

SURRENDER APPLICATION FORM

Kalyan ULIP– State Bank Group Scheme(UIN 111L052V01)

Master Policy No. : _____
Bank Name : _____ **Bank Code:** _____ **Branch Name :** _____
Employee Name : _____ **PF No. :** _____ **Date of Birth :** _____

I _____ member of the above mentioned Group Policy Issued by SBI Life wish to pre-close my membership (reason*) _____ I request you to settle the eligible surrender value of my contribution as per the scheme. I understand that upon surrender the life cover will be terminated and I will not be eligible for any benefits from the said policy.

***Reason for Surrender:**

<input type="checkbox"/> Retirement / Resignation from the services of the Bank (on retirement from the services of the Bank, the member can continue to be a part of the scheme up to maturity).	<input type="checkbox"/> To fund for medical expenses
<input type="checkbox"/> To fund higher education for dependent children	<input type="checkbox"/> To fund for expenses related to childrens' marriage

I request you to credit the proceeds directly to my Bank account as provided below.

*Bank Name: State Bank of _____ Branch Name _____

Bank Account No.: _____ Branch Code: _____ IFSC Code: _____

* Copy of cheque (With Name Printed on it)/ Bank Pass Book / Bankers Certificate is Necessary.

Current Address _____ Contact No. _____

Signature of Member: _____
 Place : _____
 Date : _____

Signature of Witness
 Name of the Bank Official: _____
 Bank Code : _____
 Bank Branch : _____

Enclosure : Original Fund Allocation Statement(COI)



Advance Discharge Voucher:

I _____ do hereby give a valid Discharge in acknowledgement of receipt the Claim moneys in respect of the above claim as mentioned below.

Signature of the Member:

Name of the Signatory:

Signature of the Witness:

Please affix
 Re. 1/- revenue stamp
 & sign across the
 stamp

Name of Bank official : _____ Name of the Bank Branch : _____ Bank Branch Code : _____

For any assistance please write to us at groupops@sbilife.co.in Tel.: (022) 6645 6000. Fax: (022) 6645 6105. Website: www.sbilife.co.in

DISCLAIMER: Please note direct transfer to be made only if otherwise possible and allowed by banks as per banking regulations. SBI Life will not be responsible and liable for any losses occurred due to incorrect account details provided by policyholder,