

Change In Signature Form

(Only for walk-in customers)

To be used when there is a voluntary declaration of change in signature or when there is a variation in signatures identified at the time of submitting a request.

Policy holder details

Name: _____

Policy Number: PAN:

1. Declaration by Policy holder for Change in Signature

- I hereby declare that my new signature is as mentioned below and from now onwards, and all actions and transactions authorised / executed by me and acted upon by HDFC Life, new signature shall be valid.
- I agree to defend and hold harmless, HDFC Life on account of any claim, liability charge, demand action or proceedings initiated against HDFC Life, by anyone including statutory, Governmental or regulatory body, on account of HDFC Life processing any transaction / requests received for the mentioned policy with the new signatures, herein.

2. Reason For Changing Signature

- I want to update my new signature# Unable to recollect/replicate my old signature
- Inconvenience in signing the old signature due to medical reason Others (Please specify a valid reason): _____
- (Please submit treatment copy and Hospital report)

3. A self-attested copy of following has been enclosed for verification purpose:

Valid proof of identity of the Policy holder/Beneficiary, whose signature has been affixed below is required and the same has to be verified by the Employee in original. Any of the following documents reflecting the new signature will be accepted as photo identity proof. A self-attested copy of the same (after due verification of the originals) will be required to register your request for change in the signature.

- PAN Card Driving License Passport Bankers Certificate (Account should be at least 6 months old) Government issued ID card / Armed force ID card with photo

Old Signature (in case of change of signature)	New/Specimen Signature 1	New/Specimen Signature 2	New/Specimen Signature 3

Only if 2nd point 1st option selected

Note: All three specimen signature are mandatory for new signature updation

Date: DD / MM / YYYY

Place: _____

4. 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.

Declarant Name: _____

Date: DD/MM/YYYY

Address: _____

Place: _____

SIGN HERE

Signature of the Third Person

5. Declaration and Details of Branch Official (For HDFC Life Branch Use Only)

I hereby declare that I have accepted the request based on one/multiple facts below. The customer has signed in front of me and I have verified the identity with original name of the valid identity proof

(If none of the below checklist is ticked , please submit Banker Verification)

- Policy document in original has been produced KYC document submitted at NB / inception stage has been produced in original
- Proof of at least last 2 years premium paid has been submitted Bank statement with bank seal Printed bank pass book with the transaction entry KYC document bearing signature
- Any one of the simultaneous request has been processed via Insta serve successfully (Name of the Request & Request no.)

Branch Name: _____

Date: DD/MM/YYYY

Employee Name: _____

Place: _____

Employee ID: _____

SIGN HERE

Branch Official Signature

Customer Acknowledgement Copy (Change In Signature Form)

Policy No.: _____ Policy holder Name: _____

Customer Relations Officer: _____ Date: DD/MM/YYYY Time: _____

Branch Stamp

For queries or more information, call us on 022-68446530 (Call charges apply). Available Mon-Sat from 10 am to 7 pm. DO NOT prefix any country code e.g. +91 or 00. |

Email - service@hdfclife.com | nriservice@hdfclife.com (For NRI customers only) Visit - www.hdfclife.com

6. Banker's Verification (In the event none of the documents provided under Point 3 has the new signature provided by the Policy holder, then a Banker's Verification can be provided as prescribed below by an Officer with a rank at least of a Branch Manager of such Bank's branch where Policy holder has any type of account mentioned herein which is at least 3 months old.)

Account Type: Savings Current NRE NRO PAN:

Bank Account No.:

Bank Name: _____

Branch Name: _____

Name of the Branch Manager: _____

Date: DD/MM/YYYY

Place: _____

SIGN HERE

Signature of the Account Holder

Latest Customer Photograph.

Signature of Branch manager and Banks seal.

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.

Customer Acknowledgement Copy (Change In Signature Form)

Policy No.: _____ Policy holder Name: _____

Customer Relations Officer: _____ Date: DD/MM/YYYY Time: _____

Branch Stamp