Form No. 443 (Rev-2026) **Proposal Form for LIC's New Jeevan Dhara-II** (A Non-Linked, Non-Participating, Individual, Savings, Deferred Annuity Plan)	Recent Photograph of Annuitant/ Primary Annuitant	Recent Photograph of Secondary Annuitant

Division : Branch :

INSTRUCTIONS TO FILL THE PROPOSAL FORM

Please read all the questions carefully and fill up the details truthfully. Answers should be legible. Questions should be answered in 'Yes' or 'No'. In case of affirmative answers details must be provided. Unless otherwise stated all dates described & used in proposal form are in DD/MM/YYYY form.

D.O./CLIA/Chief Organizer/ Broker/ LICA Code No& Mobile number :

Agency Code No& Mobile number :

For Office Use Only	Inward no :	Date:	Proposal no :

A	**Particulars of Proposer/Annuitant/Primary Annuitant (in case of Joint life annuity option)**				
1	Customer ID				
2	C KYC number (Central KYC Registry number)				
3	Name of the person proposing to purchase the Annuity	Prefix Mr./Mrs./Ms/Mx.:	First Name	Middle Name	Last Name
4	Relationship with Annuitant / Primary Annuitant				
	Relationship with Secondary Annuitant (in Joint life annuity)				
5	Father's Full name	First Name	Middle Name	Last Name	
6	Mother's Full Name	First Name	Middle Name	Last Name	
7	Gender	Male / Female / Transgender	**8**	Marital Status	
9	Date of Birth	____/_____/____	Age___(Yrs)	b. Age proof submitted	
10	**Permanent Address as per Proof of Identity (Proof of Identity must be any one of the following: 1) Aadhar 2) Driving License 3) Voter Id 4) Passport**				
	House No../Building Name / Street				
	Town/ Village / Taluka				
	City/District				
	State &Country				
	PIN Code				
11	**Correspondence / Current Address, if different from the above (Proof to be submitted)**				
	House No. / Building Name / Street				
	Town/ Village / Taluka				
	City/District				
	State &Country				
	PIN Code				

B	**Particulars of Primary and Secondary Annuitant, if applicable:**		
Particulars		**Annuitant/Primary Annuitant (If different from Proposer)**	**Secondary Annuitant (in case of joint life annuity option)**
1	Name	Prefix First Name Middle Name Last Name	Prefix First Name Middle Name Last Name
2	Relationship with Primary / Secondary Annuitant		
3	Father's Full name		
4	Mother's Full Name		

5	Gender	Male / Female / Transgender	Male / Female / Transgender
6	Marital Status		
7	Date of Birth / Age in years	____/___/_____Age	____/___/_____Age
8	Age Proof Submitted		
9	**Permanent Address as per Proof of Identity (Proof of Identity must be any one of the following: 1) Aadhar 2) Driving License 3) Voter Id 4) Passport**		
	House No../Building Name / Street		
	Town/ Village/ Taluka		
	City/ District		
	State & Country		
	PIN Code		
10	**Correspondence / Current Address, if different from the above (Proof to be submitted)**		
	House No../Building Name / Street		
	Town/ Village/ Taluka		
	City/ District		
	State & Country		
	PIN Code		

C	**Others Details**	**Proposer/ Annuitant/ Primary Annuitant**	**Annuitant/ Primary Annuitant (If different from Proposer)**	**Secondary Annuitant (In case of joint life annuity option)**
1	WhatsApp Mobile No.			
	Email id			
	Nationality			
	Residential status (Resident Indian / Non Resident Indian / Foreign National of Indian Origin)			
	Whether holding valid Overseas Citizen of India card	Yes/No	Yes/No	Yes/No
	Proof of Identity (Aadhar / Driving License/ Voter Id/ Passport)			
	ID number (In case of Aadhar only last four digits)			
	Are you Income Tax Assessee	Yes/No	Yes/No	Yes/No
	Permanent Account Number (PAN)(Please provide Form 60, if PAN is not available)			
	Are You Registered under GST? If yes, give the GSTIN :			
	Present Occupation			
	Nature of duties			
	Annual Income (Rs.)			
	Source of Income			
1	Have you ever been or are currently being investigated, charge sheeted, prosecuted or convicted or having pending charges in respect of any criminal/civil offences in any court of law in India or abroad? If yes, give details.			
2	Are you a Politically Exposed Person OR are you a family member or close relative of Politically Exposed Person? [As per RBI guidelines PEPs are the individuals who are or have been entrusted with prominent public functions by a foreign country].			
3	Is your country of Tax Residency outside India? Yes/No If yes, fill the Self Certification Form			

D	a) Name of your bank: _____ b) Your Account No :_____ c) IFS Code:_____ d) Type of Account-Savings / Current: _____ {Attach a cancelled cheque leaf (along with copy of bank passbook if name is not printed on the cheque leaf)}
E	**Details of Nominee and Appointee** (*It is in the interest of the Life to be assured to avail the facility of nomination. The nomination can be Single or Multiple. Please give % share in case of multiple nomination. In case of Minor Nominee please give Appointee details)*

	Name and address of Nominee	% share	Age (in Yrs)	Relationship with the Annuitant/ primary Annuitant	If Nominee is minor/ Appointee's full name, age and address	Relationship to the nominee	Appointee's signature or Thumb impression as a token of consent

	Nominee's Bank details:	Bank name	Bank Account no	IFSC code	Type of Account

F	**Premium Payment & Annuity Option**			
1	Instalment premium (In case of Regular Premium) (in Rs)		Purchase Price (In case of Single Premium) (in Rs)	
2	Deferment Period		Mode of premium	Single/ Yearly / Half-yearly / Quarterly / Monthly
3	For SSS Policies : a. Paying Authority Code and Dept. No.		b. Badge or SR No.	
4	Mode of annuity instalment to be paid	Yearly / Half – yearly / Quarterly / Monthly		
5	Please indicate the type of annuity (Choose (✔) only one out of the given options).			

Premium Payment	Annuity Type	Annuity Option	Choose (✔)
Regular Premium	For Single Life	Option 1 – Life Annuity for Single Life	
		Option 2 – Life Annuity with Return of Premium for Single Life	
		Option 3 – Life Annuity with 50% Return of Premium after attaining age 75 years for Single Life	
		Option 4 – Life Annuity with 100% Return of Premium after attaining age 75 years for Single Life	
		Option 5 – Life Annuity with 50% Return of Premium after attaining age 80 years for Single Life	
		Option 6 – Life Annuity with 100% Return of Premium after attaining age 80 years for Single Life	
		Option 7 – Life Annuity with 5% Return after attaining age 76 to 95 years for Single Life	
	For Joint Life	Option 8 – Life Annuity for Joint Life	
		Option 9 – Life Annuity with Return of Premium for Joint Life	
Single Premium	For Single Life	Option 10 – Life Annuity with Return of Purchase Price for Single Life	
	For Joint Life	Option 11 – Life Annuity with Return of Purchase Price for Joint Life	

6	Is this proposal being taken for the benefit of dependent person with disability (Divyangjan)? If yes, please state Whether the dependent person with disability (Divyangjan) is a nominee? (under annuity option 10) (Divyangjan is to be read in accordance with Section 2(r) of "The Rights of Persons with Disabilities Act, 2016".)	

G	**Details of policies with the Corporation (for availing the incentive for existing Policyholders/ Nominee/Beneficiary)**		
		Annuitant / Primary Annuitant	Secondary Annuitant (In case of joint life annuity option)

1.	Are you an existing Policyholder having an in-force policy with the Corporation: If yes, mention the policy number(s)	Yes / No	Yes / No
2.	Has any of the policy with the Corporation on your life and/or on the life of any of your family members matured within one year before the submission of proposal under this product: If yes, mention the policy number(s): In case the above mentioned policy is on the life of family member, mention i. Name: ii. Relationship with Annuitant / Primary Annuitant / secondary Annuitant	Yes / No *Grandparent / Parent / Spouse / Child*	Yes / No *Grandparent / Parent / Spouse / Child*
3.	Are you a Nominee / Beneficiary under any of the policy with the Corporation where death claim has been paid within one year before the submission of proposal under this product: If yes, mention the policy number(s):	Yes / No	Yes / No
H(1)	**Do you wish to avail the physical policy document ?**		
(2)	**Please give EIA no. (e-Insurance Account) if available**		

DECLARATION BY PROPOSER AND THE ANNUITANT(S)

I/We ……..do hereby declare that the foregoing statements and answers are true and complete in every particular and do agree and declare that these statements and this declaration shall be the basis of the contract of annuity between me/us and the Life Insurance Corporation of India.In case of fraud, mis-statement and suppression of material facts the policy contract shall be treated in accordance with the Section45 of Insurance Act, 1938 as amended from time to time.

Not-withstanding the provision of any law, I/We authorize the Corporation to share the information pertaining to my proposal to any Authorized Organization / Institution / Agency / and Governmental / Regulatory Authority for the sole purpose of investigation / risk mitigation / fraud control and/or claim settlement.

I/We am/are aware that if the information on my Tax Residency is found to be false or untrue or misleading or misrepresenting, I may be held liable for it. I also undertake to inform the Corporation of any change in my Tax Residency status

I/We undertake to inform the Corporation immediately of any changes in KYC documents such as residence. I also give my consent to share my data with Central KYC Registry and to receive phone calls, SMS/ E mail from Central KYC registry in this regard.

I/We hereby give my consent to receive phone calls, SMS/E mail on the above mentioned registered number/ E mail address from / on behalf of the Corporation with respect to my life insurance policy/regarding servicing of insurance policies/ notifying about the status of Claim.

I/We also understand that the premium and benefits under the policy are subject to taxes / duties/ charges in accordance with the laws as applicable from time to time.

Dated at……on the ……day of……20

Signature or Thumb impression of Witness
Name, Occupation, Address of Witness

Signature or Thumb impression of Proposer

Signature or Thumb impression of
Annuitant / Primary Annuitant

Signature or Thumb impression of
Secondary Annuitant

Declaration by the person filling in the form (In case form is filled up/signed in a language different from that of the Proposal Form or in case the Proposer/ Annuitant/ Primary Annuitant/ Secondary Annuitant is person with disability (PWD) where he/she is not able to fill the proposal form himself/ herself.)

"I hereby declare that I have fully explained the above questions and contents of the proposal form to the Proposer/ Annuitant/ Primary Annuitant/ Secondary Annuitant and I have truthfully recorded the answers

given by the proposer**/** Annuitant/ Primary Annuitant/ Secondary Annuitant and the Proposer**/**Annuitant/ Primary Annuitant/ Secondary Annuitant has affixed the thumb impression/ signature as below after fully understanding the contents thereof."

Name of the Declarant:_____ Signature:_____

Address of the Declarant:_____

"I certify that the contents of the form have been fully explained to me by (Name, Designation, occupation) Mr. / Ms:_____.

Signature or Thumb impression of the Proposer _____

Signature or Thumb impression of Annuitant/ Primary Annuitant _____

Signature or Thumb impression of the Secondary Annuitant _____

In case the Proposer/ Annuitant/ Primary Annuitant/ Secondary Annuitant is/are illiterate, the thumb impression of the Proposer/ Annuitant/ Primary Annuitant/ Secondary Annuitant should be attested by a person of standing whose identity can easily be established, but unconnected with the Corporation and this declaration should be made by him/her.

"I hereby declare that I have fully explained the above questions and contents of the proposal form to the Proposer/ Annuitant/ Primary Annuitant/ Secondary Annuitant in _____language, and that the Proposer/Annuitant/ Primary Annuitant/ Secondary Annuitant has affixed the thumb impression above after fully understanding the contents thereof."

Name of the Declarant: _____ Signature: _____

Address of the Declarant: _____

SECTION 45 OF THE INSURANCE ACT,1938

(1) No policy of life insurance shall be called in question on any ground whatsoever after the expiry of three years from the date of the policy, i.e., from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later.
(2)A policy of life insurance may be called in question at any time within three years from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later, on the ground of fraud :

Provided that the insurer shall have to communicate in writing to the insured or the legal representatives or nominees or assignees of the insured the grounds and the materials on which such decision is based.

Explanation I - For the purpose of this sub section, the expression "fraud" means any of the following acts committed by the insured or by his agent, with the intent to deceive the insurer or to induce the insurer to issue a life insurance policy :

(a) The suggestion, as a fact of that which is not true and which the insured does not believe to be true;
(b) The active concealment of a fact by the insured having knowledge or belief of the fact ;
(c) Any other act fitted to deceive ; and
(d) Any such act or omission as the law specially declares to be fraudulent.

Explanation II – Mere silence as to facts likely to affect the assessment of the risk by the insurer is not fraud, unless the circumstances of the case are such that regard being had to them, it is the duty of the insured or his agent, keeping silence to speak, or unless his silence is, in itself, equivalent to speak.
(3) Notwithstanding anything contained in sub-section (2), no insurer shall repudiate a life insurance policy on the ground of fraud if the insured can prove that the mis-statement of or suppression of a material fact was true to the best of his knowledge and belief or that there was no deliberate intension to suppress the fact or that such mis-statement of or suppression of a material fact are within the knowledge of the insurer:
Provided that in case of fraud, the onus of disproving lies upon the beneficiaries, in case the policyholder is not alive.
Explanation: A person who solicits and negotiates a contract of insurance shall be deemed for the purpose of the formation of the contract, to be agent of the insurer.

(4) A policy of life insurance may be called in question at any time within three years from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later, on the ground that any statement of or suppression of a fact material to the expectancy of the life of the insured was incorrectly made in the proposal or other document on the basis of which the policy was issued or revived or rider issued:
Provided that the insurer shall have to communicate in writing to the insured or the legal representatives or nominees or assignees of the insured the grounds and materials on which such decision to repudiate the policy of life insurance is based:
Provided further that in case of repudiation of the policy on the ground of misstatement or suppression of a material fact, and not on ground of fraud, the premiums collected on the policy till the date of repudiation shall be paid to the insured or the legal representatives or nominees or assignees of the insured within a period of ninety days from the date of such repudiation.
Explanation – For the purposes of this sub-section, the mis-statement of or suppression of fact shall not be considered material unless it has a direct bearing on the risk undertaken by the insurer, the onus is on the insurer to show that had the insurer been aware of the said fact no life insurance policy would have been issued to the insured.
(5) Nothing in this section shall prevent the insurer from calling for proof of age at any time if he is entitled to do so, and no policy shall be deemed to be called in question merely because the terms of the policy are adjusted on subsequent proof that the age of the life insured was incorrectly stated in the proposal.

In accordance with the applicable provision of Section 41 of the Insurance Act, 1938:

"No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectus or tables of the insurer"

Various Sections of the Insurance Act, 1938 applicable to LIC to apply as amended from time to time.
Please visit our site www.licindia.in and register yourself with LIC Portal after completion of this proposal to avail the benefit of e services.

Agent's Report		
a.	How long do you know the Annuitant / Primary Annuitant and Secondary Annuitant ?	
b.	What is the approximate age of the Annuitants in your opinion ?	
c.	Do you recommend the acceptance of the proposal ?	
d.	Have you explained fully the terms and conditions of the plan to the Proposer ?	
e.	Marks of identification of the Annuitant / Primary Annuitant and Secondary Annuitant	

I am satisfied with the identity of the party and on the basis of my independent enquiries, I hereby declare that the foregoing statements are true and correct to the best of my knowledge and belief.

Further, I declare that the above proposal is secured by me and that I have fully explained the contents of the proposal form to the Proposer.

Dated at…….on the ……day of……20

_____
Signature of the Agent