



LIFE INSURANCE CORPORATION OF INDIA

Sr./Br. Manager

Date:

LIC of India

_____ Branch

_____ Division

Dear Sir

Re: Proposal No. _____ Dated _____

With reference to the above proposal, please refer to item No. _____ below

I REQUEST YOU TO/ AGREE FOR ISSUE OF POLICY

1. Under Plan _____ Term _____ For Rs _____ with risk commencing from _____
2. With Age Proof Extra / Health Extra / Impairment Extra / Single Extra at Rs _____ per thousand sum assured per annum.
3. Without Accident Benefit / Disability Benefit / Premium Waiver Benefit / Term Rider
4. With Accident Benefit RESTRICTED TO Rs. _____
5. _____

I CONFIRM

6. The Date of Proposal as _____
7. The Answer to Question No. _____ of proposal as _____
8. **That I have given this consent of mine only after fully understanding the meaning and implication of the changes in terms of acceptance.**

WITNESS:

Signature _____

Name _____

Address _____

Signature of the Proposer