



PRADHAN MANTRI SURAKSHA BIMA YOJANA

Consent-cum-Declaration Form

(To be filled in by members joining the scheme during the permitted "Enrolment Period")

1. Name in Full	9. Policy No. <u>200100/42/15/8200000001</u>
2. Address _____ _____ _____	10. Name of the Bank with Address _____ _____ _____
3. Contact No. _____	11. Agency / BC Code No. _____
4. Email ID _____	12. Enrollment Date _____
5. Mobile Number _____	
6. Age (Last Birthday) _____	
7. Name of the Nominee & Relationship _____	
8. Whether suffering from any disability _____ If yes, details thereof _____	

I, Shri / Smt. _____ having a Saving Bank Account No. _____ with AadharNo. _____ registered therein with your Bank, hereby give my consent to become a member of ' Pradhan Mantri Suraksha BimaYojana' which will be administered by the Assam Gramin Vikash Bank as Master Policyholder.

I hereby authorize you to debit my Saving Bank Account with your Branch with Rs. _____ /-(_____ Only), plus applicable Service Tax , on _____ and on 1st June every subsequent years.

I declare that I am not insured under Pradhan Mantri Suraksha BimaYojana under any other Savings Bank Account In case the same is found to exist, premium shall stand forefieted.

I agree that my membership in the scheme will remain in force as long as all premiums due are paid and until I have attained age 70 years nearer birthday as on Annual Renewal Date.

I agree to abide by the terms and conditions of the above Scheme, I agree to your conveying my personal details, as required, regarding my admission into the Pradhan Mantri Suraksha Bima scheme to National Insurance Company Limited.

I hereby declare that the above statements are true in all respects and that I agree and declare that the above information shall form the basis of admission to the above scheme and that if any, information be found untrue, my membership to the scheme, shall be treated as cancelled from my date of joining the scheme and all monies paid in respect thereof shall stand forfeited.

Dated at _____ on the _____ day of _____ 20 _____.

Signature verified
(Bank Branch Official)

Signature of the Account Holder

ACKNOWLEDGEMENT SLIP

We hereby acknowledge receipt of "Proposal Form with consent-cum-Declaration Form" from Shri/Smt., holding Saving Bank Account No. _____, Aadhar No. _____ consenting to joint the Pradhan Mantri Suraksha Bima Scheme with National Insurance Company Limited

Seal & Signature of Authorised Bank Official