

Name of Life To Be Assured / Proposer: _____

Requirement: **Nominee and appointee details**

Application No.

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NOMINEE / APPOINTEE DETAILS (To be filled in case Life To be Assured and Proposer are same. Appointee details required only if nominee is minor)

3. Nominee Name Mr. Ms. _____

4. Gender of Apointee Male Female

5. Date of Birth

D	D	M	M	Y	Y	Y	Y
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 Relationship of the Nominee with the Life to be Assured _____

6. Appointee's Name (If Nominee is a minor) _____

7. Gender of Appointee Male Female

8. Appointee's Date of Birth

D	D	M	M	Y	Y	Y	Y
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9. Relationship with the Nominee _____

10. Address of the Nominee (Appointee, if Nominee is Minor) _____

_____ Landmark _____

City _____ PIN _____ State _____

Signature of Life To Be Assured / Proposer

Signature of FA / CRO / BDM

Place: _____

Place: _____

Date:

D	D	M	M	Y	Y	Y	Y
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Date:

D	D	M	M	Y	Y	Y	Y
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