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Sarutha ke jiyo!

Cash Bonus Option Change

Note: Please complete the form in CAPITAL LETTERS.

All fields as applicable with (*) are mandatory

I hereby request HDFC Life Insurance Company Limited to change the cash bonus option for the given policy number as per the details mentioned below:

Bonus Option*

(Please tickmark the options)

Present Option	Option Requested
<input type="checkbox"/> Receive it in cash (CSWD)	<input type="checkbox"/> Receive it in cash (CSWD)
<input type="checkbox"/> Cumulative Options (DVAC)	<input type="checkbox"/> Cumulative Options (DVAC)
<input type="checkbox"/> Adjust towards Future Premiums (PMST)	<input type="checkbox"/> Adjust towards Future Premiums (PMST)
Present Option (Sampoorna Jeevan Plan)	Option Requested (Sampoorna Jeevan Plan)
<input type="checkbox"/> Cash Bonus 3	<input type="checkbox"/> Cash bonus 3 to Paid up Addition (PUA)
<input type="checkbox"/> Cash Bonus 4	<input type="checkbox"/> Cash bonus 4 to Paid up Addition (PUA)
<input type="checkbox"/> Paid up Addition (PUA)	<input type="checkbox"/> Paid up Addition (PUA) to Cash Bonus 3
	<input type="checkbox"/> Paid up Addition (PUA) to Cash Bonus 4

BONUS OPTION DETAILS

POLICY DETAILS

Policy Number*: Plan Name*: Policy Holder's Name*:

BONUS OPTION DETAILS

I understand that:

- The bonus option can be exercised only once during the term for all type of bonus options
- The option is applicable only for Cash Bonus plans
- The request for change shall be subject to the Company's policies governing the same
- Any change to the Policy will only be applicable from the next Policy Anniversary Date

For Sampoorna Jeevan

- Change is allowed only on policy anniversary and should be submitted 60 days prior to next policy anniversary
- Paid up Additions option cannot be chosen once Life Assured attains age 75

I take full responsibility for the genuineness and correctness of the details filled herein.

Signature / Thumb Impression of the Policy Owner / Assignees*: Witness Signature*: Date Place Name & Address of the Witness*:

*(Should be someone other than the advisor/agent/employee of the company and who has also explained the contents of this form if signature is in vernacular or a thumb impression.)

FOR OFFICE USE ONLY

Name of the Customer Service Representative: Branch Code: Signature: Date: Employee No.: OEL Case ID No:

ACKNOWLEDGEMENT SLIP

This is to acknowledge the receipt of your application for Cash Bouns Option change.Policy Number: Date:

Documents received:

Specimen Signature Form: Others: Customer Service Executive Signature: Date: 

HDFC Life Insurance Company Limited (HDFC Life). CIN: L65110MH2000PLC128245. IRDAI Registration No. 101.

Regd. Off: 13th Floor, Lodha Excelus, Apollo Mills Compound, N.M. Joshi Marg, Mahalaxmi, Mumbai - 400 011.

For queries or more information, call us on 1860-267-9999 (Local charges apply) | 022-68446530 (STD charges apply). Available Mon-Sat from 10 am to 7 pm. DO NOT prefix any country code e.g. +91 or 00. | Email - service@hdfclife.com | nrIService@hdfclife.com (For NRI customers only) Visit - www.hdfclife.com

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