

PARTIAL WITHDRAWAL FORM

INSTRUCTIONS: 1. The policyholder must sign any cancellation/alteration. 2 Surrender or withdrawal will be done by liquidating the required number of units of the Fund at the prevailing Unit Price. 3. In case of complete application received by the Branch / Head Office of the insurer up to 3 p.m. on a working day, the same day's closing NAV will be applicable. If application received after 3 p.m., units will be redeemed at the next working day's unit price. 4. This application will not be effective until it is officially accepted by Kotak Mahindra Old Mutual Life Insurance Ltd. 5. Please refer to the policy contract for terms & conditions regarding Partial Withdrawal/Surrender. 6. Please note that in case any of your premium cheque is yet to be cleared, surrender proceeds shall be processed but be paid out only after clearance of premium cheque. 7. Account no. is MANDATORY for all type of payments. Request you to submit the original cancelled cheque. 8. NAV will be paid for the date on which the complete surrender request requirement is received. 9. Please note that for full surrender of policy, the policy document/certificate of life insurance cover must be returned together with the application. 10. If cheque is not personalised please provide copy of latest bank statement/passbook 11. This form can be sent to "The Policy Servicing Department, Kotak Mahindra Old Mutual Life Insurance Ltd., Kotak Tower, 7th Floor, Building No.21, Infinity Park, Off Western Express Highway, Goregaon Mulund link Road, Malad (E), Mumbai- 400097.

1. PARTICULARS OF THE POLICYHOLDER

a) Policy Number MWP Case Yes No

b) Full Name : Title Surname First Name Middle Name

c) Contact No : STD Mobile

d) Address:

City: State : Pin : MA ND AT OR Y

Email Address

Do your bit for green world & Switch to e-communication. Kindly mark if you would like to receive your communication through electronic mode.

2. DECLARATION BY THE POLICYHOLDER

I wish to withdraw the amount indicated below from units credited to my policy. I understand and agree to all information and terms and conditions given above and in my policy contract.

Place Signature of the Policy holder or Guardian (if life insured is minor) or Assignee (if policy is Assigned)

Date

3. DETAILS REGARDING PARTIAL WITHDRAWAL / TOP UP SURRENDER

Name of the Plan

Partial Withdrawal Yes No Top up Surrender Full Part

Withdrawal Amount Rs. (The minimum partial withdrawal amount is Rs.10,000.)

Withdrawal Amount in words

For **Kotak Safe Investment Plan II** **Kotak Flexi Plan** **Kotak Platinum Advantage Plan-Shield Account**

Kotak Guaranteed Growth Kotak Guaranteed Balanced Kotak Dynamic Bond

Kotak Dynamic Floating Rate Kotak Dynamic Gilt Kotak Dynamic Money Market

Kotak Frontline equity Kotak Guarantee Fund Kotak Dynamic Four Fund II

For **Kotak Easy Growth Plan** **Kotak Platinum Advantage Plan-Dynamic Account** **Kotak Headstart Plans**

Kotak Smart Advantage¹ **Kotak Long Life Plan** **Top-up Premium**

Opportunities Fund Kotak Aggressive Growth Kotak Dynamic Growth

Kotak Dynamic Balanced Kotak Dynamic Floor² Kotak Dynamic Bond

Kotak Dynamic Gilt Kotak Dynamic Floating Rate Kotak Dynamic Money Market

For **Kotak Privileged Assurance Plan** Kotak Classic Opportunities Fund

Kotak Advantage Multiplier II Kotak Advantage Plus II

¹Kotak Smart Advantage has only 3 fund options available – Dynamic Bond Fund, Dynamic Floor Fund and Opportunities Fund.

²Not available with Kotak Easy Growth Plans

| Plan name | Part surrender in multiples of |
|--------------------------------------|--------------------------------|
| Kotak Safe Investment Plan | 10000 |
| Kotak Safe Investment Plan II | 1000 |
| Kotak Flexi Plan | 10000 |
| Kotak Flexi Plan II | 1000 |
| Kotak Easy Growth Plan (1.02 times) | 10000 |
| Kotak Easy Growth Plan (1.25 times) | 10000 |
| Kotak Easy Growth Plan (5 times) | 10000 |
| Head start Assure wealth Single life | 1000 |

| Plan name | Part surrender in multiples of |
|---------------------------------------|--------------------------------|
| Head start Assure wealth Joint life | 1000 |
| Head start Future protect Single life | 1000 |
| Head start Future protect Joint life | 1000 |
| Long life secure plus | 1000 |
| Long life wealth plus | 1000 |
| Platinum advantage plan | 1000 |
| Smart Advantage Plan | 1000 |
| Kotak Platinum Advantage Plus | 1000 |

4. SETTLEMENT OPTIONS (Pay directly to my bank account mentioned here, please attach an Original cancelled cheque for any payment type)

Payment remittance type Cheque Direct credit

Name of the Policy holder as per Bank record

Bank Name IFSC Code

& Address MICR Code

Account Type Savings NRE* Others (if any)

Account No:

*Credit to NRE account can be given only if premium are received from NRE account

6. For Office only (Affix date and time stamp here)

5. DECLARATION BY THE PERSON FILLING IN THE FORM

(For form filled in by a scribe or for forms signed in vernacular languages)

I _____, residing at _____ having known the proposer for a period of _____ do declare that I have explained the nature of the questions contained in this form to the proposer. I have also explained that the answers to the questions form the basis for accepting this request for Partial Withdrawal/Surrender.

Date

Signature of Scribe

ACKNOWLEDGEMENT

We acknowledge the receipt of request for partial surrender for Policy no.: _____.

Branch Name Documents received with this request

Date Time Signature of branch co-ordinator

Name of branch co-ordinator