LIFE VERIFICATION CERTIFICATE

ICICI PRUDENTIAL LIFE INSURANCE

Receive timely pension payout by completing the "Existence Check" process at the earliest:

1. Fill the Life Verification Certificate
2. Carry your Identity proof (Any one from mentioned list)
   - Aadhaar card (First 8 digit of Aadhaar should be in the masked form)
   - Voter ID
   - Valid Driving License
   - Valid Passport
3. Get the Life Verification Certificate and Photo ID attested by any one of the following:
   a. Post Master
   b. Principal of School / College
   c. Bank Manager
   d. Employee of ICICI Prudential Life Insurance Co. Ltd.
   e. Present / Last Employer (Submit separate declaration on the Company Letterhead, confirming employment)
4. PAN/Form 60
5. Send us the attested documents in any of the following ways:
   a. Submit it at your nearest ICICI Prudential Life Insurance Branch
   b. Email the scanned copy to lifeline@iciciprulife.com
   c. Send it by courier to: Annuity Team, ICICI Prudential Life Insurance Company Limited, Unit No. 1A & 2A, Raheja Tipco Plaza, Rani Sati Marg, Malad (East), Mumbai 400097.

Policy No. | | | | | | | | |

Annuitant's recent photograph

This is to certify that Mr./ Mrs./ Ms. _____

has signed this certificate physically in my presence on D D M M Y Y Y Y

I confirm that the annuitant has ☐ remarried ☐ not remarried (Applies only to Joint Life, where co-applicant is availing annuity on demise of main applicant)

Verifier's Details (please fill in the appropriate row):

Category	Name of Institution	Employee Code	Name	Signature & Stamp
ICICI PruLife Employee	NA			
Post Master				
Principal of School/ College				
Employer				
Gazetted Officer				
Bank Manager				

Change of Contact Details:

Phone: C O D E | | | | | | | | | | Mobile: | | | | | | | | | | |

E-mail: _____

DECLARATION

Applicable when the Annuitant is illiterate or suffering from disability due to which writing is restricted or the annuitant has signed in vernacular language. Note: Must be witnessed by someone other than the advisor/agent/employee of the Company.

I (Full name of Witness)_____ (Relation with Annuitant)_____

adult and inhabitant of (Address) _____

_____

do hereby declare that I have read and explained the contents of this form to the Annuitant and he/she/they have understood the same.

_____ **Signature of Witness**

_____ **Annuitant's Signature**

CONTACT US

Visit our website: www.iciciprulife.com

Email us at: lifeline@iciciprulife.com

Call us at: 1860 266 1999*

Write to us at our Communication Address

*Call us at 1860 266 1999 (local charges apply) – for Group Annuity queries please select option 1 from the main menu. Please do not prefix "+" or "91" or "00" before the number. Call Center timings: 10.00 A.M. to 7.00 P.M. Monday to Saturday (except national holidays). COMP/DOC/Jun/2023/136/3258.

Communication Address

Annuity Helpdesk: Annuity Team, ICICI Prudential Life Insurance Company Limited, Unit No. 1A & 2A, Raheja Tipco Plaza, Rani Sati Marg, Malad (East), Mumbai 400097.