

## **CHANGE OF NOMINATION FORM**

#### Guidelines

- Please fill this form clearly in CAPITAL Letters, as this is used for endorsing your original policy certificate.
- > Please send your original annuity certificate with this form for the endorsement purpose.
- > This form needs to be submitted along with the Notice of Nomination (Page 3), in accordance with the terms and conditions (Page 4) mentioned therein.

Master Policy Number:					Policy Number:				Date(DD/MM/YYYY)														
Nan	ne of	the Ann	uitant	:(As r	ment	ionec	d in t	the p	oolic	y cer	tifica	ate) :											
Mr./Ms/Mrs First Name											1	Surna	ame										
Cor	ntact I	Number	S																				
	STD		R	esidenc	ce								N	/lobile									
Plea	ase tio	ck the a	pprop	riate	optio	n an	d fill	l the	deta	ils u	nder	their	res	pecti	ve h	eadir	ngs i	n the	forr	n.			
	Appoir	ntment (	of Fre	sh No	mine	ee					] Ap	poin	tmeı	nt of	Add	ition	al No	min	ee/s				
	Chang	e of exi	stina	Nomii	nee/s	<b>S</b>		☐ Change of existing Nominee/s ☐ Cancellatio									n of Nominee/s						
											J Cai	ncena	ation	1 OT 1	ıomı	1166/3	•						
Δn	nointi	ment of	Fresh	Nom						_	J Ca	ncella	ation	I OT N	iomi	nee/s	•						
_	•	ment of			inee									OTN	iomi	nee/s	•						
_	•	ment of			inee																		
l he	ereby :	nominat	e Mr./ľ	VIs	ninee (S	Surnai	me)			(F	First N	Name	•)		(N	liddle	Nar	,					
l he	ereby :		e Mr./ľ	VIs	ninee (S	Surnai	me)			(F	First N	Name	•)		(N	liddle	Nar	,					
l he	ereby :	nominat	e Mr./ľ	VIs	ninee (S	Surnai	me)			(F	First N	Name	•)		(N	liddle	Nar	,					
I he	ereby ose da	nominat	e Mr./ľ	Ms	(S	Surnar	me) ( <b>C</b>	DD/M	<b>M/Y</b>	(F <b>/YY</b> )	First N	Name	ng a	t	(N	1iddle	Nar						
I he	ereby ose da	nominate	e Mr./ľ	Ms	(S	Surnar	me) ( <b>C</b>	DD/M	<b>M/Y</b>	(F <b>/YY</b> )	First N	Name	ng a	t	(N	1iddle	Nar						
I he	ereby nose da	nominate	e Mr./I	Ms	(S	Surnar and	me) ( <b>[</b>  d wh	OD/M	I <b>M/Y</b> ` ———	(F <b>YYY</b> )	First N	Name	ng a	t _ (re	(N	fliddle	Nar						
who	ose da	nominate	e Mr./I	Ms	(S	Surnar _ and	me) ( <b>C</b> d wh	o is r	my_ shall	(F	First Nand	Name residi	ng a	t _ (re	(M lation	fliddle n, if a	Nar						
who	ose da	nominate of bir	e Mr./I	Ms	(S	Surnar _ and	me) ( <b>C</b> d wh	o is r	my_ shall	(F	First Nand	Name residi	ng a	t _ (re	(M lation	fliddle n, if a	Nar						

Signature of the Annuitant

Policy Number	(First Name)  Y) and residing a  y the above men  ee details" on p  orking days from	(Middle at (relation, if an tioned policy showing age 2 of this for Sign at the receipt of the state of the receipt of the state of the receipt of the state of the sta	ny) in addition to all be paid in the event of orm.  nature of the Annuitant f this form.
(Surname)  whose date of birth is	(First Name)  Y) and residing a  y the above men  ee details" on p  orking days from	(Middle at (relation, if an tioned policy showing age 2 of this for Sign at the receipt of the state of the receipt of the state of the receipt of the state of the sta	ny) in addition to all be paid in the event of orm.  ature of the Annuitant f this form.
whose date of birth is and who is my  the existing nominee/s to whom the moneys secured by my death.  In case the nominee is a minor, please fill "Appoint"  Your request will be processed within 15 wo  Change of Existing Nominee/s  I hereby cancel the existing nomination in favour of Mr and nominate Mr./Ms	y the above men ee details" on p orking days from	tioned policy shage 2 of this fo	ny) in addition to all be paid in the event or orm.  ature of the Annuitant f this form.
and who is my the existing nominee/s to whom the moneys secured by my death.  In case the nominee is a minor, please fill "Appoint"  > Your request will be processed within 15 wo  Change of Existing Nominee/s  I hereby cancel the existing nomination in favour of Mr and nominate Mr./Ms	y the above men ee details" on p orking days from	tioned policy shape 2 of this for Sign	ny) in addition to all be paid in the event o orm.  nature of the Annuitant f this form.
the existing nominee/s to whom the moneys secured by my death.  In case the nominee is a minor, please fill "Appoint"  Your request will be processed within 15 wo  Change of Existing Nominee/s  I hereby cancel the existing nomination in favour of Mr and nominate Mr./Ms	y the above men ee details" on p orking days from ./Ms (First Name)	tioned policy shape 2 of this for Sign	all be paid in the event or orm.  The acture of the Annuitant of this form.
My death.  In case the nominee is a minor, please fill "Appoint "Appoint"  Your request will be processed within 15 we change of Existing Nominee/s  I hereby cancel the existing nomination in favour of Mr and nominate Mr./Ms.  (Surname)  whose date of birth is (DD/MM/YYY)  and who is my moneys secured by the above mentioned policy shall the case of the processed within 15 we can be processed within 15 w	ee details" on porking days from ./Ms	Sign the receipt of	orm. nature of the Annuitant f this form.
Your request will be processed within 15 we Change of Existing Nominee/s  I hereby cancel the existing nomination in favour of Mr and nominate Mr./Ms.  (Surname)  whose date of birth is (DD/MM/YYY)  and who is my moneys secured by the above mentioned policy shall the content of the co	orking days from ./Ms	Sign n the receipt of	ature of the Annuitant f this form.
Change of Existing Nominee/s  I hereby cancel the existing nomination in favour of Mr and nominate Mr./Ms	./Ms (First Name)	n the receipt of	f this form.
Change of Existing Nominee/s  I hereby cancel the existing nomination in favour of Mr and nominate Mr./Ms	./Ms (First Name)	n the receipt of	f this form.
Change of Existing Nominee/s  I hereby cancel the existing nomination in favour of Mr and nominate Mr./Ms	./Ms (First Name)	n the receipt of	f this form.
Change of Existing Nominee/s  I hereby cancel the existing nomination in favour of Mr and nominate Mr./Ms	./Ms (First Name)	n the receipt of	f this form.
Change of Existing Nominee/s  I hereby cancel the existing nomination in favour of Mr and nominate Mr./Ms	./Ms (First Name)		
I hereby cancel the existing nomination in favour of Mr and nominate Mr./Ms	(First Name)		
I hereby cancel the existing nomination in favour of Mr and nominate Mr./Ms	(First Name)		
and nominate Mr./Ms(Surname)  whose date of birth is (DD/MM/YY)  and who is my moneys secured by the above mentioned policy shall be	(First Name)		
and nominate Mr./Ms(Surname)  whose date of birth is (DD/MM/YY)  and who is my moneys secured by the above mentioned policy shall be	(First Name)		
whose date of birth is (DD/MM/YY) and who is my moneys secured by the above mentioned policy shall be	(First Name)		
whose date of birth is (DD/MM/YYY) and who is my moneys secured by the above mentioned policy shall be	,	(**********	e Name)
and who is my moneys secured by the above mentioned policy shall be	TALIBOT FORIDINA	at	•
moneys secured by the above mentioned policy shall be	i i ) and residing	al	
moneys secured by the above mentioned policy shall be			
		(relation, if a	iny) to whom the
In case the nominee is a minor, please fill "Appoin	pe paid in the eve	ent of my death.	
	tee details" on I	page 2 of this f	orm.
		Sic	gnature of the Annuitar
Cancellation of Nominee		O.	g
Policy Number			
•			haraby rayaka tha
I, Mr./Ms			hereby revoke the
(Surname) (First Name) existing Nomination, which is in favor of Mr./Ms	-المامن ۱۸ ۸/	Name)	

		(Surname)	(First Name)	(Middle Name	<del>!</del> )
executed at		_ the	day of	,20	
				Signature of t	he Annuitar
ppointee Details:	Mandatory, if Nomin	ee is a Minor			
The nominee being	a minor, I hereby appo	oint Mr./Ms			
Residing at				, whose m	arital
Status is	& date of birt	h is	(DD/MM/YYYY)	as the appointee	to
eceive the moneys	secured by the policy	during the minority	of the nominee exe	cuted at	the
				hove appointment	l sign
	_ day of	, 20	In consent of the a		J
nereunder.	 ntee nis form and its particu		Signature o	of the Annuitant	
Signature of Appoi  Content of the	ntee his form and its particu	ılars has been expla nnuitant	Signature of the state of the s	of the Annuitant	
Signature of Appoi  Content of the	ntee his form and its particu	ılars has been expla	Signature of the state of the s	of the Annuitant	
Signature of Appoi  Content of the Signature / Thumb  Name of Witness: M	ntee his form and its particu	nlars has been expla	Signature of the state of the s	of the Annuitant	
Signature of Appoi  Content of the	ntee his form and its particu	ılars has been expla	Signature of the state of the s	of the Annuitant	
Signature of Appoi  Content of the Content of Witness: Maddress:	ntee his form and its particu	ılars has been expla	Signature of the state of the s	of the Annuitant	

# **Notice of Nomination**

### <u>Guidelines</u>

- > Please fill this form clearly in CAPITAL Letters, as this is used for endorsing your original policy certificate.
- > This NOTICE needs to be submitted along with your Nomination / Appointee form.

To,						
ICICI Prudenti	ial Life Insurance Co	mpany Ltd.,				
ICICI Prulife T	owers, 1089, Appas	aheb Marathe N	larg,			
Prabhadevi, M	lumbai – 400 025.					
Dear Sir / Mad	am,					
Please effect the	ne following change: (	Tick and fill in th	e part	ticulars for the ch	osen option in the Form)	
■ Appointmen	t of Fresh Nominee			Appointment of	Additional Nominee/s	
☐ Change of E	Existing Nominee/s			Cancellation of	Nominee/s	
Appointment of	f Appointee					
Mr./Ms						
	(Surname)	(Firs	t Nam	ne)	(Middle Name)	
Mr./Ms						
	(Surname)	(Firs	t Nam	ne)	(Middle Name)	
Mr./Ms						
	(Surname)	(Firs	t Nam	ne)	(Middle Name)	
	d the form for the aborefrecting the change	•	e polic	cy certificate. Plea	ase return the enclosed policy	
Executed at		the		day of	, 20	
I have read an	d understood all the	e terms and con	ditio	ns on Page 5.		
					Signature of the Annu	uitant

#### **Terms and conditions - Nomination**

- 1. Either a fresh nomination or the existing nomination can be changed to a new nominee by the Annuitant at any time during the term of the policy by an endorsement on the back of the policy.
- 2. The registration of fresh / change or cancellation of nomination is subject to the receipt of notice and the form by ICICI PruLife.
- 3. Immediately after executing the cancellation of nomination, the policy form and notice must be sent for registration to our Corporate Address.
- 4. If the Annuitant is not conversant with English or is illiterate, the form should be witnessed and the witness needs to certify before such witnessing that the contents of the nomination form were explained by him to the named Annuitant in vernacular and that the Annuitant has affixed his signature / thumb impression in his (witness's) presence after thoroughly understanding the same.
- 5. If the nominee is a minor, an appointee must be appointed to whom the moneys secured by the policy shall be paid in the event of the assured's death during the minority of the nominee.