

# भारतीय जीवन बीमा निगम Life Insurance Corporation of Judia Application For First Loan in respect of

TI)	e Susurance Corporation	o, Jaaiu								1-06-69		m 519	6)
			Addr	ess a	at w	hich	ı L	oan	C	neque sl	nould l	be sent	
	ch Manager, se Corporation of India, Branch Office.												
			Date	•									
Dear Sir,	Re: Policy No .												
Please grant	me/us an advance of Rs												1.
	an against the above policy, bounding half yearly.												
I am/ We are	also agreeable to the follow	ing endors	semen	t be	ing <sub>]</sub>	plac	ed	on	the	Policy	, viz.		
	C(S) BY WAY OF LOAN W ALL BE MADE BY THE C NS":-												
assignees as	by shall be assigned absolute security for the payment of the incurred in connection the	the advanc											ses
(2) The advan	nces shall NOT be repaid wi settled.	ithin a peri	od of	six	mon	iths	fro	om t	the	date on	which	n the	
successors an when the rela anniversary of	n the advance(s) shall be pained assignees at the rate to be ative advance is made, the first on the date six months befate on which the relative advance and the six months befate on which the relative advance.	specified rst payment fore the ne	by the nt of i	Contere	rpor est to anni	atio o be vers	on e m sar	in re ade y, w	esp or hi	ect of ear the dat chever i	ach ad e of ne	vance ext Pol	icy
` '	led upon, repayment of the being given three months no	`	_		intei	rest	wl	nich	m	ay be dı	ue ther	eon sh	all
(5) The Corporation, their successors and assignees shall not be bound to accept repayment of any of the advance(s) unless tendered in full.							of						

contd .Page ...2

(6) In the event of failure to repay the advance(s) when required or to pay interest on the due date as hereinafter mentioned or within one calendar month after each due date respectively the Policy shall be held without the necessity of any notice being given to be forfeited to the Corporation, their successors and assignees, and Corporation , shall be entitled to apply the Surrender value allowable in respect of the Policy in terms of their Regulation and condition in payment of the advance(s) interest and expenses, the balance, if any of Surrender Value to be accounted for to the party entitled thereto .						
(7) In case the Policy shall mature or become a claim by death when the amount of the advance(s) or any Portion thereof shall remain outstanding, the Corporation shall be entitled to deduct such amount together with all interest upto the date of maturity or of death as the case my be from the policy moneys and the balance only shall become due and payable under the policy.						
The Policy duly assigned in your favour, the receipt for the loan amount and declaration regarding assignment duly completed are sent herewith.						
Yours F	aithfully,					
(1)						
(2)						
Encl						
Ellet	Signature(s)					



## भारलीय जीवन बीमा निगम Life Insurance Corporation of India

Form No 5205.

Application for LOAN as under where the Policy already bears the endorsement of TERMS AND CONDITIONS of Loan OR where the Policy has been issued on or after 1-6-1969											
<ul><li>(1) Fresh Loan where no previous loan is subsisting.</li><li>(2) Further loan where previous loan granted at 6% or 7.5% or 9% is subsisting .</li></ul>											
To, The Sr. Branch Manager, Life Insurance Corporation of India,		Addı	ess a	at wl	hich	Loa	n Cl	neque	shoul	ld be so	ent
Branch Office .											
		Date	:								
Dear Sir, Re: Policy No .											
1) Please grant me/us an advance of Rs											
available by way of loan against the above policy, on which I/We agree to pay interest at the rate of 10.5% per annum, compounding half yearly.											
2) I am $/$ We are aware of the terms and conditions on which the loan will be advanced. I am $/$ We are also aware that said terms and conditions:-							We are				
*have already been endorsed on the policy.  **will be those as contained in the clause headed "Loans" appearing in the Conditions and Privileges printed in the Policy.											
3) The receipt for the loan amount along with the assignment declaration slip is returned herewith duly completed.  ***The Policy duly assigned in your favour is also enclosed.											
				You (1)	rs Fa	ithf	ully	,			
Encl				(2)							
Signature(s) *Strike out in respect of the Policies issued on or after 1-6-1969. **Strike out in respect of the Policies issued prior to 1-6-1969. ***Delete where previous loan is subsisting.											

		Form No 5200 .
FORM OF RECE	IPT FOR THE LOAN A	ADVANCE
RsPlace .		Dated
I/We (1)		
(2)		
do hereby acknowledge receipt of Rs (Rupees in words) paid to me/us by the LIFE INSU against the Policy No	URANCE CORPORATIO	
1.	Assured	
2.	Assignee	Revenue Stamp Re 1/-
3.	Trustee	
	5	Signature(s)
DECLARATION TO BE COMPLETED	WHEN BORROWER/S	CANNOT READ ENGLISH
I hereby declare that the contents of the al 5205) and the FORM OF RECEIPT FOR translated and explained by me to:		
(1)	and (2)	
and I further declare that he/she/they fully	understand (s) the meani	ng thereof.

### Signature of the declarant

#### INSTRUCTIONS:-

If either or both the borrowers be non-English knowing or illiterate, an English knowing person should be requested to complete the above declaration as also to give the English rendering of the signature. Where however, either or both the borrowers be illiterate the declarant should certify that the thumb impression is of the person mentioned in the Declaration and that same was obtained in his/her presence.

NOTE	OF AUTHORITY	
If the within receipt is signed by more than of the signatories or to third party, the follo signed by all of them.		
Place	Date :	
I / We hereby authorized the Life Insurance amount Rs	out of within mention to	oned loan, a
		Signature
		Signature
I hereby certify that the contents of this Not 1) 2) and he/she/they has/have agreed to paymen be made to the party or parties authorized .		
INSTRUCTION:	( Signature of the Declarant )	
If either or both persons completing the No declaration at foot of the Note of Authority		

If either or both persons completing the Note of Authority be non-English knowing, the declaration at foot of the Note of Authority should be completed by an English knowing person who should also give the English rendering of the signature/s. When, however either or both of them be illiterate, the declarant should be Magistrate or a Special Executive Magistrate or a Block Development Officer or a gazetted Officer or a Principal/Headmaster of Local High School or Higher Secondary School run by the Government or an Agent of a Nationalised Bank or a Class I officer of the Corporation or a Development Officer of the Corporation with atleast 5 year's service provided he/she is fully satisfied about the identity of the person(s) executing the note of Authority and the declarant should, in addition to completing the Declaration, certify that the thumb mark/s is/are of the person/s executing the Note of Authority and that the same was/were obtained in his/her presence, where the loan is over Rs. 500/- when the loan is Rs. 500/- or less the declarant may be even a talathi, Revenue officer, the President of Union Board of Gram Panchayat.

(TO BE COMPLE	TED IN CASE OF MULTIPURPO	SE POLICIES ) Form 3516
The Sr. Branch Ma Life Insurance Cor	poration of India	Place : Date :
	Re: Policy No.	
Dear Sir,	·	
private purpose un Purpose Plan, I her the Corporation ma interest there on gi repaid, in the first installments and if remainder i.e 90%	der the above policy which has been reby agree that in the event of my de- ay immediately on my death occurri- ving the claimant/s however, the op- instance, out of the lump sum paym both these are not sufficient to mee	et the repayment, the balance from the as on alternative option to have the
		Yours faithfully,
Assignee/s		Signature of Assured.
	om here and paste it on the Policy	
	MENT OF THE POLICY BY THE POL OR THE PURPOSE OF LOAN AGAINS	
I , the undersigned The life assured an Under the within P Transfer all my/ou thereby secured an	dolicy of Assurance of Nor right, title and interest in the within	(full name)(Conditional Assignee)
Dated this	day of200	Signature of Assured
Witness	5	Signature of Assignee/ Trustee
Signature Full Name Designation	to the Assignor in Vernacular and	above assignment were explained by me that he/she affixed his/her signature/ resence after thoroughly understanding
Address		( Signature of Witness )

Form 3599

#### TO BE COMPLETED IN CASE OF ANTICIPATED ENDOWMENT POLICIES (Table Nos 24 25 26)

( Table Nos 24,23,20 )	
The Sr. Branch Manager. Life Insurance Corporation of IndiaBranch.	Place : Date :
Re: Policy No.	
Dear Sir,	
With reference to my application dated	ent Assurance Scheme, I hereby agree that date of commencement of the Policy and ment of the Policy, the Corporation may rds repayment of the loan outstanding e aforesaid installment of sum assured is
	Yours Faithfully,
	(Signature of Assured)
Assignee/s	
Places datach it from hare	

#### Please detach it from here.

#### INSTRUCTIONS

- 1) The from of Assignment should be detached along the perforation and should be pasted over blank space on the back of the Policy and then completed in which case no Stamp duty will be payable. If the assignment is executed on a separate paper, the wording should be copied out on a Stamp paper (Special adhesive or non-judicial) of the appropriate value. The Assignor should satisfy himself before forwarding the Deed of Assignment as regards proper stamp duty having been paid thereon.
- 2) The assignor must affix his/her signature to the assignment in the presence of a witness. If the Assignor is not conversant with English, he/she must sign the assignment before an English knowing person and if he/she must affix his/her thumb impression to the assignment before a Magistrate, Special Executive Magistrate or Gazetted Officer. The witness in such case should certify as follows: "he/she affixed his/her signature/left thumb impression thereto in my presence after thoroughly understanding the same".
- 3) Signature of any other matter written in vernacular should have the English translation therof written beneath the same.