

Policyholder Name Mr./Mrs./Ms.

Customer Address/ Usual place of residence

This is with respect to the communication dated regarding choosing of following Annuity option of Reliance Nippon Life Immediate Annuity Plan

against my Plan against policy Further, I/We hereby authorize Reliance Nippon Life Insurance Company Limited to utilise the

maturity proceeds as option chosen below: PAN No. Aadhar No.

Residential status: Indian Non Resident Indian (NRI) Country, if NRI

Residence for Tax purposes in Jurisdiction(s) outside India (If "Yes" then mandatory to fill the FATCA/CRS declaration) Yes No

Kindly choose one of the following options (Please tick the box wherever applicable)

Option A
Utilise the total maturity amount (purchase price) towards the purchase of the annuity through Reliance Nippon Life Insurance Open market option

Option B
Settle % (Maximum 33.33% of the maturity amount allowed) of the maturity amount in lump sum and utilise the balance maturity (purchase price) towards purchase of the annuity through Reliance Nippon Life Insurance Open market option

Details of the Insurer you chose to purchase Annuity from

Name of the Life Insurance Company

(In favour of whom you chose to draw the cheque to purchase Annuity)

Application No. Bank account details for settling maturity amount (maximum 33.33% of maturity value)

Name of the Account Holder Mr./Mrs./Ms.

Documents to be submitted

1. Original Policy Schedule/Policy Document 2. Address and ID Proof 3. Cancelled personalised Cheque/Copy of Passbook (if cheque is not personalised)

I, (Name of the Declarant) Mr./Mrs./Ms.

Son/Daughter of Mr./Mrs./Ms.

am an adult and (please select as appropriate) Friend Acquaintance Relative of the Policyholder

residing at

Further to above confirmation, I/ We have evaluated all the options for annuity purchase and hereby selected the below option. (Please tick one option to purchase Annuity)

Life Annuity Life Annuity with return of purchase price Life Annuity guaranteed for 5, 10, 15 years and payable for life thereafter.

Tick your Annuity payout frequency Monthly Quarterly Half yearly Annually

I Mr/Ms , son /wife/daughter of

have read the contents and I/ we have fully understood the contents mentioned in the Annuity Intimation letter. I understand that I have an option to revise my annuity option on or before

. I understand and agree to the contents in the letter and I/We hereby authorize Reliance Nippon Life Insurance Company Limited ("Company") to process my chosen Annuity Option, if no revised option is received by the Company or before DD/MM/YYYY. I accept this with full knowledge that I have no objection whatsoever in respect of this Annuity process.

Signature/Thumb Impression of the Policyholder
Mobile
City
Date

Signature of the Declarant (If signed in vernacular lang)
Mobile
City
Date

Signature of the Witness
Name
Mobile
City
Date

Reliance Nippon Life Insurance Company Limited (formerly known as Reliance Life Insurance Company Limited). IRDAI Registration No: 121. Registered Office: H Block, 1st Floor, Dhirubhai Ambani Knowledge City, Navi Mumbai, Maharashtra 400710. For more information or any grievance, 1. Call us between 9am to 6pm, Monday to Saturday on our Toll Free Number 1800 102 1010 or 2. Visit us at www.reliancenipponlife.com or 3. Email us at: rnlife.customerservice@relianceada.com. Trade logo displayed above belongs to Anil Dhirubhai Ambani Ventures Private Limited & Nippon Life Insurance Company and used by Reliance Nippon Life Insurance Company Limited under license.

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