- 1. Please use separate form for each policy 2. Kindly fill all details in BLOCK letters

Page 1 of 2

3. Any Corrections in the form need to be counter signed

REQUEST FOR CHANGE IN CUSTOMER DETAILS

FORM NUMBER: LOAN ACCOUNT I request you to kin Change/Updat Contact No: Res Mobile: Email ID: Change in Addr	HOLDE	ate						LOA	N ACC													
request you to kir Change/Updat Contact No: Res Mobile: Email ID:	ndly upd te Conta	ate									NOIVIL	BER:									_ L	
Change/Updat	te Conta		my Co																			
Contact No: Res Mobile:		act d	-								Acco	ount de	tails as	giver	n below	V:						
Mobile:	sidence:		letails	- Re	siden	ce/Of	fice/I	Nobile No.	/ Emai	I ID:												
Email ID:										Office	:											
		_L					Ger	nder:				Heig	ht (Kg) / We	ight (C	ms):			/			_
Change in Addr																						
	ess deta	ils:	(Self A	ttest	ed cop	y req	uired	of Standar	d Addr	ess pro	of)											
Address:																						
Update PAN N	lo.:										(*Self	fattest	ed cop	y of th	e PAN	Card	is m	nand	ator	/)		
Update GSTIN	l No.										(*Self	fattest	ed cop	y of th	e GST	IN Ce	rtific	ate i	is ma	anda	atory)
Update Bank A	Account	deta	ils: I re	eques	t you f	to kin	dly re	cord my be	low me	entioned	d ban	k detai	ls in yo	our rec	ords							
Bank A/C No.:											-					1						
FSC Code:		_							Typ	e of A/c					- L L 					L		
Bank Name:			-LL		_LL 	[,p					L		 			L	L	L	— L
Sank Name.		-																				
transactions declare that the bayable under an	d copy o (not mo Policy ny of my	f Ba ore t and Pol	ank Pa han 1- Bank	ssboo mont Acco o this	ok sho h old) ount d Bank	owing letails	pre-p s prov ount,	account nur printed ban vided by m at my sole	mber k acco e here e risk. l	in are t unders	acco rue a	ount ho and I au	ıthoriz BI Life	e SBI reser	Life to ves th	o crea	along dit th	g wit h e p i	th a roce	copy eds	of a	ll am
transactions declare that the bayable under an erroneously into	d copy of (not mo Policy ny of my my Acc od the m	f Ba bre t and Pol oun ean	ank Pa han 1- Bank icies t t and to	ssboo mont Accc o this o exe d scc	ok sho h old) bunt d s Bank rcise a ope of	owing letails k Acco a lien the ch	pre-p s prov ount, to ree	account nur printed ban rided by m at my sole cover such e request fi	mber k acco e here e risk. I n exces orm an	unt no., in are t unders s amou d take o	acco frue a stand unt cr	ount ho and I au that Si redited	ıthoriz BI Life	e SBI reser	Life to ves th unt.	o crea e righ	along dit th ot to h	g wit he pl reve	th a roce	copy eds any	of a	ll am
transactions declare that the bayable under an erroneously into I have understoo responsibility of	d copy of (not mo Policy by of my my Acc od the m the char	f Ba bre t and Pol oun ean	ank Pas han 1- Bank licies t o t and to s subm	ssboo mont Acco o this o exe d sco nitted	ok sho h old) bunt d Bank rcise ope of t by me	owing tetails tetails the ch the ch e. Any	pre-p s prov ount, to red nange / char	account nur vided ban at my sole cover such e request finges in the	mber k acco e here risk. I nexces orm an Policy	unt no., in are t unders s amou d take o / Perso	acco true a tand int cr comp	ount ho and I au that Si redited	ıthoriz BI Life	e SBI reser	Life to ves th unt.	o creo e righ	along dit th ot to h	g wit he pl reve	th a roce	copy eds any	of a	ll am
transactions declare that the payable under an erroneously into I have understoo responsibility of details are subje (If policyholder is ill	d copy of (not mo Policy ay of my my Acc od the m the char oct to the literate o	f Ba bre t and Pol oun ean nges poli	ank Paa han 1- Bank licies to t and to ing an is subm icy terr	ssboo mont Acco o this o exe d sco nitted ms ar	bk sho bunt d Bank rcise by me by me nd con	bwing letails Accord a lien the ch e. Any ndition	pre-p s prov ount, to red hange / char ns and	account nur vided by m at my sole cover such e request fi- nges in the d relevant the languag	nber k acco e here risk. I a exces orm an Policy underv e of this	unt no., <i>in are t</i> <i>unders</i> <i>is amou</i> d take of / Person vriting g form, hi	acco frue a stand int cr comp onal guide	ount ho Ind I au Ithat Si edited Ilete lines.	Ithoriz BI Life to my	e SBI reser Accor	Life to ves th unt.	o crea e righ Thumk nature must l	along dit th ot to d o imp o of P	g wit	th a roce sion y Ho	copy eds any / Ider	of a payl	ll am ment
transactions declare that the payable under an erroneously into I have understoor responsibility of details are subje (If policyholder is ill Notary, his/her Bar	d copy of (not mo Policy ay of my my Acc od the m the char oct to the literate o	f Ba bre t and Pol oun ean nges poli	ank Paa han 1- Bank licies to t and to ing an is subm icy terr	ssboo mont Acco o this o exe d sco nitted ms ar	bk sho bunt d Bank rcise by me by me nd con	bwing letails Accord a lien the ch e. Any ndition	pre-p s prov ount, to red hange / char ns and	account nur vided by m at my sole cover such e request fi- nges in the d relevant the languag	nber k acco e here risk. I a exces orm an Policy underv e of this	unt no., <i>in are t</i> <i>unders</i> <i>is amou</i> d take of / Person vriting g form, hi	acco actand actand ant cr comp onal guide s/her of	ount ho and I au that Si redited olete lines. thumb i fficial se	nthoriz BI Life to my mpress al after	e SBI reser Accor	Life to ves th unt.	o crea e righ Thumk nature must l	along dit th ot to d o imp o of P	g wit	th a roce sion y Ho	copy eds any / Ider	of a payl	ll am ment
transactions declare that the payable under an erroneously into l have understoo responsibility of details are subje (If policyholder is ill Notary, his/her Bar Name:	d copy of (not mo Policy ay of my my Acc od the m the char oct to the literate o	f Ba bre t and Pol oun ean nges poli	ank Paa han 1- Bank licies to t and to ing an is subm icy terr	ssboo mont Acco o this o exe d sco nitted ms ar	bk sho bunt d Bank rcise by me by me nd con	bwing letails Accord a lien the ch e. Any ndition	pre-p s prov ount, to red hange / char ns and	account nur vided by m at my sole cover such e request fi- nges in the d relevant the languag	nber k acco e here risk. I a exces orm an Policy underv e of this	unt no., <i>in are t</i> <i>unders</i> <i>is amou</i> d take of / Person vriting g form, hi	acco actand actand ant cr comp onal guide s/her of	ount ho Ind I au Ithat Si edited Ilete lines.	nthoriz BI Life to my mpress al after	e SBI reser Accor	Life to ves th unt. Sigr nature ning th	n crec e righ	dit th t to d o imp o of F	g wit	th a contract of the second se	copy eds any / lder any (of a pay	etted
transactions declare that the payable under an erroneously into I have understoor responsibility of details are subje (If policyholder is ill Notary, his/her Bar	d copy of (not mo Policy ay of my my Acc od the m the char oct to the literate o	f Ba bre t and Pol oun ean nges poli	ank Paa han 1- Bank licies to t and to ing an is subm icy terr	ssboo mont Acco o this o exe d sco nitted ms ar	bk sho bunt d Bank rcise by me by me nd con	bwing letails Accord a lien the ch e. Any ndition	pre-p s prov ount, to red hange / char ns and	account nur vided by m at my sole cover such e request fi- nges in the d relevant the languag	nber k acco e here risk. I a exces orm an Policy underv e of this	unt no., <i>in are t</i> <i>unders</i> <i>is amou</i> d take of / Person vriting g form, hi	acco actand actand ant cr comp onal guide s/her of	ount ho and I au that Si redited olete lines. thumb i fficial se	nthoriz BI Life to my mpress al after	e SBI reser Accor	Life to ves th unt. Sigr nature ning th	n crec e righ	dit th t to d o imp o of F	g with	th a roce roce sion sion y Ho ed by s forn	copy eds any / lder any (of a pay	etted
transactions declare that the payable under an erroneously into I have understoor responsibility of details are subje (If policyholder is ill Notary, his/her Bar Name: Address:	b d copy of (not mo Policy by of my Accord the m the charact to the literate o sker or SI	f Ba pore t and Pol oun ean nges poli r is si BI Lit	ank Paa hhan 1- bank Bank ing an s subm icy terr igning i fe Offici	Acccontent of the second secon	bk shc bunt d s Bank rcise a by me nd con nguage t below	etails Acce a lien the ch e. Any ndition	pre-p ount, to rec nange / char ns and r than ank of	account nur printed ban vided by m at my sole cover such e request fr nges in the d relevant the languag Assistant M	nber k acco e here risk. I a exces orm an Policy underv e of this	unt no., <i>in are t</i> <i>unders</i> <i>is amou</i> d take of / Person vriting g form, hi	acco actand actand ant cr comp onal guide s/her of	ount ho and I au that Si redited olete lines. thumb i fficial se	nthoriz BI Life to my mpress al after	e SBI reser Accor	Life to ves th unt. Sigr nature ning th	n crec e righ	dit the	g with	th a roce roce sion sion y Ho ed by s forn	copy eds any / lder any (of a pay	etted
transactions declare that the payable under an erroneously into I have understoor responsibility of details are subje (If policyholder is ill Notary, his/her Bar Name: Address: (For Office Use	b d copy of (not mo Policy by of my Accord the m the charact to the literate o sker or SI	f Ba pore t and Pol oun ean nges poli r is si BI Lit	ank Paa hhan 1- bank Bank ing an s subm icy terr igning i fe Offici	Acccontent of the second secon	bk shc bunt d s Bank rcise a by me nd con nguage t below	etails Acce a lien the ch e. Any ndition	pre-p ount, to rec nange / char ns and r than ank of	account nur vrided by m at my sole cover such e request fr nges in the d relevant the languag Assistant M	mber k acco e here risk. I a exces orm an Policy underv e of this anager	unt no., <i>in are t</i> <i>unders</i> <i>is amou</i> d take of / Person vriting g form, hi	acco actand actand ant cr comp onal guide s/her of	ount ho and I au that Si redited olete lines. thumb i fficial se	nthoriz BI Life to my mpress al after	e SBI reser Accor	Life to ves th unt. Sigr nature ning th	n crec e righ	along dit th t to i of F oce attl decl	g wit he puress Poress Policy teste of this erso larati	th a roce roce sion y Ho ed by s form	copy eds any lder any (any (of a pay	etted
transactions declare that the bayable under an erroneously into I have understoor responsibility of details are subje (If policyholder is ill Notary, his/her Bar Name: Address:	e Only.	f Ba pore t and Pol oun ean nges poli r is si Bl Lit	ank Pa han Pa bank icies t t and to ing an s subm icy terr gning i fe Offici	Acccc o this o exe d scc nitted ms ar n a lar na lar na lar na lar na lar	bk sho h old) bunt d s Bank rcise a by me nd con nguage t below by rec	wing details k Acc: a lien the ch e. Any ndition e other the ra conversion conve	pre-p	account nur printed ban vided by m at my sole cover such e request fr nges in the d relevant the languag Assistant M	mber k acco e here risk. I a exces orm an Policy underv e of this anager	unt no., in are t unders s amou d take o / Perso vriting o form, hi with his/	accc rue a tand int cr componal guide s/her of her of	ount ho and I au that Si redited olete lines. thumb i fficial se cupatio	mpress al after	ion/sic	Life to ves the unt. Sign nature ning th Sign	o cree e righ	along dit that to a compare of F coe attraction of point of point decl	g with he planess Policy teste erso arati	th a croce c	copy eds any / lder any (ח.)	of a pays	etted

. . .

SBILife

Apne liye. Apno ke liye.

9

- 1. Please use separate form for each policy
- 2. Kindly fill all details in BLOCK letters
- 3. Any Corrections in the form need to be counter signed

REQ	UEST FOR CHA	NGE IN POLIC	CY DETAILS	Apne liye. Apno ke liye.
To, SBI Life Insurance Company Ltd., Branch			Date:	
MASTER POLICY NUMBER:			Customer ID:	
FORM NUMBER:		AN ACCOUNT NUMBE	R:	
Name of the Loan Account holder	Mr. Mrs. Ms.			
1. Change / Correction in Name: Primar	y LAH* Secondary LAH*	Nominee Appoin	ntee 🔵 Life Beneficiar	y OPolicyholder's Father's Name
Old Details: New Details.: Reason for Change (In case of Surname / • Change will be incorporated in all existin • For married women with a change in s required. For all other requests involvin	ng policies of the customer. F urname, Marriage certificate	e or Declaration signed by	y two witnesses along	with a copy of marriage invitation is
2. Correction in Date of Birth (D.O.B) :	Primary LAH* OSeco	ndary LAH* 🔵 Nominee	e 🔵 Appointee 🔵	Life Beneficiary
Old D.O.B.: D D M Y Y	Y Y New D.O.B.:	D D M M Y	Y Y Y	
Reason for Change:				
Supportings attached: OBirth Certifica * Standard Age proof should be Self Atter 3. Change in Premium Payment Option: (F Auto debit modes is mandatory for Bank Self Paid (Cheque/Draft)	sted and verified by Gazette (Please tick the desired option)	Officer / SBI Life official (As) ng with the correspondin	sistant Manager or abo g mandate and enclos	ve) (*LAH - LOAN ACCOUNT HOLDER) eed with this form for processing
4. Change in Loan Account No.: From			То	
5. Change in Loan Amount: From ₹			το ₹	
6. Change in Loan Category: From			То	
7. Change in Loan/Cover Term (In months)	From To			
8. Change in moratorium period (In Years a	and months) :		(Bank Atte	ested copy required)
9. Change in Bank Branch code: From	То			
I have understood the meaning and so responsibility of the changes submitte details are subject to the policy terms a	d by me. Any changes in t	he Policy / Personal	Signatu	nb impression / re of Policy Holder
(If policyholder is illiterate or is signing in a lange Notary, his/her Banker or SBI Life Official not b				
Name:		Occupatio	on:	
Address:			Signatu	re of person making the declaration
(For Office Use Only. To be filled in by				
Branch Name:				Signature of Receiver
Receipt Date: D D M M Y Y	Y Y Time:	am/pm Outward N	0.:	
Received by:			Employee ID: _	X-
SBILife Acknowledgement :			~	8
Received a request for		against LAN N	lo.:	
on D D M M Y Y Y Y Employee's Name & Sign:	atam/pm. Ir			Branch Stamp / Seal

SBI Life Insurance Company Limited: Registered and Corporate Office: Natrai, 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 2679090 Visit: www.sbilife.co.in | E-mail: info@sbilife.co.in Page 2 of 2 PS 66 Ver.1.01 05-22 ENG

- - -

ife

RI