



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

**KINGSTAR INSURANCE AGENCIES LLC.**

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