



भारतीय जीवन बीमा निगम
LIFE INSURANCE CORPORATION OF INDIA

Life Insurance Corporation of India
Pensions & Group Schemes Silchar Unit
Silchar Divisional Office, Meherpur Silchar
Contact: 03842-241251, e-mail: bo_G410@licindia.com

Declaration of Spouse: For Joint Life pension option

Name of Spouse & Relationship	Address with Phone No.	Date of Birth of Spouse

Date:

Signature of Member/Beneficiary (Annuitant)

Place:

Counter signature by the Trustees /Member representing Board :

Seal of the Trustees /Member representing Board :

*To be provided along with the Claim form