



HNB ASSURANCE PLC
Level 03, Iceland Business Center, No. 30, Sri Uttarananda Mawatha,
Colombo 03.
Tel: 011 4 713 802 Help Line: 011 4 384 384
Fax :011 4 677 902 E-Mail :info@hnbassurance.com
Web: www.hnbassurance.com

Notice of Reassignment of Life Insurance Policy

To: HNB Assurance PLC
Level 03, Iceland Business Centre,
No. 30, Sri Uttarananda Mawatha,
Colombo 03.

I,, NIC/Passport No.of
..... (hereinafter called "the Assignor") give you
notice that by a reassignment dated the day of 20 made between
..... (hereinafter called "the Assignee") and myself the
Insurance Policy numbered was reassigned by the above
mentioned Assignee to me absolutely and I request you to give me a written acknowledgment of
the receipt of this notice.

I enclose a copy of the Reassignment form for your record.

Dated the day of20.....

.....
Signature of Assignor
Contact No. of Assignor:

Acknowledgment of Notice of Reassignment

HNB Assurance PLC hereby acknowledges the receipt of the Notice of Reassignment
dated, of the policy no and registered the
reassignment under reassignment number

In acknowledging the Notice of Reassignment, HNB Assurance PLC is not assuming any responsibility
for the validity or sufficiency of the Reassignment.

For and on behalf of HNB Assurance PLC

Signature and Name:

Designation: