



Conditional Assignment in favor of individuals

Print each page on a separate sheet:: Use separate form for each policy::Refer instructions at the bottom on page 2

To
SBI Life Insurance Co Ltd,
Branch _____

Date: / /

Notice of Assignment

Policy Details

Policy Number

Name of Policyholder

Contact No. & Email ID	Residence	Office	Mobile
s t d	s t d	s t d	m o b i l e

Details of Assignee *(Assignee is any person in whose favour the policy is assigned)*

Name of the Assignee

Address

Contact No. & Email ID	Residence	Office	Mobile
s t d	s t d	s t d	m o b i l e

Is Assignee SBI Life Employee SBIL Advisor Relative of SBIL Employee / Advisor None

Individual Assignees: Date of Birth Gender Male Female

Relative* _____ (give relationship) Unrelated

Nationality Indian Non Indian

Residential Status Resident Non Resident PIO Country of Residence _____

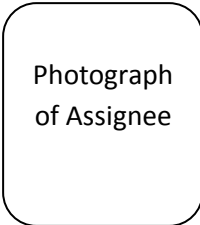
* Documentary proof (preferably Ration Card) mentioning the relation therein should be produced along with this form for relationships other than spouse, children or parents.

KYC: (a) Identity Proof _____ (b) Address Proof _____

(c) Proof of source of funds _____

(d) PAN Number _____ (e) Document Submitted: PAN Card copy Form 60

(f) Are you a "Politically Exposed Person" (PEP) or a close relative of PEP Yes No



PEPs are individuals who are or have been entrusted with prominent public functions, i.e. heads / ministers of central / state govt., senior politicians, senior govt, judicial or military officials, senior executives of govt. companies, important political party officials, immediate family member of above persons (would include spouse, parents, siblings, children, spouse's parents or siblings and close associates of PEPs.)

Details of previous life insurance policies owned by the assignee *(including policies assigned in his name. Use an annexure if required)*

Policy Number	Single / Regular	Annualized premium	Policy Number	Single / Regular	Annualized premium

I hereby give you notice that I have conditionally assigned the above policy to _____

The original policy document is sent herewith. Please acknowledge the receipt of this notice and the original policy document and return the policy document to the above assignee after registering the assignment.

Signature of Assignee

Signature of Assignor/policyholder

