Bajaj Allianz General Insurance Company Limited

Bajaj Allianz House, Airport Road, Yerawada, Pune - 411006. Reg No.: 113. CIN: U66010PN2000PLC015329 E-mail: Bagichelp@bajajallianz.co.in | Website: www.bajajallianz.com

Allianz (11)
Caringly yours

Issuing Office:

Assignment Declaration

NOTE:

Product Name
Policy Number

- Parties to the assignment [Insured, assignee] should satisfy themselves before forwarding the policy document to Bajaj Allianz General Insurance Company Limited, for the registration of assignment.
- This form must be duly filled and signed by the Insured mentioned in the policy and the assignee.
- The assignment of a policy shall automatically cancel any nomination made in the policy, except where the policy is assigned to Bajaj Allianz General Insurance Company Limited, in which case the nominees' right shall always be subject to the Bajaj Allianz General Insurance Company Limited's interest in the policy.
- This form shall be accompanied by the original policy document in respect of which the assignment is made.
- This assignment shall not be effectual against Bajaj Allianz General Insurance Company Limited unless it is duly executed and signed and delivered to and is received by Bajaj Allianz General Insurance Company Limited under written acknowledgement by Bajaj Allianz General Insurance Company Limited.
- Insurance Company Limited.

 Full Assignment: Clause (1)(a),(b) are for full assignment of all/entire benefits/amounts under ______.

 Partial Assignment: Clause (2)(a),(b),(c) are for partial assignment of benefits/amounts under ______.

 Conditional Assignment: Clause (3), (3)(a),(b) are for Conditional assignment of benefits/amounts under ______.

 Depending upon what type of assignment the Insured is giving, it shall be the sole obligation of Insured to delete two inapplicable clauses from out of clauses (1), (2) and (3) as the case may be. If the Insured do not delete/strike off and properly counter sign the inapplicable clauses out of clauses (1), (2) and (3) below, then it shall be deemed that the assignment shall be full assignment of all/entire benefits/amounts under ______ without any conditions and no disputes or objections shall be entertained by Bajaj Allianz General Insurance Company Limited in this regard.
- The assignment shall be governed by provisions of section 38 of the Insurance Act 1938.

Policy holder's	Name				
Address					
Contact Details	S	Email Id:			
☐ 1. a. Id an alv — of ree m of as b. If	Ido hereby transfer, assign and convey, absolutely and unconditionally, in favour of the Assignee named below ["Assignee"]., all my/our rights and benefits under, I may be entitled to, only upon happening of incident/s leading to making claim [subject always only if the claim is admissible as per decision of Bajaj Allianz General Insurance Company Limited] as per Terms and Conditions of that is issued or will be issued by Bajaj Allianz General Insurance Company Limited in my favour, on the basis of the information furnished in this Declaration. I hereby further agree and authorize Bajaj Allianz General Insurance Company Limited to register this assignment in favour of Assignee and accordingly recognize below named Assignee as entitled to receive such rights, benefits as may be admissible and settled under the claim as per decision of Bajaj Allianz General Insurance Company Limited as per Terms and conditions of I also declare, agree and undertake that if no specified incident leading to claim happens as mentioned in then no claim can be made by Assignee against Bajaj Allianz General Insurance Company Limited and my this assignment become Null and Void. I further undertake and agree that this assignment is irrevocable and I shall not transfer, assign or otherwise convey my rights, benefits and duties under to any other person other than to Assignee.				
	Signature of Assignee	Signature of Assignor			
	OR				

□ 2. I do hereby transfer, assign and convey, unconditionally, in favour of the Assignee named below ["Assignee"], the following rights, benefits, and duties [subject always only if the claim is admissible as per decision of Bajaj Allianz General Insurance Company Limited] and this assignment is always subject to the amount settled, if any, by Bajaj Allianz General Insurance Company Limited:

Subject to assigned amount mentioned hereinabove in clause (2)(a) hereinabove, the balance benefits/rights I am entitled to, if claim settlement amount under ______ is more than the assigned amount mentioned hereinabove in clause (2)(a) hereinabove, then same shall be payable to me/to my nominees/Legal heirs, as the case may be.

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			ny assignment of balance rights, ben	efits and duties under	I Bajaj Allianz General Insurance Company Limited shall not Signature of Assignor	
	Signature of A	rissigni		OR	Signature of Assignor	
my/our rights and benefits under [subject always only if the claim is admissible as per decision of that is issued or will be issued be information furnished in this Declaration. I hereby further agree Assignment in favour of Assignee and accordingly recognize be and settled by Bajaj Allianz General Insurance Company Limited and as per Terms and conditions of happens, then no claim can be my this Assignment become Null and Void. The Assignment m of Bajaj Allianz General Insurance Company Limited under this a. The proceeds under the sh of the Assignee or transferee predeceasing the insured; or b. If the insured surviving the term of the policy, the Assignment				hall become payable to the Insured or the nominee or nominees in the event of either or		
	Signature of Assignee		Signature of Assignor			
4.	Nominee/s under _ subject to and subs	equent	and any of my to the rights of Assignee to receive an	king and obligations under this Declaration shall also bind all my Legal Heirs and ny nominee/s, if any, undershall get their rights only any claim amount in line with terms and conditions of this Assignment.		
5.	upon Bajaj Allianz G Insurance Company	eneral II	nsurance Company Limited's settleme	ent of the claim, shall b	ssigned] under, if admissible be a valid, sufficient and full discharge for Bajaj Allianz General spect to all rights and duties and liabilities of Insured.	
	e Details	1				
Address with Pin Code						
	t Number					
Relatio	nship with Insured					
Signature of Assignee						
Date ar	nd Place					
Witness	Details					
			Witness 1		Witness 2	
Name						
Address						
Contac	t Number					
Signature						
Date and Place						
Signatu	re of Assignor (Insu	red)				
Execute	d on: Date				Place	