

## NAME DECLARATION FORM

I hereby declare that \_\_\_\_\_ and \_\_\_\_\_ are names of the same person.

I shall indemnify HDFC Life (the Company) and keep the Company free from any claims, damages, penalties, charges or levies whatsoever due to the representation done above by me.

### Policy Details

Policyholder/Beneficiary\* Name: \_\_\_\_\_

Policy Number :

Date:  DD/MM/YYYY Place: \_\_\_\_\_

SIGN HERE

Signature of Policyholder/Beneficiary\*

\*Only applicable where Beneficiary's KYC details has been received.

### Third Party Declaration

The person who has affixed his/her thumb impression or has signed in vernacular/ has not filled this application form. I hereby declare that the content of this application form has been explained to him/ her and I have truthfully recorded the answers provided to me. I further declare that the said person has signed or affixed his/her thumb impression in my presence.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date:  DD/MM/YYYY Place: \_\_\_\_\_

SIGN HERE

Signature of Third Person

**Note:** With reference to recent regulatory changes, please submit PAN or Form 60 (if you do not have a PAN) with HDFC Life with immediate effect. Please update via My Account/service@hdfclife.com/18602679999/HDFC Life branch. Ignore if submitted.

**HDFC Life Insurance Company Limited (HDFC Life).** CIN: L65110MH2000PLC128245. IRDAI Registration No. 101.

**Regd. Off:** 13th Floor, Lodha Excelus, Apollo Mills Compound, N.M. Joshi Marg, Mahalaxmi, Mumbai - 400 011.

For queries or more information, Call **1860-267-9999** (local charges apply). DO NOT prefix any country code e.g. +91 or 00. Available Mon-Sat from 10 am to 7 pm | Email – [service@hdfclife.com](mailto:service@hdfclife.com) | [nriservice@hdfclife.com](mailto:nriservice@hdfclife.com) (For NRI customers only) Visit – [www.hdfclife.com](http://www.hdfclife.com)