

## CONSENT LETTER FOR FUND TRANSFER FOR SURRENDER CASES

Date: \_\_\_/\_\_\_/\_\_\_

**Surrender Policy No** : \_\_\_\_\_  
**Name of the Proposer of Surrender Policy** : \_\_\_\_\_  
**Name of Life Assured of Surrender Policy** : \_\_\_\_\_  
**New Proposal No** : \_\_\_\_\_  
**Name of the Proposer of New Policy** : \_\_\_\_\_  
**Name of Life Assured of New Policy** : \_\_\_\_\_  
**Relation with the old proposer** (a) Self (b) Spouse (c) Child  
**Amount to be transferred to new policy(s)** : \_\_\_\_\_  
**Reason:** \_\_\_\_\_

I hereby give my consent to transfer my funds available with your company in \_\_\_\_\_  
 (Old Policy No) to \_\_\_\_\_ (New Proposal No). \_\_\_\_\_  
 (Own Life/Spouse/Child)

Date: \_\_\_\_\_  
 Place: \_\_\_\_\_

Signature/Left hand Thumb  
impression of the Proposer

### DECLARATION

I hereby declare that I have read out and explained the contents of this consent for transfer of surrender proceeds to New Proposal and that he/she has said that he/she has confirmed having understood the same. I hereby declare that I have explained the contents of this form to the proposer in \_\_\_\_\_ language and that I have truly & correctly recorded the answers given by the Proposer and that the Proposer has affixed his/her thumb impression/signature in vernacular language on the consent letter for fund transfer in my presence after fully understanding the contents thereof.

Date: \_\_\_\_\_  
 Place: \_\_\_\_\_

IA/CIF Signature (with code)

### FT RECOMMENDATION

I have verified the above surrender to Fund Transfer request and have checked its authenticity.  
 I hereby, recommend the request to be processed.

☐ OPD has been submitted along with surrender request and walk-in may be waived.

Date: \_\_\_\_\_ Place: \_\_\_\_\_

UM/BDM/BSM/DSM/Area Mgr.  
Signature with Name

### Note - Authority for Approval of FT

Upto Rs. 1 Lac - UM/BDM/Sr.BDM & Above Rs. 1 Lacs - BSM/DSM/Area Manager/Sr. Area Manager  
 (If FT is to a different channel - irrespective of the amount FT to be approved by RD.)

Internal

SBI Life Insurance Company Limited: Registered and Corporate Office: Natraj, M.V. Road & Western Express Highway Junction, Andheri(East), Mumbai- 400 069. Tel.: (022) 61910000.  
Central Processing Center: 7th Level (D-Wing) & 8th Level, Seawoods Grand Central, Tower 2, Plot No. R-1, Sector-40, Seawoods, Nerul Node, Navi Mumbai- 400 706. Tel.: (022) 66456000.  
**IRDAI Registration No. 111.** CIN: L99999MH2000PLC129113. Toll Free No. 1800 267 9090 (customer service timing: 24x7) Visit: [www.sbilife.co.in](http://www.sbilife.co.in) E-mail: [info@sbilife.co.in](mailto:info@sbilife.co.in)

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**Internal**