

SBI LIFE INSURANCE CO. LIMITED

Registered and Corporate Office: Natraj, M.V. Road & Western Express Highway Junction, Andheri (East), Mumbai - 400 069. IRDAI Regn. No. 111, CIN L99999MH2000PLC129113, Toll Free: 1800 267 9090 (Customer Service Timing: 24X7)

Email: info@sbilife.co.in, Website: www.sbilife.co.in

"SBI Life Insurance Company Limited and SBI are separate legal entities" | SBI Life Insurance Co. Ltd. referred to as "SBI Life" or "The Company"

PROPOSAL FORM SBI Life- Swarna Jeevan Plus

FOR OFFICE USE ONLY

Date of Proposal (DD)/N	1M/	'YY	ΎΥ)							\perp				Bra	ncl	h L	oca	atic	n:															
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5. The trustees/auth																																				
6. This form must be signed in respect of the existing Trust, by the authorized trustee (e.g. Managing Trustee) and in cases where the Annuity Trust has to be set up, by the person duly authorized by the employer																																				
Trust has to be set up, by the person duly authorized by the employer. 7 For existing trusts, please attach certified copy of the Trust Deed and rules along with the proposal form. Additionally, please attach																																				
 For existing trusts, please attach certified copy of the Trust Deed and rules along with the proposal form. Additionally, please attach Resolution of Investments; Bank or Client certified list of signatories along with specimen signatures. 																																				
Resolution of Investments; Bank or Client certified list of signatories along with specimen signatures. 8. In case you wish our assistance in setting up an Annuity Trust, please enclose a certified copy of the Board Resolution for creating an																																				
Annuity Trust, and list of authorized signatories as also the Resolution for opening of the Trust Account with any Scheduled Bank or																																				
Nationalized Bank.																																				
9. Please submit authenticated Member data with this form to enable SBI Life Insurance to determine premiums. Data fields required are:																																				
Name of employee, employee number, date of joining, date of birth (DD/MM/YYYY), PF based salary and Gender.																																				
10. Please strike out parts, which are not applicable and write 'N.A.'.11. Please give details if "others" option has been selected																																				
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II. TRUST DETAILS																											
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50% (JL50)		version for the second									
7. Joint Life (Last S			nnuitant with re	fund of purchase price on the death							
· ·	of last survivor, X% = 50% (JL50ROC) 100% (JL100ROC)										
	8. Certain Annuity for N (5-35) Years and Joint Life (last survivor) Annuity thereafter with X% reversion for the second										
annuitant, N & X% =											
Years, 50% (JL50_years opted) Years, 100% (JL100_years opted)											
9. Only for NPS subscribers											
	t Survivor) Annuity, Simple Ir			9/							
100% reversion for the second annuitant											
	B. Joint Life (Last Survivor) Annuity, Compound Increasing at X% (1%- 10%), X=										
	n for the second annuitant	<u>3</u> % 5%	10%	%							
	for the second annuitant	3% 5%	10%	%							
	nuity with refund of purchase e (last survivor) annuity with	•		years							
	IL_100 years)		<u> </u>	_years							
	ion required:	·									
Any Other Option (c	ustomized):										
Mode of annuity payment:(Tick any of the applicable options)											
☐ Monthly ☐ Quarterly ☐ Half-Yearly ☐ Yearly											
Proposed Date of Commencement of the Master Policy (DD/MM/YYYY)											
Total Purchase price for the group as per actuarial valuation ₹ Dated:											
IV. ADMINISTRATION AND EXPENSES DETAILS											
Particulars											
Purchase Price											
Bank Name: Branch:											
Dank Dataila	Bank Name:			Branch:							
Bank Details	Bank Name: Account No:			Branch: IFS Code:							
	Account No:		Sign	IFS Code:							
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Insurance Act, 1938, any other relevant Statutes, IRDAI Rules/ Regulations/ Guidelines etc. in force and as amended from time to time.

- 6. I/We understand and agree in case of non-disclosure of a material fact, or in case of fraud, the said contract shall be treated as per the provisions of Section 45 of the Insurance Act 1938 as amended from time to time.
- 7. I/We have obtained all the approvals and completed all the necessary procedures stipulated as per the relevant internal guidelines/Rules/Bye Laws/Statutory Provisions etc., applicable to us, and that accordingly/We are duly authorized to sign the Proposal Form, furnish any particulars and carry out all matters in connection with or incidental to the aforesaid Group Insurance arrangement with the Company. I/We further affirm that the Company shall not be liable in any manner whatsoever for relying upon this confirmation and issuing a Master Policy in our favor.

I/ We have submitted the FATCA/CRS form for	<trust company="" name=""></trust>	as required by SBI Life Insurance

Name and Signature of Trustee(s) Authorized Signatory/ies:		
1	_ Date:	Place:
2	_ Date:	_ Place:
3	_ Date:	_ Place:
4	_ Date:	_ Place:
Stamp	Name and	signature of the witness:
Date: DDMMYYYY		
Place:		

Section 41 of the Insurance Act, 1938 as amended from time to time

No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer.

Non - Disclosures:

Extract of Section 45 of Insurance Act, 1938, as amended from time to time:

- a) No policy of life insurance shall be called in question on any ground whatsoever after the expiry of three years from the date of the policy. A policy of life insurance may be called in question at any time within three years from the date of the policy, on the ground of fraud or on the ground that any statement of or suppression of a fact material to the expectancy of the life of the insured was incorrectly made in the proposal or other document on the basis of which the policy was issued or revived or rider issued. The insurer shall have to communicate in writing to the insured or the legal representatives or nominees or assignees of the insured, the grounds and materials on which such decision is based.
- b) No insurer shall repudiate a life insurance policy on the ground of fraud if the insured can prove that the mis-statement or suppression of a material fact was true to the best of his knowledge and belief or that there was no deliberate intention to suppress the fact or that such mis-statement or suppression are within the knowledge of the insurer. In case of fraud, the onus of disproving lies upon the beneficiaries, in case the policyholder is not alive.
- c) In case of repudiation of the policy on the ground of misstatement or suppression of a material fact, and not on the grounds of fraud, the premiums collected on the policy till the date of repudiation shall be paid.
- d) Nothing in this section shall prevent the insurer from calling for proof of age at any time if he is entitled to do so, and no policy shall be deemed to be called in question merely because the terms of the policy are adjusted on subsequent proof that the age of the life insured was incorrectly stated in the proposal.

For complete details of the section and the definition of 'date of policy', please refer Section 45 of the Insurance Act, 1938.

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