

## DECLARATION

Policy No. \_\_\_\_\_ on the Life of Mr./Mrs. \_\_\_\_\_

I, \_\_\_\_\_ holding passport No. \_\_\_\_\_

husband / wife of Mrs. / Mr. \_\_\_\_\_ holding passport No. \_\_\_\_\_

hereby undertake the premium payment of AED \_\_\_\_\_ (monthly / quarterly / half-yearly / yearly) of the above mentioned policy. I am earning an average of AED \_\_\_\_\_ (monthly / Yearly) for the last 3 years from my occupation \_\_\_\_\_ address \_\_\_\_\_.

My Bank Account details are as follows:

Name	
Bank Name & Address	
Account Number	
IBAN Number	

I understand that neither I am the individual covered nor the participant in the above mentioned policy and understand that I have no rights in this policy.

I agree to provide National General Insurance Co. (PSC) with any further information (on request) in respect of income.

Date: \_\_\_\_\_

\_\_\_\_\_

Signature of the Life Insured

Contact No.:

\_\_\_\_\_

Signature of Husband / Wife

Contact No.: