

C.A. CERTIFICATE FORMAT

We thank you for applying for an HDFC Life Insurance Policy. To enable us to assess your application, kindly get this CA Certificate Format completed and duly signed by your Chartered Accountant.

Application No/ Proposal No			
Name of Life to be Assured			
1) Occupation			
2) PAN number details:			
2. a) PAN Number	Number		
2. b) If the PAN card number is not available, kindly provide reasons for the same.			
3) Kindly provide business turnover	Rs.		
4) Kindly provide details regarding source of income and gross income for latest three assessment years. (Please mention exact assessment year for example 2007-08,2006-07.)			
Source of income	Assessment year I (AY.....)	Assessment year II (AY.....)	Assessment year III (AY.....)
a) Salary income	Rs.	Rs.	Rs.
b) Business/ Profession	Rs.	Rs.	Rs.
c) Partnership income	Rs.	Rs.	Rs.
d) Income from House Property	Rs.	Rs.	Rs.
e) Agricultural income	Rs.	Rs.	Rs.
f) Investment income	Rs.	Rs.	Rs.
g) Commission income	Rs.	Rs.	Rs.
h) Any other source income	Rs.	Rs.	Rs.
Total income	Rs.	Rs.	Rs.

5. Kindly answer to following regarding latest advance tax paid.	
a) Date of latest Advance tax payment.	
b) Amount of latest Advance tax paid.	Rs.

Declaration of Chartered Accountant:

I certify that Mr/Ms.....is my client and the above information is based on the IT returns/ relevant financial documents verified by me in respect of my client for the respective assessment years.

Name of the Chartered Accountant			
Address			
Registration Number		Telephone Number	
Stamp & Seal			

Signature of Chartered Accountant
who has completed this report

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Date:.....
Place:.....

Declaration of Life to be Assured:

I certify that Mr/Ms.....is my Chartered Accountant.

Signature/thumb impression
(Life to be Assured)

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Date:.....
Place:.....

Signature/thumb impression
(Proposed Policy Holder if
different from Life to be Assured)

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Date:.....
Place:.....

In the case of thumb impression\ signature in vernacular language:

In case of thumb impression of the Life to be Assured the same should be attested by a person of standing whose identity can be easily established, but unconnected with the Company and this declaration should be made by him.

I hereby declare that I have explained the contents of this form to the Life to be Assured in _____ language and have truthfully recorded the answers provided to me and that the Life to be Assured has signed /affixed thumb impression(s) above after fully understanding the contents thereof.

Signature

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Date:.....
Place:.....

Name and address of the declarant _____

NOTE: With reference to recent regulatory changes, please submit PAN or Form 60 (if you do not have a PAN) with HDFC Life with immediate effect.

HDFC Life Insurance Company Limited. 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). DO NOT prefix any country code e.g. +91 or 00. Available Mon-Sat from 10 am to 7 pm |

Email - service@hdfclife.com | nriservice@hdfclife.com (For NRI customers only) | Visit - www.hdfclife.com