

HDFC Group Unit Linked Plan- Premium Redirection Form

Scheme Details:

Scheme Type:

Trust Name:

Policy

Number :



All your future contributions will be redirected towards the new fund but all your old contributions will remain in their existing funds.

* Fund Choices applicable as given in the policy document

Sr. No	Account Number	Account Name	New Fund Choice								Validation
			Liquid Fund	Stable Managed Fund	Sovereign Fund*	Secure Managed Fund	Defensive Managed Fund	Balanced Managed Fund	Equity Fund*	Growth Fund*	
											Total should be = 100%

Yours sincerely,
Signed for and on behalf of the Trust

1st Signatory : _____ 2nd Signatory : _____
Name of Trustee/Authorised Signatory :

Note : Trustees / Authorised Signatories approved by the Board of Trustees / Employer and whose signatures have been submitted in advance to HDFC SL shall only be entitled to execute this request / form. The Policy Holder is requested to keep the signatory list updated with HDFC SL at all times to avoid last minute delays.

Date : _____ Place : _____ (Rubber Stamp and Address)

- General Rules :
- (1) This investment instruction must be received before the daily cut-off time to obtain the next valuation unit prices. Please contact us for details of our current cut-off times and valuation times. (2) All other terms and conditions as specified in the Policy Documents and Schedule thereto shall apply. (4) The plans mentioned in this proposal form have been approved by IRDA (Insurance Regulatory and Development Authority) and have been allotted an Unique Identification Number (UIN). This number is available on IRDA's website for verification.(5) The funds mentioned in this form have been allotted a Segregated Fund Identification Number (SFIN). This number is available on our website(www.hdfclife.com) for verification.