



Policy No.: 0000009960087



Policy Type	Sum Assured	Premium Amount
EA/50	₹ 2000000/-	₹ 91960/-*
Date of Proposal	Date of Acceptance	Age at Entry
05/08/2024	05/08/2024	30Years
Premium Frequency	Last Installment	Date of Maturity
Annual	01/08/2043	05/08/2044

*GST rate as applicable for first and renewal years will be charged extra as per orders of the Govt. of India issued from time to time.

Name of Insurant : Ms. LIKHITHA M S
Date of Birth of Insurant : 30/05/1995
Name of Spouse (In YS) : NA
Date of Birth of Spouse :

Address of Insurant : D/O SHREENIVASA
MARABAHALLI
SHETTIHALI RANGANAHALLI, 7353677257
MADHUGIRI
Karnataka, INDIA
(B.G. KAMALA NANDINI)
572132

Date : 12/08/2024
Place : TUMKUR HO

Postmaster HSG-1
Manager
Central Processing Centre
TUMKUR HO KA-SKI 26900000
Tumakuru - 572 101

Signature

MADHUGIRI SO - 572132

PLI Receipt No.: 636678586

Date: 05/07/2024

Name: LIKHITHA M S

Proposal No.: N-EAP0011372179

First Premium*: 96098.00

Taxes: 0.0

Total Amount: 96098.0

Cheque Amount : 0.0

Cash Amount : 96098.0

OP Name: KA-SK126900000

Time: 10:19

*This receipt indicates that proposal and first premium has received. The risk commencement will be subject to acceptance of this proposal by competent authority.



WHEREAS the proposer named as the "Insured" in the Schedule printed below has deposited with the PRESIDENT OF INDIA a proposal and declaration for an Endowment Assurance on his/her own life mentioned in the said Schedule and has agreed that the said proposal and declaration signed by him/her shall be the basis of the contract for such insurance.

AND WHEREAS THE PRESIDENT OF INDIA has accepted the said proposal and has received the first premium paid by the proposer in terms of the letter of acceptance for and insurance of the amount and on the terms stated in the said Schedule.

NOW IT IS HEREBY DECLARED that if the insured shall pay to the Director General of Posts or the officer for the time being performing his functions or any other Officer duly authorised by the PRESIDENT OF INDIA in this behalf, the subsequent periodical premia within the prescribed time limit of such payment as stipulated for in the said Schedule or until his/her death, whichever shall first occur, the PRESIDENT OF INDIA shall be subject and liable to pay the sum mentioned in the said Schedule together with bonus, if any, declared by the PRESIDENT OF INDIA to the insured or his/her assigns as early as possible after the insured has attained the age specified if he/she shall die without receiving payment, unto the Executors, Administrator or Assigns of the insured as early as possible after proof of death of the insured and title of the claimant to the satisfaction of the Director General of Posts or the Officer for the time being performing his functions or any other officer duly authorised by the PRESIDENT OF INDIA in this behalf as aforesaid.

BUT this contract is made subject to the terms of Contract printed overleaf.

AND it is also hereby declared the every endorsement placed on the policy by the Director General of Posts or the officer for the time being performing his functions or any other officer duly authorised by the PRESIDENT OF INDIA in that behalf, shall be deemed part of the policy.

AGE has been admitted as the "age" hereof mentioned in the said Schedule.

SCHEDULE			
DATE OF COMMENCEMENT OF RISK	POLICY No.	SUM ASSURED	TERM
05/08/2024	0000009960087	2000000.00	EA/50
Name, Occupation And Address Of Insured LIKHITHA M S D/O SHREENIVASA MARABAHALLI SHETTIHALI RANGANAHALLI MADHUGIRI KARNATAKA 572132 INDIA 7353677257	Date of Birth of Insured	30/05/1995	Date of Maturity
	Date of Proposal	05/07/2024	05/08/2044
	Date of Declaration	05/07/2024	Details of Premium Payable
	Date of Acceptance	05/08/2024	Mode of Payment
	Age at Entry	30	CASH/CHEQUE
			Amount*
			91960/- (ANNUAL)
			Last Premium Due
			01/08/2043

Period during which premia will be payable : Till the stipulated date of last payment or prior death of the life assured whichever is earlier.

Event or events on the happening of which the sum assured is to become payable : On survival of Life Assured to the stipulated date of maturity or at death if earlier.

Beneficiary to receive proceeds under this policy : The assured or his/her assignee or nominee(s) under section 39 of the Insurance Act 1938 or Proving Executors or Administrators or other Legal Representatives who should take out representation to Insured's Estate or limited to the moneys payable under this policy from any court of any State or Territory of the Union of India.

NOMINATION [under section 39 of the Insurance Act (1938)]

Name(s) of the Nominee(s)	Age	Relationship
NAGAMANI	26	SISTER

*Tax(es), if any levied by Government will be charged extra.

Office Seal & Date

Place :

MADHUGIRI SO

(L.P.G. KAMALA NANDINI)

Postmaster HSO-1
Manager, OBC (PLI/RPLI)
Central Processing Centre
Head Post Office
for and on behalf of the PRESIDENT OF INDIA
Tumakuru - 572 101



DEPARTMENT OF POSTS
POSTAL LIFE INSURANCE
TUMKUR HO - KA-SK126900000
TUMKUR HO

Letter No. 0000009960087

Dated: 12/08/2024

Ms. LIKHITHA M S
D/O SHREENIVASA, MARABAHALLI
SHETTIHALI RANGANAHALLI, 7353677257
MADHUGIRI,
Karnataka, INDIA
572132

Sub: Acceptance letter of your proposal.

RE: Policy Number: 0000009960087
Insured Name: LIKHITHA M S

Dear Ms. LIKHITHA M S,

We are happy to inform that your proposal dated 05/07/2024 for Postal Life Insurance has been accepted on 05/08/2024. With this, the risk of your life has been under written with effect from 05/08/2024. The money paid by you on 05/07/2024 has been adjusted as your first premium

Policy No	Policy Type	Sum assured (in ₹)	Maturity term in yrs	Premium (In ₹)	Date of Birth
0000009960087	EA	2000000.00	50	91960.00	30/05/1995

*GST rates as applicable for first & renewal years will be charged extra, as per the orders of Government of India issued from time-to-time.

PLI premium should be paid on or before last working day of every month or as per the premium due date.

In case the policy bond is not received by you within a period of 15 days from the date of acceptance of the proposal, you are requested to contact to the nearest office at the earliest.

Thank you for choosing Postal Life Insurance for your life insurance needs. If you have any queries pertaining to your life insurance coverage, please contact your Agent or nearest Post Office or our customer service center at 1-800-180-5232/155232. You may contact from Monday to Saturday between 10:30 AM to 4:30 PM.

(L.P.G. KAMALA NANDINI)

Sincerely,

Manager

CPG/PLI-RPEH
TUMKUR HO-1.

Enclosure : 1. First premium Receipt
2. Premium receipt book
3. Original policy bond.



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