

(FORM OF RE- ASSIGNMENT OF POLICY FOR CONDITIONAL ASSIGNMENT)

LIFE INSURANCE CORPORATION OF INDIA
.....DIVISIONAL OFFICE.....BRANCH, CODE NO.....

I/ We,the assignee/s, in consideration of natural love and affection do hereby reassign all my rights , title , interest and benefit of all moneys to become payable under the policy of assurance number..... Of the life insurance corporation of India assuring the sum of Rs.....to my (mention relation) Sri/ Smt.....the assured and declare that his receipt shall be sufficient discharge to the corporation for the same.

Dated at.....this day of20..

Witness:-

Signature : 1)
2)
Full name (signature of Assignee/s)
Designation
Address:

(FORM OF NOTICE FOR Re- ASSIGNMENT OF POLICY FOR NATURAL LOVE AND AFFECTION)

LIFE INSURANCE CORPORATION OF INDIA
.....DIVISIONAL OFFICE.....BRANCH, CODE NO.....

To place
Chief/ Sr/ Branch Manager Date:
Life Insurance Corporation Of India
.....branch

Dear sir,
Re: policy number

I/ we hereby give you notice that I/ we have re-assigned the above policy to(give name and full address of assignee) on Please acknowledge receipt of this notice and forward the enclosed policy/ deed of assignment to..... after registering the assignment thereon in your books.

Signature of witness yours faithfully,
(signature / thumb impression of assignor/
life assured)

The wording of this form ,if found suitable should be copied out either on the back of the policy itself, or in the alternative, on a proper stamp paper of the requisite value.

FORM OF CONDITIONAL ASSIGNMENT OF POLICY FROM EMPLOYER/ PROPOSER IN FAVOUR OF LIFE ASSURED /EMPLOYEE UNDER EMPLOYER -EMPLOYEE SCHEME