

The Pacific Insurance Berhad (91603-K) 太平保險有限公司

40-01, Q sentral 2A Jalan stesen sentral 2, Kuala Lumpur Sentral, 50470 Kuala Lumpur, Malaysia.

(P.O. Box 12490 50780 Kuala Lumpur, Malaysia.) Tel: +603-2633 8999 Fax: +603-2633 8998 Website: www.pacificinsurance.com.my

ASSIGNMENT FORM

IMPORTANT NOTES:

- (1) Please note that pursuant to Paragraph 2(4)(a) of Schedule 10 of the Financial Services Act 2013, the policy owner has to assign the benefits to his nominee if his intention is for his nominee, other than his spouse, child or parent to receive the policy benefits beneficially and not as an executor.
- (2) This form requires to be stamped in accordance with the Stamp Duty Laws of Malaysia in which it is executed.
- (3) This form is furnished by The Pacific Insurance Bhd as a matter of courtesy. The Pacific Insurance Bhd accepts no responsibility for the validity of this assignment nor for its effects on the rights of the parties to it.
- (4) The Assignor must give notice to The Pacific Insurance Bhd of all assignments and revocation of the same.
- (5) The parties to an assignment should satisfy themselves (with advice from their lawyers, if necessary) that the form and provisions of the assignment are appropriate in creating the desired results. As it is not possible for The Pacific Insurance Bhd to draw up assignment forms for every requirement, this form is only intended to serve as a guide. Where this form is unsuitable, a separate assignment should be drawn up.

PRIVACY NOTICE: Please be informed that for the purpose of compliance to the Personal Data Protection Act 2010, The Pacific Insurance Bhd has put in place a Privacy Notice which explains The Pacific Insurance Bhd's firm commitment to protecting and safe-guarding the privacy of your personal data. Please visit our website www.pacificinsurance.com.my to view the details of the Privacy Notice.

Policy	Policy Number :												
This	Assignment	is	made	on	(hereinafter			Assignor") of	the		part		
from ar policy is declare obligati	nd at the time of ssued by The Pa es that a receipt ons under the a	the dea acific Ir signed bove P	ath of the Ansurance Book by the Asaersonal Ac	Assignor Bhd and t signee s ccident p	rs to the Assi only under the the Assignor shall fully disc policy in response	gnee the term is agre charge ect of w	ne right s and c eable to The Pao rhich the	ssignee") of the to receive any ponditions of the a preceive the sar cific Insurance E e receipt is given thands the day a	oolicy rabove ne. The hd fro	nonies Perso ne Ass m its li	due ar nal Acci ignor fu iabilities	ising ident rther and	
Sign	nature of Witnes	<u> </u>					Signa	ature of the Assig	nnor				
Name: NRIC:						Name: NRIC:							
Add	lress:						Addre	ess:					
Sigr Nan	nature of Witnes ne:	S					Signa Name	ature of the Assig	gnee				
NRI Add	C: lress:						NRIC Addre						
, 100							, .aai c	,					

Assignment Form Page 1