





## REFUND REQUEST FORM

### DECLARATION TO BE MADE IF

Policyholder/Nominee has affixed thumb impression OR Policyholder/Nominee has signed in vernacular OR Policyholder/Nominee has not filled the Application.

I Mr./Ms./Dr. \_\_\_\_\_

Address \_\_\_\_\_

having known the Policyholder/Nominee for a period of \_\_\_\_\_ (month/years); do declare that I have explained the contents of this form to the Policyholder/Nominee in his/her language and have truthfully recorded the answers provided by him/her. I further declare that the Policyholder / Nominee has affixed his signature/thumb impression in my presence.

Date: \_\_\_\_\_ Place: \_\_\_\_\_ Signature of Declarant: \_\_\_\_\_

### FOR OFFICE USE ONLY

Signature verified:  YES  NO

Branch Date/Time Stamp  
(Affix stamp in this box only)

Bank/Branch staff signature: \_\_\_\_\_

#### Branch Checklist:

- Documents as per Unclaimed documents requirement list  Yes  No
- Cancelled Cheque in original / Pass Book Copy (self attested):  Yes  No
- Photo ID proof (self attested):  Yes  No
- Address proof (self attested):  Yes  No
- Customer Signature Verified:  Yes  No

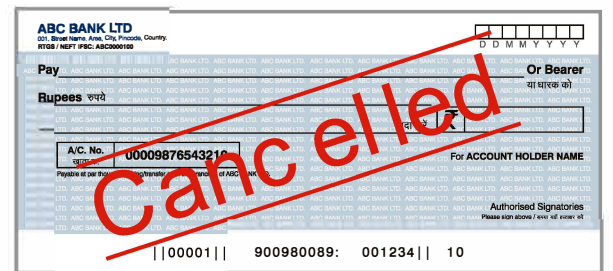
### IMPORTANT GUIDELINES

Please visit our website [www.sudlife.in](http://www.sudlife.in) and check the 'Whats New?' section on the home page for Unclaimed Amount. Submit the documents required basis the 'Reason' provided against your policy.

All proofs submitted to be attested by policyholder .In case of Death-Unclaimed amount ; proofs should be attested by the Nominee.

Cancelled cheque with pre-printed name of the account holder / Self attested Bank Statement / Pass Book attested by bank submitted is mandatory

Documents Required-Unclaimed Amount
<b>Reason - Termination/Excess Premium/Annuity/ Surrender</b> 1. Cancelled cheque 2. Bank Statement 3. Address Proof 4. Photo Identity Proof 5. PAN copy 6. Passbook Copy with name, address and account details
<b>Reason -Excess Premium (Group Policy)</b> 1. Name of Member 2. Loan Account No. ( duly attested by the Bank) 3. Savings Bank Account No. (duly attested by the Bank)
<b>Reason - Claims</b> Requirements for Individual Death Claim (Claims settled but not paid) 1. Nominee's Death Certificate 2. Succession Certificate from Court of Law 3. Bank details of the Beneficiary mentioned in Succession Certificate Requirements for Group Surrender (MRTA) Claims (EFT Rejects) 1. KYC of Life Assured 2. Bank details of the Life Assured - Cancelled Cheque with pre printed name / Bank Pass book copy Requirements for Individual / Group Death Claims (EFT Rejects) 1. KYC of Nominee 2. Bank details of the Nominee - Cancelled Cheque with pre printed name / Bank Pass book copy



#### Customer Service Touch Points

Toll Free No: 18002668833 or  
Land line No: 022 39546300 (Charges apply)  
Timing: 8:00 am to 8:00 pm (Mon - Sat)  
Email Id: [customer@sudlife.in](mailto:customer@sudlife.in)

### Star Union Dai-ichi Life Insurance Company Limited

Registered Office: 11<sup>th</sup> Floor, Vishwaroop IT Park, Plot No. 34, 35 & 38, Sector 30A of IIP, Vashi, Navi Mumbai – 400 703.  
Toll Free No.: 1800 266 8833 (9:30 am to 6:30 pm – Mon to Sat) | Tel.: 022-7196 6200 | Fax: 022-7196 2811  
Email: [customer@sudlife.in](mailto:customer@sudlife.in) | Website: [www.sudlife.in](http://www.sudlife.in) | IRDAI Regn. No. 142 | CIN: U66010MH2007PLC174472

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SUD/May-2016/RRFNer4

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IRDA REGN. NO. 142

### Requirements for Maturity Claims - Non Pension

1. KYC of Policyholder
2. Bank details of the Policyholder - Cancelled Cheque with pre printed name / Bank Pass book copy
3. Original Policy Document
4. Maturity Discharge Voucher duly filled and signed

### Requirements for Maturity Claims - Pension

1. KYC of Policyholder
2. Bank details of the Policyholder - Cancelled Cheque with pre printed name / Bank Pass book copy
3. Original Policy Document
4. Maturity Discharge Voucher duly filled and signed
5. Annuity Option Sheet duly filled and signed
6. Proposal Form duly filled and signed  
(where Fund Value is equal to or more than Rs. 5 lacs)
7. Age Proof (where Fund Value is equal to or more than Rs. 5 lacs)

### Star Union Dai-ichi Life Insurance Company Limited

Registered Office: 11<sup>th</sup> Floor, Vishwaroop IT Park, Plot No. 34, 35 & 38, Sector 30A of IIP, Vashi, Navi Mumbai – 400 703.

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