loan request to pay the premium, specify the cash amount.

NOTE: A loan cannot be used to pay an initial premium nor to make an advance payment.

 Special Instructions — To request a loan transaction not otherwise described in these instructions, Metropolitan will attempt to comply if policy terms permit.

Refer to Signature Requirements section below.

SIGNATURE REQUIREMENTS

MetLife's **signature requirements** for life insurance transactions are based on the need to maintain adequate security for the Company and its customers. While some transactions may be processed based on only a phone call, MetLife requires a signed request for **most** transactions, due to the nature of the transaction and/or a policy's beneficiary or ownership arrangement.

If in doubt, get the owner's signature.

Because of differences in contracts and applicable laws, different procedures may apply to annuities and other products. These procedures apply only to life insurance policies.

The Owner's signature is required for:

- All payments of \$10,000 or more,
- All transactions involving a variable life insurance policy (UM,-V, A-R, E1-R, A1-R, PR-R, PR-V suffixes),
- · Loans if no check will be issued and the loan is to be applied to a different policy to:
 - Pay a premium,
 - Put into PUAR, SIB/AIB, or
 - Repay a loan or loan interest.

For additional information regarding signature requirements, including situations that may not be covered in these instructions, please refer to the MetLife Financial Services Release dated March 6, 2000 and titled "Signature Requirements for Cash Loan and Dividend Life Insurance Transactions."

WITHHOLDING ELECTION SECTION

This section may be used to enter a policyowner's T.I.N., to correct an existing one on our records, or to provide certification. If the policyowner is an individual, the T.I.N. is his/her Social Security Number. Certification is required when Dividends with interest are withdrawn, a conversion to or from D.W.I. is requested, or D.W.I. is to be included as part of a cash surrender payment. If there is any doubt about whether certification is necessary, and to avoid potential delay in acting on the request, the policyowner may be best served by having him/her certify at this time.