

Date: _____

To,
The Branch Manager
SBI Life Insurance Co. Ltd.

.....
.....

Sir/Madam,

Re: Specimen Signature for your records under the Policy No _____.

I, Mr./Mrs./Ms. _____ give below my specimen signature attested by my Banker / Principal of education institute/ Gazetted officer, for your records.

Specimen 1.

Specimen 2.

Specimen 3.

Signature of Life Assured

* Signature of the Authority
Name :
Stamp/Seal :

Declaration when the signature of the Life Assured is in a Vernacular language or in case of thumb impression hereby declare that I have explained the contents of this form to the Policy Holder in _____ Language, that the Policy Holder has affixed his/her Signature / Thumb impression on the form in my presence, after fully understanding the contents thereof

Signature of the person making the declaration
Name & Address: _____

*** Please make sure that the signature of life assured is duly witnessed by the banker / gazetted officer / any public notary.**