



**PRADHAN MANTRI SURAKSHA BIMA YOJANA  
Consent-cum-Declaration Form**

(To be filled in by members joining the scheme during the permitted "Enrolment Period")

**Savings Bank AccountNo.**

**Date of Entry into the Scheme :** 1<sup>st</sup> June / July / August / September, 2015

1. Name in Full	5. Mobile /Contact Number _____
2. Address _____ _____ _____	6. Aadhar No, if available _____.
3. Date of Birth ( As per KYC document) (dd/mm/yyyy)	7. Whether suffering from any disability _____ If yes, details thereof _____
4. Email ID _____	

I hereby give my consent to become a member of ' Pradhan Mantri Suraksha Bima Yojana' which will be administered by the above Bank as Master Policyholder.

I hereby authorize you to debit my Saving Bank Account with your Branch with Rs. 12/- (Rupees Twelve only) at this time and on or before 31<sup>st</sup> May every subsequent year for the next \_\_\_\_\_ years / until further instructions to the contrary (*strike out what is inapplicable*) a sum of Rupees twelve or a revised amount that may be decided with immediate intimation to me.

I hereby nominate my \_\_\_\_\_ (Relation) Mr./Ms. \_\_\_\_\_ as the nominee for the benefits under the scheme, in the event of my death. In the event of my death before the nominee reaching the age of 18 years, I hereby appoint Mr./Ms. \_\_\_\_\_ as the legal guardian of the nominee for the purpose of receiving the benefits under the scheme.

I declare that I am not insured under Pradhan Mantri Suraksha Bima Yojana under any other Savings Bank Account In case the same is found to exist, premium shall stand forfeited and no claims would be paid.

I agree that the cover shall commence from the 1<sup>st</sup> of the month subsequent to the date of enrolment in the scheme.

I agree that to pay full annual premium even if I join the Scheme after the commencement of the Master Policy.

I agree that my membership in the scheme will remain in force as long as all premiums due are paid and until I have attained age 70 years as on Annual Renewal Date.

I agree to abide by the terms and conditions of the above Scheme, I agree to your conveying my personal details, as required, regarding my admission into the Pradhan Mantri Suraksha Bima scheme to \_\_\_\_\_ (Name of the Insurance Company, to be preprinted).

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 from my date of joining the scheme and all monies paid in respect thereof shall stand forfeited.

Dated at \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_.

Signature verified  
(Bank Branch Official)

Signature of the Account Holder

**ACKNOWLEDGEMENT cum CERTIFICATE OF INSURANCE**

We hereby acknowledge receipt of "Proposal Form with consent-cum-Declaration Form" from Shri/Smt., \_\_\_\_\_ holding Saving Bank Account No. \_\_\_\_\_, Aadhar No. \_\_\_\_\_ consenting and authorizing auto-debit from the specified Savings Account to join the Pradhan Mantri Suraksha Bima Yojana with \_\_\_\_\_ (Name of the Insurance Company) under Master Policy No. \_\_\_\_\_ certifying coverage as per the Scheme.

**Seal & Signature of Authorised Bank Official**

