भारत सरकार संचार मंत्रालय, डाक विभाग

डाक जीवन बीमा निदेशालय

चाणक्यपुरी डाक घर परिसर, चाणक्यपुरी, नई दिल्ली-110021 Government of India

Ministry of Communications, Department of Posts
DIRECTORATE OF POSTAL LIFE INSURANCE

Chanakyapuri Post Office Complex, Chanakyapuri, New Delhi-110021

No. 25-04/SOP/2020-LI

Dated: 05.05.2022

Office Memorandum

Subject: SOP for handling of "Name Change" requests in PLI/RPLI Policies

This is regarding issue of Standard operating Procedure (SOP) for handling of "Name change" requests in PLI/RPLI Policies.

Various references were received from circles about the procedure to be adopted and document(s) to be considered from an insurant or claimant for processing a name change request.

In order to streamline the process of handling such cases in different scenarios where requirement of name change arises, due to one or other event occurring during the policyholder's term, a SOP has been devised taking into consideration different possible scenario(s) requiring name change along with documents required in each case and manner of submission of form.

Further, following annexures are enclosed which will be required while following the said SOP:

- Annexure I: Request Form for correction/ Change in Policy holders, Name or correction in Nominees'/ appointees' Name.
- Annexure II: Acknowledgement Slip (to be filled by official or incharge CPC and Handed Over to Insurant or as the case may be).
- Annexure III: List of Document required and Address Proof.

The approved SOP is enclosed herewith for wide circulation among all the officials concerned with instruction to follow the same in spirit.

This issues with the approval of competent authority.

(Hariom Sharma)

Deputy Divisional Manager-II

- 1. Sr. PPS to Secretary (Posts) / Sr.PPS to Director General Postal Services
- PPS/PS to Addl. DG (Co-ordination) / Member (Banking) / Member (O) / Member (P) / Member (Planning & HRD) / Member (PLI) / Member (Tech)
- 3. Sr. Dy. Director General (Vigilance) & CVO / Sr. Dy Director General (PAF)
- 4. CGMs BD/Parcel Directorate
- 5. All DDGs, Department of Posts, Dak Bhawan
- 6. Director, RAKNPA Ghaziabad
- 7. All CPMGs
- 8. Addl DG, APS
- 9. All Director, PTCs / Director, PLI, Kolkata
- 10. CGM/GM CEPT

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Handling of "Name Change" requests in PLI/RPLI Policies

There may be situations in which the name of the policyholder may be misspelled in a policy document, or the policyholder may undergo a name change during the policy term. Sometimes female policyholders change their legal name after their marriage. In such instances, variation in name of insurant or nominee during the term of a PLI/RPLI or at the time of claim does not absolve the Department of the liability for payment of policy money. However, an additional check is required to avoid any chances of identity theft or fraudulent claims.

In order to facilitate the insurant for getting the necessary correction in name in expeditious way and settlement of claim in hassle free manner, it is decided that the following procedure shall, henceforth, be followed by all concerned.

- 1. There may be requirement of correction of name or change of name in respect of insurant/nominee/appointee in following two stages of a PLI/RPLI policy i.e.
 - > By the insurant during the policy term or at the time of claims like survival benefit, surrender and maturity benefit.
 - By the nominee/appointee/claimant at the time of death claim
- 2. The following may be the circumstances requiring alteration in name viz.
 - 2.1 If a woman wants to change her surname post marriage or due to some specific reason.
 - 2.2 If a couple has adopted a child and wants their surname after his/her name (legalise the adoption)
 - 2.3 If the insured has his/her surname legally changed for a specific reason
 - 2.4 If the name of the policyholder has some disparity (misspelling)
 - 2.5 In any other scenario or for reason, not listed above
- 3. Manner of Submission of application form by Insurant for change of his/her name during the policy term or at the time of claiming survival benefit, maturity, and surrender benefit.
- 3.1 Application in prescribed format (Annexure-I) along with required documents can be submitted by the Insurant at any Post Office (BO/SO/HO) or PLI-CPC

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across the country through himself/herself along with all original documents for comparison with copy of the document(s) by official concerned.

- 3.2 The following documents are required to be submitted by the insurant: -
- 3.2.1 Self-Attested copies of Identity proof and Address proof of the insurant (as per Annexure-III)
- 3.2.2 Original Policy Bond (In case of non-availability of policy bond in original or through DigiLocker (as prescribed), indemnity bond prescribed for issue of duplicate policy bond may be obtained).
- 3.2.3 Relevant document(s) on ground of which correction or alteration of name is being carried out, as the case may be, out of following: -

S1.	List of	Documents
i	If a woman wants to change her surname a) post marriage b) divorce c) Death of spouse d) Re-marriage	Self-Attested copy of following document(s) a) In case of marriage, any of the following documents • marriage certificate • copy of passport showing husband's name • publication of name change in official gazette • copy of sale deed, mutation deed, land passbook or document issued by court of law showing surname b) In case of divorce, following documents • Self-attested copy of divorce decree authenticated by the court. (In divorce cases) c) In case of death of spouse, following document

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		 Copy of death certificate of spouse (in case of death of spouse) d) In case of re-marriage, following documents Remarried applicants will be required to produce divorce decree/death certificate in respect of first spouse and any of the document mentioned in (a) above as a proof of marriage.
ii	If a couple has adopted a child and wants their surname after his/her name (legalise the adoption)	Self-attested copy of any of following documents • adoption deed or • Legal document issued by Court of Law
iii	If the insured has his/her name legally changed for a specific reason	(i) Self-Attested copy of at least 1 (one) document issued by Govt. of India or school document issued in the changed name to ascertain that the applicant has actually changed his/her name (ii)Clippings of two local newspapers or the Gazette notification of the concerned State Government, as the case may be (iii) Affidavit on Stamp Paper (according to the state value) attested by Notary.
iv.	If the name of the policyholder has some disparity like misspelled, abbreviated name or missing of surname/middle	Self-Attested copy of at least 1 (one) document issued by Govt. of India or school document

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	name)	issued with correct name
v.	In any other scenario or for reason, not listed above	Applicable requisite documents as per the scenario or for reason for name change or any other relevant document(s) sought by the concerned authority

- 3.3 In case any insurant is unable to visit post office or CPC, being medically unfit or outside India, for correction or alteration of name, he/she may authorize any person as a messenger for submission of the form along with necessary documents. Only an adult literate person of sound mind, who is not an insolvent, can be appointed as messenger.
- 3.4 In case of being medically unfit to visit CPC, a self-attested medical certificate to this effect needs to be submitted from Govt. hospital or Govt. accredited hospital.
- 3.5 However, in case insurant being abroad, he/she need to submit a selfattested copy of passport clearly showing the date of departure from India.
- 4. Manner of submission of application form by nominee/appointee/claimant where there is difference in name of insurant at the time of death claim
- 4.1 Cases where there is difference in name of the policyholder with that available in policy bond to the documents (like death certificate) furnished by claimant at the time of death claim, then the claimant needs to furnish the reason for the same along with the requisite documents (table 3.2.3 may be referred), as per the grounds applicable (as detailed in para 2 above) for settlement of claim.
- 4.2 If the claimant is unable to establish the identity of late insurant to the satisfaction, then the claimant may be asked to furnish orders of court of law or such legal documentary evidence.
- 5. Manner of submission of application form by nominee/ appointee/claimant where there is difference in his/her own name to that available in original policy bond at the time of death claim

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- 5.1 Cases wherein there is difference in name of the nominee/appointee available in policy document to that mentioned in the claim documents furnished by claimant, then the claimant needs to furnish the reason for the same along with the requisite documents (as per table 3.2.3), as per the grounds applicable (as detailed in para 2 above) for settlement of claim.
- 5.2 If the claimant is unable to establish his/her identity, then the claimant may be asked to furnish orders of court of law or any such legal documentary evidence.
- 6. Cases requiring correction of nominee/appointee name during the policy term, by the policyholder himself/herself can be processed by collection of form (Annexure-I) along with relevant KYC documents.
- 7. In cases, where a PLI/RPLI policy is issued with incorrect name owing to erroneous data entry made by the official (s) of Department of Posts including PLI-CPC i.e., the name of the insurant filled in proposal form is similar/identical with one of the KYC documents submitted but differ in the policy bond generated due to typographical error or any such mistake on the part of the Department, then the CPC concerned as soon as this irregularity come to their notice by themselves or through agent, before the original policy delivered to the insurant, may process immediately for correction of name change with the available documents on their own. In cases, where original policy bond has been delivered to the insurant and correction is brought into notice by CPC, agent, insurant or others, then the insurant may be requested telephonically or through registered post to submit an application on plain paper with original policy bond*. Subsequently, in both cases, CPCs shall process for issue of duplicate policy bond, for which the Department shall bear the cost. The duplicate policy bond along with name change letter generated shall be delivered to the insurant as per the usual procedure.

*Note: Requirement of original policy bond may be waived, and a self-declaration may be obtained from the insurant to the effect that the policy bond has been irrecoverably lost/damaged or untraceable and the same has not been assigned to Department of Posts or elsewhere for taking loan.

8. Action at request receiving Office

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- 8.1 The Insurant shall submit requisite documents at any Post Office or CPC. The BPM/SPM/Postmaster or CPC in-charge of the Office concerned, where the application for name change is submitted, shall scrutinize the application to ensure that the requisite relevant documents are attached. If required, the official concerned shall help the Insurant correctly by guiding and explaining the requirements.
- 8.2 All the ORIGINAL documents are required to be produced while submitting the application and the same will be returned to the Insurant after having been compared with the copies thereof being submitted along with the application for name change. However, policy bond shall be submitted in original along with the application Form and shall be retained by the receiving office.
- 8.3 Wherever a self-attested copy of a document is submitted, the official accepting the same will compare it with the ORIGINALS and shall put his/her signature in token of having verified the copies with their originals.
- 8.4 Application shall be indexed, and acknowledgement slip generated through system as well as in Annexure-II and shall be given to the applicant.
- 8.5 Action at Branch Post Office (BO)- In case the request for name change is received at BO, the BPM shall forward the application form along with all the enclosures to its Account Office through Account Bag on the same day duly entered in their Daily Account/Daily Transaction report (DTR) after Indexing it in the RICT device, if possible.
- 8.6 Action at Sub Post Office (SO)- The name change application form may be received at SO either directly or through BO. In both the cases, indexing of the form shall be done at the SO itself (in cases Indexing not already done at BO for form received at BO). After Indexing, the name change application form shall be sent to the HO (CPC) concerned (with which the office is mapped with) on the same day through Account Bag duly entered in their Daily Account/Daily Transaction report (DTR).
- **8.7 Action at HO (CPC)** The name change application form may be received at CPC either directly or through SO/BO. The application form shall be indexed before further processing (if indexing not already done at SO/BO for the forms received at SO/BO).
- 9. Processing of request Action at CPC

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- 9.1 The CPC shall scrutinize the application to ensure that the requisite documents are attached and shall make sure the genuineness of the case.
- 9.2 The CPC shall do the data entry and further process the case for approval of concerned authorities.
- 9.3 The approving authority may satisfy herself/himself that the case is genuine, and documents submitted are complete.
- 9.4 On approval of the case, approver letter may be generated through the system and sent to insurant or nominee/appointee/ claimant, as the case may be, along with the copy of corrected original policy bond through registered post and copy of the same may be retained at the office for record.

Annexure-I

Dated: 05.05.2022

Request form for correction/change in Policy holders' Name or correction in Nominees'/Appointees' Name

Full Name as per e	xiting p	olicy		Mr. 🗆	Mrs	s. 🗌	Ms	.)	1												
First Na		Middle Name						Last Name													
Address																					
				П										1							
Village/									luka												
City Post Office								District State													
Country								J	Pinc		;										
Mobile No						E-m	ail I	D (If	any))											
Policy No																					
Sum Assured					7																
Change /Correction (Please tick as ap				Poli	су Н	olde	er	OR			* No	omi	nee	0	R		* A	ppo	intee)	
(*Only correction : form is prescribed		ed in o	case (of No	mine	ee(s)/A <u>r</u>	poir	itee	(s) 1	name	. Fo	r ch	ang	e in	non	nina	ition	sep	arat	e
Old Name (Mr	. \square Mrs	s.)																			
First Name					Mid	ldle	Nar	ne						Las	st Na	me					
New Name (Mr	. 🗌 Mrs	s.)																			
First Name Last Name																					
Reason for Change																					
					Do	cun	nen	ts Att	ach	<u>ied</u>											_
Documents Enclo	sed:																Y	es/1	No/	NA	'N

1. Original Policy Bond

Applicable)

2. Self Attested copy of ID proof of the Insurant

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3.	Self Attested copy of address proof of the Insurant										
4.	Relevant Documents of Policyholder for change of name of Policy Holder on applicable grounds as per SOP.										
5.	Relevant Documents of Nominee/Appointee for correction of their name as per SOP.										
6.	. Self-Attested Copy of ID proof of Messenger (if messenger appointed by Insurant for submission of name change request)										
7.	Self-Attested Copy of Address proof of Messenger (if messenger appointed by Insurant for submission of name change form)										
8.	Self-Attested medical certificate of insurant from Govt. Hospital/Govt.accredited hospital Or										
	Self-attested copy of passport clearly showing visa details and date of departure from India										
9.	Any other document(s), pls specify										
Da	re:										
the	ave understood the meaning and scope of the name change request and take complete responsibility of changes submitted by me/us. Any changes in the Policy/Personal details are subject to the policy terms deconditions and on acceptance of relevant documents submitted.										
	Thumb Impression/Signature of Policyholder										
imj	policyholder is illiterate or is signing in a language other than the language of this form, his/her thumb pression/signature must be attested by any Postmaster/ Gram Pradhan, Notary, his/her PLI/RPLI Agent h his/her official seal after explaining the content of this form)										
Na	me:										
Ad	dress:										
	Signature of the person making the declaration										
• • •											
	(For Office Use Only. To be filled in by receiving CPC PLI Branch)										
pro	rtified that I have checked all the documents enclosed and compared with the original documents educed by the Insurant/messenger and verified the averments made in the name change form based on se documents and found no discrepancies.										
Da	Signature of CPC in-Charge Name : Designation:										
	Office Stamp:										

Annexure-II

Dated: 05.05.2022

Acknowledgement Slip

(To be filled by BPM/SPM or PLI-CPC Official and Handed Over to Insurant or as the case may be)

Nar	ne Change	form	for	Policy	No				with	S	Service	Req	uest
No.		r	eceive	d on		al	ong	with	following	g	docum	ents	for
cha	nge/correction	on in na	me of p	oolicyho	older/ no	ominee/app	ooint	ee (ticl	k as applic	cal	ole)		
Dod	ocuments Enclosed: Yes (Y)/No (N)/Not Applicable(NA)												
_													
1.	Original Poli	cy Bond	_										
2.	Self Attested	copy of	ID pro	of of the	e Insurai	nt							
		1,	•										
3.	Self Attested	copy of	addre	ss proof	of the I	nsurant							
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	Relevant Doo			-	er ior cr	lange of ha	me c	or Polic	у поіает с	זונ			
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	Relevant Doo	uments	oi Non	ninee/A	ppointe	e ior corre	ction	oi thei	r name as	, p	er		
	SOP.		CID		.				.4. 11. 7				
6.	Self-Attested		_		_	er (11 messe	enge	r appoi	ntea by 11	ารเ	irant ior		
	submission of		•	_	,								
7.	Self-Attested			_			mes	senger	appointe	d ł	оy		
	Insurant for s	submiss	ion of r	name ch	ange fo	rm)							
8.	Self-Attested	medica	al certif	ficate of	insuran	t from Gov	t. Ho	spital/0	Govt accre	ed	ited hosp	oital	
	1f -444-d		Or		ماءاب	.ii	4-:1-			4	6	مئلم حائد	
0	self-attested				-	ing visa de	lans	ana ac	ne or dep	dΙι	ure mom	lilala	1
9.	Any other do	cumen	ı(s), pis	specify	<i>T</i>								
• • • • •													
Dat	te:-					Signatı	ıre o	f BPM	/SPM/PN	/I/	CPC in-	Char	ge
						1	Nam	ie:					
						:	Desi	gnatio	n:				
							Offic	e Stan	າກ:				

Dated: 05.05.2022

List of Documents required as ID and Address proof

For Proof of Identity	For Proof of Address
Aadhaar Card	Aadhaar Card
Passport	Passport
Driving License	Driving License
Election Commission Voter ID Card	Election Commission ID Card
Ration Card with Photo, for the person whose photo is affixed	Ration Card with address
CGHS/ECHS Card	Photo Identity Card having address (of Central Govt./PSU or State Govt./PSU only)
Certificate of address having Photo issued by MP/MLA/Group-A Gazetted Officer on letter head	Certificate of address having Photo issued by MP/MLA/Group-A Gazetted Officer in letterhead
Certificate of address with photo from Govt. recognized educational institutions (for students only)	Certificate of address with photo from Govt. recognized educational institutions (for students only)
Certificate of photo identity issued by Village Panchayat head or its equivalent authority (for rural areas)	Certificate of address issued by Village Panchayat head or its equivalent authority (for rural areas)
Income Tax PAN Card	Water Bill (not older than last three months)
Caste and Domicile Certificate with photo issued by State Govt.	Telephone Bill/mobile post paid bill (not older than last three months)
MGNREGA card issued by Govt.	Electricity Bill (not older than last three months)
Smart card (with photo) issued by CSD, Defence/ Paramilitary	Income Tax Assessment Order
Current passbook of Post Office/any scheduled bank having photo	Vehicle Registration Certificate
Photo Identity Card (of Central Govt./PSU or State Govt./PSU only)	MGNREGA card issued by Govt.
Photo Identity Card issued by Govt. recognized educational institutions (for students only)	Current Passbook of Post Office/any Schedule Bank
Pensioner Card having photo	Caste and Domicile Certificate with address and photo issued by State Govt.
Kissan Passbook having photo	Pensioner's Card with address
	Credit Card Statement (not older than last three months) Kissan Passbook with address