

Maturity Payout Form - Pension Policies

- 1. The form must be duly filled and signed by the Claimant (PolicyHolder / Assignee / Trustee) and can be submitted at any Aviva Branch or sent by courier to Aviva's Head office
- 2. The PolicyHolder/Claimant is required to carry Original Documents for verification at the Aviva Branch. Self-attestation on documents is a mandatory requirement and any alterations/corrections in the form need to be duly signed by the PolicyHolder/Claimant
- 3. In case the PolicyHolder authorizes any third person to submit the document/s on his / her behalf, the customer's authorization letter & depositor's ID proof is required
- 4. TDS (Tax Deduction at Source), if applicable will be imposed as per applicable Income Tax Laws

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Documents Required for Maturity	Documents Required for Aviva Annuity Policy	
Self attested copy of Photo ID Proof Copy of Cancelled Cheque/Self attested Bank Statement with pre-printed name and Account Number reflecting the last 3 months' transactions Address Proof (in case of Non-Residents or change in address)	Annuity Proposal Form with recent Photograph Self Attested copy of Age/ID Proof and Address Proof Copy of PAN Card (in case of non availability, Form 60 is mandatory) Form 15 G/15 H/ Exemption Certificate (Subject to TDS applicability) PEP Declaration, GSTIN Addendum and E-Form	
POLICYHOLDER/BENEFICIARY DETAILS		
Policy Number(s) Name of the Policyholder/Assignee/Trustee Current Address City Mobile Number Email ID PAN No. (Mandatory) Residential Status (Tick as applicable) Residence for Tax Purposes in Jurisdiction(s) outside India: Yes*	No	
BANK ACCOUNT DETAILS (in case of change in bank acc	count details, please fill the below)	
Account Holder's Name (as appearing in the Bank records) Bank Name Branch Address Scount Number Scount Number Scount Number Scount Number Scount Sco	PERSONAL BANKING: SAVING ACCOUNT PAW	
*For NRE Account Type, kindly submit Pre Printed cancelled Cheque of NRE Account and Self Attested Bank Statement/Passbook of NRE Account from which premiums are remitted. Aviva will not be responsible for any delay or non-credit due to incorrect banking details.		



PORTION OF YOUR MATURITY AMOUNT THAT YOU WANT TO RECEIVE PENSION FROM		
I wish to receive pension from 100% of my maturity amount. OR		
I wish to withdraw % of my maturity amount (maximum 60% of the maturity amount allowed) and utilize the balance to receive pension.		
DECLARATION		
I hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I/We am/are aware that I/we may be held liable for it.		
For CRS/FATCA - I hereby consent and authorize the Company to collect, store, communicate and process information relating to the policy and all transactions therein, by the Company and any of its a rever situated including sharing, transfer and disclosure between them and to the authorities in and/or outside India of any confidential information for compliance with any law or regulation whether domestic or foreign.		
Signature/Thumb Impression of PolicyHolder	Date DDMMYYYY Place	
than English) - I hereby declare and certify that I have explained the content of this form to the Policyholder in the language understood by him/her and that the Policyholder has a ression/ signature on this form in my presence, after fully understanding the content thereof. Declarant's Name		
Date DDMMYYYY Note: Kindly submit a copy of the Photo Identity Proof of the Declarant.		
FOR BRANCH USE ONLY		
Service Request ID Branch Name Employee Code		
Employee Name & Signature	Branch Stamp & Date	



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