

POLICY SERVICING PAYOUT REQUEST FORM

IN LINKED POLICY, THE INVESTMENT RISK IN INVESTMENT PORTFOLIO IS BORNE BY THE POLICYHOLDER

Policy Number: PAN*: (*Enclose copy of PAN card)

Name of Policyholder / Assignee*:

* Assignee name applicable wherever policy is assigned.

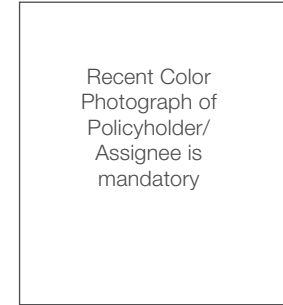
Landline / Mobile No. Email:

EIA No: Correspondence Address:

RESIDENCE FOR TAX PURPOSES IN JURISDICTION(S) OUTSIDE INDIA: Yes No

(If 'YES' then mandatorily fill the FATCA & CRS - Self certification form)

a. My residential status is NRI since _____ b. My current country of residence is _____



1. SURRENDER (Policyholder is required to submit and sign in person at the branch. Please carry original documents for verification)

Reason for Surrender

UNIT LINKED PRODUCT

Surrender Value as on request date:

Note: Please read the instructions before signing the form.

- The actual surrender value may differ from that mentioned above as the surrender value depends on NAV as on the date the policy is surrendered.
- The Surrender Value payable = (The number of units in the Regular / Single Premium Account multiplied by the applicable NAV of that fund, reduced by the surrender charges as applicable) + (The number of units in the Top-up Account, if any, multiplied by the applicable NAV of that fund, reduced by the surrender charges if any).

Branch Code:	<input type="text"/>
Branch name:	<input type="text"/>
Request Time:	<input type="text"/>
	Before 3 PM/ After 3 PM
Request Date:	<input type="text"/>
BOE Name:	<input type="text"/>
BOE Sign:	<input type="text"/>

NON UNIT LINKED PRODUCT

I agree to accept the surrender value amount of _____*

*Please note that any further automatic premium loan /Policy loan and interest applied subsequent to the above date will be deducted from the disbursement amount. The surrender amount paid out can be lesser than the amount mentioned above if there is outstanding loan amount on the policy

Documents Required (Unit linked & Traditional Product) : Original Policy Document Photo Identity Proof + Address Proof

2. PARTIAL WITHDRAWAL (Policyholder is required to submit and sign in person at the branch. Please carry original documents for verification)

Reason for Partial Withdrawal

FUND NAME	Partial Withdrawal UNITS

Documents Required: Self attested copy of Policy Information Page Photo Identity Proof + Address Proof

Note: Please read the instructions before signing the form.

- The actual partial withdrawal value may differ from that mentioned above as the partial withdrawal value depends on NAV as on the date the request is received.
- Partial Withdrawal will first be affected from the Top-up Account and the balance (if any) will be affected from the Regular / Single Premium Account subject to lock -in period mentioned in your policy document.
- Partial Withdrawal will be allowed only if the insured has attained the age of 18 years or above and subject to other policy provisions.
- The applicable withdrawal charge, after the Partial Withdrawal, would be deducted from the balance Fund Value.
- The Net Amount payable = (The number of units to be withdrawn from the Regular / Single Premium Account multiplied by the applicable NAV of that fund, reduced by partial withdrawal charges if any on gross partial withdrawal units of regular premium account) + (The number of units to be withdrawn from the Top-up Account, if any, multiplied by the applicable NAV of that fund, reduced by partial withdrawal charges if any on gross partial withdrawal units of top up account.)

* : List of acceptable ID Proof - PAN, Aadhar card and Passport.

As per IRDA regulation the NAV in respect of allocation and redemption of units for requests received on or before 3.00 pm (Indian Standard Time) by the company the closing NAV of the same working day will be applicable. If the request is received on Saturday, Sunday, Public Holiday or after 3.00 pm, NAV of the next day will be applicable.

