

PRADHAN MANTRI JEEVAN JYOTI BIMA YOJANA

ANNEXURE - 3 (revised)



CONSENT-CUM-DECLARATION FORM

(To be filled in by members Joining the scheme on or after 01.06.2016)

For Office Use

Agent'/BC'S Name*	Agency/BC Code No.*
Bank A/c detail of Agent/BC_*	
Signature of Agent/Banking Correspondent*	

I hereby give my consent to become a member of "Pradhan Mantri Jeevan Jyoti Bima Yojana" of **LIC of India** which will be administered by **The Varachha Co-Op. Bank Ltd., Surat** under Master Policy No **900100247**.

I hereby authorize you to debit my Savings Bank Account with your Branch with Rs. 330/- (Rupees Three Hundred Thirty Only) plus Service Tax if applicable towards premium of life cover under PMJJBY. I Further authorize you to deduct in future after 25th May and not later than on 1st of June every year untill further instructions, an amount of Rs. 330/- (Rupees Three Hundred Thirty Only) and Service Tax if applicable, or any amount as decided from time to time, which may be intimated immediately if and when revised, towards renewal of coverage under the scheme.

I have not authorized any other bank to debit premium in respect of this scheme. I am aware that my life cover shall be restricted to Rs. 2,00,000/- (Rupees Two Lakh only) in the event of my death.

I have read and understood the scheme rules and I hereby give my consent to become a member of the Scheme. **I am aware that the risk will not be covered during the first 45 days from the date of enrollment into the scheme (line period) and in case of death (other than due to accident) during lien period, no claim would be admissible.**

I authorize the Bank to convey my personal details, given below, as required, regarding my admission into the group insurance scheme to LIC of India.

Application Details, as per Bank / KYC records :

Name of the Account holder (as per Bank record)											
Address											
Savings Bank Account No.						Mobile No.					
Date of Birth				Name and address of Guardian (if nominee is minor) :							
D D M M Y Y Y Y											
Nominee Name											
Nominee DOB				Aadhar Number, if available							
Relation				Email ID :							

I hereby nominate my nominee as above under this scheme.

Nominee being minor, his / her guardian is appointed as above.

I hereby declare that the above statements are true in all respects and that I agree and declare that the above information shall form the basis of admission to the above scheme and that if any information be found untrue, my membership to the scheme shall be treated as cancelled.

Date :

Signature verified

(Branch Official) (Rubber Stamp With Bank Branch Name and Code)

Signature _____

Address _____

ACKNOWLEDGEMENT SLIP CUM CERTIFICATE OF INSURANCE

We hereby acknowledge receipt of "Consent-cum-Declaration Form" from Shri / Smt _____ holding Bank Account No. _____ Aadhar No. _____ consenting and authorizing auto-debit from the specified Bank Account to join the Pradhan Mantri Jeevan Jyoti Bima Yojana with The **LIC of India** for cover under **Master Policy No 900100247** subject to correctness of information provided regarding eligibility and receipt of consideration amount.

Seal & Signature of Authorised Bank Official