RELIANCE NIPPON LIFE INSURANCE

A RELIANCE CAPITAL COMPANY

Freelook Cancellation Request

Policy No. | | | | | | | | |

Date D D M M Y Y Y Y

Dear Sir/Madam,

Please cancel my policy under the free look period and refund the amount as I do not agree with terms and conditions of the policy

For the NAV of ULIP Products, please refer to point no. 2 of the Terms & Conditions on Page 2

Name of Policyholder FIRST LAST

Correspondence Address/ Usual place of residence FIRST LAST FLAT NO.

BUILDING ROAD NAME / NO.

LANDMARK 1

DISTRICT / TALUKA LANDMARK 2

CITY / VILLAGE STATE Pincode

STD ISD Code LANDLINE MOBILE EMAIL ADDRESS

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

Residence for Tax purposes in Jurisdiction(s) outside India ☐ Yes ☐ No

(If "Yes" then mandatory to fill the FATCA/CRS declaration)

Bank Account Details

Policyholder Name as per Bank Records FIRST LAST

BANK NAME BRANCH NAME

ACCOUNT NO. IFSC CODE MICR CODE

*Payment will be credited to the given bank account except in the case where the banks are not participating in Electronic Clearing

_____

Signature of the Policyholder

Date D D M M Y Y Y Y

Attach Cancelled Cheque Here

Policyholder's signature to be taken on cancelled cheque. Cancelled cheque should bear the name of the policyholder/account holder and IFSC/RTGS/NEFT Code. In the absence of these details, the applicant needs to submit a recent bank statement of the same Bank Account. The bank a/c number should be clear and visible (please do not cross on a/c no.). If such details are not available, direct transfer would not be an option.

Freelook Cancellation Form/Version 1.10/June 2019

Terms & Conditions

1. Charges levied & taxes applicable will be deducted from the Premium Amount/Fund Value as mentioned in the Terms & Conditions of the Policy Document
2. In the event of a ULIP policy -
   2.1 Reliance Nippon Life Insurance Company Limited shall also be entitled to repurchase the unit at the price of the units on the date of cancellation over and above the charges & taxes mentioned in point no. 1 (above)
   2.2 If the request for freelook cancellation is received

2.2.1 before 3.00 pm, NAV of the same day of application shall be applicable.

2.2.2 after 3.00 pm, NAV of the next working day shall be applicable.

3. The Contract shall be terminated upon payment of the refund money and the same shall be treated as valid discharge for Reliance Nippon Life Insurance Company Limited
4. In any circumstance, Reliance Nippon Life Insurance Company Limited shall not pay the refund amount in the form of cash
5. If the electronic credit is not affected or is delayed/credited to the wrong account due to incorrect or incomplete information provided, Reliance Nippon Life Insurance Company Limited shall not beheld responsible for such losses
6. If the credit is not affected by your banker for any reason, Reliance Nippon Life Insurance Company Limited reserves the right to make payment through cheque/DD
7. All the above requisitions shall be processed as per the Terms & Conditions mentioned in the policy contract and will be binding
8. In case of submission of cancelled cheque from NRE a/c, payment may be credited through cheque
9. In case of assigned policies, policyholder who owns the title & interest of the policy will eligible to apply for the termination of the contract

I understand and agree to all the above Terms & Conditions as referred above

Signature of the Policyholder

Date D D M M Y Y Y Y

If the signature is in vernacular language, please complete the following declaration

I hereby declare that I have fully explained/translated the contents mentioned in the payout form to

FIRST LAST

and I further declare that he/she/they fully understood the meaning there of.

Signature of the Declarant
(Declarant should not be an employee/advisor of Reliance Nippon Life Insurance)

Date D D M M Y Y Y Y

Name & Address of the Declarant FIRST LAST

Correspondence Address/ Usual place of residence FIRST LAST FLAT NO.

BUILDING ROAD NAME / NO.

LANDMARK 1

DISTRICT / TALUKA LANDMARK 2

CITY / VILLAGE STATE Pincode

STD ISD Code LANDLINE MOBILE 1 EMAIL ADDRESS

I hereby confirm that I have been explained the content in (Language) and have understood the same.

Signature of the Policyholder

Date D D M M Y Y Y Y

Freelook Cancellation Form/Version 1.10/June 2019

FOR BRANCH USE ONLY (Please Tick Off)

- [ ] Customer personally visited the branch
- [ ] Self-attested customer identity proof verified with original and stamped as 'original seen and verified'
- [ ] Personalised cancelled cheque OR non-personalised cheque - Bank Statement (with transactions preceding 3 months) OR Bank Authorization.
- [ ] Signature Proof Attached
- [ ] Given account number matches with the account number in the attached cancelled cheque/Bank Statement
- [ ] Request Time Stamp Affixed
- [ ] Policy is assigned

Customer Acknowledgement

Policy No. | | | | | | | | | SR No. | | | | | | | | | | | | | Date D D M M Y Y Y Y

Signature of the Customer Care Executive (CCE) Branch Stamp Date D D M M Y Y Y Y

Name of the CCE

Reliance Nippon 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.

Beware of Spurious / Fraud Phone calls: IRDAI is not involved in activities like selling insurance policies, announcing bonus or investment of premiums. Public receiving such phone calls are requested to lodge a police complaint.

CIN: U66010MH2001PLC167089

Freelook Cancellation Form/Version 1.10/June 2019