

APPLICATION FOR E-POLICY CONVERSION

(Kindly fill in **Block** Letters)

Date D D M M Y Y Y Y

Your name (Policyholder)	F I R S T N A M E I
Your Electronic Insurance Account No.	
I would like to convert the following policies with Future Generali in to a digital form	
1.	6.
Please provide deta	ils of your documents:
a. PAN Card	
b. UID/Aadhar Card	Number
DECLARATION	
 I hereby authorize Future Generali to convert my above policy / policies into electronic form and credit it to my above E-Insurance account. I understand that upon conversion of my policy / policies into electronic form, the physical document(s) will be treated as null and void. I understand that upon conversion of my policy / policies into electronic form, the contact details of my E-Insurance account shall override the contact details of all my policy / policies with Future Generali. I hereby confirm that this is the only E-Insurance account I hold and do not have any other E-Insurance account with other Insurance Repository. 	
	Signature of Proposer / Policy Owner
Please Note : You will receive a communication from the Insurance Repository on successful credit of policy in your E-Insurance account.	
ACKNOWLEDGE	MENT SLIP
We acknowledge having received a request for conversion of policies to an electronic form.	
elA number :	
Date :	FG Stamp & Time
FUTURE GENERALI INDIA LIFE INSURANCE COMPANY LIMITED, Registered & Corporate Office: Unit 801 and 802, 8th floor, Tower C, Embassy 247 Park, L.B.S. Marg, Vikhroli (W), Mumbai - 400083. I Tel.:91-22-40976666 I Fax:91-22-40976600 I Call us at: 18001022355 I email: care@futuregenerali.in I Website: www.futuregenerali.in	