

Staple self attested recent colour photograph of account holder

MANDATE FORM FOR PAYMENT OF PREMIUMS THROUGH ECS / DIRECT DEBIT

TATA AIA
L I F E

PLEASE READ THE BELOW INSTRUCTIONS CAREFULLY BEFORE FILLING THIS FORM:

- Please print this form on a Single sheet (front and back) and DO NOT USE PHOTOCOPY / XEROX of this form.
- Please fill this form in BLUE INK ONLY. DO NOT OVERWRITE OR USE WHITENER on this form unless absolutely necessary.
- EVERY OVERWRITING & WHITENER USAGE on this form should be COUNTER SIGNED by the BANK ACCOUNT HOLDER.

For Office Use Only :

SR Num –

SR Num –

To,

The Bank Branch Manager,

I/We hereby unconditionally and irrevocably authorize you to debit my/ our bank account, for making premium payments to Tata AIA Life Insurance Company Ltd. ("Tata AIA Life") through ECS/Direct Debit as per the details given below:

BANK ACCOUNT DETAILS

Bank Name: _____ Branch: _____

Name of the First/Primary Account Holder (Exactly as per cheque/Bank passbook): _____

Name of the Second/Joint Account Holder(s): _____

CBS Account Number (Exactly as per cheque/Bank passbook):

9 Digit MICR Code:

11 Character IFS Code:

Account Type: SAVING CURRENT (Only a Current Account in Individual name is acceptable)

NRO NRE (For a NRE a/c payout, cheque with NRE letter will be processed)

RELATIONSHIP OF THE ACCOUNT HOLDER TO THE INSURED OF THE POLICY (As per company rules, Third Party payment will not be acceptable)

SELF PARENTS SPOUSE CHILDREN

If the Account Holder is different from the existing Payor in the policy, please provide Address Proof, recent photograph, PAN Card copy & Income proof of the Account Holder.

PAN of Payor (Account Holder):

Date of Birth of Payor (Account Holder):

YES, I HAVE ATTACHED AN ORIGINAL BLANK PERSONALIZED CANCELLED CHEQUE. (In case a non-personalized cancelled cheque is provided, please ensure a clear photocopy of Bank Passbook/Bank Statement reflecting a/c number & a/c holder's name is given along with the cancelled cheque)

Signature of First/Primary Account Holder (exactly as per Bank records)	Signature of 1st Joint Account Holder (exactly as per Bank records)	Signature of 2nd Joint Account Holder (exactly as per Bank records)

POLICY DETAILS (All the details are mandatory)

Policy Number	Frequency (Monthly/Quarterly/ Half Yearly / Yearly)	First Due Date of Debit (DD/MM/YYYY)	Last Due Date of Debit* (DD/MM/YYYY)	Maximum Amount Deductible from the above Bank Account

*The Last Due Date of Debit will be the last date of premium payment as per the policy contract.

YES, I WANT TO USE THE ABOVE BANK ACCOUNT DETAILS FOR DIRECT CREDIT OF ALL THE POLICY RELATED PAYOUTS. I understand that the Direct Credit can only be done if, the Account Holder and Policyholder is one and the same person and the Account is not a NRE Account. I may choose to receive the credit in a different account at the payout stage; however, if no such change request is received, Tata AIA Life may use these bank account details.

POLICYHOLDER'S NAME _____ **POLICYHOLDER'S SIGN** _____ **DATE:** _____
(As on policy application) (As on policy application)

IN CASE THE POLICYHOLDER IS AFFIXING A THUMB IMPRESSION OR IS SIGNING IN VERNACULAR:

The thumb impression or signature of the Policyholder should be attested by a person of standing whose identity can easily be established and this declaration should be made by him/her.

I _____ (name) holding _____ (Identity Card type) _____ (Identity Card no.) hereby declare that I have explained the contents of this form to the Policyholder in _____ language and that I have read out to the Policyholder the answers to the questions dictated by the Policyholder. The information/answers filled in this form are exact replication of the information/answers provided to me by the Policyholder and that the Policyholder has affixed his/her signature/thumb impression on this form after fully understanding the contents thereof.

Signature of Witness: _____ Signature/ Thumb Impression of Policyholder: _____

11 Character IFS Code

IFS CODE ABCD0000123

NEW ACCOUNT

DATE DD MM YYYY

PAY _____

OR BEARER / या धारक को

RUPEES / रुपये _____

अवधि करे

[Empty box for duration]

CBS Account Number

A/C NO. 123 4567 0000 8901

CANCELLED

ABCD WXYZ

Account Holder's Name

VOID

Please Sign Above

9 Digit MICR Code

000210000 242400 29

DECLARATION

- I hereby express my unconditional consent to debit the above mentioned account for premiums of Tata AIA Life Policy/ies.
- I/We declare that the particulars given above are correct and complete in all respect.
- I/We authorize the representative of the vendor of Tata AIA Life carrying this ECS/Direct Debit mandate form to get it verified and executed.
- I/We unconditionally and irrevocably authorize the bank to debit my account for charges towards mandate verification and transactions bounced as applicable.
- I/We understand and accept that the transaction will be effected on the due date or the next working day of the bank. If the transaction is delayed or not effected at all for incomplete or incorrect information or due to (a) non-availability/insufficient funds in the said bank account, (b) incomplete, inaccurate, invalid or delayed submission of details by Policyholder,(c) encumbrance or charge on account and (d) events beyond the control of the Company. I will make alternative arrangements for payments of the said premium contribution and will not hold Tata AIA Life or its authorized service provider responsible for the same.
- I agree to any increase in premium deductions due to change in government regulations/service tax rates/scheduled increase as per product features or change in frequency of premium payment. I also agree and accept that no fresh authorization would be required and taken in such a situation. In the event of being unable to debit my account or any reason, Tata AIA Life shall be entitled to deal with my policy in the manner prescribed under policy provisions, unless the payment is received by any alternate mode on or before the specified date.
- In the event if my account has been debited with incorrect premium or if there is any dissatisfaction with the ECS/Direct Debit procedure of Tata AIA Life, Bank or any service provider the first recourse shall be to approach Tata AIA Life for rectification or resolution.
- I/we undertake to inform Tata AIA Life for any changes in my / our bank account.
- I understand that no premium notice/reminder or premium receipt will be sent for premiums paid through ECS and Direct Debit mode.
- I/We agree and understand that for Unit Linked policies, the NAV for the first extraction through ECS and Direct Debit will be the next working day after ECS & Direct Debit registration or the due date, whichever is later.
- I/We agree that it would take approximately 30 working days to register for my request for ECS & Direct Debit with the service provider and my bank and premiums due (if any), during this period will need to be paid by cash/cheque/online. In case the due premiums are not paid, Tata AIA Life will debit the same after the form is registered for ECS & Direct Debit, provided the policy is Inforce on that date.
- I/We have read the Terms and Conditions written below and agree to the same.

CERTIFICATION BY ACCOUNT HOLDER'S BANK

We certify that the bank account details & account holder's signature(s) furnished above are correct as per our records & we have noted the instructions in our system & records.

[Empty box for BANK STAMP]

BANK STAMP

DATE

DD MM YYYY

[Empty box for AUTHORISED SIGNATORY (WITH EMPLOYEE ID)]

AUTHORISED SIGNATORY (WITH EMPLOYEE ID)

TERMS AND CONDITIONS

- Frequency mentioned in this mandate should be the policy premium payment frequency. In case the frequency mentioned is different please submit separate request for change in frequency of premium payment. Policyholder may discontinue the premium payment through ECS/Direct Debit mode with prior written intimation. However, such intimation should reach Tata AIA Life, at least 15 days prior to the due date of ECS/Direct Debit. Policyholder agrees to remain liable for all the instructions and transactions that have been submitted or processed prior to such intimation reaches Tata AIA Life. It is possible that due to some technical or other reasons, the premium may not be debited on the due date and may be delayed by a few days. Kindly ensure that sufficient fund is maintained in the respective bank account at least 7 days before and after the due date to avoid dishonors. If any bank orders are issued by RBI to the bank from where the premium is to be debited, or the bank is not participating in clearing operations due to any reason, ECS Demand shall not be raised by Tata AIA Life and the premium for that duration of non-participation is to be paid by the policyholder to Tata AIA Life directly or provide a fresh ECS Form along with the mandatory documents with different bank account details to start the debit.
- The ECS/ Direct Debit shall be discontinued in the event of receipt of information of Death of the Life Insured or Maturity date or surrender or request for cancellation of the ECS / Direct Debit service.
- Tata AIA Life reserves the right to withdraw the said facility without assigning any reason whatsoever, but with prior intimation.
- The policyholder agrees that the facilities will be available to him/ her, subject to and up on receipt of confirmation by Tata AIA Life from the Policyholder's Bank of the details furnished by him/ her in this application. Policyholder expressly understands and agrees that if payments/ instructions, in case of a premium payment mode, are not received/ honoured, Tata AIA Life reserves the right to automatically cancel/ withdraw the facilities forthwith without notice. Policyholder expressly understands and agrees that Tata AIA Life and/ or the Service disclaims all warranties of any kind, whether expressed or implied, including without limitation, any representation or warranty regarding the use of the result of the facilities in terms of its correctness, accuracy, reliability, usefulness, completeness, continuity, uninterrupted access, timeliness or otherwise. Policyholder expressly understands and agrees that he/ she assumes total responsibility and risk for his/ her access and use of the facilities. Policyholder expressly understands and unconditionally agrees that he/ she will not hold the Company and/ or the Service liable for any direct, indirect, punitive, incidental, special or consequential damages whatsoever, including but not limited to damages or losses resulting from (a) the use or performance or inability to use or nonperformance of the facilities; (b) the provision of failure to provide the facilities; (c) the unauthorized access to or alteration of the transmission or data; (d) such transactions that are carried out on the Policyholder's instructions in good faith; (e) any loss or damage incurred or suffered by the Policyholder due to any defect, error, failure or interruption in the provision of the facilities; or (f) any other matter related to the facilities.
- Policyholder agrees that Tata AIA Life may, from time to time, make alterations, additions or deletions to these terms and conditions and that these shall be binding upon Policyholder and take effect from such date as may be intimated by Tata AIA Life and/or the service. The Policyholder further agrees that he/ she shall be deemed to have agreed, accepted and be bound by such altered terms and conditions.
- Service tax is applicable as per governing laws and the same shall be borne by the policyholder. Tata AIA Life reserves the right to recover from the policyholder, any levies and duties (including service tax), as imposed by the government from time to time.
- In case of any contradiction in this ECS/Direct Debit form and the policy contract, the provision under Policy contract shall prevail.
- Risk shall be assumed only after the premium amount is received by Tata AIA Life Insurance Company Limited.

Please submit this form at your nearest Tata AIA Life branch OR Mail it to the below mentioned 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.

Tata AIA Life Insurance Company Ltd. (IRDA of India Regn. No. 110 • CIN: U66010MH2000PLC128403).

Registered & Corporate Office: 14th Floor, Tower A, Peninsula Business Park, Senapati Bapat Marg, Lower Parel, Mumbai - 400013

For more Information, contact your advisor or call on our Helpline No's **1-800-267-9966** (toll free) or at **1-860-266-9966** (local charges apply) or SMS "SERVICE" to **58888** or e-mail us at **customercare@tataaia.com** OR visit our website **www.tataaia.com**.