

NAME DECLARATION

I/ We hereby declare that,

_____ and _____

are names of the same person.

I shall indemnify HDFC Life and keep them free from any claims, damages, penalties, charges or levies whatsoever due to the representation done above by me.

X

(Signature of the Declarant)

Policy Holder Name: _____ Date: _____ Place: _____

Policy Number: _____ Email ID *: _____

Contact No.*: Off: _____ / Res: _____ / Mob: _____ (Mobile number is preferable)

Declaration to be made by a third person where:

The life assured has affixed his/her thumb impression / has signed in vernacular / 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 Name _____ Signature _____ Date: _____

Declarant Address: _____