

Bajaj Allianz Life Insurance Company Limited
Bajaj Allianz Life Future Wealth Gain II
Part A
FORWARDING LETTER

Name of the Policyholder _____

Address _____

Dear _____

Sub: Issuance of the Policy under application for the life insurance policy towards Regular Premium plan dated _____

We would like to thank you for investing your faith in us. Your policy requires Regular Premiums to be paid for _____ years.

Please find enclosed herewith your Policy Document, a copy of the Proposal Form and documents mentioned herein below, based on which your Insurance Policy has been issued. This Policy is issued subject to section 45 of the Insurance Act, 1938, as amended from time to time.

Document Type	Specification of Documents provided	Identification No.
Proposal Form	Proposal Form	
Age proof		
Identity Proof		
Address Proof		

You have a free look period of fifteen (15) days from the date of receipt of the policy document and period of 30 days in case of electronic Policy and Policy obtained through distance mode, to review the terms and conditions of the Policy and where the You disagree to any of those terms or conditions, he has the option to return the Policy to the Company for cancellation, stating the reasons for Your objection, then, You shall be entitled to a refund of the Regular premiums and any Top-Up Premium paid, subject only to a deduction of a proportionate risk premium for the period of cover and the expenses incurred on medical examination and stamp duty charges.

In addition to deductions above, the Company shall also be entitled to repurchase the Units at the Unit Price as on the date of cancellation. The Free Look Period applicable for your Policy is <<15/30>> days.

For any queries kindly write to us at the below mentioned address and we assure and strive to provide you the best of services.

<Name of the authorised person>

FOR BAJAJ ALLIANZ LIFE INSURANCE COMPANY LTD.

Authorised Signatory

Chief-Operations & Customer Experience

Your Policy Servicing Branch Address: Bajaj Allianz Life Insurance Company Limited

<XXXXXXXXXXXXXXXXXXXXXXXXXXXX>

<XXXXXXXXXXXXXXXXXXXXXXXXXXXX>

Toll Free Numbers: <XXXXXXXXXXXXXXXXXXXXXXXXXXXX>

Email Address: <XXXXXXXXXXXXXXXXXXXXXXXXXXXX>

Details of the Servicing Insurance Agent/Insurance Intermediary

Name		Code	
Address			
Phone Number		E-Mail Id	

Please read policy document, especially following clauses on

Regular Premium	Termination
Non-payment of regular premium and Non-forfeiture, if any	Free Look Cancellation

Disclaimer: In case of dispute, English version of policy document shall be final and binding.

“IN THIS POLICY, THE INVESTMENT RISK IN THE INVESTMENT PORTFOLIO IS BORNE BY THE POLICYHOLDER”

Preamble

The Company has received a Proposal Form, declaration and the first Regular Premium from the Policyholder / Life Assured as named in this Schedule. The said Proposal Form and declaration along with any statement, report or other document leading to the issue of this Policy and referred to therein having been accepted and agreed to by the Company and the Policyholder forms the basis of the contract of insurance. Both parties to the Policy do hereby further accept and affirm that the Policy, in consideration of Regular Premium received and subject to due receipt of subsequent Regular Premium as set out in the Schedule with all its parts (Policy Document, Annexures and Endorsements if any), shall be subject to the terms and conditions as set out hereunder.

Schedule

Name of the Policyholder : _____

Address : _____

Pin code : _____

Gender		Date of Birth	
Age at Entry	Years	Age Admission	

Name of the Life Assured

Policy No.		Product Name	Bajaj Allianz Life Future Wealth Gain II
Variant		Policy Commencement Date	
Product Code		Date of Birth	
Unique Identification No.	116L178V01	Age	
Date of Commencement of Risk		Sum Assured (₹)	
Age	Years	Premium Payment Frequency	
Gender		Maturity Date	
Policy Term	Years	Family Benefit	%
Premium Paying Term (PPT)	Years		
Regular Premium (₹)*		(i) Death Benefit (in Variant Wealth Plus) OR (ii) Death / Accelerated Cancer Benefit (in Variant Wealth Plus Care)	Higher of (Sum assured or Regular Premium Fund Value) PLUS Higher of (Top up sum assured or Top-up Premium Fund Value), OR Guaranteed Death/Accelerated Cancer Benefit, whichever is higher
Due Date of Last Premium			
Due Dates of Premium			
Maturity Benefit	Fund Value		

Details of the Nominee

Nominee(s) Name	Nominee(s) Gender	Nominee(s) Age(s)	Percentage Share	Relationship to the Life Assured	Appointee Name [in case the Nominee(s) minor(s)]	Appointees Gender	Appointees Relationship to the Nominee
		Years	%				
		Years	%				
		Years	%				
		Years	%				
		Years	%				

Additional Rider Benefits with Unit Cancellation

Rider Benefits / UIN	Life Covered under Rider	Date of Commencement of Rider	Rider Benefit Term	Rider Sum Assured	Rider Maturity Date
Bajaj Allianz UL Accidental Partial/ Total Permanent Disability Benefit Rider (UIN116A014V02)	Life Assured / Proposer		Years		
Bajaj Allianz UL Accidental Death Benefit Rider (UIN 116A013V02)	Life Assured / Proposer		Years		
Bajaj Allianz UL Waiver of Premium benefit Rider on death/Critical illness/ Accidental Permanent Total Disability (UIN 116A030V02)	Life Assured / Proposer		Years		

Additional Rider Benefits with Additional Rider Premium Collection

Rider Name / (UIN)	Life Covered under Rider	Date of Commencement of Rider	Rider Benefit Term	Rider Premium Term	Rider Sum Assured	Rider Premium	Extra Premium (in Rider)	Rider Maturity Date
Linked Accidental Death Benefit (ADB) (UIN 116A055V01)			Years	Years				
Linked Accidental Total Permanent Disability (ATPD) Benefit (UIN 116A055V01)			Years	Years				

Details of Servicing Agent:

Name		Code	
Address			
Phone Number		e-Mail Id	

REGULAR PREMIUM PAYABLE FOR SELECTED PREMIUM PAYMENT FREQUENCY: ₹

In Words: Rupees Only

Charges under the Policy

Premium Allocation Rate

Regular Premium due in Policy Year	%
1	%
2 to 5	%
6 & above	Nil

All Top Up Premium has a Premium Allocation Rate of %

The Policy Administration Charge, Nil, for the first five (5) Policy Years and 2.1% p.a. of Annual Premium from sixth (6th) Policy Year, deductible monthly at each Monthly Due Date till the end of the Policy Term, capped to a maximum of ₹ 500 per month).

For all other charges under the Policy, please refer to the Charges (Section 15 below).

Applicable GST & cess will be levied and deducted for all applicable Charges.

To whom the Benefits are Payable: The Benefits are payable to the Claimant, limited at all times to the monies payable under this Policy.

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.

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.

Issued on _____

Authorised Signatory



ON EXAMINATION OF THE POLICY, if the Policyholder notices any mistake, the Policy Document is to be returned for correction to the Company.

Part B

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. 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) "Age" means age at last birthday.
- b) "Accelerated Cancer Benefit" is the benefit payable on the occurrence of Cancer to the Life Assured, as mentioned in the Schedule. The details are as given in Section 5a) below
- c) "Annual Premium" means the amount of Regular Premium payable in a Policy Year excluding the applicable taxes, rider premiums and underwriting extra premium on riders, if any.
- d) "Appointee" means a person, as mentioned in the Schedule, to whom the Policy proceeds/benefits will be paid to, in case the Nominee is a minor on the date of payment.
- e) "Assignee" is the individual to whom/institution to which the Assignment is made by the Policyholder.
- f) "Assignment" means transfer of rights by the Policyholder in the Policy to another individual/institution that gives the Assignee the rights to receive proceeds/benefits under the Policy from the date of Assignment, for a consideration or otherwise. Assignment shall be as per Section 38 of the Insurance Act, 1938 as amended from time to time.
- g) "Business Day" means days other than holidays where stock exchanges (excluding Muhurat trading day or days on which exchanges are open for testing) with national wide terminals are open for trade or any day declared by the Authority as business day.
- h) "Cancer" means cancer as defined in Annexure K.
- i) "Charges" means the charges applicable to this Policy as detailed in Section 15 and Section 16 below.
- j) "Claimant" means the Life Assured (if alive) or Policyholder (if different from the Life Assured) or the assignee or the Nominee or the legal heirs of Policyholder/Nominee(s) to whom the Policy Benefit will be payable.
- k) "Company/We/Us" means BAJAJ ALLIANZ LIFE INSURANCE COMPANY LIMITED.
- l) "Current Assets" includes cash balance, bank Fixed Deposits FDs and Certificate of Deposits CDs, commercial papers, accrued investment income (not due and due but not received) and other receivables if any.
- m) "Current Liabilities and Provisions" includes any amount payable for the investments, the expenses for the brokerage and transaction cost, non-performing assets, Fund Management Charges and any other Charge as approved by the IRDAI including any applicable GST & cess.
- n) "Date of Commencement of Risk" means the date specified in the Schedule (unless the Policyholder is informed otherwise by the Company) from which the risk cover of the Life Assured commences under the Policy.
- o) "Date of Discontinuance" means the date on which the Policy is converted to a Discontinued Life Policy at the expiry of the Grace Period in a Policy where the due Regular Premium has not been paid. The details are as given in Section 7 below.
- p) "Date of Surrender" means the date on which the Company receives the written communication from the Policyholder to surrender the Policy as per Section 9 below.
- q) "Death Benefit" is the benefit payable on the death of the Life Assured, as mentioned in the Schedule. The details are as given in Section 5a) below
- r) "Discontinuance" means the state of the Policy that could arise on account of non-payment of the Regular Premium due before the expiry of the Grace Period, or surrender of the Policy during the Lock-in Period.
- s) "Discontinued Life Policy" means the Policy wherein the Policyholder has discontinued the payment of Regular Premium during the Lock-in Period and as a result of which the Policy has been subject to the action as per Section 7a) below, as well as the Policies surrendered during the Lock-in Period.
- t) "Discontinued Life Policy Fund" means a segregated Fund, constituted by the Fund Value of all the Discontinued Life Policies and is maintained by the Company, if any, in accordance with the IRDAI (Unit Linked Insurance Products) Regulation, 2019, and any subsequent modification made therein by the IRDAI. The investment objective of the Fund is, if any, as specified in the IRDAI (Unit Linked Insurance Products) Regulation, 2019, and any subsequent modification made therein by the IRDAI,
- u) "Discontinuance Value" has the meaning as per Section 10 below.
- v) "Family Benefit" is an amount that will be added to the Regular Premium Fund Value as per the terms and conditions detailed in Section 5f) below, if Family Benefit is available in the Policy and the proportion of benefit is as indicated in the Schedule.
- w) "First Diagnosis" means the diagnosis of the first Cancer in the lifetime of the life assured. The diagnosis of cancer shall be done by an independent Medical Practitioner.

- x) "Foreclosure" means an early termination of your Policy as per the details mentioned in Section 27 below.
- y) "Free Look Period" means the period in which the Policyholder can choose to terminate the Policy as per the details mentioned in Section 6 below
- z) "Fund" means separately identifiable segregated investment linked fund set up by the Company and specified in the Schedule of Investment Funds as per Section 12 below.
- aa) "Fund Booster" is an amount that will be added to the Regular Premium Fund Value at maturity, as mentioned in Section 5d) below.
- bb) "Fund Value" means sum total of the Regular Premium Fund Value and the Top up Premium Fund Value, is any.
- cc) "Goods and Service Tax (GST)" is charged based on type of policy communication address of Policy Holder as stated in the Schedule and amended from time to time. This may change subject to change in rate and /or the state mentioned in the communication address of the Policy Holder as on date of adjustment.
- dd) "Grace Period" means a period of fifteen (15) days for a monthly Premium Payment Frequency and thirty (30) days for other than monthly Premium Payment Frequency, from the due date of Regular Premium payment. If the death or First diagnosis of Cancer (as applicable) occurs within the Grace Period but before the payment of the Regular Premium then due, the Policy will still be valid and the benefits as per Section 5 below shall be paid.
- ee) "Guaranteed Death/Accelerated Cancer Benefit" is 105% of the all the Regular Premiums plus Top-up Premiums (as applicable in the Policy), if any, paid till date under the Policy.
- ff) "Guaranteed Death Benefit" is 105% of the all the Regular Premiums plus Top-up Premiums (as applicable in the Policy), if any, paid till date under the Policy.
- gg) "Income Benefit" is an additional benefit available during the Premium Paying Term under the Variant Wealth Plus Care on the death or First Diagnosis of Cancer, whichever is earlier, as mentioned in Section 5e) below.
- hh) "IRDAI" means the Insurance Regulatory and Development Authority of India.
- ii) "Life Assured" means the person named as the Life Assured in the Schedule whose life is assured under this Policy.
- jj) "Loyalty Addition" is an amount that will be added to the Regular Premium Fund Value at the times mentioned, both as mentioned in Section 5c) below.
- kk) "Maturity Benefit" is the benefit payable on the Maturity Date. The details are as given in Section 5b) below
- ll) "Maturity Date" means the date specified in the Schedule on which the Maturity Benefit shall become payable to the Policyholder.
- mm) "Medical Practitioner" means a person who holds a valid registration from the Medical Council of any State or Medical Council of India or Council for Indian 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 its scope and jurisdiction of license. Such Independent Medical Practitioner shall not include: The Policyholder's Spouse, Father (including step father) or Mother (including step mother), Son (including step son), Son's wife, Daughter, Daughter's husband, Brother (including step brother) and Sister (including step sister) or life assured / policyholder under this policy."
- nn) "Minor" is a Life Assured or Nominee who is aged less than 18 year.
- oo) "Monthly Due Date" means the date corresponding numerically with the Policy Commencement Date in each subsequent month.
- pp) "Nomination" means the process of appointing person(s) to receive Policy proceeds/benefits on the death of the Life Assured (in a Policy where the Life Assured is also the Policyholder). Nomination shall be as per Section 39 of the Insurance Act, 1938, as amended from time to time.
- qq) "Nominee" means the person(s), as mentioned in the Schedule, who has/have been nominated in writing to the Company by the Policyholder, who is entitled to receive the Death Benefits under the Policy.
- rr) "Paid-up Sum Assured" means a proportion of the prevailing Sum Assured, where the proportion is the ratio of the total number of Regular Premiums paid to the total number of Regular Premiums payable under the Policy, subject to Section 7b) below.
- ss) "Policy" means the arrangements established by the Policy Document.
- tt) "Policy Anniversary" means the date corresponding numerically with the Policy Commencement Date in each subsequent year during the Policy Term.
- uu) "Policy Commencement Date" means the date of commencement of the Policy, as specified in the Schedule.
- vv) "Policy Document" means this policy wording and the Schedule (which is attached to and forms part of this Policy, and includes any Annexure or endorsement to it and if more than one then the latest in time) and the Proposal Form.
- ww) "Policyholder/You/Your" means the adult person named in the Schedule who has concluded the Policy with the Company.
- xx) "Policy Term" means the period between the Policy Commencement Date and the Maturity Date, as specified in the Schedule.
- yy) "Policy Year" means a period of one (1) year commencing from the Policy Commencement Date or a Policy Anniversary thereof.

Bajaj Allianz Life Future Wealth Gain II

A Unit-linked Non-Participating Individual Life Savings Insurance Plan

UIN: 116L178V01

- zz) "Premium Allocation Rate" means the rate specified in the Schedule, which net of any GST & cess (as applicable) will be applied to the Regular Premium and Top up Premium (if any) paid to arrive at the amount to be allocated in the Unit Account in respect of any Premium paid by the Policyholder.
- aaa) "Premium Paying Term (PPT)" means the period specified in the Schedule during which the Regular Premium is payable.
- bbb) "Premium Payment Frequency" is a regular time interval as specified in the Schedule, at which the Regular Premium is payable during the Premium Paying Term.
- ccc) "Prevailing Sum Assured" is as defined under in Sum Assured.
- ddd) "Prevailing Top up Sum Assured" is as defined under in Top up Sum Assured
- eee) "Proposal Form" means the Policyholder's statements in the proposal for this Policy submitted by or on behalf of the Policyholder along with any other information or documentation provided to the Company prior to inception of the Policy.
- fff) "Proposer" means an individual who has applied to buy the Policy. The proposer becomes a Policyholder on the issuance of the Policy.
- ggg) "Regular Premium" is the amount specified in the Schedule, payable by the Policyholder during the Premium Paying Term and at the Premium Payment Frequency, both, as specified in the Schedule or such latest reduced Regular Premium in the event opted for (as per the Option of Reduction in Premium in Section 11 g) below by the Policyholder in terms of this Policy.
- hhh) "Regular Premium Fund Value" is equal to the total Units in respect of Regular Premiums paid under this Policy multiplied by the respective Unit Price/NAV on the relevant Valuation Date
- iii) "Revival Period" means the period of three (3) consecutive complete years from the date of first unpaid premium during which period the Policyholder is entitled to revive the Policy, which was discontinued due to the non-payment of Regular Premium.
- jjj) "Rider" means an add-on or additional benefit which the Policyholder can opt for along with the base Policy. The Rider/s that is/are taken in the Policy are mentioned in Schedule. The benefits and terms & conditions of the Rider will be part of the Policy Document, if any taken in the Policy.
- kkk) "Schedule" means a document which is attached to and forms a part of this Policy containing specific details of the Policy.
- lll) "Sum Assured" is the amount as specified in the Schedule or such amount as set out in a subsequent endorsement issued by the Company upon the Policyholder choosing any option available under the Policy. The Sum Assured prevailing on the date of death is known as Prevailing Sum Assured and will be used to determine the Death Benefit under the Policy.
- mmm) "Surrender Benefit" means the amount payable to the Policyholder on surrender as per Section 9 below.
- nnn) "Top Up Premium" means the amount of additional premium paid over and above the Regular Premium payable under this Policy.
- ooo) "Top up Premium Fund Value" is equal to the total Units in respect of Top-up Premium, if any, received under this Policy multiplied by the respective Unit Price/NAV on the relevant Valuation.
- ppp) "Top up Sum Assured" means the additional sum assured which is referred-to, to determine the Death Benefit or the Accelerated Cancer Benefit (as the case may be) payable after the Date of Commencement of Risk and calculated in accordance with Section 11f) below. It is the Top up Sum Assured as it prevails as on the date of death.
- qqq) "Total premiums" paid shall be sum of all regular and top-up premiums, if any paid till date.
- rrr) "Unit" means a proportionate part of a Fund created to determine the Unit Price/NAV.
- sss) "Unit Account" means an individual account created and administered by the Company for a Policy and consisting of Units in one or more Funds, which are valued in reference to the Unit Price/NAV of respective Fund.
- ttt) "Unit Price/NAV" means the value per Unit calculated in Rupees as follows:
Unit Price/NAV = Market value of investment held by the fund plus value of current assets less value of current liabilities and provisions, if any, divided by number of units existing on Valuation Date. This calculation will be done before creation / redemption of units.
- uuu) "Valuation Date" refers to the date when the Unit Price/NAV of the Fund is determined.
- d) The variant has to be chosen at the inception of the Policy and cannot be changed subsequently.
- e) The plan also provides Loyalty Additions and Fund Boosters at Maturity under both the variants, as mentioned respectively in Section 5c) and Section 5d) below.
- f) The Policy enables the Policyholder to participate only in the investment performance of the Funds to the extent of allocated Units and does not in any way confer any right whatsoever on the Policyholder or the life/lives assured to otherwise share in the assets, the profits or surplus of the business of the Company.
- g) Policies issued to a Life Assured who is a minor shall mature only after the Life Assured has attained majority. In such Policies, no partial withdrawals shall be allowed during minority of Life Assured.
- h) The risk on Policies issued to a Life Assured who is a minor shall commence on the Date of Commencement of Policy.
3. Regular Premium
- a) Regular Premium is payable in full on the Due Dates of Premium specified in the Schedule/latest-policy-endorsement or within the Grace Period allowed, during the Premium Paying Term.
- b) The Company does not have any obligation to issue a notice that Regular Premium is due or for the amount that is due.
- c) The Company will not accept any amount less than the Regular Premium amount due as the Regular Premium.
- d) Where the Regular Premium in full has not been paid even within the Grace Period, the Policy shall be subject to the "Non-payment of Regular Premium and Non-Forfeiture" condition(s) as per Section 7 below.
4. Premium Allocation
- Units are allocated under the Policy depending on the amount of Regular Premium and Top Up Premium if any, the Premium Allocation Rate and the Unit Price/NAV of each Fund on the date of allocation. Such allocations may be made up to 1/10,000th of a Unit or such other fraction as the Company may decide from time to time.
5. Policy Benefits
- a) Death Benefit or Accelerated Cancer Benefit
- Depending on the variant chosen under the Policy at Policy Commencement Date, on the earlier occurrence of Death of the Life Assured or the First Diagnosis of Cancer to the Life Assured (as applicable) after the Date of Commencement of Risk but before the Maturity Date, subject to Section 21, Section 22, Section 28 and Section 34 below, provided either the Policy or the risk cover/s under the Policy has/have not been terminated per Section 26 below, the Company shall pay the following to the Claimant.
- i. Variant "Wealth Plus": On death of the Life Assured during the Policy Term:
- (1) In a Policy that is in-force:
Higher of (prevailing Sum assured or Regular Premium Fund Value) PLUS Higher of (Top-up sum assured or Top-up Premium Fund Value), all, as on date of receipt of intimation. The above benefit is subject to a minimum of the Guaranteed Death.
- (2) In a paid-up Policy [as per Section 7b) below]:
Higher of the (Paid up Sum Assured or Regular Premium Fund Value) PLUS Higher of (Top-up Sum Assured or Top-up Premium Fund Value), all, as on date of receipt of intimation. The above benefit is subject to a minimum of the Guaranteed Death.
- (3) In a Discontinued Policy [as per Section 7a) below]:
Discontinuance Value as on the date of receipt of intimation
- (4) The Policy will terminate as on the date of receipt of intimation.
- (5) If the Additional Rider, Waiver of Premium (WOP), has been taken under the Policy and the WOP benefit has already been triggered, then, on termination of Policy, the present value of all future WOP installments, discounted at 4% p.a., shall be payable additionally.
- (6) The amount of Sum Assured, Paid Up Sum Assured and Guaranteed Death will be reduced to the extent of the partial withdrawals made from the Regular Premium Fund during the two (2) year period immediately preceding the date of death of the Life Assured. The partial withdrawal made from the Top Up Premium Fund shall not be deducted for this purpose.
- ii. Variant "Wealth Plus Care": On earlier of death or First Diagnosis of Cancer to Life Assured:
- (1) During Premium Paying Term:
- (a) In a Policy that is in-force:
Higher of (prevailing Sum assured or Regular Premium Fund Value) PLUS Higher of (Top-up sum assured or Top-up Premium Fund Value) PLUS Income Benefit [as in Section 5e below], all, as on date of receipt of intimation. The above benefit is subject to minimum of the Guaranteed Death/Accelerated Cancer Benefit.
- (b) In a paid-up Policy [as per Section 7b) below]:
Higher of the (Paid up Sum Assured or Regular Premium Fund Value) PLUS Higher of (Top-up Sum Assured or Top-up Premium Fund Value), all, as on date of receipt of intimation. The above benefit is subject to minimum of the Guaranteed

Part C

2. Policy Description

- a) This is a non-participating, life, individual, Unit-Linked Regular Premium payment endowment plan.
- b) The plan has two variants, namely, Wealth Plus and Wealth Plus Care.
- c) The plan provides Death Benefit, Maturity Benefit and Surrender Benefit as mentioned below. It also provides additional benefits of Income Benefit and Accelerated Cancer Benefit, if the Variant Wealth Plus Care chosen under the Policy.

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A Unit-linked Non-Participating Individual Life Savings Insurance Plan
UIN: 116L178V01

- Death/Accelerated Cancer Benefit.
- (c) In a Discontinued Policy [as per Section 7a) below]:
 Discontinuance Value as on the date of receipt of intimation
- (d) As Income Benefit is payable under the Policy, all risk covers including any additional rider covers under the Policy will terminate automatically and immediately, and the Policy will terminate on payment of the last instalment.
- (2) After Premium Paying Term but during the Policy Term:
- (a) In a Policy that is in-force:
 Higher of (prevailing Sum assured or Regular Premium Fund Value) PLUS Higher of (Top-up sum assured or Top-up Premium Fund Value), all, as on date of receipt of intimation. The above benefit is subject to a minimum of the Guaranteed Death/Accelerated Cancer Benefit.
- (b) In a paid-up Policy [as per Section 7b) below]:
 Higher of the (Paid up Sum Assured or Regular Premium Fund Value) PLUS Higher of (Top-up Sum Assured or Top-up Premium Fund Value), all, as on date of receipt of intimation. The above benefit is subject to a minimum of the Guaranteed Death/Accelerated Cancer Benefit.
- (c) In a Discontinued Policy [as per Section 7a) below]:
 Discontinuance Value as on the date of receipt of intimation
- (d) The Policy will terminate as on the date of receipt of intimation. No Income Benefit shall be payable if the date of death is after Premium Paying Term.
- (3) The amount of Sum Assured, Paid Up Sum Assured and Guaranteed Death/Accelerated Cancer Benefit will be reduced to the extent of the partial withdrawals made from the Regular Premium Fund during the two (2) year period immediately preceding the date of death of the Life Assured. The partial withdrawal made from the Top Up Premium Fund shall not be deducted for this purpose.
- Notwithstanding that mentioned in Sub-Section (i) & Sub-Section (ii) above, if settlement option (as per Section 11e) below) is opted for at Maturity Date, then, the Death Benefit shall be the higher of (the Guaranteed Death/Accelerated Cancer Benefit or the Fund Value).
- Notwithstanding that mentioned above, if the death of the Life Assured, is during the Grace Period, the full Death Benefit as per Sub-Section (a) above, will be payable.
- b) Maturity Benefit
 The Maturity Benefit, on the survival of the Life Assured to the Maturity Date, provided either the Policy or the risk cover/s under the Policy has/have not been terminated as per Section 26 below, will be:
 Regular Premium Fund Value plus Top up Premium Fund Value
- c) Loyalty Additions (under both Variants Wealth Plus & Wealth Plus Care):
 Provided either the Policy or the risk cover/s under the Policy has/have not been terminated as per Section 29 below, and if all Regular Premiums due under the Policy are paid up to the date of Loyalty Addition (as per the table given below), Loyalty Additions, as a percentage of one (1) prevailing Annual Premium (as given in the table below) will be added in to the Regular Premium Fund Value at the end of every fifth (5th) Policy Year starting from the tenth (10th) Policy Year.

At the end of Policy Year	10	15	20	25
Loyalty Addition %	15%	20%	25%	30%

- i) The amount of Loyalty Addition will be allocated in the Funds in the same proportion of the Funds as at the date of Loyalty Addition. Unit Prices/NAV as on the date of Loyalty addition will be used for the unitization.
- ii) There will not be any Loyalty Additions with respect to any Top-up Premiums paid.
- iii) No Loyalty Additions will be available in a Policy that has been Discontinued or paid-up (as per Section 7 below).
- d) Fund Booster (under both Variants Wealth Plus & Wealth Plus Care):
 Provided either the Policy or the risk cover/s under the Policy has/have not been terminated as per Section 26 below, At the end of the Policy Term, on the Maturity Date, if all Regular Premiums under the Policy are paid up to date, Fund Booster will be added into the Regular Premium Fund Value. The amount of Fund Booster that will be added in to the Regular Premium Fund Value will be a percentage of one (1) Annual Premium as on the policy commencement date, as per the table given below

Policy Term (in years)	Premium Paying Term (in years)			
	5	7	10	15
10	5%	7%	10%	NA
15 & Above	30%	42%	60%	90%

- i) The amount of Fund Booster will be allocated in the Funds in the same proportion as the Funds as at the date of Fund Booster addition. Unit Price/NAV as on the date of Fund Booster addition will be used for the unitization.
- ii) The PPT applicable for the calculation of FB will be the Premium Payment Term

- prevailing on the date on Maturity.
- iii) There will not be any Fund Booster with respect to any Top-up Premium paid.
- iv) No Fund Booster will be available in a Policy that has been Discontinued or paid-up (as per Section 7 below).
- e) Income Benefit:
 Provided either the Policy or the risk cover/s under the Policy has/have not been terminated as per Section 26 below, under the Variant "Wealth Plus Care", if the Policy is in-force [excluding paid up as per Section 7b) below] and on the earlier occurrence of death of the Life Assured or the First Diagnosis of Cancer to the Life Assured during the Premium Paying Term, then, an additional benefit of Income Benefit will be available during the remaining period of the Premium Paying Term.
- i) The Income Benefit is equal to the total of all the prevailing Regular Premiums due after the date of death or diagnosis of Cancer, as applicable.
- ii) Each installment of the Income Benefit is equal to one (1) prevailing Regular Premium that prevailed on the date of occurrence.
- iii) It is payable to the Claimant at each premium due date for the remaining period of the Premium Paying Term.
- iv) The first installment is payable on the first Regular Premium due date after the date of death or diagnosis of Cancer, as applicable.
- v) The Income Benefit cannot be taken as a lump sum.
- vi) Mortality & Morbidity charges will be deducted for this benefit till the incidence of death or the First Diagnosis of Cancer, whichever is earlier.
- vii) This benefit is not available under the Variant "Wealth Plus".
- f) Family Benefit
 If Family Benefit (as shown in the Schedule) is available under the Policy, a %-age (as mentioned in the Schedule) of last 3 years average Regular Premium Fund Value, will be added to the Regular Premium Fund Value on the Maturity Date.
- i) The amount of Family Benefit will be allocated in the Funds in the same proportion of the Fund Values as at the date of addition. Unit Prices as on the date of addition will be used for the unitization.
- ii) There will not be any Family Benefit w.r.t. any Top-up Premium paid.
- iii) No Family Benefit will be available on the Discontinuance Policy or paid-up Policy (as per Section 7 below).
 Family member shall be defined as spouse, children, brothers, sisters, grandchildren, parents, parents in-laws; and will be available to family members of existing customers including who have matured policies.
- g) Additional Rider Benefits
 As per the Rider Document available with the Policy.

Part D

6. Free Look Period
- a) The Policyholder has a free look period of fifteen (15) days from the date of receipt of the Policy Document or a period of 30 days in case of electronic Policy and Policy obtained through distance mode, to review the terms and conditions of the Policy and where the Policyholder disagrees to any of those terms or conditions, he has the option to return the Policy to the Company for cancellation, stating the reasons for his objection, then, he shall be entitled to a refund of the Regular Premiums and any Top-Up Premium paid, subject only to a deduction of a proportionate risk premium for the period of cover and the expenses incurred on medical examination and stamp duty charges.
- b) In addition to the deductions above, the Company shall also be entitled to repurchase the Units at the Unit Price as on the date of cancellation.
7. Non-payment of Regular Premium and Forfeiture
- a) On Discontinuance of Regular Premiums due during the first five (5) Policy Years, the Policy will be converted to a Discontinued Life Policy, immediately & automatically, (without any risk cover, any additional rider cover Guaranteed Death Benefit, Loyalty Addition or Fund Booster) at the end of the Grace Period, and the Regular Premium Fund Value less the Discontinuance/Surrender Charge along with Top up Premium Fund Value, if any, will be transferred to the Discontinued Life Policy Fund.
- i) A notice will be sent by the Company to the Policyholder within three (3) months from the date of first unpaid Regular Premium, informing the Policyholder of the status of the Policy and requesting to revive the Policy or communicate to the Company agreeing to revive the Policy within the Revival Period, by paying all due Regular Premiums, subject to Section 8 below.
- ii) If the Policyholder has opted to revive the Policy but has not revived the Policy within the Revival Period, the Discontinuance Value shall be payable as the Surrender Benefit at the end of lock-in period of five (5) Policy Years or at the end of the Revival Period, whichever is later (immediately & automatically).
- iii) If no communication is received from the Policyholder with respect to the revival of the Policy, then, immediately & automatically, the Discontinuance Value shall be payable as the Surrender Benefit at the end of lock-in period of five (5) Policy Years.

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- iv) At any time the Policyholder has the option to completely withdraw from the Policy without any risk cover, any additional rider cover Guaranteed Benefit, Loyalty Addition or Fund Booster, and receive the Discontinuance Value (as Surrender Benefit) at the end of the lock-in period of five (5) Policy Years or the date of surrender, whichever is later.
- b) On Discontinuance of Regular Premiums due after the lock-in period of five (5) Policy Years, the Policy will be, immediately & automatically, converted to a paid-up Policy at the end of the Grace Period, with risk cover under the base Policy reduced to the extent of the Paid-up Sum Assured and without any additional rider cover, Guaranteed Benefit, fund booster or Loyalty Addition. All charges, as per Section 15 below, will be deducted.
- i) A notice will be sent by the Company to the Policyholder within three (3) months from the date of first unpaid Regular Premium, informing the Policyholder of the status of the Policy and requesting him to exercise one of the options mentioned below.
- (1) Option A: Revive the policy or, communicate agreeing to revive the Policy within the Revival Period, by paying all due Regular Premiums and subject to Section 8 below, OR
- (2) Option B: Intimate the Company to completely withdraw from the Policy without any risk cover or any additional rider cover, and receive the Surrender Benefit under the Policy as on the date of receipt of such intimation.
- ii) If the Policyholder has chosen the Option A above but does not revive the Policy during the Revival Period, or the Company does not receive any communication from the Policyholder, at the end of the Revival Period, if the Policy has not been revived, immediately & automatically, the Surrender Benefit under the Policy as at the end of the Revival Period will be payable.
- iii) If the Policyholder decides to surrender the Policy as per Option B above, the Surrender Benefit under the Policy as on the date of receipt of such intimation, will be payable to the Policyholder.
- c) Notwithstanding anything mentioned above, on the death of the Life Assured,
- i) If the Policy is discontinued as per Sub-Section a) above, the discontinuance value as on the date of receipt of intimation at the Company's office, shall be payable as Death Benefit, and, then, the Policy will terminate.
- ii) If the Policy is discontinued as per Sub-Section b) above, the Death Benefit as per Sections 5a)i)(2), 5a)ii)(1)b) and 5a)ii)(2)b) above and subject to Sections 5a)i)(6) and 5a)ii)(3) above will be payable and then the Policy will terminate.
- d) For Non forfeiture benefits, we shall comply with Chapter VI of IRDAI (Unit Linked Insurance Products) Regulations, 2019
8. Revival
The Discontinued Policy or paid-up Policy [as per Section 7b) above] can be revived subject to the following:
- a) The Company receives the request for revival by the Policyholder within Revival period, provided the Policy is not terminated already.
- b) Such information and documentation as may be requested by the Company is submitted by the Policyholder at his own expense.
- c) The Policy may be revived on the original Policy terms & conditions, revised terms & conditions or disallowed revival, based on Board approved underwriting guidelines.
- d) On revival of the Policy,
- i) The Policy will be revived restoring the risk cover and additional rider cover, if any.
- ii) All the due but unpaid Regular Premiums will be collected, without charging any interest or fee.
- iii) If the Policy is a Discontinued Policy, the Discontinuance Value of the Policy together with the amount of Discontinuance/Surrender Charge (without any interest) as deducted by the Company shall be restored to the applicable Fund/s available at the time of discontinuance, at their prevailing Unit Price/NAV.
- iv) The Premium Allocation Charge, Policy Administration Charge, as applicable, during the discontinuance period shall be deducted from Regular Premiums paid or from the Fund/s at the time of revival.
- v) The Policy will be revived restoring the risk cover including any additional rider cover, Guaranteed Benefit, Loyalty Addition and Fund Booster.
- vi) The Loyalty Additions due-but-not-allocated during the period the Policy was in Discontinuance shall be added to the Regular Premium Fund Value.
9. Surrender Benefit
- a) The Policyholder may, at any time, surrender the Policy.
- b) If the Policy is surrendered during lock in period of the first five (5) Policy Years, the Regular Premium Fund Value less the Discontinuance/Surrender Charge, if any, per Section 15g) below along with Top up Premium Fund Value, if any, (all as on the Date of Surrender) will be transferred to the Discontinued Life Policy Fund, and all risk cover including any additional rider cover under the Policy will be terminated immediately.
- c) On surrender during the lock-in period, the option to revive the Policy will not be available to such a Discontinued Life Policy.
- d) The Discontinuance Value, as per Section 10a) below, at the end of the lock-in period of five (5) Policy Years will be payable to the Policyholder as Surrender Benefit.
- e) If the Policy is surrendered after the first five (5) Policy Years, the Surrender Benefit payable to the Policyholder will be Regular Premium Fund Value along with Top up Premium Fund Value, if any, as on the date of surrender.
- f) The Policy will terminate thereafter upon payment of the Surrender Benefit.
- g) If the Additional Rider, Waiver of Premium (WOP), has been taken under the policy and the WOP benefit has already been triggered, then, the above mentioned Surrender Benefit will be increased by the present value of future WOP installments, discounted at 4% p.a.
10. Discontinuance Value
- a) The Discontinuance Value of the Policy will be higher of
- i) The Regular Premium Fund Value less the Discontinuance/Surrender Charge, if any, [per Section 15g) below], along with Top up Premium Fund Value, if any, all as on Date of Discontinuance/Date of Surrender, accumulated at the rate of return earned on the Discontinuance Life Policy Fund net of Fund Management Charge (FMC) [per Sub-Section c) below] OR
- ii) The Regular Premium Fund Value less the Discontinuance/Surrender Charge, if any, [per Section 15g) below], along with Top up Premium Fund Value, if any, all as on Date of Discontinuance/Date of Surrender, accumulated at the minimum guaranteed rates of investment return net of Fund Management Charge [per Sub-Section c) below].
- b) As per the "IRDAI (Unit Linked Insurance Products) Regulation, 2019", the current minimum guaranteed rate of investment return is 4% p.a. and the current cap on Fund Management Charge on the Discontinuance Life Policy Fund is 0.50% per annum.
- c) The Fund Management Charge and the minimum guaranteed rates of investment return [both mentioned in Sub-Section b) above], for the calculation of the Discontinuance Value may change from time to time in accordance with any change in the IRDAI guidelines/regulations in future.
11. Flexibilities
The Policyholder may, exercise any of the following options by using the application form specified by the Company and meeting the conditions set out therein:
- a) Switching between Funds
- i. If the Policyholder has chosen Investor Selectable Portfolio strategy:
- (1) The Policyholder can switch units from one Fund to another (except from/to the Discontinued Life Policy Fund), by giving written notice to the Company.
- (2) The minimum switching amount is ₹ 5,000 or the value of Units held by the Policyholder in the Fund to be switched from, whichever is lower.
- (3) The Company shall affect the switch by redeeming Units from the Fund to be switched from and allocating new Units in the Fund being switched to at their respective Unit Price/NAV.
- (4) The Policyholder can exercise unlimited free switches.
- ii. If the Policyholder has chosen Wheel of Life Portfolio Strategy
- (1) No switching between Funds is allowed.
- b) Partial withdrawal
Any time after five (5) Policy Years, the Policyholder will have the option to partially withdraw Units subject to following conditions:
- i. For the purpose of partial withdrawals, each payment of Top up Premium shall have a lock-in period of five (5) years.
- ii. On partial withdrawals, eligible Top up Premium Units would be en-cashed first from the Top up Premium Fund Value on First in First out (FIFO) basis before allowing partial withdrawals from the Regular Premium Fund Value
- iii. The Regular Premium Fund Value should not fall below three (3) times of the prevailing Annual Premium, after a partial withdrawal.
- iv. The minimum amount of withdrawal at any one time is ₹ 5,000/-.
- v. A partial withdrawal shall not be allowed if it will result in foreclosure of the Policy.
- vi. In case Life Assured is a minor, partial withdrawal is allowed after attaining Age 18 years.
- vii. No charges would be charged on partial withdrawal.
- viii. In the Investor Selectable Portfolio Strategy, the Policyholder will have the option to choose the Fund he wants to do partial withdrawals from.
In the Wheel of Life Portfolio Strategy, withdrawal of Units from each Fund will be done in the same proportion as the value of the Units held in that Fund as on date of withdrawal. The Policyholder will not have any choice to opt the Fund from which the partial withdrawal of Units is to be done.
- ix. The Company reserves the right at any time and from time to time to vary the minimum/maximum value of Units to be withdrawn, charge on partial withdrawal, maximum number of withdrawals allowed during a Policy Year, maximum amount of total withdrawal allowed during the Policy Term, minimum time gap to maintain between two withdrawals and/or the minimum balance of value of Units to be maintained after such partial withdrawals, by giving written notice of three (3) months in advance, subject to prior approval from IRDAI

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- c) Premium Apportionment
If the Policyholder has chosen Investor selectable Portfolio Strategy,
- i. The Policyholder will have the choice to apportion the allocated Regular Premium and Top up Premium, if any, into fourteen (14) various Funds offered.
 - ii. The Policyholder may, at any time, change the proportion of Regular Premium and Top up Premium, if any, to the Funds he wishes to invest in.
 - iii. The proportion to any Fund in which the Policyholder wishes to invest-in must be at least 5% of the Regular Premium and Top up Premium, if any. The Company will reserve the right to revise the minimum apportionment percentages upon giving written notice of not less than three (3) months, subject to obtaining clearance from the IRDAI.
 - iv. Miscellaneous charge, as mentioned in Section 15 f) below, will be applicable if the premium apportionment is altered.
If the Policyholder has chosen Wheel of Life Portfolio Strategy, the apportionment of the Regular Premium and Top up Premium, if any, will be done as mentioned in Section 12b) below, and no other change in apportionment is possible.
- d) Option to change Portfolio Strategy
- i. The Policyholder may, at any Policy Anniversary, change from Investor selectable Portfolio Strategy to Wheel of Life Portfolio Strategy and vice-versa by giving a 30-day prior written notice.
 - ii. On the Policyholder switching out of the Wheel of Life Portfolio Strategy to the Investor Selectable Portfolio Strategy, the existing Funds and the new Regular Premium and Top up Premium, if any, paid will be allocated in to the Funds of the Policyholder's choice.
 - iii. On the Policyholder switching out of the Investor Selectable Portfolio Strategy to the Wheel of Life Portfolio Strategy, the existing Funds and the new Regular Premium and Top up Premium, if any, paid will be allocated as per Section 12b) below.
 - iv. Miscellaneous charge, as mentioned in section 15f) below, will be applicable.
- e) Settlement Option
- i) The Policyholder/Claimant will have the option to receive the Maturity Benefit or Death Benefit in installments (payable yearly, half yearly, quarterly or monthly, at the option of the Policyholder/Claimant), as the case may be, spread over a maximum period of five (5) years.
 - ii) If the Claimant chooses the settlement option, in case of death, the Death Benefit will be utilised into Fund(s) in same proportion as it was on the date of intimation of death. In case of maturity, the policy monies continue to be invested in the same funds as at the date of maturity, with the option of switching between funds as per Section 12a) below.
 - iii) The first instalment will be due as on the Maturity Date or the date of intimation of death, as applicable.
 - iv) The amount paid out to the Policyholder/Claimant in each installment will be the outstanding Regular Premium Fund Value and Top Up Premium Fund Value, if any, as at that installment date divided by the number of outstanding installments.
 - v) Installment payments will be made by redeeming Units from the Funds at the Unit /NAV applicable on the installment date.
 - vi) The investment risk during the settlement period shall be borne by the Policyholder/Claimant.
 - vii) Risk Cover during the settlement period:
 - a. When settlement is opted on death benefit, no risk cover will be available during the period of the settlement option.
 - b. When settlement is opted on Maturity Benefit, the risk cover will be available and the Death Benefit will be the higher of (Guaranteed Death Benefit or outstanding Regular Premium Fund Value plus Top up Premium Fund Value, if any). In case of death during the settlement period, the death benefit as on the date of intimation of death will be paid as a lumpsum to the nominee and the policy will terminate.
 - c. In the case of, both, maturity and death, Rider covers will not be available.
 - viii) No partial withdrawals is allowed during the subsistence of the period of the settlement option.
 - ix) Fund switches are allowed during the settlement period and switching charge, if any, will be applicable for the same.
 - x) Fund management charge will be adjusted in unit price/NAV and Mortality charge shall be deducted through the redemption of Units from the Funds during the period of the settlement option.
 - xi) The Policyholder/Claimant will have an option to withdraw the Regular Premium Fund Value and any Top Up Premium Fund Value completely, anytime during the period of settlement option. The Regular Premium Fund Value and any Top Up Premium Fund Value will be calculated as the total number of outstanding Units under the Policy multiplied by the Unit Price/NAV as on date of complete withdrawal.
 - xii) No guarantee shall be applicable during the period of settlement option.
- f) Option to pay additional Top up Premium
- i. The Policyholder will have the option to pay Top up Premiums at any time, except during the last five (5) Policy Years, over and above the Regular Premiums payable, provided all due Regular Premiums have been paid. The Top up Premiums would be treated as a single premium.
 - ii. The amount of Top up Premium paid shall determine the Top up Sum Assured. The Top up Sum Assured will be 1.25 times of Top up Premium paid.
 - iii. The minimum Top up Premium payable is Rs. 5,000, subject always to the Company's right to increase this minimum payable from time to time, subject to approval from the IRDAI.
 - iv. At any time during the Policy Term, the total Top up Premiums paid shall not exceed the sum total of the Regular Premiums paid at that point of time.
 - v. The Company reserves the right to disallow a Top up Premium based on the prevailing board approved underwriting guidelines.
 - vi. Top-up Premiums once paid cannot be withdrawn from the Fund for a period of five (5) years from the date of payment of the Top up Premium, except in case of complete surrender of the Policy.
 - vii. Top up premiums shall be allowed under Wealth Plus Care variant to the extent such that the Sum Assured plus Top up Sum assured/s does not exceed Rs. 1 crore.
- g) Option to reduce the Regular Premium
- i. The Policyholder will have the option to reduce the Regular Premium under the Policy after the first five (5) Policy Years.
 - ii. The reduction can be up to a maximum percentage of 50% of the Regular Premium at the Policy Commencement Date.
 - iii. Once reduced, the same cannot be increased, even to the extent of the Regular Premium at the Policy Commencement Date.
 - iv. On receipt of the reduced premium, the Sum Assured under the policy will be correspondingly reduced such that the sum assured multiplier before reduction of premium is the same as after reduction of premium.
 - v. If the reduced Sum Assured due to reduction of regular/limited premium under base policy is lower than Sum Assured of the rider(s), if any, then Sum Assured of the rider(s) will be revised to the level of reduced Sum Assured under base policy, subject to minimum rider sum assured allowed under the respective rider.
- vi. Miscellaneous charge, as mentioned in Section 15f) below, will be applicable for the option.
- h) Alteration of Premium Payment Frequency
- i. The Premium Payment Frequency may be changed at any Policy Anniversary, subject to minimum prevailing Regular Premium applicable to the Policy and as allowed for the variant chosen at Policy Commencement Date.
 - ii. Miscellaneous charge, as mentioned in Section 15f) below, will be applicable for this alteration.
- i) Option to change the Premium Paying Term (applicable only for Wealth Plus Variant)
- The policyholder has an option to change the premium payment term (PPT) in his/her policy.
- i. The option to change the PPT will be available at any time. The option can be exercised only after the payment of first 5 policy years' full premium and provided all due premiums have been paid till date. The option must be exercised before the expiry of the prevailing premium payment term.
 - ii. The change in PPT is subject to the premium payment term and policy term combination being available under the plan.
 - iii. The change will be subject to the prevailing Board Approved Underwriting Policy of the Company.

Part E

CHARGES, FUND OPTIONS, PORTFOLIO STRATEGIES, Etc

12. The Policyholder, at the Policy Commencement Date as well as any Policy Anniversary, will have option to choose from any one of the following two (2) Portfolio Strategies under this Policy:
 - a) Investor Selectable Portfolio Strategy Or
 - b) Wheel of Life Portfolio Strategy
- a) Investor Selectable Portfolio Strategy
Under this Portfolio Strategy, the Policyholder will have the following fourteen (14) Funds to choose from:

Type of Funds

 - i) The following Funds are available as at the Policy Commencement Date:
 - 1) Accelerator Mid-Cap Fund II
 - 2) Asset Allocation Fund II
 - 3) Bluechip Equity Fund
 - 4) Bond Fund
 - 5) Equity Growth Fund II
 - 6) Liquid Fund
 - 7) Pure Stock Fund

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- 8) Pure Stock Fund II
- 9) Flexi Cap Fund
- 10) Sustainable Equity Fund
- 11) Dynamic Asset Allocation Fund
- 12) Small Cap Fund
- 13) Individual Short Term Debt Fund
- 14) Midcap Index Fund
- ii) All the Funds will be internally managed by the Company. The details of the fund management/amendment are as mentioned in Section 19 below
- iii) The Company may add, close, merge, modify or consolidate the Funds under this Policy with prior approval from the IRDAI.
- iv) The Policyholder has the choice to choose one or more of the investment funds within the Investor selectable portfolio strategy.
- v) The Fund investment objectives and other details are as given below.

Fund Name	Investment Objective	Risk Profile	Asset Allocation	SFIN
Equity Growth Fund II	The investment objective of this Fund is to provide capital appreciation through investment in selected equity stocks that have the potential for capital appreciation.	Very High	Equity: Not less than 60% Bank deposits: 0% to 40% Money market instruments, cash, Mutual funds*: 0% to 40%	ULIF05106/01/10EQTYGR OW02116
Accelerator Mid-Cap Fund II	The investment objective of this Fund is to achieve capital appreciation by investing in a diversified basket of mid cap stocks and large cap stocks.	Very High	Equity: Not less than 60%, out of the equity investment at least 50% will be in mid cap stocks Bank deposits: 0% to 40% Money market instruments, cash, mutual funds*: 0% to 40%	ULIF05206/01/10ACCMID CA02116
Pure Stock Fund	The investment objective of this Fund is to specifically exclude companies dealing in gambling, contests, liquor, entertainment (films, TV etc.), hotels, banks and financial institutions	Very High	Equity: Not less than 60% Bank deposits: 0% to 40% Money market instruments, cash, Mutual funds*: 0% to 40%	ULIF02721/07/06PUREST KFUN116
Equity Growth Fund II	The investment objective of this Fund is to specifically exclude companies dealing in gambling, contests, liquor, entertainment (films, TV etc.), hotels, tobacco and tobacco related institutions.	Very High	Equity: Not less than 75% Money market instruments, cash, fixed deposits, mutual funds*: 0% to 25%	ULIF07709/01/17PURSTK FUN2116
Asset Allocation Fund II	The investment objective of this Fund will be to realize a level of total income, including current income and capital appreciation, which is consistent with reasonable investment risk. The investment strategy will involve a flexible policy for allocating assets among equities, bonds and cash. The fund strategy will be to adjust the mix between these asset classes to capitalize on the changing financial markets and economic conditions. The Fund will adjust its weights in equity, debt and cash depending on the relative attractiveness of each asset class.	High	Equity: 40% - 90% Debt, bank deposits & fixed income securities: 0% - 60% Money market instruments: 0% - 50%	ULIF07205/12/13ASSETAL L02116
Bluechip Equity Fund	The investment objective of this Fund is to provide capital appreciation through investment in equities forming part of NSE NIFTY.(films, TV etc.), hotels, tobacco and tobacco related institutions.	High	Equity: Not less than 60% Bank deposits: 0% to 40% Money market instruments, cash, mutual funds*: 0% to 40%	ULIF06026/10/10BLUECHI PEQ116
Bond Fund	The investment objective of this Fund is to provide accumulation of income through investment in high quality fixed income securities	Mode-rate	Debt and debt related securities including fixed deposits: 40% to 100% Money market instruments, cash, mutual funds*: 0% to 60%	ULIF02610/07/06BONDFU NDL116
Liquid Fund	The objective of this Fund is to have a fund that aims to protect the invested capital through investments in liquid money market and short-term instruments	Low	Bank deposits and money market instruments: 100%	ULIF02510/07/06LIQUIDF UND116
Flexi Cap Fund	To achieve capital appreciation by investing in a diversified basket of stocks across market capitalizations i.e. Large cap, mid cap and small cap	Very High	Equity & Equity related instruments: 65-100%. Cash, Bank deposits, Liquid Mutual funds and money market instruments: 0-35%	ULIF07917/11/21FLXCAPF UND116
Sustainable Equity Fund	To focus on investing in select companies from the investment universe which conduct business in socially and environmentally responsible manner while maintaining governance standards	Very High	Equity & Equity related instruments: 65-100%. Cash, Bank deposits, Liquid Mutual funds and money market instruments: 0-35%	ULIF08017/11/21SUSEQU FUND116

Fund Name	Investment Objective	Risk Profile	Asset Allocation	SFIN
Dynamic Asset Allocation Fund	The investment objective of this fund will be to realize a steady stream of current income and as well as generate capital appreciation with appropriate risk and return expectations of the asset classes. The investment strategy would involve a flexible asset allocation among fixed income and equity securities based on the outlook for each of these asset classes.	High	Equity & Equity related Instrument - 10% to 90% Debt and Debt Related Instrument- 10% to 90% Money Market Instrument-0%-80%	ULIF08617/01/23DYNASALLC116
Small Cap Fund	To achieve capital appreciation by investing in a diversified basket of predominantly* small cap stocks.	Very High	Equity* = 65-100% Bank deposit, money market instrument and Mutual Funds = 0-35% *minimum 60% in small cap stocks, Market-cap exposure is based on equity exposure re-scaled to 100%	ULIF08717/01/23SMALLCAP116
Midcap Index Fund	To provide capital appreciation through investment in equities forming part of Nifty Midcap 150 Index	Very High	Equity & Equity related instruments - 65-100%. Cash, Bank Deposits, Liquid Mutual Funds and Money Market Instruments - 0-35%	ULIF08919/10/23MIDCAPINDEX116
Individual Short Term Debt Fund	To provide stable returns through investment in various fixed income securities	Moderate	Debt & Debt Related Instruments - 40% to 100% Money Market Instrument -0%-60%	ULIF08817/01/23INDSTRM116

^{##} The Company will comply with Regulation 8 of Schedule I of the IRDAI (Investment) Regulations, 2016 (as amended from time to time) read with the Master Circular – Investment issued thereunder, the policyholder will be given the option of free switch to the fund/s mentioned under the column (as per his choice).

b) Wheel of Life Portfolio Strategy

Under this Portfolio Strategy, the Company will allocate the Regular Premiums and the Top Up Premiums, if any, paid by the Policyholder after applying the Premium Allocation Rate, and reallocate the Regular Premium Fund Value and the Top Up Premium Fund Value, if any, at each Policy Anniversary into the various Funds mentioned below, based on the Years to Maturity (as on the last Policy Anniversary) as per the table below.

Years to Maturity	Proportion in following three Funds (%)				Bond Fund (%)	Liquid Fund (%)
	Bluechip Equity Fund	Equity Growth Fund II	Accelerator Mid-Cap Fund II	Total		
20 & above	20	50	30	100	0	0
19	30	50	20	100	0	0
18	30	50	20	100	0	0
17	30	50	20	100	0	0
16	30	50	20	100	0	0
15	40	40	15	95	5	0
14	40	40	10	90	10	0
13	40	40	5	85	15	0
12	40	40	0	80	20	0
11	40	35	0	75	25	0
10	40	30	0	70	30	0
9	40	25	0	65	35	0
8	40	20	0	60	40	0
7	40	15	0	55	45	0
6	40	10	0	50	50	0
5	40	0	0	40	55	5
4	30	0	0	30	60	10
3	20	0	0	20	65	15
2	10	0	0	10	70	20
1	0	0	0	0	80	20

- This strategy provides the policyholder with "Years to maturity-based portfolio management".
- The Policyholder can opt for this Portfolio Strategy at the Policy Commencement Date or can switch to this Portfolio Strategy at any subsequent Policy Anniversary by giving a written notice to the Company thirty (30) days in advance.
- If the Policyholder has switched to this Portfolio Strategy at any subsequent Policy Anniversary, the Company will reallocate the available Regular Premium Fund Value and Top Up Premium Fund Value, if any, among various Funds in the proportion mentioned in the table above depending on the outstanding "years to maturity" of the Policy. The Regular Premiums and Top Up Premiums, if any, paid will also be allocated in to the Funds in the proportion mentioned in the table above depending on the outstanding "years to maturity" of the Policy.
- On each Policy Anniversary, the Company will reallocate the available Regular

Premium Fund Value and Top Up Premium Fund Value, if any, among various Funds in the proportion based on the outstanding years to maturity of the Policy to ensure balance is maintained between the Policyholder's "years to maturity" and level of risk on investments to optimize the returns. All allocation & de-allocation of units shall be based on the prevailing unit price/NAV.

- The proportion in the various Funds may change during a Policy Year from the allocation proportions mentioned in the relevant table above for reasons including fluctuations in the Unit Price/NAV.
 - In accordance with the Portfolio Strategy, as mentioned above, the Company may also switch Units between the various Funds at the prevailing Unit Price/NAV of the respective Funds.
 - The policyholder will not have the option to switch units or change the apportionment of premium to various funds under the Wheel of life Portfolio strategy.
 - The Company may change the proportions as may be applicable under the Portfolio Strategy with the prior approval of the IRDAI.
13. Force Ma'jeure Condition
- As per Regulation 33 & 34 of the IRDAI (Unit Linked Insurance Products) Regulations, 2019, the company will declare a 'Single' Unit Price or Net Asset Value (NAV) for each segregated fund on a day-to-day basis
 - The company specifies that, in the event of certain force majeure conditions, the declaration of Unit Price or NAV on a day-to-day basis may be deferred and could include other actions as a part of investment strategy (e.g. taking exposure of any Segregated Fund (SFIN) up to 100% in Money Market Instruments [as defined under Regulations 2(j) of the IRDAI (Investment) Regulations, 2016])
 - The Company shall value the Funds (SFIN) on each day for which the financial markets are open. However, the Company may value the SFIN less frequently in extreme circumstances external to the Company i.e. in force majeure events, where the value of the assets is too uncertain. In such circumstances, the Company may defer the valuation of assets for up to 30 days until the Company is certain that the valuation of SFIN can be resumed.
 - The Company shall inform IRDAI of such deferment in the valuation of assets. During the continuance of the force majeure events, all request for servicing the policy including policy related payment shall be kept in abeyance.
 - The Company shall continue to invest as per the fund mandates as described in Section 12. However, the Company shall reserve its right to change the exposure of all or any part of the Fund to Money Market Instruments [as defined under Regulations 2(j) of IRDAI (Investment) Regulations, 2016] in circumstances mentioned under points (a) and (b) above. The exposure to of the fund as per the fund mandates as described in Section 12 shall be reinstated within reasonable timelines once the force majeure situation ends.
 - Some examples of such circumstances [in Sub-Section a) & Sub-Section b) above] are:
 - When one or more stock exchanges which provide a basis for valuation of the assets of the Fund are closed otherwise than for ordinary holidays.
 - When, as a result of political, economic, monetary or any circumstances out of the control of the Company, the disposal of the assets of the Fund are not reasonable or

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would not reasonably be practicable without being detrimental to the interests of the continuing Policyholders.

- iii) In the event of natural calamities, strikes, war, civil unrest, riots and bandhs.
iv) In the event of any force majeure or disaster that affects the normal functioning of the Company.
g) In such an event, an intimation of such force majeure event shall be uploaded on the Company's website for information.

14. Fund Provisions

a) Purpose of the Funds

The Company has established the above Funds from which it will make payment of a part of or all of the benefits payable under this Policy.

b) Investment of the Funds

- i) The selection of the underlying investments of each Fund established by the Company and the valuation of assets to which it is referenced shall be such as the Company, may from time to time determine provided it satisfies the investment objectives set out in Section 12 above and any IRDAI Regulations as applicable from time to time. It is further provided that the assets of each Fund may comprise such proportion as the Company may determine including un-invested cash or any other assets whether or not this produces income.

- ii) All assets relating to the Fund shall be and shall remain in the absolute beneficial ownership of the Company. There is no trust created, whether expressly or impliedly, by the Company in respect of the investments in favour of any person.

15. Charges

All Charges mentioned below will be subject to the applicable service tax.

a) Mortality Charge

- (i) The Mortality Charge will be deducted at the rate as applicable to the attained Age and gender of the Life Assured, on the Date of Commencement of Risk and on each subsequent Monthly Due Dates. The Mortality Charge may vary from Policy Year to Policy Year (and during the period of settlement option, if applicable) according to the attained Age of the Life Assured at the time of deduction of the same.

- (ii) The Mortality Charge per thousand Sum at Risk is given in Annexure 1.

- (iii) Sum at Risk means higher of [Death Benefit less Fund Value] or zero. The Mortality Charge is applied on the Sum at Risk under the Policy. For purpose of calculating Sum at Risk under variant "Wealth Plus Care" during PPT the present value of Income Benefit will be taken at 4% p.a.

- (iv) For Female lives there is 3 years' age set-back for calculating mortality charges.

b) Morbidity Charge

This charge will be applicable only for Variant "Wealth Plus Care".

- (i) The Morbidity Charge will be deducted at the rate as applicable to the attained Age and gender of the Life Assured, on the Date of Commencement of Risk and on each subsequent Monthly Due Dates. The Morbidity Charge may vary from Policy Year to Policy Year according to the attained Age of the Life Assured at the time of deduction of the same.

- (ii) The Morbidity Charge per thousand Sum at Risk is given in Annexure 1.

- (iii) Sum at Risk means higher of [Death Benefit less Fund Value] or zero. The Mortality Charge is applied on the Sum at Risk under the Policy. For purpose of calculating Sum at Risk under variant "Wealth Plus Care" during PPT the present value of Income Benefit will be taken at 4% p.a.

- (iv) The Morbidity Charges are guaranteed for five (5) years and can be reviewed thereafter.

c) Fund Management Charge

Funds	Fund Management Charge per annum
Accelerator Mid Cap Fund II	1.35%
Asset Allocation Fund II	1.25%
Bluechip Equity Fund	1.25%
Bond Fund	0.95%
Equity Growth Fund II	1.35%
Liquid Fund	0.95%
Pure Stock Fund	1.35%
Pure Stock Fund II	1.30%
Flexi Cap Fund	1.35%
Sustainable Equity Fund	1.35%
Discontinuance Life Policy Fund	0.50%
Dynamic Asset Allocation Fund	1.35%
Small Cap Fund	1.35%
Midcap Index Fund	1.35%
Individual Short Term Debt Fund	0.95%

- d) Policy Administration Charge
The Policy Administration Charge is mentioned in the Schedule.

- e) Premium Allocation Charge
The Premium Allocation Rate is mentioned in the Schedule. The balance is taken as the Premium Allocation Charge.

- f) Miscellaneous Charge
The Miscellaneous Charge will be of ₹100/- per applicable transaction as mentioned in Section 11 above and Section 35 below shall be charged.

- g) Discontinuance/Surrender Charge
The Discontinuance Charge, as per table below, shall be applicable to the Regular

Where the Policy is discontinued during the Policy Year	Discontinuance charge for the policies having annualized premium up to ₹ 50000/-	Discontinuance charge for the policies having annualized premium above ₹ 50000/-
1	Lower of 20% * (AP or FV) subject to maximum of ₹ 3,000	Lower of 6% * (AP or FV) subject to maximum of ₹ 6,000
2	Lower of 15% * (AP or FV) subject to maximum of ₹ 2,000	Lower of 4% * (AP or FV) subject to maximum of Rs. ₹ 5,000
3	Lower of 10% * (AP or FV) subject to maximum of ₹ 1,500	Lower of 3% * (AP or FV) subject to maximum of ₹ 4,000
4	Lower of 5% * (AP or FV) subject to maximum of ₹ 1,000	Lower of 2% * (AP or FV) subject to maximum of ₹ 2,000
5 & above	Nil	Nil

- h) Rider Charges

The rider charges are governed by Rider Document attached herewith.

- i) Revision of Charges

After taking due approval from the IRDAI, the Company reserves the right to revise the above mentioned Charges, except the Premium Allocation Charge and Mortality Charge which are guaranteed throughout the Policy Term:

- i. Fund Management Charge up to a maximum of 1.35% per annum will be adjusted in the unit price/NAV for Asset Accelerator Mid Cap Fund II, Allocation Fund II, Bluechip Equity Fund, Bond Fund, Equity Growth Fund II, Liquid Fund, Pure Stock Fund, Pure Stock Fund II, Flexi Cap Fund & Sustainable Equity Fund, Dynamic Asset Allocation Fund, Small Cap Fund, Individual Short Term Debt Fund and 0.50% p.a. for the Discontinued Life Policy Fund.

- ii. Policy Administration Charge up to a maximum of ₹ 500 per month.

- iii. Miscellaneous Charge up to a maximum of ₹ 500/- per transaction

- iv. Partial Withdrawal Charge up to a maximum of ₹ 500/- per transaction

- v. Switching Charge up to a maximum of Rs. 500/- per transaction

- vi. Morbidity Charge will be as per Section 15b)iv) above

- vii. Rider charge will be as per the Rider Document attached herewith.

The company will give a notice of three (3) months to the Policyholders for any changes in the above mentioned charges. The Policyholder/Life Assured who does not agree with the revised charges shall be allowed to surrender the Policy. Discontinuance/Surrender Charge will be applicable if the surrender is during the lock-in period, otherwise, not.

16. Recovery of Charges

- a) The Fund Management Charge as per Section 15b) above along with applicable GST & cess will be adjusted in the Unit Price of the Funds while calculating the Unit Price/NAV.

- b) The Policy Administration Charge [per Section 15c) above], the Mortality Charges [per Section 18a) above], Rider Charge [per Section 15h) above] and the Morbidity Charges [per Section 15b) above], all along with GST & cess will become due for deduction on each monthly due dates and will be recovered by the redemption of Units at the prevailing Unit Price/NAV.

- c) The Discontinuance/Surrender Charge as per Section 15g) above along with GST & cess shall be applicable to the Regular Premium Fund Value only, on the Date of Discontinuance of Policy.

- d) Miscellaneous Charge per Section 15f) above, wherever applicable, will be recovered, as and when the Policyholder exercises the applicable options given under Section 11 above, by the redemption of Units at the prevailing Unit Price.

- e) In the event that the Units are held in more than one Fund, the cancellations of Units will be effected in the same proportion as the value of Units held in each Fund under the Policy. If the value of Units in any Fund falls to the extent that it is insufficient to support the deduction of proportionate monthly charges, then the same shall be deducted proportionately from the value of Units of the other Funds.

17. Unit Transactions

- a) Allocation of Units/Creation of Units

- i) For Regular Premium received in cash or local cheques or demand drafts, or requests for revival of a Discontinued Policy received by the Company, by the closing time for the day as specified by the IRDAI from time to time, the closing Unit

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- Price/NAV of the day it is received shall be applicable. The closing time presently specified by the IRDAI is 3:00 pm
- ii) For Regular Premium received in cash or local cheques or demand drafts, or requests for revival of a Discontinued Policy received by the Company, after the closing time for the day as specified by the IRDAI from time to time, the closing Unit Price/NAV of the next Business Day shall be applicable. The closing time presently prescribed by the IRDAI is 3:00 pm
- iii) For Regular Premium received through outstation cheques or demand drafts, the closing Unit Price/NAV of the business day on which the cheque/demand draft is cleared shall be applicable
- b) Redemption of Units/Cancellation of Units
- i) For written applications received by the Company from the Claimant for death, surrender, partial withdrawal conversion to Discontinued Policy, partial withdrawals or switch out by the closing time for the day as specified by the IRDAI from time to time, the same day's closing unit price/NAV shall be applicable. The closing time presently prescribed by the IRDAI is 3:00 pm.
- ii) For written applications received by the Company from the Claimant for death, surrender, partial withdrawal conversion to Discontinued Policy, partial withdrawals or switch out after the closing time for the day as specified by the IRDAI from time to time, the closing unit price/NAV of the next business day shall be applicable. The closing time presently prescribed by the IRDAI is 3:00 pm.
18. Non-Participation in Profits
The Policy enables the Policyholder to participate only in the investment performance of the Funds and shall not be deemed to confer any right to share in the assets, the profits or surplus of the business of the Company.
19. Fund Amendments
After taking prior approval from IRDAI, the Company may carry out addition, closure or merger of the Funds available under this Policy.
20. Unit Statement
The Company will issue a Unit Statement to the Policyholder at every Policy Anniversary or on the happening of any Unit transaction under the Policy except due to deduction of the Charges.
- Part F
- General Conditions
21. Suicide Exclusion
In case of death due to suicide within 12 months from the Date of Commencement Risk or from the date of latest revival of the Policy, whichever is later, the Claimant shall be entitled to the Fund Value, as available on the date of intimation of death. Any charges other than Fund Management Charges or Guarantee Charge recovered subsequent to the date of death shall be added to the Fund Value as at the date of intimation of death. There is no other exclusion applicable with respect to death other than suicide clause.
22. Exclusions
For death benefit, there are no exclusions other than suicide clause.
The exclusions with respect to the Cancer [for the benefit as in Section 5a) above] are as given in Annexure K.
23. Age Proof
- a) The Mortality Charge/s, Morbidity Charge/s and rider charge/s (all as applicable) payable under the Policy is calculated on the basis of the Life Assured's Age and gender as declared in the Proposal Form. If the Age has not been admitted by the Company, the Policyholder shall furnish such proof of Age as is acceptable to the Company and have the Age admitted.
- b) If the Age so admitted (the "correct Age") is found to be different from the Age declared in the Proposal Form, then without prejudice to the Company's other rights and remedies including those under the Insurance Act, 1938, the following actions shall be taken:
- i) If the correct Age is such as would have made the Life Assured uninsurable under this Policy, the plan of assurance shall stand altered to such plan of assurance as is generally granted by the Company for the Life Assured correct Age, which will be subject to the terms and conditions as are applicable to that plan of assurance. If it is not possible to grant any other plan of assurance, the Policy shall stand discontinued/terminated with immediate effect by the Company and:
- 1) If the Policy is discontinued before the fifth (5th) Policy Anniversary, the Discontinuance Value, as per Section 10 above, shall become payable at the end of the lock in period of five (5) Policy Year,
- 2) If the Policy is terminated after the fifth (5th) Policy Year, the Surrender Benefit shall be payable immediately.
- ii) If the Life Assured correct Age is higher than the Age declared in the Proposal Form, the Mortality Charge/s, Morbidity Charge/s and rider charge/s (all as applicable) payable under the Policy shall be altered corresponding to the correct Age of the Life Assured (the "corrected Mortality Charge", "corrected Morbidity Charge", "corrected rider charge/s") and the accumulated difference between the corrected Mortality Charge, corrected Morbidity Charge, corrected rider charge/s and the original Mortality Charge, original Morbidity Charge, original rider charge/s respectively, from the Policy Commencement Date up to the date of such payment shall be recovered by the redemption of Units.
- iii) If the Life Assured correct Age is lower than the Age declared in the Proposal Form, the Mortality Charge, Morbidity Charge and rider charge/s (all as applicable) payable under the Policy shall be altered corresponding to the correct Age of the Life Assured (the "corrected Mortality Charge", "corrected Morbidity Charge", corrected rider charge/s) from the next Monthly Due Date.
24. 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 of the Insurance Act, 1938, is enclosed in Annexure – AA for reference]
25. Nomination
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 of the Insurance Act, 1938, is enclosed in Annexure – BB for reference]
26. Termination Conditions
- a) All risk covers including any additional rider covers under the Policy will terminate immediately, and the Policy will terminate on payment of the last instalment.
- i) If Income Benefit has become payable under the Policy
- ii) If the Policyholder has opted for the Settlement Option, as per Section 11e) above.
- b) This Policy shall automatically and immediately terminate on the earlier occurrence of any of the following events:
- i) On the foreclosure of the Policy, as per Section 27 below.
- ii) On the date of receipt of intimation of death of the Life Assured (unless the Settlement Option as per Section 11e) above has been opted) or on the date of receipt of intimation of First Diagnosis of Cancer of the Life Assured.
- iii) On payment of Discontinuance Value or Surrender Benefit.
- iv) The Maturity Date, unless the Policyholder has opted for the Settlement Option, as per Section 11e) above.
- v) The expiry of the period of Settlement Option, if settlement option, as per Section 11e) above, has been opted.
- vi) The payment of the last installment under the Income Benefit, if the same has become payable.
- vii) On Free Look Cancellation [as per Section 6 above]
- c) The risk covers shall automatically and immediately terminate on the earliest occurrence of any of the following events:
- i) On the date of receipt of intimation of the death of the Life Assured, if the settlement option, as per Section 11e) above, has been opted
27. Foreclosure:
If the Fund Value at any time is lower than the sum of all applicable Charges, including Mortality Charge, Morbidity Charges, rider charge/s (as applicable), the Policy shall be foreclosed, and any Surrender Benefit shall be available to the Policyholder, as per the conditions in Section 9 above.
The implementation of this will ensure that some benefit is made available to the policyholder, which is fair to the policyholder.
Before foreclosure of the policy, the policyholder will be given the option to pay any premiums due under the policy or to pay top-up premium, as applicable.
If the Additional Rider, Waiver of Premium (WOP), has been taken under the Policy and the WOP benefit has already been triggered, then, on termination of Policy, the present value of all future WOP installments, discounted at 4% p.a., shall be payable additionally.
28. Fraud and Misstatement
Fraud and Misstatement 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]
29. Notices
Any notice [including discontinuance notice under Section 7 above], direction or instruction under this Policy which may be in writing or in any kind of electronic/digital format and if it is to:
- a. If the notice is to the Policyholder or the life assured:
- 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 the policy holder to the Company.
- ii) The Company shall not be responsible for any consequences arising out of non-intimation of change of the Policyholder's address and/or communication/correspondence details. In case the notice comes back to the Company undelivered to the Policyholder, after sufficient attempts, there shall be

- no obligation upon the Company to make further attempt again towards dispatch of the notice which was returned undelivered.
- b. The Company, shall be submitted by hand, post, facsimile or E-mail:
BajajAllianz Life Insurance Company,
BajajAllianz House, Airport Road, Yerawada, Pune – 411 006
Toll Free No. 1800 209 7272 | Fax: 020-6602-6789
e-mail: customercare@bajajallianz.co.in
30. Electronic Transactions
The Policyholder agrees to adhere to and comply with all such terms and conditions as the Company may prescribe from time to time with regard to all transactions and hereby agrees and confirms that all transactions (other than those requiring a written notice or communication under this Policy) effected by or through facilities for conducting remote transactions including the Internet, World Wide Web, electronic data interchange, call centres, tele-service operations (whether voice, video, data or combination thereof) or by means of electronic, computer, automated machines network or through other means of telecommunication, established by or on behalf of the Company, for and in respect of the Policy or its terms, or the Company's other products and services, shall constitute legally binding and valid transactions when done in adherence to and in compliance with the laws of the land and with the Company's terms and conditions for such facilities, as may be prescribed from time to time.
31. Currency
All amounts payable either to or by the Company shall be payable in India and in Indian Currency.
32. Waiver
Failure or neglect by either party to enforce at any time the provisions of this Policy shall not be construed or be deemed to be a waiver of either party's right here-in nor in anyway affect the validity of the whole or any part of this Policy nor prejudice either party's right to take subsequent action
33. Modifications
This Policy Document constitutes the complete contract of insurance. This Policy Document cannot be changed or varied except by a Policy endorsement in writing and signed by an officer of the Company authorized for this purpose.
34. Payment of Claim
The benefit as per Section 5a) above is payable to the Claimant. The Company shall be under no obligation to make any payment of benefit, 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:
- a) Written notice as soon as possible and in any event preferably within 180 days of the death of the Life Assured, and the circumstances resulting in the death of the Life Assured.
- b) The claimant's proof of entitlement to receive payment under the Policy.
- c) Original Policy Document.
- d) Original death certificate of the Life Assured issued by a competent authority.
- e) Medical cause of death, certificate from the doctor who last attended to the Life Assured or the hospital in which the death occurred, if applicable.
- f) Certificate by a Medical Practitioner indicating diagnosis of Cancer along with copy of medical reports based on which diagnosis of Cancer has been confirmed, if applicable.
- g) Any other certificate and/or report as required and covered under Annexure K, depending on the nature of the Cancer, if applicable.
- h) If the death is due to unnatural causes including an accident; a copy of First Information Report (FIR) and Post Mortem Report (PMR). For claiming Death Benefit, copy of FIR and PMR shall be mandatory.
- i) Any other document as may be asked for looking into the facts and circumstances resulting to a claim under the Policy.
- j) Without Prejudice to the right of the Company to insist for any of the documents as mentioned herein above to examine the admissibility of claim for the Death Benefit under the Policy of insurance, the Company may consider claims where the claimant is unable to submit required documents.
All claims lodged beyond a period of 3 years from the date of death must be supported by a Declaration of the Claimant explaining the reasons for not lodging a claim earlier and suitably demonstrate to the satisfaction of the Company that the reasons for delay was on account of facts beyond the control of Claimant.
The Company shall be under no obligation to make any payment under Section 5b) above w.r.t Maturity Benefit unless and until the Company has received from the Claimant 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) Any other document as asked for by the Company depending on the facts and circumstances of each case.
- iv) Without prejudice to the right of the Company to insist for any of the documents as mentioned herein above to examine the admissibility of claim for the benefits under the Policy, the Company may consider claims where the Claimant is unable to submit required documents
The Company reserves the right to consider delayed claims on merits only on satisfaction that there were sufficient grounds for not preferring a claim within time.
35. Loss of Policy Document
a) If the Policy Document is lost or destroyed, then, subject to Sub-Section c) below, at the request of the Policyholder, the Company, if satisfied that the Policy Document has been lost or destroyed, will issue a copy Policy Document duly endorsed to show that it is issued following the loss or destruction of the original Policy Document. The Company will charge a fee for the issuance of a copy of the Policy Document. Currently, for issuance of duplicate Policy Document, a fee of Rs. 100 plus a Stamp Duty fee (as applicable for the applicable State/Union-Territory) is being charged.
b) Upon the issuance of a copy Policy Document the original Policy Document will cease to have any legal effect.
c) The Company reserves the right to make such investigations into and call for such evidence of the loss or destruction of the Policy Document at the expense of the Policyholder, as it considers necessary before issuing a copy of the Policy Document.
d) It is hereby understood and agreed that the Policyholder will protect the Company and hold the Company harmless from and against any claims, costs, expenses, awards or judgments arising out of or howsoever connected with the original Policy Document or arising out of the issuance of a copy of the Policy Document.
36. 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.
37. Taxation
Payment of taxes, including GST & cess, as applicable, shall be the responsibility of the Policyholder. The Policyholder agrees to pay or allows the Company to deduct from the Unit Account or any of the benefits payable under this Policy, a sum on account of any tax, including GST or other payment which may be imposed by any legislation, order, regulation or otherwise, upon the Company, Policyholder or any other Beneficiary, which in the opinion of the Company is necessary and appropriate.
- Part G
38. 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,
BajajAllianz Life Insurance Company Ltd.,
BajajAllianz House, Airport Road, Yerawada, Pune - 411006
By Phone at: Toll Free No. 1800 209 7272
By Email: customercare@bajajallianz.co.in
In case you are not satisfied with the resolution provided to you by the above office, or have not received any response within 10 days, or you have any suggestion in respect of this Policy or on the functioning of the office, you may contact the following official for resolution:
Grievance Redressal Officer,
BajajAllianz 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
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
By Email: 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 at <http://bimabharosa.irdai.gov.in/>
39. Ombudsman

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- 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 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 in Address & 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

Annexure K

Variant "Wealth Plus Care" – Definition, Waiting Period and Exclusions

- I) Cancer Definition:
A malignant tumour characterised by uncontrolled growth and spread of malignant cells with invasion and destruction of normal tissues. This diagnosis must be supported by histological evidence of malignancy. The term "Cancer" includes leukemia, lymphoma and sarcoma.
- II) Waiting Period
The Waiting Period is 180 days from the Date of Commencement of Risk or date of latest revival, whichever is later.
No Cancer-related benefit will be payable, if Cancer claim occurs within the waiting period or any signs or symptoms related to cancer has occurred during the waiting period.
- III) Exclusions
 - a) The following are excluded –
 - 1) All tumours which are histologically described as carcinoma in situ, benign, pre-malignant, borderline malignant, low malignant potential, neoplasm of unknown behaviour, or non-invasive, including but not limited to: Carcinoma in situ of breasts, Cervical dysplasia CIN-1, CIN -2 and CIN-3.
 - 2) Any non-melanoma skin carcinoma unless there is evidence of metastases to lymph nodes or beyond;
 - 3) Malignant melanoma that has not caused invasion beyond the epidermis;
 - 4) All tumours of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least clinical TNM* classification T2N0M0
 - 5) All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below;
 - 6) Chronic lymphocytic leukaemia less than RA# stage 3
 - 7) Non-invasive papillary cancer of the bladder histologically described as TaN0M0 or of a lesser classification,
 - 8) All Gastro-Intestinal Stromal Tumours histologically classified as T1N0M0 (TNM Classification) or below and with mitotic count of less than or equal to 5/50 HPFs;
 - b) Apart from the exclusions specified above. The Accelerated Cancer Benefit will not be payable if the Cancer results directly or indirectly from any of the following causes or if there were signs or symptoms that led to the diagnosis of cancer within 180 days from the Date of Commencement of Risk or date of latest revival, whichever is later:
 - 1) Pre-existing diseases' which are 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
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.
 - 2) Alcohol or solvent abuse or taking of drugs, narcotics or psychotropic substances unless taken in accordance with the lawful directions and prescription of a registered medical practitioner.
 - 3) For any medical condition or any medical procedure arising from the donation of any of the Life Assured's organs.
 - 4) 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.

Annexure 1

Bajaj Allianz Life Future Wealth Gain II – Standard Mortality Charges & Morbidity Charges

a) Annual Mortality Charge Per '000 Sum at Risk for both Variants Wealth Plus and Wealth Plus Care

Age	Mortality Charge	Age	Mortality Charge
0	0.70	41	1.39
1	0.70	42	1.51
2	0.70	43	1.64
3	0.36	44	1.80
4	0.21	45	1.98
5	0.14	46	2.19
6	0.12	47	2.43
7	0.11	48	2.71
8	0.13	49	3.04
9	0.16	50	3.40
10	0.20	51	3.81
11	0.26	52	4.26
12	0.33	53	4.74
13	0.40	54	5.24
14	0.47	55	5.76
15	0.54	56	6.30
16	0.59	57	6.85
17	0.64	58	7.40
18	0.67	59	7.97
19	0.69	60	8.56
20	0.71	61	9.18
21	0.72	62	9.84
22	0.72	63	10.56
23	0.72	64	11.35
24	0.72	65	12.22
25	0.71	66	13.20
26	0.71	67	14.29
27	0.72	68	15.52
28	0.72	69	16.90
29	0.73	70	18.45
30	0.75	71	20.18
31	0.77	72	22.11
32	0.80	73	24.27
33	0.83	74	26.66
34	0.87	75	29.32
35	0.92	76	32.26
36	0.98	77	35.52
37	1.04	78	39.14
38	1.11	79	43.13
39	1.20	80	47.54
40	1.29		

Note:

- i. The above charges are exclusive of any GST & cess.
- ii. For Female lives there is 3 years' age set-back for calculating mortality charges.

b) Annual Morbidity Charge Per '000 SAR for Variant "Wealth Plus Care"

Age	Male	Female	Age	Male	Female
18	0.190	0.270	46	0.829	1.943
19	0.190	0.269	47	0.907	2.103
20	0.190	0.269	48	1.002	2.257
21	0.190	0.267	49	1.109	2.412
22	0.192	0.267	50	1.226	2.566
23	0.192	0.267	51	1.355	2.716
24	0.192	0.266	52	1.498	2.867
25	0.192	0.266	53	1.658	3.024
26	0.202	0.300	54	1.834	3.182
27	0.213	0.337	55	2.101	3.395
28	0.225	0.378	56	2.407	3.609
29	0.238	0.423	57	2.748	3.823
30	0.251	0.472	58	3.130	4.039
31	0.273	0.515	59	3.553	4.253
32	0.297	0.564	60	3.991	4.477
33	0.321	0.619	61	4.466	4.701
34	0.346	0.679	62	4.977	4.927
35	0.371	0.717	63	5.527	5.159
36	0.398	0.794	64	6.115	5.400
37	0.430	0.875	65	6.744	5.653
38	0.456	0.965	66	7.416	5.926
39	0.468	1.061	67	8.131	6.222
40	0.505	1.165	68	8.897	6.546
41	0.545	1.275	69	9.715	6.908
42	0.588	1.392	70	10.591	7.312
43	0.634	1.518			
44	0.692	1.649			
45	0.757	1.789			

Note:

- i. The above charges are exclusive of any GST & cess.
- ii. The rates are guaranteed for 5 years and can be reviewed thereafter

Address & Contact Details of Ombudsman 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:

Office of the Ombudsman	Contact Details	Areas of Jurisdiction
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
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
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 / Fax: 0755 - 2769203 Email: bimalokpal.bhopal@cioins.co.in	Madhya Pradesh & Chhattisgarh
BHUBANESHWAR	Insurance Ombudsman, Office of the Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR-751 009. Tel.: - 0674-2596461 / 455 Fax : 0674 - 2596429 Email bimalokpal.bhubaneswar@cioins.co.in	Orissa
CHANDIGARH	Insurance Ombudsman, Office of the Insurance Ombudsman, S.C.O. No.101-103, 2nd Floor, Batra Building, Sector 17-D, CHANDIGARH-160 017. Tel.: - 0172-2706196 /468 / Fax : 0172-2708274 Email bimalokpal.chandigarh@cioins.co.in	Punjab, Haryana, (excluding 4 districts viz Gurugram, Faridabad, Sonapat and Bahadurgarh), Himachal Pradesh, Jammu & Kashmir , Chandigarh
CHENNAI	Insurance Ombudsman, Office of the Insurance Ombudsman, Fathima Akhtar Court, 4th Floor, 453 (old 312), Anna Salai, Teynampet, CHENNAI-600 018. Tel.: - 044-24333668 /5284 /Fax : 044-24333664 Email bimalokpal.chennai@cioins.co.in	Tamil Nadu, Pondicherry Town and Karaikal (which are part of Pondicherry)
NEW DELHI	Insurance Ombudsman, Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Bldg., Asaf Ali Road, NEW DELHI-110 002. Tel.: - 011-23239633 / 23237532 / Fax : 011-23230858 Email bimalokpal.delhi@cioins.co.in	Delhi, 4 Districts of Haryana viz. Gurugram, Faridabad, Sonapat and Bahadurgarh
GUWAHATI	Insurance Ombudsman, Office of the Insurance Ombudsman, "Jeevan Nivesh", 5th Floor, Near Panbazar Overbridge, S.S. Road, GUWAHATI-781 001 (ASSAM). Tel.: - 0361-2132204/5 / Fax : 0361-2732937 Email bimalokpal.guwahati@cioins.co.in	Assam , Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura
HYDERABAD	Insurance Ombudsman, Office of the Insurance Ombudsman, 6-2-46, 1st Floor, Moin Court, A.C. Guards, Lakdi-Ka-Pool, HYDERABAD-500 004. Tel : 040-65504123/ 23312122 / Fax: 040-23376599 Email bimalokpal.hyderabad@cioins.co.in	Andhra Pradesh, Telangana, Yanam – and a part of the Territory of Pondicherry
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
KOCHI	Insurance Ombudsman, Office of the Insurance Ombudsman, 2nd Floor, CC 27/2603, Pulinat Bldg., Opp. Cochin Shipyard, M.G. Road, ERNAKULAM-682 015. Tel : 0484-2358759 / 2359338 / Fax : 0484-2359336 Email bimalokpal.ernakulam@cioins.co.in	Kerala , Lakshadweep, Mahe – a part of UT of Pondicherry
KOLKATA	Office of the Insurance Ombudsman, 4th Floor, Hindusthan Bldg. Annexe, 4, C.R. Avenue, Kolkatta – 700 072. Tel: 033 22124339/(40) / Fax: 033 22124341 Email: bimalokpal.kolkata@cioins.co.in	West Bengal, Andaman & Nicobar Islands , Sikkim
LUCKNOW	Insurance Ombudsman, Office of the Insurance Ombudsman, Jeevan Bhawan, Phase-2, 6th Floor, Nawal Kishore Road, Hazaratganj, LUCKNOW-226 001. Tel : 0522 -2231331/30 / Fax : 0522-2231310 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, Maharajgang, Santkabimagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar.
MUMBAI	Insurance Ombudsman, Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S.V. Road, Santacruz(W), MUMBAI-400 054. Tel : 022 - 26106552 /(960)/ Fax : 022-26106052 Email bimalokpal.mumbai@cioins.co.in	Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane
NOIDA	Office of the Insurance Ombudsman, Bhagwan Sahai Palace ,4th Floor, Main Road, Naya Bans, Sector 15, G.B. Nagar, Noida. Tel.: 0120-2514250/52/53 Email: bimalokpal.noida@cioins.co.in	State of Uttaranchal and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur
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
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

Annexure AA

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 dated 20.03.2015 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 of the Insurance Act, 1938, 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. Nomination can be made at any time before the maturity of the Policy.
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. 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. 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. 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, 1874, applies or has at any time applied except where before or after The Insurance Laws (Amendment) Act, dated 20.03.2015, 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: This is not a comprehensive list of amendments of Insurance Law (Amendment) Act, 2015 and only a simplified version prepared for general information. Policy Holders are advised to refer to Original Insurance Law (Amendment) Act, 2015 for complete and accurate details.]

Annexure CC

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. 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.
4. 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.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 / beneficiary 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 or suppression of material fact are within the knowledge of the insurer. Onus of disproving is upon the Policyholder, if alive, or beneficiaries.
7. 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.
8. 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.
9. 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.
10. 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: This is not a comprehensive list of amendments of Insurance Law (Amendment) Act, 2015 and only a simplified version prepared for general information. Policy Holders are advised to refer to Original Insurance Law (Amendment) Act, 2015 for complete and accurate details.]