

BM Declaration for RLG Sourced Business

BM Name: _____

Employee ID: _____ Branch SOL ID: _____

Application No: _____

Customer Name: _____

Account Number: _____

The Customer has provided his consent in Product _____ with an annual Premium is INR _____ the Policy Term is _____ Years and total premium commitment over the Term is INR _____

He Has the means and the willingness to pay the premium for the full term of _____ Years.

Additionally I Certify that the source of funds for the premium is not from the loan disbursement amount”

Bank _____/Branch _____/Source _____

BM Signature:

Date:

Place: