



شركة التأمين على الحياة (العالمية) (فرع دبي)
Life Insurance Corporation (International) B.S.C (c)

Registration No. 72 under UAE Federal Insurance Law No. 9 of 1984

**DISCHARGE FORM FOR SURVIVAL BENEFIT UNDER
CASH BACK AND CASH AND ADDED COVER**

Policy No: _____ On the life of Mr. / Ms. _____

D.O.C. _____ Plan and Term: _____ Sum Assured: US\$ _____

I, _____ the life assured do hereby acknowledge receipt from Life Insurance Corporation (International) BSC (c) the Sum of US\$ _____ in full satisfaction of all my claims and demands in respect of the following payment under the above mentioned policy in terms of the policy contract for which the policy is hereby delivered for Endorsement.

20% / 25% / 30% Sum Assured which fell due on _____ : US\$ _____

Less:

Unpaid Premium From _____ To _____ : US\$ _____

Other Deductions : _____ : US\$ _____

Total Deductions : _____ : US\$ _____

Net Amount Payable: US\$ _____

I hereby declare that I have not assigned the above Life Insurance (Intl) BSC (c) policy to anyone nor shall I serve on the company any notice of assignment or reassignment before payment of the survival benefit.

Dated at _____ on the _____ day of _____
(Place) (Date) (Month) (Year)

Witnessed By

Name: _____

Address: _____

Signature of the Life Assured _____

Name: _____

Address: _____

Telephone: _____

DRAFT/CHEQUE TO BE ISSUED IN (Tick One Only)

USD	AED	INR	Other Currency
_____	_____	_____	_____

Account Number, Name of Bank and Place _____

Note: This is an advance receipt and is valid only after issuing cheque / Demand draft by LIC Intl BSC (c)

Chief Agents

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