

AMERICAN SAVINGS LIFE INSURANCE COMPANY

(480) 835-5000 • 1-800-880-2112
935 E. Main Street, Suite 100
Mesa, AZ 85203-8849

POLICY LOAN AGREEMENT

I, _____, the undersigned, desire a policy loan:

(Select one)

In cash, in the amount of \$

In cash in maximum amount available.

To pay premium of Policy No.(s)

I am the owner of Policy Number _____ and do hereby request an advance under the policy loan clause for an amount not to exceed the maximum loan value of the policy, subject to the terms and conditions of the policy and to bear interest at the rate provided in the Policy.

In compliance with such terms and conditions and for the purposes therein provided, said policy and its accumulations and all moneys now or hereafter due by virtue thereof are hereby assigned to AMERICAN SAVINGS LIFE INSURANCE COMPANY as security for the amount of this loan and interest thereon, and any other indebtedness to said Company on account of said policy.

I certify to the Company that no Bankruptcy proceedings have been filed by or against me while this policy has been in force, nor are any such proceedings now pending.

Said policy is in the possession and control of the undersigned, and it is not assigned or subject to any vested interests, except as follows:

Any such assignment or vested interest shall be secondary and subordinate to this assignment to said Company.

Dated at (City & State) _____ this _____ day of _____, 20_____

OWNER'S SIGNATURE:

WITNESS'S SIGNATURE:

Signature: _____

Signature: _____

Owner's Address:

_Name of Witness:

Witness Address:

Phone Number:

Witness Phone Number: