

ASSIGNEE DETAILS	
NAME	
ADDRESS	
	City State
TELEPHONE NUMBERS (STD CODE)	Residence
	Office
	Mobile
Email Id	
Note : Your email id will be registered for "Go Green" and all future communications regarding your policy/ies will be sent to this email id. This may lead to discontinuance of physical statements.	
ASSIGNEE IDENTIFICATION DETAILS	Pan No. <input type="text"/>
*Incase of Company /Institution, valid KYC of Authorised person is required	
RELATIONSHIP TO THE POLICY OWNER	<input type="text"/>
GENDER	Male <input type="checkbox"/> Female <input type="checkbox"/> Date Of Birth <input type="text"/>
DECLARATION	
<ul style="list-style-type: none"> I hereby give my consent to IDBI Federal Life Insurance to contact me or send any communication related to my policy/ies on my mobile number/email ID. I hereby give my consent to IDBI Federal Life Insurance to send any communication related to my policy/ies on my Whats App Account. 	
SIGNATURE OF THE ASSIGNEE/ WITNESS	
EXECUTED ON	<input type="text"/> At <input type="text"/>
FOR OFFICE USE	
STAMP OF BRANCH	SIGNATURE OF OFFICIALS