Request for Conversion of existing policies into e-Policies

No. of policy documents received

Date | D | D | M | M | Y | Y | Y | Y |

AP/Insurer Seal & Signature

Place

Date | D | D | M | M | Y | Y | Y | Y |

The Manager

_____ Insurance Co.

_____

_____ PAN / UID No.

Dear Sir/Madam,

Sub: Conversion of my existing policies to e-Policies

☐ eIA Available - eIA No.

☐ eIA Not Available, My preferred repository is

☐ Karvy IR   ☐ CAMSRep   ☐ CIRL   ☐ NDML   ☐ SHCIL Projects

I request you to convert my below mentioned policies into electronic policies

1	
2	
3	
4	
5	
6	
7	
8	

Regards

Signature *

* Mandatory

First Name *

Address *

City *

Pin Code *   Mobile No. *

Enclosures *   ☐ Filled e-IA Application with supporting documents   ☐ Policy Documents

Acknowledgement

Received with thanks from Mr. / Ms. _____

with PAN / UID No. _____, a request for conversion of existing policies into e-Policies along with _____ policy

document(s) and sub-docs for e-IA opening ☐ (Check box if applicable)

Place

Date | D | D | M | M | Y | Y | Y | Y |

AP/Insurer Seal & Signature