

भारतीय जीवन बीमा निगम Life Insurance Corporation of India

Proposal No./Policy No _____

DECLARATION OF AGE

I_										;	son/d	aughter	/wife	
of						byo	ccupa	tion				-		
residing at														
do hereby	/ affirm	and	declare	that	to	the	best	of	my	knowledge	and	belief,	l was	born
at		on									and that			
	(place)				(State dateof birth if known)									

I am of ______ year of age and that I have no other reliable documentary evidence of age to produce in proof of my age. I make this decleration conscientiously believing it to be true and knowing that on the faith hereof the Life Insurance Corporation of India will admit my age in their records.

Signature of Proposer/Life Assured

DECLARED	BEFORE	ME	at		and	certified
that the decla	aration has	been	read ove	r to and understood by the deciarant.		
this			day of	2000		

(Seal)

Secretary of the Panchayat / Member of The Panchayat/Block Development Officer/Tehsildar

To be completed by an Appointed Medical Examinerof the Corporation.

I here by certify that Shri	
Was identified before me byshri	
And from his appearance he looks to be approximately	years old

Signature of Proposer/Life Assured

Signature of Medical Examiner

Form No. 5096 LPP 500x100 6-91