

10M ASSIGNMENT FORM



Important instructions for you to proceed:

- All fields are mandatory
- Assignor is the policyholder intending to assign the policy. Assignee is any person/institution in whose favour the policy is assigned
- Every assignment should be treated as an absolute assignment and the assignee shall be deemed to be an absolute assignee except where assignment is subject to terms and conditions of the assignment agreed by the assignor and assignee
- If more than one policy is to be assigned separate forms are to be filled up in respect of each of them
- A nomination gets cancelled in the case of assignment until reassigned
- Post assignment of the policy, the Assignee will be entitled to all the payouts/ benefits subject to the terms and conditions of the transfer/assignment

Barcode

POLICY DETAILS

Policy Number Date

Name of Proposer
Mr./Mrs./M/S.

Address

Landmark Pin Code

Contact Nos.
STD Residence STD Office Ext. ISD Mobile

E-Mail ID

*CKYC Number (If available): _____

Purpose of Assignment*

- Loan Love & Affection Employee welfare/ benefit Firm dissolution Retirement/resignation of the Director/keyman Mortgage against Loan Amalgamation/ Transfer of business
- Others (if other selected reason is mandatory) _____
- With consideration – Amount ₹ (in words) _____ Without consideration

Terms of Assignment

- Future premiums will be paid by Assignor Assignee
- Future service request including Partial Withdrawal/ Surrender request to be authorised by Assignor
- How are you assigning the policy
- This assignment form
- Separate Instrument (agreement, board resolution etc)
- If separate instrument please specify the date of assignment _____ and submit a copy of the same.

DETAILS OF THE ASSIGNEE

Name of the Assignee
Mr./Mrs./M/S.

Residential Address

Landmark Pin Code

Contact Nos.
STD Residence STD Office Ext. ISD Mobile

Name of Organisation

Official Address

Landmark Pin Code

E-Mail ID

- *Entity Type Blood relative Regulated by IRDAI / RBI / SEBI Non-Regulated institution Govt. Pvt. Ltd. Public Ltd.
- Partner/Proprietor Trust HUF Society Section 8 / Section 25 Company Others _____

*CKYC Number (If available): _____

Relationship with Assignor

Immediate Family Member: Father Mother Spouse Son Daughter Grand Father Grand Mother Others _____

Institutional Legal Entity: Employer/Employee HUF/Member HUF Lender/Borrower Society Trust Others _____

Date of Birth / / Gender Male Female Is the Assignee Employee Advisor Relative of Employee or Advisor None

Resident Status Resident NRI PIO Foreign National Resident Country _____ Nationality Indian Non Indian

Marital Status Unmarried Married Widow(er) Divorced

Occupation Salaried Professional Self Employed/Businessman Student Housewife Retired Others _____
 Annual Income ₹ _____

Industry Type Jewellery Import/Export Mining Shipping Scrap Dealing Building/Construction Agriculture

Stock Broking Others _____

Notice of Assignment

I/We _____, the assignor, have read and understood the above instructions and, subject to the above instructions, have assigned the policy to the assignee mentioned herein above.

On / / , the policy will be assigned to assignee.

(This is the date when the policy benefits are first vested)

Date / /

Place _____ Signature of Assignor _____ Signature of Assignee _____

PAN UPDATION OF THE ASSIGNEE

Kindly submit PAN/Form 60 (as defined under Income Tax Act, 1962), if not already submitted at the time of applying for the policy. Also PAN/Form 60 is mandatory where the premium amount exceeds ₹ 50,000 in a Financial year. The premium payment can be done only through the acceptable premium collection modes. Where any customer/policyholder wishes or proposes to make any payment in cash, it can be accepted up to the limit of ₹ 49,999/- only at the authorised collection points.

*PAN Number

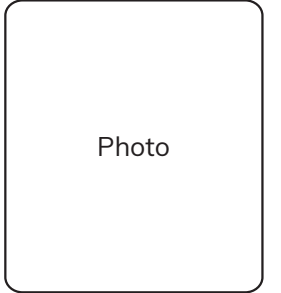
If you have selected "Trust", "Society", or "Section B / Section 25 Company" or if the fourth letter of your PAN is "S" or "T", please submit the NPO declaration along with this form.

Name (as is appears on the PAN Card)

Document Submitted PAN Card Copy Form 60 Form 61

KYC Documents of the Assignee:

- 1) Recent Photograph
- 2) PAN/form 60 for individual assignees
- 3) Officially valid document
 - Passport
 - Proof of possession of Aadhaar (First 8 digit of Aadhaar should be in the masked form)
 - Driving License
 - Voter ID card issued by Election Commission of India
 - Job card issued by NREGA duly signed by an officer of the State Government
 - Letter issued by the National Population Register containing details of name, address or any other document as notified by the Central Government in consultation with the Regulator
4. Income proof (if applicable) _____
5. NPO declaration (if applicable)



Politically Exposed Persons" (PEPs) are individuals who have been entrusted with prominent public functions by a foreign country, including the heads of States or Governments, senior politicians, senior government or judicial or military officers, senior executives of state-owned corporations and important political party officials.

If answer to above question is "Yes", kindly answer the questions mentioned below

1. Are you a Politically exposed person (Active Member / Inactive Member / Relative of PEP / Close Acquaintance of PEP)? _____
2. Please specify the extent of political involvement (Political experience, affiliation to political party, social worker, whether party in power, portfolio handed). _____
3. Please specify your previous occupation. Since how many years are you involved in politics? _____
4. Please specify all the sources of income. _____

FOR OFFICE USE ONLY:

ER Request submitted by C S CR CS

Spaarc Call ID _____ Date / /

Scanning Cabinet _____ Received By _____

Remarks _____



DECLARATION

I hereby consent to receiving information from Central KYC Registry through SMS/email on the registered number/email address.

I/we also agree that the PAN details and other KYC information provided by me/us for any servicing requests may be used by the Company to download/verify my/our KYC documents from CERSAI*

CKYC portal:*Central Registry of Securitisation and Asset Reconstruction and security Interest of India.

I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that ICICI Prudential reserves the right to take appropriate action.

- The submission of a duly filled and signed Assignment form along with the requisite documents will be treated as adequate notice of assignment of the policy
- Immediately after an assignment (whether by an endorsement on the policy or by a deed of assignment) has been executed, the Policy/ deed of assignment along with the Policy must be sent to the Company at its offices as specified below for registration of the assignment
- In the event of the assignment of the Policy not being notified to the Company as above it will not be operative and will not confer upon the Assignee or his legal representatives any rights as against the Company. Priority of claims after assignment will be governed strictly by the order in which notices of assignments have been delivered to/received by the Company at its specified office
- Subject to the terms and conditions of the assignment, the Company shall post due acceptance, recognize the assignee named in the notice as the only person entitled to the benefit under the policy
- If the application for assignment is rejected by the insurer, the customer may approach IRDAI within 30 days of receipt of the notice of rejection
- Assignment will be as per Section 38 of the Insurance Act

I have voluntarily submitted my aadhaar card and hereby give ICICI Prudential Life Insurance Company Ltd. my consent to use and store my aadhaar details for the purposes of processing/servicing this insurance policy. I was provided with options of submitting OVDs other than Aadhaar.

Date

Place _____

Signature of Assignor

Signature of Assignee

Details of the person signing as Witness (Please note that the witness should be major and competent to contract)

The assignor has duly executed the endorsement on the policy, and the signature/thumb impression is of the assignor affixed on the date and at the Place herein above stated.

Name of the Witness

Mr./Mrs./M/S.

Address

Landmark Pin Code

Occupation

Date _____

Place _____

Signature of Witness

ACKNOWLEDGEMENT SLIP

This is to acknowledge the receipt of application for Assignment.

Policy Number

Date

Documents Submitted Policy Certificate

Address proof from the OVDs mentioned above

ID proof from the OVDs mentioned above

Photograph

Income Proof

PAN/Form 60

Received By

STAMP
&
TIME

Kindly call our Customer Service Number 1860-266-7766 (local charges apply)
Call Center timings: 10.00 A.M. to 7.00 P.M. Monday to Saturday (except national holidays)



Communication Address

ICICI Prudential Life Insurance Co. Ltd., Unit No. 1A & 2A, Raheja Tipco Plaza, Rani Sati Marg, Malad (east), Mumbai 400097. COMP/DOC/Jul/2023/77/3436