Application cum Declaration for Exemption from GST to NRI/FNIO/OCI _____is an NRI/FNIO/OCI residing in _____(Country of Residence). I have applied for Life Insurance policy and an amount of Rs._____, is paid vide Cheque No. dated __drawn on_____(Bank name) from my NRE / Foreign Bank A/cNo._____towards Proposal deposit.I wish to avail exemption from GST. My visa is valid till (for NRIs only) _____ My Foreign Tax Identification no.(FTIN) /Unique Identification number of that country is (for FNIOs/OCI only) ______. I submit the following in this regard: 1. Proof of Address in the Country of Residence 2. In case of FNIOs / OCI Card holders, Unique Identification Card of that country 3. In case of NRIs/FNIOs,copy of visa 4. Copy of Passport with all pages including the latest immigration stamp 5. Photocopy of NRE A/c Cheque or Front page of the passbook of NRE A/c (in respect of cheque drawn on NRE A/c.) I_____residentof (Full address in the country of residence), further confirm that: 1. I shall pay all my future Premiums under the policy through NRE A/c / Foreign Currency instrument for availing exemption from GST. I understand that the transaction charges, if any levied by the Bank / Payment gateway shall be borne by me. 2. In case of any dispute against a particular card transaction in Renewal premium payment, where chargeback is granted, LIC of India has every right to recover the charges along with interest from my policy proceeds. 3. I understand that, I would be getting GST Exemption at the time of renewal of my Policy, only on providing a similar Declaration of my continuance in Status as NRI / FNIO / OCI. 4. I shallinform Life Insurance Corporation of India, as soon as there is change in my residential status from Non-resident Indian to Resident Indian during the term of the policy. 5. I will be responsible to indemnify Life Insurance Corporation of India in case of any penalty / loss that may arise in relation to the above. Kindly grantme exemption from GST as per Section 2(6) of IGST Amendment Act, 2018 for Export of Services. Date: Signature: Address in Foreign Country:

E mail Id:______
Mobile Number: