Life Insurance

Aditya Birla Sun Life Insurance Company Ltd.



PROTECTING INVESTING FINANCING ADVISING

Assignment Form

Any alterations/corrections made in the form need to be duly signed by the policy owner.

Please read the below Instructions carefully before filling the form:

- 1. All the information is to be filled in BLOCK LETTERS and all fields are MANDATORY. The Assignment shall not be effected by Aditya Birla Sun Life Insurance Company Limited (ABSLI) unless this Form is duly completed and delivered along with original policy contract to ABSLI.
- 2. The term Assignor stands for the current Policy Owner, who intends to assign the policy, whereas the term Assignee stands for the person in whose favor the policy is to be assigned.
- 3. Submission of the notice of assignment should not be construed as acceptance of assignment request. ABSLI reserves its right to refuse to accept or decline the Assignment if it has sufficient reasons to believe that the assignment is not bonafide, not in the interest of Policy Owner, not in public interest, assignment is for the purpose of trading of the insurance policy and such other reason as deemed to be fit and proper.
- 4. In case of assignment in favor of Financial Institution/Bank, duly signed (by authorized signatory) and stamped request letter on Bank's letter head and form is required. Policy shall be automatically assigned absolutely even if the request is for Conditional Assignment.
- 5. The witness should be major [person above 18 years of age] and competent to contract.
- 6. Identification proof of the person submitting the request at the branch is required.

Please use a separate request form for each	ch policy. Date	E D D M M Y Y Y Y	
Policy / Application Number:	EIA A/c number:		
Notice is hereby given that I/We,	have	assigned the above policy to	Please affix recent
Иr. / Ms. / M/s		(Name of the Assignee)	photograph of the
Whose address is:		_	Assignee
VII.000 dddi 000 10.			(for individuals only)
	C+-+-		- Cada
Relation Of Assignor To Assignee (Mandat			ii code:
	r! For which financial goal did you c		Policy?
For Your Family & You	For Efficient Financial Plannin	g For Yo	ur Aspirations
Childs Education	Saving	☐ Wealth Cre	ation
Childs Marriage	Wealth Creation	Retirement	Planning
Family Protection & Risk	Tax planning Legacy Pla		nning
Protection against Health	Business Continuity		
Cover Outstanding Loans			
ETAILS OF ASSIGNEE			
L. Date of Birth:	2. Gender: Male Fem	nale	
3. Marital Status: Unmarried Married	d Widower Divor	ced	
4. Is the Assignee: Trust Non Govt C	rganization Company having only clo	se family shareholding C	naritable Organization
Firm having any sleepir	g partner Financial Institutions	Others	
5. Residential Status: Resident	NRI PIO Resid	dent Country	
6. Assignee is PEP # (Politically Exposed Pe	erson): Yes No		
PEP Individuals who are or have been entrusted		, , , ,	,
example Heads of State or government, senior primportant politically party officials OR Family me			•
If yes, please provide complete details of your n		·	0
7. Nationality: Indian PIO	NRI Other	Spe	cify
3. Occupation: Salaried Studer	t Housewife Agricultur	rist Retired Pensioner	Business Owr
Self Employed	Others	Specify	
9. Annual Income:	10. Tel. No:	11. Mobile No:	

13. PAN Details (Mandatory): For	m 60/61		
14. Bank Details: (Mandatory)			
Account Holder Name:	Name of the Bank:		
Branch Name:	Type of Account:		
Account No.:	IFSC Code:		
15. Are you holding citizenship of any other country? Yes No	If yes, please provide country name/s:		
16. Are you a tax resident of any other country? Yes No	If yes, please provide unique tax identification number/s:		
17. Assignee's country of birth:			
Note: If the response to any of the above question is yes, please submit a	detailed NRI questionnaire available with our branch office.		
(Under Section 38 of the Insurance Laws (Amendment) Act, 2015) ENDORSEMENT (to be filled in by assignor and assignee)			
Any alterations/corrections made in the form need to be duly signed by the	ne policy owner. Please use a seperate request form for each policy.		
I/We (Name of As Aditya Birla Sun Life Insurance Company Limited (ABSLI) for Sum Assured	signor) as the beneficial owners/s of policy no issued by Rs/- have assigned the said policy to the assignee		
Named: Title First	Middle Sumame		
CONSIDERATION (if any)			
Reason of Assignment: Loan from Bank / Financial Institution un	nder Financial Obligation Re- Assignment		
Employer - Employee Lender & Bo	rrower (Third Party Assignment) Key Man		
Assignment to Blood Relatives/Spouse of	out of Love and Affection Other Reason:Specify		
Consideration Amount Rs. ('Mandatory for Terms of Assignment	or Assignment against Loan)		
Future premiums will be paid by Assignor Assignee			
Extent of Assignment (Not applicable for Employer Employee)			
Percentage of Sum Assured Assigned (Tick any one) 100% %	(Applicable for Partial Assignment)		
, ,	ept in case of death claim, Aditya Birla Sun Life Insurance Company Ltd. stitution. 2. In case of death claim, Aditya Birla Sun Life Insurance Company extent of loan outstanding, and the balance amount, if any, shall be paid to		
NOMINEE DETAILS			
NOMINEE DETAILS Nominee Name:	Date of Birth: DDMMYYYY		
Nominee Name:			
Nominee Name:	Pin Code:		
Nominee Name:Address:State: City: State:	Pin Code:		
Nominee Name:	Pin Code: F		
Nominee Name:	Pin Code: F		
Nominee Name:	Pin Code: Pin Code: Signee: Pin Code: Pin Code		
Nominee Name:	Pin Code: Gender: M F Tionship with Assignee: Date of Birth: D D M M Y Y Y Y		
Nominee Name:	Pin Code: Gender: M F Tionship with Assignee: Date of Birth: D D M M Y Y Y Y		
Nominee Name:	Pin Code: Gender: M F Date of Birth: Pin Code: Pin Code: Pin Code: Pin Code: Pin Code:		
Nominee Name:	Pin Code: Gender: M F Date of Birth: Pin Code:		
Nominee Name:	Pin Code: Gender: M F Date of Birth: Pin Code:		
Nominee Name:	Pin Code: Gender: M F Date of Birth: Pin Code: Pin		
Nominee Name:	Pin Code: Gender: M F Date of Birth: D M M Y Y Y Y Pin Code: Gender: M F Gender: M F Fin Code: Pin Code		
Nominee Name:	Pin Code: Gender: M F Tionship with Assignee: Date of Birth: D D M M Y Y Y Y Pin Code: Gender: M F Gender: M F Fin Code: Passport PAN Card Specify Passport		
Nominee Name:	Pin Code: Gender: M F Tionship with Assignee: Date of Birth: D D M M Y Y Y Y Pin Code: Gender: M F Gender: M F Tionship with Assignee: FRING GUIDELINES AS PRESCRIBED BY IRDAI Passport PAN Card Specify Passport Passport Passport Passport Passport Passport		
Nominee Name:	Pin Code: Gender: M F Sionship with Assignee: Date of Birth: D M M Y Y Y Y Pin Code: F Pin Code: ITR Form 16		
Nominee Name: Address: City:	Pin Code: Gender: M F Date of Birth: Pin Code: F Pin Cod		
Nominee Name:	Pin Code: Gender: M F Date of Birth: Pin Code: F Pin Cod		
Nominee Name: Address: City:	Pin Code: Gender: M F Date of Birth: Pin Code: Pin Code: Pin Code: Pin Code: Pin Code: Pin Code: F F F F F F F F F F		
Nominee Name:	Pin Code: Gender: M F Date of Birth: Pin Code: Pin Code: Pin Code: Gender: M F Pin Code: Gender: M F Pin Code: Gender: M F Pin Code: Fallow F Passport PAN Card Specify Date of Birth: Pin Code: Fin		

In case of Financial Institution / Bank / Body Corporate Official Stamp of such institution should be affixed and countersigned by its authorized signatory

IMPORTANT: TERMS AND CONDITIONS

- 1. For detailed information on entire Sec 38 as per IRDAI basis the Insurance Laws (Amendment) Act 2015, please refer to our website www.adityabirlasunlifeinsurance.com.
- 2. A transfer or assignment of a policy made in accordance with section 38 shall automatically cancel a nomination. Provided that the assignment of a policy to Aditya Birla Sun Life Insurance Company Limited (ABSLI) (hereinafter referred as ABSLI) in consideration of a loan granted on the security of the policy within its surrender value, or its reassignment on repayment of the loan shall not cancel a nomination, but shall affect the rights of the nominee only to the extent of ABSLI's interest in the policy: This will however not be applicable if the policy is an Absolute Partial Assignment.

Provided further that the transfer or assignment of a policy, whether wholly or in part, in consideration of a loan advanced by the transferee or assignee to the Policy Owner, shall not cancel the nomination but shall affect the rights of the nominee only to extent of the interest of the transferee or assignee, as the case may be, in the policy:

Provided also that the nomination, which has been automatically cancelled consequent upon the transfer or assignment, the same nomination shall stand automatically revived when the policy is reassigned by the assignee or re transferred by the transferee in favor of the Policy Owner on repayment of loan other than on a security of policy to ABSLI.

- 3. In case of assignment due to love and affection where the assignee is minor, the appointee shall sign on behalf of the minor. The surrender and cash withdrawals (wherever applicable) would be admissible, basis an Affidavit cum Indemnity provided by the Appointee.
- 4. Policy can be assigned totally or partially. In case of partial assignment, the amount or percentage secured under partial assignment should be stated. In case of financial consideration, the assignment shall be done on the basis of amount and not percentage of value of the policy.
- 5. All assignment except MWP, Partial Assignment and the one expressly indicated that the assignment or transfer is conditional will be deemed to be absolute assignments/ transfer.
- 6. The original policy document duly endorsed with the assignment form will be forwarded to the assignee in case of partial assignment and a copy of the endorsed policy document will be forwarded to the assignor being the Policy Owner for the partial share.
- 7. In the case of Partial assignment, the liability of the insurer shall be limited to the amount secured by partial assignment and such Policy Owner shall not be entitled to further assign or transfer the residual amount payable under the same policy.
- 8. When a conditional assignment is effective, the assignee will not be able to obtain loan, or request for any financial transaction like switches, partial withdrawal or surrender the policy.
- 9. A policy that is partially assigned will require joint discharge of the assignor and assignee for the policy loan, partial withdrawal, surrender, maturity, survival benefit or any other benefits payable under policy conditions and as per the terms and conditions of the assignment.
- 10. All payments toward partial withdrawal, surrender, maturity, survival, benefit or any other benefit payable under the policy which is partially assigned on the basis of a fixed value (financial consideration like loans), will be made in favor of the assignee until the total of such payment s made is equal to the amount secured under partial assignment in the event of which the policy shall be re assigned to the Policy Owner.
- 11. All payments toward partial withdrawal, surrender, maturity, survival, benefit or any other benefit payable under the policy which is partially assigned on the basis of percentage will be made in favor of the assignee and assignor in the same ratio of assignment.
- 12. Any fund switch and redirection request under ULIP policies shall have to be jointly signed by assignor and assignee when partial assignment is effective.
- 13. In case of ULIP products the investment are subject to market risks and ABSLI will not be liable if fund value of the policy falls below the assigned amount.
- 14. ABSLI reserves the right to charge a nominal fee for the Assignment.
- 15. Assignment will not be permitted for Pension policies, Health plan policies and for policies issued under the Married Women's Protection Act, 1874

I We, (Name of Assignee) have read and understood the instructions/notices mentioned above.	
Signature of the Assignor:	Signature of the Assignee/Appointee:
Date: D D M M Y Y Y	Date: D D M M Y Y Y Y

Vernacular Declaration In case the assignee has signed in Vernacular language or affixed thumb impression the Witness will also attest the following: I hereby certify that the contents of the above form have been explained to Mr./Ms./Mrs who has signed in vernacular language/affixed his/her left thumb impression on the above form and that his/her signature/thumb impression has been affixed in my presence, only after fully understanding the same.		
Name of Witness:	Witness Signature:	
Place:	Date: D D M M Y Y Y Y	
Note: The witness has to sign i your communications in regards	n English. Please ensure to collect stamped, signed and filled up acknowledgment slip, which you can refer to for all to this request	
Witness (Mandatory) -		
Note: Witness shall be major ar	d competent to contract	
I confirm that the assignor has	executed this instrument of assignment and that he/she has affixed his/her Signature/Thumb impression in my	
presence.		
Name of Witness:	Contact Details of Witness:	
Date: D D M M Y Y Y Y	Place: Signature of Witness	
Policy No.: Individual Received by:	Acknowledgement Slip Date: D D M M Y Y Y Y Bank/Financial Institution Others Time of Receipt: Signature: Stamp/Seal of the branch	

Aditya Birla Sun Life Insurance Company Limited
(Formerly known as Birla Sun Life Insurance Company Limited)
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