

Signature Change

.....
Previous Signature

.....
Present Signature

I hereby certify that the above signatures were placed before me by the person mentioned in page 1, section 1 residing at

.....
..... on this.....day of.....20.....

.....
Signature

.....
Date

*Certified by

*Need to be certified by a Manager/JP/Grama Sevaka

Policy Surrender/Relief Cancellation-Discharge

I (as mentioned in page 1, section 1), being the Proposer/Life Assured under the Life policy bearing (as mentioned in page 1, section 2) do hereby acknowledge receipt from Softlogic Life Insurance PLC, the sum of Rs.....(.....
..... only) under surrender/cancellation in full satisfaction and discharge of all my claims and demands whatsoever with respect to the above policy and accept the said payment in full and as final settlement of surrender /cancellation value of this policy.

Total Surrender/Cancellation Value :
Less
Total Loan Outstanding :
Net Amount Payable :

Payment Details

Bank :
Branch :
Account No. :

Stamp worth Rs.25/- if the amount is Rs.25,000/ or above

.....
Date

.....
Signature

Note 3:For Cancellations,"Risk Premium" (if any) applicable for the period of discharge date to actual settlement date will be deducted from the above value.
Note 4:For Surrenders, the total loan outstanding stated above will increase after accumulating for any additional interest charge, applicable for the period between the date of issue of the discharge certificate and the date of surrender of the policy.

Check List

Alterations

- a.)Name correction
Certified copy of NIC/Birth Certificate
- b.)NIC number correction
Certified copy of NIC
- c.)Age admission
Certified copy of NIC/Birth Certificate

Refunds

- a.)Policy surrender/Relief cancellation
Original policy document
Certified copy of NIC (if the age is not admitted)
Bonus certificates if any
- b.)Policy paid up
Certified copy of NIC/Birth Certificate (if the age is not admitted)

Other

- a.)Policy cancellations
Original policy document
- b.)Power of Attorney
Certified copy of Power of Attorney/
Power of Attorney