Bajaj Allianz Life Insurance Company Limited

Bajaj Allianz Waiver of Premium Rider

Part A

FORWARDING LETTER

As per Base Policy

Free Look Cancellation (FLC): FLC will be as mentioned in the base Policy, but will be applicable from the Date of Commencement of Rider, if different from the Date of Commencement of Risk (of the base Policy).

PREAMBLE

The Bajaj Allianz Waiver of Premium Benefit Rider is an additional rider benefit attached with the base Policy. This document should be read along with the base Policy Document and form part of the base Policy Document. Wherever term & conditions are not specified in this Rider Document, the term & conditions of the base policy will apply, to the extent applicable to the Rider. The continuance of risk cover under the base Policy is necessary precondition for continuance of cover under this Rider.

This Rider 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 Rider.

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.

SCHEDULE

As per Base Policy Schedule or Policy Endorsement (as applicable).

Part B

DEFINITIONS & ABBREVIATIONS

The following terms shall have the meaning assigned to them below. The singular includes the plural and references to the male include the female where the context so permits.

- 1) Definitions & Abbreviations:
- a. "Accident" means a sudden unforeseen and involuntary event caused by external, visible and violent means
- b. "Accidental Permanent Total Disability" means disability as a result of bodily injury caused by an accident and such injury shall within 180 days of its occurrence solely, directly and independently of any other cause, result in the disability as defined in Section 4d) below and subject to exclusions mentioned in Section 8 below.
- c. "Claimant" means the Policyholder (if different from the Rider Life Assured) or the Nominee or the legal heirs to whom the Rider Benefit will be payable.
- d. "Critical Illness" means Cancer of Specified severity; First Heart Attack of specified severity; Open Chest CABG; Kidney Failure requiring regular dialysis; Stroke resulting in permanent symptoms; Major Organ/ bone marrow transplant; Permanent paralysis of limbs; Multiple Sclerosis with persisting symptoms; Aortic Surgery; Primary Pulmonary Hypertension; Alzheimer's Disease, all as defined in Section 4e) below and subject to exclusions mentioned in Section 8 below.
- e. "Date of Commencement of Rider" means the date specified in the Schedule (unless the Policyholder is informed otherwise by the Company) from which the Rider Benefit of the Rider Life Assured commences under the Policy.
- f. "Goods and Service Tax" ("GST") is charged based on type of policy communication address of Policy Holder. This may change subject to change in rate/state in address of the Policy Holder as on date of adjustment.
- g. "GST" means Goods and Service Tax"
- h. "Rider Benefit" means the benefit payable under the Rider on the happening of the contingent event covered under the Rider. For more details, refer to Section 4 below.
- i. "Rider" means the arrangements established by the Rider Policy Document.
- j. "Rider Life Assured" means the person named as the Rider Life Assured in the Schedule whose life is assured under this Rider.
- k. "Rider Maturity Benefit" means the benefit payable under the Rider on the Rider Maturity Date. For more details, refer to Section 4b) below
- l. "Rider Maturity Date" means the date as mentioned in the Schedule
- m. "Rider Premium" means the amount exclusive of applicable taxes, if any, payable by the Policyholder at regular intervals during the Rider Premium Paying Term, in amount (along with and as part of the Regular Premium) and at the Premium Payment Frequency.
- n. "Rider Premium Paying Term" means the period specified in the Schedule during which the Rider Premium is payable.
- "Rider Surrender Benefit" means the benefit payable if the Rider is surrendered / excluded or terminated. For more details, refer to Section 5 below
- p. "Rider Term" means the period between the Date of Commencement of Rider and the Rider Maturity Date, as mentioned in the Schedule. Part C
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- Rider Description
 This Rider is a non-linked, life, pure risk premium, regular premium payment Waiver of Premium benefit rider attached to both non-
- participating and participating individual non-linked products.
 The rider can be taken on the Life Assured or on the Policyholder under the base Policy. The events covered with respect to each are given in section 4 below.
- c. The Rider provides waiver of future Regular Premium under the base Policy and the premiums with respect to the other rider chosen under the policy (as applicable) on the first occurrence of (i) death (if applicable), (ii) first diagnosis of any of the 11 specified Critical Illness or (iii) Accidental Permanent Total Disability.
- d. Rider Maturity Benefit or Rider Surrender Benefit is not available with respect to this Rider.
- e. The Rider does not in any way confer any right whatsoever on the Policyholder or the Life Assured to share in the assets, the profits or surplus of the business of the Company.

f. Rider Sum Assured cannot exceed the Sum Assured under the base Policy and will be subject to maximum of ` 50,00,000 under all policies (put together) on the life of the Rider Life Assured with the Company.

3) Rider Premium

Rider Premiums, including applicable taxes, as a part of the Regular Premium under the Policy, is payable in full on the premium due dates specified in the Schedule or within the Grace Period allowed, during the Rider Premium Paying Term.

- 4) Rider Benefit
- a) Waiver of Premium Benefit
- If Rider Life Assured is the Life Assured under the base Policy:
 On the first occurrence of (1) Accidental Total Permanent Disability or
 (2) first diagnosis of any Critical Illness on the life of the Rider Life Assured during the Rider Term, the Company shall infuse an amount equivalent to the future Regular Premium at periodical intervals
- ii) Rider Life Assured is the Policyholder under the Policy:
 - On the first occurrence of (1) Death or (2) Accidental Total Permanent Disability or (3) first diagnosis of any Critical Illness on the life of the Rider Life Assured during the Rider Term, the Company shall infuse an amount equivalent to the future Regular Premiums at periodical intervals.
- iii) Once the Rider claim is admitted by the Company, the Rider will be terminated.
- iv) In a joint life Policy, if the Rider is opted by both the lives assured under the base Policy, then, the Waiver of Premium Benefit can be triggered on any of the contingent event occurring, to any one Rider Life Assured and the Rider on both the Rider Lives Assured will terminate.
- v) The above benefit is payable provided the Rider has not been terminated as per Section 9 below, and subject to Section 6, Section 8, Section 10 and Section 15 below.
- b) Rider Maturity Benefit
- No Maturity Benefit is available under the Rider.
- c) Rider Death Benefit
- i) If the Rider Life Assured is the Life Assured under the base Policy, then, no Rider Death Benefit is available under Waiver of Premium Benefit Rider.
- If the Rider Life Assured is the Policyholder under the base Policy, then, the benefit available on death of the Rider Life Assured will be as mentioned in Section 4a) above.
- d) Accidental Permanent Total Disability
- i) Accidental Permanent Total Disability must result in at least one of the following:
- a. Loss of both eyes
- b. Loss of both arms or both hands
- c. Loss of one arm and one leg
- d. Loss of one arm and one foot
- e. Loss of one hand and one foot
- f. Loss of one hand and one leg
- g. Loss of both legs
- h. Loss of both feet
- i. Removal of lower jaw
- ii) If the disability is due to amputation / dismemberment, loss of hand will mean amputation / dismemberment above wrist, loss of arm will mean amputation / dismemberment above elbow, loss of feet will mean amputation / dismemberment above ankle and loss of leg will mean amputation / dismemberment above knee.
- iii) If the disability is not due to amputation/dismemberment, loss will mean loss of usage of both the limbs of motor-grade power 0/5, 1/5 or 2/5 only. In permanent total disability, both the limbs should have motor-grade power less than or equal to 2/5.
- iv) Loss of both eyes means total loss of vision in both eyes, certified by an ophthalmologist.
- The disability will be admitted for claim if and only if the disability is detected as per above condition and has been certified by a registered medical practitioner.
- e) Critical Illness
- (i) The Critical Illnesses
- (1) Should have occurred after the waiting period of 90 days from the Date of Commencement of Rider or latest revival of the Policy.
- (2) Should be confirmed by a registered Medical Practitioner appointed by the Company and is supported by acceptable clinical, radiological,

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histological and laboratory evidence.

- (3) Should be informed to the Company within 60 days of diagnosis of the Critical Illness. However, claims filed beyond such a period will be considered if there is a valid reason for the delay.
- (4) Survival Period: The benefit with respect to critical illness shall be payable only after 30 days from the date of diagnosis provided the life assured survives this period.
- (ii) The 11 Critical Illnesses covered under the Rider are as given below
- A) 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 - (i) 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.; (ii) Any non-melanoma skin carcinoma unless there is evidence of metastases to lymph nodes or beyond; (iii) Malignant melanoma that has not caused invasion beyond the epidermis; (iv) 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; (v) All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below; (vi) Chronic lymphocytic leukaemia less than RAI stage 3; (vii) Non-invasive papillary cancer of the bladder histologically described as TaNOMO or of a lesser classification; (viii) 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

B) FIRST HEART ATTACK – OF SPECIFIED SEVERITY

The first occurrence of 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 this will 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.

C) OPEN CHEST CABG

D)

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:

i. Angioplasty and/or any other intra-arterial procedures

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 (hemodialysis or peritoneal dialysis) is instituted or renal transplantation is carried out. Diagnosis has to be confirmed by a specialist medical practitioner.

E) 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 atleast 3 months has to be produced.

The following are excluded: (i) Transient ischemic attacks (TIA); (ii) Traumatic injury of the brain; (iii) Vascular disease affecting only the eye or optic nerve or vestibular functions.

F) 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: (i) Other stem-cell transplants; (ii) Where only islets of langerhans are transplanted.

- G) 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.
- H) MULTIPLE SCLEROSIS WITH PERSISTING SYMPTOMS
 - The unequivocal diagnosis of Definite Multiple Sclerosis confirmed and evidenced by all of the following:
- investigations including typical MRI findings, which unequivocally confirm the diagnosis to be multiple sclerosis;
- there must be current clinical impairment of motor or sensory function, which must have persisted for a continuous period of at least 6 months Other causes of neurological damage such as SLE is excluded.
- I) AORTICSURGERY

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.

J) PRIMARY PULMONARY HYPERTENSION

An unequivocal diagnosis of Primary (Idiopathic) 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.
- 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.

K) ALZHEIMER'S DISEASE

Progressive and permanent deterioration of memory and intellectual capacity as evidenced by accepted standardised questionnaires and cerebral imaging.

The diagnosis of Alzheimer's disease must be confirmed by a specialised medical practitioner. There must be significant reduction in mental and social functioning requiring the continuous supervision of the life assured. There must also be an inability of the Life Assured to perform (whether aided or unaided) at least three (3) of the following six (6)

Activities of Daily Living" for a continuous period of at least three (3) months.

Activities of Daily Living are defined as:

- Washing the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means;
- b) Dressing the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, or artificial limbs or other surgical appliances;
- c) Transferring the ability to move from a bed to an upright chair or wheelchair and vice versa;
- Toileting the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
- e) Feeding the ability to feed oneself once food has been prepared and made available.
- f) Mobility the ability to move from room to room without requiring any

physical assistance.

The following are excluded: (i) Drug-induced or toxic causes of Parkinsonism; (ii) Any other type of irreversible organic disorder/dementia; (iii) Non-organic disease such as neurosis; and (iv) Alcohol-related brain damage

The Company does not cover any other Accidental Permanent Total Disability or Critical Illnesses under the Rider other than those mentioned in Section 4d and Section 4e above.

Part D

5) Rider Surrender Benefit

No Rider Surrender Benefit is available under the Rider. This is the same even if the base Policy is surrendered/ terminated.

6) Revival

A lapsed Rider can be revived subject to the revival conditions applicable to the base Policy.

- 7) Flexibilities: Option to include/exclude the rider
- a. The Policyholder will have the option to include the Rider under the Policy only at the Policy Commencement Date.
- b. The Policyholder will have the option to exclude the rider at any time during the Rider Term. On exclusion the Rider Benefit will immediately cease. Once this rider is excluded, it cannot be added back again.
- 8) Exclusions

The Rider does not cover any other risks, other than that mentioned in Section 4 above

Some of the salient exclusions of Critical Illness under the rider are as given below:

- a) Any of the listed Critical Illness conditions where death occurs within 30 days of the diagnosis.
- b) Any medical condition which first manifests itself within 90 days of the risk commencement date or reinstatement date whichever is later
- c) Any Pre-existing medical condition. "Pre-existing medical condition" definition will be as per health regulation.
- d) Suicide or attempted suicide or intentional self-inflicted injury, by the life insured
- e) Rider Life assured being under the influence of drugs, alcohol, narcotics or psychotropic substance, not prescribed by a Registered Medical Practitioner
- f) War, invasion, hostilities (whether war is declared or not), civil war, rebellion, terrorist activity, revolution or taking part in a riot or civil commotion, strikes or industrial action.
- g) Participation by the life assured in a criminal or unlawful act with criminal intent or committing any breach of law including involvement in any fight or affray
- h) Treatment for injury or illness caused by avocations / activities such as hunting, mountaineering, steeple-chasing, professional sports, racing of any kind, scuba diving, aerial sports, activities such as hand-gliding, ballooning, deliberate exposure to exceptional danger
- i) Any underwater or subterranean operation or activity. Racing of any kind other than on foot
- j) Participation by the insured person in any flying activity other than as a bona fide passenger (whether paying or not), in a licensed aircraft provided the life insured does not, at the time have any duty on board such aircraft.
- k) Nuclear reaction, Radioactive, Biological or chemical contamination due to nuclear accident

Some of the salient exclusions of Accidental Permanent Total Disability under the rider are as given below:

- a) Disability as a result of the Rider Life Assured committing any breach of law with criminal intent;
- b) Disability of Rider Life Assured as a result of war, invasion, civil war, rebellion or riot;
- c) Disability as a consequence of the Rider Life Assured 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;
- d) Disability as a result of the Rider Life Assured taking part in any naval, military or air force operation;
- e) Disability as a result of the Rider Life Assured participating in or training for any dangerous or hazardous sport or competition or riding or driving in any form of race or competition;
- f) Disability of Rider Life Assured as a result of aviation, gliding or any form of aerial flight other than as a fare paying passenger on a civilian airline

plying on regular routes and according to a scheduled timetable;

- g) Disability of Rider Life Assured as a result of attempted self injury
- Termination of Rider Benefit The Rider Benefit shall automatically terminate on the earlier occurrence of either of the following.
- a) If Rider Premiums are discontinued
- b) If the Policyholder terminates the Rider
- c) On termination of the base Policy
- d) On the Policy Anniversary in which the attained age is 65 years.
- e) On maturity of the rider.
- f) On acceptance of waiver of premium benefit Part E CHARGES, FUND OPTIONS, PORTFOLIO STRATEGIES, Etc Not Applicable

Part F

General Conditions

10) Non Forfeiture

Non- payment of Rider Premium & forfeiture conditions will be as per the base Policy terms & conditions, subject to Section 9 above.

Assignment Assignment 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]

12) Nomination

11)

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]

13) Fraud, Misrepresentation and forfeiture

Fraud, Misrepresentation and forfeiture 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]

- 14) Age
 - Age related conditions are as per the base Policy provisions

15) Payment of Claim

The Company shall be under no obligation to make any payment under Section 4 above unless and until the Company has received from the Claimant (at no expense to the Company) any information and documentation it requests, including but not limited to:

- i) The claimant's proof of entitlement to receive payment under the Policy.
- ii) Original Policy Document.
- iii) Original death certificate of the Rider Life Assured issued by a competent authority.
- iv) Medical cause of death certificate from the doctor who last attended to the Rider Life Assured or from the hospital in which the death occurred.
- v) If the death is due to unnatural causes; a copy of First Information Report (FIR) and Post Mortem Report (PMR). Post Mortem Report is mandatory for claiming the Rider Benefit due to an Accident under the Rider Policy.
- vi) In case of Accidental Permanent Total Disability, the disability has to be certified by a registered medical practitioner.
- vii) In case of Critical Illness, the diagnosis of the Critical Illness needs to be confirmed by a registered Medical Practitioner appointed by the Company and to be supported by acceptable clinical, radiological, histological and laboratory evidence. The company should be informed of the critical illness within 60 days of diagnosis of the critical illness. The benefit with respect to critical illness shall be payable only after 30 days from the date of diagnosis provided the life assured survives this period.
- viii) Any other document as asked for by the Company depending on the facts and circumstances of each case.
- ix) In case of any force ma'jeure 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 above mentioned 60 days may be condoned by the Company if it is satisfied as to the genuineness of the reasons for the delay.

Part G

As per base Policy