

DD-MM-YYYY

MATURITY CLAIM DISCHARGE VOUCHER

I/We _____ the Policy Owner / Assignee do hereby acknowledge receipt from Tata AIA Life Insurance Company Limited (the "Company"), the sum of ₹ (In words) _____ including the amount of Bonus if any, in discharge of all my/our claims and demands under the Policy number. C _____ which matures on _____. All the benefits under the policy will cease to exist on the maturity of the policy and the policy would be cancelled.

Statement:

PAYABLE BENEFITS	Amount in Rs
100% of Sum Assured	0.00
Accumulated Reversionary Bonus, if any	0.00
Terminal Bonus, if any	0.00
Guaranteed Addition, if any	0.00
_____ % of Premium Paid, if any	0.00
Guarantee Maturity Addition / Guarantee Loyalty Addition, if any	0.00
Guaranteed Education Amount, if any	0.00
Indicative Maturity Amount	0.00
LESS : INDEBTEDNESS	Amount in Rs
Automatic Premium Loan (including Interest)	0.00
Policy Loan	0.00
Other Deductions (indebtedness, if any such as X-charge etc.)	0.00

Indicative Net Amount Payable = Rs

Affix
Revenue
Stamp

Signature of Policy owner/Claimant
(If at the time of policy inception insured was less than 18 years, insured signature should be verified by original Policy Owner)

Signature of Witness

Name of Policy owner/Claimant

Name of Witness

Address: _____

Address: _____

Signed on (date): _____

Relationship: _____

Signed on (date): _____

Place: _____

Declaration in case the Life Insured/ Policyholder is illiterate or signing in vernacular:

I _____ (name) with _____ (identify type) _____ (identity number) hereby declare that I have explained the contents of the Maturity Claim Voucher to the Life Insured/ Policyholder in _____ language and that the Life Insured/ Policyholder has signed/ affixed his/ her thumb impression on the Maturity Claim Voucher after fully understanding the content thereof.

Signature of the witness _____ Please affix Life Insured/ Policyholder thumb impression _____.

Note:

1. All signatures must be in ink. Names should be written as they are in our record.
2. For each signatory, there should be a witness with the signature. The witness has to be 21 years old or above, who is not the beneficiary of this policy.

NOTES:

1. This discharge form must be signed by the Policy Owner and Witnessed by a person who is conversant with the language of this form and knows the Policy Owner.
2. In case the claimant affixes thumb impression, the thumb impression must be attested by a Notary / Gazette Officer / Gram Panchayat Pradhan / Gram Panchayat member / School Headmaster / Ward Councilor / Block Development Officer / Bank Manager/ SEM or a person of local standing provided attestation is done after affixing a rubber stamp /giving his name & designation.

Where thumb marks are affixed attesting official must make the following declaration under the signature.

Shri/Smt _____ son/daughter/spouse of

Shri _____ has affixed his/her thumb marks in my presence after understanding the contents there of.

Signature of the official with seal of his office

Name:

Designation:

Date:

Disclaimers:-

1. Maturity Amount is arrived at basis assumption that policy is in force on Maturity Date & all due premiums have been paid.
2. If at the time of making the Maturity claim payment, any premium remains outstanding, the same will be recovered from the amount shown herein as payable under the Policy.
3. The Net Amount Payable mentioned above does not include any excess amount received by the Company and which will be refunded to the Policyholder along with the Maturity claim amount.
4. The Net Amount Payable may change if Terminal bonus, where the Policy is eligible for it, is declared by the Company after the dispatch of this voucher to the Policy owner. In case the Terminal Bonus is declared post payment of Maturity Amount, the same will be paid as a separate amount post declaration of the Terminal Bonus.
5. The Net Amount payable may change if Reversionary bonus, where the policy is eligible for it, is declared by the Company after the dispatch of this voucher to the policy owner.
6. Interest on loan has been calculated on the assumption that the loan or any part of it and /or interest on the same remains outstanding as on the Maturity Date of the Policy.
7. In case policy maturity date falls on non working day or Holiday, NEFT payout will be credited on the next working day.
8. In case of address change please provide the Request For Change Form along with the address proof.

Tata AIA Life Insurance Company Ltd. (IRDA 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