IndiaFirstLife

Addendum to Proposal under MWP Act (To be filled in by Proposer)

Name of Life To Be Assured: FIRST LAST

Application Number:

To be used in the following case:

1) Policy to be affected under the Married Women's Property Act, 1874, for the benefit of One BENEFICIARY (wife, son or daughter)

2) Appointment of TWO OR MORE TRUSTEES JOINTLY OR SURVIVOR.

What is the object of this assurance? Is it to effect a policy under the Married Women's Property Act, 1874 for the benefit of your wife, son or daughter? If so, give particulars.

If the object is to effect a policy under the Married Women's Property Act, 1874, whom do you wish to appoint as Special Trustees?

If the object is to effect a policy under the Married Women's Property Act, 1874, whom do you wish to appoint as Special Trustees?

Witness :

Signature.....

Full Name.....

Occupation.....

Address.....

Witness :

Signature.....

Full Name.....

Occupation.....

Address.....

Witness :

Signature.....

Full Name.....

Occupation.....

Address.....

This Policy is proposed to be effected for the sole and absolute benefit of my

(Relationship, full name and age of the beneficiary)

Pursuant to the provisions of Section 6 of the Married Women's Property Act 1874 and I declare that the policy shall have the same incidents as are prescribed in the Section 6 of the said Act, as if that Section had been Incorporated in the policy and neither I nor my estate shall have any interest in the same.

I request the policy to be issued under the provision of the Married Women's Property Act, 1874, for the absolute benefit of the beneficiary aforesaid in the manner aforesaid And I hereby

appoint_____and_____

_____

(full names of Special Trustees)

Jointly or survivors or survivor of them to be the Special Trustees to receive the policy monies and hold the same in trust for the said beneficiary under the provisions of the said Act and in case any one of the said trustee dies or declines to act or becomes incapable to act or is disqualified from acting under the law or cannot act as trustee for any reason whatsoever I shall have power by a Deed to fill in the vacancy by appointing a new trustee or trustees in place of such trustee or trustees to receive the policy monies and to hold the same in trust for the said Beneficiary under the provisions of the said Act.

Provided that I shall have the right to revoke the appointment of any of the aforesaid Special Trustees or of both and appoint others in their stead. The consent of the trustees to act is endorsed below,

Date at _____on _____day of _____19

_____

Signature of Proposer

I agree to act as Special Trustee as aforesaid

_____

Signature of Trustee and his/her address

I agree to act as Special Trustee as aforesaid

_____

Signature of Trustee and his/her address

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