(Additional form to be completed by the proposers under J eevan Sathi Policy)

Branch Office: $\qquad$
Division : $\qquad$

Proposal No. $\qquad$
Agent's Name $\qquad$
Agent's Code No. $\qquad$

We the undersigned, who desire to effect a Policy under the J eevan Sathi Plan of Assurance of the Corporation for a sum of Rs. $\qquad$ hereby jointly and severally confirm the statements made in our respective proposals for Assurance, dated___ and___ and the replies to the questions to our respective Personal Statements given before the Medical Examiner(s) on the $\qquad$ and $\qquad$ respectively, and we hereby jointly and severally declare that all such statements and replies are true and accept joint responsibility in respect thereof. We further hereby jointly and severally declare that the said several statements and answers in the said document shall be the basis of contract of assurance between us and the Life Insurance Corporation of India and that if any untrue averment be contained therein the said contract shall be absolutely null and void and all moneys which shall have been paid in respect thereof shall stand forfeited to the Corporation.

Dated at $\qquad$ on the $\qquad$ day of $\qquad$ 20

Signature of
Witness: $\qquad$ (1)
(2) $\qquad$
Name \& Occupation : $\qquad$

Address: $\qquad$
(Signature of the lives to be assured)

If the answers to the questions in this form are given in Vernacular or if the answers to the questions are given in English but either one or more of the Proposers sign in vernacular, then the Proposer(s) should declare in his/ their own handwriting above his/ their respective signature(s) that the content in the form were explained to him/them and that his/their replies were given after fully and properly understanding the same.

