



Apne liye. Apno ke liye.

RENEWAL FORM FOR SBI LIFE – SAMPOORN SURAKSHA (UIN : 111N040V04)
SBI Life Insurance Company Limited

IRDA Registration Number 111

For Office Use Only

Master Policy Number*		
Quotation ID*		
Sales Channel*		
Region*		
Source of Lead*		
Code* (If SOL other than Direct)		
Name of the Key Account Manager and Employee ID*	Name -	Employee ID -
Master Policy Holder Details		
Master Policy Holder Name*		
Bank account details of Master policy Holder for deposit Refund.* (proof to be attached – pre-printed cancelled cheque / Bank account statement)	Account Holder Name -	
	Bank Name -	
	Account No -	
	IFSC Code -	
Address of Master policy Holder* (Complete address with pin-code is mandatory)	<div>Pin code -</div>	
Contact Person Name*		
Contact Details of Mater Policy Holder*	Contact No -	Email ID -
PAN / GSTIN Number* (Regular)	PAN -	GSTIN (Regular) -
Tax Deductor GSTIN (TAX) if applicable* (For PSU)	GSTIN (TAX DEDUCTOR) -	
EPFO Registration Code and Office Name* (In case of EDLI Policy)	EPFO Reg. No-	EPFO Office Name -
	Current Year	Last Year
Date of Policy Renewal		
Benefit Structure		
Normal Retirement Age		
Nationality and Countries of Residence for Indians posted abroad & Foreigners (Please tick the appropriate boxes and fill the blanks wherever applicable)	Foreigners posted in India <input type="checkbox"/>	Please mention nationalities of Foreigner _____
	Indian Nationals posted abroad <input type="checkbox"/>	Please mention countries of Posting _____
	Foreigners posted in abroad <input type="checkbox"/>	Please mention countries of posting _____

Declaration : I/ We hereby confirm that the above details of the group under the renewal scheme is correct to the best of our Knowledge and that all the employees to be included in the scheme satisfy the "Active-at-work clause", if any, as mentioned in the referred quotation.

Authorised Signatory	For SBI Life Insurance Company Limited (Witness by the CRM/KAM)	For Master Policy Holder.
Name		
Designation		
Signature		
Date		Company Seal*
Place		

All the fields with* mark are mandatory

SBI Life Insurance Company Limited: GOPS/SS/RWF/Ver.1.3 01/09/2019