CLIENT DETAILS

Existing HDFC Life Policy No:-
Name of Proposer:
Father Name:Mother Name:
Place of Birth: Gender: - Male / Female
Education:
Height:, Alcohol Tobacco
Visible Marks of Identification: -
Nominee Name: & DOB:
Email Id: Mobile No:
Occupation Detail:, Nature of work,
Designation:
Employers Name & Address:
Annual Income:
Existing Life Insurance Cover:
Life Insurance Cover Bought in Last 5yrs
Life Insurance Cover Bought in Last 1yr
Family Doctors Name & Address:
Personal Medical History:
(if any problem or hospitalization in last 5 years)

Family History: - Heart disease, BP, Stroke, Diabetes, Kidney Disease, Cancer, Paralysis, Thyroid, etc.

Document REQUIRED: -

- 1. Pan Card
- 2. Address proof (Passport or Aadhar Card or Electric Bill),
- 3. Income Proof:- Last 2 yrs. ITR and Computation of Income, or Last 3 months Salary Slip or Last 6 months Bank Statement
- 4. One Photo