

Medical Insurance Nominee Form	
Name:	PREMCHAND KUMAR
ICICI Account No.(if you have)	
Pan card No:	UTSUTPK1781N
Your Date of Birth:	05/11/1995
Nominee:	KIRAN KUMARI
Relationship with nominee:	WIFE
Marital Status (Single/Married):	MARRIED
If married please mention the below mentioned details:	
Wife/Husband's Name:	KIRAN KUMARI
Date of Birth:	04/05/1994
Age:	30 YEARS 5 MONTHS
Gender:	FEMALE
Child1's Name:	AKSH OACHAND
Date of Birth:	28/10/2021
Age:	03 YEARS
Gender:	MALE
Child2's Name:	
Date of Birth:	
Age:	
Gender:	

Premchand