

Nominee Addition Application

For Term Insurance Policy

Policyholder Details

Policy Number

Policyholder Name

Date of Birth

Contact Number

Address

Nominee Details

Nominee Name

Relationship with Policyholder

Nominee Date of Birth

Share (%)

Nominee Address

Appointee Details (if Nominee is minor)

Appointee Name

Relationship with Nominee

Declaration

I hereby request and authorize the insurance company to add/modify the nominee under the above-mentioned policy as per details given above.

Place

Date

Policyholder's Signature