

I. DEFINITIONS

“Age” means the age at last birthday, in completed years attained by the Life Insured as on the Effective Date of Coverage.

“Accidental Death” means death caused by violent, accidental, external and visible means as revealed by an autopsy provided such death was caused directly by such accident, within 180 days of the date of accident; and death occurs during the Coverage Term.

“Accidental Death Benefit” means an amount equal to the Death Benefit and is payable in the event of Accidental Death of the Life Insured, while the Coverage is in force.

“Beneficiary/(ies)” means the individual/(s) nominated by the Life Insured to receive the Benefit in the event of the death of the Life Insured provided the Coverage is in force and whose name/(s) have been entered in the records kept by the Policyholder as being eligible for the Benefits under the Policy and notified to the Company including any change of the nominated Individual which the Life Insured intimates in writing to the Company.

“Benefits” means the Death Benefit and in the event of death due to accident, the Death Benefit and the Accidental Death Benefit.

“Certificate of Insurance” means a statement evidencing the Coverage of the Life Insured under the Policy, subject to the terms and conditions of the Policy.

“Coverage” means the life insurance effected in respect of each Life Insured under the Policy and as mentioned in the Certificate of Insurance.

“Coverage Expiry Date” means the date on which the Coverage in respect of a Life Insured comes to an end and is mentioned in the Certificate of Insurance.

“Coverage Premium” means the premium payable by the Policyholder to the Company to effect the Coverage in respect of each Life Insured under the Policy.

“Coverage Term” means the period of Coverage for which the Life Insured is covered under the Policy, commencing from the Effective Date of Coverage to the Termination Date of Coverage and as mentioned in the Certificate of Insurance.

“Death Benefit” means the benefit payable on the death of the Life insured as mentioned in the Certificate of Insurance while the Coverage is in force.

“Effective Date of Coverage” means the date of commencement of Coverage in respect of a Life Insured and is subject to the fulfillment of Conditions for Effective Date of Coverage.

“Individual/(s)” shall deem to mean only natural person(s) and not any other entity juristic, legal or otherwise

“Issue Date” means the date of issue of Certificate of Insurance in respect of each Life Insured and will be the date of commencement of Coverage subject to fulfilment of Conditions for Effective Date of Coverage.

“Life/(ves) Insured” means the individual/(s) who has/have been granted and is/are in receipt of the proceeds of the loan from the Policyholder and whose Coverage is in effect under the Policy and whose name appear in the list of life/(ves) insured available with the Company as having been covered under the Policy.

“Policy” means the Bharti AXA Life - Life Shield which is a single premium group term life insurance product issued to the Policyholder for securing the payment of the Benefits to the Lives Insured.

“Policyholder” means CitiFinancial Consumer Finance India Limited, the holder of the Policy.

“Policy Effective Date” means the date of commencement of the Policy.

“Termination Date” means the date on which the Coverage of the Life Insured ceases under the Policy for any reason whatsoever.

“The Company” means Bharti AXA Life Insurance Company Limited.

“Unexpired Coverage Term” for this purpose means the Coverage Term (in months) less the period (in months) from Effective Date of Coverage to Termination Date.

II. GENERAL PROVISIONS

Non-participating Policy

The Policy is not entitled to participate in the distribution of surplus that may be declared by the Company from time to time.

Eligibility conditions

An individual shall be eligible to be covered under the Policy on the basis of the following conditions:

1. has taken a loan from the Policyholder;
2. has attained the age of 18 years but not exceeded 60 years;
3. has opted for a Coverage of atleast Rs 50,000 but not exceeding Rs 5,00,000.
4. has opted for a Coverage Term of three or four or five years
5. is in good health and has submitted the evidence of good health and insurability in the format prescribed by the Company.

Evidence of good health and insurability

The Policyholder shall maintain the evidence of good health and insurability as required by the Company in the form (Enrolment Form cum Declaration of Good Health) and manner prescribed by the Company in respect of each Life Insured covered under the Policy and furnish the same to the Company as and when required.

Proof of age

The Coverage Premium in respect of a Life Insured is calculated based on the Age of the Life Insured recorded in the list of Lives Insured. The Company may require proof of age as per the standard age proofs prescribed by the Company in respect of Lives Insured. If an incorrect Age is provided in respect of a Life Insured, the Company will adjust the Coverage and the Coverage Premium, based on the correct age of the Life Insured. If the Life Insured's actual age is such that it would have made the Life Insured ineligible for the Coverage, then the Company reserves the right, at its discretion, to take such action as it deems fit, including termination of the Coverage and forfeiture of Coverage Premium received in respect of such Life Insured.

Disclosures - section 45 of the Insurance Act, 1938

The Policy has been issued and the Coverages herein have been granted on the representation of the Policyholder that the Policyholder and to the best of the knowledge of the Policyholder, Lives Insured have made and/or have caused to be made full disclosures of all relevant facts and circumstances. Any concealment, non-disclosure, misrepresentation or fraud shall render the Policy and the Coverages herein liable for termination and/ or voidable at the option of the Company and also forfeiture of the Coverage Premium(s) received, at the discretion of the Company.

No Policy or Coverage shall, after the expiry of two years from the date on which it was effected, be called in question by the Company on the ground that a statement made in the proposal for insurance or in any report of a medical officer, or referee, or friend of the insured, or in any other document leading to the issue of the Policy or grant of Coverage/(s), was inaccurate or false, unless the Company shows that such statement was on a material matter or suppressed facts which it was material to disclose and that it was fraudulently made by the Policyholder/Life Insured and that the Policyholder/Life Insured knew at the time of making it that the statement was false or that the Policyholder/Life Insured suppressed facts which were material to disclose.

Effective Date of Coverage

Coverage in respect of all eligible individuals to be insured will commence with effect from the Effective Date of Coverage and subject to completion of all the following conditions and continuation of such conditions during the Coverage Term:

1. the proposed Life Insured has submitted the duly filled in Enrolment Form cum Declaration of Good Health
2. the proposed Life Insured has utilised the proceeds of the loan
3. the Company has received all the particulars of the proposed Life Insured as per the prescribed format provided by the company;
4. the Company has received and realised the Coverage Premium in respect of the proposed Life Insured;
5. the Company has accepted the risk for the proposed Life Insured;.

Data and information

1. The Policyholder shall furnish to the Company all such data, information and evidence as the Company may reasonably require in writing with regard to any matter with regard to or affecting the Coverages effected or to be effected under the Policy and the Company shall not be liable for any action taken in good faith upon any data, information or evidence so furnished which shall be or shall prove to have been erroneous or inaccurate.
2. The Policyholder shall maintain the data, information, evidence pertaining to the list of Life/(ves) Insured to calculate the Coverage Premiums and to ensure that the terms of the Policy are fulfilled alongwith the data, information and evidence on the list of Beneficiaries. Such data and information (in original or notarised photostat copies thereof) available with the Policyholder as have a bearing on the Coverages hereunder shall be open for inspection by the Company on prior written notice and during normal working hours of the Policyholder. The Policyholder shall furnish the list of Lives Insured alongwith the List of Beneficiaries (including any change thereof) to the Company on a daily basis. An intimation by electronic mode shall be construed as a good, valid, sufficient and effective communication of the List of Beneficiaries.

3. The Policyholder will issue a Certificate of Insurance for each Coverage on behalf of the Company. The Policyholder and the Company shall carry out a reconciliation of the list of Certificates of Insurance issued by the Policyholder on a daily basis with the list of Lives Insured available with the Company.
4. The Company and the Policyholder shall maintain in utmost confidence all information in their possession relating to the other party and shall comply with all relevant legislation pertaining to protection of personal information of the Lives Insured.
5. The Policyholder shall be responsible for any loss, liability, damages that may arise on account of delay in or not providing of information, providing incorrect/false information to the Company at any stage including at the time of claim for the Benefit, non-payment / withholding of payment to the Beneficiary/(ies), issuance of a Certificate of Insurance to an individual who is not a Life Insured as per the list of Lives Insured available with the Company or issuance of a Certificate of Insurance that does not reconcile with the Coverage details of the Life Insured available with the Company.
6. In the event the Company is required to honour a claim in respect of an individual who has not fulfilled the terms of the section on Conditions for Effective Date of Coverage - then the Policyholder shall indemnify the Company for any and all costs, penalties, expenses, damages, fees (including any lawyer's/advocate's/ attorney's fees) in respect of such a claim.
7. The Parties hereby represent and warrant that till the Coverages are in force, neither of them shall violate provisions of any applicable laws, nor do or cause to be done any act which may be detrimental, prejudicial and /or in violation of the terms hereof. The Parties further agree to indemnify and hold the other Party harmless from all losses, claims, damages, costs, penalties, etc. of any kind to which it may be subjected due to any breach or non-compliance of any of the terms of this Agreement.

Place and currency

The Coverage/s effected hereunder shall be expressed in Indian Rupees. All moneys payable to or by the Company under the Policy shall be made in India and in Indian Rupees.

Free look option

If the Life Insured disagrees with any of the terms of the Policy/Coverage, the Life Insured may, within fifteen (15) days of the receipt of the Certificate of Insurance by submitting a letter stating the reasons of objection addressed to the Policyholder or Company enclosing the original Certificate of Insurance, seek to cancel the Coverage under the Policy whereon the Company shall refund to the Policyholder, the Coverage Premium including service tax paid as respects the said Coverage after deduction of stamp duty and underwriting expenses incurred by the Company in issuing the Coverage.

Grievance redressal procedure

Grievances should first be lodged with the following contact points and subsequently if required to the Insurance Ombudsman whose address can be obtained from the registered office of the Company:

Department:	Complaint Cell
Registered Office:	61/62, Kalpataru Synergy Opp. Grand Hyatt, Vakola, Santacruz (East) Mumbai 400055
Website:	www.bharti-axalife.com

E-mail: complaints.unit@bharti-axalife.com
Toll Free no.: 1800 425 1350 (MTNL/BSNL subscribers)
Toll Free no.: 1800 102 4444 (Airtel TATA, BPL, Spice Telecom-
Punjab & Shyam Tel Subscribers)
Phone: 020-40182300, 020-26141350
Fax: 022-40306347

Communication

All communication in relation to the Policy shall be addressed to any of the following:

Department: Service Delivery
Registered Office: 61/62, Kalpataru Synergy
Opp. Grand Hyatt, Vakola, Santacruz (East)
Mumbai 400055
Website: www.bharti-axalife.com
E-mail: service@bharti-axalife.com
Toll Free no.: 1800 425 1350 (MTNL/BSNL subscribers)
Toll Free no.: 1800 102 4444 (Airtel TATA, BPL, Spice Telecom-
Punjab & Shyam Tel Subscribers)
Phone: 020-40182300, 020-26141350
Fax: 022-40306347

III. COVERAGE PREMIUM

The Coverage Premium for the Coverage in respect of each Life Insured will be determined by the Company on the basis of:

- premium rates established by the Company from time to time and detailed in the Schedule I to the Policy and
- the list of Lives Insured consisting of such information as required by the Company.

The Policyholder shall be solely responsible for remitting the Coverage Premium in respect of each Life Insured while the Policy is in effect and shall ensure prompt remittance of the Coverage Premiums in one lump sum to the Company alongwith a statement providing additions and deletions to the list of Lives Insured in the format prescribed by the Company.

IV. BENEFITS

The Benefits payable under the Policy to the Beneficiary/(ies) are as under:

1. **Death Benefit:** In the event of death of the Life Insured (proved to the satisfaction of the Company), while the Coverage is in force, the Death Benefit, as specified in the list of Lives Insured, available with the Company shall be payable to the Beneficiary of the Life Insured . The Death Benefit is calculated on the basis of Coverage and is subject to an overall limit of Rs.5,00,000 in respect of each Life Insured.
2. **Accidental Death Benefit:** In the event of Accidental Death of the Life Insured, the Company shall pay an amount equal to the Death Benefit as Accidental Death Benefit to the Beneficiary.

On the payment of the Benefits under the Coverage, the Coverage provided to the Life Insured under the Policy would terminate and all liability of the Company in respect of that Life Insured would stand extinguished.

V. PROCEDURE FOR REGISTERING AND PAYMENT OF CLAIMS

1. On the death of the Life Insured, the Beneficiary will give written notice and proof of claim to the Policyholder in respect of the Life Insured.
2. The Beneficiary shall provide the following primary documents alongwith the written notice for processing the claim:
 - Certificate of Insurance
 - Last attending Doctor's Certificate\Attending Physician's Statement;
 - Copy of Death Certificate duly verified with the original Death Certificate with signature of the employee of the Policyholder with name and employee number;
 - Copies of medical reports duly verified with the original medical reports with signature of the employee of the Policyholder with name and employee number;
 - Death Claim Form (to be submitted by the Policyholder);
 - Declaration of Good Health (to be submitted by the Policyholder)
 - Any other documentation that the Company may consider as material and relevant to the claim

In addition to the above, the following documents are required to be submitted in the event of Accidental Death of the Life Insured:

- Copy of First Information Report verified with the original First Information Report with signature of the employee of the Policyholder with name and employee number
- Post Mortem Report

The Company may also seek any other documentation that it may consider as material and relevant to the claim

3. The Company reserves the right to call for any additional information and documents required to satisfy itself as to the validity of the claim.
4. The Company shall draw a cheque or draft for payment of Death Benefit and Accidental Death Benefit (if applicable) in favour of Beneficiary and forward it to the Policyholder for disbursement to Beneficiary. The Policyholder shall not have any lien on the proceeds of Benefits. The Policyholder shall indemnify and keep indemnified the Company for any claim, damages, losses arising out of negligence, error, delay, or non-payment of the claim monies by the Policyholder to the Beneficiary/(ies).
5. A communication received via electronic mode in the format agreed upon between the Company and Policyholder, confirming receipt of payment of Benefit/(s) shall be construed as a good, valid, sufficient and conclusive discharge of all liabilities of the Company in respect of any payment of Benefit/(s) to be made under the Policy.

VI. EXCLUSIONS

The payment of Benefits is subject to the following exclusions:

1. **Suicide** - If a Life Insured, whether medically sane or insane, commits suicide within one year of the Effective Date of Coverage, the Coverage of the Life Insured shall terminate and the Company will pay the Surrender Value to the Beneficiary.

2. Exclusions for Accidental Death Benefit: Notwithstanding anything to the contrary stated herein, Accidental Death Benefit will not be payable if death by accident occurs from , or is caused by, either directly or indirectly, voluntarily or involuntarily, one of the following:

- Suicide or attempted suicide or intentional self-inflicted injury, by the Life/(ves) Insured, whether sane or not at the time;
- Life/(ves) Insured being under the influence of drugs, alcohol, narcotics or psychotropic substance, not prescribed by a Registered Medical Practitioner;
- War (declared or undeclared), invasion, civil war, riots, revolution or any warlike operations;
- Participation by the Life/(ves) Insured in a criminal or unlawful act;
- Service in the military/ para-military, naval, air forces or Police organizations of any country in a state of war (declared or undeclared) or of armed conflict;
- Participation by the Life/(ves) Insured in any flying activity other than as a bonafide passenger (whether paying or not), in a licensed aircraft provided that the Life/(ves) Insured does/do not, at that time, have any duty on board such aircraft;
- Engaging in or taking part in professional sport(s) or any hazardous pursuits, including but not limited to, diving or riding or any kind of race; underwater activities involving the use of breathing apparatus or not; martial arts; hunting; mountaineering; parachuting; bungee-jumping;
- The radioactive, explosive or hazardous nature of nuclear fuel materials or property contaminated by nuclear fuel materials or accident arising from such nature

VII. TERMINATION OF COVERAGE

The Coverage of a Life Insured under the Policy shall terminate on the Termination Date which will be on the date of occurrence of the earliest of any of the following events:

Event 1	End of Coverage Term (Coverage Expiry Date)
Event 2	Date of death of the Life Insured during the Coverage Term
Event 3	Cancellation of Coverage by Life Insured by exercising the free look option
Event 4	Cancellation of Coverage by Life Insured by exercising Surrender Option

On the occurrence of the above events, the following shall be applicable:

Event 1	The Company shall cease to pay the Benefits under the Policy in respect of the Life Insured
Event 2	The Company shall pay the Death Benefit (and Accidental Death Benefit where applicable) to the Beneficiary
Event 3	The Company shall pay the amount to the Life Insured in accordance with the Section on “Free Look Cancellation”
Event 4	The Company shall pay the amount to the Life Insured in accordance with the Section on “Surrender Option”

VIII. SURRENDER OPTION

Life Insured can surrender a policy by giving a request in written to the Policyholder/the company.

Surrender Value in respect of the Coverage of a Life Insured shall be computed as per the following formula:

$70\% \times P \times U/T$, where:

P = Single premium paid in respect of the Coverage of a Life Insured excluding service tax and applicable cess

U = Unexpired Coverage Term (in months)

T = Coverage Term for the Life Insured (in months)

IX. TERMINATION OF POLICY

The Policy will remain in effect unless otherwise terminated in the manner set out below:

By the Policyholder: The Policyholder will be entitled to terminate the Policy after three years from the Policy Effective Date by providing written notice to the Company stating its intent to terminate the Policy, in which case the Policy will terminate on the later of:

- The date specified in the notice; or
- 90 days from the date on which the Company receives the notice.

The Policyholder shall not avail of an identical policy from any other life insurance company from the Policy Effective Date till such time the Policy is terminated.

By the Company: The Company may terminate this Policy:

- On any date after giving 90 days' written notice to the Policyholder; or
- On any date if required by legislation.

The Policyholder and the Company shall continue to fulfill their obligations until there are no Coverage/(s) effective under the Policy as mentioned in Section II (Data and Information) or five years from the date of termination of the Policy, whichever is earlier.

On termination of the Policy either by the Policyholder or by the Company and during the notice period, no new individuals shall be admitted as Lives Insured under the Policy and the Coverage of the existing Lives Insured shall continue as per their respective Coverage Terms.

X. VARIATIONS TO THE POLICY

The Company reserves the right to vary/change the type or form of the policy including the premium rates, terms and conditions of the Policy including the Schedules, in consultation with the Policyholder and providing a prior written notice of 90 days for effecting the same.

The change/variation will be considered effective on the date immediately subsequent to the completion of the notice period of 90 days. Such change/variation will apply subject to the approval of the Insurance Regulatory and Development Authority ('IRDA'), if required and only to Coverages hereunder becoming effective on or after the date of expiry of such notice. Any such change/variation in the terms and conditions of the Policy shall be given effect to by appropriate endorsements to the Policy signed by an authorised officer of the Company.

If the Policyholder objects to the intended variation/change to the Policy within a period of 90 days of the receipt of notice of the change, then the authorised representatives of both the Parties shall endeavour to resolve the matter amicably by accepting it with such changes as mutually agreed between the Parties. If the Parties do not come to a mutual agreement, then the Company has the right to discontinue the additions of any new Coverage under the

Policy on completion of 90 days of the notice of the change. In such a case, the Company and the Policyholder shall mutually agree on an alternate group insurance product which shall be delivered prior to discontinuing additions of new coverage in the existing product, subject to the approval of the Insurance Regulatory and Development Authority ('IRDA').

Notwithstanding anything contained in the Policy, the provisions herein shall stand changed, altered, amended, modified, discontinued or superseded to such extent and in such manner as may be required with a short notice to comply with any change in the applicable law (including any regulations made or directions / instructions or guidelines issued by the Insurance Regulatory and Development Authority) or as may be necessary under a judgement or order of a court of law.

XI. LEGAL PROVISIONS

Policyholder's acts binding on Life Insured/Beneficiary

The Policyholder will act for and on behalf of the Life Insured in any matter relating to the Policy and Coverages.

Principal to principal relationship

Both the parties shall act as independent service providers and neither party has the right, power or authority, whether expressed or implied to create any duty or obligation on behalf of the other nor can the liability of either party be interchanged.

Loan not available

The Policyholder or the Life Insured will not be entitled to any loan under the Policy.

Governing Laws and jurisdiction

The Policy is subject to the applicable legislations prevailing in India. All disputes of any kind whatsoever which may arise under or in connection with the Policy shall be subject to the exclusive jurisdiction of the courts in Mumbai.

Taxation

1. The Life Insured under the Policy is eligible for tax benefits on the Coverage Premium paid in accordance with the provisions of the Income Tax Act 1961.
2. The tax benefits under the Policy would be as per the prevailing provisions of the tax laws from time to time and are subject to change.

In any case where the Company is liable to account to the revenue authorities for any taxes or duties or cesses under the Policy, the Company shall deduct such sums from the respective payment and the Company shall not be liable to the Life Insured or the Policyholder for the sums so deducted.

Schedule I

Coverage Premium Rates exclusive of Service Tax for Individual Life: The Coverage Premium rates in Rupees per '000 Coverage are provided in Table 1:

Table 1

Age	Term			Age	Term		
	3	4	5		3	4	5
18	10.47	13.53	16.52	40	19.15	25.71	32.55
19	10.76	13.9	16.94	41	19.27	25.95	32.99
20	11.03	14.23	17.33	42	19.41	26.2	33.43
21	11.25	14.51	17.66	43	20.83	28.28	36.23
22	11.46	14.77	17.94	44	22.56	30.75	39.52
23	11.64	14.98	18.18	45	24.61	33.64	43.3
24	11.8	15.16	18.38	46	26.95	36.91	47.57
25	11.92	15.28	18.52	47	29.59	40.58	52.33
26	12.01	15.38	18.6	48	32.55	44.66	57.58
27	12.06	15.44	18.67	49	35.79	49.12	63.3
28	12.09	15.47	18.78	50	39.34	53.97	69.49
29	12.09	15.56	18.95	51	43.21	59.22	76.16
30	12.18	15.75	19.29	52	47.36	64.84	83.28
31	12.37	16.08	19.81	53	51.8	70.86	90.86
32	12.72	16.63	20.56	54	56.54	77.25	98.54
33	13.2	17.33	21.51	55	61.57	83.62	106.59
34	13.79	18.18	22.66	56	66.5	90.3	115.27
35	14.53	19.22	24.03	57	71.65	97.53	124.85
36	15.38	20.41	25.64	58	77.28	105.63	135.63
37	16.36	21.84	27.51	59	84.11	115.26	148.21
38	17.54	23.47	29.52	60	92.1	126.37	162.59
39	18.88	25.22	31.69				

The minimum Coverage per Life Insured under this product is Rs 50,000. The maximum Coverage per Life Insured under this product will not exceed Rs 5,00,000. Coverage will be purchased in whole units. 1 Unit = Rs 50,000 Coverage.

The Life Insured will be charged Service tax at the rate of 12.36% (Financial Year 2008-09) in addition to the Coverage Premium. The applicable service tax may vary from time to time as per prevailing tax laws.