

Annexure 1

**PRADHAN MANTRI JEEVAN JYOTHI BIMA YOJANA –
CLAIM FORM**

(To be completed by the Claimant & Bank)

1. Name of the Scheme : **PradhanMantriJeevanJyotiBimaYojana**
2. Policy No. :
3. Full Name and Address of the Bank :

4. Name of the Deceased Member :
5. Savings Bank A/c No. of Deceased Member :
6. AADHAAR No. of Deceased (if available) :
7. Date of entry into scheme by member :
8. Date of Death of member :
9. Cause of Death :

10. Name of Nominee* :
11. Relationship of Nominee :
12. Address of the Nominee :

13. Mobile No. of the Nominee :
14. AADHAAR No. if available :
15. Details of Savings Bank A/c of Nominee :
IFS Code :
Savings Bank A/c No. :

P.T.O

We hereby declare that the answers to all the above questions are true in every respect and this is the only claim preferred under the PradhanMantriJeevanJyotiBimaYojana for the above deceased member. We enclose **Death Certificate** as the proof of death of the Member along with a duly executed discharge form.

*In case the Nominee is a minor, the Guardian/Appointee may fill in the claim form.

(Signature of the Nominee* /Claimant)

We hereby certify that the above member was covered under the PMJBY Scheme and premium was debited from his bank account on the renewal date prior to his/her death and remitted to Life Insurance Corporation of India. We also certify that as per our records, Shri/Smt..... is the nominee of the above insured Member for the said scheme.

Place :

Date :

(Seal)

Senior / Branch Manager

..... Branch

Counter Signed by

GENERAL MANAGER

(Seal)

Encl : Death Certificate and Discharge Form