## Life Insurance

Aditya Birla Sun Life Insurance Company Ltd.



PROTECTING INVESTING FINANCING ADVISING

NRI/FNIO/PIO QUESTIONN	IAIRE
Application No:	Client ID: Form ID:
Policy Number 1:	Policy Number 2:
	ured both are NRI, a separate NRI questionnaire is required for both)
Thousand I which will all a	area both are rain, a separate rain questioninaire is required for bothy
Personal details:	
Name:	
Father Name:	
Nationality: Indian	Other (Specify)
Country of Birth: Indian	Other (Specify)
Are you of Indian Origin:	<u></u> No
Country of Permanent residence: Indian	Other (Specify)
Date from which you become a permanent resider	
Country of Current residence: Indian	Other (Specify)
Date of recent visit to India:	Passport No.:
Help us know you better	! For which financial goal did you choose your life insurance Policy?
For Your Family & You	For Efficient Financial Planning For Your Aspirations
Childs Education	Saving Wealth Creation
Childs Marriage	Wealth Creation Retirement Planning
Family Protection & Risk	☐ Tax planning ☐ Legacy Planning
Protection against Health	Business Continuity
Cover Outstanding Loans	
FINO/PIO	
Do you Stay in India? Yes	No (If Yes pls answer below):
a) Duration of your Stay in India: Years	Month
b) Nature of VISA held:	
c) Purpose of your Stay In India: Student	Gainful employment Business Others (Specify Reason):
	Guinal employment
Other Details:	
Residence Address 1	Area: Area:
address while in India Address 2	City/Town/Village:
(Pincode mandatory) Address 3	State:
Picode:	Email:
Purpose of your stay abroad: Student	Gainful employment Business Others (Specify Reason):
If you are a student, state the nature and details o	f your studies abroad:
Intended duration of stay abroad: Years	Month
Type of address: Residential/business	Residential Business Registered office
Your full address while Address 1	Area:
abroad (Please Address 2	City/Town/Village:
mention pincode/ Address 3	State:
zipcode if applicable) Picode:	Email:
Email ID:	
Telephone Numbers: Residence	Office Mobile:
Tax Details of other countries	
Are you holding citizenship of any other country?	Yes No If yes, please provide details below
Are you a tax resident of any other country?	Yes No If yes, please provide details below
Country#	Tax Identification Number <sup>%</sup> Identification Type (TIN or Other <sup>%</sup> , please specify)
Country	rax identification Number identification Type (Tilv or Other ~, please specify)

	Form ID:	
Please collect stamped, signed and duly filled acknowledgement slip, which		
Bank details:  Do you have an NRI Account Yes No If yes, please  Type of Account (from which premium is paid) NRE NRO	fumish following details	
Bank Name: Bank Account Number: IFSC code:	9 digit MICR code:	
Exchange facility availed		
Declaration		
I hereby declare that the foregoing statements and answers are true in every respect and I am agreeable for treating this as a part of the Original Application form. I agree that repatriation of all payments/setlements/claims/maturities etc. will be in INR only and will be as per the exchange control regulations prevailing from time to time in India and subject to withholding tax if any, prevailing from time to time.  I have understood the information requirements of this form (read along with the relevant Instructions pertaining to CRS/FATCA) and hereby confirm that the information provided by me on this Form is true, correct, and complete.  I agree to provide documents and information including bank statements as may be required from time to time for claims, compliance and statutory purposes by ABSLI. I agree that any change in my residential status, payment details and other details will be communicated to ABSLI immediately on change but not later than 10 days of such change.		
Signature of the Policy Owner	Signature of the Life to be insured(This is required on at the time of New Application)	
Witness	Address	
Name		

## **FATCA-CRS Instructions**

Signature \_

Details under FATCA/Foreign Tax Laws: Towards compliance with tax information sharing laws, such as FATCA and CRS, we would be required to seek additional personal, tax and beneficial owner information and certain certifications and documentation from our account holders. Such information may be sought either at the time of account opening or any time subsequently. In certain circumstances (including if we do not receive a valid self-certification from you) we may be obliged to share information on your account with relevant tax authorities. If you have any questions about your tax residency, please contact your tax advisor. Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 10 days. Towards compliance with such laws, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto. As may be required by domestic or overseas regulators/ tax authorities, we may also be constrained to withhold and pay out any sums from your account or close or suspend your account(s).

Date: D D M

If you are a US citizen or resident or greencard holder, please include United States in the foreign country information field along with your US Tax Identification Number. Foreign Account Tax Compliance provisions (commonly known as FATCA) are contained in the US Hire Act 2010.

\$It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form.

Please note that you may receive more than one request for information if you have multiple relationships with ABSLI or its group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

Aditya Birla Sun Life Insurance Company Limited (Formerly known as Birla Sun Life Insurance Company Limited) Regn. No.: 109. Regd Office: One Indiabulls Centre, Tower 1, 16th Floor, Jupiter Mill Compound, 841, Senapati Bapat Marg, Elphinstone Road, Mumbai - 400013 +91 22 6723 9100 | CIN: U99999MH2000PLC128110 www.adityabirlasunlifeinsurance.com

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