

What I need to know while switching my funds?

Fund Switching refers to change of funds units from existing Investment Fund to new choices of fund(s). This does not impact future premium allocation • Switch of funds will be effected at a Unit price declared on the date the request is received and accepted at the Company's office before 3 p.m. and on the next day's price declared if the request is submitted and accepted at the Company's office after 3 p.m. • A fixed number of switches are free per policy year, For details on switch, please refer to Policy Bond terms and conditions • The total percentage allocation premium should add up to 100% and minimum allocation for each investment fund to be switched to should be 5% • The minimum amount that can be switched out of fund is ₹22500/- or total Unit value in that fund • For policies issued after Jan 1, 2010, the minimum amount that can be switched out of fund is ₹1000/- or total Unit value in that fund,

*Top-up Premium will be allocated to your policy subject to realisation of cheque/DD etc.

I want my future premiums to be allocated based on my fund switch instruction.

3. I want to apply for Premium Redirection

Name of the Fund	Allocation percentage (%)
Total	100%

What I need to know on changing my fund allocation?

Premium redirection refers to change of instruction of fund investment on all future premiums • Premium redirection will be elective from the next premium due date and not from the day of acceptance of redirection form • Change of allocation will not apply to top-up premiums (if any) • The total percentage allocation premium should add up to 100% and minimum allocation for each investment fund to be redirected to should be 5% • Kindly refer to the Policy Bond for details pertaining to composition of various funds and risk factors associated with them

Vernacular Declaration

DECLARATION* IN CASE THIS FUND SWITCH/PREMIUM REDIRECTION FORM IS FILLED BY A PERSON OTHER THAN THE POLICY HOLDER OR SIGNED IN VERNACULAR LANGUAGE:
Declaration by Policy holder:
 I hereby declare that the contents in the form have been fully explained to me and I declare that whatever is stated hereinabove has been recorded as per the information provided by me.
 Thumb Impression/Signature of the Policy holder →

Declaration by person filing the form:
 I have explained the contents of this form to the Policy holder in _____ language and I have correctly recorded the answer provided to me. I further declare that the Policy holder has signed/affixed his/her thumb impression in my presence.

Declarant's Name:

Declarant's Address:

City State Pin Code

Date: Place: _____ Declarant's Signature:

*The person giving this declaration can be any person other than Introducing Advisor or Manager of Agency (MOA) or Manager of Manager (MOM).

Declaration

I hereby understand and agree with all the instruction given hereinabove

Date: Place: _____ Signature

Bharti AXA Life Insurance Company Ltd. IRDAI Regd. No. 130 dated 14/07/2006 [Life Insurance Business] Unit No. 1902, 19th Floor, Parinee Crescenzo, 'G' Block, Bandra Kurla Complex, BKC Road, Behind MCA Ground, Bandra East, Mumbai - 400051, Maharashtra. CIN No.: U66010MH2005PLC157108 | Toll free No.: 1800-102-4444 | Website: www.bharti-axa.com | Comp-Oct-2023-6530

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