

SIMPLIFIED CLAIM FORM

Name of the Life Assured	
Policy Number/s	
Date of Death	
Cause of Death	
Claimant Details:	
Name	
Relationship with the Life Assured	
Bank Name & Account Number	
PAN No./ Form 97 (Mandatory)	
Contact Number	
Full Address:	

Declaration: I/We hereby further consent, and duly authorize, PNB MetLife to use, store, share, transfer and disclose any of the personal and sensitive information of mine/our collected or available with PNB MetLife (whether contained in this document or obtained otherwise) which may include but not limited to my KYC documents to any individual / organization / entity associated or affiliated with or engaged by PNB MetLife, including reinsurers, claim investigative agencies, vendors and industry associations/federations, for the purpose of processing this claim and / or for providing subsequent services.

Signature of the claimant:

Date:

Place:

Documents required:

- Death certificate or Report issued by police/ armed forces or confirmation of death issued by local government
- Nominee Identity proof, residence proof & account details/bank certificate of the nominee
- PAN Card/ Form 97 of the nominee



PNB MetLife India Insurance Company
Limited
(CIN): U66010KA2001PLC028883
IRDAI Registration No: 117.



Registered Office:
Unit No. 701, 702 and 703, 7th floor,
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policy.

BEWARE OF SPURIOUS PHONE CALLS AND FICTITIOUS / FRAUDULENT OFFERS!

IRDAI or its officials do not involve in activities like selling insurance policies, announcing bonus or investment of premiums. Public receiving such calls are requested to lodge a police complaint.



Call us at
1800-425-6969 (India) – Toll-Free
+91-80-26502244 (Intl.), Monday –
Saturday | 10 A.M. – 7 P.M.



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<https://www.pnbmetlife.com/>



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