

LIFE INSURANCE CORPORATION OF INDIA
.....DIVISIONAL OFFICE, BRANCH CODE.....

FORM OF NOTICE OF CHANGE OF SUCCESSIVE NOMINATION

Date:-

Re: Policy number:-.....

I/ We hereby give you notice that I/ We have now nominated ...1) _____ 2) _____
3) _____ as the persons to whom the moneys secured by the above policy shall be paid in the event of
my/ our death in lieu ofnamed in the text of the above policy/ endorsement dt.....
on the above policy as successive or alternative nominee.

Yours faithfully,

Signature of Life Assured/s
Address

LIFE INSURANCE CORPORATION OF INDIA
.....DIVISIONAL OFFICE, BRANCH CODE.....

FORM OF APPOINTMENT OF APPOINTEE FOR MINOR NOMINEE UNDER SUCCESSIVE NOMINATION

I/ We hereby appoint my/our (relationship) shri/ smt..... (name of
appointee) who has completed the age of 18 years and whose address is as the person to
receive the monies secured by the within policy on behalf of the nominee (name of minor
nominee) in the event of my/ our death during the minority of the said nominee.

Dated at thisday of20..

Signature of witness
Full name:-
Designation:-
Address:-

Signature of life assured/s

CONSENT OF APPOINTEE

I , the above named (name of appointee) do hereby endorse my consent to my
appointment as aforesaid.

Dated at thisdayof 20.....

Signature of witness
Full name:-
Designation:-
Address:-

Signature of Appointee