kotak® Life Insurance

## PARTIAL WITHDRAWAL/SURRENDER FORM

A JOINT VENTURE WITH OLD MUTUAL plc

INSTRUCTIONS FOR FILLING UP THE FORM: 1. The policyholder must sign any cancellation/alteration. 2 Surrender or withdrawal will be done by liquidating the required number of units of the Fund at the prevailing Unit Price. 3. In case of complete application received by the Branch / Head Office of the insurer up to 3 p.m. on a working day, the same day's closing NAV will be applicable. If application received after 3 p.m., units will be redeemed at the next working day's unit prize. 4. This application will not be effective until it is officially accepted by Kotak Mahindra Old Mutual Life Insurance Ltd. 5. Please refer to the policy contract for terms & conditions regarding Partial Withdrawal/Surrender. 5. Please note that in case any of your premium cheque is yet to be cleared, surrender proceeds shall be processed but be paid out only after clearance of premium cheque.

## 1. PARTICULARS OF THE POLICYHOLDER

a) Policy Number Email Address

b) Full Name : Title Surname First Name Middle Name

c) Contact No : STD Mobile

d) Address:

City: State : Pin : MA ND AT OR Y

## 2. DECLARATION BY THE POLICYHOLDER

I wish to withdraw the amount indicated below from units credited to my policy. I understand and agree to all information and terms and conditions given above and in my policy contract.

Place

Date D D M M Y Y Y Y

Signature of the Policy holder or Guardian (if life insured is minor) or Assignee (if policy is Assigned)

## 3. DETAILS REGARDING PARTIAL WITHDRAWAL / FULL SURRENDER / TOP UP SURRENDER

Name of the Plan

Partial Withdrawal Yes No Full Surrender of Policy Yes No Top up Surrender Full Part

Withdrawal Amount (in case of partial withdrawal) Rs._____

For **Kotak Safe Investment Plan II** **Kotak Flexi Plan** **Kotak Platinum Advantage Plan-Shield Account**

Kotak Guaranteed Growth Kotak Guaranteed Balanced Kotak Guaranteed Bond

Kotak Guaranteed Floating Rate Kotak Guaranteed Gilt Kotak Guaranteed Money Market

For **Kotak Retirement Plans (Unit-linked)**

Kotak Pension Balanced Kotak Pension Bond Kotak Pension Floating Rate

Kotak Pension Gilt Kotak Pension Money Market

For **Kotak Easy Growth Plan** **Kotak Platinum Advantage Plan-Dynamic Account** **Kotak Headstart Plans**

**Kotak Smart Advantage**[1] **Kotak Long Life Plan** **Top-up Premium**

Opportunities Fund Kotak Aggressive Growth Kotak Dynamic Growth

Kotak Dynamic Balanced Kotak Dynamic Floor[2] Kotak Dynamic Bond

Kotak Dynamic Gilt Kotak Dynamic Floating Rate Kotak Dynamic Money Market

For **Kotak Privileged Assurance Plan**

Kotak Advantage MultiplierII Kotak Advantage Plus II

For KRIP 2/3 Annuity payout (Choose any of the following option)

LIC of India ICICI Pru Birla Sun Life

Reliance Life Max New York Life Aviva Life

MetLife SBI Life Bajaj Allianze Life

TATA Aig Life Bharti AXA Life Shriram Life

[1]Kotak Smart Advantage has only 3 fund options available – Dynamic Bond Fund, Dynamic Floor Fund and Opportunities Fund.

[2]Not available with Kotak Easy Growth Plans

Please note that for full surrender of policy, the policy document/certificate of life insurance cover must be returned together with the application.

| Plan name | Part surrender in multiples of |
|---|---|
| Kotak Safe Investment Plan | 10000 |
| Kotak Safe Investment Plan II | 1000 |
| Kotak Flexi Plan | 10000 |
| Kotak Flexi Plan II | 1000 |
| Kotak Easy Growth Plan (1.02 times) | 10000 |
| Kotak Easy Growth Plan (1.25 times) | 10000 |
| Kotak Easy Growth Plan (5 times) | 10000 |
| Head start Assure wealth Single life | 1000 |
| Head start Assure wealth Joint life | 1000 |
| Head start Future protect Single life | 1000 |
| Head start Future protect Joint life | 1000 |
| Long life secure plus | 1000 |
| Long life wealth plus | 1000 |
| Platinum advantage plan | 1000 |
| Smart Advantage Plan | 1000 |
| Kotak Platinum Advantage Plus | 1000 |

## 4. SETTLEMENT OPTIONS (Pay directly to my bank account mentioned here, please attach a blank cancelled cheque)

Name of the Policy holder as per Bank record

* Bank Name & Address

* Account Type

* Account No:

* IFSC Code

* MICR Code

## 5. DECLARATION BY THE PERSON FILLING IN THE FORM (For form filled in by a scribe or for forms signed in vernacular languages)

I_____, residing at _____ having known the proposer for a period of _____ do declare that I have explained the nature of the questions contained in this form to the proposer. I have also explained that the answers to the questions form the basis for accepting this request for Partial Withdrawal/Surrender.

Date D D M M Y Y Y Y

Signature of the Life Advisor

Signature of Scribe

## 6. For Office only (Affix date and time stamp here)



## ACKNOWLEDGEMENT

We acknowledge the receipt of request for partial surrender/full surrender for Policy no.: _____.

Branch Name

Documents received with this request

Date D D M M Y Y Y Y

Time H H M M

Name of branch co-ordinator

Signature of branch co-ordinator

Kotak Mahindra Old Mutual Life Insurance Ltd. Regn. No. : 107, Regd. Office: 9th floor, Godrej Coliseum, Behind Everard Nagar, Sion (E), Mumbai - 400 022.
Insurance is the subject matter of the solicitation. 1.7/052008