

<u>शादवंगमिल के पर्नेर जाय पहुष क्री</u>

ROYAL INSURANCE CORPORATION OF BHUTAN LTD.

HEAD OFFICE: THIMPHU

ASSIGNMENT FORM		
I the undersigned	+	he life Assured under the Policy of
, the undersigned		
Assurance Nodo hereby, for valuable consideration, Assign and		
Transfer absolutely to		
representatives, any and all rights, title and interest, claims, demands, and cause or cause of action of any kind		
whatsoever, which the undersigned policy holder/life assured has or may have against the Corporation		
including the moneys thereby secured and all the benefits attached to the policy		
Declared at		
Signature of Witness		• • • • • • • • • • • • • • • • • • • •
Name of witness		Legal Stamp Nu.10
CID#		
Address		Signature of Assured / Proposer
DECLARATION TO BE COMPLETED IN CASE THE ASSIGNOR CANNOT READ ENGLISH		
DECLARATION TO BE COMPLETED IN CASE THE ASSIGNOR CANNOT READ ENGLISH		
I hereby declare that the contents herein above have been translated and explained by me to		
(1)and		
(2)and I further declare that he/she /they understand(s) the		
meaning thereof.		
Signature of Declarant		
Name of Declarant		
CID#		
Address		
INSTRUCTIONS		
If either or both of the borrower(s) are illiterate or cannot read or write in English, a person who can write in and		

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read English must be required to complete the above declaration and attest the signature or thumb impression.