

Life Insurance













मनी ट्रांसफर ग्राहक को जीवन बीमा की 5x ज़्यादा ज़रुरत है

- वह अपने परिवार का अकेला कमाने वाला होता है
- वह जोखिम भरे काम करता है फैक्ट्री, मज़दूर, खेती, ड्राइवर
- उसकी जमा पूँजी बेहद मामूली होती है





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Product Highlights





अब आप अपने customer को बेच सकते हैं

सबसे किफ़ायती जीवन बिमा

Instant **b**pay





Kotak Life Insurance का भरोसा

5 minute में बीमा जारी





One time + Renewal incomes











Claim पाना बहुत ही आसान. कही जाने की ज़रुरत नही. घर बैठे claim पाएं :

- 1. Call 022 66057294 Support executive will guide the caller
- 2. He will confirm the documents required:
 - ID & Address proof of insured
 - ID & Address proof of nominee
 - Doctors certificate (death certificate)
 - Claim intimation form
 - Bank account details of nominee
- 3. Courier these documents to Kotak Address given by support executive

Instant 💋 pay





Google

कैसे बेचना है बीमा?

Process समझने के लएि सबसे पहले अपना बीमा नकिालें

Process समझने के बाद अपने सभी customers को बीमा के बारे में बताएं कई ग्राहक शुरुआत में बीमा नहीं लेंगे। मगर आपको फिर भी बीमा के बारे में सबको बताते रहना है। ग्राहक के जान पहचान में जब कोई मृत्यु होगी, तब उसको आपकी बात याद आएगी, और वह बीमा ज़रूर लेगा







PROCESS for LIFE INSURANCE





Step 1 : Select Insurance under the Services tab







Step 2 : Go to Health & Life Insurance







Step 3 : A separate page will open, click on "Life Insurance"







Step 4 : Enter Customer details like Name, Mobile Number Gender and Press Next.







Step 5 : Select Sum Insured, Enter Date of Birth and pin code of customer. Press "Get Premium"

			- F. F 1-24
Tell us who woul	d you		a start
Like to Ins	ure		and the second
Select Sum Insured			and the second
Cover:₹2 Lac	~		
Me Dob		See 1	
25-11-1988	曲	Self and the	
Pincode		1. 21 m	
PUNJAB AMRITSAR			100
1.			The state





Step 6 : Premium Amount and total sum insured will reflect on screen.

Please enter customer's complete details

🐼 kotak life	Group Term Insurance		Covered For: 1 Year Total Premium : ₹650 Premium Breakup
	Brochure (Hindi) Brochure (English)		Sum Insured ₹ 200000
Insured Details			
PERSONAL DETAILS			
Salutation	Mr	Full Name	Karan Tandon
Date of Birth	25-11-1988	(Mobile	9958539270
Gender	Male	👑 Email ID	krntndn@gmail.com





Step 7 : Please enter customer's complete address. Enter complete Nominee details

ADDRESS DETAILS					
Address 1	21, Ranjit Vihar		Address 2	Loharka road	
O State Name	PUNJAB	~	Pincode	143001	
NOMINEE DETAILS					
Salutation	Mr.	~	S Full Name	ABC	
👑 Date of Birth	14-09-2002		Gender	Male	~
Kelation	Son	~			
					Send OTP
D	igital India				



Step 8 : Enter OTP received on Customer's mobile number and tick mark the declaration. Click on Pay now tab

📀 kotak life	💐 Koi hai hamesha	
Membership Form cum Declaration of Good Healt	h -Kotak Raksha Group Micro-Insurance Plan (UIN : 107N101V04)	
IMPORTANT NOTE : Any additional text written or qualification given in the form	would make it invalid.	
Name of the Policyholder : Mobisafar Services Private Limited Policy Number	GH000280 Plan Option: D Level Reducing	
Interest Rate: 10.00 Cover Term 1 Premium Payment Option: S	ngle 🔄 Regular 🔄 One Year Renewable Frequency : Single Premium Modal Premium 🤻 650	
DARTICULARS OF THE LIPE TO BE INSURED(S) Life insured Details : Mr. / Ma.: Karan Tandon	Date of Birth: 25-11-1988	Enter OTP
Identification Number: 20200928050756 Cover Amoun	t opted for : 7 200000 Customer ID 99585392700756	
Email ID : kmindn@gmail.com Mobile No.	8658539270 Gender: 📈 M 🗌 F	0.440
Joint Life Insured Details : Mr. / Ms.: NA.	Date of Birth: NA	2412
Identification Number: NA Cover Amoun	t opted for : 🕴 NA Customer ID NA	
Email ID: NA Mobile No. :	NA Relationship with Member NA Gender: M F	Becond OTI
BANK DETAILS OF LIFE INSURED (Please provide your Bank Account	Details in case of direct debit and credit facility is desired)	Resellu OT
Bank: Bank A/c No.:	Branch Code: IFSC :	
NOMINEE DETAILS I (needs to be a major i.e. above 18 years of age and she Grandfather or Grandmother	suld be one of the following: Husband, Wife, Son, Daughter, Father, Mother, Brother, Sister,	The customer has gone through
Name : Mr.ABC.		
		the contents of declaration of
Headoning to Life to be insured(s): Son	recentings (%) 100	good health and agrees to
Grandfather or Grandmother	ourd be one or the tonowing: reasoand, whe, son, Laugmer, Father, Mother, Brother, Stater,	good health and agrees to
Name : NA		terms and conditions laid there
Relationship to Life to be insured(x) : NA	Percentage (%): 0	termo and conditiono falla there
	Provide the second second	in





Step 8 : Transaction is success and Policy has been generated

Co kotak life		9/28/2020 5:2	3:26 PM
KOTA	K GROUP SECURE ONE - Certificate Of Insurance (Product UIN: 107N051V03) SCHEDULE		
Certificate No: GO000002_20200928052229_99994286112229	Member ID: 20200928052229	Member	
2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Demo Client		
Name of Master Policyholder:	Denio Citem		
Policy No:	G000002		

Policy No:	GO000002	
Name of the Member:	Mr Rajpal Singh	
Address: B-155 Mobisafar Pvt LTd Delhi 110055	Sum Assured::	100000
	Premium Amount (Exclusive of Goods and Services Tax and Cess) Rs:	265.00
	Premium Amount (Inclusive of Goods and Services Tax and Cess) Rs:	313.00
	Premium Payment Term:	Annually Renewable
	Cover Term:	1 year (Annually Renewable)
	Member Renewal Date:	29/09/2021

Print Certificate





THANK YOU



