

MANIPALCIGNA PROHEALTH SELECT

ANNEXURE TO PROPOSAL FORM

E-INSURANCE DETAILS:

Do you want policy document in dematerialised format?^ **Yes** ☐ **No** ☐
^If you open an eIA account, all communication including policy document shall be made available in electronic format
Do you have existing eIA account number? **Yes** ☐ **No** ☐
If yes then please provide eIA account number:

If you do not have eIA account number then please provide mentioned details below.

A) Select the preferred Insurance Repository in which e- Insurance Account(e-IA) needs to be opened:

1) Karvy Insurance Repository Limited ☐ 2) CAMS Repository Services Limited ☐