

Form No. 5205 (Revised)

loan is su The Sen Life Insu	on for fresh loan where the Policy already nears the endorsement of terms and ubsisting or application for a fresh loan on a Policy issued on after 1.6.1969. ior/Division Manager/Branch Manager rance Corporation of India, Divisional Office	l conditions of loan, but where no	
16, Hare			
Kolkata	Date :		
Dear Sir,			
Plea above Po	Re : Policy Noor maximum ava ase Grant me/us an advance of Rsor maximum ava olicy on which I/we agree to pay interest at the rate of 10 ∿% per annum payab	ailable by way of loan against the ble every half year.	
1)			
2)	2) I/We hereby further declare that/ I/We have not served on any office of the Life Insurance Corporation of India any notice of assignment or re-assignment in respect of the above Policy except those, if any already registered by the Life Insurance Corporation of India of the Insurer who issued the above Policy nor shall I/We serve on any office of the said Corporation any notice of assignment or re-assignment or re-assignment or re-assignment or re-assignment of the Insurer who issued the above Policy nor shall I/We serve on any office of the said Corporation any notice of assignment or re-assignment before payment of the loan value.		
	I/We also hereby certify that as on date the above Policy does not stand assign Policy is free from all encum branches.		
3)	The Policy duly assigned in your favour and the Receipt for the loan amount are	returned herewith duly completed	
1899 - 1989 - 1989 - 1989 - 1989 - 1989 - 1989 - 1989 - 1989 - 1989 - 1989 - 1989 - 1989 - 1989 - 1989 - 1989 -	address	a a a a a a a a a a a a a a a a a a a	
i resente			
*************			
		Yours faithfull.	
	······	rours latinan,	
by Pos	nt to be remitted by money order less comm. Cheque/ ht/Hand Delivery. Subject to proper identification. off item not required	Signature	
	NATIONAL ELECTRONIC FUNDS TRANSFER - MANDAT	E FOOM	
1) D			
	Name		
	Branch Address :		
3) Accou	int Type : Savings/Current :		
4) Accou	int No.		
(Bank	account number should be written from left to right)		
5) IFS C			
6) Mobile	e number :		
		с»	
		Signature of Assured	
		Form No. 5198	
1 Cert	tified that the contents of the above assignment were explained by me to the Assig		
	in vernacular and t pression thereto in my presence after thoroughly understanding the same.	hat he/she affixed his/her signature /	
		Signature of Witness/Declarant	
i, the u	ndersigned	(Full Name) the	
Transfer attached	ed under the within Policy of Assurance No. all my right, title and interest in the within Policy of Assurance and the moneys, there to the Life Insurance Corporation of India, their successor and assigns abs eccived hereafter.	thereby secured and all the benefits	
,	Dated the days of		
Witness			
Full Nam			
Designal	tion		
Address		Signature of Assured	

FORM OF RECE	IPT FOR THE LOAN ADV	ANCE
RsPlace	e Date	
I/We (1) do hereby acknowledge receipt of an amount of Re	SRun	200
as an advance against the Policy No	paid to me / us by LIFE INSUR	ANCE CORPORATION OF INDI
1.		Revenue
2.	Signature(s)	Stamp Re.1
		Laura de la composition de la
DECLARATION TO BE COMPLETE		
I hereby declare that t	he Contents herein above have been	translated and explained by me
1) further declare that she / he / they fully understan	id(s) the meaning thereof.	
		Signature of the Declarar
	Occupation	
NSTRUCTIONS I	Address	
	A knowing or Witconto on English to	
If either or both the borrower/s be non English complete the above declaration as also to give the borrowers be illiterate the declarant should certify the the same was obtained in his / her presence.	- English rendering of the Signature	Whore however either or beth th
NO	TE OF AUTHORITY	ана на стански се на субеско поской и 4 о изверских сторотири, поско поско и околоми и работ. На се поско пос
If the withing receipt is signed by more than one	person and payment is desired to be r	nade to one of the signatories or to
hird party the following Note of Authority should be o	completed.	nade to one of the signatories of (c
Place	[	Date
	I/We hereby authorised the Life Ins	surance Corporation of India to pa
	the within mentioned loan amount out of within mentioned loan a sum	
to		
	1046-01 (QLA)	Signatu Signatu
IAAk bereby cortify that the contacts of this black of A		Olghani
We hereby certify that the contents of this Note of A (1)(2)	utionity were explained by me to	and he/cho/tho
nas/have agreed to payment to be made to		the party or parties Authorise
	रा प्राप्ति की रसीद का प्रपत्र	फार्म न० ५२०
<del>ب</del>	शन	दिनांक
में/हम (१)	(२)	•••••••••••••••••••••••••••••••••••••••
रतदद्वारा भारतीय जीवन वीमा निगम द्वारा पालिसी सं	के अन्तर्गत मुझे/हमे	ऋण रूप में प्रदत्त रू०
	के धनराशि स्वीकार करता हु	/करते हैं।
<b>X.</b>		१ रुपये
<b>?.</b>		का रसीद
<ol> <li>An and a standard provide the standard provide the standard provide the standard provides the sta</li></ol>	हस्ता	
जव ऋण लेने वाला दिन्दिी न	। जानता हो उस समय भरने के ति	तय घोषणा पत्र
में एतदद्वारा घोषणा करता हु कि मेने (१) श्री		

जाने वाले ( ...... ) भाषा में ठीक समझा दिया हैं। और में वह भी घोषणा करता हु कि उन्हते उसे भलीभाती समझ लिया हैं।

घोषणा करने वाले का हस्ताक्षर

यदि ऋण लेने वाले हिन्दी न जानता अथवा निरक्षर होतो उपरोक्त प्रपत्र किसी हिन्दी जानने वाले व्यक्ति से चाहिये और हस्ताक्षर का हिन्दी रूपान्तर अवश्य लिख देना चाहिये। कदाचित एक या दोनो ऋण प्रापक निरक्षर हो तो घोषणाकर्ता को यह प्रमाणित करना आवश्यक है कि लगया गया निशाना अंगुठा उपरोक्त बर्णित व्यक्तियों का/के है और वह भी पुष्ठी करना चाहिय की निशानी अंगुठा उसकी उपस्थिति में लगया गया/लगाये गये है।