CDF Ver 4.2 Applicants signing in English. Applicants affixing thumb impression or signing in vernacular language, please ensure relevant confirmation from the witness (attach 'vernacular declaration'). In such cases it would be presumed that the witness would have explained contents of the form and this declaration to the applicant before submission. CDF Ver 4.2 I I F E I N S U R A N C E
Application Number Application Number Application Number Application Number Application Number Application Number PLEASE DO NOT FILL THIS DECLARATION IF THE ABOVE FIELD(S) IS/ARE BLANK OR EDITED.
To , ICICI Prudential Life Insurance Company Ltd. Subject: Submission of Online Application I/We
I/We confirm that I/we have read relevant documentation/information and have understood the product features and benefits. I/We agree and confirm that I/we have submitted the application to buy this product of my/our own accord. I/We hereby confirm that I/We have duly filled the details in the application form or they have been filled in my/our presence and in accordance with the information provided by me/us. I/We acknowledge that the information stated in the above application form is true and correct and I/we have duly checked and verified the same. Further, I/we am/are submitting the requisite documents (Age/Address/Identity/Income Proof and photograph) as applicable for further processing of this application.
I/We am/are aware and agree that the Company has/may have tie-ups with various financial institutions, credit rating agencies, CERSAI* and other such entities to enable sharing/collecting/validating my/our KYC related documents/information, as available with the said institutions/agencies/ entities. I/We also understand and confirm that my/our contact details or other information, may be shared on confidential basis, within the ICICI group and/or with any service provider/third party agency with whom the Company has tie-ups/arrangements, for processing of this proposal or servicing of the resulting policy, and may also be shared if required or permitted by any law, rule or regulation or at the request of any public or regulatory authority or if required for the purpose of preventing fraud. I/we also agree that the PAN details and other information provided by me/us in the application form maybe used by the Company to download/verify my/our KYC documents from the CERSAI* CKYC portal for processing your application. Further, I/we am/are an existing customer(s) of ICICI Bank Limited and give my/our consent to ICICI Bank to share my/our details for the purpose of my/our application/renewal for insurance policy.
[#] Applicable only for assignment of ICICI Pru Loan Protect Plus policy. *Central Registry of Securitisation and Asset Reconstruction and security Interest of India.
 APPLICABLE TO NRI/ PIO/ FOREIGN NATIONAL: These applications shall be processed and underwritten in India and any contract emanating therefrom shall be subject to Indian jurisdiction. The contract/policy shall be solely governed and construed in accordance with the laws of India without any reference to the conflict of laws principles. Further, any dispute arising out of the contract/policy shall be subject to the exclusive jurisdiction of the courts of Mumbai. All policy related communication shall be sent only to communication addresses of India, Bahrain and Dubai. This document/application does not constitute the distribution of any information or the making of offer or solicitation by anyone in any jurisdiction in which such distribution or offer is not authorized or to any person to whom it is unlawful to distribute such a document or make such an offer or solicitation. DECLARATION: I hereby declare and confirm that I am applying for this policy while I am in India/Bahrain/Dubaiand I reside in the country as indicated in the application form appended. I hereby declare and confirm that I am not prohibited/precluded by the laws of any country/jurisdiction to avail life insurance policies from insurance company Ltd. I hereby declare and confirm that I am not prohibited/precluded by the laws of any country/jurisdiction to avail life insurance policies from insurance companies registered in India. IN CASE OF COMBINATION SALES: I have opted for the Combination Solution comprising products like
I hereby declare and confirm that I am not prohibited/precluded by the laws of any country/jurisdiction to avail life insurance policies from insurance companies registered in India. IN CASE OF COMBINATION SALES: I have opted for the Combination Solution comprising products like,, and, and, as it would assist me in planning my finances. The authorized person has explained the product features and options to me. I also understand that these are different products and can also be availed separately. Having chosen to avail these products, I have made the payment of Rs towards the first premium deposit for the above products. Further, I understand and agree that in case application(s) for any of the products is/are rejected, all the applications within this combination would be rejected. Any sum towards premium shall be refunded with deductions of appropriate charges.
 NOTICE OF ASSIGNMENT FOR YOUR ICICI PRU LOAN PROTECT PLUS POLICY You have an option to assign the policy to the financial institution, on certain conditions to invoke the benefits under the policy – in case of non-re-payment of the loan in the unfortunate event of your death. You shall be responsible for payment of all premiums towards the policy. Kindly read the welcome kit confirming details of the assignment. Please note that this document is a notice of assignment. The endorsement for the purpose of assignment shall be subject to issuance of your policy. I understand and agree to assign the policy to the < financial institution > (hereinafter referred to as the "Assignee") from whom I have availed loan. I further affirm that such assignment shall be subject to the condition that in the event of death during the term of the policy, the benefit as per policy terms and conditions will be paid to the said Assignee to the extent of the outstanding loan amount only, if any. Any amount in excess after the above payment shall be paid to my nominee. I understand that submission of this request shall be treated as adequate notice of assignment to the Company.
Date D M Y Y Y Y Place
Applicant's Signature: Life Assured's Signature (if different from proposer) Witness Signature (applicable for assignment)