

Bank.

## ANNEXURE – 2 (Circular HO:BR:116: 68 dated:22<sup>nd</sup> March 2024)

## PRADHAIN MANTRI JEEVAN JYOTI BIMA YOJANA & PRADHAIN MANTRI SURAKSHA BIMA YOJANA OPT OUT – REQUEST FORM

l,						(N	lame o	f Insured	l) an	
account	holder	of	Bank	of	Baroda	bearing	Accou	nt Nu	ımber	
				having	g enrolled fo	or PMJJBY / P	MSBY (S	trike wha	itever	
is not app	olicable) thr	ough B	ank of Ba	roda, h	ereby <b>with</b>	draw my cor	<b>isent</b> giv	en to the	Bank	
for Auto	Renewal of	PMJJBY,	/PMSBY p	olicy at	t the time of	enrolment f	or policy	<b>'.</b>		
Declarati	on:									
a. I	understand	that w	ith the w	/ithdrav	wal of cons	ent for Auto	Renew	al of PMJ	JBY /	
PI	MSBY, my ex	xisting P	MJJBY / P	MSBY p	oolicy shall n	ot be renewe	ed for ne	xt Policy P	eriod'	
st	arting from	1 <sup>st</sup> June	20 (	Year)						
b. In	surance co	ver for	the Risk	Period	1 <sup>st</sup> June 20	) to 31 <sup>st</sup>	May 20	) for v	which	
pı	remium has	been al	ready dec	lucted :	shall continu	ie up to the e	nd of the	e current	policy	
ye	ear and prer	mium re	mitted to	Insure	r shall not b	e refunded b	y Bank.			
c. I hereby further declare that I am solely responsible for a								e outcom	ne for	
O	oting out of	the sch	eme by si	gning t	his form.					
Name of the Insured:						Pla	ace:			
Signature of Insured:						Date:				
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Name of Bank Official:

Signature of the Bank Officials:

Date:

(Rubber Stamp with bank branch name and code)