

GENERAL

In this contract, "you" or "your" will refer to the owner of this Policy or the Policyholder and "we", "us", "our", "insurer" or "the company" will refer to Aditya Birla Sun Life Insurance Company Limited (ABSLI), or any of its successors.

DEFINITIONS

"Act" refers to the Insurance Act 1938 as amended from time to time and shall include the Insurance Laws (Amendment) Act 2015.

"Age" refers to age of the Life Insured in completed years as on the last birthday.

"Appointee" is the person who is appointed by You and as named in the Policy Schedule, in case where Nominee is minor.

"Attained Age" corresponds to the age last birthday of the Life Insured on the Policy Issue Date and then incremented by one on each Policy Anniversary.

"Date of Inception" is date when risk cover for Life Insured/s under this Policy begins and is the same as Policy Issue Date.

"Death Benefit" means the benefit payable on death of the Life Insured as specified in the Policy Contract.

"Enhanced Lifestage Protection" means the option as specified under the Policy Benefit Provisions.

"Free-Look Period" means the period as specified in the Policy Contract, during which you can return the Policy in case You are not satisfied with the terms and conditions of the Policy.

"Installment Premium" is the premium as payable by You as per the Policy schedule to effect and continue this Policy contract.

"IRDAI" – means the Insurance Regulatory and Development Authority of India.

"Life Insured" is the person on whose life the contingent events has to occur for the benefits to be payable and as named in the Policy Schedule.

"Limited Pay" is where the premium paying term is limited as compared to the Policy term.

"Medical Practitioner" is a person who holds a valid registration from the Medical Council of any state or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State government and is thereby entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of license. Such Medical Practitioner is not

the Policyholder's spouse, father (including stepfather) or mother (including stepmother), son (including stepson), son's wife, daughter, daughter's husband, brother (including stepbrother) and sister (including stepsister) or Life Insured / Policyholder under this Policy and would be independent of the Insurer.

"Nominee" is the person who is nominated by You and as named in the Policy Schedule, to receive the Death Benefit as specified in the Policy Contract. Nomination can only be effected if the policyholder and life insured are the same.

"Policy Anniversary" means the date corresponds numerically with the Policy Issue Date in every calendar year until Policy Maturity Date.

"Policyholder or You or Your" means the owner of the Policy at any point of time.

"Policy Issue Date" is the date this Policy is issued and your rights, benefits and risk cover begin, as shown in Policy Schedule.

"Policy Term" means the term during which the Life Insured is insured under the Policy and shall be as specified in the Policy Information.

"Policy Year" is the period of twelve calendar months from the Policy Anniversary.

"Regular Pay" is where the premium paying term is same as compared to the Policy term.

"Revival" means the restoration of the benefits to its original value as mentioned under the Policy Benefit Provisions subject to the Life Insured meeting the conditions as laid down for the Company.

"Revival Period" means the period of two consecutive years from the date of discontinuance of the policy, during which period you are entitled to revive the policy which was discontinued due to the non-payment of premium

"Staggered Payment" means the death benefit payment as specified under Policy Benefit Provisions.

"Terminal Illness" Terminal Illness is defined as an advanced or rapidly progressing incurable and un-correctable medical condition which, in the opinion of two (2) independent Medical Practitioners appointed by ABSLI specializing in treatment of such illness, has greater than 50% chance of death of the Life insured within 6 months of the date of diagnosis of Terminal Illness.

PREMIUM PROVISIONS

Policy Premium

Your Policy Schedule shows the annual premium, the premium paying mode, the installment premium, and its due dates. Subject to the Policy Discontinuance provision, we must receive installment premiums when due in order for this contract to be valid and remain in force. The responsibility of installment premium payment shall be upon the Policyholder.

POLICY BENEFIT PROVISIONS

The below mentioned benefits are payable if your Policy is in force.

Death Benefit

In the unfortunate event, if the Life Insured dies before the Policy Maturity Date, the Company shall pay the applicable Death Benefit.

Your Policy Schedule shows the Sum Assured applicable to Your Policy. Death Benefit payable to Nominee shall be the Sum Assured on Death less any previously paid Terminal Illness Benefit.

The Sum Assured on Death is highest of:

- 10 times of the annualised premium for all ages; or
- 105% of all the premium paid till the date of death; or
- Minimum guaranteed sum assured on maturity; or
- Absolute amount assured to be paid on death

The minimum guaranteed Sum Assured on maturity is Nil under this policy.

Absolute amount assured to be paid on death is the Sum Assured at inception of the Policy and shall include any increase in the Sum Assured arising from the exercise of the Enhanced Life Stage Protection option.

The nominee has an option to take the Death Benefit by choosing one of the following options:

- i. 100% as Lump sum payment
OR
- ii. Staggered payment with fixed annual income. In this option the Death Benefit will be paid as follows:
 - a) One-time payout of 20% of Death Benefit at the time of claim settlement *plus*;
 - b) The remaining 80% of the Death Benefit is paid as an annual income. An annual income as a fixed percentage of Death Benefit on each death anniversary of the Life Insured for the chosen payout term (10 years or 15 years) will be payable as shown in the table given below:

Payout Term (in years)	% of total Death Benefit
10	11.18%
15	8.56%

OR

- iii. Staggered payment with increasing annual income @ 5% p.a simple. In this option the Death Benefit will be paid as:
 - a. One-time payout of 20% of Death Benefit at the time of claim settlement *plus*;
 - b. The remaining 80% of the Death Benefit is paid as an annual income. An annual income as a fixed percentage of Death Benefit at the time of claim settlement and then increasing at the rate of 5% per annum simple calculated on the first installment will be paid on each death anniversary of the Life Insured for the chosen payout term (10 years or 15 years) will be payable as shown in the table given below:

Payout Period	Payout Term: 10 years	Payout Term: 15 years
1	9.33%	6.63%
2	9.80%	6.96%
3	10.26%	7.29%
4	10.73%	7.62%
5	11.20%	7.96%
6	11.66%	8.29%
7	12.13%	8.62%
8	12.60%	8.95%
9	13.06%	9.28%
10	13.53%	9.61%
11	-	9.95%
12	-	10.28%
13	-	10.61%
14	-	10.94%
15	-	11.27%

If the Terminal Illness Benefit has already become payable as per the Terminal Illness section below, the total Death Benefit for the calculation of staggered payment will be reduced by the amount of terminal Illness benefit already paid.

If the nominee has chosen to take the Death Benefit as a staggered payment at the time of claim settlement, the nominee can opt for a lump sum payment subsequently instead of the staggered payment. However We will pay the discounted value of the outstanding annual income payouts as a lump sum subject to a minimum of the Death Benefit payable less death benefit already paid by the Company. The discounted value currently shall be calculated using an interest rate of 6.60% per annum. This interest rate is subject to change in future with prior IRDAI approval.

The Policy will terminate once the full Death Benefit is paid to the nominee.

Terminal Illness

In case the Life Insured is diagnosed with a Terminal Illness while the Policy is in force, 50% of the applicable Sum Assured on Death subject to a maximum of Rs. 2.5 Crore, shall be paid in lump sum immediately. During the survival of the Life Insured post the diagnosis of Terminal Illness the Policyholder will not be liable to pay any future due premiums.

On subsequent death of the Life Insured during the Policy term, the Death Benefit shall be reduced by the amount of Terminal Illness Benefit already paid.

Terminal Illness benefit shall only be payable on the first diagnosis of any Terminal Illness of the Life Insured during the Policy term.

Enhanced Lifestage Protection

You can exercise this option with a written request to the Company within six months of the occurrence of marriage or birth of first two children, subject to the following conditions at that time:

- Attained age of Life Insured is less than or equal to 50 years;
- Policy has regular pay option and all due instalment premiums have been paid;
- Life Insured has been accepted as a standard life at standard premium rate at inception of the Policy;
- Rider benefit, if any, under any rider has not been claimed;

Subject to the fulfillment of the above conditions, You may opt to increase the Sum Assured on the occurrence of each of the events mentioned below without undergoing any fresh medical examination:

- First Marriage - 50% of sum assured at date of inception of the Policy subject to a maximum of Rs. 1 Crore
- Birth of First Child - 25% of sum assured at date of inception of the Policy subject to a maximum of Rs. 50 Lakh
- Birth of Second Child - 25% of sum assured at date of inception of the Policy subject to a maximum of Rs. 50 Lakh

The increase in Sum Assured will be effective from the next Policy Anniversary. You shall also provide us with any other relevant information/ document as may be required by us to confirm the abovementioned events.

Future premiums shall be increased in proportion of the increase in the Sum Assured to the Sum Assured on Policy Issue Date and will be reflected from the subsequent Policy Anniversary. The premium rates for the enhanced protection will be same as applicable to age of the Life Insured at the date of inception of the Policy.

You can choose to reduce the Sum Assured in future, to the extent of Sum Assured increased under the Enhanced Lifestage Protection option, subject to a written request to the Company. The reduction in Sum Assured will be effective from the Policy Anniversary falling immediately after the date of notification and the premium will be decreased at the same time. The premium shall be decreased by the same amount as the premium was increased while exercising the Enhanced Lifestage Protection option.

Maturity Benefit

This Policy does not provide any Maturity benefit.

Grace Period

If You are unable to pay the installment premium by the due date, You will be given a grace period of 30 days to make the payment of due premium, during which time all benefits under the Policy will continue.

If we do not receive installment premium within the grace period, the Policy benefit may lapse fully or be deemed paid-up as per Premium Discontinuance and Policy Paid-Up provisions in Part D.

POLICY PROVISIONS

Free-look Period

You will have the right to return your Policy to us within 15 days (30 days in case of electronic policies and the policies issued under the provision of IRDAI Guidelines on Distance Marketing⁽¹⁾ of Insurance products) from the date of receipt of the Policy, in case You are not satisfied with the terms & conditions of Your Policy. We will refund the premium paid once we receive Your written notice of cancellation (along with reasons thereof) together with the original Policy documents. Depending on our then current administration rules, we may reduce the amount of the refund by proportionate risk premium for the period of cover and expenses incurred by us on medical examination and stamp duty charges while issuing the Policy in accordance to IRDAI (Protection of Policyholders Interest) Regulations, 2017.

⁽¹⁾Distance Marketing includes every activity of solicitation (including lead generation) and sale of insurance products through voice mode, SMS, electronic mode, physical mode (like postal mail) or any other means of communication other than in person.

Premium Discontinuance

If you are unable to pay the installment premium by the due date, You will be given a grace period of 30 days during which time all benefits under the Policy will continue.

For Regular Pay

If we do not receive the due installment Premium by the end of the grace period, this Policy will be deemed lapsed and all benefits will cease immediately. You will be given a period of two years from the lapse date to revive your Policy

For Limited Pay

(a) **Installment premiums for four(4) full Policy years are not paid:**
If we do not receive the due Installment Premium by the end of the grace period, this Policy shall be deemed lapse and all benefits will cease immediately. The lapse date is the date the first unpaid premium was due. You will be given a period of two years from the lapse date to revive your Policy

(b) **Installment premiums for four(4) full Policy years are paid:**
If we do not receive the due Installment Premium by the end of the grace period, this Policy will be deemed paid-up and benefits will continue as per the Policy Paid-Up provision. The paid-up date is the date the first unpaid premium was due. You will be given a period of two years from the paid-up date to revive the Policy for its full benefits.

Surrender Benefit

There is no surrender benefit payable for regular pay policy under this plan. However for limited pay, Your Policy will acquire a surrender value after all due Instalment Premiums for at least four full years are paid. The surrender benefit will be payable as follows:

Surrender Value Factor × Premiums Received

- Surrender Value Factors are shown in Appendix I

- Premiums received excludes Goods and Service Tax (GST), any applicable rider premiums (if any)

To know the surrender value for Your Policy You can get in touch with your advisor, or the nearest Branch Office or our Customer Service Team.

Revival

To revive the Policy, you must pay all unpaid installment premiums due till date plus interest. We will charge the interest for Policy revival at a rate declared by us determined as $(x+1\%)/12$ rounded to the nearest 0.1%, where x is the base rate of the State Bank of India. The revival will be effected on receipt of the evidence of insurability satisfactory to us with respect to the Life Insured. We may call for additional information /documents to process the revival request. We reserve the right not to revive the Policy on original terms based on the underwriting decision. The effective date of revival is when these requirements are met and approved & communicated in writing by us. The provisions of Sec 45 of the Insurance Laws (Amendment) Act, 2015 will also be applicable in case of Revival of the Policy. Refer Annexure C.

Policy Paid-Up

For Regular Pay

Not applicable

For Limited Pay

You may choose to stop paying premiums at any time once all due Instalment Premiums for at least four Policy years have been paid and continue this Policy on a paid-up basis. Your Policy will automatically be deemed paid-up if we do not receive Your Instalment Premium within the grace period provided at least four (4) full years installment premiums have been paid.

Under the paid-up status, Your Policy will continue with the following modifications:

Sum Assured, Sum Assured on Death and Terminal Illness benefit shall be reduced in proportion to the Installment Premiums actually paid to the total Installment Premiums payable during the premium paying term.

Policy Loan

This Policy does not provide for any loan facility.

Termination of Policy

Your Policy will terminate at the earliest of:

- (a) the date of settlement of the death benefit or
- (b) the date of payment of the surrender value, if any; or
- (c) the date of maturity of the Policy; or
- (d) the date on which the revival period ends after Your Policy has lapsed as per Premium Discontinuance provision; or
- (e) In case of staggered benefit opted, the date on which last installment is paid or date on which lump sum in lieu of installment is paid, whichever is earlier.

Not Applicable (as it is not a unit linked plan)

SAMPLE

GENERAL PROVISIONS

Contract

Your contract includes this Policy document, the application for the Policy and any amendments agreed upon in writing after the Policy is issued. The contract also includes declarations given by the Policyholder, any medical report form and written statements and answers furnished as evidence of insurability. We are bound only by statements that are part of the contract. Only our authorized officers can agree to any change in the contract and then only in writing.

This contract does not provide for participation in the distribution of profits or surplus declared by us.

All the communication/ documents including the Contract document will be sent to Your registered address. It shall be Your responsibility to update any change in the address. In the event of non- receipt of the Contract You should contact Our Customer Care Unit before expiry of the Free-Look Period.

We encourage You to open E- Insurance Account. For more details on E-Insurance Policy, please visit our website or contact our Relationship Manager.

Currency and Place of Payment

All payments to or by us will be in accordance with the prevailing Exchange Control regulations and other relevant laws and regulations of India. Indian Rupee (INR) is the currency of this Policy. We will make or accept payments relating to this Policy at any of our offices in India or such other locations as determined by us from time to time.

Assignment

Allowed as per the provisions of Section 38 of the Insurance Act, 1938 as amended from time to time.

For more details on the assignment, please refer to Annexure A.

Nomination

Allowed as per the provisions of Section 39 of the Insurance Act, 1938 as amended from time to time.

For more details on the nomination, please refer to Annexure B.

Claim Procedures

For processing a death claim under this Policy the following documents are required:

- Original Policy Document / Indemnity Bond (In Case Original Policy Document Is Lost)
- Claimant's statement/ Claim Form in prescribed format
- Copy of Death Certificate issued by Municipal Authority/Gram Panchayat
- Medical Attendant's Certificate, (if any)
- Employer's Certificate, if applicable
- Documentary Evidence Establishing Beneficiary's Relationship with Life Assured & Beneficiary Identity Proof
- Copy of pre printed bank passbook/pre printed cancelled cheque / Account statement
- Copies of Medical Reports of last and previous hospitalizations, if any
- For accident cases – First Information Report, Post Mortem Report and Police Inquest Form

You shall also provide us with any other relevant information/ document as may be required by us and within 90 days from the date of request.

Any person claiming the benefits can download the claim request documents from our website

www.adityabirlasunlifeinsurance.com or can obtain the same from any of our branches. In case you are unable to provide any or all of the above documents, in exceptional circumstances such as a natural calamity, we may at our own discretion conduct an investigation and subsequently settle the claim.

Taxation

The income tax benefits on Your Policy will be as per prevailing Income Tax laws in India and any amendment(s) made thereto from time to time. As per the applicable tax laws and any amendments made thereto from time to time, we reserve the right to:

- deduct or withhold tax as the case may be; and
- recover levies, taxes, cesses and duties including but not limited to GST from you or adjust the same from the amounts paid by you or accrued or payable to you under the Policy.

Misstatement of Age

If the date of birth of the Life Insured has been misstated and the Policyholder has paid less installment premium than would have been payable for correct age, the Company would be entitled to charge and the Policyholder would be obliged to pay for such premium difference since inception of the Policy with interest at the rate as applicable to continue this Policy.

If the date of birth of the Life Insured has been misstated and the Policyholder has paid higher installment premium than would have been payable for correct age, the company shall refund the excess premiums without any interest. In case of termination of the Policy any unpaid balance will be adjusted from the benefit payout.

If at the correct age, the Life Insured was not insurable under this Policy according to our requirements, we reserve the right to pay premiums paid till date and terminate the Policy in accordance with Section 45 of the Insurance Act, 1938 as amended from time to time.

Suicide

We will pay the premiums paid to date (excluding applicable taxes) or surrender value, if higher in the event the Life Insured dies by committing suicide, whether medically sane or insane, within one year from the date of inception of the Policy or revival date of the Policy respectively.

Terminal Illness Benefit Exclusion

The Life Insured will not be entitled to any Terminal Illness benefit if it is caused directly or indirectly due to or occasioned, accelerated or aggravated by intentional self-inflicted injury or attempted suicide, whether medically sane or insane.

Fraud and Misrepresentation

As per the provisions of Section 45 of the Insurance Act, 1938 and amended from time to time. For more details on Section 45 of the Insurance Act, 1938 please refer to Annexure C.

Grievance or Complaint

You may register your grievance or complaint with our **Head Customer Response & Resolution** at Customer Care Unit / Aditya Birla Sun Life Insurance Company Ltd. (Formerly Birla Sun Life Insurance Company Ltd.)/ One Indiabulls Centre, Tower 1, 16th Floor, Jupiter Mill Compound, 841, Senapati Bapat Marg, Elphinstone Road, Mumbai – 400013. You may also call our toll free no. 1-800-270-7000 or email:

care.lifeinsurance@adityabirlacapital.com.

In case you are dissatisfied with the decision of the above office or have not received any response with 10 days, you may contact **Head Service Assurance** at Customer Care Unit / Aditya Birla Sun Life Insurance Company Ltd. (Formerly Birla Sun Life Insurance Company Ltd.) / One Indiabulls Centre, Tower 1, 16th Floor, Jupiter Mill Compound, 841, Senapati Bapat Marg, Elphinstone Road, Mumbai – 400013. You may also call our toll free no. 1-800-270-7000 or email: grievance.lifeinsurance@adityabirlacapital.com

The complaint should be made in writing duly signed or through email by the Complainant or by his/her legal heirs with full details of the complaint and the contact information of complainant.

If you are not satisfied with the response or do not receive a response from us within 15 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

Email ID: complaints@irda.gov.in

You can also register your complaint online at

<http://www.igms.irda.gov.in/>

Address for communication for complaints by fax/paper:
Consumer Affairs Department,
Insurance Regulatory and Development Authority of India,
4th Floor, Sy No. 115/1, Financial District,
Nanakramguda, Gachibowli, Hyderabad – 500032
Ph: (040) 20204000

Insurance Ombudsman**Risk Factors / Disclaimers**

This Policy is underwritten by Aditya Birla Sun Life Insurance Company Limited (ABSLI) and is a non-linked non – participating term insurance plan issued under IRDA (Non Linked Insurance Products) Regulations 2013. All terms & conditions are guaranteed throughout the Policy term. ABSLI reserves the right to recover levies such as the GST levied by the authorities on insurance transactions. If there be any additional levies, they too will be recovered from you.

NOTWITHSTANDING ANYTHING CONTAINED IN THIS POLICY DOCUMENT, THE PROVISIONS HEREIN SHALL STAND ALTERED, AMENDED, MODIFIED OR SUPERCEDED TO SUCH EXTENT AND IN SUCH MANNER AS MAY BE REQUIRED BY ANY CHANGE IN THE APPLICABLE LAW (INCLUDING BUT NOT LIMITED TO ANY REGULATIONS MADE OR DIRECTIONS / INSTRUCTIONS OR GUIDELINES ISSUED BY THE IRDAI) OR ANY OTHER COMPETENT AUTHORITY OR AS MAY BE NECESSARY UNDER A JUDGEMENT OR ORDER /DIRECTION/ INSTRUCTION OF A COURT OF LAW.

In case You are dissatisfied with the decision/resolution of the Company, You may approach the Insurance Ombudsman located nearest to You (please refer to Appendix I or visit our website www.adityabirlasunlifeinsurance.com) if Your grievance pertains to:

- insurance claim that has been rejected or dispute of a claim on legal construction of the Policy;
- delay in claim settlement;
- dispute with regard to premium; or
- non-receipt of Your Policy document.

As per provision 14(3) of the Insurance Ombudsman Rules 2017, the complaint to the Ombudsman can be made:

- only if the grievance has been rejected by the grievance redressal machinery of the insurer;
- within a period of one year from the date of rejection by the insurer; and
- if it is not simultaneously under any litigation.

List of Ombudsman

Office of the Ombudsman	Contact Details	Areas of Jurisdiction
AHMEDABAD	Office of the Insurance Ombudsman, 2nd floor, Ambica House, Near C.U. Shah College, 5, Navyug Colony, Ashram Road, Ahmedabad – 380 014. Tel. : 079 - 27546150 / 27546139 Fax : 079 - 27546142 Email : bimalokpal.ahmedabad@gbic.co.in	Gujarat, Dadra & Nagar Haveli, Daman and Diu
BENGALURU	Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No. 57-27-N-19 Ground Floor, 19/19, 24th Main Road, JP Nagar, 1st Phase, Bengaluru – 560 078. Tel. : 080 - 26652048 / 26652049 Email : bimalokpal.bengaluru@gbic.co.in	Karnataka
BHOPAL	Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp. Airtel Office, Near New Market, Bhopal – 462 003. Tel. : 0755 - 2769201 / 2769202 Fax : 0755 - 2769203 Email : bimalokpal.bhopal@gbic.co.in	Madhya Pradesh Chattisgarh
BHUBANESHWAR	Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar – 751 009. Tel. : 0674 - 2596461 / 2596455 Fax : 0674 - 2596429 Email : bimalokpal.bhubaneswar@gbic.co.in	Orissa
CHANDIGARH	Office of the Insurance Ombudsman, S.C.O. No. 101, 102 & 103, 2nd Floor, Batra Building, Sector 17 – D, Chandigarh – 160 017 Tel. : 0172 - 2706196 / 2706468 Fax : 0172 - 2708274 Email : bimalokpal.chandigarh@gbic.co.in	Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir, Chandigarh
CHENNAI	Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018 Tel. : 044 - 24333668 / 24335284 Fax : 044 - 24333664 Email : bimalokpal.chennai@gbic.co.in	Tamil Nadu, Pondicherry Town and Karaikal (which are part of Pondicherry)
DELHI	Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel. : 011 - 23239633 / 23237539 Fax : 011 - 23230858 Email : bimalokpal.delhi@gbic.co.in	Delhi
GUWAHATI	Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati – 781001(ASSAM). Tel. : 0361 - 2132204 / 2132205 Email : bimalokpal.guwahati@gbic.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. Saleem Function Palace, A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004. Tel. : 040 - 65504123 / 23312122 Fax : 040 - 23376599 Email : bimalokpal.hyderabad@gbic.co.in	Andhra Pradesh, Telangana, Yanam and part of Territory of Pondicherry

JAIPUR	Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel. : 0141 - 2740363 Email : Bimalokpal.jaipur@gbic.co.in	Rajasthan
ERNAKULAM	Office of the Insurance Ombudsman, 2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard, M. G. Road, Ernakulam - 682 015. Tel. : 0484 - 2358759 / 2359338 Fax : 0484 - 2359336 Email : bimalokpal.ernakulam@gbic.co.in	Kerala, Lakshadweep, Mahe-a part of Pondicherry
KOLKATA	Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel. : 033 - 22124339 / 22124340 Fax : 033 - 22124341 Email : bimalokpal.kolkata@gbic.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 - 2231330 / 2231331 Fax : 0522 - 2231310 Email : bimalokpal.lucknow@gbic.co.in	Districts of Uttar Pradesh : Laitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, 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 - 26106552 / 26106960 Fax : 022 - 26106052 Email : bimalokpal.mumbai@gbic.co.in	Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane
NOIDA	Office of the Insurance Ombudsman, Email : bimalokpal.noida@gbic.co.in	State of Uttaranchal and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Etah, Bulandshehar, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur
PATNA	Office of the Insurance Ombudsman, 1st Floor, Kalpana Arcade Building, Bazar Samiti Road, Bahadurpur, Patna - 800 006. Tel.: 0612-2680952 Email:- bimalokpal.patna@gbic.co.in	States of Bihar & Jharkhand
PUNE	Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 2nd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune – 411 030 Tel. : 020-41312555 Email : bimalokpal.pune@gbic.co.in	Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region

ANNEXURE A

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 by the Insurance Laws (Amendment) Act, 2015. The extant provisions in this regard are as follows:

1. This Policy may be transferred/assigned, wholly or in part, with or without consideration.
2. An Assignment may be effected in a Policy by an endorsement upon the Policy itself or by a separate instrument under notice to the Insurer.
3. The instrument of assignment should indicate the fact of transfer or assignment and the reasons for the assignment or transfer, antecedents of the assignee and terms on which assignment is made.
4. The assignment must be signed by the transferor or assignor or duly authorized agent and attested by at least one witness.
5. The transfer of assignment shall not be operative as against 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 authorised agents have been delivered to the insurer.
6. Fee to be paid for assignment or transfer can be specified by the Authority through Regulations.
7. On receipt of notice with fee, the insurer should Grant a written acknowledgement of receipt of notice. Such notice shall be conclusive evidence against the insurer of duly receiving the notice.
8. 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.
9. 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) Act, 2015 shall not be affected by this section.

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ANNEXURE B

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 by the Insurance Laws (Amendment) Act, 2015. The extant provisions in this regard are as follows:

1. 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.
2. Where the Nominee is a minor, the Policyholder may appoint any person to receive the money secured by the Policy in the event of Policyholder's death during the minority of the Nominee. The manner of appointment to be laid down by the insurer.
3. Nomination can be made at any time before the maturity of the Policy.
4. Nomination may be incorporated in the text of the Policy itself or may be endorsed on the Policy communicated to the insurer and can be registered by the insurer in the records relating to the Policy.
5. Nomination can be cancelled or changed at any time before Policy matures, by an endorsement or a further endorsement or a will as the case may be.
6. A notice in writing of Change or Cancellation of nomination must be delivered to the 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.
7. Fee to be paid to the insurer for registering change or cancellation of a nomination can be specified by the Authority through Regulations.
8. 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.
9. 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
- e. or 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 the Insurance Laws (Amendment) Act, 2015.
16. If Policyholder dies after maturity but the proceeds and benefit of the Policy has not been paid to him because of his death, his Nominee(s) shall be entitled to the proceeds and benefit of the Policy.
17. The provisions of Section 39 are not applicable to any life insurance Policy to which Section 6 of Married Women's Property Act, 1874 applies or has at any time applied except where before or after the Insurance Laws (Amendment) Act, 2015, a nomination is made in favour of spouse or children or spouse and children whether or not on the face of the Policy it is mentioned that it is made under Section 39. 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.

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ANNEXURE C

Section 45 – Policy shall not be called in question on the ground of mis-statement after three years

Provisions regarding Policy not being called into question in terms of Section 45 of the Insurance Act, 1938, as amended by the Insurance Laws (Amendment) Act, 2015 are as follows:

1. No Policy of Life Insurance shall be called in question on any ground whatsoever after expiry of 3 yrs 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 Policywhichever is later.
2. 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 Policywhichever 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.
3. 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.
4. 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.
5. 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.
6. 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.
7. 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.
8. 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.

9. 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.

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