• Customer KYC - Passport with arrival & departure dates • Visa copy with arrival & departure dates

FATCA CRS Declaration

Change in Personal/Policy Details Form

	Policy No	Date D D M M Y Y Y Y
Policyholder Details		
Name of the Policyholder	M I D D L E	L A S T
Name of the Policy		
Contact No.	Email	
(The above fields are mandatory for processing all servicing requ	rests)	
Change of Address		
Correspondence address Permanent address		
Correspondence Address/ Permanent address	ST	L A S T F L A T N O.
BUILDING	ROA	N A M E / N O.
	LAN	I D M A R K 1
DISTRICT/TAL	J K A L A N	I D M A R K 2
CITY/VILLAGE	STA	T E Pin Code
Documents required - Address Proof (Aadhaar card/ Passport/ Electivoter's ID/Driving License) or any other valid documents as per preva		II (2 months)/ Bank account statement (not more than 3 months)/
	illing AML-KTC goldelines.	
Change of Contact Details Please mention the new contact details you would like to get rectified	/undated in our records	
		F
	ate Mobile	Email
Change Premium Frequency		
Please change my premium paying Frequency to		
Monthly Quarterly Half Yearly Yearly		
Bank Account Details Updation Policy Holder Name as per Bank Records F I R S T		E LAST
Bank Name		Branch
Bank Account No		IFSC Code
Bank Account type		
Documents required - Cancelled personalised cheque leaf/ Bank acc	count statement (not more than 3 months)	or any other valid documents as per prevailing AML-KYC guidelines.
PAN Number Updation		
PAN Number Docum	ents required - Copy of PAN Card	
GST Number Updation		
GST Number Docum	ents required - Copy of GST Certificate	
Change in Residential status		
Current Residential status: RI NRI Country, if NRI		
Documents required for residential status change from NRI to Inc	lian	
Customer KYC - Passport with arrival & departure dates Vis	sa copy with arrival & departure dates	
Documents required for residential status change from Indian to	NDI	

• Form 10F & Declaration

• Special Residential Questionnaire. (NRI Questionnaire)

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Note: I have understood the meaning and scope of the change request form and take complete responsibility of the changes submitted by me. Any changes in the Policy / Personal details are subject to the policy terms and conditions and relevant underwriting guidelines.

Declaration: I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that Reliance Nippon Life reserves the right to take appropriate action

Signature	of the	Policy	vholde

If the signature is in vernacular language, please complete the following declaration	
I hereby declare that I have fully explained/ translated the contents mentioned in the Change in Personal/Policy details form to:	
F I R S T M I D D L E L A S T	
and I further declare that he/she/they fully understood the meaning there of.	
Signature of the Declarant (Declarant should not be an employee/advisor of Reliance Nippon Life Insurance)	Date D D M M Y Y Y
Name & Address of the Declarant	
I hereby confirm that I have been explained the content in	(Language) and have understood the same.
Signature of the Policyholder	Date D D M M Y Y Y

Reliance Nippon Life Insurance Company Limited. IRDAI Registration No. 121. Registered & Corporate Office: Unit Nos. 401B, 402, 403 & 404, 4th Floor, Inspire-BKC, G Block, BKC Main Road, Bandra Kurla Complex, Bandra East, Mumbai - 400051. India. T +91 22 6896 5000. For more information or any grievance, 1. Call us between 8 am to 8 pm, Monday to Saturday (except public holidays) on our Toll-Free Number - 1800 102 1010 or 2. Visit us at www.reliancenipponlife.com 3. Email us at: rnlife.customerservice@relianceada.com. 4. Chat with us on our WhatsApp number (+91) 7208852700. Trade logo displayed above belongs to Anil Dhirubhai Ambani Ventures Private Limited & Nippon Life Insurance Company and used by Reliance Nippon Life Insurance Company Limited under license.

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