

HUF Addendum

Date: _____

Contract/ Application Number	
Date of Birth	
Name of the Life to be Assured	

Name of Karta: _____

Date of Birth of Karta: _____ Place: _____

PAN No. of HUF: _____

Date of Incorporation of HUF: _____

Co-Parceners Details:

S.No	Name	Date of Birth	Relation with Karta
1			
2			
3			
4			
5			

Purpose of HUF: _____

Details of insurance funded through HUF:

S. No.	Name of the company	Sum Assured	Date	Status of Policy (Inforce/Lapsed/ Surrendered)
1				
2				
3				
4				
5				

The above mentioned information is true to the best of my knowledge & belief.

Documents to be Enclosed: Copy of ITR of HUF ☐
 Bank Statement of HUF ☐
 PAN CARD of HUF ☐

Signature of Karta _____

Name of Karta _____

Pl. Attach Seal & Stamp of HUF _____

IndusInd Nippon Life Insurance Company Limited (Formerly Reliance Nippon Life Insurance Company Limited). IRDAI Registration No. 121. Registered & Corporate Office: Unit Nos. 401B, 402, 403 & 404, 4th Floor, Inspire-BKC, G Block, BKC Main Road, Bandra Kurla Complex, Bandra East, Mumbai-400051, India. T +91 22 6896 5000. For more information or any grievance, 1. Call us between 8 am to 8 pm, Monday to Saturday (except public holidays) on our Toll-Free Number - 1800 102 1010 or 2. Visit us at www.indusindnipponlife.com 3. Email us at customerservice@indusindnipponlife.com. 4. Chat with us on our WhatsApp number (+91) 7208852700. The trade logo displayed above belongs to IndusInd International Holdings Limited & Nippon Life Insurance Company and is used by IndusInd Nippon Life Insurance Company Limited under license.

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