

In order to expedite your transaction requests while maintaining the integrity of your personal information, Reliance Standard Life Insurance Company ("RSL") requests that you create Personal Identification Number (PIN) on your annuity. To add or reset a PIN, please complete this form and return it to RSL using one of the methods below. Complete all required sections for your request. **If you do not provide Pages 1-2 to Reliance Standard, your request will not be processed until pages 1-2 are received.** Please use one form per policy.

Once a PIN has been established, you will be required to provide your PIN both verbally and/or in writing in order to obtain information from our Customer Care Center or to submit written requests for contract changes and disbursements.



**EMAIL TO:**  
annuitychgrequests@rsl.com



**FAX TO:**  
267.570.8812



**MAIL TO:**  
Reliance Standard – Retirement Services  
1700 Market Street, Suite 1200  
Philadelphia, PA 19103

**QUESTIONS? Call Customer Care at 1.800.435.7775**

Contract Number \_\_\_\_\_

**SECTION 1 | Contract Owner Information**

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_

Entity/Trust Name \_\_\_\_\_

SSN/TIN \_\_\_\_\_ Email Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Mailing Address\* \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

\*Required if mailing address is a PO Box:

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**SECTION 2 | Joint Contract Owner Information (if applicable)**

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_

SSN/TIN \_\_\_\_\_ Email Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Complete the address portion only if it is different than the owner's address.

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### SECTION 3 | PIN Addition

To add a PIN to your policy, please complete the information below.

Select any 4-digit numeric sequence as your Personal Identification Number: \_\_\_\_\_

**Provide answer to the following security questions: (select 2 of 5)**

What is your mother's maiden name? \_\_\_\_\_

What is street that you grew up on? \_\_\_\_\_

What is the name of your first pet? \_\_\_\_\_

What is your high school mascot? \_\_\_\_\_

What is the name of the city where you were born? \_\_\_\_\_

### SECTION 4 | PIN Reset

To reset your PIN, you must provide answers to the security questions you originally selected. Please choose a PIN and answer the questions below.

Select any 4-digit numeric sequence as your Personal Identification Number: \_\_\_\_\_

**Provide answer to the following security questions: (select 2 of 5)**

What is your mother's maiden name? \_\_\_\_\_

What is street that you grew up on? \_\_\_\_\_

What is the name of your first pet? \_\_\_\_\_

What is your high school mascot? \_\_\_\_\_

What is the name of the city where you were born? \_\_\_\_\_

### SECTION 5 | You must complete this Section. Read this section IN ITS ENTIRETY before signing.

My signature indicates that I authorize RSL to complete a transaction based on telephone instructions. I understand that RSL will not provide policy information and/or accept telephone instructions to complete transactions by me or any other authorized representative if a PIN is not provided. In order for RSL to accept my instructions and/or provide policy information, I or my authorized representative must properly identify the above annuity contract(s) and provide the PIN set forth above. If I have forgotten my PIN or would like to reset the PIN, I understand that I must accurately provide the answers to the security questions set forth above when requesting information. If this occurs, I agree to immediately reset my PIN using this form, as my previous PIN will no longer valid. I understand that RSL will not be liable for any loss, damage, cost or expense resulting from these telephone instructions which it reasonably believed to be genuine. I understand that this authorization will be effective until a written revocation is received by RSL's Administrative Office, or RSL discontinues this privilege, whichever comes first.

Contract Owner Signature  
\_\_\_\_\_

Signature Date (MM/DD/YYYY)

\_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Contract Joint Owner Signature (if any)  
\_\_\_\_\_

Signature Date (MM/DD/YYYY)

\_\_\_\_ / \_\_\_\_ / \_\_\_\_\_