

# EQUI-VEST<sup>®</sup> EXPRESS<sup>SM</sup>

## Variable Annuity Series

### Dollar Cost Averaging Form

**Express Mail:**  
AXA Equitable  
EQUI-VEST Processing Office  
Suite 1000, 100 Madison St.  
Syracuse, N.Y. 13202

**Regular Mail:**  
AXA Equitable  
EQUI-VEST Processing Office  
P.O. Box 4956  
Syracuse, N.Y. 13221

**Fax Number:**  
(201) 583-2827



**For Assistance: Call (800) 628-6673**  
**Monday – Thursday 8:00 a.m. – 7:00 p.m. EST**  
**Friday 8:00 a.m. – 5:00 p.m. EST**

**1. Annuitant Information** *(Contract number must be provided to process this request)*

Certificate/Contract Number

Annuitant's Name *(Last, First, Middle)*

Owner's Name (if different from Annuitant)

Address Number and Street

Apt/Suite/Floor

Annuitant's Daytime Phone

City

State

Zip Code

Please check if this is an Address Change

**2. General Dollar Cost Averaging Status**

Is this a change to an existing Dollar Cost Averaging election?  Yes  No

If the answer is Yes, this election will supersede the existing election.

**3. Choose your Investment Fund(s)**

The program transfers a given amount automatically from the EQ/Money Market Option to the other Variable Investment Options.

**Automatic Transfer of Fixed-Dollar Amount.**

- Indicate the monthly total amount (\$50 minimum) to be transferred from the EQ/Money Market Option \$ \_\_\_\_\_
- Select a transfer duration:  
 12 months  24 months  36 months  until zero balance in the EQ/Money Market Option
- Provide whole dollar amounts in the spaces next to the options you have chosen.



#### 4. Authorization

Please activate this feature within my EQUI-VEST Express contract. I have read and understand the Terms and Conditions appearing on page 3.

Signature of Annuitant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Owner (IF OTHER THAN ANNUITANT.) \_\_\_\_\_ Date \_\_\_\_\_

(IF CORPORATION OR TRUST, THEN SIGNATURE & TITLE OF AUTHORIZED INDIVIDUAL ON BEHALF OF OWNER.)

#### Terms And Conditions for EQUI-VEST Express

1. You can change the way your savings are invested at any time by sending us a Request For Service form or by using the Telephone Operated Program Support (TOPS) System.
2. You can discontinue the DCA feature at any time by sending us a written request or by using our Telephone Operated Program Support (TOPS) line at 800-755-7777.
3. Investing in the variable investment options does not guarantee a profit or protect against loss in a declining market.
4. Financial transactions will be verified by a confirmation notice. If you do not receive a notice within 14 days of the transaction, please notify us immediately.

#### **Automatic Transfer of Fixed-Dollar Amount.**

5. AXA Equitable will verify that a minimum of \$2,000 is in your EQ/Money Market Option upon receipt of this form by AXA Equitable's EQUI-VEST Processing Office. The first transfer will occur on the last business day of that month, and future transfers will occur on the last business day of each month.
6. This election will automatically stop under these circumstances: the number of transfers indicated on this form have been completed and the balance in the EQ/Money Market Option is zero.

*FOR MORE INFORMATION, SEE YOUR EQUI-VEST EXPRESS PROSPECTUS AND ANY SUPPLEMENTS,  
OR CONTACT OUR CUSTOMER SERVICE REPRESENTATIVES, TOLL-FREE, AT 1-800-628-6673.*