

Bank Details Submission Form for Endowment Policy Surrender

Policy Number

Policy Holder Name

Date of Birth

Contact Number

Bank Account Details

Account Holder Name

Account Number

Re-enter Account Number

Bank Name

Branch Name

IFSC Code

Bank Address

Declaration

I hereby declare that the above bank details are accurate and belong to the Policy Holder. I request the surrender amount be credited to the above account.

Date

Signature

(Signed physically)