

Bajaj Allianz Life Insurance Company Limited

Bajaj Allianz Family Income Benefit Rider

Part A

FORWARDING LETTER

As per Base Policy

Free Look Conditions:

Within 15 days [thirty (30) days in case this Rider is issued under the provisions of IRDA Guidelines on Distance Marketing of Insurance Products] of the receipt of this Rider, the Policyholder has the option to review the terms and conditions of the Rider and if the Policyholder disagrees to any of the terms & conditions, he has an option to return the Rider stating the reasons for his objections. The Policyholder shall be entitled to a refund comprising the Rider Premium (excluding applicable taxes) paid, less the proportionate amount of rider risk premium, for the period the Rider Life Assured was on cover and the expenses incurred by the Company on medical examination, if any and stamp duty charges, if any.

PREAMBLE

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

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

SCHEDULE

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

Part B

DEFINITIONS & ABBREVIATIONS

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

- 1) Definitions & Abbreviations:
 - a. "Accident" means a sudden unforeseen and involuntary event caused by external and visible means.
 - b. "Accidental Permanent Total Disability" means disability as a result of bodily injury caused by an accident and such injury shall within 180 days of its occurrence solely, directly and independently of any other cause, result in the disability as defined in Section 4c) below and subject to exclusions mentioned in Section 8 below.
 - c. "Claimant" means the Policyholder (if different from the Rider Life Assured) or the Nominee or the legal heirs to whom the Rider Benefit will be payable.
 - d. "Critical Illness" means Cancer of Specified severity; First Heart Attack – of specified severity; Open Chest CABG; Kidney Failure requiring regular dialysis; Stroke resulting in permanent symptoms; Major Organ/ bone marrow transplant; Permanent paralysis of limbs; Multiple Sclerosis with persisting symptoms; Aortic Surgery; Primary Pulmonary Hypertension; Alzheimer's Disease, all as defined in Section 4d) below and subject to exclusions mentioned in Section --8 below.
 - e. "Date of Commencement of Rider" means the date specified in the Schedule (unless the Policyholder is informed otherwise by the Company) from which the Rider Benefit commences under the Rider.
 - f. "Monthly Family Income" means the amount equal to 1% of Rider Sum Assured, payable monthly for a period of the remaining Rider Term, subject to a minimum period of 10 years.
 - g. "Rider Benefit" means the benefit payable under the Rider on the happening of the contingent event covered under the Rider. For more details, refer to Section 4 below.
 - h. "Rider" means the arrangements established by the Rider Policy Document.
 - i. "Rider Life Assured" means the person named as the Rider Life Assured in the Schedule whose life is assured under this Rider.
 - j. "Rider Maturity Benefit" means the benefit payable under the Rider on the Rider Maturity Date. For more details, refer to Section 4b) below.
 - k. "Rider Maturity Date" means the date as mentioned in the Schedule.
 - l. "Rider Premium" means the amount exclusive of applicable taxes, if any, payable by the Policyholder at regular intervals during the Rider Premium Paying Term, in amount (along with and as part of the Regular Premium) and at the Premium Payment Frequency.
 - m. "Rider Premium Paying Term" means the period specified in the Schedule during which the Rider Premium is payable.
 - n. "Rider Sum Assured" means the sum assured as mentioned in the Schedule.
 - o. "Rider Surrender Benefit" means the benefit payable if the Rider is surrendered/excluded or terminated. For more details, refer to Section 5 below
 - p. "Rider Term" means the period between the Date of Commencement of Rider and the Rider Maturity Date, as mentioned in the Schedule.
 - q. "Rider Surrender Value" has the meaning as in Section 5 below.

Part C

- 2) Rider Description
 - a) This is a non-participating Family Income Benefit rider, with Rider Premium, which can be attached to both non-linked participating and non participating individual products. The Rider can be taken only at inception of the Policy.
 - b) On first occurrence of (i) death or (ii) Accidental Permanent Total Disability or (iii) first diagnosis of any of the 11 Critical Illness, subject to the exclusions

mentioned in Section 8 below, Monthly Family Income shall be payable.

- c) The Rider does not in any way confer any right whatsoever on the Policyholder or the Rider Life Assured to share in the assets, the profits or surplus of the business of the Company.
- 3) Rider Premium

Rider Premiums, including applicable taxes, as a part of the Regular Premium under the Policy, is payable in full on the premium due dates specified in the Schedule or within the Grace Period allowed, during the Rider Premium Paying Term.
- 4) Rider Benefit
 - a) Family Income Benefit
 - i) On the first occurrence of (i) death or (ii) Accidental Total Permanent Disability or (iii) first diagnosis of any Critical Illness on the life of the Rider Life Assured during the Rider Term, the Company shall pay the Monthly Family Income which is equal to 1% of Rider Sum Assured, payable monthly for a period of the remaining Rider Term, subject to a minimum period of 10 years to the Nominee/ Policyholder.
 - ii. The above benefit will be payable provided the Rider has not been terminated as per Section 9 below and subject to Section 6, Section 8, Section 10 and Section 15 below:
 - b) Rider Maturity Benefit

No Rider Maturity Benefit is available under the Rider.
 - c) Accidental Permanent Total Disability
 - i) Accidental Permanent Total Disability must result in at least one of the following:
 - a. Loss of both eyes
 - b. Loss of both arms or both hands
 - c. Loss of one arm and one leg
 - d. Loss of one arm and one foot
 - e. Loss of one hand and one foot
 - f. Loss of one hand and one leg
 - g. Loss of both legs
 - h. Loss of both feet
 - i. Removal of lower jaw
 - ii) If the disability is due to amputation / dismemberment, loss of hand will mean amputation / dismemberment above wrist, loss of arm will mean amputation / dismemberment above elbow, loss of feet will mean amputation/ dismemberment above ankle and loss of leg will mean amputation / dismemberment above knee.
 - iii) If the disability is not due to amputation/dismemberment, loss will mean loss of usage of both the limbs of motor-grade power 0/5, 1/5 or 2/5 only. In permanent total disability, both the limbs should have motor-grade power less than or equal to 2/5.
 - iv) Loss of both eyes means total loss of vision in both eyes, certified by an ophthalmologist.
 - v) The disability will be admitted for claim if and only if the disability is detected as per above condition and has been certified by a registered medical practitioner.
- d) Critical Illness
 - (i) The Critical Illnesses
 - (1) Should have occurred after the waiting period of 90 days from the Date of Commencement of Rider or latest revival of the Policy.
 - (2) Should be confirmed by a registered Medical Practitioner appointed by the Company and is supported by acceptable clinical, radiological, histological and laboratory evidence.
 - (3) Should be informed to the Company within 60 days of diagnosis of the Critical Illness. .

- (4) Survival Period: The benefit with respect to critical illness shall be payable only after 30 days from the date of diagnosis provided the life assured survives this period.
- (ii) The 11 Critical Illnesses covered under the Rider are as given below:
- (1) **CANCER OF SPECIFIED SEVERITY**
 A malignant tumour characterised by the uncontrolled growth & spread of malignant cells with invasion & destruction of normal tissues. This diagnosis must be supported by histological evidence of malignancy & confirmed by a pathologist. The term cancer includes leukemia, lymphoma and sarcoma.
 The following are excluded – (i) Tumours showing the malignant changes of carcinoma in situ & tumours which are histologically described as premalignant or non invasive, including but not limited to: Carcinoma in situ of breasts, Cervical dysplasia CIN-1, CIN -2 & CIN-3; (ii) Any skin cancer other than invasive malignant melanoma; (iii) 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; (iv) Papillary micro - carcinoma of the thyroid less than 1 cm in diameter; (v) Chronic lymphocytic leukaemia less than RAI stage 3; (vi) Microcarcinoma of the bladder; (vii) All tumours in the presence of HIV infection.
- (2) **FIRST HEART ATTACK – OF SPECIFIED SEVERITY**
 The first occurrence of myocardial infarction which means the death of a portion of the heart muscle as a result of inadequate blood supply to the relevant area. The diagnosis for this will be evidenced by all of the following criteria:
 (i) a history of typical clinical symptoms consistent with the diagnosis of Acute Myocardial Infarction (for e.g. typical chest pain); (ii) new characteristic electrocardiogram changes; (iii) elevation of infarction specific enzymes, Troponins or other specific biochemical markers.
 The following are excluded: (a). Non-ST-segment elevation myocardial infarction (NSTEMI) with elevation of Troponin I or T; (b) Other acute Coronary Syndromes (c). Any type of angina pectoris.
- (3) **OPEN CHEST CABG**
 The actual undergoing of open chest surgery for the correction of one or more coronary arteries, which is/are narrowed or blocked, by coronary artery bypass graft (CABG). The diagnosis must be supported by a coronary angiography and the realization of surgery has to be confirmed by a specialist medical practitioner.
 Excluded are: (i) Angioplasty and/or any other intra-arterial procedures; (ii) any key-hole or laser surgery.
- (4) **KIDNEY FAILURE REQUIRING REGULAR DIALYSIS**
 End stage renal disease presenting as chronic irreversible failure of both kidneys to function, as a result of which either regular renal dialysis (hemodialysis or peritoneal dialysis) is instituted or renal transplantation is carried out. Diagnosis has to be confirmed by a specialist medical practitioner.
- (5) **STROKE RESULTING IN PERMANENT SYMPTOMS**
 Any cerebrovascular incident producing permanent neurological sequelae. This includes infarction of brain tissue, thrombosis in an intracranial vessel, haemorrhage and embolisation from an extracranial source. Diagnosis has to be confirmed by a specialist medical practitioner and evidenced by typical clinical symptoms as well as typical findings in CT Scan or MRI of the brain. Evidence of permanent neurological deficit lasting for atleast 3 months has to be produced.
 The following are excluded: (i) Transient ischemic attacks (TIA); (ii) Traumatic injury of the brain; (iii) Vascular disease affecting only the eye or optic nerve or vestibular functions.
- (6) **MAJOR ORGAN/BONE MARROW TRANSPLANT**
 The actual undergoing of a transplant of: (i) One of the following human organs: heart, lung, liver, kidney, pancreas, that resulted from irreversible end-stage failure of the relevant organ, or (ii) Human bone marrow using haematopoietic stem cells. The undergoing of a transplant has to be confirmed by a specialist medical practitioner.
- The following are excluded: (i) Other stem-cell transplants; (ii) Where only islets of langerhans are transplanted.
- (7) **PERMANENT PARALYSIS OF LIMBS**
 Total and irreversible loss of use of two or more limbs as a result of injury or disease of the brain or spinal cord. A specialist medical practitioner must be of the opinion that the paralysis will be permanent with no hope of recovery and must be present for more than 3 months.
- (8) **MULTIPLE SCLEROSIS WITH PERSISTING SYMPTOMS**
 The definite occurrence of multiple sclerosis. The diagnosis must be supported by all of the following:
 (i) investigations including typical MRI and CSF findings, which unequivocally confirm the diagnosis to be multiple sclerosis;
 (ii) there must be current clinical impairment of motor or sensory function, which must have persisted for a continuous period of at least 6 months, and
 (iii) well documented clinical history of exacerbations and remissions of said symptoms or neurological deficits with atleast two clinically documented episodes atleast one month apart. Other causes of neurological damage such as SLE and HIV are excluded.
- (9) **AORTIC SURGERY**
 The undergoing of surgery to correct any narrowing, dissection, obstruction or aneurysm of the thoracic or abdominal aorta, but not its branches.
 The surgery must be considered medically necessary by a recognized consultant cardiologist and must be the most appropriate treatment.
 All minimally invasive procedures such as keyhole, catheter, laser, angioplasty or other intra-arterial techniques are excluded.
 Congenital narrowing of the aorta and traumatic injury of the aorta are specifically excluded.
- (10) **PRIMARY PULMONARY HYPERTENSION**
 Means primary pulmonary hypertension associated with right ventricular enlargement established by cardiac catheterisation, resulting in significant permanent physical impairment to the degree of at least Class 3 of the NEW YORK Heart Association Classification of cardiac impairment and resulting in the Life Insured being unable to perform his/her usual occupation. The condition must be documented for at least three consecutive months.
- (11) **ALZHEIMER'S DISEASE**
 Means the unequivocal diagnosis of Alzheimer's disease made by a recognized consultant neurologist holding an appointment in this capacity at a major hospital and supported by clinical evidence and standardized testing. The diagnosis must confirm permanent failure of brain function resulting in significant cognitive impairment.
 Significant cognitive impairment is defined as a deterioration or loss of intellectual capacity to the extent that it results in the requirement for continual supervision.
 Alzheimer's disease resulting from the following is excluded: (i) Alcohol or drug abuse; and (ii) Non-organic diseases such as neurosis or psychiatric illness.
 The Company does not cover any other Critical Illnesses or Accidental Permanent Total Disability other than those mentioned in Section 4c) and 4d) above under the rider.

Part D

- 5) **Rider Surrender Benefit**
 The Rider can be excluded anytime before the Rider Maturity Date. The rider surrender value will be available to rider life assured on exclusion of the rider if rider premium payment term is less than rider policy term and if two full years premium has been paid in case of rider term less than 10 years and three full years premium is paid in case of rider term greater than or equal to 10 years.
 Rider Surrender value = $70\% * \{(n-t)/n\}^2 * \text{Total rider premium paid}$

- where, n – Rider Term and t - elapsed duration (in years and fraction thereof) from the Date of Commencement of Rider
- 6) Revival
 A lapsed Rider can be revived subject to the revival conditions applicable to the base Policy.
- 7) Flexibilities: Option to include/exclude the rider
- a. The Policyholder will have the option to include the Rider under the Policy only at the Policy Commencement Date.
- b. The Policyholder will have the option to exclude the Rider at any time during the Rider Term. On exclusion the Rider will immediately cease and the Surrender Value, if any, as per Section 5 above shall be payable. Once this Rider is excluded, it cannot be added back again.
- 8) Exclusions
 The Rider does not cover any other risk, other than those mentioned in Section 4 above.
 Some of the salient exclusions of Critical Illness under the Rider are as given below:
- a) Any of the listed Critical Illness conditions where death occurs within 30 days of the diagnosis.
- b) Any medical condition which first manifests itself within 90 days of the risk commencement date or reinstatement date whichever is later.
- c) Any Pre-existing medical condition. "Pre-existing medical condition" definition will be as per health regulation.
- d) Suicide or attempted suicide or intentional self-inflicted injury, by the life insured, whether sane or insane.
- e) Rider Life assured being under the influence of drugs, alcohol, narcotics or psychotropic substance, not prescribed by a Registered Medical Practitioner.
- f) War, invasion, hostilities (whether war is declared or not), civil war, rebellion, terrorist activity, revolution or taking part in a riot or civil commotion, strikes or industrial action.
- g) Participation by the life assured in a criminal or unlawful act with criminal intent or committing any breach of law including involvement in any fight or affray.
- h) Treatment for injury or illness caused by avocations / activities such as hunting, mountaineering, steeple-chasing, professional sports, racing of any kind, scuba diving, aerial sports, activities such as hand-gliding, ballooning, deliberate exposure to exceptional danger.
- i) Any underwater or subterranean operation or activity. Racing of any kind other than on foot.
- j) Existence of any sexually Transmitted Disease (STD) and its related complications or Acquired Immune Deficiency Syndrome (AIDS) or the presence of any Human Immuno-deficiency Virus (HIV).
- k) Participation by the insured person in any flying activity other than as a bona fide passenger (whether paying or not), in a licensed aircraft provided the life insured does not, at the time have any duty on board such aircraft.
- l) Nuclear reaction, Radioactive, Biological or chemical contamination due to nuclear accident.
 Some of the salient exclusions of Accidental Permanent Total Disability under the Rider are as given below:
- a) Disability as a result of the rider life assured committing any breach of law with criminal intent;
- b) Disability of rider life assured as a result of war, invasion, civil war, rebellion or riot;
- c) Disability as a consequence of the rider life assured being under the influence of alcohol or drugs other than drugs prescribed by and taken in accordance with the directions of a registered medical practitioner;
- d) Disability as a result of the rider life assured taking part in any naval, military or air force operation;
- e) Disability as a result of the rider life assured participating in or training for any dangerous or hazardous sport or competition or riding or driving in any form of race or competition;
- f) Disability of rider life assured as a result of aviation, gliding or any form of aerial flight other than as a fare paying passenger on a civilian airline plying on regular routes and according to a scheduled timetable;
- g) Disability of rider life assured as a result of attempted self injury whilst sane or insane
- 9) Termination of Rider
 The Rider Benefit shall automatically terminate on the earlier occurrence of either of the following.
- a. If Rider Premiums are discontinued
- b. If the policyholder terminates the rider
- c. On termination of the base policy
- d. On commencement of Monthly Family Income.
- e. On the Policy Anniversary in which the attained age of the rider life assured is 65 years.
- f. On maturity of the Rider.
- Part E
- CHARGES, FUND OPTIONS, PORTFOLIO STRATEGIES, Etc
 Not Applicable
- Part F
- General Conditions
- 10) Non Forfeiture
 Non- payment of Rider Premium & forfeiture conditions will be as per the base Policy terms & conditions, subject to Section 9 above.
- 11) Assignment
 Assignment should be in accordance with provisions of section 38 of the Insurance Act 1938 as amended from time to time.
 [A Leaflet containing the simplified version of the provisions of section 38 is enclosed in Annexure –AA for reference]
- 12) Nomination
 Nomination should be in accordance with provisions of section 39 of the Insurance Act 1938 as amended from time to time.
 [A Leaflet containing the simplified version of the provisions of section 39 is enclosed in Annexure –BB for reference]
- 13) Fraud, Misrepresentation and forfeiture
 Fraud, Misrepresentation and forfeiture would be dealt with in accordance with provisions of section 45 of the Insurance Act 1938 as amended from time to time.
 [A Leaflet containing the simplified version of the provisions of section 45 is enclosed in Annexure –CC for reference]
- 14) Age
 Age related conditions are as per the base Policy provisions
- 15) Payment of Claim
 The Company shall be under no obligation to make any payment under Section 4 above unless and until the Company has received from the Claimant (at no expense to the Company) any information and documentation it requests, including but not limited to:
- i) The claimant's proof of entitlement to receive payment under the Policy.
- ii) Original Policy Document.
- iii) Original death certificate of the Rider Life Assured issued by a competent authority.

- iv) Medical cause of death certificate from the doctor who last attended to the Rider Life Assured or from the hospital in which the death occurred.
- v) If the death is due to unnatural causes; a copy of First Information Report (FIR) and Post Mortem Report (PMR). Post Mortem Report is mandatory for claiming the Rider Benefit due to an Accident under the Rider Policy.
- vi) In case of Accidental Permanent Total Disability, the disability has to be certified by a registered medical practitioner.
- vii) In case of Critical Illness, the diagnosis of the Critical Illness needs to be confirmed by a registered Medical Practitioner appointed by the Company and to be supported by acceptable clinical, radiological, histological and laboratory evidence. The company should be informed of the Critical Illness within 60 days of diagnosis of the Critical Illness.
- viii) Any other document as asked for by the Company depending on the facts and circumstances of each case.
- ix) In case of any force majeure events (like earth quake, cyclone, flood, etc.), if the Claimant cannot produce any/all documents as stated above, the Company may undertake any investigation and the decide to pay the claim, if the Company is satisfied of the same.

The above mentioned 60 days may be condoned by the Company if it is satisfied as to the genuineness of the reasons for the delay.

Part G

As per base Policy