TATA AIA LIFE
making Good happen

UMRN | Office use only | DDMMYYYY

Tick (✓)
CREATE ☑
MODIFY ☒
CANCEL ☒

Sponsor Bank Code: CITI000PIGW

Utility Code: CITI00505000028043

I/We hereby authorize: Tata AIA Life Insurance Co. Ltd.

to debit (tick ✓): SB/CA/CC/SB-NRE/SB-NRO/Other

Bank a/c number

with Bank: Name of Bank

IFSC

or MICR

an amount in words: 120% of the Annual premium

₹

FREQUENCY ☒ Mthly ☒ Qtly ☒ H-Yrly ☒ Yrly ☑ As & when presented

DEBIT TYPE ☒ Fixed Amount ☑ Maximum Amount

Reference 1: Policy Number

Phone No.

Reference 2: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX

Email ID

I agree for the debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of the bank.

PERIOD:
From DDMMYYYY
To 31122099
Or ☒ Until Cancelled

Signature of Primary Account holder

Signature of Joint account holder in case it is not an either or survivor account

Signature of Account holder

1. Name as in bank records

2. Name as in bank records

3. Name as in bank records

This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing the User entity/Corporate to debit my account, based on the instructions as agreed and signed by me. I have understood that I am authorized to cancel/amend this mandate by appropriately communicating the cancellation / amendment request to the User Entity / corporate or the bank where I have authorized the debit.

FORM FOR AUTO DEBIT OF PREMIUMS THROUGH NACH

Policy Number

Instructions

1. Please fill the form in block letters & overwriting / whitener usage is not allowed on the form
2. Please provide a Cancelled Cheque with Pre-printed Account Holder Name & Bank Account Number. If Account Details are not Pre-printed on the Cancelled Cheque, provide Bank Account Statement / Pass Book Copy containing printed Bank account details along with Cancelled Cheque.
3. Relationship of Account holder with Policyholder : Payor/ Self (In case of other than payor or self-submit necessary KYC documents)
4. In case of a Current Account, please affix proprietor's stamp with the account holder's signature and mention proprietorship firm's name in the account holder's name column.
5. Thumb Impression is not allowed in the Account holder's signature column. NACH is not offered to Illiterate account holders.
6. The mandate instruction can be given upto 120% of annual premium to accommodate any changes in premium due to taxes, levies or any changes in the premium as per the products specifications.
7. NAV would be allocated on the basis of the debit date.
8. As per Rule 114 B of the Income Tax Rules,1962, it is mandatory for every person to quote his Permanent Account Number (PAN) in all documents pertaining to payment of life insurance premium to an insurer aggregating to more than Rs.50,000/- in a financial year. In case your income is below the taxable limit and you do not have a PAN, please submit Form No. 60.
9. Please submit this form at your nearest Tata AIA Life Branch or Courier / Post it to the following address: Tata AIA Life Insurance Company Ltd. : B- Wing, 9th Floor, I-Think Techno Campus, Behind TCS, Pokhran Road No.2, Close to Eastern Express Highway, Thane (West), Pin Code - 400 607.

Terms and Conditions/ Declaration

I understand and agree that the submission of this form does not mean that the request will be processed. I agree that it would take approximately 30 working days to register the request for NACH with the service provider and the bank, but it would also depend on the Bank and premiums due (if any), during this period will need to be paid by cash/cheque/online. I undertake to keep sufficient funds in the account mentioned in the mandate as on the date of execution of debit. I agree that in the event of the Bank being unable to debit my account for want of sufficient funds or for any other reason, Tata AIA Life shall be entitled to deal with my policy in the manner as described in the policy terms and conditions.I understand and accept that the transaction will be effected on the policy on the due date (provided the day is working day). If the transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I shall not hold Tata AIA Life responsible. I authorize the above mentioned bank to debit my bank account if my NACH mandate is active and until I give a written request for cancellation of NACH. I hereby authorize Tata AIA Life, to re-debit my account with the mentioned bank to recover the premium payable. I understand and agree that premium amount to be debited from my account may vary due to taxes and other statutory levies as may be applicable from time to time. I understand that by only paying the outstanding premiums along with interest the policy will not be revived. I undertake to comply with all the formalities related to revival as may be prescribed by the Company.