RELIANCE NIPPON LIFE INSURANCE

A RELIANCE CAPITAL COMPANY

Service Request Form (Non Financial)

Policy No

Date D D M M Y Y Y Y

Name of the Policyholder FIRST MIDDLE LAST

Name of the Policy

Contact No.

Change of Address

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

BUILDING ROAD NAME / NO.

LANDMARK 1

DISTRICT / TALUKA LANDMARK 2

CITY / VILLAGE STATE Pin Code

Change of Contact Details

Please mention the new contact details you would like to get rectified/updated in our records

Landline STD code Mobile Email

Change Premium Frequency

Please change my premium paying Frequency to

☐ Monthly ☐ Quarterly ☐ Half Yearly ☐ Yearly

Change in Mode of Premium Payment

Please change my premium paying mode to

☐ Cash/Cheque/DD ☐ ECS ☐ Credit Card

Signature of the Policyholder

Date D D M M Y Y Y Y

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)

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 service request form to

FIRST LAST (Name of the Policyholder)

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 MIDDLE LAST

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

BUILDING ROAD NAME / NO.

LANDMARK 1

DISTRICT / TALUKA LANDMARK 2

CITY / VILLAGE STATE Pin Code

STD ISD Code LANDLINE MOBILE 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

Reliance Nippon Life Insurance Company Limited. IRDAI Registration No: 121. Registered & Corporate Office: Unit Nos. 401B, 402, 403 & 404, 4th Floor, Inspire-BKC, G Block, BKC Main Road, Bandra Kurla Complex, Bandra East, Mumbai - 400051. India. T +91 22 6896 5000. 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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