EDLI Claim Intimation Form



Edelweiss Tokio Life Insurance Company Limited | IRDAI Regn. No.: 147 | CIN: U66010MH2009PLC197336 Registered Office: 6th Floor, Tower 3, Wing 'B', Kohinoor City, Kirol Road, Kurla (W), Mumbai 400070 Corporate Office: 4th Floor, Tower 3, Wing 'B', Kohinoor City, Kirol Road, Kurla (W), Mumbai 400070 Date: D D Group Policy No.: Name of the Group Policyholder **Details of the Deceased** Name of the Deceased & Date of Death **Emp Code** Cause of Death Place of Death Details of the Nominee Name of the Nominee Address & Tel No. In case Nominee is a minor, details of the Appointee to be filled below Address & Tel No. Name of the Appointee The photo id & Address Proof of the Nominee or Appointee (in case of Nominee being a minor) to be accompanied with the intimation form. Electronic Payout option (Direct transfer of funds in your bank A/c) 1. Name of the Bank A/c holder: Branch Name: ___ 2. Bank Name: _____ 3. A/c No.: Saving Current NRI 4. A/c Type: _____ MICR Code: _____ IFSC code: Personalised cancelled cheque required along with this form Payouts would be in accordance and subject to the terms and conditions of the policy. Further, the company reserves the right to use any alternative payout option including demand draft/payable at par cheque in spite of opting for Electronic payout method. I will not hold Edelweiss Tokio Life Insurance Company Ltd. responsible in case of non-credit to my bank account or if the transaction is delayed or not effected at all for reasons of incomplete/incorrect information. Date: DD MM YYYY Signature / Thumb impression of the claimant: do hereby declare that this statement made herein above are true in each and every respect. I/We agree to provide and furnish details and reports as and when required by Edelweiss Tokio Life Insurance Co. Ltd. for processing this claim. Declared at: ____ Signature & Seal of the Group Policyholder Stamp/Seal of the Company Instructions: 1. All fields are mandatory, 2. All other terms and conditions as specified in the Policy documents and Schedule thereto shall apply. **Documents List:**

CLAIMS/CIF(EDLI)- Group/Ver 1.0/1st Feb 2020

Copy of Original Death Certificate duly attested

Cancelled cheque if opted for Electronic Payout option