Pradhan Mantri Suraksha Bima Yojana (PMSBY)

Enrolment Form

I hereby give my content to become a member of " Pradhan Mantri Suraksha Bima Yojana" which will be administered by the above Bank as Master Policyholder.I hereby authorise you to debit my Saving Bank Account with your Branch with Rs. 12/- and on or before 31st May every subsequent year until further instructions to the contrary a sum of Rs.12/- or a revised amount that may be decided with immediate intimation to me. I hereby nominate my nominee as indicated below for the benefits under the scheme in the event of my death. In the event of my death, before the nominee reaching the age of 18 years, I hereby appoint the legal guardian of the nominee as indicated below for the purpose of receiving the benefits under the scheme. I declare that I am not insured under PMSBY under any other Savings Bank Account. In case the same is found to exist, premium shall stand forfeited and no claims would be paid. I agree that the cover shall commence from the 1st of the month subsequent to the date of enrolment in the scheme. I agree to pay full annual premium even if I join the scheme after the commencement of the master policy. I agree that my membership in the scheme will remain in force as long as all the premiums due are paid and until I have attained age 70 years as on annual renewal date. I agree to abide by the terms and conditions of the above scheme. I agree to your conveying my personal details as required regarding my admission into PMSBY to National Insurance Company Limited. I hereby declare that the above statements are true in all respects and that I agree and declare that the above information shall form the Basis of admission to PMSBY and that if any information be found untrue my membership shall be treated as cancelled.

Name	Account No.	Mobile No. (optional)	Nominee Details		Signature
			NAME	Relationship	

I have no objection for Auto renewal of my Policy by State Bank of India Branch.

SBI Life INSURANCE Wish Us. You're Sure

Pradhan Mantri Jeevan Jyoti Bima Yojana (PMJJBY)

Enrolment Form

State Bank of India THE BANKER TO EVERY INDIAN

I, hereby give my consent to become a member of 'Pradhan Mantri Jeevan Jyoti Bima Yojana' of SBI Life Insurance Company Limited which will be administered by your Bank under Master Policy No.76001000135. I hereby authorise you to debit my Saving Bank Account with your Branch with Rs. 330/- towards premium of life cover under PMJJBY. I further authorise you to deduct in future after 25th May and not later than 1st June every year until further instructions, an amount of Rs. 330/- or any amount as decided from time to time, which may be intimated immediately if and when revised, towards renewal of coverage under the scheme. I have not authorised any other bank to debit premium in respect of this scheme. I am aware that my life cover shall be restricted to Rs.2,00,000/- only in the event of my death. I have read and understood the Scheme rules and I hereby give my consent to become a member of the Scheme. I authorise the Bank to convey my personal details, as required, regarding my admission into the group insurance scheme to SBI Life Insurance Company Limited. I hereby nominate my nominee as below under this scheme. I hereby declare that the above statements are true in all respects and that I agree and declare that the above information shall form the basis of admission to PMJJBY and that if any information be found untrue, my membership to the scheme shall be treated as cancelled.

Name	Account No.	Mobile No.	Nominee Details		Signature
			NAME	Relationship	

I have no objection for Auto renewal of my Policy by State Bank of India Branch.