डाक जीवन बीमा Postal Life Insurance	NACH MANDATE FORM																	РО	SB		Othe	er Ba	nks									
Tick (✓) CREATE	UMRN																						Date	е		D	D	M	M	Y	Y	Υ
MODIFY	Sponsor Bank's Code										Utility Code																					
CANCEL																																
I/We hereby authorize														avings/Other Banks-SB/CA/CC/SB-NRE/SB-NRO/Other																		
Bank Account nu	mber																															
With Bank (Bank Name)														MIC	R																	
	IFSC & MICR are non-mandatory for POSB Accounts																															
an amount of Rupees \`₹																																
Frequency Monthly Quarterly H-Yearly Yearly Debit Date of Due Month (Tick) 07th 12th 17th Debit Type (Tick) Maximum Amount Fixed Amount																																
Policy Number	olicy Number H9)1																			
PLI HO office ID (For Office Use)														Е	mai	IID																
1. I agree for debit of mandate processing charges by the bank whom I am authorizing to debit my account as per latest schedule of charges of the bank.																																
Pe	riod							-	-						-		-	-		-			-									
From		Signature of Primary Account Holder									Signature of Account Holder										Signature of Account Holder											
To X X X	x x x x	Х		1. Name of Account Holder								2. Name of Account Holder									3. Name of Account Holder											
Until Cancelled o				•		-	•					•		•														•	•	•		
2. This is to confirm that the declaration has been carefully read, understood & made by me/us. I am authorizing Postal Life Insurance to debit my account based on the instructions as agreed and signed by me/us.													ns as																			

- 3. I have understood that I am authorized to cancel/amend this mandate by appropriately communicating the cancellation/amendment request to Postal Life Insurance where I have authorized the debit.

Terms & Condition

1. NACH facility can be availed for new policy as well as for existing policy for all modes (yearly, half-yearly, quarterly, and monthly), NACH mandate form can be submitted in any post office. 2. If mandate is rejected by customer's bank, premium can be paid in cash at PO counter or online through PLI customer portal at www.pli.indiapost.gov.in . Fresh mandate needs to be submitted by the customer for registration. 3. At the time of opting for NACH for existing policy, policy should be in active i.e. all the premium has to be updated till current month. 4. Arrears of premium can not be collected through NACH. 5. NACH facility can be opted only if bank from which premium is to be paid is on NACH platform and bank account is CBS (Core Banking Solutions) compatible & policy should be available in 'Core Insurance Solution' (CIS). 6. In case the mandate is rejected by customer's bank due to any reasons, a fresh mandate should be submitted to PLI. 7. NACH deduction can commence only after mandate is accepted by customer's bank and acceptance is updated in PLI's database. If any premium falls due in the meanwhile, the same shall be paid in cash at PO counter or through alternate channel online at PLI Customer

Portal by the customer. Debit dates for deduction of premium will be 07th, 12th and 17th of due month. 8. If NACH deduction is dishonored, premium is to be paid in cash at any PO counter or through alternate online channel at PLI customer Portal with default fee, if any. For dishonors, banks too may charge some amount as per their rules. 9. PLI will not be responsible for any dishonor raised by the bank. Any dispute regarding dishonor should be taken up with the bank. 10. Fresh NACH mandate form is to be submitted to PLI in case of change in policy conditions which leads to increase in premium and in case of change in Bank account, 11, Sometimes due to some technical issues or other reasons/error, premium NACH processing may be delayed by a few days. Kindly ensure availability of funds in the account to avoid dishonors. 12. I hereby agree that this physical mandate given by me/us can be converted into an electronic record in accordance with applicable provisions of IT Act, subsequent to which the physical mandate can be destroyed. I/We shall not be entitled to question conversion of physical mandate into electronic record by the Bank in the event of any dispute regarding the mandate given by me/us.

Signature of Policyholder Date: / /