

Vernacular Declaration Form

Date DDMMYYYY

Declaration to be made when customer signs in vernacular language or uses thumb impression

Application No. [Grid]

Policy Number [Grid]

Request Type [Grid]

I hereby declare that I have fully explained/translated the contents mentioned in the request letter/form submitted for [Grid]

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

(Declarant should not be an employee/advisor of Reliance Nippon Life Insurance Company Ltd.)

Signature of the Declarant

Name & Address of the Declarant [Grid with pre-filled text: F I R S T ... L A S T ... F L A T N O. ... B U I L D I N G ... R O A D N A M E / N O. ... L A N D M A R K 1 ... D I S T R I C T / T A L U K A ... L A N D M A R K 2 ... C I T Y / V I L L A G E ... S T A T E ... Pin Code ... STD ISD Code ... L A N D L I N E ... M O B I L E ... EMAIL ADDRESS]

I hereby confirm that I have been explained the contents in [Grid] (language) and have understood the same.

Signature of the Policyholder/Assignee

For Branch use only

CRM service request no. [Grid]

Name of the CE [Grid]

Signature of the CE

Branch Stamp

Date DDMMYYYY