PSRF138722111729 Comp/Feb/Int/4747		
	For Official use only	HDFC
NEFT Mandate	Branch: Receipt Date & Time:	Life
	Received by: Interaction ID:	Sar utha ke jiyo!
NEFT mandate already submitte		you wish to change the NEFT details (Please fill in the
NEF I Mandate (Please do not fill in below details) details below for direct transfer of payouts into your bank account through the NEFT facility)		
Policy Number:	E- Insurance Account No.:	(For demat customers only)
Name of the Policyholder/Beneficiary:		
Email ID*:		
*Contact No.: (Mob) *Contact details will be updated for all future communications. The a	/ (Off)	
Payee/ Account holder Details		
In case of children's plans, if beneficiary is a major, please provide beneficiary's account details.		
Bank Account No. : IFSC Code (11 Characters)		
Account Holder Name:	and the state of t	Rupees out
Bank Name & Branch:		An No. 0542 - 05442 -
Account Type Savings Current NRO	NRE#	FC Phase against and if you did store of
#All premium(s) paid from NRE Account: ## Proportionate premium(s) paid from NRE Account:		
IFSC^:	11 Character code appearing on your cheque leaf	
Tax declaration (except for Excess Refund, Free Look Cancellation or Withdrawal of proposal)		
Are you a tax resident of any country other than India as		
Yes** No*		
*To be ticked if you are a tax resident in India under the Income-tax Act, 1961. **If you are a non-resident in India as per the Income Tax Act, 1961, you are mandatorily required to submit Tax Residency Certificate (TRC) with Form 10F to avail treaty benefits, otherwise tax will be		
deducted at source at a higher rate from policy payouts. As per section 195 of the Income-tax Act, 1961, tax will be deducted at source from any payout to a non-resident at the rate applicable therein and subject to the conditions specified therein. Tax laws are subject to change.		
2. Does your total taxable income for the relevant financial year (April 1 to March 31) exceed INR 1 crore? The conditions appeared to the conditions appeared to thinge.		
Yes No		
3. Self-attested documents submitted : TRC FORM 10 F		
an evidence for premium(s) paid through NRÉ account.	reviously tagged NEFT mandates for all Policies, held by t ng on the mandate, payout will be kept on hold till fresh N ect to ratio of premium(s) paid through NRE Account. Plea	the client with HDFC Life.
## In case of proportionate payout, please provide two NEFT mandates i.e for NRE account and non-NRE account.		
Declaration: 1. I/We hereby declare that the particulars given above a	re correct. If the transaction is delayed or not effected a	at all for reason of incomplete or incorrect information.
I/We would not hold HDFC Life Insurance Company Limite to them due to any incorrect information provided above. 2. I/We further undertake to refund any excess amount who	d or any of its associates/agents responsible. Further, I ag	ree to keep HDFC Life indemnified against any loss caused
SIGN HE		CICNLIERE
Date: DD/MM/YYYY	Place:	
Place:Signature of Acco	ount Holder	Signature of Policyholder
		(If policyholder is different from account holder)
Declaration to be made by a third person where the F vernacular or has not filled the application:	olicyholder/Beneficiary/Appointee/Assignee has	affixed his/her thumb impression or has signed in
The Policyholder has affixed his/her thumb impression/has explained to the Policyholder in la signed/affixed his/her thumb impression in my presence. Name of the Declarant:	nguage and have truthfully recorded the answers prov	
Date:DD/MM/YYYYPlace:		Signature of Third Person
NOTE		
With reference to recent regulatory changes, please submit Account/service@hdfclife.com/18602679999/HDFC Life br		with immediate effect. Please update via My
HDFC Life Insurance Company Limited (HDFC Life). CIN: L6 Regd. Off: 13th Floor, Lodha Excelus, Apollo Mills Compound, N. For queries or more information, Call 1860-267-9999 (local charges Email – service@hdfclife.com nriservice@hdfclife.com (For NR	M. Joshi Marg, Mahalaxmi, Mumbai - 400 011. s apply). DO NOT prefix any country code e.g. +91 or 00. Availal	ble Mon-Sat from 10 am to 7 pm
Customer Acknowledgement Copy - (NEFT Mandate)		
Client ID: Policy No.:	Interaction ID:	Policyholder /Beneficiary name:
Documents Submitted: Original Cancelled Cheque		FORM 10 F
Customer Relations Officer:	Date: DD/MM/YYYY Time:	HDFC Life Stamp
For queries or more information, call us on 1860-267-9999 (Local char Email – service@hdfcli	ges apply) 022-68446530 (STD charges apply). Available Mon-Sat fr fe.com nriservice@hdfclife.com (For NRI customers only) Vi:	

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