

Revival / Reinstatement Request Form

Policy No: _____ Branch: _____

Name(s) of Policy Holder(s) : _____

Reason for delayed payment:

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	Yes	No
1. Between the date of the proposal and this declaration, has there been any change in the health of the Life Assured?		
2. Has any proposal been made on the Life Assured for a life insurance policy with HDFC Standard Life during the period between the first unpaid premium till the date of this application?		
3. Has any proposal been made on the Life Assured for any Life Insurance policy with any other life insurance company other than HDFC Standard Life during the period between the first unpaid premium till the date of this application?		
If the answer to any of the above is 'Yes', please provide details:		

I/We declare that all the information given by me/us in this application is true and I/We have not withheld any material fact within my/our knowledge.

I/We wish to reinstate my/our Policy as per the terms and conditions mentioned in the attached quotation. The premium stated therein is being paid along with this request. On receipt of the premium and acceptance of this request, kindly confirm that the Policy has been reinstated.

I understand that in case the company so desires, I/We may be required to submit further documents / undergo further medical tests, for the reinstatement to be considered. In such cases, the attached quotation may be deemed to be null and void and fresh reinstatement terms will be communicated by the company to me/us.

I/We would like to continue paying my/our future renewal premiums by Direct Debit through _____ Bank*, Account Number _____, for which I/We have already submitted a mandate in the past.

*A fresh mandate is required if you wish to opt for a Standing Instruction with HDFC Bank.

Signature(s) of Policy Holder(s)

Date & Place

Policy Holder's Contact No.: _____

Policy Holder's Email ID: _____

Declaration to be made by a third person where:

- The life assured has affixed his/her thumb impression; OR
- The life assured has signed in vernacular; OR
- The life assured has not filled the application.

I hereby declare that I have explained the contents of this application form to the life to be assured in _____ language and have truthfully recorded the answers provided to me. I further declare that the life to be assured has signed/affixed his/her thumb impression in my presence

Declarant Signature: _____ Date: _____

Declarant Address: _____
