

**Declaration for submission of Payout Request on behalf of the customer**

I hereby declare that I have submitted the documents for \_\_\_\_\_ Type of payout \_\_\_\_\_ payout request under Policy No. \_\_\_\_\_ Policy No. \_\_\_\_\_ at \_\_\_\_\_ Branch Name \_\_\_\_\_ branch. These documents pertain to \_\_\_\_\_ Policyholder name(s) \_\_\_\_\_ who is/are unable to visit the branch due to \_\_\_\_\_ Reason \_\_\_\_\_.

**I also confirm that I have verified these documents in original (OSV).**

**Name of the Declarant:** \_\_\_\_\_

Signature of the Declarant

**Place:** \_\_\_\_\_

**Employee Code:** \_\_\_\_\_

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

**Agency Code:** \_\_\_\_\_

**Declaration by Attending Branch Operations Officer**

I confirm that I have collected \_\_\_\_\_ Type of payout \_\_\_\_\_ request and customer's documents from \_\_\_\_\_ FC/Employee Name \_\_\_\_\_.

I have collected his/her identity card copy along with the service request.

I also confirm that I have validated the details by checking the agency code/credentials.

**Name of the branch officer:** \_\_\_\_\_

Signature of the branch officer

**Employee Code:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Branch stamp