

POSTAL LIFE INSURANCE

Haryana Circle

AMBALA-133001

MWPA Form

Adden	dum to Proposal:			
(*To be	completed when the policy i	s to be issued under Section 6	of Married Wome	n's Property Act, 1874.)
1) Is thi daughte		er the Married Women's Prope	erty Act, 1874 for th	ne benefit of your wife, son or
2) Full N	Name of Insured:			
3) Deta	ils of Beneficiary:			
S. No	Name	Relationship	Age	Share Percentage
4) Do w	ou want to annoint a Trustee.	for Policy issued under the Ma	arried Women's Pro	onerty Act 19742 Vec/No
4) DO y	ou want to appoint a mustee	Tol Policy issued under the ivid	arrieu women s Fro	operty Act, 1674: Tes/No
Trust Tv	/pe: Individual/Corporate			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Trust/T	rustee Name:			
Trustee	Date of Birth:			
	Relationship:			
Trustee	Address:			
Signatu	re (Insured):			
_				
Date: _				

Signature (Trustee): _	
Place:	
Date:	

Note: The policy is proposed under MWPA for the absolute benefit of beneficiaries aforesaid and in consequence the life assured will not be entitled to make an assignment or nomination under the policy and will not be entitled to draw any loan thereunder or surrender the same. The above mentioned trustee (if any) will receive policy monies and hold the same in trust for the said Beneficiary under the provision of the said Act. In case the said trustee declines to act or becomes incapable from acting under the law or cannot act as Trustee for any reason whatsoever, life assured shall have the authority to appoint a new Trustee.