

Application for Nomination

Date- _____

Name of Policy Owner: _____ Policy No:

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Client ID: _____

Contact No. (Off/Res) _____ Mobile _____ email ID: _____ @ _____

Please tick the appropriate option

- Appointment of Fresh Nominee
- Appointment of Additional Nominee
- Change of existing nominee
- Cancellation of Nominee/s

Sir/Madam,

I _____ hereby nominate /cancel my nomination of Mr./Mrs./Ms _____ whose date of birth is _____ (DD/MM/YYYY) residing at _____ and who is my _____ (relation, if any) to whom all the moneys secured under the above mentioned policy shall be paid in the event of my death.

Appointee Details: mandatory, if nominee is a minor

The nominee being a Minor, I hereby appoint Mr./Mrs./Ms. _____ whose date of birth is _____ (DD/MM/YYYY) residing at _____ as the appointee to receive the moneys secured by the policy during the minority of the nominee executed at _____ the _____ day of _____, 20____. In consent of the above appointment I sign hereunder.

Signature of the Appointee

Signature of the Policy Owner

Name & Signature of the Branch Official
Received Time: _____ Date: _____

Branch Code: _____