PERSONAL DETAILS / CONTACT UPDATION FORM Kindly send us this filled form in any of the following ways: Email us the scanned copy to myannuity@iciciprulife.com Send it to us at our communication address mentioned below (Contact Us) Submit it at your nearest ICICI Prudential Life Insurance Branch. To locate your nearest branch visit www.iciciprulife.com Annuity Policy Number (Mandatory) Name of Annuitant (as mentioned in the Policy Certificate) Mr./Ms./Mrs. First Name Middle Name Surname Change of Address for: Annuitant (if no selection, then address for Annuitant will be updated) Nominee For change/updation/correction in your address; provide us with your new address details below along with photocopy of any of the address proofs (Aadhaar copy/Passport/Driving license/Voter's Identity Card, issued by Election Commission of India/Job card issued by NREGA duly signed by an officer of the State GOVT/Letter issued by the National Population Register containing details of name, address or any other document as notified by the Central GOVT in consultation with the Regulator.) Address City State Country **Contact Nos:** STD Office Nominee Spouse Change in Date of Birth: Annuitant Joint Life Assured Appointee DOB Note: Supporting proofs will have to be submitted as per norms. [i.e. Birth Certificate / Driving Licence / Passport] E-Mail ID: Aadhaar No: **Updation of PAN No:** (In case of correction or updation of PAN no., provide us with a copy of your PAN Card) Change / Updation of Bank Account Details: In case of change or updation of bank account details, provide us with a copy of a cancelled cheque. **Bank Name Branch Address Bank Account Number** RUPEES Account Type: Saving Account Current Account MICR Code* (Mandatory for ECS): (You can get this code from your cheque book) IFSC Code (Mandatory for NEFT): (You can get this code from your bank) • Request will be processed in 5 days from the date of receipt of the filled form. • I understand and agree that the submission of this form does not mean that the request will be processed. • I understand that any payout under the policy shall be strictly in accordance with the policy terms and conditions. • I hereby declare that the particulars given in this form are true, correct and complete in all aspects. • I take full responsibility of genuineness and correctness of the details filled herein.

- If any transaction is delayed or not effected at all for any reasons due to incomplete or incorrect information provided by me in this form, I shall not hold the company responsible in any manner whatsoever.
- Further, I understand that the company shall not be held responsible for any non receipt of payment on account of wrong/incorrect/incomplete information given by me in this form.
- I also understand and agree that the Company reserves the right to use any alternative payout option.

Date D D M M Y Y Place:

Annuitant's Signature

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I confirm that all the information provided by me including AADHAAR details to ICICI Prudential Life Insurance Company Ltd. is true, correct and accurate. I do hereby authorize/ allow ICICI Prudential Life Insurance Company Ltd. to access/ fetch the data from UIDAI for the purpose of verification. I further confirm that ICICI Prudential Life Insurance Company Ltd. is authorized to update my AADHAAR number in all my insurance policies, and may obtain the same from its agents / intermediaries.

Communication Address