**Annexure-2**

**Customer Verification Form**

Note:-

Fields marked with (**\***) are mandatory remarks to be updated.

|  |  |
| --- | --- |
| **Policy Number\*-:** **7583046** | **Age\*-:NA** |
| **Customer Name\*-:** **SINGH KUMAR RAHUL** | **Received the Policy\*-:YES** |
| **Applied for Policy\*-:YES** | **App No-:** **A60729340** |
| **Allocation Date\*-:AUGUST 11,2021** |  |
| **Date and Time of Field Visit\*-:SEPTEMBER 06 ,2021 & 5:00 PM** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Existing Address Details\*** |  | **New Address(if any)\*** |  |
| **Address** | RAHUL KUMAR SINGH S/O LATE SITA RAM SINGH AT-JHAUA PO-BENWALIA | **Address** |  |
| **Pin Code** | 802351 | **Pin Code** |  |
| **Landmark** | NA | **Landmark** |  |
| **Landline No & Extension Number** | NA | **Landline No & Extension Number** |  |
| **E-mail ID 1** | NA | **E-mail ID 1** |  |
| **E-mail ID 2** | NA | **E-mail ID 2** |  |
| **Mobile Number\*** | 7654987152 | **Phone Number 1** |  |

**Other Details-:**

|  |  |
| --- | --- |
| **Marital Status\*** | MARRIED |
| **Total Family Members** | 06 |
| **Nominee Name \*** | NA |
| **Nominee Email** | NA |
| **Occupation\*** |  |
| **Education** |  |
| **Company Name\*** | NA |
| **Office Address** | NA |
| **Annual Income\*** | NA |
| **Health Status (enquire if LA is suffering from any ailment/ health issues or had undergone any surgery)\*** | HEALTHY |

**In case, subscriber is not available, specify details of Third Party confirmation including spouse/children/relation/neighbor*(this check needs to be done when LA is not available even after giving appointment)*\***

|  |  |
| --- | --- |
| **Details obtained from family representatives:\*** | |
| **Customer Representative Name (if any)** |  |
| **Relationship with LA** |  |
| **Contact number of the representative\*** |  |
| **Representative Comments:** | |

|  |  |
| --- | --- |
| **Details obtained during vicinity check:\*** | |
| **Name of the person met** | **NA** |
| **Address of the person met** | **NA** |
| **Contact number of the person met\*** | **NA** |
| **Vicinity check remarks: NA** | |

**Residence Status**

|  |  |  |  |
| --- | --- | --- | --- |
| **Type of House** | SINGLE STORIED | **Traceability** | EASY TO TRACE |
| **Location** | RESIDENTIAL AREA | **Ownership\*** | PARENTS OWNED |

**Product Information**

|  |  |
| --- | --- |
| **Premium Amount** | NOT AVAILABLE |
| **Product Name** | NOT AVAILABLE |
| **Premium Frequency** | NOT AVAILABLE |
| **Sum Assured & Accidental** | NOT AVAILABLE |
| **Policy Term** | NOT AVAILABLE |
| **Premium Paying Term** | NOT AVAILABLE |

**Final Remarks\*-:**

|  |
| --- |
| **WE VISITED AT THE ADDRESS.FOUND ADDRESS IS CORRECT.WE MET LA AND HE TOLD US THAT THE HOUSE IN WHICH HE HAS BEEN LIVING BY BIRTH IS PARTENTS OWNED.THER ARE 5 MEMBERS IN HIS FAMILY IN WHICH LA IS THE ONLY EARNING MEMBER.LA IS RUNNING A BUSINESS(LADIES GARMENTS STORE) SINCE 7 YEARS.HIS ANNUAL INCOME IS AROUND 6 LAKHS.WE CHECKED WITH HIS NEIGHBOUR HAMID ANSARI.LA DID NOT LET US TAKE HIS PHOTOGRAPH.** |

**Photographs\*-:**

**IDs\***

|  |  |
| --- | --- |
|  |  |
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|  |  |

|  |  |
| --- | --- |
| **Final Status** | **POSITIVE** |