



National Life Insurance PLC.

Authorization form Premium payment through EFT Debit

Section 1: To be filled by the Bank Account Holder(s)

Policy Owner Details

Name of the Policy Owner:															
Policy Number:										Premium Amount: Tk.					
Premium Payment Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Half-Yearly <input type="checkbox"/> Yearly															
EFT Debit Starts On:										EFT Debit Ends On:					
Bank Account Holder(s) details															
Name of Bank Account Holder(s):															
Bank Account Number:										Mobile Number:					
Bank Name:										E-mail:					
Branch Name:										Routing No. :					
District Name:										Relationship with Policy Owner: <input type="checkbox"/> Self <input type="checkbox"/> Spouse <input type="checkbox"/> Children					
Account Holder's Mailing Address:															
I/WE hereby authorized National Life Insurance PLC to initiate Electronic Fund transfer (EFT) Debit transactions to collect premium for above mentioned insurance policy. I am/We are fully aware that these EFT transactions will be posted to the bank account mentioned in this form. I/We confirm having read and agreed to the terms and conditions. I/We authorize the Bank as mentioned above to provide the information in section 2 of this form to National Life Insurance PLC															
<input type="checkbox"/> Yes, I/We have attached photocopy or cancelled cheque leaf															
X _____ Signature of the Account holder(s)															
[This form cannot be processed without Signature(s) of the Account Holder(s)]															

Section 2: To be filled by Bank

Bank Name:															
Branch Name:										Routing Number:					
Branch Mailing Address:										Telephone Number:					
We confirm information of the Account Holder(s) mentioned above and also confirm that, the bank account number provided above is correct and is maintained with our bank.															
X <div>Bank's Seal</div>															
X _____ Signature of the Authorized Bank Official															
[This form cannot be processed without Bank's Seal and Signature of the Authorized Bank Official]															
Name of the Authorized Person of the Bank:															
Mobile Number:										Date:					

Policy Holder copy

Section 3: To be filled by (National Life) Office

Sequence Number:										Policy No :					
Received by: Signature & Seal:										Office Round Seal: Date:					



NATIONAL LIFE INSURANCE PLC

Authorization Form for Nli Plc Premium payment through EFT Debit (pg-2)

Terms & Conditions for National Life Insurance PLC payment through EFT Debit Facility

1. Transactions under this Authorization will be subject to the BEFTN Operating Rules of Bangladesh Bank, as applicable from time to time. The laws of Bangladesh shall govern the following Terms and Conditions.
2. EFT Debit facility for payment of various schemes and EMI of loan facilities can be availed after the application is accepted by National Life Insurance PLC and is in force. Payments other than payment of various schemes, loan installments or arrears of various schemes cannot be paid through EFT Debit.
3. This Authorizaton Form must be sent in original to National Life Insurance PLC. Facsimile or photocopies are not acceptable. A cancelled Cheque/attested Photocopy of the cheque should be attached with this Form so that National Life Insurance PLC can record the Bank Account details accurately.
4. The Authorization is accepted subject to (a) matching of the bank account details with the bank's records, (b) verification of signature(s) of accountholder(s) by the bank, (c) availability of funds in the mentioned account and (d) acceptance of payment by National Life Insurance PLC, subject to the terms and conditions of the facility.
5. This Authorization Form must reach National Life Insurance PLC Head Office at National Life Insurance PLC- 54-55 Kazi Nazrul Islam Avenue, Karwan Bazar, Dhaka-1215 at least thirty (30) days before the date on which it is to be activated. If the payment instruction date falls on a weekend or a Public Holiday, the same may be effective on the next Banking day.
6. This instruction shall remain in full force and effect until otherwise advised in writing by the accountholder and such advice should be communicated to National Life Insurance PLC and received by National Life Insurance PLC at least thirty (30) days before the next payment is due. Any such amendments/cancellations will not release the account holder from the liability to the Bank arising on account of the Bank having executed the instruction before receipt of such amendments/cancellations.
7. National Life Insurance PLC Account Holder should ensure that sufficient funds are available in the bank account at the time of debit date and this Authorization is not dishonored. Sometimes it is possible that due to some technical or other reason payment amount is not debited on the debit date and is delayed by few days. Please ensure the availability of funds for at least seven (7) days after debit date to avoid dishonors. National Life Insurance PLC will not be responsible for any dishonor raised by the bank and any dispute regarding same should be taken up with the bank only.
8. In case this Authorization is dishonored by the bank, the due date(s) of these dishonored EFT debit must be paid in cash or cheque by the Account Holder. Any issue regarding dishonor Of this Authorization is to be taken up with the bank only.
9. Any queries, questions, comments etc. about National Life Insurance PLC and payment amount will have to be raised to National Life Insurance PLC and payments to the Bank with regard to the settlement of amounts paid in this regard are committed and not deferrable for any reason whatsoever. The transaction appearing on the account statement will be the proof of payment.
10. Under this instruction, the account holder cannot dispute regarding the payment to National Life Insurance PLC debited from his/her Bank account. If any excess or less than the correct amount is debited, the client will have to contact National Life Insurance PLC for clarification. Any type of refund from National Life Insurance PLC on account of this instruction will be settled by National Life Insurance PLC to its client.
11. Receipt will be issued by the National Life Insurance PLC for EFT Debit payments. An Annual Statement or Certificate of Payment, as applicable may be obtained from the Head office/Branch of National Life Insurance PLC from where the account is opened, upon written request of the Account Holder. Such requests should be communicated to National Life Insurance PLC at NLI Tower, 54-55 Kazi Nazrul Islam Avenue, Karwan Bazar Dhaka-1215, Phone:

I/We confirm having read and agreed to the terms and conditions as mentioned above.

Signature of the Account holder(s)