

To,
SBI Life Insurance Company Ltd.,

Dear Sir/Madam,

CREDIT ACCOUNT STATEMENT

Please find below the details of Loan availed by the deceased insured member.

a) Name of the Master Policy Holder (MPH)	:									
b) Master Policy Number	:									
c) Loan Account Number (LAN)	:									
d) Original Loan Amount	:	₹ 								
e) Name of the deceased Insured Member	:									
f) Date of Commencement (DOC)	:	<table style="display: inline-table; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y			
g) Initial Sum Assured as per Certificate of Insurance (COI) as at DOC	:									
h) Date of Death (DOD)	:	<table style="display: inline-table; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y			
i) Sum Assured as on Month and Year of DOD as per Annexure to COI	:	₹ 								
j) Total amount recovered till DOD by the MPH towards the Loan	:	₹ 								
k) Outstanding Loan Amount as on the date of death	:	₹ 								
l) Balance Claim Amount	:	₹ 								
(Difference between the Effective Sum Assured referred under (i) above and Outstanding Loan Balance referred under (k) above, payable to the Nominee / Beneficiary of the deceased member.)										

The Loan Account Statement since the inception of the Loan is attached. (It is mandatory for processing of death claim).

We further hereby declare and understand that

- The information / details furnished in the above is correct and accurate.
- The Insured Member / Nominee / Beneficiary who has submitted the Claim Discharge Form is the same person who has been registered by us as the Insured Member / Nominee / Beneficiary under the Group Master Policy.
- The claim amount will be paid to MPH if the Authorisation has been made by the deceased insured member to make claim payments in favour of the MPH to the extent of the Outstanding Loan Amount.

Name:									
Designation:									
Address:									
Contact No.:									
Date:	<table style="display: inline-table; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">D</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">M</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">Y</td> </tr> </table>	D	D	M	M	Y	Y	Y	Y
D	D	M	M	Y	Y	Y	Y		
Place:									

Specimen Signature (SS) No:

Seal & Signature of Authorized Signatory