

**STOP PAYMENT / CHEQUE CANCELLATION REQUEST FORM**

Policy Number:

Policy Owner:

Contact Number Updation:  Fresh Cheque to be dispatched to \_\_\_\_\_ branch

Request for:  Cheque Cancellation  Stop Payment

Cheque Number:  Cheque Amount:  Cheque Date:

**Reason for Cheque Cancellation / Stop payment**

- Cheque lost; Fresh cheque to be issued.
- Fund transfer to be processed to policy number
- Name correction required. (Supporting documents to be submitted)

Name required:

Women who wish to change their name/surname post marriage are requested to forward a copy of the Marriage Certificate. For all other requests with significant name change, a copy of the gazette notification is required. Certified true copy(ies) of the supporting document should also be enclosed. Address proof and Photo ID proof with DOB -Self attested and attested by BSLI authorized signatory are also required.

- Wrong account number printed on cheque
- Cheque validity expired
- Policy to be reinstated
- Amount to be transferred to account (Preprinted cheque / passbook copy required)
- Any other reason \_\_\_\_\_

Date:

I hereby understand and consent to receive a call by Birla Sun Life Insurance Company Limited with regards to this transaction request made by me

Signature of policy owner:

BSLI staff's name and signature: \_\_\_\_\_  
 \_\_\_\_\_ Signature

Enclosure: - \_\_\_\_\_ Stamp / Seal of the branch

- Original cheque for cancellation  Valid photo ID proof
- Preprinted cheque / Preprinted passbook copy
- Any other documents \_\_\_\_\_

Please provide bank details for Direct Transfer into Account

Bank Name:

Bank Address:

Bank Account Holder's Name:

Bank Account Number:

11 Digit IFSC Code:  (You can get this code from your bank)

**Note:** Birla Sun Life Insurance will not be responsible in case of non credit to your account or if transaction is delayed or not effected at all for reasons of incomplete/incorrect information provided or rejected by your bank. In case of requisite information for direct credit is not received or transaction rejected by bank the payout will be made vide cheque.

**Acknowledgement slip**

Received a request for \_\_\_\_\_ against policy number

On \_\_\_/\_\_\_/\_\_\_ at \_\_\_\_\_ am/pm.

BSLI staff's name and signature: \_\_\_\_\_

Inward Reg. Sr. No.: \_\_\_\_\_ Stamp/Seal of the branch

**Birla Sun Life Insurance Company Limited**

Regn. No.: 109, Regd. Office: One Indiabulls Centre, Tower 1, 16th Floor, Jupiter Mill Compound, 841, Senapati Bapat Marg, Elphinstone Road Mumbai - 400013. Contact us: 1-800-270-7000 (Toll Free).  
 www.birlasunlife.com Insurance is the subject matter of the solicitation.

Note: Please produce this acknowledgement slip for any communication with regard to this request in future.