

DEED OF ABSOOLUTE ASSIGNMENT

I _____ (*name of the policyholder*) in consideration of the sum of SGD _____ paid by _____ (*the assignee*), do unconditionally assign and transfer to the assignee all the rights and benefits of the insurance policy _____ (*policy number*) dated _____ (*policy date*) issued by the Life Insurance Corporation (Singapore).

I declare that I would not do anything to make the policy void.

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| <p>Signature of Assignor: (and company stamp, if applicable)</p> | <p>Signature of the Assignee (and company stamp, if applicable)</p> |
| <p>Name of the Assignor: NRIC of the Assignor: Date:</p> | <p>Name of the Assignee: NRIC of the Assignee: Date:</p> |
| <p>Signature of Witness (1) Name of the Witness: NRIC: of the Witness: Date:</p> | <p>Signature of Witness (2) Name of the Witness: NRIC: of the Witness: Date:</p> |



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NOTICE OF ASSIGNMENT

POLICY NUMBER: _____.

We give notice that by a deed of Assignment dated _____ (enclosed) the insurance policy has been assigned to _____ (name of the assignee).

Please acknowledge receipt of this notice and register the assignment in your records.

Signature of the Assignor
