



भारतीय जीवन बीमा निगम
LIFE INSURANCE CORPORATION OF INDIA

P & GS Department, KMDO-1, 'Jeevan Prakash', 16 C R Avenue, 9th Floor, Kolkata-700 072
Phone No.2212-6561 / 2212-9775
E-mail:- bo_g402@licindia.com.

PENSION CLAIM FORM: - SECTION I
(To be completed by Annuitant)

To
Life Insurance Corporation of India
P & GS Department
KOLKATA METROPOLITAN DIVISION I

I, Mr. /Ms. _____ opt for the following type of pension:

.....

With/ Without commutation

I request you to credit future installment of Pension directly to my bank account:-

Type of Bank Account :-
Bank Account No. :-
Bank Name :-
Bank Branch :-
Bank Address :-
MICR NO (9 digit code) :-
IFSC code :-

(Note :- Please enclose cancelled Cheque Leaf and first page of pass book)

My address for correspondence :-

Signature of the Annuitant

Date :-