

FOR OFFICE USE

Date

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TIME (Tick) ☐ BEFORE 3pm ☐ AFTER 3pm ☐

Stamp of the Branch:

Signature of the Official: _____

DECLARATION

I/We understand that the maturity of the policy results in the termination of the policy and that I/We are required to return the original policy document to the Company. I/ We also understand and agree that the policy shall be deemed to have been duly matured and the company discharged of all liabilities under it upon the payment of maturity value, notwithstanding the non production of the original policy document to the company, for any reason. Where the policy is not submitted to the Company, the policy owner here by agrees to indemnify the Company against all liabilities that the Company may incur on account of any claim being made by any other person on the basis of possession of the policy document or otherwise.

I/We understand that TDS will be applicable as per the prevailing tax laws of India and if valid PAN is not provided, TDS will be deducted as per the prevailing tax rates. IFIL, the company will not liable for the non benefit of credit of Tax deducted at source.

RESIDENTIAL DECLARATION BY POLICY HOLDER

I am a ☐ Non Resident ☐ Resident of India within Section 6 of the Income Tax Act, 1961. In the event there is any income tax demand (including interest, charges or levies) raised in India in respect of these amounts, I/we undertake to pay the demand forthwith and indemnify and hold IDBI Federal Life Insurance Company Ltd. harmless from any income tax demand (including interest, penalty, charges or levies) raised in India on the IDBI Federal life Insurance Company Ltd. on account of any misstatement / misrepresentation/ errors of omission or commission by me or any other person, and provide IDBI Federal Life Insurance Company Ltd. with all information/documents that may be necessary for any proceedings before Income-tax / Appellate Authorities in India.

DISCHARGE RECEIPT

I/We hereby agree to accept the payout amount and confirm of having understood and agree to all the conditions and information mentioned in the form. I/ We discharge the company, IDBI Federal Life Insurance Co Ltd of all my/ our claims or demands and responsibilities under the above mentioned policy.

Note: Discharge Voucher stands cancelled incase request made towards policy payment is rejected by IDBI Federal Life Insurance Co Ltd

Affix One
Rupee
Revenue
Stamp &
Sign Across

Signature of the Policy
Holder/ Assignee
(having understood and agreed
to above declaration)

PLACE																	
DATE																	

DECLARATION (By Person filling the form on behalf of the policy holder for forms signed in Vernacular languages or Thumb Impression)

I _____, having known the policy holder for a period of _____do declare that I have explained the nature of questions contained in this form to the policy holder. I have also explained that the answers to the questions form the basis for accepting this request for Maturity.

Signature of the Person filling the form
on behalf of the policy holder
(For forms signed in Vernacular Language/
Thumb Impression)

DATE																	
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GENERAL INSTRUCTION

1. Amount Payable on Maturity is as per the policy terms and conditions.
2. All the required details in the form should be completely filled in.
3. The cut off time for NAV application in respect of allocation and redemption of units is 3:00 pm. If the maturity falls on a week day except holiday, the same day's unit value will be applicable or else next working day's unit value will be applied.
4. In case policy is assigned, payout will be made to the Assignee and request needs to be signed by Assignee, if payout is required to be made to Assignor then Assignment form is required first.
5. TDS will be applicable as per the prevailing tax laws of India. NRE customer, may submit Form 10 F and TRC for tax exemption,subject to it's validity.
6. Request must be received from Life Assured upon auto vesting.