

Annexure II (c)

Product Code (Please take code from quotation)

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4.	4. Education: □Post Grad. & Above □Graduate □Diploma □12 th Pass □Below 10 th □Uneducated																														
5.	5. Qualification:																														
6.	6. Residence: □Rented □self/spouse owned □ family owned □ Company Provided																														
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	Full name of the appointee (please leave a space for each part of name) Mr Ms or Title First name Surname																														
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Re	Relationship of the appointee to the Beneficiary																														
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III Annuity Particulars (a) Single Premium (Purchase price): Rs.	
(b) Annuity options (please tick appropriate box)	
Annuity Option	Allocation % of Single Premiu
☐ Life Annuity	
☐ Life Annuity with return of purchase price	
☐ Life Annuity guaranteed 5 years and life thereafter	
☐ Life Annuity guaranteed 10 years and life thereafter	
☐ Life Annuity guaranteed 15 years and life thereafter	
☐ Joint Life, last survivor (this option is applicable only where the annuitant	
has a spouse at the time of commencement of pension.)	
☐ Joint Life, last survivor with return of purchase price on the death of the last	
survivor (this option is applicable only where the annuitant has a spouse at the time of commencement of pension).	
Life Annuity with increase of 5%	
Life Annuity with return of 50 %purchase price	
Life Annuity with return of 75 %purchase price	
Life Annuity with return of balance purchase price	
Joint Life, last survivor with return of Purchase price in parts	
Life Annuity with return of purchase price on Critical illness(CI) or Permanent Disability due to Accident (PD) or Death	
(c) Frequency of Annuity payments ☐ Yearly ☐ Half-Yearly ☐ Quarterly ☐ Monthly	
(d) TDS rate applicable:	
 Tax rate as mentioned above would be applicable only in the first (sepathe second year onwards, Annuity income would be treated as sole incomposed and tax would be applied as per prevailing tax slabs. The effective tax rate has been worked as per meaning given in the TDS against the treatment of the tr	ome for calculating
(e) Mode of Annuity payments □Cheque □Electronic Credit* * Incase of Electronic Credit please provide the following details 1. MICR Code 2. IFSC Code	
(f) Bank Details	
Bank Name: Branch:	
Contact no of Bank Branch:	
Your bank account no to which the annuity proceeds are to be credited to:	
The same account to the times are all proceeds are to be discussed to:	

DECLARATION

I/We declare that I/We have answered the questions in the annuity proposal form after being explained by the advisor of the ICICI Prudential Life Insurance Company Limited, (hereinafter ICICI Prudential Life Insurance Co. Ltd.

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referred to as 'the Company') and have fully understood the nature of the questions and the importance of disclosing all material information while answering such questions. I/We further declare that the answers given by me/us to all the questions in the annuity proposal form are true and complete in every respect and that I/We have not withheld any material information or suppressed any material fact. I / We have made no statement to the Insurance Advisor, or any other person associated with ICICI Prudential Life Insurance Company Limited which in any way modifies the answers and statements on this application. I also certify that I have read and



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understood the quotation as published by the company that was handed over to me along with this form.

The company reserves the right to accept, decline or offer alternate terms on my proposal for Insurance. This proposal form shall be a part of the insurance policy contract, in case of its acceptance by the company The conditions and the benefits shall be subject to variation in accordance to the applicable law Signature of Annuitant Date: Place: In case of thumb impression or signature in vernacular, the same is to be witnessed as below. DECLARATION FOR SIGNING IN VERNACULAR LANGUAGE I, (Name of declarant) inhabitant , do hereby state and declare on solemn affirmation as under: I have read out and explained the contents of the proposal form and all other documents incidental to availing the Insurance Policy from ICICI Prudential Life Insurance Company Limited to Mr/Mrs./Ms._____ and he/she/they have understood the same and do hereby agree to abide by all the terms and conditions of the policy and the clauses of the same. I declare that whatever I have stated hereinabove is true and correct to the best of my knowledge and belief. Solemnly affirmed at this day of 200. Signed (Sign of Declarant) (Sign of Annuitant signing in vernacular language) Name of Declarant Date I / We certify that the product applied for by me / us and the contents of the annuity proposal form have been clearly explained to me/us and I / we have fully understood them. I/ We further certify that the replies in the annuity proposal form have been recorded as per the information provided by me/us. Signature of the person filling the form Signature /thumb impression* of the the annuitant (* A thumb impression has to be witnessed by the Declarant.)

Name of the person filling the form

Date: Place

Name of the authorized Signatory of the Trust/Employer:

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Signature	of	the	authorized	signatory:	Date
Place:					

Section 41 of the Insurance Act, 1938 - No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer:

Provided that acceptance by an insurance agent of commission in connection with a policy of life insurance taken out by himself on his own life shall not be deemed to be acceptance of a rebate of premium within the meaning of this sub-section if at the time of such acceptance the insurance agent satisfies the prescribed conditions establishing that he is a bona fide insurance agent employed by the insurer.

Section 45 of the Insurance Act, 1938:- No policy of life insurance effected before the commencement of this Act shall after the expiry of two years from the date of commencement of this Act and no policy of life insurance effected after the coming into force of this Act shall, after the expiry calf two years from the date on which it was effected be called in question by an insurer on the ground that statement made in the proposal or in any report of a medical officer, or referee, or friend of the insured, or in any other document leading to the issue of the policy, was inaccurate or false, unless the insurer shows that such statement was on a material matter or suppressed facts which it was material to disclose and that it was fraudulently made by the policy-holder and that the policy-holder knew at the time of making it that the statement was false or that it suppressed facts which it was material to disclose:

Provided that nothing in this section shall prevent the insurer from calling for proof of age at any time if he is entitled to do so, and no policy shall be deemed to be called in question merely because the terms of the policy are adjusted on subsequent proof that the age of the life insured was incorrectly stated in the proposal.