

FORM FOR FUND SWITCH / TOP UP

Branch Name	Branch Code				
Received by				I	
Received at Branch Date	L		Time		
PERSONAL DETAILS					
Policy No.					
Mobile No.	Tel No.				
Policy holder's name					
TOPUP PAYMENT DETAILS					
☐ Cash (₹) L	Cheque/Draft No. Cheque/DD date				
Bank Name					
Amount in words (₹)					
TYPES OF DOCUMENT SUBMITTED (FOR TOP UP ONLY)					
Income Proof					
ID Proof					
Address Proof					
DECLARATIONS					
I hereby request that my current fund holding under the above policy be invested in the proportion as mentioned below Fund Switch (FS):					
FROM (Not required in case of Top Up) To					
Fund Name	P	Percentage	Fund Name		Percentage
Fund applicable should be	e as per product Literature.				
Subject to Terms and Condition of policy document					
For Top up Premium Fund allocation has to be mentioned in the "To" Table above.					
General rules:					
• All details are mandatory for processing • Request received up to 3.00 p.m. by the company the closing NAV of the day on which such					
request was received shall be applicable • Request received after 3.00 p.m. by the company the closing NAV of the next business day shall be					
applicable • Unit Linked Life Insurance Products are different from the traditional insurance products and are subject to the market risk • Under this plan, the investment risk in the investment portfolio is borne by the policy holder • For Top UP Income Proof to be submitted if the					
Top Up amount is equal to or greater than `1 Lakh • If the Top Up premium increases the Sum Assured, then acceptance of such Top Premium					
is subject to Underwriting Approval • The allocation of Top would be considered after recovery of all unpaid premium and charges • All rules and regulation of IRDAI are applicable.					
I confirm, I have understood the relevant policy provisions and applicable rules before making this application.					
Policy Owner Signature		Da	te	Place	