

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)	Contact No	
Social Policy Yes or No		
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	Account Holder Name -	
Holder for deposit Refund.* (proof to be attached – pre-printed cancelled cheque / Bank account statement)	Bank Name -	
	Account No -	
	IFSC Code -	
Address of Master policy Holder*		
(Complete address with pin-code is		
mandatory)		Pin code -
Contact Person Name & Designation*		
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		Diago mantion nationalities of Foreigner
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	Please mention nationalities of Foreigner
	Indian Nationals posted abroad	Please mention countries of Posting
	indian ivationals posted autoau	
	Foreigners posted in abroad	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