ALL UNIT LINKED POLICIES ARE DIFFERENT FROM TRADITIONAL INSURANCE POLICIES AND ARE SUBJECT TO DIFFERENT RISK FACTORS. IN THIS POLICY, THE INVESTMENT RISK IN INVESTMENT PORTFOLIO IS BORNE BY THE POLICYHOLDER

Part B

Definitions: (meaning of technical words used in Policy Document)

a. “**Age**” is the Age at last birthday, in completed years.
b. “**Allocation**” means the process of allocating Premium to create Units, at the prevailing Unit Price, in the Investment Funds offered under this unit linked insurance product, as and when the Premiums are received or Switches from one Fund to another Fund are made.
c. “**Annexure**” means any annexure, endorsement attached to this Policy as changed/ modified and issued by us from time to time.
d. “**Annualized Premium**” means the Premium amount payable in a year excluding the taxes, Rider premiums and underwriting extra premium on Riders, if any.
e. “**Appointee**” means the person appointed by You to receive the benefits payable under the Policy till the Nominee is a Minor as per applicable Indian Laws.
f. “**Assignee**” means the one to whom the Policy has been assigned i.e., the person to whom the Policy rights have been transferred as defined under the provisions of Section 38 of the Insurance Act, 1938 as amended from time to time.
g. “**Assignment**” means the provision wherein the Policyholder can assign or transfer a Policy in accordance with Section 38 of the Insurance Act, 1938 as amended from time to time.
h. “**Base Policy**” is this life insurance product chosen by the Policyholder out of the various products offered by the Company, but it does not include any Rider opted for by the Policyholder.
i. “**BAUP**” means Board Approved Underwriting Policy of Bharti AXA Life Insurance Company Limited.
j. “**Beneficiary”** or **“Claimant**” means the person entitled to receive benefits as per the terms and conditions of the Policy and applicable laws, and includes the Policyholder, the Nominee, the Assignee, the legal heir, the legal representative(s) or the holder(s) of succession certificate, as the case may be.
k. “**Business Day**” shall mean days other than holidays where stock exchanges (excluding Muhurat trading day) with national wide terminals are open for trade (other than day on which exchanges are open for testing) or any day declared by the Authority as business day.
l. **Customer Information Sheet (CIS)** is a document provided by the Insurer along with this Policy Document that provides in simple words, important information and basic features of the Policy issued at one place.
m. “**Date of Commencement of Risk**” is the date from which the life insurance coverage under this Policy commences and is as specified in the Policy Schedule.
n. “**Date of Inception of Policy**” is the date on which the Policy is issued and is as specified in the Policy Schedule.
o. “**Death Benefit**” means the benefit which is payable on death of the Life Insured as per the terms and conditions of this Policy.
p. “**Discontinuance**” means the state of a Policy that could arise on account of Surrender of the Policy or non-payment of the Premium due before the expiry of the Grace Period.
q. “**Discontinued Policy Fund**” means the Investment Fund of the Company that is set aside and is constituted by the Fund Value, as applicable, of all the unit linked policies discontinued during the Lock-in Period.
r. “**Free Look Period**” means the period of thirty (30) days specified under **Part-D** from the date of receipt of this Policy Document.
s. “**Grace Period for other than Single Premium policies**” is the time extended by the Company to facilitate the Policyholder to pay the unpaid Premium, in case the Premium(s) had not been paid as on the due date, without any penalty or late fee, during which time the Policy is considered to be in-force with the risk cover, including risk cover under the Riders. The Policyholder gets Grace Period [thirty (30) days for annual/ half yearly/quarterly Premium Payment Modes and fifteen (15) days for monthly mode] to pay the unpaid Premium due under the Policy and the benefits under the Policy will remain unaltered during this period.
t. “**Investment Fund**” or “**Fund**” is a specific and segregated fund managed for the exclusive interest of all Policyholders sharing the same Investment Fund option. The Company offers a number of Investment Funds from time to time earmarked for its unit linked business and each of these Investment Funds has an asset Allocation mix of various financial instruments.

u. "**Investment Fund Allocation Instruction"** is Policyholder's instruction for Allocation of the Premiums net of all relevant Premium Allocation Charge for purchase of Units in the Investment Fund as specified by Policyholder.

v. "**Life Insured**" is the person so named in the Policy Schedule and whose life is covered under the Policy.

w. "**Lock-in Period**" is a period of five (5) consecutive completed years from the Date of Inception of Policy, during which period the proceeds of the Policies cannot be paid by the Company to the Policyholder or to the Life Insured, as the case may be, except in the case of death or upon the happening of any other contingency covered under the Policy.

x. "**Loyalty Booster**" Means an additional amount added at maturity under the **Plan Option 2: Wealth Plan**, subject to the terms and conditions of the Policy.

y. "**Maturity Benefit**" is the benefit payable on the Maturity Date. For more details, please refer **Part-C** of this Policy Document.

z. "**Maturity Date**" is the date on which the Policy Term concludes and is specified in the Policy Schedule.

aa. "**Minor**" is a person below the legal age of majority or adulthood.

bb. "**Milestone Benefit**" means a benefit(s) payable at specified milestones during the Policy Term under the **Plan Option 1: Wealth Affinity Plan**, subject to the terms and conditions of the Policy.

cc. "**Net Asset Value (NAV)**" means the price per Unit of the Investment Fund.

dd. "**Nominee**" is the person nominated under the Policy, as per the provisions of Section 39 of Insurance Act, 1938 as amended from time to time, to receive the benefits under the Policy in the event of death of the Life Insured before the Maturity Date. This is applicable where the Policyholder and Life Insured are the same.

ee. "**Paid-up**" or "**Reduced Paid-up**" means a condition during the term of the Policy, where the Policyholder discontinues the payment of Premiums, rendering the Policy to continue at a reduced level of benefits, as specified under this Policy.

ff. "**Partial Withdrawal**" means any part of Fund that is withdrawn by the Policyholder during the Policy Term as per the terms and conditions of this Policy.

gg. "**Policy**" means Bharti AXA Life Grow Wealth Ultra along with the unique Policy number issued to You as mentioned in the Policy Schedule.

hh. "**Policy Anniversary**" is the date which periodically falls after every twelve (12) months starting from the Date of Inception of the Policy whilst the Policy is in force.

ii. "**Policy Charges**" or "**Charges**" are the charges associated with the Policy as detailed in **Part-E** of this Policy Document.

jj. "**Policy Document**" means and includes the Proposal Form for insurance submitted by the Policyholder, the Policy Schedule, the first Premium receipt, any attached endorsements or supplements provided by the Company from time to time, the medical examiner's report and any other document/s called for by the Company and submitted by the Policyholder to enable the Company to process the proposal.

kk. "**Policy Fund Value**" or "**Fund Value (FV)**" is defined as the total value of Units at a given point of time in an Investment Fund i.e., total number of Units under the Policy multiplied by the corresponding Net Asset Value (NAV) per Unit of that Investment Fund.

ll. "**Policy Schedule**" contains a brief description of the Policy, the Policyholder and the Life Insured and forms an integral part of the Policy.

mm. "**Policy Term**" is the number of Policy Years for which the Policy has been issued, commencing from the Date of Inception of Policy and ending on the Maturity Date and is mentioned in the Policy Schedule.

nn. "**Policy Year**" is measured from the Date of Inception of Policy and is a period of twelve (12) consecutive calendar months and includes every subsequent twelve consecutive calendar months.

oo. "**Premium**" Means the amount payable periodically under this Policy as shown in the Policy Schedule exclusive of applicable taxes, if any. The Policyholder has the option to select at inception any of the following frequencies for Premium payment:

   i. **Regular Pay/Regular Premium** where a level Premium is paid throughout the Policy Term; or
   ii. **Limited Pay/ Limited Premium** where the Premium is paid for a limited period, which shall be less than the Policy Term; or
   iii. **Single Pay/ Single Premium** where the Premium us paid in lump sum at the inception of the Policy.

pp. "**Policyholder**" is the owner of the Policy whose name is mentioned in the Policy Schedule.

qq. "**Premium Payment Mode**" means the periodicity of Premium payment modes as chosen by the Policyholder i.e., single, annual, half-yearly, quarterly or monthly under this Policy.

rr. "**Premium Payment Term**" means the number of Policy Years for which the Policyholder is required to pay the Premium and is mentioned in the Policy Schedule.

ss. "**Premium Re-direction**" means an option which allows the Policyholder to modify the Allocation of amount of renewal Premium to various Investment Funds, under this Policy, offered through a different investment pattern than the option exercised at the Date of Commencement of Risk of the Policy.

tt. "**Proposal Form**" means the proposal form completed and submitted by You based on which the Company has issued this Policy to You.

uu. "**Proceeds of the Discontinued Policy**" means the Fund Value as on the date of Discontinuance of the Policy (Post deduction of applicable discontinuance charges) plus entire income earned after deduction of the Fund Management Charges, subject to a minimum guarantee of interest @ 4% p.a. or as prescribed by IRDAI from time to time.

vv. "**Refund of Charges (RoC)"** is an amount that will be added to the Policy Fund Value as per the terms and conditions detailed in **Part-C** below.

ww. "**Regulations**" means any regulations as issued under applicable laws, as amended from time to time which are applicable to this Policy, its Funds, the valuation of investments and other assets.

xx. "**Regulatory Authority**" or "**Authority**" means the Insurance Regulatory and Development Authority of India ("IRDAI") or such other authority or authorities, as may be designated/appointed under the applicable laws and Regulations as having the authority to oversee and regulate life insurance business in India.

yy. "**Revival**" means restoration of the Policy, which was discontinued due to the non-payment of Premium, by the Insurer with all the benefits mentioned in the Policy Document, with or without Rider benefits, if any, upon the receipt of all the Premiums due and other charges or late fee, if any, during the Revival Period, as per the terms and conditions of the Policy, upon being satisfied as to the continued insurability of the Life Insured or Policyholder on the basis of the information, documents and reports furnished by the Policyholder, in accordance with BAUP.

zz. "**Revival Period**" means the period of three (3) consecutive complete years from the date of first unpaid Premium.

aaa. "**Rider**" is an optional insurance cover which is purchased along with this Base Policy. It provides additional benefits to the Policyholder/ Life Insured. It is not a standalone document and should be read along with Base Policy.

bbb. "**Sum Assured**" or "**Sum Assured on Death**" means an absolute amount of benefit which is guaranteed to become payable on death of the life Insured in accordance with the terms and conditions of the policy. The Sum Assured is mentioned in the Policy Schedule.

ccc. "**Surrender**" means complete withdrawal/ termination of the entire Policy by the Policyholder.

ddd. "**Surrender Value**" means an amount, if any, that becomes payable in case of Surrender in accordance with the terms and conditions of the Policy.

eee. "**Switches**" means the facility allowing the Policyholder to change the investment pattern by moving from one Investment Fund, either wholly or in part, to other Investment Fund(s) amongst the Investment Funds offered under the Policy.

fff. "**The Company /Company/ We/ Us/ Our/ Insurer**" means Bharti AXA Life Insurance Company Limited.

ggg. "**Total Premiums Paid**" means total of all Premiums paid under the Base Policy.

hhh. "**Unit**" means a specific portion or a part of the underlying Investment Fund Purchased from the Premiums paid under the Policy, which represents Policyholder's entitlement in such Funds.

iii. "**Unit Price**" is the value per Unit of each Investment Fund calculated in accordance with **Part E** of this Policy Document.

jjj. "**Valuation Date**" is the date on which the Unit Price of the Investment Fund is determined in accordance with the valuation provisions of this Policy.

kkk. "**You/Your/Yours/Proposer**" refers to the Policyholder.

The terms defined above shall also act as a reference guide to the Policy Document in terms of IRDAI Master Circular on Protection of Policyholders' Interest, 2024 (Ref: IRDAI/PP&GR/CIR/MISC/117/9/2024).

PART-C

Benefits Payable

1) Plan Option

The Policy offers a choice of two (2) Plan Options. The Policyholder must opt for any one of the following Plan Option at the inception of the Policy:

I. **Plan Option 1: Wealth Affinity Plan**; or
II. **Plan Option 2: Wealth Plan.**

The Plan Option selected at the inception of the Policy is as specified in the Policy Schedule and the same shall remain fixed and cannot be altered during the Policy Term.

2) Death Benefit

Upon death of the Life Insured, provided the Policy is in-force and all due Premiums till the date of death have been paid, the Death Benefit will be payable to the Beneficiary/Claimant.

Death Benefit shall be the highest of:

i. Sum Assured less any Partial Withdrawals made during the two (2) years immediately preceding the date of death; or
ii. Policy Fund Value as on the date of intimation of death; or
iii. 105% of Total Premiums Paid till the date of death less any Partial Withdrawals made during the two (2) years preceding the date of death.

Note: The Sum Assured is defined as Annualized Premium x Death Benefit Multiple (DBM). The Annualized Premium and Death Benefit Multiple are mentioned in the Policy Schedule.

In case of the death of the Life Insured during the Grace Period, the Death Benefit shall be payable. The Beneficiary/Claimant will not have any rights or obligations except to receive the benefits under the Policy.
s
In case of the death of the Life Insured while the Policy is in a Discontinuance status and the monies are a part of the 'Discontinued Policy Fund', the Policy Fund Value as on the date of intimation of death shall be payable.

*

3) Maturity Benefit

In case the Life Insured survives till maturity, and all due Premiums have been paid till the Maturity Date, the Policy Fund Value as on the Maturity Date will be payable. The Policy Fund Value shall include all the benefits already added to it as per the terms and conditions of this Policy. There is no investment guarantee offered under this Policy.

4) Other Benefits

i. Milestone Benefits *(Applicable only to Plan Option 1: Wealth Affinity Plan)*:

Provided the Policy is in-force and all due Premiums have been paid, the Milestone Benefits will be credited to the Fund at the end of every fifth (5^{th}) Policy Year starting from the tenth (10^{th}) Policy Year during the Policy Term.

Milestone Benefits will be allocated to the Policy by creating additional Units across Investment Funds, in the same proportion as the Investment Fund Allocation Instruction then in effect. Once added, they will become payable along with the Policy Fund Value.

Milestone Benefits shall not be credited to policies in Paid-up status. Milestone Benefits are applicable to be paid on policies which, after Discontinuance, are revived as per the terms and conditions of this Policy.

Milestone Benefits are applicable only to **Plan Option 1: Wealthy Affinity Plan.**

The Milestone Benefit shall be calculated as under:

Milestone Benefit= Milestone Benefit Factor x Average of Policy Fund Value at the end of each of the preceding sixty (60) months.

The Milestone Benefits Factors are as follows –

Variant	Plan Option 1: Wealth Affinity Plan	
Policy Year/ Annualized Premium	**Below Rs.5,00,000/-**	**Rs.5,00,000/- and above**
Less than 20	5%	10%
20 and above	10%	20%

.

ii. <u>Loyalty Booster *(Applicable only to Plan Option 2: Wealth Plan)*:</u>

Provided the Policy is in-force and all due Premiums have been paid, Loyalty Booster shall be credited to the Fund on the Maturity Date. Loyalty Booster will be allocated to the Policy by creating additional Units across Investment Funds, in the same proportion as the Investment Fund Allocation Instruction then in effect.

Loyalty Booster shall not be credited in case of policies in Paid-up status. Loyalty Booster is applicable to be paid on policies which, after Discontinuance, are revived as per the terms and conditions of this Policy.

Loyalty Booster is applicable only to **Plan Option 2: Wealth Plan**

The Loyalty Booster shall be calculated as under:

Loyalty Booster= Five percent (5%) x Average of Policy Fund Value of the preceding sixty (60) months prior to Maturity Date.

iii. <u>EmpowHer Booster</u>

Female customers will receive an additional benefit (known as "EmpowHer Booster") which will be added to the Policy Fund Value at maturity. The additional benefit (as a % of Annualized Premium) will be as follows –

Policy Term	Single Pay	Other than Single Pay
Up to 15 years	5%	50%
15 years and above	10%	100%

The above benefit is payable only if all premiums have been received from the Policyholder.

Note: For female lives, only one of the two, either the 'Existing Customers Benefit' or the 'EmpowHer Booster', will be applicable.

iv. <u>ECS Payment Benefit</u>

In case Premiums are paid via Electronic Clearing Service (ECS), the customers will receive an additional benefit which will be added to the Policy Fund Value at the end of premium payment term. The additional benefit (as a % of Annualized Premium) will be as follows –

Policy Term	Single Pay	Other than Single Pay

Up to 10 years	Not Applicable	5%
10 years and above	Not Applicable	10%

The additional payment at the end of premium payment term is a one-time payment. This is payable only if all premiums have been received from the Policyholder.

v. **Existing Customers Benefit**

Existing customers will receive an additional benefit which will be added to the Policy Fund Value at maturity. The additional benefit (as a % of Annualized Premium) will be as follows –

Policy Term	Single Pay	Other than Single Pay
Up to 15 years	5%	50%
15 years and above	10%	100%

The above benefit is payable only if all premiums have been received from the Policyholder.

Note: For female lives, only one of the two, either the 'Existing Customers Benefit' or the 'EmpowHer Booster', will be applicable.

vi. **Refund of Charges:**

The Charges mentioned below shall be refunded/returned, provided the Policy is in-force and all due Premiums under the Policy have been paid. These will be allocated to the Policy by creating additional Units across Investment Funds, in the same proportion as the investment fund allocation instruction then in effect.

Refund of Charges shall not be credited in case of a Surrendered, Discontinued or Paid-up Policy. Refund of Charges is applicable to be paid on revived policies.

a) Return of Premium Allocation Charge:

The total Premium Allocation Charges (excluding any applicable tax/cess levied) deducted during the Policy Term will be added to the Policy Fund Value at maturity, if any.

b) Return of Administration Charge:

The total Administration Charges (excluding any applicable tax/cess levied) deducted during the Policy Term will be added to the Policy Fund Value at maturity, if any.

c) Return of Mortality Charge:

The total Mortality Charges (excluding any extra Mortality Charge or any applicable tax/cess levied) deducted during the Policy Term will be added to the Policy Fund Value at maturity.

5) Grace Period

Grace Period is the time extended by the Company, as mentioned below, to facilitate the Policyholder to pay the unpaid Premium, in case the Premium(s) had not been paid as on the due date, without any penalty or late fee, during which time the Policy is considered to be in-force with the risk cover, including risk cover under the Riders. Grace Period is not applicable for Single Premium Payment Policy.

The Policyholder gets the Grace Period of:

i. Fifteen (15) days in case of monthly Premium Payment Mode;

ii. Thirty (30) days in case of all Premium Payment Mode except monthly mode.

6) Payment of Premium

i. You are required to pay Premiums on the Premium Due Date and for the amount mentioned in the Policy Schedule.

ii. You are required to pay Premiums for the entire Premium Payment Term.

iii. If Single Premium option has been chosen by You, only one Premium is to be paid, and no future Premiums are payable.

iv. The Premium Payment Modes permitted are single, annual, half-yearly, quarterly and monthly (payable through ECS only).

v. If the Policyholder discontinues the payment of Premiums, the Policy will be treated as Discontinued or Reduced Paid-up as per the terms and conditions under **Part-D** of this Policy Document.

7) Riders

The Policyholder will have the option to choose such Rider(s) as the Company may offer from time to time. The Rider/s shall be offered in compliance with the applicable regulatory provisions prescribed by the Authority.

The Policyholder can opt for a Rider only if the outstanding term of the Base Policy is at least equal to five (5) years. The Policy Term of the Rider shall be less than or equal to the Policy Term of this Base Policy. The Rider shall not be offered if the term of the Rider exceeds the outstanding term of the Base Policy.

The Rider premium pertaining to health related or critical illness Riders shall not exceed 100% of Premium under this Base Policy. The Rider premiums under all other life insurance Riders shall not exceed 30% of Premiums under this Base Policy and any benefit arising under each of the above-mentioned Riders shall not exceed the Sum Assured under this Base Policy.

PART-D

1) **Free Look Period**

If a Policyholder disagrees with any of the terms and conditions of the Policy, or otherwise, and has not made any claim, there is an option to return the original Policy along with a letter stating reason/s for cancellation, within thirty (30) days from the date of receipt of the Policy Document, whether received electronically or otherwise.

Irrespective of the reasons mentioned, the Policy will be cancelled and the Company will refund the proceeds by repurchase of the units at the Net Asset Value (NAV) of the Units on the date of cancellation, excluding the proportionate risk premium for the period of cover and the medical expenses, if any, incurred by the Insurer, and stamp duty charges.

All rights under this Policy shall stand extinguished immediately on cancellation of the Policy under the free look option.

How can the Policyholder exercise the Free Look option?
To exercise the free look option, You need to send the original Policy (the entire booklet) along with a request letter to Us at the address mentioned at the bottom of this letter. You are required to maintain the acknowledgement received from the Company as a proof of submission.

2) **Discontinuance of Premium:**

i. **Discontinuance of the Policy during Lock-in Period:**

I. **For other than Single Premium Policies:**

a) Upon expiry of the Grace Period, in case of Discontinuance of Policy due to non-payment of Premium, the Fund Value after deducting the applicable Discontinuance Charges, shall be credited to the Discontinued Policy Fund and the risk cover and Rider cover, if any, shall cease.

b) Such Discontinuance Charges shall not exceed the charges, stipulated in the '**Policy Charges**' section of **Part-E** of this Policy Document. All such discontinued policies shall be provided a Revival Period of three (3) years from date of first unpaid Premium. On such Discontinuance, the Company shall communicate the status of the Policy, within three (3) months of the first unpaid Premium, to the Policyholder and provide the option to revive the Policy within the Revival Period of three (3) years.

c) In case the Policyholder opts to revive but does not revive the Policy during the Revival Period, the Proceeds of the Discontinued Policy Fund shall be paid to the Policyholder at the end of the Revival Period or Lock-in Period whichever is later. In respect of Revival Period ending after Lock-in Period, the Policy will remain in Discontinued Policy Fund till the end of Revival Period. The Fund Management Charges of Discontinued Policy Fund will be applicable during this period and no other Charges will be applied.

d) In case the Policyholder does not exercise the option as set out above, the Policy shall continue without any risk cover and Rider cover, if any, and the Policy Fund shall remain invested in the Discontinued Policy Fund. At the end of the Lock-in Period, the Proceeds of the Discontinued Policy Fund shall be paid to the Policyholder and the Policy shall terminate.

e) However, the Policyholder has an option to Surrender the Policy anytime and Proceeds of the Discontinued Policy Fund shall be payable at the end of Lock-in Period or date of Surrender whichever is later.

II. **In case of Single Premium Policies**:

a) The Policyholder has an option to Surrender any time during the Lock-in Period. Upon receipt of request for Surrender, the Fund Value, after deducting the applicable Discontinuance Charges, shall be credited to the Discontinued Policy Fund.

b) Such Discontinuance Charges shall not exceed the Charges stipulated in '**Policy Charges**' section of **Part-E** of this Policy Document.

c) The Policy shall continue to be invested in the Discontinued Policy Fund and the proceeds from the Discontinued Policy Fund shall be paid at the end of Lock-in Period. Only Fund Management Charge can be deducted from this Fund during this period. Further, no risk cover shall be available on such Policy during the Discontinuance period.

ii. Discontinuance of Policy after the Lock-in-Period:

Policies, other than Single Premium policies, shall be Discontinued for non-payment of Premium after Lock-in Period in the following manner:

I. Upon expiry of the Grace Period, in case of Discontinuance of Policy due to non-payment of Premium after Lock-in Period, the Policy shall be converted into a Reduced Paid-up Policy with the Paid-up Sum Assured i.e. original sum assured multiplied by the total number of Premiums paid to the original number of Premiums payable as per the terms and conditions of the Policy. The Policy shall continue to be in Reduced Paid-up status without Rider cover, if any. All Charges as per terms and conditions of the Policy will be deducted during the Revival Period. However, the Mortality Charges shall be deducted based on the Paid-up Sum Assured only.

II. On such Discontinuance, the Company shall communicate the status of the Policy, within three (3) months of the first unpaid Premium, to the Policyholder and provide the following options:
   a) To revive the Policy within the Revival Period of three (3) years, or
   b) Complete withdrawal of the Policy.

III. In case the Policyholder opts to revive the Policy within the Revival Period of three (3) years but does not revive the Policy during the Revival Period, the Fund Value shall be paid to the Policyholder at the end of the Revival Period.

IV. In case the Policyholder does not exercise any option as set out above, the Policy shall continue to be in Reduced Paid-Up status. At the end of the Revival Period the proceeds of the Policy Fund shall be paid to the Policyholder and the Policy shall terminate.

V. All Charges as per terms and conditions of the Policy may be deducted during the Revival Period.

VI. However, the Policyholder has an option to Surrender the Policy anytime and proceeds of the Policy Fund shall be payable.

3) Revival:

i. A Policy which has been discontinued or converted into a Reduced Paid- up Policy may be revived for full benefits under the Policy subject to the following conditions:
   a) Your written application for Revival is made within three (3) years from the date of first unpaid Premium;
   b) Evidence of continued insurability of the Life Insured to Our satisfaction is produced;
   c) An amount equal to all due unpaid Premiums is paid to Us.

ii. The Revival shall be as per the BAUP. The effective date of Revival is the date on which the above conditions are satisfied, and the risk is accepted in writing by the Company.

iii. The Revival of the Policy may be on terms different from those applicable to the Policy before it was Discontinued or was converted into a Reduced Paid-up Policy. The Revival will take effect only on it being specifically communicated by the Company.

iv. Upon Revival, all applicable benefits under the Policy shall be restored.

v. The Revival of Policies can be done in the following manner:-

I. Revival of a Discontinued Policy during Lock-in Period:

A. Where the Policyholder exercises the option to revive the Policy, the Policy may be revived restoring the risk cover along with the investments made in the Investment Funds as chosen by the Policyholder, out of the Discontinued Policy Fund less the applicable Charges as mentioned below, subject to the terms and conditions as mentioned in the '**Revival'** section under **Part-D** of this Policy Document.

B. The Company, at the time of Revival:
   1. Shall collect all due and unpaid Premiums without charging any interest or fee.
   2. May levy Policy Administration Charge and Premium Allocation Charge as applicable during the Discontinuance period. No other Charges shall be levied.
   3. Shall add back to the Fund, the Discontinuance Charges deducted at the time of Discontinuance of the Policy.

II. Revival of a Discontinued Policy after Lock-in Period

A. The Policyholder can revive the Policy, as per **Revival** section under **Part-D** of this Policy Document. Where the Policyholder revives the Policy, the Policy shall be revived restoring the original risk cover in accordance with the terms and conditions of the Policy.

B. The Company, at the time of Revival:
   1. Shall collect all due and unpaid Premiums under Base Policy without charging any interest or fee. The Rider may also be revived at the option of the Policyholder.
   2. May levy Premium Allocation Charge as applicable.
   3. No other Charges shall be levied.

NON-RECEIPT OF ANY NOTICE AS REQUIRED UNDER THIS CONTRACT SHALL NOT BE CONSTRUED AS A BREACH OF ANY CONTRACTUAL OBLIGATION ON OUR PART.

4) Partial Withdrawal

i. The Policyholder has the option to apply for Partial Withdrawal of Funds from the Policy Fund Value in the specified form, at any time only after the completion of Lock-in Period.
ii. In the case of child policies/ policies issued on Minor lives, Partial Withdrawals shall not be allowed until the Minor Life Insured attains majority i.e. on or after attainment of age 18.
iii. The minimum withdrawal limit is Rs 5,000/- (Rupees Five Thousand Only).
iv. The Policy Fund Value, after a Partial Withdrawal, should be at least equal to:
   a) 120% of the Annualized Premium in other than Single Premium Policies, and
   b) 25% of the Single Premium in Single Premium Policies
v. The Partial Withdrawals shall not be allowed which would result in termination of the Policy.
vi. In a Policy Year, the Policyholder is entitled to make any number of Partial Withdrawals free of Charge subject to the limit of minimum and maximum Partial Withdrawal amount.

5) Systematic Withdrawal Benefit (SWB):

i. SWB is an automated Partial Withdrawal facility which can be opted by the Policyholder. Under this facility, a pre-decided amount will be withdrawn from the Policy Fund Value from the end of chosen Policy Year and paid to Policyholder till the end of the Policy Term. At the time of the written request to effect the SWB, the Policyholder needs to choose the following:

   a) Systematic Withdrawal amount per annum, Payout will only be annually; or
   b) Policy Year from which the amount under SWB will be payable.

ii. SWB will be subject to following conditions:
   a) SWB will start from 10th Policy Year or thereafter;
   b) Each systematic withdrawal should not be greater than one Annualized Premium.

iii. The amount paid out to the Policyholder in each instalment will be withdrawn by cancelling the Units from the Investment Funds in which investments have been made, in the same proportion as the amount of the respective Investment Fund to the total Policy Fund Value. The Units will be calculated as follows:

Units to be cancelled = Systematic Withdrawal Amount chosen / NAV

iv. SWB option can be opted anytime during the Policy Term. Once opted, the SWB options such as systematic withdrawal amount per annum, Policy Year from which the Systematic Withdrawal Benefit (SWB), will be payable cannot be changed.

v. The Policyholder may opt out of the SWB option during the Policy Term by giving the Company prior written request, in which case this option will cease to be effective from the Policy Anniversary following the receipt of the request. Once opted out, the Systematic Withdrawal Benefit cannot be re-chosen.

vi. Minimum amount that can be withdrawn under SWB is Rs.5,000/- (Rupees Five Thousand Only) per instalment.

vii. If the Fund Value on SWB instalment and/or Partial Withdrawal falls below 120% of one Annualized Premium for Limited/Regular Pay and 25% of Single Pay, the SWB and/or Partial Withdrawal both shall be immediately stopped.

viii. Both Systematic Withdrawal Benefit and Partial Withdrawal can be availed simultaneously. SWB will follow all other the conditions of Partial Withdrawals.

ix. For Policies issued on Minor lives, SWB shall not be allowed until the Minor Life Insured attains majority i.e., on or after attainment of age 18.

6) <u>Surrender</u>

i. **Complete withdrawal/Surrender of this Policy within Lock-in Period:**
Upon Your request, Policy can be completely withdrawn/Surrendered during Lock-in Period of five (5) years. On complete withdrawal/Surrender of the Policy, Policy Fund Value less applicable Discontinuance Charges as on the date of Discontinuance/Surrender, shall be credited into the Discontinued Policy Fund maintained by the Company at a minimum guaranteed interest rate of 4% p.a. or as prescribed by the Authority from time to time. The Proceeds of the Discontinued Policy Fund shall be payable to Policyholder immediately after completion of the Lock-in Period. All benefits in this Policy shall cease on the date of complete withdrawal/Surrender.

ii. **Complete withdrawal/Surrender of Policy after Lock-in Period:**
Upon complete withdrawal/Surrender of the Policy after the Lock-in Period of five (5) Policy Years, the Policy Fund Value as on the date of Surrender/complete withdrawal, shall be payable and the Policy shall terminate.

7) <u>Change in the Investment Fund Allocation (Premium Redirection)</u>

i. The Investment Fund Allocation will be chosen by the Policyholder at the time of inception of the Policy. Policyholder can choose to change the Allocation of future Premiums with Premium Redirection.

ii. The Investment Fund Allocation Instruction is subject to a minimum Allocation percentage of 5% in any chosen Investment Fund/s. The number of Investment Funds for Allocation is ten (10). The change in the Fund Allocation will be effective from the next Premium Due Date.

iii. Premium Redirection is not applicable for Single Premium Payment Policy.

8) <u>Units</u>

i. **Creation of Units:**
The Units shall be created based on the Unit Price. Units will be created in the Investment Fund/s on receipt by the Company of the Premium in cash or by way of a local cheque/demand draft payable at par at the place where the Premium/application for Switch is received on the following basis:

I. the same Business Day's closing Unit Price shall be applicable if received before cut-off time (3.00 p.m.);

II. the next Business Day's closing Unit Price shall be applicable if received after cut-off time (3.00 p.m.)

In respect of Premiums received with outstation cheques/demand drafts at the place where the Premium is received, the closing Unit Price of the Business Day on which cheques/ demand draft is realized shall be applicable.

However, Units for the first Premium shall be allocated on the day the proposal is accepted and results into a Policy by adjustment of proposal deposit towards Premium.

In case the Premium is paid in advance, Units will be created only on the due date. No interest shall be payable on Premium paid in advance.

ii. **Cancellation of Units**

Units will be cancelled from the Investment Funds, wherein an application (including claims, Surrender, Free-Look option, Policy closure, Switch request, Partial Withdrawal and Discontinuance of Premium) is received by the Company:

I. by 3.00 p.m., the same Business Day's closing Unit Price shall be applicable.
II. after 3.00 p.m., the next Business Day's closing Unit Price shall be applicable.

9) Reduced Paid-Up/Paid-up Benefits:

i. Upon expiry of the Grace Period, in case of Discontinuance of Policy due to non-payment of Premium after Lock-in Period, the Policy shall be converted into a Reduced Paid-up Policy with the Paid-up Sum Assured. The Paid-up Sum Assured is calculated as follows:

$$\textit{Paid-up Sum Assured} = \frac{\textit{Total number of Premiums paid}}{\textit{Total number of Premiums payable}} \times \textit{Sum Assured}$$

ii. The timing of reduced benefits under a Paid-up Policy remains unaltered and all applicable Charges i.e., Policy Administration Charge, Mortality Charge and Fund Management Charge will continue to be levied.

iii. The following benefits shall be payable in Reduced Paid-up status:

Event	Description of Benefits payable
Death	Paid-up Death Benefit, which is the highest of: 1. Paid-Up Sum Assured less any Partial Withdrawals made during the two (2) years immediately preceding the date of death; or 2. Policy Fund Value as on the date of intimation of death; or 3. 105% of Total Premiums Paid till the date of death less any Partial Withdrawals made during the two (2) years immediately preceding the date of death;
Maturity	Policy Fund Value (including any Milestone Benefits already credited as on date of Paid- up)
Milestone Benefits	No Milestone Benefits will be credited to the Policy Fund Value after the Policy becomes Paid-up
Loyalty Booster	No Loyalty Booster will be credited to the Policy Fund Value.
EmpowHer Booster	No EmpowHer Booster will be credited to the Policy Fund Value.
ECS Payment Benefit	No ECS Payment Benefit will be credited to the Policy Fund Value.
Existing Customers Benefit	No Existing Customers Benefit will be credited to the Policy Fund Value.
Return of Charges	No Return of Charges shall be credited to the Policy Fund.

10) Suicide:

In case of death due to suicide within twelve (12) months from the Date of Inception of the Policy or from the date of Revival of the Policy, as applicable, the Beneficiary/Claimant shall be entitled to the Fund Value as available on the date of intimation of death, provided the Policy is in-force as on the date of death.

Any Charges recovered, other than Fund Management Charges, subsequent to the date of death shall be added back to the Fund Value as available on the date of intimation of death.

11) Termination:

The Policy will terminate on the earliest of the following:

i. On the date the Surrender of the Policy; or
ii. On the date of payment of Discontinued Policy Fund; or
iii. Upon receipt of written intimation about the death of Life Insured along with a supporting document(s) to the satisfaction of the Company; or

iv. If at any time after the Lock-in Period, the Policy Fund Value falls below at least one Annualized Premium; or
v. On Maturity Date of the Policy; or
vi. Date of acceptance of free look request by the Company; or

12) Loan

No loan facility is available under this Policy.

13) Policy alterations / Modifications:

Only a duly authorized officer of the Company has the power to effect changes on the Policy at the request of the Policyholder, subject to the rules of the Company and within the regulatory parameters.

14) Advance Premium:

In case of advance premium;

i. Collection of advance Premium shall be allowed within the same financial year for the Premium due in that financial year. However, where the Premium due in one financial year is being collected in advance in earlier financial year, the Company may collect the same for a maximum period of three (3) months in advance of the Premium Due Date.
ii. The premium so collected in advance shall only be adjusted on the Premium Due Date.

15) Top-up Premiums: Top-up Premiums are not allowed under this Policy.

PART-E

1) <u>Investment Funds:</u>

i. If the Policyholder opts for Self-Managed strategy at inception of the Policy, the Policyholder will be given the option to allocate Premium/s among one or more Investment Fund(s) as per the conditions of the Policy, with a maximum of ten (10) Investment Funds being available.
ii. However, this option will not be available if the Policyholder chooses one of the following Investment strategies:
    a) Dynamic Fund Allocation; or
    b) Systematic Transfer Plan.
iii. The Company holds legal interests in the assets of each Investment Fund and has sole discretion on the investment and the management of each Investment Fund within the defined asset portfolio Allocation as set out below.
iv. The ten (10) Investment Funds currently offered under the Policy by the Company are mentioned below.
v. The investment objective, risk profile an asset allocation of all Funds are as follows:

Sr. No.	Investment Funds	Fund Objectives	Asset Allocation	Risk Rating	Existing/ New Fund
1.	Growth Opportunities Plus Fund SFIN: ULIF01614/12/2009 EGRWTHOPPL130	To provide long term capital appreciation through investing in stocks across all market capitalization ranges (Large, Mid or small)	Debt: NA Money Market Instruments: 0% - 20% Equities: 80% - 100%	High	Existing
2.	Grow Money Plus Fund SFIN: ULIF01214/12/2009 EGROMONYPL130	To provide long term capital appreciation through investing across a diversified high quality equity portfolio.	Debt: NA Money Market Instruments: 0% - 20% Equities: 80% - 100%	High	Existing
3.	Build India Fund SFIN: ULIF01909/02/2010 EBUILDINDA130	To provide long term capital appreciation, through exposure to equity investments in Infrastructure and allied sectors, and by diversifying investments across various sub-sectors of the infrastructure sector.	Debt: 0-20% Money Market Instruments: 0% - 20% Equities: 80% - 100%	High	Existing
4.	Save'n'grow Money Fund SFIN: ULIF00121/08/2006BSAVENGROW130	To provide steady accumulation of income in medium to long term high by investing in high quality debt papers and government securities and a limited opportunity of capital appreciation. This would be more of a defensively managed fund.	Debt: 0-90% Money Market Instruments: 0% - 40% Equities: 0% - 60%	Moderate	Existing
5.	Steady Money Fund SFIN: ULIF00321/08/2006 DSTDYMOENY130	To provide steady accumulation of income in medium to long term by investing in corporate bonds and government securities.	Debt: 60%-100% Money Market Instruments: 0% - 40% Equities: NA	Low	Existing

6.	Safe Money Fund SFIN: ULIF01007/07/2009LSAFEMONEY130	To provide capital protection through investments in low-risk money-market & short-term debt instruments with maturity of one (1) year or lesser.	Debt: 60%-100% Money Market Instruments: 0% - 40% Equities: NA	Low	Existing
7.	Stability Plus Money Fund SFIN: ULIF02322/02/17STAPLUMONF130	To provide long term absolute total return through investing across a diversified high quality debt portfolio.	Debt: 55%-100% Money Market Instruments: 0% - 20% Equities: 0% - 25%	Moderate	Existing
8.	Emerging Equity Fund SFIN: ULIF02507/04/23EMERGINGEQ130	To provide long term capital appreciation through investing in a portfolio of mid cap companies.	Debt: NA Money Market Instruments: 0% - 35% Equities: 65% - 100%	High	Existing
9.	Nifty 5 Year SDL Constant Maturity Index Fund SFIN: ULIF02615/09/2025DSDLCOMATF130	To provide steady accumulation of income in medium to long term by investing in state government securities forming part of Nifty 5 Year SDL Index, subject to tracking error.	Debt: 60%-100% Money Market Instruments: 0% - 40% Equities: NA	Low	New
10.	Nifty 100 Index Fund SFIN: ULIF02715/09/2025ENIFTY100F130	To provide capital appreciation through investment in equities forming part of Nifty 100 Index, subject to tracking error.	Debt: NA Money Market Instruments: 0% - 20% Equities: 80% - 100%	High	New

Note:

- The names of the Investment Funds do not in any manner indicate the quality of the Investment Funds, their future prospects or returns.
- Investments in the Funds are subject to market and other risks and the achievement of the objective of any of the Funds cannot be assured.
- The Company may from time to time change the asset portfolio Allocation in the existing Investment Funds with the approval of the Authority.

vi. The Company will also maintain a Discontinued Policy Fund that comprises of the Fund Values of all the policies that have been discontinued and will earn a minimum guaranteed interest computed at a rate specified by the Authority from time to time and is currently 4% p.a. The Discontinued Policy Fund shall be a Unit Fund with the following asset Allocation:

Assets	Discontinued Policy Fund (SFIN: ULIF02219/01/2011DDISCONTLF130)
Money Market securities	0%-40%
Government securities	60%-100%

The excess income earned in the Discontinued Policy Fund over and above the minimum guaranteed interest rate shall also be apportioned to the Discontinued Policy Fund. The Proceeds of the Discontinued Policy Fund shall be payable only upon completion of Lock-in Period of five (5) Policy Years. However, in case of death of the Life Insured, the Proceeds of the Discontinued Policy Fund shall be payable to the Beneficiary/Claimant.

You can, through a secured login, access the value of policy wise Units held by You in the format as per Form D02 prescribed under IRDAI (Actuarial, Finance and Investment Functions of Insurers) Regulations, 2024.

2) Investment Strategy:

At inception of the Policy, the Policyholder may also choose to allocate the Premium/s in any one of the following three (3) available Investment Strategies as per the conditions of the Policy. If the Policyholder has opted for any one of the Investment Strategies, then the Policyholder cannot opt for the other.

The three (3) Investment Strategies available are as follows:

i. Dynamic Fund Allocation:

I. This strategy can only be chosen at inception of the Policy.
II. In case this strategy is chosen at inception, the 1st Premium and subsequent Premiums will be allocated (after deducting applicable Premium Allocation Charges) to Grow Money Plus Fund.
III. During the last five (5) years of the Policy Term, the Funds will automatically be allocated between Grow Money Plus Fund and Steady Money Fund.
IV. The Company will automatically allocate the monies between Grow Money Plus Fund and Steady Money Fund, from the end of 5th year before Policy Maturity, in a pre-determined manner as described below through switching Units in the respective Fund.

Year	**Existing Funds**	
	Grow Money Plus Fund	Steady Money Fund
(PT-5) yr	80%	20%
(PT-4) yr	75%	25%
(PT-3) yr	70%	30%
(PT-2) yr	50%	50%
(PT-1) yr	0%	100%

V. Dynamic Fund Allocation option may be opted out of during the Policy Term by giving the Company prior written request, in which case this option will cease to be effective from the Policy Anniversary following the receipt of the written request. In such instances, the existing Funds shall continue to remain in the vested Funds and new Premium amounts will be allocated basis the Funds and proportion chosen at inception i.e. 100% in the Grow Money Plus Fund, unless specified otherwise by the Policyholder in the written request.
VI. Once the Policyholder has opted out, then the Policyholder shall not be permitted to recommence the Dynamic Fund Allocation investment strategy option during the Policy Term.
VII. While Dynamic Fund Allocation is operational, Switching in or out of the Steady Money Fund will cause the Dynamic Fund Allocation to cease. Dynamic Fund Allocation will continue to be active in Reduced Paid-Up status.
VIII. The Company will not levy any Switching Charge for the operation of the Dynamic Fund Allocation investment strategy.

ii. Systematic Transfer Plan:

I. This investment strategy can only be chosen at inception of the Policy.
II. If the Systematic Transfer Plan is opted, then the Company will automatically allocate the Premiums received (after deducting applicable Premium Allocation Charges) to purchase Units in the Safe Money Fund. On each subsequent monthly anniversary, the Fund Value of [1/ (13 less month number in the Policy Year)] of the Units available at the beginning of the month shall be switched to the Grow Money Plus Fund by cancelling Units in the Safe Money Fund, and purchasing Units in the Grow Money Plus Fund till the availability of Units in Safe Money Fund.

For instance:
- Policy month 1: 1/ (13-1) = 1/12th of the Units to be switched
- Policy month 2: 1/ (13-2) = 1/11th of the Units to be switched
- Policy month 3: 1/ (13-3) = 1/10th of the Units to be switched
- Policy month 4: 1/ (13-4) = 1/9th of the Units to be switched
- Policy month 5: 1/ (13-5) = 1/8th of the Units to be switched
- Policy month 6: 1/ (13-6) = 1/7th of the Units to be switched
- Policy month 7: 1/ (13-7) = 1/6th of the Units to be switched
- Policy month 8: 1/ (13-8) = 1/5th of the Units to be switched
- Policy month 9: 1/ (13-9) = 1/4th of the Units to be switched

- Policy month 10: 1/ (13-10) = 1/3rd of the Units to be switched
- Policy month 11: 1/ (13-11) = 1/2 of the Units to be switched
- Policy month 12: 1/ (13- 12) = balance Units to be switched

III. The Company will not levy any Switching Charges for the operation of the Systematic Transfer Plan.
IV. The Policyholder shall not be permitted to make Partial Withdrawals from the Safe Money Fund during the period when this investment strategy option is in force.
V. The Policyholder may opt out of the Systematic Transfer Plan during the Policy Term by giving the Company a prior written notice, in which case this option will cease to be effective from the next monthly Policy Anniversary following the receipt of the request.
VI. While Systematic Transfer Plan is operational, the Policyholder shall not be allowed to change the Fund choice.
VII. This investment strategy can be availed only on annual Premium payment mode and will be active during the Premium Payment Term chosen by the Policyholder provided due Premium has been paid.
VIII. If due Premium is not received during the Grace Period, Systematic Transfer Plan will cease to be operational.
IX. The Premiums received after the expiry of Grace Period will be allocated entirely to the Grow Money Plus Fund unless otherwise specified by the Policyholder.
X. If the Policyholder gives a request for Premium Redirection or to change to monthly Premium payment mode then such request will make Systematic Transfer Plan ineffective.
XI. Once Systematic Transfer Plan ceases to exist, the future premiums will continue to be invested in the Grow Money Plus Fund chosen at the time of opting Systematic Transfer Plan unless otherwise specified by the Policyholder.

iii. Self-Managed :

I. This strategy can only be chosen at inception of the Policy.
II. This strategy enables the Policyholder to manage their savings actively.
III. Under this strategy, the Policyholder can choose to save their monies in any of the Funds listed above in proportion of their choice.
IV. The Policyholder can switch monies amongst the Funds using the Switch option.

3) <u>Investment Fund addition:</u>

The Company may from time to time create and add new Investment Funds with different fees/ Charges with the approval of the Authority and consequently new Investment Funds will be made available to the Policyholder. All provisions of the Policy will apply to the additional Investment Funds unless stated otherwise.

4) <u>Investment Fund closure:</u>

i. The Company reserves the right to close any Investment Fund at any time by giving a three (3) month written notice of its intention to close an Investment Fund and from the date of such closure the Company will cease to create or cancel Units in the said Investment Fund (‘**Closing Investment Fund’**).
ii. Closure of an Investment Fund shall be subject to prior approval of the Authority and will follow the guidelines issued by the Authority from time to time. The Company will require the Policyholder who has invested in the Closing Investment Fund to replace it with another Investment Fund/s (‘**Replacing Investment Fund’**) before the date specified in the written notice of the Company. Upon receiving the notification from the Policyholder, Units in the Closing Investment Fund allocated to this Policy will be cancelled on the last Valuation Date of the Closing Investment Fund. The Company will replace the Closing Investment Fund with the Replacing Investment Fund/s chosen by the Policyholder, by creating Units in the Replacing Investment Fund/s, with proceeds from the cancellation of Units in the Closing Investment Fund on the last Valuation Date of the Closing Investment Fund.
iii. If the Company has not received valid notification from the Policyholder for modification of the Investment Fund Allocation by the time of closure of the Investment Fund, the Company will:
   I. Switch the Funds from the Closing Investment Fund to the ‘Stability Plus Money Fund’. This Switch will be free of Charge.
   II. In case of closure of Nifty 100 Index Fund, the policyholder will be given an option to opt out or switch to Grow Money Plus Fund (Active Equity Fund) which has the higher risk profile and higher FMC as compared to Nifty 100 Index Fund. This switch will be free of charge.
   III. In case of closure of Nifty 5 Year SDL Constant Maturity Index Fund, the Policyholder will be given an option to opt out or switch to Stability Plus Money Fund (Active Debt Fund) which has lower FMC with but higher risk profile as compared to Nifty 5 Year SDL Constant Maturity Index Fund. This switch will be free of charge.

IV. In case of closure of Emerging Equity Fund, the Company will switch the funds to Growth Opportunities Plus Fund which has a similar risk profile as that of Emerging Equity Fund. This switch will be free of charge.

V. Change the Investment Fund Allocation in such a way that the percentage allocated to the Closing Investment Fund is added to the percentage allocated to the 'Grow Money Plus Fund', 'Stability Plus Money Fund', 'Growth Opportunities Plus Fund', as the case may be.

5) Switch amongst Investment Funds:

i. The Policyholder can apply for Switch of the Investment Fund/s from one Investment Fund to another through a Switch Application Form specified by the Company. The facility of Switch would be subject to the administrative rules of the Company, existing at the time of the Switch application and will be applicable to all Premium Payment Term options.

ii. Switch of Funds will be effected at a Unit Price declared on the Business Day, Your Switch application is received and accepted by the Company before 3.00 p.m. and on the next Business Day's Unit Price declared if the application is received and accepted at the Company after 3.00 p.m.

iii. The Policyholder is entitled to make any number of Switches in a Policy Year free of charge.

iv. The minimum investment in any allocated Fund should not be less than 5% of the Fund Value at the time of Allocation, However, there is no minimum amount of transaction.

6) Risks of investments:

i. Investments in any of the Investment Funds are subject to the following, amongst other risks:
   I. The Unit Price of any Investment Fund may increase or decrease as per the performance of the financial markets.
   II. The past performance of these or other Investment Funds of the Company do not indicate the future performance of these Investment Funds.

ii. The investment risk in investment portfolio is borne by the Policyholder.

7) Policy Charges

The Charges applicable under this Policy are mentioned below:

i. Premium Allocation Charge:

This charge is a percentage of the Premium appropriated towards charges from the Premium received. The Premium Allocation Charge will be levied by the Company as a percentage of Annualized Premium.

The Premium Allocation Charge is as per the table below:

Plan Option	Plan Option 1: Wealth Affinity Plan		Plan Option 2: Wealth Plan	
Policy Year	**Single Pay**	**Other than Single Pay**	**Single Pay**	**Other than Single Pay**
1	2%	5.5%	NIL	
2	0%	5.0%		
3	0%	4.5%		
4	0%	4.0%		
5	0%	3.5%		
6+	0%	0.0%		

The balance amount after deduction of Premium Allocation Charge will be utilized to purchase Units for the Policy in accordance with the Fund Allocation mentioned by the Policyholder. These charges are exclusive of taxes.

ii. Policy Administration Charge:

A monthly charge as a percentage of Premiums chosen at inception of the Policy will be deducted by cancellation of Units at the prevailing Unit Price on the corresponding Policy date in each Policy month.

The monthly Policy Administration Charge as a percentage of Annualized Premium is as follows –

Plan Option	**Plan Option 1: Wealth Affinity Plan**		**Plan Option 2:Wealth Plan (Annualized Premium < Rs. 50,00,000/-)**		**Wealth (Annualized Premium>= Rs. 50,00,000/-)**	
Policy Year	**Single Pay**	**Other than Single Pay**	**Single Pay**	**Other than Single Pay**	**Single Pay**	**Other than Single Pay**
1 to 5	0.14%	0.125%	0.195%	0.51%	NIL	
6 to 10	0.01%	0.125%	0.010%	0.26%		
11+	0.01%	0.125%	0.010%	0.10%		

The Policy Administration Charge is subject to a maximum limit of Rs.500/- per month. These charges are exclusive of taxes.

iii. Fund Management Charge (FMC):

This is a charge levied as a percentage of the value of assets and shall be appropriated by adjusting the Net Asset Value (NAV). This is a charge levied at the time of computation of NAV, which is usually done on daily basis. The FMC will be deducted from the assets of each Fund and will be reflected in the Unit Price of the Fund. The Fund Management Charge is as per the table below:

Fund	**Fund Management Charge (as a % of Fund Value)**
Growth Opportunities Plus Fund	1.35% p.a.
Grow Money Plus Fund	1.35% p.a.
Build India Fund	1.35% p.a.
Emerging Equity Fund	1.35% p.a.
Save'n'Grow Money Fund	1.25% p.a.
Steady Money Fund	1.00% p.a.
Safe Money Fund	1.00% p.a.
Nifty 100 Index fund	0.90% p.a.
Nifty 5 Year SDL Constant Maturity Index Fund	0.90% p.a.
Stability Plus Money Fund	0.80% p.a.
Discontinued Policy Fund	0.50% p.a.

The FMC for a Fund may be revised as required by the Authority.

The Fund Management Charges for Discontinued Policy Fund will not exceed the maximum cap prescribed by the Authority which is currently 0.50% p.a.

These charges are exclusive of taxes.

iv. Mortality Charges:

This charge is levied to provide the life insurance benefit under this Policy. This charge is applied on the Sum at Risk (as defined below) and is deducted proportionately by cancellation of Units on a monthly basis. The annual charge per thousand of Sum at Risk will be based on the attained Age of the Life Insured.

Sum at Risk is defined as follows:

a) **If the Policy is in in-force status:** Sum at Risk = Higher of (Death Benefit - Fund Value, 0), where the Death Benefit is as defined in **Part-C** of this Policy Document.

b) **If the Policy is in Paid-up status**: Sum at Risk = Higher of (Paid-up Death Benefit - Fund Value, 0), where the Paid-up Death Benefit is as defined in **Part-D** of this Policy Document.

Mortality Charges will be deducted from the Policy Fund Value on the Policy date in each Policy month. This charge is applied on per 1000 Sum at Risk. The rates of Mortality Charges are guaranteed to remain the same during the Policy Term. These charges are exclusive of taxes. The Mortality Charges applicable under this Policy are as mentioned in **Annexure-IV**.

The Mortality Charge is provided for male life in **Annexure-IV.** In case of female life, a three (3) year Age set back would be applied on the male rates. In case of a transgender life, the rates will be same as that for a male life. Further, the female rate for the first three (3) entry Ages for each benefit option shall be set equal to the corresponding male rate at the minimum entry Age. The Mortality Charge for female lives for Ages 0 to 3 is equal to the Mortality Charge for Age 0 years of a male life.

v. Discontinuance Charge:

Discontinuance Charge is levied on the Unit fund when the Policyholder opts for complete Surrender/Discontinuance of the contract. The charge will be applicable basis the Policy Year of Surrender/Discontinuance.

The charges levied on the date of Discontinuance [as a percentage of Fund Value (FV) or one Annualized Premium (AP) or a percentage of Single Premium(SP)] shall not exceed the following limits:

Limited/Regular Pay:

Where the Policy is discontinued during the Policy Year	Charges for the policies having Annualized Premium up to Rs.50,000/-	Charges for the policies having Annualized Premium above Rs.50,000/-
1	Lower of a) 20% of Annualized Premium b) 20% of Fund Value c) Rs. 3,000/-	Lower of a) 6% of Annualized Premium b) 6% of Fund Value c) Rs.6,000/-
2	Lower of a) 15% of Annualized Premium b) 15% of Fund Value c) Rs.2,000/-	Lower of a) 4% of Annualized Premium b) 4% of Fund Value c) Rs.5,000/-
3	Lower of a) 10% of Annualized Premium b) 10% of Fund Value c) Rs.1,500	Lower of a) 3% of Annualized Premium b) 3% of Fund Value c) Rs.4,000/-
4	Lower of a) 5% of Annualized Premium b) 5% of Fund Value c) Rs.1,000/-	Lower of a) 2% of Annualized Premium b) 2% of Fund Value c) Rs.2,000/-
5 and onwards	NIL	NIL

Single Pay:

Where the Policy is discontinued during the Policy Year	Charges for the policies having Single Premium up to Rs.3,00,000/-	Charges for the policies having Single Premium above Rs. 3,00,000/-
1	Lower of a) 2% of Single Premium b) 2% of Fund Value c) Rs. 3,000	Lower of a) 1% of Single Premium b) 1% of Fund Value c) Rs. 6,000

2	Lower of a) 1.5% of Single Premium b) 1.5% of Fund Value c) Rs. 2,000	Lower of a) 0.7% of Single Premium b) 0.7% of Fund Value c) Rs. 5,000
3	Lower of a) 1% of Single Premium b) 1% of Fund Value c) Rs. 1,500	Lower of a) 0.5% of Single Premium b) 0.5% of Fund Value c) Rs. 4,000
4	Lower of a) 0.5% of Single Premium b) 0.5% of Fund Value c) Rs. 1,000	Lower of a) 0.35% of Single Premium b) 0.35% of Fund Value c) Rs. 2,000
5 and onwards	NIL	NIL

vi. **Partial Withdrawal Charge:**
NIL

vii. **Switching Charge:**
NIL

8) **Force Majeure**

i. 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 thirty (30) days until the Company is certain that the valuation of SFIN can be resumed.
ii. The Company shall inform the Authority of such deferment in the valuation of assets. During the continuance of the force majeure events, all requests for servicing the Policy including Policy related payment shall be kept in abeyance.
iii. The Company shall continue to invest as per the Fund mandates submitted. However, the Company shall reserve its right to change the exposure of all or any part of the Fund to Money Market Instruments in circumstances mentioned under points (i) and (ii) above. The exposure to of the Fund as per the Fund mandates submitted shall be reinstated within reasonable timelines once the force majeure situation ends.
iv. Few examples of circumstances as mentioned above are:

I. 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.
II. When, as a result of political, economic, monetary or any circumstances which are not in the control of the insurer, the disposal of the assets of the Fund would be 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 Insurer.

v. In such an event, an intimation of such force majeure event shall be uploaded on the Company’s website for information.

PART-F

1) Fraud and Misstatement

Fraud/ Misstatement would be dealt with in accordance with provisions of Section 45 of the Insurance Act 1938 as amended from time to time and any other applicable Regulations/Circulars issued by the Regulatory Authority. **[A Leaflet containing the simplified version of the provisions of Section 45 is enclosed in Annexure-III for reference]**

2) Easy ways of claim intimation

The Company would require the following primary documents in support of a claim at the stage of claim intimation under the Policy:

For Maturity Benefit: The Original Policy (entire booklet) Claimant's Statement, KYC Documents (PAN is mandatory) and personalized cancelled cheque of the Claimant or Beneficiary.

For Death Benefit (other than death due to Accident/natural death): The original Policy (entire booklet), Copy of Death Certificate of the Life Insured, Claimant's Statement, PAN & KYC Documents and personalized cancelled cheque of the Claimant or Beneficiary and Copy of medical records pertaining to treatment taken by the Life Insured such as admission notes, discharge / death summary, test report etc. available if any.

For Death Benefit (death due to Accident/Unnatural death): First Information Report (FIR) and Post Mortem report is required in addition to the documents required for Death Benefit (other than death due to Accident/ natural death) as mentioned above.

The Company is entitled to call for additional documents, if in the opinion of the Company such additional documents are warranted to process the claim.

Easy ways of claim intimation

- Walk in to your nearest Bharti-AXA Life Branch
- Call us Toll Free: 1800-102-4444* from 9:00 AM to 7:00 PM, Monday to Saturday
- E-mail us: lifeclaims@bhartiaxa.com
- Have us call you*
- Submit online claim through our website link: https://www.bhartiaxa.com/claims

*Claims intimated through these modes will be considered as verbal intimation. Claim will be formally registered only when written intimation is received at branch or directly to Claims team at Service Office.

3) Mis-statement of Age and Gender

i. If the correct Age of the Life Insured is different from that mentioned in the Proposal Form, the Company will assess the eligibility of the Life Insured for the Policy in accordance with the correct Age of the Life Insured.
ii. If on the basis of correct Age, the Life Insured is not eligible for the Policy, the Policy shall be cancelled immediately by refunding the Premium received by the Company under the Policy as per the provisions of Section 45 of Insurance Act 1938, as amended from time to time.
iii. If the Life Insured is eligible for the Policy as per his / her correct Age, then the Company will calculate the applicable Charges basis the correct Age of Life Insured and will accordingly adjust the Policy Fund Value / coverage Sum Assured.

4) Vesting on Attaining Majority:

i. Where the Policy has been issued on the life of a Minor, the Policy shall automatically vest on him/her with effect from the date of completion of 18 (Eighteen) years of Age and the Life Insured will become the new Policyholder from such date, subject to Assignment, if any, and the Company shall thereafter enter into all correspondence directly with him/her.

ii. For Minor lives, the risk commences immediately on the Date of Inception of Policy. For major lives, Policyholder cannot be different from Life Insured.

5) Assignment and Nomination:

Assignment: Assignment is allowed under this plan as per 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–I for reference]. The notice of Assignment should be submitted for registration to the office of the Company, where the Policy is serviced.

Nomination: Nomination is allowed as per 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–II for reference].** The notice of Nomination or change of Nomination should be submitted for registration to the office of the Company, where the Policy is serviced. In registering Nomination, the Company does not accept any responsibility or express any opinion as to its validity or legal effect.

6) **<u>Issuance of Duplicate Policy</u>*:***

The Policyholder can request for a duplicate copy of the Policy at Bharti AXA Life Insurance Company Limited offices. While making an application for duplicate Policy the Policyholder is required to submit a notarized original indemnity bond. No additional charges may be applicable for issuance of the duplicate Policy.

7) **<u>Incorrect information and Non-Disclosure:</u>**

The Policyholder and the Life Insured under the Policy have an obligation to disclose every fact material for assessment of the risk in connection with issuing the Policy.

In case of fraud and misstatement of material facts, the Policy contract shall be treated in accordance with the Section 45 of the Insurance Act, 1938 as amended from time to time.

8) **<u>Taxation:</u>**

The tax benefits, if any, on the Policy may be available as per the prevailing provisions of the tax laws, as amended from time to time in India. If required by the relevant legislations prevailing from time to time, the Company will withhold taxes from the benefits payable under the Policy. The Company reserves the right to recover statutory levies including applicable taxes by way of adjustment of the Premiums paid by the Policyholder.

9) **<u>Notices:</u>**

Any notice to be given to the Policyholder under the Policy will be issued by post or electronic mail transmission to the latest address/es/email of the Policyholder available in the records of the Company.

Any change in the address of the Policyholder should be informed to the Company so as to ensure timely communication of notices and to the correct address.

Kindly refer to **Part-G** of the Policy for intimating about the change in existing details.

10) **<u>Currency and Place of Payment:</u>**

All payments to or by the Company will be in Indian rupees and shall be in accordance with the prevailing Exchange Control regulations and other relevant laws in force in India, as amended from time to time.

11) **<u>Mode of communication:</u>**

The Company and the Policyholder may exchange communications pertaining to the Policy either through normal correspondence or through electronic mail and the Company shall be within its right to seek clarifications / to carry out the mandates of the Policyholder on merits in accordance with such communications. While accepting requests / mandate from the Policyholder through electronic mail, the Company may stipulate such conditions as deemed fit to give effect to and comply with the provisions of Information Technology Act 2000, as amended from time to time, and/ or such other applicable laws in force from time to time.

12) **<u>Governing Laws & Jurisdiction:</u>**

The terms and conditions of the Policy Document shall be governed by and shall be subject to the laws of India, as amended from time to time. The parties shall submit themselves to the jurisdiction of the competent court/s of law in India in respect of all matters and disputes which may arise out of in connection with the Policy Document and / or relating to the Policy.

13) **<u>Legislative Change:</u>**

The terms and conditions under this Policy are subject to variation in accordance with the relevant legislation & Regulations.

14) <u>Term used and its meaning:</u>

If a particular term is not defined or otherwise articulated either in the Policy Document or under the Policy, endeavour shall be to impart the natural meaning to the said term in the context in which it is used.

PART-G

1) Customer Service

You can seek clarification or assistance on the Policy from the following:

- The nearest branch office
- The Advisor/Agent/Intermediary through whom the Policy was bought
- The Customer Service Representative of the Company at toll free no. 1800 102 4444
- SMS "SERVICE" to 56677
- **WhatsApp** – Our WhatsApp BOT "Uttara" caters to policy services digitally. Simply send "Hi" on 022-48815768 to start a chat.
- **Mobile App / Customer portal** – access host of digital DIY (Do it Yourself) services on https://bhartiaxa.com/customer-service-login/?qr=true
- Email: service@bhartiaxa.com
- Mail to: Customer Service/ Policy Servicing Department
  Bharti AXA Life Insurance Company Ltd.
  Spectrum tower, 3rd Floor,
  Malad link road, Malad (west),
  Mumbai 400064. Maharashtra.
- **Turn Around Time (TAT)**

  All servicing TATs can be accessed on - https://www.bhartiaxa.com/service-tats

2) Grievance Redressal Procedure

Step 1: Inform Us about Your grievance

In case You have any grievance, You may approach our Grievance Redressal Cell at any of the below-mentioned helplines:

- Lodge Your complaint online at www.bhartiaxa.com
- Call Us at our toll free no. 1800 102 4444 from 9:00 AM to 7:00 PM, Monday to Saturday
- Email Us at complaints.unit@bhartiaxa.com
- Write to Us at:

Registered Office:	**Grievance Redressal Cell:**
Bharti AXA Life Insurance Company Ltd. Unit No. 1902, 19th Floor, Parinee Crescenzo 'G' Block, Bandra Kurla Complex, BKC Road, Behind MCA Ground, Bandra East Mumbai -400051, Maharashtra	Bharti AXA Life Insurance Company Ltd. Spectrum Towers, 3rd Floor, Malad Link Road, Malad Mumbai - 400064

- Visit Our nearest branch and meet Our Grievance Officer who will assist You to redress Your grievance/ lodge Your complaint.

Step 2: Tell Us if you are not satisfied

In case You are not satisfied with the decision provided or if You have not received any response post completion of fourteen (14) days, You may write to Head - Customer Service for resolution at the above-mentioned address or email at: head.customerservice@bhartiaxa.com:

You are requested to inform Us about your concern (if any) within eight (8) weeks of receipt of resolution as stated above, failing which it will be construed that the complaint is satisfactorily resolved.

Step 3: If You are not satisfied with the resolution provided by the Company

Where the redressal provided by the Company is not satisfactory despite the escalation above, You may represent the case to the Ombudsman for Redressal of the grievance, if it pertains to the following:

- Delay in settlement of claim;
- Partial or total rejection of claim;
- Dispute with regard to Premium;
- Misrepresentation of Policy terms and conditions;
- Legal construction of the Policy in so far as dispute related to claim;
- Grievance relating to Policy servicing;

- Issuance of Policy which is not in conformity with Proposal Form;
- Non- issuance of your insurance document and
- 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 contract, in so far as they relate to issues mentioned hereinabove.

The complaint should be made in writing duly signed by the complainant or through his legal heirs, Nominee(s)/legal heirs in case of death of the Nominee(s)or Assignee, and shall state clearly the name and address of the complainant, the name of the branch or office of the insurer against whom the complaint is made, the facts giving rise to the complaint, supported by documents, the nature and extent of the loss caused to the complainant and the relief sought from the Insurance Ombudsman. As per provision of Rule 14 of the Insurance Ombudsman Rules, 2017, the complaint to the Ombudsman can be made, within a period of one (1) year provided it is not simultaneously under any litigation:

• Only if the grievance has been rejected by the Grievance Redressal Machinery of the Insurer; or
• the complainant had not received any reply within a period of one month after the Insurer received his written representation; or
• the complainant is not satisfied with the reply given to him by the insurer.

If You are not satisfied with the response or do not receive a response from Us within fourteen (14) days, You may approach the Grievance Cell of the Insurance Regulatory and Development Authority of India (IRDAI) on the following contact details:

IRDAI Grievance Call Centre (IGCC) TOLL FREE NO: 155255 or 18004254732
Email ID: complaints@irdai.gov.in

You can also register your complaint online at https://bimabharosa.irdai.gov.in/
Address for communication for complaints by paper:
General Manager,
Policyholders Protection and Grievance Redressal Department- Grievance Redressal Cell,
Insurance Regulatory and Development Authority of India
Sy no.115/1, Financial District,
Nanakramguda, Gachibowli, Hyderabad – 500032.

Section 41 of the Insurance Act, 1938, as amended from time to time: Prohibition of rebates
(1) "No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the Policy, nor shall any person taking out or renewing or continuing a Policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectus or tables of the insurer:
Provided that acceptance by an insurance agent of commission in connection with a policy of life insurance taken out by himself on his own life shall not be deemed to be acceptance of a rebate of premium within the meaning of this sub-section if at the time of such acceptance the insurance agent satisfies the prescribed conditions establishing that he is a bona fide insurance agent employed by the insurer.

(2) Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakh rupees."

Rule 13 of the Insurance Ombudsman Rules, 2017 (as amended from time to time): Duties and Powers of Insurance Ombudsman

1) The Ombudsman shall receive and consider complaints or disputes relating to—

   a) Delay in settlement of claims, beyond the time specified in the regulations, framed under the Insurance Regulatory and Development Authority of India Act, 1999;
   b) Any partial or total repudiation of claims by the Company;
   c) Disputes over premium paid or payable in terms of insurance policy;
   d) Misrepresentation of policy terms and conditions at any time in the policy document or policy contract;
   e) Legal construction of insurance policies in so far as the dispute relates to claim;
   f) Policy servicing related grievances against insurers and their agents and intermediaries;
   g) issuance of life insurance policy, general insurance policy including health insurance policy which is not in conformity with the proposal form submitted by the proposer;

h) Non-issuance of insurance policy after receipt of premium in life insurance; and
i) any other matter resulting from the violation of provisions of the Insurance Act, 1938, as amended from time to time, or the regulations, circulars, guidelines or instructions issued by the IRDAI from time to time or the terms and conditions of the policy contract, in so far as they relate to issues mentioned at clauses (a) to (f).

2) The Ombudsman shall act as counsellor and mediator relating to matters specified in sub-rule (1) provided there is written consent of the parties to the dispute.

3) The Ombudsman shall be precluded from handling any matter if he is an interested party or having conflict of interest.

4) The Central Government or as the case may be, the IRDAI may, at any time refer any complaint or dispute relating to insurance matters specified in sub-rule (1), to the Insurance Ombudsman and such complaint or dispute shall be entertained by the Insurance Ombudsman and be dealt with as if it is a complaint made under Clause provided herein below.

Rule 14 of the Insurance Ombudsman Rules, 2017(as amended from time to time): Manner in which complaint to be made

1) Any person who has a grievance against the Company, may himself or through his legal heirs, nominee or assignee, make a complaint in writing to the Insurance Ombudsman within whose territorial jurisdiction the branch or office of the Company complained against or the residential address or place of residence of the complainant is located.

2) The complaint shall be in writing, duly signed, or made by way of electronic mail or online through the website of the Council for Insurance Ombudsmen, by the complainant or through his legal heirs, nominee or assignee and shall state clearly the name and address of the complainant, the name of the branch or office of the Company against whom the complaint is made, the facts giving rise to the complaint, supported by documents, the nature and extent of the loss caused to the complainant and the relief sought from the Insurance Ombudsman.

3) No complaint to the Insurance Ombudsman shall lie unless—
   a. the complainant makes a written representation to the Company named in the complaint and—
      i. either the Company had rejected the complaint; or
      ii. the complainant had not received any reply within a period of one month after the Company received his representation; or
      iii. the complainant is not satisfied with the reply given to him by the Company;
   b. The complaint is made within one year—
      i. after the order of the Company rejecting the representation is received; or
      ii. after receipt of decision of the Company which is not to the satisfaction of the complainant;
      iii. after expiry of a period of one month from the date of sending the written representation to the Company if the Company fails to furnish reply to the complainant.

4) The Ombudsman shall be empowered to condone the delay in such cases as he may consider necessary, after calling for objections of the Company against the proposed condonation and after recording reasons for condoning the delay and in case the delay is condoned, the date of condonation of delay shall be deemed to be the date of filing of the complaint, for further proceedings under these rules.

5) No complaint before the Insurance Ombudsman shall be maintainable on the same subject matter on which proceedings are pending before or disposed of by any court or consumer forum or arbitrator.

List of Ombudsman
(For the updated list You may refer to IRDAI website)

Address & Contact Details of Ombudsman Centers

Council for Insurance Ombudsmen (Monitoring Body for Offices of Insurance Ombudsman)
3rd Floor, Jeevan Seva Annexe, S V Road, Santacruz (West), Mumbai – 400054.
Tel no: 022-69038800/69038812. Email id: inscoun@cioins.co.in website: www.cioins.co.in

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If you have a grievance, approach the grievance cell of Insurance Company first. If complaint is not resolved/ not satisfied/not responded for 30(Thirty) days then You can approach The Office of the Insurance Ombudsman (Bimalokpal)

Please visit our website for details to lodge complaint with Ombudsman.

Office of the Ombudsman	Contact Details	Areas of Jurisdiction
AHMEDABAD Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th Floor, Tilak Marg, Relief Road, Ahmedabad- 380 001	Tel: 079 - 25501201/02 Email: oio.ahmedabad@cioins.co.in	Gujrat, Dadra & Nagar Haveli, Daman & Diu
BENGALURU Office of the Insurance Ombudsman, Jeewan 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: oio.bengaluru@cioins.co.in	Karnataka
BHOPAL Office of the Insurance Ombudsman, 1st Floor of LIC Zonal Office Building, Jeevan Shikha, 60-B, Hoshangabad Road, (Opp Gayatri Mandir) Bhopal 462011	Tel.: 0755 - 2769201 / 2769202 / 2769203 Email: oio.bhopal@cioins.co.in	Madhya Pradesh, Chhattisgarh
BHUBANESWAR Office of the Insurance Ombudsman, 62, Forest Park, BHUBANESWAR-751 009	Tel.: 0674 - 2596461 /2596455 / 2596429/2596003 Email: oio.bhubaneswar@cioins.co.in	Odisha
CHANDIGARH Office of the Insurance Ombudsman, Jeevan Deep Building SCO 20-27, Ground Floor Sector- 17 A, Chandigarh – 160 017.	Tel.: 0172-2706468 Email: oio.chandigarh@cioins.co.in	Punjab, Haryana (excluding Gurugram, Faridabad, Sonepat and Bahadurgarh), Himachal Pradesh, Union Territories of Jammu & Kashmir, Ladakh & Chandigarh
CHENNAI	Tel.: 044 - 24333668 / 24333678	Tamil Nadu, Puducherry Town

Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI-600 018.	Email: oio.chennai@cioins.co.in	and Karaikal (which are part of Puducherry)
DELHI Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Bldg.,Asaf Ali Road, NEW DELHI-110 002.	Tel.: 011 - 46013992/23213504/23232481 Email: oio.delhi@cioins.co.in	Delhi & following Districts of Haryana - Gurugram, Faridabad, Sonepat & Bahadurgarh
GUWAHATI Office of the Insurance Ombudsman, "Jeevan Nivesh", 5th Floor, Nr. Paanbazar over bridge, S.S. Road GUWAHATI- 781 001 (ASSAM)	Tel.: 0361 – 2632204 / 2602205/ 2631307 Email: oio.guwahati@cioins.co.in	Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.
HYDERABAD. Office of the Insurance Ombudsman, 6-2-46, 1st floor, "Moin Court", Lane Opp. Hyundai Showroom, A. C. Guards, Lakdi-Ka-Pool, HYDERABAD-500 004.	Tel.: 040- 23312122 / 23376991 / 23376599 / 23328709 / 23325325 Email: oio.hyderabad@cioins.co.in	Andhra Pradesh, Telangana, Yanam and part of Union Territory of Puducherry
JAIPUR Office of the Insurance Ombudsman, Jeevan Nidhi- II Bldg., Ground Floor, Bhawani Singh Marg, JAIPUR – 302 005.	Tel.: 0141 - 2740363 Email: oio.jaipur@cioins.co.in	Rajasthan
ERNAKULAM / KOCHI Office of the Insurance Ombudsman, 10th Floor, Jeevan Prakash, LIC Building, Opp to Maharaja's College Ground, M.G.Road, Kochi - 682 011.	Tel.: 0484 – 2358759 Email: oio.ernakulam@cioins.co.in	Kerala, Lakshadweep, Mahe-a part of UT of Puducherry
KOLKATA Office of the Insurance Ombudsman, Hindustan Building, Annexe, 4th Floor, 4, CR Avenue KOLKATA- 700 072	Tel.: 033 - 22124339 / 22124341 Email: oio.kolkata@cioins.co.in	West Bengal, Sikkim, Andaman & Nicobar Islands
LUCKNOW Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, LUCKNOW-226 001.	Tel.: 0522 - 4002082 / 3500613 Email: oio.lucknow@cioins.co.in	Districts of Uttar Pradesh: Lalitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhabdra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich,

		Barabanki, Raebareli,Sravasti, Gonda, Faizabad, Amethi Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur Deoria, Mau, Ghazipur Chandauli, Ballia Sidharathnagar.
MUMBAI Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe,S.V. Road, Santacruz(W), MUMBAI-400 054.	Tel.: 022 - 69038800/27/29/31/32/33 Email: oio.mumbai@cioins.co.in	Wards covered: A,B,C,D,E,F/N,F/S,G/N,G/S,H/E,H/W,K/E,K/W,L,P/N,P/S,R/C, R/N,R/S. Rest of the wards in Mumbai – i.e M/E, M/W, N , S and T covered under Office of Insurance Ombudsman Thane and areas of Navi Mumbai
NOIDA Office of the Insurance Ombudsman, Bhagwan Sahai Palace, 4th Floor, Main Road, Naya Bans, Sector-15, Distt. Gautam Buddh Nagar U.P- 201301	Tel.: 0120- 2514252 / 2514253 Email: oio.noida@cioins.co.in	State of Uttarakhand l and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kannauj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautam Buddhnagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.
PUNE Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 3rd Floor, C. T.S No's 195 to198, N.C. Kelkar Road, Narayan Peth, PUNE – 411030.	Tel.: 020 - 24471175 Email: oio.pune@cioins.co.in	State of Goa and State of Maharashtra excluding areas of Navi Mumbai, Thane district, Palghar District, Raigad district & Mumbai Metropolitan Region
PATNA Office of the Insurance Ombudsman, 2nd Floor, Lalit Bhawan, Bailey Road, Patna - 800 001	Tel.: 0612- 2547068 Email id: oio.patna@cioins.co.in	Bihar, Jharkhand.
THANE 2nd Floor, Jeevan Chintamani Building, Vasantrao Naik Mahamarg, Thane (West)	Tel.: 022-20812868/69 Email id: oio.thane@cioins.co.in	Area of Navi Mumbai, Thane District, Raigad District, Palghar District and wards of Mumbai, M/East, M/West, N, S and T.

BEWARE OF SPURIOUS PHONE CALLS AND FICTITOUS//FRAUDULENT OFFERS!

IRDAI is not involved in activities like selling insurance policies, announcing bonus or investment of premiums. Public receiving such phone calls are requested to lodge a police complaint.

Annexure I: Section 38 - 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 from time to time and any other applicable Regulations/Circulars issued by the Regulatory Authority. A simplified version of the provisions of Section 38 is provided below:

01. This Policy may be transferred/assigned, wholly or in part, with or without consideration.
02. An Assignment may be effected in a Policy by an endorsement upon the Policy itself or by a separate instrument under notice to the Insurer.
03. 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.
04. The assignment must be signed by the transferor or assignor or duly authorized agent and attested by at least one witness.
05. The transfer of assignment shall not be operative as against an insurer until a notice in writing of the transfer or assignment and either the said endorsement or instrument itself or copy there of certified to be correct by both transferor and transferee or their duly authorized agents have been delivered to the insurer.
06. Fee for granting a written acknowledgement of the receipt of notice of assignment or transfer assignment may require to be paid to the insurer which shall not exceed Rs.100/- (Rupees One hundred only) or as may be specified by the Regulatory Authority.
07. 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 insurer of duly receiving the notice.
08. If the insurer maintains one or more places of business, such notices shall be delivered only at the place where the Policy is being serviced.
09. The insurer 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 bonafide; or
    b. not in the interest of the Policyholder; or
    c. not in public interest; or
    d. is for the purpose of trading of the insurance Policy.
10. Before refusing to act upon endorsement, the Insurer 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 Insurer, any person aggrieved by the refusal may prefer a claim to IRDAI within 30 days of receipt of the refusal letter from the Insurer.
12. The priority of claims of persons interested in an insurance Policy would depend on the date on which the notices of assignment or transfer is delivered to the insurer; 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 Authority.
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 insured OR
        ii. the insured surviving the term of the Policy

    Such 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 insurer 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 a life insurance Policy under an assignment or transfer effected before commencement of the Insurance Laws (Amendment), 2014 shall not be affected by this section.

[Disclaimer: This is not the exact text of Section 38 of the Insurance Act, 1938 and other applicable regulatory provisions and only a simplified version prepared for general information. Policyholders are advised to refer to the Insurance Act, 1938 and any other applicable Regulatory/Circulars issued by the Regulatory Authority for complete and accurate details.]

<u>Annexure II</u>: Section 39 - Nomination by Policyholder

Nomination of a life insurance Policy is as below in accordance with Section 39 of the Insurance Act, 1938 as amended from time to time and any other applicable Regulations/Circulars issued by the Regulatory Authority. A simplified version of the provisions of Section 39 is provided below:

01. The Policyholder of a life insurance 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.
02. 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 insurer.
03. Nomination can be made at any time before the Maturity of the Policy.
04. Nomination may be incorporated in the text of the Policy itself or may be endorsed on the Policy communicated to the insurer and can be registered by the insurer in the records relating to the Policy.
05. 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.
06. A notice in writing of Change or Cancellation of nomination must be delivered to the insurer for the insurer to be liable to such nominee. Otherwise, insurer will not be liable if a bonafide payment is made to the person named in the text of the Policy or in the registered records of the insurer.
07. Fee for registering change or cancellation of nomination(s) which will not exceed Rs.100/- (Rupees One Hundred only) on each occasion or as may be specified by the Regulatory Authority through Regulations.
08. On receipt of notice with fee, the insurer should grant a written acknowledgement to the Policyholder of having registered a nomination or cancellation or change thereof.
09. A transfer or assignment made in accordance with Section 38 shall automatically cancel the nomination except in case of assignment to the insurer 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 insurer'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
    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 insurer 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 or holder of succession certificate of such nominee(s).
15. The provisions of sub-section 7 and 8 (13 and 14 above) shall apply to all life insurance policies maturing for payment after the commencement of Insurance Laws (Amendment), 2014 (i.e 26.12.2014).
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 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 Insurance Laws (Amendment) 2014, a nomination is made in favor 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. 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 will not apply.

[Disclaimer: This is not the exact text of Section 39 of the Insurance Act, 1938 and other applicable regulatory provisions and only a simplified version prepared for general information. Policyholders are advised to refer to the Insurance Act, 1938 and any other applicable Regulations/Circulars issued by the Regulatory Authority for complete and accurate details.]

<u>Annexure III</u>: Section 45 – Policy shall not be called in question on the ground of mis-statement after three years

Fraud and Mis-statement shall be dealt with as per the provisions of Section 45 of the Insurance Act, 1938, as amended from time to time and any other applicable Regulations/Circulars issued by the Regulatory Authority. A simplified version of the provisions of Section 45 is provided below:

01. No Policy of Life Insurance shall be called in question **<u>on any ground whatsoever</u>** after expiry of 3 years from
    a. the date of issuance of Policy; or
    b. the date of commencement of risk; or
    c. the date of revival of Policy; or
    d. the date of rider to the Policy,
    whichever is later.
02. On the ground of fraud, a Policy of Life Insurance may be called in question within 3 years from
    a. the date of issuance of Policy; or
    b. the date of commencement of risk; or
    c. the date of revival of Policy; or
    d. the date of rider to the Policy,
    whichever is later.
    For this, the insurer should communicate in writing to the insured or legal representative or nominee or assignees of insured, as applicable, mentioning the ground and materials on which such decision is based.
03. Fraud means any of the following acts committed by insured or by his agent, with the intent to deceive the insurer or to induce the insurer to issue a life insurance Policy:
    a. The suggestion, as a fact of that which is not true and which the insured does not believe to be true;
    b. The active concealment of a fact by the insured 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.
04. Mere silence is not fraud unless, depending on circumstances of the case, it is the duty of the insured or his agent keeping silence to speak or silence is in itself equivalent to speak.
05. No Insurer shall repudiate a life insurance Policy on the ground of Fraud, if the Insured / 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 of or suppression of material fact are within the knowledge of the insurer. Onus of disproving is upon the Policyholder, if alive, or beneficiaries.
06. Life insurance Policy can be called in question within 3 years on the ground that any statement of or suppression of a fact material to expectancy of life of the insured was incorrectly made in the proposal or other document basis which Policy was issued or revived or rider issued. For this, the insurer should communicate in writing to the insured or legal representative or nominee or assignees of insured, as applicable, mentioning the ground and materials on which decision to repudiate the Policy of life insurance is based.
07. In case repudiation is on ground of mis-statement and not on fraud, the premium collected on Policy till the date of repudiation shall be paid to the insured or legal representative or nominee or assignees of insured, within a period of 90 days from the date of repudiation.
08. Fact shall not be considered material unless it has a direct bearing on the risk undertaken by the insurer. The onus is on insurer to show that if the insurer had been aware of the said fact, no life insurance Policy would have been issued to the insured.
09. The insurer 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 Insured. So, this Section will not be applicable for questioning age or adjustment based on proof of age submitted subsequently.

[Disclaimer: This is not the exact text of Section 45 of the Insurance Act, 1938 and other applicable regulatory provisions and only a simplified version prepared for general information. Policyholders are advised to refer to the Insurance Act, 1938 and any other applicable Regulations/Circulars issued by the Regulatory Authority for complete and accurate details.]

Annexure IV: Mortality Charges

The Charge is applied on per 1000 Sum at Risk per annum. The Mortality Charges for male lives is provided below. In case of female lives a three (3) year set back will be applied on the male rates. In case of a transgender life, the rates will be same as that for a male life. Further, the female rate for the first three (3) entry Ages for each benefit option shall be set equal to the corresponding male rate at the minimum entry Age. The Mortality Charge for female lives for Ages 0 to 3 is equal to the Mortality Charge for Age 0 years of a male life.

Age	Mortality Charge	Age	Mortality Charge
0	0.92	40	1.68
1	0.92	41	1.81
2	0.92	42	1.96
3	0.47	43	2.14
4	0.27	44	2.34
5	0.19	45	2.57
6	0.15	46	2.85
7	0.15	47	3.16
8	0.17	48	3.53
9	0.21	49	3.95
10	0.27	50	4.43
11	0.34	51	4.96
12	0.43	52	5.55
13	0.52	53	6.17
14	0.61	54	6.83
15	0.70	55	7.51
16	0.77	56	8.21
17	0.83	57	8.92
18	0.87	58	9.65
19	0.90	59	10.39
20	0.92	60	11.16
21	0.93	61	11.96
22	0.93	62	12.83
23	0.93	63	13.76
24	0.93	64	14.79
25	0.93	65	15.93
26	0.93	66	17.20
27	0.93	67	18.63
28	0.94	68	20.24
29	0.95	69	22.04
30	0.97	70	24.05
31	1.00	71	26.31
32	1.04	72	28.83
33	1.08	73	31.63
34	1.14	74	34.75
35	1.20	75	38.22
36	1.27	76	42.06
37	1.35	77	46.31
38	1.45	78	51.02
39	1.56	79	56.23

Age	Mortality Charge
80	61.98
81	68.33

82	75.35
83	83.08
84	91.60
85	100.97
86	111.29
87	122.61
88	135.03
89	148.63
90	163.50
91	179.72
92	197.38
93	216.54
94	237.30
95	259.70
96	283.81
97	309.65
98	337.26
99	366.63
100	397.73