

**ABSOLUTE ASSIGNMENT  
(DESIGNATION OF  
MULTIPLE OWNERS  
FOR LIFE INSURANCE)**

Office Use Only  
Doc Code: 43  
WQ: 781

Policy Number \_\_\_\_\_ Insured \_\_\_\_\_ Owner/Assignor \_\_\_\_\_

New Owners/Assignees

|                               |                          |                            |
|-------------------------------|--------------------------|----------------------------|
|                               |                          |                            |
|                               |                          |                            |
|                               |                          |                            |
| (Print Name and Relationship) | (Social Security Number) | (Address and Phone Number) |

**IRS Form W-9 must be furnished separately by each Assignee.**

- A. For value received, the assignor whose name appears above, assigns, transfers and sets over to the assignees, their successors and assigns, the policy identified above. The policy includes all riders attached to the policy. All rights and privileges in the policy are assigned. This assignment is subject to all terms of the policy and to all superior liens the insurance company has against the policy. The assignor agrees to the provisions of this assignment. The assignees agree to the provisions of this assignment by accepting this form.
- B. The assignees shall hold the policy: (Check one only. If neither is checked, the policy shall be held as joint tenants with right of survivorship.)**
- As joint tenants with right of survivorship. The exercise of ownership rights shall require the consent of all living assignees. The interest of any deceased assignee shall pass to the surviving assignees. If no assignee survives, the policy shall belong to the estate of the last surviving assignee.**
- As tenants in common. The exercise of ownership rights shall require the consent of all living assignees and the successors of any deceased assignees.**
- C. The following specific rights are transferred and assigned by the assignor to the assignees by this assignment:
1. The right to collect maturity proceeds of the policy.
  2. The right to surrender the policy at any time for its surrender value as provided by the policy or allowed by the insurance company.
  3. The right to obtain loans from either the insurance company or from other persons, and the right to pledge or assign the policy as security for any loan.
  4. The right to receive all policy dividends and to exercise all dividend options in the policy. Dividends will be credited under the dividend option in effect when the policy was assigned unless the assignees request another option in writing.
  5. The right to exercise all nonforfeiture options provided by the policy or allowed by the insurance company.
  6. The right to change the beneficiary as provided by the policy.
  7. The right to select a settlement option provided by the policy or allowed by the insurance company.
  8. All rights not specified above.
- D. The assignor declares that:
1. He or she is the sole/joint and absolute owner of this policy.
  2. No bankruptcy or insolvency proceedings are pending against him or her.
  3. This policy is not subject to any assignment for the benefit of creditors.
- E. Have you received or do you expect to receive any compensation in connection with this request to change ownership?
- Yes  No
1. We have the right to decline this request.

Signed on \_\_\_\_\_ at \_\_\_\_\_  
Date City and State

Signature of Present Owner/Assignor \_\_\_\_\_ Date of Birth \_\_\_\_\_

Signature of Witness \_\_\_\_\_

Signature of Irrevocable Beneficiary \_\_\_\_\_

Signature of Insured (Required in NE & TN if new owner is entity) \_\_\_\_\_

Signature of New Owner/Assignee \_\_\_\_\_ Date of Birth \_\_\_\_\_

Signature of New Owner/Assignee \_\_\_\_\_ Date of Birth \_\_\_\_\_

Signature of New Owner/Assignee \_\_\_\_\_ Date of Birth \_\_\_\_\_

Signature of New Owner/Assignee \_\_\_\_\_ Date of Birth \_\_\_\_\_

**FOR HOME OFFICE USE ONLY**

Filed \_\_\_\_\_, subject to the terms of the policy.

By \_\_\_\_\_