

## SURETY FORM

(To be completed only when the Net Claim Amount exceeds Rs 5 Lacs)



(To be completed and signed by any person, not related to the Policyholder/Claimant having Assets more than Net Claim Amount)

Dear Sir/Madam,

I wish to inform you that I am prepared to execute an Indemnity Bond in favor of SBI Life Insurance Co. Ltd to enable it to payclaim amount without insisting on original policy document to shri/Smt. \_\_\_\_\_

(Name of the Policy Holder/Claimant) under Policy No. \_\_\_\_\_

I have filled in the details as given below:

QUESTIONS	ANSWERS
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<p>(1) Surety's Name and Address (Please provide address proof with self attestation)</p>	
<p>(2) Telephone No./Mobile No.</p>	
<p>(3) Present occupation</p>	
<p>(4) Approximate monthly income</p>	
<p>(5) Are you related to the Claimant/Policy Holder in respect of which this surety is given? If so, state the relationship</p>	
<p>(6) Property, movable or immovable Possessed and its present value, the details thereof?</p>	
<p>(7) Is the property free from encumbrance?</p>	
<p>(8) Attached copy of Pan Card/KYC Documents</p>	<input type="checkbox"/> YES <input type="checkbox"/> NO
<p>(9) Attached proof of Income / Property.</p>	<input type="checkbox"/> YES <input type="checkbox"/> NO
<p>(10) Are you a guarantor in any other cases, if so the total amount of guarantee undertaken so far In all the cases put together. (Excluding the present case)</p>	

I do hereby solemnly assure the Company that I have thoroughly understood and correctly provided the above details.

Signature of Witness

Signature of Surety

<p><b>Name of Witness:</b> _____</p> <p><b>Designation:</b> _____</p> <p><b>Address of Witness:</b> _____</p> <p>_____</p> <p>_____</p> <p><b>Tel. No. of Witness:</b> _____</p>	<p><b>Name of Surety:</b> _____</p> <p><b>Designation:</b> _____</p> <p><b>Address of Surety:</b> _____</p> <p>_____</p> <p>_____</p> <p><b>Tel No. of Surety:</b> _____</p>
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**Date:**

D	D	M	M	Y	Y	Y	Y
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**Place:** \_\_\_\_\_

Note: If the space not sufficient for question no.6, please use additional sheet.