



ANDHRA PRADESH MAHESH CO-OPERATIVE URBAN BANK LTD.
(MULTI-STATE SCHEDULED BANK)
Head Office: 8-2-680 / 1 & 2, Road No. 12, Banjara Hills, Hyderabad - 500 034 (T.S.)
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PRADHAN MANTRI JEEVAN JYOTI BIMA YOJANA (PMJJBY) – (Annexure-3-Rev)

CONSENT-CUM-DECLARATION FORM

(To be filled in by members joining the scheme on or after 01.09.2018)

For Office Use

Agent/BC's Name*	Agency/BC Code No.*
Bank A/c details of Agent/BC – *	Bank:
Signature of Agent/Banking Correspondent*	

I, hereby give my consent to become a member of 'Pradhan Mantri Jeevan Jyoti Bima Yojana' of LIC of India which will be administered by your Bank under **Master Policy No.**

I hereby authorize you to debit my Savings Bank Account with your Branch with ₹ _____/- (Rupees _____ Only) and GST if applicable towards premium of life cover under PMJJBY. I further authorize you to deduct in future after 21st May and not later than 31st May every year until further instructions, an amount of ₹.330/- (Rupees three hundred thirty only) and GST if applicable, or any amount as decided from time to time, which may be intimated immediately if and when revised, towards renewal of coverage under the scheme.

I have not authorized any other bank to debit premium in respect of this scheme. I am aware that my life cover shall be restricted to ₹.2,00,000/- only in the event of my death.

I have read and understood the Scheme rules and I hereby give my consent to become a member of the Scheme. **I am aware that the risk will not be covered during the first 45 days from the date of enrollment into the scheme (lien period) and in case of death (other than due to accident) during lien period, no claim would be admissible.**

I authorize the Bank to convey my personal details, given below, as required, regarding my admission into the group insurance scheme to LIC OF INDIA

Applicant Details, as per Bank / KYC records:

Name of the Account holder (as per Bank records)	
Date of birth of Account holder	
Savings Bank Account No.	Aadhar Number of Account holder, if available
E-mail Id	Mobile No.
Name, address and relationship of nominee	Name and address of Guardian (if nominee is minor)
Age of Nominee	Address

I hereby nominate my nominee as above under this scheme.

Nominee being minor, his / her guardian is appointed as above.

I hereby declare that the above statements are true in all respects and that I agree and declare that the above information shall form the basis of admission to the above scheme and that if any information be found untrue, my membership to the scheme shall be treated as cancelled.

Date: _____

Signature

Address:

Signature verified

(Branch Official) (Rubber Stamp with bank branch name and code)

ACKNOWLEDGEMENT SLIP CUM CERTIFICATE OF INSURANCE

We hereby acknowledge receipt of "Consent-cum-Declaration Form" from Sri / Smt. holding Bank Account No..... Aadhar No..... consenting and authorizing auto-debit from the specified Bank Account to join the Pradhan Mantri Jeevan Jyoti Bima Yojana with LIC of India for cover under **Master Policy No** _____, subject to correctness of information provided regarding eligibility and receipt of consideration amount.

Seal & Signature of Authorised Bank Official