## Life Insurance

Aditya Birla Sun Life Insurance Company Ltd.



PROTECTING INVESTING FINANCING ADVISING

## Stop Payment / Cheque Cancellation Request Form Enjoy the convenience of automatic premium payment with NACH.

Policy Number: Policy Owner's Name: Mobile Number: Cheque Cancellation Stop Payment  Cheque Number: Cheque Amount: Cheque Date: D M M Y Y Y Y  PAN: PAN should be furnished when your annual contribution* is Rs. 50,000 or more in a financial year  *Annual contribution would mean total Annual premium across all policies held by you as a customer + sum of all Top ups made in a financial year + any other payments made by you as a customer in the financial year  Reason for Cheque Cancellation / Stop payment	
Cheque lost; Fresh cheque to be issued  Wrong account number printed on cheque  Cheque validity expired  Policy to be reinstated  Amount to be transferred to account (Preprinted cheque / passbook copy required)  Name correction required. (Supporting documents to be submitted) Name required:  Women who wish to change their name/surname post marriage are requested to forward a copy of the Marriage Certificate. For all other requests with significant name change, a copy of the gazette notification is required. Certified true copy(ies) of the supporting document should also be enclosed. Address proof and Photo ID proof with DOB - Self attested and attested by Aditya Birla Sun Life Insurance Company Limited (ABSLI) authorized signatory are also required.  Any other reason:  I hereby agree and confirm that the above details provided by me are true and correct. I request you to update above information in your records. I hereby provide my consent to receive call from Aditya Birla Sun Life Insurance Company Limited (ABSLI) or its authorized Service Providers in connection with any matter related to my above Policy.  Signature of Policy Owner:  Date:  Dat	
ABSLI Staff Name:	ABSLI Staff Signature  Stamp/Seal of Branch
Enclosure:  Original cheque for cancellation Valid photo ID proof Preprinted cheque / Preprinted passbook copy Any other documents	
Bank Account Details (All fields are mandatory)	
Bank Name:	Branch Name:
Bank Address:	
Bank Account Holder's Name:	
Bank Account Number:	11 Digit IFSC Code:
(You can get this code from your bank)  Note: Aditya Birla Sun Life Insurance Company Limited (ABSLI) will not be responsible in case of non credit to your account or if transaction is delayed or not effected at all for reasons of incomplete/incorrect information provided or rejected by your bank. In case of requisite information for direct credit is not received or transaction rejected by bank the payout will be made vide cheque.  Acknowledgement Slip	
Received a request for	against Policy Number:
Policy Owner :	
Branch:	Stamp/Seal of the branch

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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