

## **NAME DECLARATION**

I/ We hereby declare that,

\_\_\_\_\_ and \_\_\_\_\_

are names of the same person.

I shall indemnify HDFC Life and keep them free from any claims, damages, penalties, charges or levies whatsoever due to the representation done above by me.

(Signature of the Declarant)

Policy Holder Name: \_\_\_\_\_ Date: \_\_\_\_\_ Place: \_\_\_\_\_

Policy Number: \_\_\_\_\_ Email ID \*: \_\_\_\_\_

Contact No.\*: Off: \_\_\_\_\_ / Res: \_\_\_\_\_ / Mob: \_\_\_\_\_ (Mobile number is preferable)

### **Declaration to be made by a third person where:**

The life assured has affixed his/her thumb impression / has signed in vernacular / has not filled the application.

I hereby declare that I have explained the contents of this application form to the life to be assured in \_\_\_\_\_ language and have truthfully recorded the answers provided to me. I further declare that the life to be assured has signed/affixed his/her thumb impression in my presence.

Declarant Name \_\_\_\_\_ Signature \_\_\_\_\_ Date: \_\_\_\_\_

Declarant Address: \_\_\_\_\_