Addendum To Proposal Form 360

Section-IV : Declaration

DECLARATION BY THE PROPOSER

I(Name of the pr	roposer) do hereb	y declare that	the foregoing
statement and answers have been given by me at	fter fully understandi	ing the questions	and the same
are true and complete in every particular and that I	I have not withheld a	any information a	and I do hereby
agree and declare that these statements and thi	is declaration shall	be the basis of	the contract of
assurance between me and the Life Insurance Co	•	•	
contained therein the said contract shall be dealt w	vith as per provisions	s of Section 45 o	f the Insurance
Act,1938 as amended from time to time.			

Not-withstanding the provision of any law, usage, custom or convention for the time being in force prohibiting any doctor, hospital ,diagnostic center and/or employer, reinsurer/ credit bureau from divulging any knowledge or information about the life to be assured concerning the health, insurance, financial etc. on the grounds of privacy, I, on behalf of myself, the life to be assured, our heirs, executors, administrators and assignees or any other person or persons, having interest of any kind whatsoever in this policy contract issued on the life to be assured, hereby agree that such authority, having such knowledge or information, shall at any time be at liberty to divulge any such knowledge or information to the Corporation, and the Corporation to divulge the same to any Authorised Organisation / Institution / Agency / and Governmental / Regulatory Authority for the sole purpose of underwriting / investigation / risk mitigation / fraud control and/or claim settlement.

And I further agree that if after the date of submission of the proposal but before the issue of First Premium Receipt any change in the general health of the life to be assured or that of any members of his family occurs, I shall forthwith intimate the same to the Corporation in writing to reconsider the terms of acceptance of assurance. Any omission on my part to do so shall render this contract to be dealt with as per provisions of Section 45 of the Insurance Act, 1938 as amended from time to time.

I undertake to inform the Corporation immediately of any changes in KYC documents such as residence. I also give my consent to share my data with Central KYC Registry and to receive phone calls, SMS/E mail from Central KYC registry in this regard

I understand that the Corporation reserves the right to accept /Postpone/ drop/ decline or offer alternate terms on this proposal for life insurance .

I hereby give my consent to receive phone calls, SMS/E mail on the below mentioned registered number/ E mail address from / on behalf of the Corporation with respect to my life insurance policy/regarding servicing of insurance policies/enhancing insurance awareness/ notifying about the status of Claim etc.

l also understan	d that the terms	and conditions	s including premium	and benefits	under the policy	are
subject to taxes	/ duties/ charge:	s in accordance	with the laws as app	olicable from t	time to time.	

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Signature of witness

Signature / thumb impression of the proposer

Name. Occupation Address