

SWITCH & REDIRECTION FORM

Master Policy Level <input type="checkbox"/>	Member Level <input type="checkbox"/>
---	--

Master Policy No.									
Member Id. /Employee Id.									
Name of the Member	Mr. /Ms. /Mrs. _____								
Location									
Date & Time Stamp									
Account Type*	<table style="width: 100%;"> <tr> <td>Master Policyholder Account (MPA)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Master Policyholder Excess Account (MPEA)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Group Member Account (GMA 1)</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Group Member Account (GMA 2)</td> <td><input type="checkbox"/></td> </tr> </table>	Master Policyholder Account (MPA)	<input type="checkbox"/>	Master Policyholder Excess Account (MPEA)	<input type="checkbox"/>	Group Member Account (GMA 1)	<input type="checkbox"/>	Group Member Account (GMA 2)	<input type="checkbox"/>
Master Policyholder Account (MPA)	<input type="checkbox"/>								
Master Policyholder Excess Account (MPEA)	<input type="checkbox"/>								
Group Member Account (GMA 1)	<input type="checkbox"/>								
Group Member Account (GMA 2)	<input type="checkbox"/>								
*Please select the account as applicable under plan opted by you. Only one account can be selected per form.									

☐ 1. **SWITCHING OPTION : (Reallocation to funds to be in multiple of 5% of the switched amount)**

From	Percentage	To	Percentage
Group Growth Plus Fund		Group Growth Plus Fund	
Group Balance Plus Fund		Group Balance Plus Fund	
Group Debt Plus Fund		Group Debt Plus Fund	
Group Short Term Plus Fund		Group Short Term Plus Fund	
Group STO Plus Fund		Group STO Plus Fund	
Total:			100%

☐ 2. **REDIRECTION FACILITY.**

Fund Name	Percentage	Fund Name	Percentage
Group Growth Plus Fund		Group Balance Plus Fund	
Group Debt Plus Fund		Group Short Term Plus Fund	
Group STO Plus Fund			

Declaration/ Authorization:

I, _____, the member/ the trustee on behalf of Master Policyholder of _____ under SBI Life - Kalyan ULIP, hereby request SBI Life Insurance Co.Ltd.[SBI Life] to effect the Switches / Redirection in accordance with the information furnished above. I hereby accept and agree to be bound to such changes and its financial implications hereafter.

Signature of the member / Authorised Signatory for _____ SBI Life – Kalyan ULIP Scheme

Date: _____ / _____ / _____

Seal/Stamp
of the Company/MP
holder

SWITCH & REDIRECTION FORM

For Office Use Only	
Signature of the person attending the request:	Signature of the person approving the request:
Name :	Name :
Designation:	Designation:
Date:	Date:

Guidelines for filling in the form:

1. This form is to be filled by the member/Trustee of the scheme in **BLOCK LETTERS**.
2. Any Cancellation/Alterations/Corrections/Overwriting must be authenticated by affixing a full signature besides the same.
3. Please refer to the General Information provided immediately below.

GENERAL INFORMATION:

1. Switching Facility :

- a. 'Switch To' Percentage should be in multiples of 5% of the Existing Fund.
- b. Four (4) **offline** and twenty-four (24) **online** switches are free per Policy Year for MPA, MPEA, GMA1 & GMA2 type of accounts. Additional switches will be charged @ Rs.200/- per Switching Request by cancellation of Units from the original Fund/s.
- c. An unused free switch cannot be carried forward to the next policy year
- d. Total of "Switch To" percentage must be equal to 100%
- e. The 'Switch From' & 'Switch To' column should not have same funds. For ex. Request such as – Switch from 100% Growth to 50% Growth & 50% Balance – shall be considered invalid.

g. Illustration:

You want to switch **50%** of your investment in Growth Fund and **60%** of your investment in Balance Fund into Debt Plus Fund and Short Term Plus Fund in the percentage 60% and 40% respectively. Thus you will enter the values as:

From	Percentage	To	Percentage
Growth Fund	50%	Growth Fund	
Balance Fund	60%	Balance Fund Fund	
Debt Plus Fund		Debt Plus Fund	60%
Short Term Plus Fund		Short Term Plus Fund	40%
		Total:	100%

2. Redirection Facility :

- i) Six Redirections will be allowed Free of cost per Policy Year each account type i.e. MPA, MPEA, GMA1, GMA2.
- ii) Additional Redirections over and above the six free redirections will be charged @ Rs. 200/- per redirection by cancellation of Units from the original Fund/s.

3. Common Conditions:

- a. NAV used for liquidation / investment of Units -
 - i. If request is received before 3.00 p.m.: Closing NAV of the same day
 - ii. If request is received after 3.00 p.m. : Closing NAV of the next business day
- b. In case of offline switches/redirections in respect of GMA2 the signature and member details will have to be authenticated by the Master Policy holder.
- c. List of Members for whom the switch has to be carried out by Master Policyholder has to be enclosed with Member ID / Employee ID & Names of the member.