RELIANCE NIPPON LIFE INSURANCE

A RELIANCE CAPITAL COMPANY

Notice of Assignment

Policy No. | | | | | | | | |

Date D D M M Y Y Y Y

To,
Reliance Nippon Life Insurance Company Ltd.
Unit Nos. 401B, 402, 403 & 404, 4th Floor, Inspire-BKC, G Block, BKC Main Road,
Bandra Kurla Complex, Bandra East, Mumbai - 400051. India.

All the information is to be filled in BLOCK LETTERS.

I/We (name of the assignor) FIRST MIDDLE LAST as the owner/s of the policy no. issued by Reliance Nippon Life Insurance Co. Ltd. hereby give you notice that I/We have absolutely/conditionally assigned the said policy to Mr./Mrs./Ms. (name of the assignee)

on D D M M Y Y Y Y as per the endorsement annexed to this notice.

We request you to register the assignment in your records and acknowledge the same to me/us and Mr./Mrs./Ms. (name of the assignee).

Details of the Assignee

Name of the Assignee FIRST MIDDLE LAST

Status ☐ Relative ☐ Financial Institution/Bank ☐ Other (specify)

Relationship with the Assignor Date of Birth D D M M Y Y Y Y Gender ☐ Male ☐ Female

Correspondence Address/ Usual place of residence FLAT NO.

BUILDING ROAD NAME / NO.

LANDMARK 1

DISTRICT/TALUKA LANDMARK 2

CITY/VILLAGE STATE Pin Code

STD ISD Code LANDLINE MOBILE EMAIL ADDRESS

Residential status: Indian ☐ Non Resident Indian (NRI) ☐ Country, if NRI _____

Residence for Tax purposes in Jurisdiction(s) outside India ☐ Yes ☐ No
(If Yes, then mandatory to fill the FATCA/CRS declaration)

Whether the Assignee is/are Politically Exposed Person(s)* ☐ Yes ☐ No

*Politically Exposed Persons (PEPs) are individuals who are or have been entrusted with prominent public functions. PEP norms may also be applied to the accounts of the family members or close relatives of the above referred individuals.

Signature of the Assignor

Name

Date D D M M Y Y Y Y

Place

Signature of the Assignee

Name

Date D D M M Y Y Y Y

Place

Instructions

1. All fields are Mandatory
2. All the information is to be filled in BLOCK LETTERS.
3. The term Assignor stands for the current policyholder, who intends to assign the policy, whereas the term Assignee stands for the person in whose favour the policy is to be assigned
4. The Assignment of a policy shall automatically cancel any nomination made in the policy, except for assignment in favour of Reliance Nippon Life Insurance Company Limited (wherever applicable) in which case the rights of the nominee would get affected to the extent of the Company's interest in the policy (Section 39(4)) of Insurance Act 1938)
5. The company expresses no opinion as to the legality or validity of the assignment
6. In case of Reassignment to the Life Assured, please ensure that a fresh nomination is made, since the original nomination stood cancelled at the time of assignment
7. This Assignment shall not be effectual against the company unless this Notice of Assignment and Endorsement are duly filled and completed in all respects and delivered along with original policy document to nearest branch of Reliance Nippon Life Insurance Company Limited
8. In case the Assignment is in favour of a Financial Institution/Bank, please affix stamp of the Financial Institution/Bank and countersigned by the Authorised Signatory
9. In case the Assignment is in favour of a relative (i.e. the father, mother, spouse or child of the assignor), documentary proof (preferably ration card) mentioning the relation therein should be produced along with this form
10. In case the Assignee is other than a Bank/Financial Institution/Relative, please furnish Identification Proof, Residential Proof and Income Proof of the proposed Assignee
11. The witness should be above 18 years of age and competent to contract

Reliance Nippon Life Insurance Company Limited. IRDAI Registration No: 121. Registered & Corporate Office: Unit Nos. 401B, 402, 403 & 404, 4th Floor, Inspire-BKC, G Block, BKC Main Road, Bandra Kurla Complex, Bandra East, Mumbai - 400051. India. T +91 22 6896 5000. For more information or any grievance, 1. Call us between 9am to 6pm, Monday to Saturday on our Toll-Free Number 1800 102 1010 or 2. Visit us at www.reliancenipponlife.com or 3. Email us at: rnlife.customerservice@relianceada.com. Trade logo displayed above belongs to Anil Dhirubhai Ambani Ventures Private Limited & Nippon Life Insurance Company and used by Reliance Nippon Life Insurance Company Limited under license.

Beware of Spurious / Fraud Phone calls: IRDAI is not involved in activities like selling insurance policies, announcing bonus or investment of premiums. Public receiving such phone calls are requested to lodge a police complaint.

mkt/Notice of assignment/V6/Jan2021

CIN: U66010MH2001PLC167089

Endorsement Form

Policy No.

Date D D M M Y Y Y Y

I/We (name of the assignor) FIRST MIDDLE LAST as the owner/s of the policy no. issued by Reliance Nippon Life Insurance Company Limited on the life of Mr./Mrs. (name of the Life Assured)

with Sum Assured of Rs. hereby give you notice that I/We have assigned the said policy to Mr./Mrs./Ms. (name of the assignee) on D D M M Y Y Y Y

Type of Assignment (Select whichever applicable)

☐ I/We have Absolutely Assigned the policy to the assignee mentioned above Or

☐ I/We have Conditionally Assigned the policy to the assignee mentioned above on the condition that in the event of (state the event on the happening of which, the assignment shall be inoperative) , the said policy shall revert to me/us without any further act or deed on the part of the said assignee.

Consideration (Select whichever is applicable)

☐ I/We have received a sum of Rs. as consideration from the said assignee with respect to the referred assignment Or

☐ I/We have assigned the policy out of natural love and affection only

Signature of the Assignor

Name

Date D D M M Y Y Y Y

Signature of the Assignee

Name

Date D D M M Y Y Y Y

Signature of the Witness

Name

Date D D M M Y Y Y Y

Address

Signature of the Declarant

Name

Date D D M M Y Y Y Y

Address

If the signature is in vernacular language, please complete the following declaration

I hereby declare that I have fully explained/translated the contents mentioned in the Assignment form to

FIRST MIDDLE LAST

and I further declare that he/she/they fully understood the meaning there of.

Signature of the Declarant

(Declarant should not be an employee/advisor of Reliance Nippon Life Insurance)

Date D D M M Y Y Y Y

Name & Address of the Declarant FIRST MIDDLE LAST

Correspondence Address/ Usual place of residence FIRST LAST FLAT NO.

BUILDING ROAD NAME / NO.

LANDMARK 1

DISTRICT/TALUKA LANDMARK 2

CITY/VILLAGE STATE Pin Code

STD ISD Code LANDLINE MOBILE 1 EMAIL ADDRESS

I hereby confirm that I have been explained the content in (Language) and have understood the same.

Signature of the Policyholder

Date D D M M Y Y Y Y

---------- For office use ----------

We Reliance Nippon Life Insurance Co. Ltd have recorded the assignment of policy no.

on the life of

by the policyholder

with effect from D D M M Y Y Y Y (date of receipt of notice of assignment by the company)

In recording the assignment, the company does not express any opinion on the legality or validity of the assignment.

For Reliance Nippon Life Insurance Company Limited
Authorised Signatory

Reliance Nippon Life Insurance Company Limited. IRDAI Registration No: 121. Registered & Corporate Office: Unit Nos. 401B, 402, 403 & 404, 4th Floor, Inspire-BKC, G Block, BKC Main Road, Bandra Kurla Complex, Bandra East, Mumbai - 400051. India. T +91 22 6896 5000. For more information or any grievance, 1. Call us between 9am to 6pm, Monday to Saturday on our Toll-Free Number 1800 102 1010 or 2. Visit us at www.reliancenipponlife.com or 3. Email us at: rnlife.customerservice@relianceada.com. Trade logo displayed above belongs to Anil Dhirubhai Ambani Ventures Private Limited & Nippon Life Insurance Company and used by Reliance Nippon Life Insurance Company Limited under license.

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