

**Bajaj Allianz Life Group Sampoorna Jeevan Suraksha**

Non-Linked, Non-Participating, Micro Group Life Insurance Pure Risk Plan

UIN: 116N166V02

**Policy Terms and Conditions**

**Group Policy No. \_\_\_\_\_**

*issued under*

**Bajaj Allianz Life Group Sampoorna Jeevan Suraksha**

*for the*

Members of the (name of the Policyholder's scheme) Scheme of

\_\_\_\_\_(Policyholder name)\_\_\_\_\_

**Part A**  
**FORWARDING LETTER**  
**Bajaj Allianz Life Insurance Company Limited**  
**Bajaj Allianz Group Sampoorna Jeevan Suraksha– in lieu of EDLI**

Name of the Policyholder \_\_\_\_\_

Address of the Policyholder \_\_\_\_\_

Dear Mr./Mrs./Ms. \_\_\_\_\_

We would like to thank you for investing your faith in us.

\_\_\_\_\_, the Policyholder has by a written Proposal Form dated \_\_\_\_\_ requested the Company to grant the benefits of Life Insurance Cover, under Bajaj Allianz Life Group Sampoorna Jeevan Suraksha– in lieu of EDLI and as per the Scheme Rules of the \_\_\_\_\_, <name of the scheme> Scheme of the Policyholder (Hereinafter called the “Scheme”, certified copy of which has been furnished to the Company by the Policyholder) to the Members whose name has been recorded in the Membership Register maintained by the Policyholder.

The Policyholder has also furnished to the Company statements/Enrollment Forms completed and signed by the Policyholder/Member on behalf of the Members for whose benefit the Policy hereunder is being effected. The Policyholder and the Company have accepted and agreed that the said Proposal Form, certified copy of the Scheme along with other statements, reports or other documents leading to the issuance of this Policy shall be the basis of this contract of Assurance.

If any of the details of the Member contained in the statement/Enrollment Form signed by the Member/Policyholder on behalf of the Member are incomplete, false or incorrect, coverage in respect of such Member under the Policy shall be void.

Please find enclosed herewith your Policy Document, a copy of the Proposal Form, Customer Information Sheet (CIS) and documents mentioned herein below, based on which your Group Insurance Policy has been issued. This Policy is issued subject to section 45 of the Insurance Act, 1938, as amended from time to time. In case you have made any disclosures in respect of your Member to the agent which has not been included in the Proposal Form, you are requested to intimate the same in writing to the Company within fifteen (15) days of the date of receipt of this Policy, failing which it shall be inferred that the disclosures made in the Proposal Form are full, complete and according to your instructions wherein nothing has been concealed.

Document Type	Specification of Documents provided	Identification No
Proposal Form	Proposal Form	
Scheme Rules		
Others(if any)		

- (1) You shall be provided a free look period of 30 days beginning from the date of receipt of Policy Document, whether received electronically or otherwise, to review the terms and conditions of such Policy, except if tenure of the Policy is less than a year.
- (2) In the event You disagree to any of the Policy terms or conditions, or otherwise and have not made any claim, You shall have the option to return the Policy to the Company for cancellation, stating the reasons for the same.
- (3) Irrespective of the reasons mentioned, You shall be entitled to a refund of the Premium paid subject only to a deduction of a proportionate risk premium for the period of cover and the expenses, if any, incurred by the insurer on medical examination of the Member and stamp duty charges.

- (4) A request received by the Company for cancellation of the Policy during Free Look Period shall be processed and Premium shall be refunded within 7 days of receipt of such request, as stated in (3) above. For any

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queries kindly write to Us at the below mentioned address and We assure and strive to provide You the best of services.

Authorised Signatory

FOR BAJAJ ALLIANZ LIFE INSURANCE COMPANY LTD.

**Sales Representative details:**

<b>Name</b>		<b>Code</b>	
<b>Address</b>			
<b>Phone Number</b>		<b>e-Mail Id</b>	

**Please read policy document, especially following clauses on**

<b>Benefits</b>	<b>Mode of payment of Claim</b>
<b>When the Life Insurance Cover ceases for a Member</b>	<b>Renewal/Revival of Policy</b>

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**PREAMBLE**

The Company has received Proposal Form, Scheme Rules, Member Enrollment Form, declaration and the Premium from the Policyholder as named in this Schedule.

This Policy is issued on the basis of the information given and declaration made by the Policyholder in the Proposal Form, which is incorporated herein and forms the basis of this Policy

**POLICY SCHEDULE**

Non-Linked, Non-Participating Micro Group Life Insurance Plan

Name of the Policyholder \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

Pin code \_\_\_\_\_

<b>Policy Number</b>	
<b>Product Name</b>	<b>Bajaj Allianz Life Group Sampoorna Jeevan Suraksha</b>
<b>UIN</b>	
<b>Name of the Policyholder</b>	
<b>Registered Office Address</b>	
<b>Policy Commencement Date</b>	
<b>Inbuilt Benefits Chosen</b>	<b>Proportion of Sum Assured</b>
<b>&lt;ADB&gt;</b>	
<b>&lt;AATPD&gt;</b>	
<b>&lt;ACI&gt;</b>	
<b>Single Life/Joint Life</b>	<b>&lt; Single Life/Joint Life/Both*&gt;</b>
<b>Joint Life Option</b>	

\* This will be decided at each member level.

**On Examination of the Policy, if the Policyholder notices any mistake in the above Schedule, the Policy Document is to be returned for correction to the Company.**

**Sales Representative details:**

<b>Name</b>		<b>Code</b>	
<b>Address</b>			
<b>Phone Number</b>		<b>e-Mail Id</b>	

**To whom the Benefits are Payable:** The Benefits are payable to the Beneficiary. The Members will have the facility of nominating the person to whom the policy proceeds will be payable by the Company.

The Policy shall be subject to and governed by the terms of the Policy Document along with the Schedule contained herein and Endorsements if any, made from time to time and all these shall together form a single agreement.

All taxes, including GST & cess, either existing or those that may apply in future (including enhancements of existing taxes) will be charged extra. Payment of such taxes shall be the responsibility of the Policyholder/

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Member.

Bajaj Allianz Life Insurance Company does not provide any warranty or assurance that the Policyholder will be, by virtue of purchasing this Policy, eligible for any income tax or other tax rebate or relief.

Signed on behalf of Bajaj Allianz Life Insurance Company Limited for Policy No. \_\_\_\_\_

Authorised Signatory:

<p><b>Affix Stamp</b></p> <p>(₹. _____)</p>
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**Part B****1. Definitions & Abbreviations**

In this Policy, where the context so admits, the singular includes the plural and the masculine shall include the feminine, and the following expressions shall, unless repugnant to the context, have the following meanings;

- a) **'Accelerated Accidental Total Permanent Disability Sum Assured (AATPD Sum Assured)'** means the amount of Life Insurance Cover with respect to AATPD benefit and is a proportion of the Prevailing Sum Assured of the Member as on the date of occurrence of the event. This proportion will be as chosen at the Date of commencement of Risk and will be recorded in the Membership Register. On payment of this benefit, the Death Benefit will be reduced by the mentioned proportion from the Prevailing Sum Assured then.
- b) **'Accident'** is as per the definition and the exclusion as given Annexure K attached herewith.
- c) **'Accidental Death Benefit (ADB)'** means death of a Member as a result of bodily injury caused by an Accident.
- d) **'Accidental Total Permanent Disability (ATPD)'** means disability of a Member as a result of bodily injury caused by an Accident.
- e) **'Accelerated Critical Illness (ACI) Sum Assured'** means the amount of Life Insurance Cover with respect to ACI benefit and is a proportion of the Prevailing Sum Assured of the Member as on the date of occurrence of the event. This proportion will be as chosen at the Date of commencement of Risk and will be recorded in the Membership Register. On payment of this benefit, the Death Benefit will be reduced by the mentioned proportion from the Prevailing Sum Assured then.
- f) **'Act'** means the Insurance Act, 1938 (4 of 1938).
- g) **'ADB Sum Assured'** means the amount of Life Insurance Cover with respect to ADB and is a proportion of the Sum Assured of the Member as on the Date of Commencement of Risk. This proportion will be recorded in the Membership Register.
- h) **'Beneficiary/ Claimant'** shall mean the Member or in case of death of the Member, the legal heirs or the Nominee who is eligible under the Scheme to receive the benefits payable under the Policy.
- i) **'Certificate of Insurance (COI)'** means certificate issued by the Company on the basis of the details mentioned in the Member's Enrolment Form to each Member as an evidence of acceptance of Life Insurance Cover on the life of the Member

under the Policy.

- j) **'Company'** shall mean and refer to the Bajaj Allianz Life Insurance Company Limited.
- k) **'Critical Illness (CI)'** means all the critical illnesses cover under the Policy, all, as defined in Annexure K attached herewith along with the exclusions.
- l) **'Customer Information Sheet (CIS)'** is the document provided to the Policyholder along with the Policy Document that explains the basic features of the Policy in simple words.
- m) **'Date of Commencement of Risk'** means the Entry Date as mentioned in the Certificate of Insurance from which the Life Insurance Cover of the Member commences under the Policy.
- n) **'Death Benefit'** means the benefit payable on the death of the Member and as detailed in Section 3.1.a) below.
- o) **'Endorsement'** means conditions attached/affixed to this Policy incorporating any amendments or modifications agreed to or issued by the Company.
- p) **'Entry Date'** shall mean the Policy Commencement Date in relation to the Members already existing as Members under the Scheme on the Policy Commencement Date and in relation to the new Members the date when their names are recorded in the Membership Register as a Member after due approval from the Company.
- q) **'Foreclosure'** means an early termination of your Policy as per the details mentioned in Section 5 below.
- r) **'First Diagnosis of CI'** means the diagnosis of the first CI in the lifetime of the Member.
- s) **'Free Look Period'** means the period in which the Policyholder can choose to terminate the Policy as per the details mentioned in Section 8 below.
- t) **'Goods and Service Tax (GST)'** is charged based on type of Policy communication address of Policyholder. This may change subject to change in rate/state in address of the Policyholder as on date of adjustment.
- u) **'Grace Period'** means a period of fifteen (15) days for a monthly Premium Payment Frequency and thirty (30) days for any Premium Payment Frequency other than monthly Premium Payment Frequency, from the due date of Regular Premium payment, without any penalty or late fee, during which time the Policy under the Certificate of Insurance is deemed to be in-force with the risk cover without any interruption as per the Policy terms and conditions. After the end of Grace Period, the Life Insurance Cover will lapse, if due Regular Premium remains unpaid.

- Grace Period is not applicable for a Single Premium payment Policy.
- u) 'IRDAI'** means Insurance Regulatory and Development Authority of India
- v) 'Inbuilt Benefit'** refer to ADB, AATPD benefit or ACI benefit, as applicable.
- w) 'Joint Life'** means, both the Members, the Primary Life Assured and the Secondary Life Assured are covered under the Policy.
- i) Joint Life Option 1: The Life Insurance Cover shall be on the basis of first death, and/or first ADB, as applicable, and/or first ATPD, as applicable, and/or first CI, as applicable, to any one of the Joint Life Members, where only one Sum Assured will be available for both the Joint Life Members. On first occurrence of the covered event, that cover will terminate for both the Joint Life Members.
- ii) Joint Life Option 2: The Life Insurance Cover shall be on individual basis, where each Member (out of the Joint Life Members) has individual Sums Assured. On first occurrence of the covered event, all applicable Life Insurance Covers will continue on the surviving Member (out of the Joint Life Members).
- x) 'Joint Life Members'** means the Primary Life Assured and the Secondary Life Assured together.
- y) 'Life Insurance Cover'** shall mean the risk cover provided against the risk of death, ADB, ATPD and First Diagnosis of CI to the Member under this Policy as specified in the Certificate of Insurance, and shall be deemed to commence on the Date of Commencement of Risk of the Member.
- z) 'Maturity Date'** is the date as recorded in the Membership Register on which the Life Insurance Cover on the life of the Member under the Policy expires and the membership terminates automatically.
- aa) 'Member'** shall mean a person in the case of Single Life or two persons (i.e., the Primary Life Assured and the Secondary Life Assured) in the case of Joint Life, who meet the eligibility criteria specified in the Scheme Rules, and whose name has been recorded in the Membership Register as a Member effective from the Date of Commencement of Risk of the Member, after due approval from the Company, and on whose life the Life Insurance Cover under this Policy has been effected.
- bb) 'Membership Anniversary'** shall mean the date corresponding numerically with the Date of Commencement of Risk of Member in each subsequent membership Year.
- cc) 'Membership Register'** is a record of Members maintained by the Policyholder, which contains information about the Member including-but-not-limited to any unique identification number, name, age, gender, Claimant, Sum Assured, level cover/reducing cover, Life Insurance Covers taken (including proportions), Date of Commencement of Risk, Regular Premium/Single Premium, Premium Due Date, Premium Payment Term, Policy Term of Member and Maturity Date, if any.
- dd) 'Minor'** is a Life Assured or Nominee who is aged less than 18 years.
- ee) 'Nomination'** means the process of appointing person(s) to receive Policy proceeds/benefits, subject to section 3.4, on the occurrence of contingent event to the Life Assured. Nomination shall be as per Section 39 of the Insurance Act, 1938, as amended from time to time.
- ff) 'Nominee'** means the person(s), whose name has been entered in the Membership Register maintained by the Policyholder as being eligible under the Scheme to receive the benefits payable under the Policy.
- gg) 'Policy Anniversary'** shall mean the date corresponding numerically with the Date of Commencement of Risk of Member in each subsequent Policy Year.
- hh) 'Policy Term of Member'** means the period between the Date of Commencement of Risk of a Member and his Maturity Date.
- ii) 'Policy'** means the arrangements established by the Policy Terms and Conditions.
- jj) 'Policyholder'** means the person or entity who has been named as the Policyholder in the Schedule.
- kk) 'Policy Commencement Date'** shall mean the date, as mentioned in the Schedule, from which this Policy takes effect.
- ll) 'Policy Terms and Conditions'** means this Policy wording, the Schedule (which is attached herewith and forms part of this Policy and if revised then the latest one), any Annexure and the Proposal Form submitted by or on behalf of the Policyholder for the purpose of obtaining this Policy and any other information or documentation provided to the Company for that purpose and based upon which this Policy has been issued.
- mm) 'Policy Year'** is the year commencing on the Policy Commencement Date or an anniversary thereof.
- nn) 'PPT of the Member'** shall mean Premium Payment Term of the Member

- oo) 'Premium'** shall mean the Regular Premium or Single Premium, as applicable under this Policy.
- pp) 'Premium Due Date'** shall mean the date as mentioned in the Membership Register and on which the due Regular Premium has to be paid for each respective Member under Regular Premium option.
- qq) 'Premium Payment Term (PPT) of the Member'** shall mean the term as recorded in the Membership Register during which the Regular Premiums due for the Member under the Policy are to be paid, in order to secure the Life Insurance Cover.
- rr) 'Prevailing AATPD Sum Assured'** shall mean
- i) In case the Life Insurance Cover w.r.t. ATPD is level through-out the Policy Term of the Member – Sum Assured w.r.t. that Member.
  - ii) In case the Life Insurance Cover w.r.t. ATPD is reducing as per the Schedule of Insurance of a Member – The amount as on the date of death, w.r.t. that Member as reflected in that Schedule of Insurance.
- ss) 'Prevailing ACI Sum Assured'** shall mean
- i) In case the Life Insurance Cover w.r.t. CI is level through-out the Policy Term of the Member – Sum Assured w.r.t. that Member.
  - ii) In case the Life Insurance Cover w.r.t. CI is reducing as per the Schedule of Insurance of a Member – The amount as on the date of death, w.r.t. that Member as reflected in that Schedule of Insurance.
- tt) 'Prevailing Sum Assured'** shall mean
- i) In case the Life Insurance Cover w.r.t. death is level through-out the Policy Term of the Member – Sum Assured w.r.t. that Member.
  - ii) In case the Life Insurance Cover w.r.t. death is reducing as per the Schedule of Insurance of a Member – The amount as on the date of death, w.r.t. that Member as reflected in that Schedule of Insurance.
- uu) 'Primary Life Assured'** shall refer to the primary Member in a Joint Life.
- vv) 'Regular Premium'** shall mean the amount that is payable by the Policyholder at Date of Commencement of Risk and on each subsequent Premium Due Dates during the Premium Payment Term to continue the Life Insurance Cover for each Member, in case of Regular Premium option under this Policy. This term also includes the proportionate Regular Premium payable for the Remaining Sum Assured.
- ww) 'Regulated Entities'** means (i) Reserve Bank of India Regulated Scheduled Commercial Banks (including Cooperative Banks); (ii) Non-Banking Financial Institutions duly registered with RBI;
- (iii) National Housing Bank (NHB) regulated Housing Finance Companies; (iv) National Minority Development Finance Corporation (NMDFC) and its State Channelizing Agencies; (v) Small Finance Banks regulated by RBI; (vi) Mutually aided Cooperative societies formed and registered under the applicable State Act concerning such societies; (vii) Microfinance companies registered under section 8 of The Companies Act 2013; (viii) any other entity which IRDAI may notify from time to time.
- xx) 'Remaining Sum Assured'** means the proportion of the Prevailing Sum Assured after the claim/s for (i) AATPD benefit and/or (ii) ACI benefit has/ have been paid; and which will be used to determine the amount of Death Benefit.
- yy) 'Revival Period'** means the period of five (5) consecutive years from the date of first unpaid Regular Premium but not going beyond end of the Policy Term of Member, during which the Member is entitled to revive his Life Insurance Cover, which was discontinued due to non-payment of Regular Premium.
- zz) 'Schedule of Insurance'** shall mean a schedule specific to each Member who has opted for reducing Life Insurance Cover which is a part of this Policy and which shows the amount of Sum Assured in each year, is used to determine the amount for which the Member is assured against the risk of death, ADB, ATPD or CI, as applicable, in the Policy.
- aaa) 'Scheme Rules'** shall mean the rules adopted by the Policyholder and approved by the Company to run this Policy to provide the Life Insurance Cover to the Member, as a pre-requisite to the issuance of this Policy. A certified copy of the Scheme Rules has to be furnished to the Company by the Policyholder.
- bbb) 'Secondary Life Assured'** shall refer to the Member other than the Primary Life Assured in a Joint Life.
- ccc) 'Single Life'** shall mean Life Insurance Cover for an individual member and is not a Joint Life.
- ddd) 'Single Premium'** shall mean the lump sum amount that is payable by the Policyholder to secure Life Insurance Cover of the Member, in case Single Premium payment option has been chosen by the Member under this Policy.
- eee) 'Sum Assured'** shall mean the amount of Life Insurance Cover of death with respect to each Member in accordance with the Scheme Rules and as reflected in the Certificate of Insurance prepared on the Date of Commencement of Risk.
- fff) 'Total Premiums Paid'** means, as applicable, the Single Premium or the total of all Regular



Premiums received by the Company, excluding any extra premium, rider Premium and taxes. Total Premiums will be w.r.t. the Member or Primary Life Assured and Secondary Life Assured (in Joint Life Option 1 & 2), as applicable.

**ggg) 'UIN'** means the Unique Identification Number allotted to this Plan by the IRDAI

**hhh) 'w.r.t.'** means 'with respect to'

The terms '**Herein**', '**Herewith**', '**Herein After**', '**Hereafter**', '**Hereof**', '**Hereto**' and '**Hereunder**' used wherever in this Policy refer to the Policy in its entirety.

## **Part C**

### **2. Policy Description**

- a) The Policy is issued under a non-linked, non-participating, life, group micro pure risk insurance plan with option to pay Single Premium or Regular Premium providing level cover or reducing cover, as chosen at the Date of Commencement of Risk.
- b) The Policy is available on Single Life or Joint Life basis. The Single Life, Joint Life Option 1 or Joint Life Option 2 has to be chosen at the Date of Commencement of Risk, and cannot be changed during the Policy Term of Member.
- c) The Policyholder shall hold the Policy and all benefits payable, in accordance with the Scheme Rules, and shall be for the benefit of the Claimant, and the Policyholder shall have no beneficial interest in the Policy.
- d) The Policy has the Life Insurance Covers of the base Death Benefit, and three (3) Inbuilt Benefits - ADB, AATPD benefit and/or ACI benefit, whose details are as given in Section 3.1 below. The Inbuilt Benefits have to be chosen by the Member at the Date of Commencement of Risk, and cannot be changed during the Policy Term of Member.
- e) The Policy does not in any way confer any right whatsoever on the Policyholder to otherwise share in the profits or surplus of the business of the Company.
- f) In case of Minor Members, the Life Insurance Cover will vest on the Minor Member on attaining majority.

### **3. Benefits**

3.1. Provided all due Premiums have been paid and the Life Insurance Cover of the Member has not been terminated, the Company shall be liable to pay the following benefits, as specified in the Certificate of Insurance

of the Member, to the Claimant, subject to Section 5, Section 7, Section 10, Section 11 and Section 21 below.

#### **a) Death Benefit**

##### **i) Single Life or Joint Life Option 2:**

- (a) Provided all due Premiums have been paid up to date, on death of the Member if only the base Death Benefit cover is taken, and the cover of the Member is in-force as on the date of death, the death benefit payable is Prevailing Sum Assured.
- (b) If Life Insurance Cover/s of AATPD benefit and/or ACI benefit was/were taken w.r.t. the Member and no prior AATPD benefit and/or ACI benefit was/were paid w.r.t. that Member, then, the Prevailing Sum Assured w.r.t. that deceased Member as on the date of death shall be payable as the Death Benefit.
- (c) If Life Insurance Cover of AATPD benefit only or ACI benefit only or both were taken w.r.t. the Member and a prior AATPD benefit or ACI benefit AATPD benefit ACI benefit were already paid w.r.t. that Member, then, the Remaining Sum Assured w.r.t. that Member as on the date of death shall be payable as the Death Benefit.
- (d) If the Life Insurance Cover of ADB was taken w.r.t. to that Member and if the death of the Member is due to Accident, then, additionally, the ADB Sum Assured shall be paid as ADB.
  - (1) If the Life Insurance Cover is lapsed [as per Section 5 below], no Death Benefit is payable.
  - (2) In Single Life and Joint Life Option 2, all Life Insurance Cover of the deceased Member shall be terminated, immediately and automatically. In Joint Life Option 2, all

Life Insurance Cover w.r.t. the surviving Member shall be continued till the expiry of the Policy Term of the Member.

**ii) Joint Life Option 1:**

- (1) Provided all due Premiums have been paid up to date, on death of the Member any time during the policy term; including accidental death;
  - (a) If Life Insurance Cover/s of AATPD benefit and/or ACI benefit was/were taken w.r.t. the Members and no prior AATPD benefit and/or ACI benefit was/were paid w.r.t. either of the Joint Life Members, then, on first death of a Member (out of the Joint life Members), the Prevailing Sum Assured w.r.t. the Joint Life Members as on the date of death shall be payable as the Death Benefit.
  - (b) If Life Insurance Cover of AATPD benefit only or ACI benefit only or both were taken w.r.t. the Joint Life Members and a prior AATPD benefit or ACI benefit or AATPD benefit and ACI benefit were already paid w.r.t. either of the Joint Life Member, then, the Remaining Sum Assured w.r.t. the Joint Life Members as on the date of death (first death out of the Joint life Members) shall be payable as the Death Benefit where such reduction shall be made shall be made for the AATPD benefit and/or ACI benefit has already been paid w.r.t. the Member.
  - (c) If the Life Insurance Cover of ADB was taken w.r.t. to the Joint Life Members and if the death (first

death out of the Joint life Members) of the Member is due to Accident, then, additionally, the ADB Sum Assured shall be paid as ADB.

- (2) If the Life Insurance Cover is lapsed [as per Section 5 below], no Death Benefit is payable.
- (3) All Life Insurance Cover under the policy w.r.t. both the Joint Life Members shall be terminated, immediately and automatically on payment of the Death Benefit on the date of death of any of the two.

**b) Accelerated Accidental Total Permanent Disability (AATPD) Benefit**  
(which is an acceleration of the Death Benefit) having separate in-built benefits for both the lives;

**i) Single Life or Joint Life Option 2:**

- (1) If AATPD benefit was taken w.r.t. a Member and provided all due Premiums have been paid up to date, and no prior Death Benefit has been paid, on the first occurrence of AATPD to that Member,
  - (a) The Prevailing AATPD Sum Assured w.r.t. that Member as on the date of first occurrence shall be payable as the AATPD benefit.
  - (b) The Life Insurance Cover of AATPD benefit of that Member shall be terminated, immediately and automatically, but shall continue for the life which has not claimed the Benefit.
  - (c) The Life Insurance Cover for Death Benefit w.r.t. that Member will be continued with the Remaining Sum Assured, if applicable, subject to payment of due Premiums.
  - (d) If chosen, the Life Insurance Cover of ADB Benefit and/or ACI benefit

w.r.t. that Member will be continued with their respective Sum Assured, subject to payment of due Premiums

- (2) If AATPD benefit was taken w.r.t. a Member and if the Life Insurance Cover is lapsed [as per Section 5 below], no AATPD benefit is payable.
- (3) In Joint Life Option 2, all Life Insurance Cover other than those claimed previously w.r.t. the surviving Member shall be continued, subject to payment due Premiums till the expiry of the Policy Term of the Member.

**ii) Joint Life Option 1:**

- (1) If AATPD benefit was taken w.r.t. the Joint Life Members and provided all due Premiums have been paid up to date, on the first occurrence of AATPD to any one of the Joint Life Members provided no prior Death Benefit has been paid,
  - (a) The Prevailing AATPD Sum Assured w.r.t. the Members as on the date of first occurrence shall be payable as the AATPD benefit.
  - (b) The Life Insurance Cover of AATPD benefit w.r.t. both the Joint Life Members shall be terminated, immediately and automatically.
  - (c) The Life Insurance Cover for Death Benefit w.r.t. both the Joint Life Members will be continued with the Remaining Sum Assured, if applicable, subject to payment of due Premiums.
  - (d) If chosen, the Life Insurance Cover of ADB Benefit and/or ACI benefit w.r.t. both the Joint Life Members will be continued with their respective Sum Assured, subject to payment of due

Premiums.

- (2) If AATPD benefit was taken w.r.t. the Joint Life Members and if the Life Insurance Cover is lapsed [as per Section 5 below], no AATPD benefit is payable.

**c) Accelerated Critical Illness (ACI) Benefit** (which is an acceleration of the Death Benefit)

**i) Single Life or Joint Life Option 2:**

- (1) If ACI benefit was taken w.r.t. a Member and provided all due Premiums have been paid up to date, on the First Diagnosis of CI of a Member,
  - (a) The Prevailing ACI Sum Assured w.r.t. that Member as on the date of First Diagnosis shall be payable as the ACI benefit provided no Death Benefit has already been paid.
  - (b) The Life Insurance Cover of ACI benefit of that Member shall be terminated, immediately and automatically. However, the ACI cover would continue for the life which has not claimed ACI benefit.
  - (c) The Life Insurance Cover for Death Benefit w.r.t. that Member will be continued with the Remaining Sum Assured, if applicable, subject to payment of due Premiums.
  - (d) If chosen, the Life Insurance Cover of ADB Benefit and/or AATPD benefit w.r.t. that Member will be continued with their respective Sum Assured, subject to payment of due Premiums
- (2) If ACI benefit was taken w.r.t. a Member and if the Life Insurance Cover is lapsed [as per Section 5 below], no ACI benefit is payable.
- (3) In Joint Life Option 2, all Life Insurance Cover other than

those claimed previously w.r.t. the surviving Member shall be continued, subject to payment due Premiums till the expiry of the Policy Term of the Member.

**ii) Joint Life Option 1:**

(1) If ACI benefit was taken w.r.t. the Joint Life Members and provided all due Premiums have been paid up to date, on the First Diagnosis of CI to any one of the Joint Life Members, provided no prior death benefit has been paid w.r.t. any one:

(a) The Prevailing ACI Sum Assured w.r.t. the Joint Life Members as on the date of First Diagnosis shall be payable as the ACI benefit.

(b) The Life Insurance Cover of ACI benefit w.r.t. both the Joint Life Members shall be terminated, immediately and automatically.

(c) The Life Insurance Cover for Death Benefit w.r.t. both the Joint Life Members will be continued with the Remaining Sum Assured, if applicable, subject to payment of due Premiums.

(d) If chosen, the Life Insurance Cover of ADB Benefit and/or AATPD benefit w.r.t. both the Joint Life Members will be continued with their respective Sum Assured, subject to payment of due Premiums.

(2) If ACI benefit was taken w.r.t. the Joint Life Members and if the Life Insurance Cover is lapsed [as per Section 5 below], no ACI benefit is payable.

d) Notwithstanding that mentioned in Sub-Section a) to Sub-Section c) above, during the Grace Period, the

Member/s shall be covered for the Life Insurance Cover/s chosen. On the occurrence of death/Accidental Death/AATPD/First Diagnosis of ACI (as applicable) during the Grace Period, the due-but-unpaid Premium will be deducted from the benefit amount payable.

**3.2. Death Benefit in Installments**

a) If the Life Insurance Cover is a level cover, the Claimant shall have the option to take the Death Benefit in equal monthly instalments spread over the instalment period chosen out of the instalments periods available in the table in Sub-Section c) below.

b) The first instalment shall be due on the date of intimation of death to the Company.

c) The yearly instalment amount shall be equivalent to [Sum Assured/ Instalment Period] \* Instalment Factor. The applicable instalment factor will be picked from the table below:

Instalment Period (in Yrs)	1	2	3	4	5
Instalment Factor	1.00	1.02	1.04	1.06	1.08

Instalment Period (in Yrs)	6	7	8	9	10
Instalment Factor	1.10	1.12	1.14	1.16	1.19

d) The instalment factors will be reviewed from time to time with prior approval of IRDAI.

e) The instalment amount for frequencies other than yearly shall be equivalent to Yearly Instalment Amount \* Frequency Factor. The frequency factors for frequencies other than yearly are:

Instalment frequency	Monthly	Quarterly	Half yearly
Frequency factor	0.085	0.254	0.502

f) This feature shall not be available for credit/mortgage schemes.

### **3.3. Maturity Benefit**

No maturity benefit shall be payable on the survival of the Member to the Maturity Date.

### **3.4. Surrender Value**

#### **a) Membership Surrender:**

A Member, through the Policyholder, may surrender the Life Insurance Cover under the Policy. The following provision shall be applicable for surrender.

i) No Surrender Value shall be payable:

(1) If the Premium is Single Premium, and the Policy Term of the Member is up to two (2) months in case of both level and reducing cover or

(2) If the Premium is Regular Premium and the Sum Assured is level through-out the Policy Term of the Member and the Policy Term of the Member is equal to the PPT of the Member

ii) If the Premium is Regular Premium and the Sum Assured is reducing as per the Schedule of Insurance, the Surrender Value payable shall be as given below.

(1) During the Premium Paying Term of the Member – No Surrender Value shall be payable.

(2) After the Premium Paying Term of the Member, the Surrender Value payable shall be as below. The Surrender Value is the higher of Special Surrender Value (SSV) and Guaranteed Surrender Value (GSV).

(a) The Guaranteed Surrender Value is:  
$$\text{GSV Factor} * \text{Total Premiums Paid till date of surrender w.r.t. that Member}$$
  
GSV factors as provided in the company's website.

(b) The Special Surrender Value is:  
$$\text{SSV1 Factor} * \text{Total Premiums Paid till date of surrender w.r.t. that Member}$$

The prevailing SSV1 factors as provided in the company's website.

iii) If the Premium is Single Premium, and the Policy Term is greater than two (2) months, for level or reducing cover, the Surrender Value payable is the higher of Special Surrender Value (SSV) and Guaranteed Surrender Value (GSV).

(1) Guaranteed Surrender Value is:

$$\text{GSV Factor} * \text{Single Premium w.r.t that Member}$$

GSV factors as provided in the company's website.

(2) The Special Surrender Value (SSV) is:

(a) Level cover: 
$$\text{SSV2 Factor} * \text{Single Premium w.r.t that Member}$$

The prevailing SSV2 factors as provided in the company's website.

(b) Reducing cover: 
$$\text{SSV3 Factor} * \text{Single Premium w.r.t that Member}$$

The prevailing SSV3 factors as provided in the company's website.

iv) The Company shall have the right to revise the SSV1, SSV2, SSV3 Factors from time to time, subject to prior IRDAI approval.

v) On surrender of Membership, the Surrender Value, if any, will be payable as above, and the Life Insurance Cover w.r.t that Member will terminate, immediately and automatically.

#### **b) Policy Surrender:**

(i) The Policyholder can surrender the Policy at any time. After surrender, no new Members can be enrolled under the Policy and no Surrender Value shall be payable under the Policy then.

(ii) The existing Members under the Policy will continue to be covered under the Policy (on payment of all due Premiums) and the Members will be directly serviced by the Company. The Policy will

be endorsed to this effect and the Members will be intimated of the same.

### **3.5. Payments of Benefits**

- a) If the Policy is a lender-borrower group insurance schemes, the payment of Claim amount to Regulated Entities as benefits under the Policy shall be payable by the Company to the Policyholder subject to the provision in respect of "IRDAI/PPGR/CIR/MISC/97/06/2024 Master Circular on Operations and Allied Matters of Insurers", as amended from time to time. The current Regulated Entities are as below:
1. Reserve Bank of India (RBI) Regulated Scheduled Commercial Banks (including Co-operative Banks)
  2. NBFCs having Certificate of Registration from RBI
  3. National Housing Bank (NHB) Regulated Housing Finance Companies
  4. National Minority Development Finance Corporation (NMDFC) and its State Channelizing Agencies
  5. Small Finance Banks regulated by RBI
  6. Mutually Aided Cooperative Societies formed and registered under the applicable State Act concerning such Societies
  7. Microfinance companies registered under section 8 of the Companies Act, 2013
  8. Any other category as approved by the Authority
    - i) For an Employer-Employee group, the claims of Members will be paid to the Policyholder, who would in turn is expected to pay to the Claimant.
    - ii) For a Non-Employer-Employee Group, the claim payments shall be made in the name of the Claimant, except as mentioned in Sub-Section iii) below. The Company can utilize the services of Policyholder in facilitating intimation, settlement of claims, and disbursement of

the claim, for administrative ease.

- iii) If the Policy is a scheme of lender-borrower, the claim payment to Policyholder is subject to following:
- (1) The Member shall specifically authorize the Company to make payment to the extent of any outstanding loan balance or Sum Assured as per Schedule of Insurance, whichever is lower, to the Policyholder by deducting from the Death Benefit, ADB, AATPD Benefit or ACI benefit, as applicable. A Credit Account Statement shall be obtained from the Policyholder at the time of claim. The payment of the balance claim amount shall be made in the name of the Claimant. The Scheme Rules shall enable the authorization.
  - (2) The specific authorization shall be in consideration of:
    - (a) The Member having received a loan from the Policyholder and
    - (b) Member's loan outstanding as on the date of benefit payment
  - (3) The authorization shall be obtained by the Policyholder from the Member at the time of becoming a Member under this Policy or at a later date.
  - (4) In absence of authorization as mentioned in Sub-Section iii) above, the benefit under this Policy shall be paid to the Claimant.
  - (5) The Company shall communicate to the Claimant the complete details of the claims

amount settled, the remittances made to the Policyholder towards outstanding loan balance and the balance claim amount payable to the Claimant.

- (6) The Company reserves the right to audit or cause an audit of the accuracy of the Credit Account Statements received, as per the above mentioned IRDAI circular.

- iv) In case of death/Accidental Death/ATPD/First Diagnosis of CI (as applicable) of the Member, when no Claimant has been nominated in the Membership Register or all nominated Claimants have predeceased the Member, then, the benefit under Section 3 above shall be payable to the legal heirs of the Member.

- b) Other than those mentioned in Sub-Section (a) above the benefits under this Policy shall be paid through the Policyholder for the benefit of the Beneficiary and the Policyholder agrees to pass on those benefits to the Beneficiary.

### **3.6. Mode of payment of Claim, Currency and Discharge**

The discharge or receipt duly signed by the Member or the Beneficiary shall be a valid and sufficient discharge to the Company in respect of any benefit payment due in the Policy and paid by the Company.

All the Benefits paid by the Company shall be in the name of the Member, the Policyholder shall facilitate the process.

The Policyholder hereby agrees to indemnify and hold the Company free and harmless from and against any claims, disputes or losses which may arise in connection with any payment made by the Company through the Policyholder under this Policy.

## **Part D**

### **4. Eligibility**

The Life Insurance Cover on the life of Member shall commence on the Date of Commencement

of Risk of such Member subject to him being eligible and continuing to be eligible for the Life Insurance Cover as per the Scheme Rules and subject to the any underwriting as per the board approved underwriting policy of the Company. Every Member shall become entitled to the benefits under this Policy from the Date of Commencement of Risk and as per the Policy Terms & Conditions.

Any variations in the Policy Terms and Conditions effected hereunder and in respect of Membership, shall be given effect only by endorsements and by a signature of a duly authorized officer of the Company.

### **5. Non-forfeiture**

- a) In the event of non-payment of Regular Premium due in respect of Member under the Policy before the expiry of the Grace Period, all Life Insurance Cover for the Member under the Policy shall lapse, immediately and automatically, and no benefit under the Life Insurance Cover is payable.
- b) But, if his/her membership in the group continues, then, the cover can be revived as per the term and conditions in section 6 below.
- c) In case Premium in respect of a Member is collected by the Policyholder within Grace Period but is not remitted to the Company for any reason, then, on expiry of Grace Period, all Life Insurance Cover will continue in respect of those Members.
- d) The Life Insurance Cover for the Member under the Policy, which has lapsed due to non-payment of Regular Premium even during the Grace Period, can be revived, subject to Section 6 below.
- e) On expiry of the Revival Period, if the Life Insurance Cover was not revived, the Membership of the Member shall be terminated, immediately and automatically, and no benefit other than any Surrender Value shall be payable to the Member under this Policy on such termination.
- f) On Foreclosure of loan, the Life Insurance Cover of the Member will also get terminated, and Surrender Value, if any, will be paid.
- g) In case of Members exiting the scheme or the scheme is terminated by the Master Policyholder, the Surrender Value shall be refunded.
- h) On surrender of Membership, the Surrender Value, if any, will be payable as per Section 3.4 above and the Membership will terminate

automatically.

- i) On foreclosure of loan, the cover of the member will also get terminated, and surrender value, if any, will be paid.
- j) The Policyholder and the respective Member shall be responsible to intimate the Company about the Foreclosure of loan or transfer of loan to other financial institutions by the Member.

## **6. Revival**

A Policy or Membership, which has lapsed due to non-payment of Regular Premium before the expiry of the Grace Period, may be revived subject to the following conditions;

- i. The written application for revival of Life Insurance Cover is made within five (5) years from the due date of the first unpaid Premium and before the end of Premium Payment Term in respect of that Member;
- ii. The arrears of Premiums together with interest at such rate as decided by the Company from time to time along with applicable taxes are paid. The current applicable interest rate# on revival is 10% p.a. compounded half-yearly.
- iii. The revival of the Policy/Membership may be on terms different from those applicable to the Policy before it lapsed based on prevailing board approved underwriting policy of the Company.
- iv. The Company may revive or refuse to revive the Policy/Membership based on the prevailing board approved underwriting policy of the Company. If revival refused based on the prevailing board approved underwriting policy, the Company will refund the amount deposited for the purposes of revival.
- v. The revival will only be effective when the Company has specifically communicated the same to the Policyholder.
- vi. After revival, the Life Insurance Cover shall be available as per the Schedule of Insurance only.

**Note:** The revival interest rate will be benchmarked to the G-Sec based on the information from Financial Benchmark India Private Ltd (FBIL). It will be equal to [10-year G-Sec yield PLUS 2%] rounded-up to the next full interest rate. The revival interest rate will be reviewed on an annual basis.

Any change in bases used for determination of applicable interest rate will be subject to prior

approval of IRDAI.

## **7. When the Life Insurance Cover ceases for a Member**

- a) The Life Insurance Cover of a Member shall cease on the happening of any of the following events: -
  - i) On date of death of the Member.
  - ii) AATPD benefit: On payment of claim w.r.t. AATPD benefit
    - (1) If the AATPD Sum Assured is less than the Prevailing Sum Assured, Life Insurance Cover w.r.t AATPD benefit ceases.
    - (2) If the AATPD Sum Assured is equal to the Prevailing Sum Assured, all life insurance covers cease
  - iii) ACI benefit: On payment of claim w.r.t. ACI benefit
    - (1) If the ACI Sum Assured is less than the Prevailing Sum Assured, life insurance cover w.r.t CI benefit ceases.
    - (2) If the ACI Sum Assured is equal to the Prevailing Sum Assured, all life insurance covers cease.

The details of Life Insurance Cover cessation are as per Section 3.1 above.

- b) The Membership of a Member shall cease, and no further benefits will be available to the Member, on the happening of any of the following events: -
  - i) On payment of the refund on Free Look cancellation, as per Section 8 below.
  - ii) On payment of refund of eligible premiums/ Surrender Value on suicide, as per Section 11a) below.
  - iii) On payment of claim arising out of the earlier occurrence of:
    - (1) Death [if the option of Death Benefit in Instalments, as per Section 3.2 above, was NOT taken],
    - (2) ATPD [if the AATPD Sum Assured is equal to the Prevailing Sum Assured],
    - (3) First Diagnosis of CI [if the ACI Sum Assured is equal to the Prevailing Sum Assured] or
    - (4) ATPD and CI [if the total of the AATPD Sum Assured & the ACI Sum Assured is equal to the Prevailing Sum Assured],

This will be based on the Life Insurance Covers chosen for the Member. The



details of Life Insurance Cover cessation are as per Section 3.1 above.

- iv) On failing to revive Membership before the expiry of the Revival Period [as per Section 6 above], after the Life Insurance Cover has lapsed [as per Section 5 above].
- v) On payment of the Surrender Value.
- vi) On reaching the Maturity Date / completion of the Policy Term of the Member.
- vii) On payment of the last instalment, if the option of Death Benefit in Instalments [as per Section 3.2 above] was taken.

**8. Free Look Period**

- a. The Policyholder/Member shall be provided a Free Look Period of 30 days beginning from the date of receipt of Policy Document, whether received electronically or otherwise, to review the Policy Terms and Conditions of such Policy, except if tenure of the Policy is less than a year.
- b. In the event the Policyholder disagrees to any of the Policy Terms and Conditions, or otherwise and has not made any claim, the Policyholder shall have the option to return the Policy to the Company for cancellation, stating the reasons for the same.
- c. Irrespective of the reasons mentioned, the Policyholder shall be entitled to a refund of the Premium paid subject only to a deduction of a proportionate risk premium for the period of cover and the expenses, if any, incurred by the Company on medical examination of the proposer and stamp duty charges.
- d. A request received by the Company for cancellation of the Policy during free look period shall be processed and Premium shall be refunded within 7 days of receipt of such request, as stated in above.

**9. Loans**

No loans are available under this Policy.

**Part E**

**CHARGES, FUND OPTIONS, PORTFOLIO STRATEGIES,**

**Etc**

**Not Applicable**

**Part F**

**General Conditions**

**10. Payment of Claim**

Upon death, accidental death, ATPD or on First Diagnosis of CI, as applicable to the Member, the benefit under Section 3.1 above becomes payable on admission by the Company of claim lodged by the Claimant for the said benefit. Payment of benefit under Section 3.1 above, shall be made by the Company in accordance with Section 3.5 above. All payment of benefits shall be made by the Company subject to the Policy Terms and Conditions and the Company's right to receive all information and documentation sought which includes but not limited to following:

**A) General documents**

- (a) Certificate of Insurance/ Original Policy document issued by the Company.
- (b) KYC of Claimant along with Valid account details documents ( Cancelled cheque/ Bank statement/Bank Passbook)
- (c) KYC of LA
- (d) Proposal form with Customer authorization letter
- (e) Medical records from the physician last seen.
- (f) Certificate of Hospital Treatment
- (g) Certificate of Outstanding loan as issued by the Policyholder.
- (h) Discharge summary / Discharge card from the hospitals/ clinics where LA had taken treatment. Any other document that may be relevant in establishing the validity of the claim.
- (i) Loan Sanction letter
- (j) Credit Account Statement in case of Non Employer Employee Group Life Insurance policies covering lender borrower groups as listed under the IRDAI/PPGR/CIR/MISC/97/06/2024 Master Circular on Operations and Allied Matters of Insurers"..

**B) Additional documents in case of:**

**i. Death**

- (a) Claim intimation in writing within 180 days of occurrence of the death. However, we may condone the delay in claim intimation, if any, where the delay is proved to be for reasons beyond the control of the claimant.
- (b) The claimant's proof of entitlement to receive payment under the Policy.
- (c) Death Certificate issued by the local municipal /competent authority

- (d) Medical cause of death certificate from the doctor who last attended to the Life Assured or from the hospital in which the death occurred
- (e) Coroner's / Post Mortem Report / FIR (First Information Report) / PIR (Police Inquest Report) / Final Inquest Report in case of unnatural / accidental death.
- (f) Documents to establish right of claimant in case of no valid Nomination being in existence at the time of death.
- (g) Any other document as asked for by the Company depending on the facts and circumstances of each case.

**ii. Accidental Death**

- (a) Claim intimation in writing within 180 days of occurrence of the death of the Life Assured, and the circumstances resulting to the death of the Life Assured.
- (b) The claimant's proof of entitlement to receive payment under the Policy.
- (c) Death Certificate issued by the local municipal /competent authority.
- (d) Medical cause of death certificate from the doctor who last attended to the Life Assured or from the hospital in which the death occurred.
- (e) A copy of Coroner's / Post Mortem Report / FIR (First Information Report) / PIR (Police Inquest Report) / Final Inquest Report in case of claiming the Benefit due to an Accident under the Policy.
- (f) Any other document as asked for by the Company depending on the facts and circumstances of each case.
- (g) In case of any force majeure events (like earth quake, cyclone, flood, etc.), if the Claimant cannot produce any/all documents as stated above, the Company may undertake any investigation and then decide to pay the claim, if the Company is satisfied of the same.

**iii. Accidental Total Permanent Disability**

- (a) Claim intimation in writing within 60 days of occurrence of the accident. However, we may condone the delay in claim intimation, if any, where the delay is proved to be for reasons beyond the control of the claimant
- (b) Full scale photographs in case of amputations
- (c) FIR, MLC, Police Inquest Report, Police Final investigation report & newspaper report about the incident
- (d) Certificate of Hospital treatment / Discharge Summary
- (e) A certificate of disability from an Relevant Specialist Medical Practitioner (e.g. Orthopedic surgeon in case of Amputation / Ophthalmologist for loss of eye)
- (f) All notices, applications or notification of claim must be received and approved at the office of the Company authorized to deal with the claim.
- (g) No benefit shall be payable until the rider Life Assured has provided satisfactory proof to the Company of the occurrence of the ATPD. This includes:
- (h) A Certificate of Disability from a registered medical practitioner.
- (i) Any other document that may be relevant in establishing the validity of the claim.
- (j) In case of any force majeure events (like earth quake, cyclone, flood, etc.), if the Claimant cannot produce any/all documents as stated above, the Company may undertake any investigation and then decide to pay the claim, if the Company is satisfied of the same.
- (k) The claims will be settled within 30 days of the receipt of all the relevant documents for processing the claim and in case of delay, the prevailing penal interest will apply.
- (l) Any other document as asked for by the Company depending on the facts and circumstances of each case.

**iv. Accelerated Critical Illness**

- (a) For Accelerated Critical Illness benefit, the diagnosis of any of the Critical Illness to be confirmed by a medical practitioner and registered Medical Practitioner appointed by the Company and must be supported by acceptable clinical, radiological, histological and laboratory evidence at Policyholder's cost.
- (b) The Company should be intimated about the diagnosis of the Critical Illness within 60 days from the date of its diagnosis. However, we may condone the delay in claim intimation, if any, where the delay is proved to be for reasons beyond the control of the claimant.
- (c) Special Medical assessment reports as required by the company from relevant specialized medical practitioner.
- (d) Discharge summary, Indoor case papers, Consultation papers, treatment records related treatment against Illness.
- (e) In case of any force majeure events (like earth quake, cyclone, flood, etc.), if the Claimant cannot produce any/all documents as stated above, the Company may undertake any investigation and then decide to pay the claim, if the Company is satisfied of the same.

The benefit amount as per Section 3.1 above shall be sent by the Company to the Policyholder in the name of the Beneficiary. Once the Company has made the payment to the Policyholder, the Policyholder is completely responsible to hand over the entire amount paid by the Company to the Beneficiary and the Company shall not have any further responsibility in respect of such payment. The Policyholder Hereby agrees that it is only handling the payment to the Beneficiary on behalf of the Company and that it is not entitled to receive any payment under this Policy.

**11. Exclusions****a) Suicide Exclusion:**

- i) Under Single Life and Joint Life Option 1: In case of death of the Member or any one of the Joint Life Members due to

suicide within twelve (12) months from the Date of Commencement of Risk or the date of latest revival of the Policy/Membership, whichever is later, then, the Claimant shall be entitled to receive, the higher of 80% of the Total Premiums Paid and received w.r.t. to that Member till the date of death of the Member or the Surrender Value, if any, as on the date of death as Death Benefit, provided the Policy/Membership is in force. The Membership of that Member and the surviving Member in Joint Life Option 1 shall terminate on the payment this benefit.

- ii) Under Joint Life Option 2: In case of death of any one of the Joint Life Members due to suicide within twelve (12) months from the Date of Commencement of Risk or the date of latest revival of the Policy/Membership, whichever is later, then, the Claimant shall be entitled to receive higher of 80% of the Total Premiums Paid and received w.r.t. that Member till the date of death of the Member or the Surrender value, if any, available as on the date of death of the deceased life, as Death Benefit, provided the Policy/Membership is in force.

The Life Insurance Cover will continue on the surviving Member on Single Life basis, with all Life Insurance Cover including suicide provisions, subject to payment of all due Premiums.

- iii) Under Joint Life Option 2: In case of death of both Joint Life Members due to suicide within twelve (12) months from the Date of Commencement of Risk or the date of latest revival of the Policy/Membership, whichever is later, then, the Claimant of both lives shall be entitled to receive higher of 80% of the Total Premiums Paid and received w.r.t. that Member till the date of death of the Member or the Surrender value, if any, available as on the date of death of the deceased life, as Death Benefit, provided the Policy/Membership is in force.

**b) Other Exclusions**

Other exclusions are as detailed in Annexure K attached herewith w.r.t. ADB, AATPD benefit and ACI benefit, as applicable to the

Member.

## **12. Contract Conditions**

- a) The Company reserves the right to vary from time to time the Policy Terms and Conditions for new Members, upon sending to the Policyholder a three (3) months prior notice in writing, of its intention to do so and any such variations will thereafter apply as may be so provided in such notice of variation.
- b) The Policyholder shall furnish to the Company all such data, information or evidence as the Company may reasonably require upon or with regard to any matter affecting the Life Insurance Cover effected or to be effected herein under and the Company shall not be liable for any action taken in good faith upon any data, information, or evidence so furnished which shall be or shall prove to have been erroneous or inaccurate. Such of the Policyholder's records in original (or certified Photostat copies thereof) as in the opinion of the Company have a bearing on the benefits to be provided or the Premiums payable hereunder shall be open for inspection by the Company at all times.
- c) It is hereby expressly agreed between the Policyholder and the Company that this Policy is effected in accordance with the provisions of the Scheme Rules and in the event of the Rules being amended such amendments, if they have any bearing on or affect in any way, the Policy Terms and Conditions or any of the Life Insurance Cover effected hereunder, shall become effective only if the said amendments are approved by the Company on such terms as the Company may stipulate. Any alteration or amendment that may become necessary in the Policy Terms and Conditions on account of any amendment or alteration, approved by the Company in the provisions of the Scheme Rules shall be given effect to by appropriate endorsements to the Policy signed by an authorized Officer of the Company. In case of any discrepancy between the provisions of the Scheme Rules and the Policy Terms and Conditions, the provisions as contained in the Policy Terms and Conditions shall prevail.
- d) It is hereby further expressly agreed between the Policyholder and the Company that all disputes of any kind whatsoever which may arise under or in connection with this Policy shall be governed by and

determined in accordance with Indian laws and be submitted to the appropriate Indian courts or courts of Pune, India.

- e) The Company shall have the right to stop adding any new Member under the Policy by sending not less than ninety (90) day's advance notice to the Policyholder in writing.
- f) The Membership Register as per the annexure to Proposal Form has to be updated by the Policyholder for all additions and deletions and send the Company the updated data through CD or hard copy for updating the Company's records.
- g) On Foreclosure of loan or transfer of loan to another financial institution by the Member, the Member has the option to continue the Life Insurance Cover or surrender the Membership.
- h) The Policyholder and the respective Member shall be responsible to intimate the Company about the Foreclosure of loan or transfer of loan to other financial institutions by the Member.

## **13. Governing Law**

Any and all disputes arising out of and under this Policy shall be governed by and determined in accordance with Indian law and by the Indian Courts.

All provisions stated in this Policy are subject to the current applicable guidelines issued by the IRDAI as on date. All future guidelines that may be issued by the Regulator from time to time will also be applicable to this Policy.

## **14. Taxes**

In any case where the Company is liable to the Revenue Authorities for Income -Tax or any other taxes or duties or any payments made under this Policy, the Company shall charge such sums from the respective payment or Regular Premium or Single Premium and the Company shall not be liable to the Member/s or to the Policyholder for the sums so deducted. The Company shall be entitled to charge GST & cess and other taxes as applicable from time to time, and no separate communication shall be sent by the Company to the Policyholder and/or the Member regarding imposition of any new tax or change in the rate of existing taxes. Regular Premium or Single Premium shall be excluding applicable taxes. All Benefits payable under the Policy are subject to the tax laws and other financial enactment as they exist from time to time. GST & cess, or any other form of tax are payable under the Policy

as per tax laws and other financial enactments as they exist from time to time. Such monies will be charged to the Policyholder as per prevailing rates and regulations wherever applicable as per Company Policy.

**15. Waiver**

Failure or neglect by the Company to enforce at any time the provisions of this Policy shall not be construed or be deemed to be either a waiver of the Company's right herein nor in anyway affect the validity of the whole or any part of this Policy nor prejudice the Company's right to take subsequent action.

**16. Modifications**

The provision of this Policy cannot be changed or varied except by a Policy endorsement signed by an officer of the Company authorized for the purpose.

**17. Notices**

Any notice, direction or instruction to be given under this Policy shall be in writing or in any kind of electronic/digital format and if it is to:

- a. The Member or the Policyholder:
  - i) Shall be sent either by hand, post, courier, facsimile, Short Messaging Service (SMS), Voice call, e-mail or through any other digital/electronic media to the Policyholder or Life Assured to the address or communication/correspondence details specified by the Policyholder in the Proposal Form or as per subsequent most recent change of address and/or communication/correspondence details intimation submitted by him to the Company.
  - ii) The Company shall not be responsible for any consequences arising out of non-intimation of change of the Policyholder's/Member's address and/or communication/correspondence details. In case the notice comes back to the Company undelivered to the Policyholder/Member due to any reason, there shall not be any obligation upon the Company to make any attempt again towards dispatch of the notice which was returned undelivered.
- b. The Company, shall be submitted by hand, post, facsimile or e-mail to:  
Bajaj Allianz Life Insurance Company,  
Bajaj Allianz House, Airport Road, Yerawada,  
Pune - 411006

Toll Free No. 18002097272

Email: [customercare@bajajallianz.co.in](mailto:customercare@bajajallianz.co.in)

The Policyholder must ensure that he/she keeps the Company informed if there is a change of address and contact details. This will enable the Policyholder to receive regular updates, and communication from time to time and facilitate efficient and timely payouts by the Company of the benefits under the Policy.

**18. Assignment**

Assignment of benefits secured under a Membership should be in accordance with provisions of section 38 of the Insurance Act 1938 as amended from time to time. *[A Leaflet containing the simplified version of the provisions of section 38 is enclosed in Annexure – AA for reference]*

**19. Nomination**

The members will have the option of nominating the person to whom his benefits under the policy will be payable, by the company through the master policyholder.

Nomination should be in accordance with provisions of section 39 of the Insurance Act 1938 as amended from time to time. *[A Leaflet containing the simplified version of the provisions of section 39 is enclosed in Annexure – BB for reference]*

**20. Payment of Premium**

- a) Premiums in respect of all the Members are payable on Policy Commencement Date and on each subsequent Premium Due Date or within the Grace Period allowed (in case of Regular Premium option) without there being any obligation on the Company to notify the Policyholder and/or the Member of the due dates.
- b) Where the Premiums have not been paid on the Premium Due Dates or even during the Grace Period, in respect of the Member, the Membership of such Member under the Policy shall lapse, subject to the Non Forfeiture condition as per Section 5 below.
- c) The frequency of the Regular Premium payment may be changed by giving written notice to the Company at any membership anniversary subject to the Company agreeing to the change and the minimum Premium requirements by the Company. Regular Premium may be paid at regular intervals on an annual, half-yearly, quarterly

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or monthly basis.

- d) In the event of the premium collected by the Policyholder during the Grace Period, not being remitted to the insurer, the cover shall continue notwithstanding the expiry of Grace Period.

### 21. Fraud and Mis-statement

Fraud and Mis-statement would be dealt with in accordance with provisions of section 45 of the Insurance Act 1938 as amended from time to time. *[A Leaflet containing the simplified version of the provisions of section 45 is enclosed in Annexure – CC for reference]*

### 22. General Terms and Conditions

These Policy Terms and Conditions override and supersede all prior communications, arrangements, agreements and understandings between the Policyholder and Bajaj Allianz Life Insurance Company Limited. In all events, these Policy Terms and Conditions will be the conclusive agreement governing the legal relationship between the parties and no other documents, even if executed, will have any effect whatsoever and will not bind Bajaj Allianz Life Insurance Company Limited.

Policy Document, Policy Terms and Conditions and all the endorsements by the Company, if any, will form an integral part of this contract and will be binding on the parties

## Part G

### 23. Grievance Redressal

In case you have any query or complaint/grievance, you may contact the Grievance Officer of any nearest Customer Care Center at Branch Office of the Company during the Company's office hours from 9 am to 6 pm. Alternatively, you may communicate with the Company:

By post at: Customer Care Desk,  
Bajaj Allianz Life Insurance Company Ltd.,  
Bajaj Allianz House, Airport Road, Yerawada,  
Pune - 411006

By Phone at: Toll Free No. 18002097272

By Email: [customercare@bajajallianz.co.in](mailto:customercare@bajajallianz.co.in)

In case the Policyholder is not satisfied with the resolution provided to you by the above office, or have not received any response within 15 days, or you have suggestion in respect of this Policy or on the functioning of the office, you may contact the following official for resolution:

Grievance Redressal Officer,  
Bajaj Allianz Life Insurance Company Ltd.  
Bajaj Allianz House, 5th floor, Airport Road  
Yerawada, Pune, District – Pune, Maharashtra  
-411006

Tel No: 1800-209-7272

Email ID: [gro@bajajallianz.co.in](mailto:gro@bajajallianz.co.in)

If Policyholder is not satisfied with the response or does not receive a response from the Company within fifteen (15) days, he may approach the IRDAI Grievance Cell Centre (IGCC) on the following contact details:

By Phone: TOLL FREE NO: 155255, 1800-4254-732

By Email: [complaints@irdai.gov.in](mailto:complaints@irdai.gov.in)

By post at: Policyholder's Protection & Grievance Redressal Department – Grievance Redressal Cell

Insurance Regulatory and Development Authority of India

Sy.No.115/1,Financial District,Nanakramguda,  
Gachibowli, Hyderabad – 500 032

The Policyholder can also register his complaint online in the Bima Bharosa Shikayat Nivaran Kendra; <https://bimabharosa.irdai.gov.in>

### 24. Ombudsman

a) In case you are not satisfied with the decision/resolution of the Company, you may approach the Insurance Ombudsman if your grievance pertains to any of the following:

- i) Delay in settlement of claim
- ii) Any partial or total repudiation of claims
- iii) Disputes over premium paid or payable in terms of insurance policy
- iv) Misrepresentation of policy terms and conditions
- v) Legal construction of insurance policies in so far as the dispute relates to claim
- vi) Policy servicing related grievances against insurers and their agents and intermediaries
- vii) Issuance of Life insurance policy, which is not in conformity with the proposal form submitted by the proposer
- viii) Non-issuance of insurance policy after receipt of premium

Any other matter resulting from the violation of provisions of the Insurance Act, 1938 or the regulations, circulars, guidelines or instructions issued by the IRDAI from time to time or the terms and conditions of the

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Policy, in so far as they relate to issues mentioned at Sub-Section (i) to (vi) above.

- b) The address of the Insurance Ombudsman is provided as Address and Contact details of Ombudsman Centers attached herewith. For the latest list of insurance ombudsman, please refer to the IRDAI website at <https://www.irdai.gov.in/>  
Please refer to the Ombudsman website at <http://www.cioins.co.in/ombudsman.html>
- c) The complaint should be made in writing and duly signed by the complainant or by his legal heirs, nominee or assignee with full details of the complaint with supporting documents, name and address of the complainant, and the name of the branch or office of the insurer against whom the complaint is made
- d) Also please note that as per provision 14(3) of the Insurance Ombudsman Rules, 2017, the complaint to the Ombudsman can be made
  - i) Only if the grievance has been rejected by the grievance redressal mechanism of the Company or no reply is received within a period of one month from the date of receipt of the grievance by the insurer or the Complainant is not satisfied with the response of the insurer.
  - ii) The complaint should be filed within a period of one year from the date of receipt of order of rejection or decision by the Company or expiry of one month from the date of sending the written representation to insurer.  
Where the subject matter of complaint should not be such where proceedings are pending before or disposed of by any court or consumer forum or arbitrator.

THIS IS AN IMPORTANT DOCUMENT AND SHOULD BE PRESERVED SAFELY. PLEASE CHECK THE POLICY DOCUMENT UPON RECEIPT, AND IF ANY MISTAKE OR ERROR IS FOUND, THE SAME BE INFORMED IMMEDIATELY TO BAJAJ ALLIANZ LIFE INSURANCE COMPANY LIMITED

All communications in relation to this policy shall be addressed to.

Bajaj Allianz Life Insurance Company Ltd.,

\_\_\_\_\_

\_\_\_\_\_

Dated at \_\_\_\_\_ this \_\_\_\_Day of \_\_\_\_\_201\_  
For and on behalf of Bajaj Allianz Life Insurance Company Limited

Authorised Signatory

Bajaj Allianz Life Insurance Company Limited  
Bajaj Allianz House, Airport Road, Yerawada,  
Pune - 411 006

IRDAI Reg. No.: 116| BALIC CIN:  
U66010PN2001PLC015959

**ADB, AATPD Benefit & ACI Benefit – Definitions and Exclusions**

**I. Definitions**

**A. Accident**

An accident means sudden, unforeseen and involuntary event caused by external, visible and violent means.

**B. Accidental Death:**

'Accidental Death' means death caused by sudden, violent, unforeseen and involuntary event caused by external and visible means as revealed by an autopsy provided such death was caused directly by such Accident, and independently of any physical or mental illness within one hundred and eighty (180) days of the date of Accident.

**C. Accidental Permanent Total Disability (APTD):**

'Accidental Permanent Total Disability' means disability of a Member as a result of bodily injury caused by an Accident and is being subject to one of the following impairments within 180 days of the date of Accident:

- Total and irrecoverable loss of entire sight in both eyes or
- Amputation of both hands at or above the wrists or
- Amputation of both feet at or above the ankles or
- Amputation of one hand at or above the wrist and one foot at or above the ankle

Loss of sight means total, permanent and irreversible loss of all vision in both eyes as a result of Accident (as applicable). The diagnosis must be clinically confirmed by a medical practitioner. The blindness must not be correctable by aides or surgical procedures.

APTD benefit will be payable if the Accident occurs within Policy Term of Member but APTD occurs after expiry of Policy Term of Member, but within 180 days of the Accident.

**D. Critical Illness**

The Critical Illnesses covered under this Plan are as given below and the diagnosis of the critical illness shall be done by an independent medical practitioner.

**1. CANCER OF SPECIFIED SEVERITY**

A malignant tumour characterised by the uncontrolled growth & spread of malignant cells with invasion & destruction of normal tissues. This diagnosis must be supported by histological evidence of malignancy. The term cancer includes leukemia, lymphoma and sarcoma.

The following are excluded –

- (a) All tumors which are histologically described as carcinoma in situ, benign, pre-malignant, borderline malignant, low malignant potential, neoplasm of unknown behavior, or non-invasive, including but not limited to: Carcinoma in situ of breasts, Cervical dysplasia CIN-1, CIN - 2 and CIN-3.
- (b) Any non-melanoma skin carcinoma unless there is evidence of metastases to lymph nodes or beyond;
- (c) Malignant melanoma that has not caused invasion beyond the epidermis;
- (d) All tumors of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least clinical TNM classification T2N0M0
- (e) All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below;
- (f) Chronic lymphocytic leukaemia less than RAI stage 3
- (g) Non-invasive papillary cancer of the bladder histologically described as TaN0M0 or of a lesser classification,
- (h) All Gastro-Intestinal Stromal Tumors histologically classified as T1N0M0 (TNM Classification) or below and with mitotic count of less than or equal to 5/50 HPFs;

**2. MYOCARDIAL INFARCTION (FIRST HEART ATTACK – OF SPECIFIED SEVERITY)**

The first occurrence of heart attack or myocardial infarction, which means the death of a portion of the heart muscle as a result of inadequate blood supply to the relevant area. The diagnosis for Myocardial Infarction should be evidenced by all of the following criteria:



- i. A history of typical clinical symptoms consistent with the diagnosis of acute myocardial infarction (For e.g. typical chest pain)
- ii. New characteristic electrocardiogram changes
- iii. Elevation of infarction specific enzymes, Troponins or other specific biochemical markers.

**The following are excluded:**

- (a) Other acute Coronary Syndromes
- (b) Any type of angina pectoris
- (c) A rise in cardiac biomarkers or Troponin T or I in absence of overt ischemic heart disease OR following an intra-arterial cardiac procedure.

**3. OPEN CHEST CABG**

The actual undergoing of heart surgery to correct blockage or narrowing in one or more coronary artery(s), by coronary artery bypass grafting done via a sternotomy (cutting through the breast bone) or minimally invasive keyhole coronary artery bypass procedures. The diagnosis must be supported by a coronary angiography and the realization of surgery has to be confirmed by a cardiologist.

The following are excluded: Angioplasty and/or any other intra-arterial procedures

**4. KIDNEY FAILURE REQUIRING REGULAR DIALYSIS**

End stage renal disease presenting as chronic irreversible failure of both kidneys to function, as a result of which either regular renal dialysis (haemodialysis or peritoneal dialysis) is instituted or renal transplantation is carried out. Diagnosis has to be confirmed by a specialist medical practitioner.

**5. STROKE RESULTING IN PERMANENT SYMPTOMS**

Any cerebrovascular incident producing permanent neurological sequelae. This includes infarction of brain tissue, thrombosis in an intracranial vessel, haemorrhage and embolisation from an extracranial source. Diagnosis has to be confirmed by a specialist medical practitioner and evidenced by typical clinical symptoms as well as typical findings in CT Scan or MRI of the brain. Evidence of permanent neurological deficit lasting for at least 3 months has to be produced. The following are excluded: (a) Transient ischemic attacks (TIA); (b) Traumatic injury of the brain; (c) Vascular disease affecting only the eye or optic nerve or vestibular functions.

**6. MAJOR ORGAN /BONE MARROW TRANSPLANT**

The actual undergoing of a transplant of:

- i. One of the following human organs: heart, lung, liver, kidney, pancreas, that resulted from irreversible end-stage failure of the relevant organ, or
- ii. Human bone marrow using haematopoietic stem cells. The undergoing of a transplant has to be confirmed by a specialist medical practitioner.

**The following are excluded:** (a) Other stem-cell transplants; (b) Where only islets of langerhans are transplanted

**7. PERMANENT PARALYSIS OF LIMBS**

Total and irreversible loss of use of two or more limbs as a result of injury or disease of the brain or spinal cord. A specialist medical practitioner must be of the opinion that the paralysis will be permanent with no hope of recovery and must be present for more than 3 months.

**8. MULTIPLE SCLEROSIS WITH PERSISTING SYMPTOMS**

- I. The unequivocal diagnosis of Definite Multiple Sclerosis confirmed and evidenced by all of the following:
  - i. investigations including typical MRI findings which unequivocally confirm the diagnosis to be multiple sclerosis and
  - ii. there must be current clinical impairment of motor or sensory function, which must have persisted for a continuous period of at least 6 months, and
- II. Neurological damage due to SLE is excluded.

**9. AORTIC SURGERY**

The undergoing of surgery to correct any narrowing, dissection, obstruction or aneurysm of the thoracic or abdominal aorta, but not its branches.

The surgery must be considered medically necessary by a recognized consultant cardiologist and must be the most appropriate treatment.

All minimally invasive procedures such as keyhole, catheter, laser, angioplasty or other intra-

arterial techniques are excluded.

Congenital narrowing of the aorta and traumatic injury of the aorta are specifically excluded.

**10. PRIMARY (IDIOPATHIC) PULMONARY HYPERTENSION**

An unequivocal diagnosis of Primary (Ideopathic) Pulmonary Hypertension by a Cardiologist or specialist in respiratory medicine with evidence of right ventricular enlargement and the pulmonary artery pressure above 30 mm of Hg on Cardiac Cauterization. There must be permanent irreversible physical impairment to the degree of at least Class IV of the New York Heart Association Classification of cardiac impairment.

The NYHA Classification of Cardiac Impairment are as follows:

- i. Class III: Marked limitation of physical activity. Comfortable at rest, but less than ordinary activity causes symptoms.
- ii. Class IV: Unable to engage in any physical activity without discomfort. Symptoms may be present even at rest.

Pulmonary hypertension associated with lung disease, chronic hypoventilation, pulmonary thromboembolic disease, drugs and toxins, diseases of the left side of the heart, congenital heart disease and any secondary cause are specifically excluded.

**11. ALZHEIMER'S DISEASE**

Means the unequivocal diagnosis of Alzheimer's disease made by a recognized consultant neurologist holding an appointment in this capacity at a major hospital and supported by clinical evidence and standardized testing. The diagnosis must confirm permanent failure of brain function resulting in significant cognitive impairment.

Significant cognitive impairment is defined as a deterioration or loss of intellectual capacity to the extent that it results in the requirement for continual supervision.

Alzheimer's disease resulting from the following is excluded: (a) Alcohol or drug abuse; and (b) Non-organic diseases such as neurosis

**E. Medical Practitioner**

A Medical Practitioner is a person who holds a valid registration from the medical council of any state or Medical council of India or Council for Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of license.

The Medical Practitioner should not be

- The Member/Policyholder himself or an agent of the Company; or
- An authorised insurance intermediary (or related persons) involved with selling or servicing the insurance contract in question; or
- A member of the Member's immediate family; or
- Related to the Policyholder/Member by blood or marriage.

**II. Exclusions**

**A. Accidental Death Benefit**

The accidental death benefit will not be payable in the following situations:

- (1) Death occurs as a result of the Member committing any breach of law with criminal intent
- (2) Death as a consequence of the Member being under the influence of alcohol or drugs other than in accordance with the directions of a registered Medical Practitioner
- (3) Death as a result of self-inflicted injuries .
- (4) Death occurs as a result of the Member taking part in any naval, military or air force operation during peace time
- (5) Death occurs as a result of the Member participating in or training for any dangerous or hazardous sport or competition or riding or driving in any form of race or competition
- (6) Death occurs as a result of suicide
- (7) Death occurs as a result of aviation, gliding or any form of aerial flight other than as a fare paying passenger of a recognised airline on regular routes and on a scheduled timetable
- (8) Death occurs as a result of war, invasion, civil war, rebellion, riots.

**B. Accelerated Accidental Permanent Total Disability Benefit**

The benefit under this Policy shall not be paid in the following cases:

- 1) Disability as a result of the member/s committing any breach of law with criminal intent;
- 2) Disability of member/s as a result of war, invasion, civil war, rebellion or riot;
- 3) Any Pre-existing medical condition.  
Pre-Existing medical condition or disease is defined as condition, ailment or disease
  - a) That is/are diagnosed by a physician within 48 months to prior to the effective date of the policy issued by the insurer or its reinstatement or
  - b) For which medical advice or treatment was recommended by, or received from, a physician within forty-eight (48) months prior to the effective date of the policy issued by the insurer or its reinstatement.
- 4) Disability as a consequence of the member/s being under the influence of alcohol or drugs other than drugs prescribed by and taken in accordance with the directions of a registered medical practitioner;
- 5) Disability as a result of the member/s taking part in any naval, military or air force operation;
- 6) Disability as a result of the member/s participating in or training for any dangerous or hazardous sport or competition or riding or driving in any form of race or competition;
- 7) Disability of member/s as a result of aviation, gliding or any form of aerial flight other than as a fare paying passenger on a civilian airline flying on regular routes and according to a scheduled timetable;
- 8) Disability of member/s as a result of attempted self-injury;
- 9) Diagnosis and treatment outside India.
- 10) Nuclear Contamination; the radio-active, explosive or hazardous nature of nuclear fuel materials or property contaminated by nuclear fuel materials or accident arising from such nature

**C. Accelerated Critical Illness Benefit**

The benefit under the policy shall not be paid if any Critical Illness of the member/s, is directly or indirectly caused by, related to or arises from:

- 1) Any critical illness or its signs or symptoms having occurred within 180 days of the date of commencement of risk or the date of revival whichever is later
- 2) Pre-Existing Conditions or conditions connected to a Pre-Existing Condition will be excluded.  
Pre-Existing medical condition or disease is defined as condition, ailment, injury or disease
  - a) That is/are diagnosed by a physician within 48 months prior to the effective date of the policy issued by the insurer or its reinstatement or
  - b) For which medical advice or treatment was recommended by, or received from, a physician within forty-eight (48) months to prior to the effective date of the policy issued by the insurer or its reinstatement.
- 3) The member/s committing or attempting to commit a criminal act whether alone or with others;
- 4) The member/s actual or attempted self-injury;
- 5) War, invasion, civil war, rebellion or riot;
- 6) The member/s being under the influence of alcohol or drugs other than drugs prescribed by and taken in accordance with the directions of a registered medical practitioner;
- 7) The member's participation in any naval, military or air force operation or participation in any dangerous or hazardous sport, competition or riding or driving in any form of race or competition;
- 8) The member's participation in aviation, gliding or any form of flight other than as a fare paying passenger on a civilian airline plying on regular routes and according to a scheduled timetable;
- 9) Any External Congenital Anomaly which is not as a consequence of Genetic disorder
- 10) Diagnosis and treatment outside India.
- 11) For any medical condition or any medical procedure arising from nuclear contamination; the radioactive, explosive or hazardous nature of nuclear fuel materials or property contaminated by nuclear fuel materials or accident arising from such nature;

Guaranteed Surrender Value Factors

Policy Term of Mem- ber	Elapsed duration in years from the Date of Commencement of Risk in the scheme																			
	0.08	0.25	0.5	1.0	1.5	2.0	2.5	3.0	3.5	4.0	4.5	5.0	5.5	6.0	6.5	7.0	7.5	8.0	8.5	9.0
0.25	0.1333	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
0.50	0.2083	0.0750	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1.00	0.2521	0.1688	0.0750	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1.50	0.2676	0.2083	0.1333	0.0333	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2.00	0.2755	0.2297	0.1688	0.0750	0.0188	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2.50	0.2803	0.2430	0.1920	0.1080	0.0480	0.0120	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3.00	0.2836	0.2521	0.2083	0.1333	0.0750	0.0333	0.0083	-	-	-	-	-	-	-	-	-	-	-	-	-
3.50	0.2859	0.2587	0.2204	0.1531	0.0980	0.0551	0.0245	0.0061	-	-	-	-	-	-	-	-	-	-	-	-
4.00	0.2876	0.2637	0.2297	0.1688	0.1172	0.0750	0.0422	0.0188	0.0047	-	-	-	-	-	-	-	-	-	-	-
4.50	0.2890	0.2676	0.2370	0.1815	0.1333	0.0926	0.0593	0.0333	0.0148	0.0037	-	-	-	-	-	-	-	-	-	-
5.00	0.2901	0.2708	0.2430	0.1920	0.1470	0.1080	0.0750	0.0480	0.0270	0.0120	0.0030	-	-	-	-	-	-	-	-	-
5.50	0.2910	0.2733	0.2479	0.2008	0.1587	0.1215	0.0893	0.0620	0.0397	0.0223	0.0099	0.0025	-	-	-	-	-	-	-	-
6.00	0.2917	0.2755	0.2521	0.2083	0.1688	0.1333	0.1021	0.0750	0.0521	0.0333	0.0188	0.0083	0.0021	-	-	-	-	-	-	-
6.50	0.2924	0.2774	0.2556	0.2148	0.1775	0.1438	0.1136	0.0870	0.0639	0.0444	0.0284	0.0160	0.0071	0.0018	-	-	-	-	-	-
7.00	0.2929	0.2790	0.2587	0.2204	0.1852	0.1531	0.1240	0.0980	0.0750	0.0551	0.0383	0.0245	0.0138	0.0061	0.0015	-	-	-	-	-
7.50	0.2934	0.2803	0.2613	0.2253	0.1920	0.1613	0.1333	0.1080	0.0853	0.0653	0.0480	0.0333	0.0213	0.0120	0.0053	0.0013	-	-	-	-
8.00	0.2938	0.2815	0.2637	0.2297	0.1980	0.1688	0.1418	0.1172	0.0949	0.0750	0.0574	0.0422	0.0293	0.0188	0.0105	0.0047	0.0012	-	-	-
8.50	0.2941	0.2826	0.2657	0.2336	0.2035	0.1754	0.1495	0.1256	0.1038	0.0841	0.0664	0.0509	0.0374	0.0260	0.0166	0.0093	0.0042	0.0010	-	-
9.00	0.2945	0.2836	0.2676	0.2370	0.2083	0.1815	0.1565	0.1333	0.1120	0.0926	0.0750	0.0593	0.0454	0.0333	0.0231	0.0148	0.0083	0.0037	0.0009	-
9.50	0.2948	0.2844	0.2693	0.2402	0.2127	0.1870	0.1629	0.1404	0.1197	0.1006	0.0831	0.0673	0.0532	0.0407	0.0299	0.0208	0.0133	0.0075	0.0033	0.0008
10.00	0.2950	0.2852	0.2708	0.2430	0.2168	0.1920	0.1688	0.1470	0.1268	0.1080	0.0908	0.0750	0.0608	0.0480	0.0368	0.0270	0.0188	0.0120	0.0068	0.0030
10.50	0.2953	0.2859	0.2721	0.2456	0.2204	0.1966	0.1741	0.1531	0.1333	0.1150	0.0980	0.0823	0.0680	0.0551	0.0435	0.0333	0.0245	0.0170	0.0109	0.0061
11.00	0.2955	0.2865	0.2733	0.2479	0.2238	0.2008	0.1791	0.1587	0.1395	0.1215	0.1048	0.0893	0.0750	0.0620	0.0502	0.0397	0.0304	0.0223	0.0155	0.0099
11.50	0.2957	0.2871	0.2745	0.2501	0.2268	0.2047	0.1837	0.1639	0.1452	0.1276	0.1112	0.0958	0.0817	0.0686	0.0567	0.0459	0.0363	0.0278	0.0204	0.0142
12.00	0.2958	0.2876	0.2755	0.2521	0.2297	0.2083	0.1880	0.1688	0.1505	0.1333	0.1172	0.1021	0.0880	0.0750	0.0630	0.0521	0.0422	0.0333	0.0255	0.0188
12.50	0.2960	0.2881	0.2765	0.2539	0.2323	0.2117	0.1920	0.1733	0.1555	0.1387	0.1229	0.1080	0.0941	0.0811	0.0691	0.0581	0.0480	0.0389	0.0307	0.0235
13.00	0.2962	0.2886	0.2774	0.2556	0.2348	0.2148	0.1957	0.1775	0.1602	0.1438	0.1283	0.1136	0.0999	0.0870	0.0750	0.0639	0.0537	0.0444	0.0359	0.0284
13.50	0.2963	0.2890	0.2782	0.2572	0.2370	0.2177	0.1992	0.1815	0.1646	0.1486	0.1333	0.1189	0.1053	0.0926	0.0807	0.0695	0.0593	0.0498	0.0412	0.0333
14.00	0.2964	0.2894	0.2790	0.2587	0.2392	0.2204	0.2024	0.1852	0.1688	0.1531	0.1381	0.1240	0.1106	0.0980	0.0861	0.0750	0.0647	0.0551	0.0463	0.0383
14.50	0.2966	0.2897	0.2797	0.2600	0.2411	0.2229	0.2055	0.1887	0.1727	0.1573	0.1427	0.1288	0.1156	0.1031	0.0913	0.0803	0.0699	0.0603	0.0514	0.0432
15.00	0.2967	0.2901	0.2803	0.2613	0.2430	0.2253	0.2083	0.1920	0.1763	0.1613	0.1470	0.1333	0.1203	0.1080	0.0963	0.0853	0.0750	0.0653	0.0563	0.0480

Note 1 - For elapsed duration in fraction of years the Surrender Value will be linearly interpolated  
Note 2 - GSV factors are only applicable for Single Premium Level cover and Limited Premium Reducing cover option (after premium payment term)

Special Surrender Value Factor for reducing cover policies under Regular Premium

Policy Term Mem- ber	Elapsed duration in years from the Date of Commencement of Risk in the scheme																	
	0.08	0.25	0.5	1.0	1.5	2.0	2.5	3.0	3.5	4.0	4.5	5.0	5.5	6.0	6.5	7.0	7.5	8.0
1.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1.5	0.0667	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2.0	-	0.0375	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2.5	-	-	0.0240	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3.0	-	-	0.0667	0.0167	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3.5	-	-	-	0.0490	0.0122	-	-	-	-	-	-	-	-	-	-	-	-	-
4.0	-	-	-	-	0.0375	0.0094	-	-	-	-	-	-	-	-	-	-	-	-
4.5	-	-	-	-	0.0667	0.0296	0.0074	-	-	-	-	-	-	-	-	-	-	-
5.0	-	-	-	-	-	0.0540	0.0240	0.0060	-	-	-	-	-	-	-	-	-	-
5.5	-	-	-	-	-	-	0.0446	0.0198	0.0050	-	-	-	-	-	-	-	-	-
6.0	-	-	-	-	-	-	0.0667	0.0375	0.0167	0.0042	-	-	-	-	-	-	-	-
6.5	-	-	-	-	-	-	-	0.0568	0.0320	0.0142	0.0036	-	-	-	-	-	-	-
7.0	-	-	-	-	-	-	-	-	0.0490	0.0276	0.0122	0.0031	-	-	-	-	-	-
7.5	-	-	-	-	-	-	-	-	0.0667	0.0427	0.0240	0.0107	0.0027	-	-	-	-	-
8.0	-	-	-	-	-	-	-	-	-	0.0586	0.0375	0.0211	0.0094	0.0023	-	-	-	-
8.5	-	-	-	-	-	-	-	-	-	-	0.0519	0.0332	0.0187	0.0083	0.0021	-	-	-
9.0	-	-	-	-	-	-	-	-	-	-	0.0667	0.0463	0.0296	0.0167	0.0074	0.0019	-	-
9.5	-	-	-	-	-	-	-	-	-	-	-	0.0598	0.0416	0.0266	0.0150	0.0066	0.0017	-
10.0	-	-	-	-	-	-	-	-	-	-	-	-	0.0540	0.0375	0.0240	0.0135	0.0060	0.0015
10.5	-	-	-	-	-	-	-	-	-	-	-	-	0.0667	0.0490	0.0340	0.0218	0.0122	0.0054
11.0	-	-	-	-	-	-	-	-	-	-	-	-	-	0.0607	0.0446	0.0310	0.0198	0.0112
11.5	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0.0556	0.0408	0.0284	0.0181
12.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0.0667	0.0510	0.0375	0.0260
12.5	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0.0614	0.0470	0.0346
13.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0.0568	0.0435
13.5	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0.0667	0.0527
14.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0.0620
14.5	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0.0578
15.0	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	0.0667

Note - For elapsed duration in fraction of years the Surrender Value will be linearly interpolated

Special Surrender Value Factor for level cover policies under Single premium

Policy Term of Member	Elapsed duration in years from the Date of Commencement of Risk in the scheme																	
	0.08	0.25	0.5	1.0	1.5	2.0	2.5	3.0	3.5	4.0	4.5	5.0	5.5	6.0	6.5	7.0	7.5	8.0
0.25	0.2667	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
0.50	0.3333	0.2000	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1.00	0.3667	0.3000	0.2000	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
1.50	0.3778	0.3333	0.2667	0.1333	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2.00	0.3833	0.3500	0.3000	0.2000	0.1000	-	-	-	-	-	-	-	-	-	-	-	-	-
2.50	0.3867	0.3600	0.3200	0.2400	0.1600	0.0800	-	-	-	-	-	-	-	-	-	-	-	-
3.00	0.4861	0.4583	0.4167	0.3333	0.2500	0.1667	0.0833	-	-	-	-	-	-	-	-	-	-	-
3.50	0.4881	0.4643	0.4286	0.3571	0.2857	0.2143	0.1429	0.0714	-	-	-	-	-	-	-	-	-	-
4.00	0.4896	0.4688	0.4375	0.3750	0.3125	0.2500	0.1875	0.1250	0.0625	-	-	-	-	-	-	-	-	-
4.50	0.4907	0.4722	0.4444	0.3889	0.3333	0.2778	0.2222	0.1667	0.1111	0.0556	-	-	-	-	-	-	-	-
5.00	0.5408	0.5225	0.4950	0.4400	0.3850	0.3300	0.2750	0.2200	0.1650	0.1100	0.0550	-	-	-	-	-	-	-
5.50	0.5417	0.5250	0.5000	0.4500	0.4000	0.3500	0.3000	0.2500	0.2000	0.1500	0.1000	0.0500	-	-	-	-	-	-
6.00	0.5424	0.5271	0.5042	0.4583	0.4125	0.3667	0.3208	0.2750	0.2292	0.1833	0.1375	0.0917	0.0458	-	-	-	-	-
6.50	0.5429	0.5288	0.5077	0.4654	0.4231	0.3808	0.3385	0.2962	0.2538	0.2115	0.1692	0.1269	0.0846	0.0423	-	-	-	-
7.00	0.5929	0.5786	0.5571	0.5143	0.4714	0.4286	0.3857	0.3429	0.3000	0.2571	0.2143	0.1714	0.1286	0.0857	0.0429	-	-	-
7.50	0.5933	0.5800	0.5600	0.5200	0.4800	0.4400	0.4000	0.3600	0.3200	0.2800	0.2400	0.2000	0.1600	0.1200	0.0800	0.0400	-	-
8.00	0.5938	0.5813	0.5625	0.5250	0.4875	0.4500	0.4125	0.3750	0.3375	0.3000	0.2625	0.2250	0.1875	0.1500	0.1125	0.0750	0.0375	-
8.50	0.5941	0.5824	0.5647	0.5294	0.4941	0.4588	0.4235	0.3882	0.3529	0.3176	0.2824	0.2471	0.2118	0.1765	0.1412	0.1059	0.0706	0.0353
9.00	0.5944	0.5833	0.5667	0.5333	0.5000	0.4667	0.4333	0.4000	0.3667	0.3333	0.3000	0.2667	0.2333	0.2000	0.1667	0.1333	0.1000	0.0667
9.50	0.5947	0.5842	0.5684	0.5368	0.5053	0.4737	0.4421	0.4105	0.3789	0.3474	0.3158	0.2842	0.2526	0.2211	0.1895	0.1579	0.1263	0.0947
10.00	0.5950	0.5850	0.5700	0.5400	0.5100	0.4800	0.4500	0.4200	0.3900	0.3600	0.3300	0.3000	0.2700	0.2400	0.2100	0.1800	0.1500	0.1200

Note - For elapsed duration in fraction of years the Surrender Value will be linearly interpolated

Special Surrender Value Factor for reducing cover policies with Single premium

Policy Term of Mem- ber	Elapsed duration in years from the Date of Commencement of Risk in the scheme														
	0.08	0.25	0.5	1.0	1.5	2.0	2.5	3.0	3.5	4.0	4.5	5.0	5.5	6.0	6.5
0.25	0.2222	-	-	-	-	-	-	-	-	-	-	-	-	-	-
0.50	0.3472	0.1250	-	-	-	-	-	-	-	-	-	-	-	-	-
1.00	0.4201	0.2813	0.1250	-	-	-	-	-	-	-	-	-	-	-	-
1.50	0.4460	0.3472	0.2222	0.0556	-	-	-	-	-	-	-	-	-	-	-
2.00	0.4592	0.3828	0.2813	0.1250	0.0313	-	-	-	-	-	-	-	-	-	-
2.50	0.4672	0.4050	0.3200	0.1800	0.0800	0.0200	-	-	-	-	-	-	-	-	-
3.00	0.5671	0.5042	0.4167	0.2667	0.1500	0.0667	0.0167	-	-	-	-	-	-	-	-
3.50	0.5718	0.5173	0.4408	0.3061	0.1959	0.1102	0.0490	0.0122	-	-	-	-	-	-	-
4.00	0.5753	0.5273	0.4594	0.3375	0.2344	0.1500	0.0844	0.0375	0.0094	-	-	-	-	-	-
4.50	0.5780	0.5352	0.4741	0.3630	0.2667	0.1852	0.1185	0.0667	0.0296	0.0074	-	-	-	-	-
5.00	0.5802	0.5415	0.4860	0.3840	0.2940	0.2160	0.1500	0.0960	0.0540	0.0240	0.0060	-	-	-	-
5.50	0.5820	0.5467	0.4959	0.4017	0.3174	0.2430	0.1785	0.1240	0.0793	0.0446	0.0198	0.0050	-	-	-
6.00	0.5834	0.5510	0.5042	0.4167	0.3375	0.2667	0.2042	0.1500	0.1042	0.0667	0.0375	0.0167	0.0042	-	-
6.50	0.5847	0.5547	0.5112	0.4296	0.3550	0.2876	0.2272	0.1740	0.1278	0.0888	0.0568	0.0320	0.0142	0.0036	-
7.00	0.5858	0.5579	0.5173	0.4408	0.3704	0.3061	0.2480	0.1959	0.1500	0.1102	0.0765	0.0490	0.0276	0.0122	0.0031
7.50	0.5867	0.5607	0.5227	0.4507	0.3840	0.3227	0.2667	0.2160	0.1707	0.1307	0.0960	0.0667	0.0427	0.0240	0.0107
8.00	0.5876	0.5631	0.5273	0.4594	0.3961	0.3375	0.2836	0.2344	0.1898	0.1500	0.1148	0.0844	0.0586	0.0375	0.0211
8.50	0.5883	0.5652	0.5315	0.4671	0.4049	0.3509	0.2990	0.2512	0.2076	0.1682	0.1329	0.1017	0.0747	0.0519	0.0332
9.00	0.5889	0.5671	0.5352	0.4741	0.4167	0.3630	0.3130	0.2667	0.2241	0.1852	0.1500	0.1185	0.0907	0.0667	0.0463
9.50	0.5895	0.5688	0.5385	0.4803	0.4255	0.3740	0.3258	0.2809	0.2393	0.2011	0.1662	0.1346	0.1064	0.0814	0.0598
10.00	0.5900	0.5704	0.5415	0.4840	0.4335	0.3840	0.3375	0.2940	0.2535	0.2160	0.1815	0.1500	0.1215	0.0960	0.0735
10.50	0.5905	0.5718	0.5442	0.4912	0.4408	0.3932	0.3483	0.3061	0.2667	0.2299	0.1959	0.1646	0.1361	0.1102	0.0871
11.00	0.5909	0.5730	0.5467	0.4959	0.4475	0.4017	0.3583	0.3174	0.2789	0.2430	0.2095	0.1785	0.1500	0.1240	0.1004
11.50	0.5913	0.5742	0.5490	0.5002	0.4537	0.4095	0.3675	0.3278	0.2904	0.2552	0.2223	0.1917	0.1633	0.1372	0.1134
12.00	0.5917	0.5753	0.5510	0.5042	0.4594	0.4167	0.3760	0.3375	0.3010	0.2667	0.2344	0.2042	0.1760	0.1500	0.1260
12.50	0.5920	0.5762	0.5530	0.5078	0.4646	0.4234	0.3840	0.3466	0.3100	0.2774	0.2458	0.2160	0.1882	0.1622	0.1382
13.00	0.5923	0.5771	0.5547	0.5112	0.4695	0.4296	0.3914	0.3550	0.3204	0.2876	0.2565	0.2272	0.1997	0.1740	0.1500
13.50	0.5926	0.5780	0.5564	0.5144	0.4741	0.4354	0.3984	0.3630	0.3292	0.2971	0.2667	0.2379	0.2107	0.1852	0.1613
14.00	0.5929	0.5788	0.5579	0.5173	0.4783	0.4408	0.4048	0.3704	0.3375	0.3061	0.2763	0.2480	0.2212	0.1959	0.1722
14.50	0.5931	0.5795	0.5593	0.5201	0.4823	0.4459	0.4109	0.3774	0.3453	0.3146	0.2854	0.2576	0.2312	0.2062	0.1826
15.00	0.5934	0.5802	0.5607	0.5227	0.4860	0.4507	0.4167	0.3840	0.3527	0.3227	0.2940	0.2667	0.2407	0.2160	0.1927

Note - For elapsed duration in fraction of years the Surrender Value will be linearly interpolated

**Address & Contact Details of Ombudsmen Centres**

In case you have any grievance, you may approach the Company Grievance Cell. In case you are not satisfied with the decision/resolution of the Company or if your complaint is not resolved/ not satisfied/not responded for 30 days, you may approach the Office of Insurance Ombudsman, in line with the details provided hereinabove in the Policy Document, at the addresses given below:

Sr. No	Office of the Ombudsman	Contact Details	Areas of Jurisdiction
1	AHMEDABAD	Insurance Ombudsman, Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor, Tilak Marg, Relief Road, Ahmedabad – 380 001. Tel.: 079 - 25501201/02/05/06, Email: bimalokpal.ahmedabad@cioins.co.in	Gujarat, Dadra & Nagar Haveli, Daman and Diu.
2	BENGALURU	Insurance Ombudsman, Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No. 57-27-N-19, Ground Floor, 19/19, 24th Main Road, JP Nagar, 1st Phase, Bengaluru – 560 078. Tel.: 080 - 26652048 / 26652049, Email: bimalokpal.bengaluru@cioins.co.in	Karnataka.
3	BHOPAL	Insurance Ombudsman, Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp. Airtel Office, Near New Market, Bhopal – 462 003. Tel.: 0755 - 2769201 / 2769202, Email: bimalokpal.bhopal@cioins.co.in	Madhya Pradesh & Chhattisgarh
4	BHUBANESHWAR	Insurance Ombudsman, Office of the Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR-751 009. Tel.: - 0674-2596461 / 455 Email :bimalokpal.bhubaneswar@cioins.co.in	Odisha
5	CHANDIGARH	Insurance Ombudsman, Office of the Insurance Ombudsman, S.C.O. No.101,102,103, 2nd Floor, Batra Building. Sector 17-D, CHANDIGARH-160 017. Tel.: - 0172-2706196 /468, Email:bimalokpal.chandigarh@cioins.co.in	Punjab, Haryana (excluding Gurugram, Faridabad, Sonapat and Bahadurgarh), Himachal Pradesh, Union Territories of Jammu & Kashmir, Ladakh & Chandigarh
6	CHENNAI	Insurance Ombudsman, Office of the Insurance Ombudsman, Fathima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI-600 018. Tel.: - 044-24333668 /5284, Email bimalokpal.chennai@cioins.co.in	Tamil Nadu, Puducherry Town and Karaikal (which are part of Puducherry)
7	NEW DELHI	Insurance Ombudsman, Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Bldg., Asaf Ali Road, NEW DELHI-110 002. Tel.: - 011-23232481/23213504, Email:bimalokpal.delhi@cioins.co.in	Delhi & following Districts of Haryana - Gurugram, Faridabad, Sonapat & Bahadurgarh
8	GUWAHATI	Insurance Ombudsman, Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Near Panbazar Over bridge, S.S. Road, GUWAHATI-781 001 (ASSAM). Tel.: - 0361-2632204 / 2602205, Email:bimalokpal.guwahati@cioins.co.in	Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura
9	HYDERABAD	Insurance Ombudsman, Office of the Insurance Ombudsman, 6-2-46, 1st Floor, "Moin Court", Lane Opp. Saleem Function Palace, A.C. Guards, Lakdi-Ka-Pool, HYDERABAD-500 004. Tel : 040-23312122, Email:bimalokpal.hyderabad@cioins.co.in	Andhra Pradesh, Telangana, Yanam and part of Union Territory of Puducherry
10	JAIPUR	Insurance Ombudsman, Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. , Tel.: 0141 - 2740363, Email: bimalokpal.jaipur@cioins.co.in	Rajasthan
11	ERNAKULAM	Insurance Ombudsman, Office of the Insurance Ombudsman, 2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard, M.G. Road, ERNAKULAM-682 015. Tel : 0484-2358759 / 2359338 Email: bimalokpal.ernakulam@cioins.co.in	Kerala, Lakshadweep, Mahe – a part of UT of Puducherry
12	KOLKATA	Insurance Ombudsman, Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue, Kolkata – 700 072. Tel: 033- 22124339/(40) Email: bimalokpal.kolkata@cioins.co.in	West Bengal, Andaman & Nicobar Islands, Sikkim
13	LUCKNOW	Insurance Ombudsman, Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, LUCKNOW-226 001. Tel : 0522 -2231331/30, Email:bimalokpal.lucknow@cioins.co.in	Districts of Uttar Pradesh : Laitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajganj, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar.
14	MUMBAI	Insurance Ombudsman, Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S.V. Road, Santacruz(W), MUMBAI-400 054. Tel:69038821/23/24/25/26/27/28/28/29/30/31, Email: bimalokpal.mumbai@cioins.co.in	Goa, Mumbai Metropolitan Region (excluding Navi Mumbai & Thane)
15	NOIDA	Office of the Insurance Ombudsman, Bhagwan Sahai Palace ,4th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddh Nagar, U.P.-201301., Tel.: 0120-2514252/53 Email: bimalokpal.noida@cioins.co.in	State of Uttarakhand and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshahr, Etah, Kannauj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautam Buddh nagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur
16	PATNA	Office of the Insurance Ombudsman, 2nd Floor, Lalit Bhawan, Bailey Road, Patna 800 001. Tel.: 0612-2547068, Email:bimalokpal.patna@cioins.co.in	Bihar, Jharkhand
17	PUNE	Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 3rd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune – 411 030. , Tel.: 020 - 41312555, Email: bimalokpal.pune@cioins.co.in	Maharashtra, Area of Navi Mumbai and Thane (excluding Mumbai Metropolitan Region)



**Section 38 of Insurance Act, 1938, as amended from time to time – Assignment and Transfer of Insurance Policies**

Assignment or transfer of a Policy should be in accordance with section 38 of the Insurance Act, 1938, as amended by The Insurance Laws (Amendment) Act, 2015 dated 20.03.2015. The extant provisions in this regard are as follows:

1. This Policy may be transferred / assigned, wholly or in part, with or without consideration.
2. An assignment may be effected in a Policy by an endorsement upon the Policy itself or by a separate instrument under notice to the Company.
3. The instrument of assignment should indicate the fact of transfer or assignment and the reasons for the assignment or transfer, antecedents of the assignee and terms on which assignment is made.
4. The assignment must be signed by the transferor or assignor or duly authorized agent and attested by at least one witness.
5. The transfer of assignment shall not be operative as against the Company until a notice in writing of the transfer or assignment and either the said endorsement or instrument itself or copy thereof certified to be correct by both transferor and transferee or their duly authorized agents have been delivered to the Company.
6. Fee to be paid for assignment or transfer can be specified by the IRDAI through Regulations.
7. On receipt of notice with fee, the insurer should Grant a written acknowledgement of receipt of notice. Such notice shall be conclusive evidence against the Company of duly receiving the notice.
8. If the Company maintains one or more places of business, such notices shall be delivered only at the place where the Policy is being serviced.
9. The Company may accept or decline to act upon any transfer or assignment or endorsement, if it has sufficient reasons to believe that it is (a) not bona-fide or (b) not in the interest of the Policyholder / Life Assured or (c) not in public interest or (d) is for the purpose of trading of the Policy.
10. Before refusing to act upon endorsement, the Company should record the reasons in writing and communicate the same in writing to Policyholder within 30 days from the date of Policyholder giving a notice of transfer or assignment.
11. In case of refusal to act upon the endorsement by the Company, any person aggrieved by the refusal may prefer a claim to IRDAI within 30 days of receipt of the refusal letter from the Company.
12. The priority of claims of persons interested in the Policy would depend on the date on which the notices of assignment or transfer is delivered to the Company; where there are more than one instruments of transfer or assignment, the priority will depend on dates of delivery of such notices. Any dispute in this regard as to priority should be referred to IRDAI.
13. Every assignment or transfer shall be deemed to be absolute assignment or transfer and the assignee or transferee shall be deemed to be absolute assignee or transferee, except
  - a. where assignment or transfer is subject to terms and conditions of transfer or assignment OR
  - b. where the transfer or assignment is made upon condition that
    - i. the proceeds under the Policy shall become payable to Policyholder or Nominee(s) in the event of assignee or transferee dying before the Life Assured OR
    - ii. the Life Assured surviving the Policy TermSuch conditional assignee will not be entitled to obtain a loan on Policy or surrender the Policy. This provision will prevail notwithstanding any law or custom having force of law which is contrary to the above position.
14. In other cases, the Company shall, subject to terms and conditions of assignment, recognize the transferee or assignee named in the notice as the absolute transferee or assignee and such person
  - a. shall be subject to all liabilities and equities to which the transferor or assignor was subject to at the date of transfer or assignment and
  - b. may institute any proceedings in relation to the Policy
  - c. obtain loan under the Policy or surrender the Policy without obtaining the consent of the transferor or assignor or making him a party to the proceedings
15. Any rights and remedies of an assignee or transferee of the Policy under an assignment or transfer effected before commencement of The Insurance Laws (Amendment) Act, 2015 shall not be affected by this section.

*[Disclaimer: Section 38 of the Insurance Act, 1938, as amended from time to time shall be applicable. Policy Holders are advised to refer to Original text of Section 38 as amended from time to time for complete and accurate details.]*

**Annexure BB**

**Section 39 of the Insurance Act, 1938, as amended from time to time – Nomination by Policyholder**

Nomination of a life insurance Policy is as below in accordance with Section 39 of the Insurance Act, 1938, as amended by The Insurance Laws (Amendment) Act, 2015 dated 20.03.2015. The extant provisions in this regard are as follows:

1. The Policyholder of a life insurance Policy on his own life may nominate a person or persons to whom money secured by the Policy shall be paid in the event of his death.
2. Where the Nominee is a Minor, the Policyholder may appoint any person to receive the money secured by the policy in the event of Policyholder's death during the minority of the Nominee. The manner of appointment to be laid down by the Company.
3. 3 Nomination can be made at any time before the maturity of the Policy.
4. 4. Nomination may be incorporated in the text of the Policy itself or may be endorsed on the Policy communicated to the Company and can be registered by the Company in the records relating to the Policy.
5. 5. Nomination can be cancelled or changed at any time before Policy matures, by an endorsement or a further endorsement or a will as the case may be.
6. 6. A notice in writing of change or cancellation of Nomination must be delivered to the Company for the Company to be liable to such Nominee. Otherwise, Company will not be liable if a bona-fide payment is made to the person named in the text of the Policy or in the registered records of the Company.
7. Fee to be paid to the Company for registering change or cancellation of a Nomination can be specified by the IRDAI through Regulations.
8. On receipt of notice with fee, the Company should grant a written acknowledgement to the Policyholder of having registered a Nomination or cancellation or change thereof.
9. A transfer or assignment made in accordance with section 38 of Insurance Act, 1938, as amended from time to time, shall automatically cancel the Nomination except in case of assignment to the Company or other transferee or assignee for purpose of loan or against security or its reassignment after repayment. In such case, the Nomination will not get cancelled to the extent of Company's or transferee's or assignee's interest in the Policy. The Nomination will get revived on repayment of the loan.
10. The right of any creditor to be paid out of the proceeds of any Policy of life insurance shall not be affected by the Nomination.
11. In case of Nomination by Policyholder whose life is insured, if the Nominees die before the Policyholder, the proceeds are payable to Policyholder or his heirs or legal representatives or holder of succession certificate.
12. In case Nominee(s) survive the person whose life is insured, the amount secured by the Policy shall be paid to such survivor(s).
13. Where the Policyholder whose life is insured nominates his/her (a) parents or (b) spouse or (c) children or (d) spouse and children or (e) any of them, the Nominees are beneficially entitled to the amount payable by the Company to the Policyholder unless it is proved that Policyholder could not have conferred such beneficial title on the Nominee having regard to the nature of his title.
14. If Nominee(s) die after the Policyholder but before his share of the amount secured under the Policy is paid, the share of the expired Nominee(s) shall be payable to the heirs or legal representative of the Nominee(s) or holder of succession certificate of such Nominee(s).
15. The provisions of sub-section 13 and sub-section 14 above shall apply to all life insurance Policies maturing for payment after the commencement of The Insurance Laws (Amendment) Act, 2015 (i.e 20.03.2015).
16. If Policyholder dies after maturity but the proceeds and benefit of the Policy has not been paid to him because of his death, his Nominee(s) shall be entitled to the proceeds and benefit of the Policy.
17. The provisions of section 39 of the Insurance Act, 1938, as amended from time to time, are not applicable to any life insurance Policy to which section 6 of Married Women's Property Act (MWP), 1874, applies or has at any time applied except where before or after The Insurance Laws (Amendment) Act, 2015, a Nomination is made in favour of spouse or children or spouse and children whether or not on the face of the Policy it is mentioned that it is made under section 39 of the Insurance Act, 1938, as amended from time to time. Where Nomination is intended to be made to spouse or children or spouse and children under section 6 of MWP Act, it should be specifically mentioned on the Policy. In such a case only, the provisions of section 39 of Insurance Act, 1938, as amended from time to time, will not apply.

*[Disclaimer: Section 39 of the Insurance Act, 1938, as amended from time to time shall be applicable. Policy Holders are advised to refer to Original text of Section 39 as amended from time to time for complete and accurate details.]*

**Section 45 of the Insurance Act, 1938, as amended from time to time – Policy shall not be called in question on the ground of mis-statement after three years**

Provisions regarding Policy not being called into question in terms of section 45 of the Insurance Act, 1938, as amended by The Insurance Laws (Amendment) Act, 2015 dated 20.03.2015 are as follows:

1. No Policy of life insurance shall be called in question on any ground whatsoever after expiry of three (3) years from (a) the Policy Commencement Date or (b) the Date of Commencement of Risk or (c) the date of latest revival of the Policy or (d) the Date of Commencement of Rider; whichever is later.
2. On the ground of fraud, a Policy of life insurance may be called in question within three (3) years from (a) the Policy Commencement Date or (b) the Date of Commencement of Risk or (c) the date of latest revival of the Policy or (d) the Date of Commencement of Rider; whichever is later.  
For this, the Company should communicate in writing to the Company or legal representative or Nominee or assignees of Policyholder, as applicable, mentioning the ground and materials on which such decision is based.
3. Fraud means any of the following acts committed by Life Assured or Policyholder or by his agent, with the intent to deceive the Company or to induce the Company to issue the life insurance Policy:
  - a. The suggestion, as a fact of that which is not true and which the Life Assured or Policyholder does not believe to be true;
  - b. The active concealment of a fact by the Life Assured or Policyholder having knowledge or belief of the fact;
  - c. Any other act fitted to deceive; and
  - d. Any such act or omission as the law specifically declares to be fraudulent.
4. Mere silence is not fraud unless, depending on circumstances of the case, it is the duty of the Life Assured or Policyholder or his agent keeping silence to speak or silence is in itself equivalent to speak.
5. No Insurer shall repudiate a life insurance Policy on the ground of Fraud, if the Life Assured or Policyholder / Claimant can prove that the misstatement was true to the best of his knowledge and there was no deliberate intention to suppress the fact or that such mis-statement of or suppression of material fact are within the knowledge of the insurer. Onus of disproving is upon the Policyholder, if alive, or beneficiaries.
6. Life insurance Policy can be called in question within three (3) years on the ground that any statement of or suppression of a fact material to expectancy of life of the Life Assured or Policyholder was incorrectly made in the Proposal Form or other documents, basis which Policy was issued or revived or Rider issued. For this, the Company should communicate in writing to the Life Assured or Policyholder or legal representative or Nominee or assignees of Policyholder, as applicable, mentioning the ground and materials on which decision to repudiate the Policy of life insurance is based.
7. In case repudiation is on ground of mis-statement and not on fraud, the premium(s) collected on Policy till the date of repudiation shall be paid to the Policyholder or legal representative or Nominee or assignees of Policyholder, within a period of 90 days from the date of repudiation.
8. Fact shall not be considered material unless it has a direct bearing on the risk undertaken by the Company. The onus is on Company to show that if the Company had been aware of the said fact, no life insurance Policy would have been issued to the Policyholder.
9. The Company can call for proof of age at any time if he is entitled to do so and no Policy shall be deemed to be called in question merely because the terms of the Policy are adjusted on subsequent proof of age of Life Assured. So, this Section will not be applicable for questioning age or adjustment based on proof of age submitted subsequently.

*[Disclaimer: Section 45 of the Insurance Act, 1938, as amended from time to time shall be applicable. Policy Holders are advised to refer to Original text of Section 45 as amended from time to time for complete and accurate details.]*

## **CUSTOMER INFORMATION SHEET / KNOW YOUR POLICY**

This document provides key information about your policy. You are also advised to go through your policy document. We request you to kindly review the CIS and acknowledge the same through a link shared to you on your registered mobile number/Email ID/WhatsApp.

Sl. no.	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy Clause Number
1.	Name of the Insurance Product and Unique Identification Number (UIN)	Bajaj Allianz Life Group Sampoorna Jeevan Suraksha (UIN - 116N166V02)	Policy Schedule
2	Policy Number	<xxxxxx>	Policy Schedule
3.	Type of Insurance Policy	Pure Risk	Policy Schedule
4.	Basic Policy detail	<ul style="list-style-type: none"> <li>• Instalment Premium- &lt;Not Applicable&gt;</li> <li>• Mode of premium payment - &lt;Not Applicable&gt;</li> <li>• Sum Assured on Death (₹) at inception- &lt;Not Applicable&gt;</li> <li>• Sum Assured on Maturity (₹) - &lt;Not Applicable&gt;</li> <li>• Premium payment Term - &lt;Not Applicable&gt;</li> <li>• Policy Term - &lt;Not Applicable&gt;</li> </ul>	-
5.	Policy Coverage / benefits payable	<p><b>Benefits payable on maturity</b>– Not available</p> <p><b>Benefits payable on Death</b>– Prevailing Sum Assured or the Remaining Sum Assured w.r.t. the Member as on the date of death will be paid</p> <p><b>Survival Benefits excluding that payable on maturity</b> – Not applicable</p> <p><b>Surrender Benefits –</b> The surrender value payable will be higher of Special Surrender Value (SSV) and Guaranteed Surrender Value (GSV) under</p> <ul style="list-style-type: none"> <li>- Single premium - where Policy Term is greater than 2 months</li> <li>- After the premium paying term (PPT) under Regular Premium - Reducing Cover</li> </ul> <p>No surrender value is available under</p> <ul style="list-style-type: none"> <li>- Regular Premium - Level Cover option</li> <li>- Single Premium –where Policy Term is up to 2 months.</li> <li>- During the premium paying term (PPT) under Regular Premium - Reducing Cover option</li> </ul> <p><u>Policy Surrender:</u> The Policyholder can surrender the policy anytime. After the surrender, the existing Members will be continued to be covered under the Policy provided due Premiums are paid.</p> <p><b>Options to policyholders for availing benefits, if any, covered under the policy</b> – Not applicable</p>	<p>Part C - Section 3.1</p> <p>Part C - Section 3.4</p>

		<p><b>Other benefits/options payable, specific to the policy, if any</b></p> <p>–</p> <ul style="list-style-type: none"> <li>- <b>Accelerated Accidental Total Permanent Disability (AATPD) Benefit</b> - If AATPD Benefit is opted then on accidental permanent total disability, Prevailing AATPD Sum Assured will be paid, subject to applicable Terms and conditions</li> <li>- <b>Accelerated Critical Illness Benefit(ACI)</b> – If ACI benefit is opted then on the date of First Diagnosis of covered Critical Illness, Prevailing ACI Sum Assured will be paid subject to applicable Terms and conditions</li> <li>- <b>Accidental Death Benefit (ADB)</b> - If ADB benefit is opted then on accidental death, prevailing Accidental Death Benefit Sum Assured will be paid in addition to the Sum Assured on Death.</li> <li>- <b>Joint Life Option 1</b> – If Joint Life Option 1 is opted then each of the joint Life Assureds will be insured for 100% of the Sum Assured on Death and other in-built benefits (if any) and the benefit is paid on first occurrence of the covered event (death / other Contingent Events as chosen) and the respective Cover for the event will terminate for the both the lives on payment of the benefit.</li> <li>- <b>Joint Life Option 2</b> - If Joint Life Option 1 is opted then the cover will be on individual basis for both the lives, where each life has individual sums assured. On first death/ADB/AATPD/ACI, the cover/s w.r.t. the surviving life which has not claimed the benefit will be continue as is.</li> </ul> <p><b>Lock-in period for Linked Insurance product – Not applicable</b></p>	<p>Part C - Section 3.1</p>
6.	Options available (in case of Linked Insurance Products)	Not applicable	Not applicable
7.	Option available (in case of Annuity product)	Not applicable	Not applicable
8.	Riders opted, if any	Not applicable	Not applicable
9.	Exclusions (events where insurance coverage is not payable), if any.	<p><b>a. Suicide Exclusion</b></p> <p>In case of death of the Member due to suicide within 12 months from the Date of Commencement of Risk or the date of latest revival of the Policy/Membership, whichever is later, then, the Nominee or beneficiary of the Member shall be entitled to receive the higher of 80% of the Total Premiums Paid till the date of death of the Member or the Surrender Benefit available as on the date of death of the Member as Death Benefit</p> <p>Under joint Life cover Option 1, this clause is applicable on either of the Members committing suicide. Post payment of the applicable amount, all the Members' cover will terminate and all rights, benefits and interests of all Members under the same policy will stand extinguished</p> <p>Under Joint Life Option 2: In case of death of any one of the Joint Life Members due to suicide within twelve (12) months from the Date of Commencement of Risk or the date of latest</p>	<p>Part F - Section 11</p>

		<p>revival of the Policy/Membership, whichever is later, then, the nominee or beneficiary shall be entitled to the higher 80% of the Total Premiums Paid and received (w.r.t. the Member) till the date of death of the Member or the Surrender Value, if any, available as on the date of death of the deceased Member. The Life Insurance Cover under the Policy will continue as Single Life cover on the surviving Member. In case of death of both Joint Life Members due to suicide within twelve (12) months from the Date of Commencement of Risk or the date of latest revival of the Policy/Membership, whichever is later, then, the Claimant of both lives shall be entitled to receive higher of 80% of the Total Premiums Paid and received w.r.t. that Member till the date of death of the Member or the Surrender value</p> <p><b>Other Exclusion:</b> There are no other exclusions with respect to Death Benefit. The other exclusion for Accelerated Critical Illness Benefit, Accelerated Accidental Permanent Total Disability Benefit and Accidental Death Benefit under the Policy are as given in the Annexure K</p>	Part F - Section 11 and Annexure K
10.	Waiting /lien Period, if any	<b>Accelerated Critical Illness Benefit</b> - 180 days following the as date of commencement of risk or reinstatement (whichever is later)	Part F - Section 11 Annexure K
11.	Grace period	Thirty (30) days for premium payment frequencies other than monthly and fifteen (15) days for monthly frequency.	Part B - Section 1
12.	Free Look Period	Thirty (30) days	Part D - Section 8
13	Lapse, paid-up and revival of the Policy	<p><b>Non-Payment of Premiums (Lapse and Paid-up):</b> On non-payment of Regular Premium before the expiry of the Grace Period, the policy will lapse and no benefit will be paid</p> <p><b>Revival Period</b> Five (5) years from the due date of the first unpaid premium</p>	<p>Part D - Section 5</p> <p>Part B - Section 1</p>
14.	Policy Loan, if applicable	Not applicable	Not applicable
15.	Claims / Claims Procedure	<p><b>Turn Around Time (TAT) for claims settlement and brief procedure:</b> Link for Brief Procedure : <a href="https://www.bajajallianzlife.com/life-insurance-claim-assistance.html">https://www.bajajallianzlife.com/life-insurance-claim-assistance.html</a></p> <p>Link for Turn Around Time (TAT) for claims settlement: <a href="https://www.bajajallianzlife.com/content/dam/balic/pdf/customer-services/services-tat.pdf">https://www.bajajallianzlife.com/content/dam/balic/pdf/customer-services/services-tat.pdf</a></p> <p><b>Helpline/Call Centre Numbers:</b> Toll free no (24*7) : 1800 2201 02 Sr. Citizens Toll free no. : 1800 2269 70 Customer Care No: (022) 40881000 Board No.: (022) 66867575</p>	Part F - Section 10

