

## Annexure D

### Declaration from Member Bank [on Bank's letterhead]

We hereby confirm that Mr. /Mrs. \_\_\_\_\_ having  
Aadhar number \_\_\_\_\_ is holder of  
Account number no. \_\_\_\_\_ And was issued a RuPay  
Card bearing no. \_\_\_\_\_.  
Account opening date : \_\_\_\_\_

Card type : **[PLATINUM/ SELECT]**

A. Details of Customer induced transaction qualifying for the RuPay Insurance Program 2025-2026.

Date of Transaction : \_\_\_\_\_

Type of Transaction : \_\_\_\_\_

Brief Description of transaction : \_\_\_\_\_

[ Copy of entire 30 days Account Statement of cardholder with highlighted qualifying transaction to be attached]

B. Details of Nominee / Legal Heir

Name of Nominee / Legal Heir : \_\_\_\_\_

Aadhar Number of Nominee/ Legal Heir : \_\_\_\_\_

Relation with Cardholder : \_\_\_\_\_

Nominee's/ Legal Heir's Bank Name : \_\_\_\_\_

Nominee's/ Legal Heir's Account number : \_\_\_\_\_

Nominee's/ Legal Heir's Account IFSC code : \_\_\_\_\_

[ Copy of Pass Book / Cancelled Cheque of Nominee/Legal Heir's A/c. to be Attached]

[In case Nominee details are not available, Legal procedure to be adopted as per bank's guidelines and Legal Heirs details to be provided.]

AUTHORISED SIGNATORY  
WITH BANK SEAL.

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C. Brief Description of Accident [ to be narrated in English / Hindi only by Bank Official]

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D. Details of Bank's Official for follow up regarding the captioned claim.

Name and Address of Bank : \_\_\_\_\_

Contact Number : Mobile:

Landline:

Email ID of Bank Branch : \_\_\_\_\_

We hereby solemnly affirm that the above statements are true and correct to the best of my/our knowledge and belief

We also confirm that the documents sent in support of the captioned claim are true copies and have been verified by us with the original documents.

**AUTHORISED SIGNATORY  
WITH BANK SEAL.**