HDFC Group Non-linked Plan - Additional Contribution Form

Scheme Type:	
Trust Name:	
Policy Number:	
No. of members joining the scheme:	

CONTRIBUTIONS FOR EXISTING/NEW ACCOUNT(S) JOINING THE SCHEME

S. No.	Member Reference No.*	Member Account No.**	Date of birth (DD-MM-YYYY)***	Name of Member Account	Other Contribution

*Please mention employee code (unique) as member reference no.
** Member Account no to be provided for existing members under a DC scheme
*** DOB to be provided for new members joining a DC scheme (For GVIP)
The above fields are not applicable for the existing member's contribution under a Superannuation DC scheme and for DB schemes.

(Please specify any other relevant details)

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 Standard Life Insurance Company Ltd. (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. Rubber stamp with address is of the trust or the company as applicable.

Date: _____

Policyholder Stamp

General Rules:
(1) This investment instruction must be received before the daily cut-off time. Please contact us for details of our current cut-off time and valuation time.
(2) Please complete the required documentation so that the transaction is completed and interest accumulation starts accordingly.
(2) All terms and conditions as specified in the Policy Documents and Schedule thereto shall apply.
(3) The plans mentioned in this proposal form have been approved by IRDAI (Insurance Regulatory and Development Authority of India) and have been allotted a Unique Identification Number (UIN). This number is available on IRDAI's website for verification.
(4) Premiums paid by the policyholder into the policy are being made in accordance with AS 15 (if applicable).