

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 Number : _____

This Assignment is made on _____ day of _____ 20____ between _____ (hereinafter called "the Assignor") of the one part AND _____ (hereinafter called "the Assignee") of the other part in which the Assignor hereby absolutely assigns and transfers to the Assignee the right to receive any policy monies due arising from and at the time of the death of the Assignor only under the terms and conditions of the above Personal Accident policy issued by The Pacific Insurance Bhd and the Assignor is agreeable to receive the same. The Assignor further declares that a receipt signed by the Assignee shall fully discharge The Pacific Insurance Bhd from its liabilities and obligations under the above Personal Accident policy in respect of which the receipt is given.

In witness whereof, the Assignor and the Assignee have hereunto set their hands the day and year stated above.

Signature of Witness
Name:
NRIC:
Address:

Signature of the Assignor
Name:
NRIC:
Address:

Signature of Witness
Name:
NRIC:
Address:

Signature of the Assignee
Name:
NRIC:
Address: