



## Declaration

The rules and regulations of Insurance Regulatory and Development Authority India & Insurance Repository pertaining to an e-Insurance Account which are in force now along with the information as displayed on Aditya Birla Sun Life Insurance Company Limited (ABSLI) website on managing policy through E-Insurance Account have been read by me and I have understood the same and I agree to abide by and to be bound by the rules as are in force from time to time for such e-Insurance Account. I hereby declare that the particulars given herein are true, correct and complete to the best of my knowledge and belief, the documents submitted along with this application are genuine and I am not making this application for the purpose of contravention of any Act, Rules, Regulations or any statute or legislation or any Notifications, Directions issued by any governmental or statutory authority from time to time. I authorise the Insurance Repository to send any policy and account related information through email and SMS on the contact details as registered with the IR in case of an existing e-IA and in the case of an application to open an e-IA the IR may send any policy and account related information through email and SMS on the contact details as mentioned in the application for insurance as submitted along with this form to open an e-IA. In case of any physical policies being issued by the Insurance Company from whom I obtain an e-policy, the address in the e-Insurance Account shall override the address provided for the physical policies. I understand that all the communication relating to any physical/ e-policy will be sent to the address registered with the Insurance Repository. I agree to inform the Repository of any changes in the details mentioned in this form and in case of delay the said repository shall not be liable in case it acts on the said information which has not been updated. Further, in case I update the details with the Insurance Company, I authorise the insurance company to submit the same to the IR as selected by me for update in the e-Insurance Account and the said update will be applicable to all policies of any insurer that I hold/ will hold in the said account. I authorise the Repository to pass on the information to any Insurance Company that I have approached for availing of insurance cover. I further agree that any false / misleading information given by me or suppression of any material fact will render my e-Insurance Account liable for termination and further action.

I hereby authorise the Insurance Repository / Insurance Company to disclose, share, remit in any form, mode or manner, all / any of the information provided by me to the respective Insurance Companies and / or to their authorised agents and representatives in which I may transact / have transacted including all changes, updates to such information as and when provided by me.

I hereby agree to provide any additional information / documentation that may be required by the Authorised Parties, in connection with this application. I hereby confirm that this is a unique e-Insurance Account opening application and I have not applied to the same Insurance Repository or any other Insurance Repository for an e-Insurance Account in the past.

I would like to receive my insurance policy and all the information related to the proposed insurance policy through the Insurance Repository as selected hereinabove.

I hereby consent to be contacted for any service/transaction related to this/these policy/ies offered by ABSLI in spite of being registered with the National Do Not Call (NDNC) Registry with TRAI.

I have authorized ABSLI to update my communication address and contact details as per my EIA account.

I am aware the details furnished by me, including KYC documents, for the KYC form and Bank account opening form will be used to open the eIA. I hereby give my consent for the same.

Name of eIA Holder

Signature of the eIA Holder

## Vernacular Declaration

I, \_\_\_\_\_ (name of the scribe) residing at \_\_\_\_\_ hereby confirm that the contents of the application was explained to Mr/Mrs/Ms. \_\_\_\_\_ (Policy Owner).

After fully understanding the contents and information thoroughly, the above said Policy Owner had signed in my presence on 

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\_\_\_\_\_  
Name of Scribe

\_\_\_\_\_  
Signature of Scribe

**Contact Us** Phone : 1800-270-7000 (Toll free from 9 am to 9 pm Monday to Saturday)  
Email : care.lifeinsurance@adityabirlacapital.com  
Website : www.adityabirlasunlifeinsurance.com

### Key Notes:

- In case of successful conversion to e-policy, the original policy document held in physical form will be invalid and no future transactions or requests will be processed on the basis of the physical policy document.
- Post conversion of physical policy document to e-policy, all transactions or requests need to carry the Electronic Insurance Account (EIA) number.
- All policies registered under your client id against the stated policy no/nos. on the form will be converted to e-policy.
- Photograph is mandatory only at the time of existing policy conversion/Electronic insurance account opening. The same is not mandatory in case of new policy issuance as photograph is already submitted with ABSLI application form.

Aditya Birla Sun Life Insurance Company Limited  
(Formerly known as Birla Sun Life Insurance Company Limited)  
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**Life Insurance**

Aditya Birla Sun Life Insurance Company Ltd.



**ADITYA BIRLA  
CAPITAL**

1800-270-7000