

Instruction for Payment of Initial Premium Renewal Premium(s) Both

Policy No.:

(In case of renewal premium)

Or

Application No.:

(In case of premium for new application submitted)

Name of the Applicant/Policy Holder:

Policy holder Contact No.:

Premium Band < = 25,000 < = 50,000 < = 1,00,000

> Rs.1,00,000 Please Specify:

Email ID:

Please update my contact details provided above in your company records.

Opted Debit Date (tick any one) 01st 15th

Name of the Credit Card Owner:

Card Issuing Bank:

Credit Card No.:

Card Expiry Date

Relationship of Credit Card Owner with Life Insured: Self Spouse Parent / Child

Signature of Credit Card holder

Signature of Policy Holder

Date:

Declaration:

- I hereby agree to make payments of premiums including taxes and other statutory levies on premium as may be applicable from time to time, and authorize DLF Pramerica Life Insurance Company Limited ("the Company") to debit the given Credit Card account with the amount of the premium towards initial/renewal or both and continue debiting in case of renewal premium or both for the duration of the insurance plan and policy, subject to the terms and conditions of the policy.
- I understand and agree that the risk under the insurance plan and policy will be assumed by the Company only after my credit card account is debited with the amount of the premium and not earlier and the premium amount is received by the company. I understand and agree that non receipt in case of the first premium payable under the policy shall result in the policy becoming void, whereas in respect of subsequent premiums shall result in lapsation of the Policy, such lapsation being governed by the terms and conditions of the policy.
- I hereby agree and confirm that the credit card issuing bank is not acting as an agent of the company or myself in accepting the debit to the credit card account with the premium amounts, or otherwise dealing with the premium amount(s) payable under the policy, in any manner.
- I understand and agree that in the event my credit card account expires, or is not renewed by me for any reason, I shall comply with the Company's direction in ensuring that any premium amount payable by me is paid to Company through Cheque or Cash that point of time or till the time card is renewed.
- I hereby agree and confirm that all the information mentioned above is true to the best of my knowledge.
- I agree & understand that CCSI debit facility is available for Modal Premium only. Premium for Top-up should be paid by mode other than CCSI, as stipulated by the Company.
- We, understand and accept that the transaction will be effected at opted debit date. In the event of the above mentioned expiry date changing, a fresh form for authorization of payment through Credit Card will have to be submitted at any of the DLF Pramerica Life Insurance Company Limited offices.

Please Note: (1) Please enclose a self-attested photocopy of the front side of your credit card. The same is required for auditing purpose only.

(2) Only Master and Visa Credit Cards are acceptable.