

To,

**Kamakhya Wealth Management (Insurance Section)**

Guwahati, Assam

Through,

Kamakhya Wealth Management

Sub : Declaration for settlement of claim amount under self-insurance scheme of Kamakhya Wealth Management (Insurance Section) in favour of Kamakhya Wealth Management for Share Account No/Customer ID \_\_\_\_\_ .

Dear Sir/Madam,

This is to inform that I \_\_\_\_\_ W/O, S/O, D/O \_\_\_\_\_ have availed a share from Kamakhya Wealth Management herein after referred to as MCO, and to secure the share amount, in the event of any unforeseen eventuality. I have opted to enroll under the self-insurance scheme of Kamakhya Wealth Management Insurance Section administered by MCO. I intend that in the event of any eventually with me, which gives rise to a claim I authorize Kamakhya Wealth Management Insurance Section to make claim payment to the extent of outstanding share balance amount to MCO. Balance of claim amount of capital left, if any, may be paid to my nominee/beneficiary as the case may be.

Kamakhya Wealth Management shall, in the event of any claim arising out of my membership under the self-insurance scheme administered by MCO, be discharged to the extent of amount paid to the MCO towards outstanding share balance amount for the share availed by me. It shall be my sole responsibility to bring to the notice of Kamakhya Wealth Management (Insurance Section), in the event I intend to make a change in our declaration as made herein above.

The content of this application has been explained to me by the representative of Kamakhya Wealth Management in the language understood by me and I have fully understood the content and support the same.

I understand and agree that the details/information provided by me in Customer Profile Form of Kamakhya Wealth Management shall form the basis between me and Kamakhya Wealth Management (Insurance Section). Further I agree that the such information/details provided by me in Customer Profile Form of Kamakhya Wealth Management will be considered by Kamakhya Wealth Management (Insurance section) in underwriting risk and issuance of insurance policy.

Sum assured : \_\_\_\_\_ .

Premium : \_\_\_\_\_ .

(To be filled by central ops only)

(To be filled in case the Nominee declared under the Customer Profile Form is minor)

I request Kamakhya Wealth Management (Finance Section) to consider the following person as Appointee :

Appointee Name : \_\_\_\_\_

Thanking You

*Yours Truly,*

\_\_\_\_\_  
**(Customer Signature)**

Customer Name & Address

\_\_\_\_\_  
**(Witness Signature)**

Witness Name & Address

**VERNACULAR DECLARATION**

I, \_\_\_\_\_ (name of the Representative of Master Policyholder) do hereby declare that the contents of this application have been explained to the customer named herein above in the language understood by him/her and he/she has fully understood the contents and purpose of the same. He has affixed his signature, in the presence of the witness, after being fully satisfied with the authorization.

Signature and Stamp of the Representative of MCO