

Edelweiss Tokio Life Insurance Company Limited Edelweiss House, Off CST Road, Kalina, Mumbai – 400 098

Edelweiss Tokio Life – Group Life Protection

(Non-Participating Plan)
<u>UIN No: 147N008V02</u>

MASTER POLICY CONTRACT

Edelweiss Tokio Life Insurance Company Limited has received a Proposal, signed quotation, Member data and the first premium from You. Both You and the Company have accepted that the said documents and any other supporting documents as applicable are the basis of this contract of insurance, and in consideration of and subject to receipt of due premiums as stated in the Policy Schedule, We have entered into this Policy with You which are the legal contract between You and the Company and is subject to the Terms & Conditions stated below.

<u>Description of the Policy</u>: Edelweiss Tokio Life - Group Life Protection plan is a one year renewable term insurance plan which provides life insurance cover. The Policy is offered only to "groups" as defined in the applicable IRDA Guidelines.

SCHEDULE

Group Master Policy No.	
Master Policy Holder	
Registered Office Address	
Commencement Date	
Issue Date	
Annual Renewal Date	
No. Of Members (As On Policy Commencement Date)	
Total Sum Assured – (As On Policy Commencement Date)	
Mode Of Premium	
Basis of Coverage	Flat/ Graded / Multiple of CTC
Premium (Annual)	
Rider Premium (Annual)	
Service Tax	
Total Premium (Annual)	
Modal Premium (incl. Service Tax)	
Age Limits	Minimum: Maximum:
Normal Retirement Age	



Group Type	Employer- Employee / Affinity			
Scope Of Coverage	Compulsory/ Voluntary			
	Profit Sharing	Υ	Ν	If Yes, Profit Share%
Options Selected	Conversion	Y	N	
	Spouse Cover	Y	N	
Riders Attached				
Free Cover Limit details				
Special Conditions				

Signed for and on behalf of "Edelweiss Tokio Life Insurance Company Ltd" at Head Office, Mumbai on

F	Authorized Signatory	
	Consolidated Stamp duty:	



Fundamental Features of the Policy: The fundamental features of the Policy are described briefly below for Your information and reference only. For the complete details on each of these features, please refer to the Clauses referenced alongside.

Fundamental Features of the Policy	Clause No
Eligibility Conditions	1
Death Benefit	2 (a)
Maturity Benefit	2 (b)
Surrender Benefit	2 (c)
Termination of Coverage	3
Material Change in Number, Profile of Members / Total Sum Assured	4
Options	5
Payment of Premiums	6
General Conditions	7
Definitions	8

TERMS & CONDITIONS

1) ELIGIBILITY CONDITIONS:

a) Eligible Members

A person is eligible to become an Insured Member if he/she satisfies all the following criteria:

- i) The person is a valid and existing member of the Group;
- ii) The person is Active-at-work on the date of commencement of risk (unless the Active-at-work clause is waived off);
- iii) The person is within the Age limits as mentioned in the Policy Schedule on the proposed Effective Date;
- iv) The person is Your employee OR has taken a loan or other credit facility from You OR is Your account holder OR holds membership of Your organization/association.



b) Commencement of Insurance Coverage for Members

The insurance coverage under the Policy of a person who satisfies all the eligibility criteria at Clause 1(a) shall commence only if:

- i) in Our sole and absolute discretion all the applicable eligibility conditions are fulfilled;
- ii) the Premium for that person has been received and We have confirmed coverage in writing to You for that person as an Insured under the Policy.

c) Cover

The cover for each Member is subject to the following:

- a) Where the amount of cover is up to the Free Cover Limit (FCL), the cover would be made available to eligible member of the group from the date of commencement of the risk for such member.
- b) Where the amount of cover for a member exceeds FCL Limit, the cover in excess thereof will be subject to evidence of good health and such further terms and conditions as may be specified by Us. For all cover exceeding FCL limit, a satisfactory completion of underwriting including medical underwriting if any would be required. And cover will be made available only once the risk is accepted by Us in writing. Company may at its discretion decline cover or accept cover with/without health loadings on premium or any other terms and conditions.
- c) Where a member has been declined cover, either partly or in whole, on medical grounds under any previous policy, participation in this Policy will be subject to evidence of good health and such further terms and conditions as may be specified by us.
- d) Increases in cover shall be subjected to underwriting requirements of company. No increase in cover of any member under this policy will take effect unless We have accepted such increase, in response to a request made by You in writing and premiums on such increase have been paid as specified therein.

d) For employees not Active-at-work

For employees not Active-at-work, the coverage will commence on the day they join full-time active duty provided Declaration of good health (DGH), is being found satisfactory by the insurer. The insurer may ask for further underwriting including medical underwriting if required. Coverage will commence only on acceptance of the risk by Us.

2) BENEFITS

a) **Death Benefit:**

	When Payable	Amount Payable
(i)	If the Insured Member dies during the	The Sum Assured of the Insured Member.
	term of the Policy and whilst the Insured	
	Member's coverage under the Policy is in	



	force, then We will pay :	
(ii)	If the Insured Member (whether sane or	We will refund the Premium paid after
	not) commits suicide within one year	deduction of stamp duty and medical
	from the Effective Date of coverage or	expenses incurred, if any.
	from the date of revival of the coverage	
	of the Insured Member under the Policy,	
	then:	

b) Maturity Benefit:

	When payable	Amount payable
(i)	If the Insured Member survives on the	No amount is payable under the Policy.
	Maturity Date, then:	

c) Surrender Benefit:

	Procedure for surrender	Amount payable*
(i)	You may surrender the Policy by giving	
	Us a written request provided that all	70% x Premium x number of remaining full
	due Premium has been received by Us.	Policy months/12
	We will pay :	

^{*} If premium is contributed by the insured members, on surrender of such policy, the individual insured member of the group is entitled to continue the cover individually for the remaining term for which premium has been paid.

3) TERMINATION OF COVERAGE:

The Insured's cover under the Policy and all Riders shall immediately and automatically be terminated on the occurrence of the earliest of the following whether endorsement have been issued or not.

- i) The Insured Member's death;
- ii) The Insured Member ceasing to be a member of the Group or ceasing to be in the services of the Employer for any reasons;
- iii) The life cover for any Insured Member being cancelled in accordance with the scheme:
- iv) The Insured Member's retirement date or the termination date whichever is earlier;
- v) The date of discontinuance of the Policy.



4) MATERIAL CHANGE IN GROUP SIZE/ PROFILE OF MEMBERS / TOTAL SUM ASSURED:

If there is a change in:

- i) Number of members by more than 50% during a year; or
- ii) Profile or average age of the group; or
- iii) Benefit structure or
- iv) Any other material change in the terms having impact on the premium pricing

The entire group may be re-priced and the new premium will apply to all members from the date of change until the end of policy term.

5) OPTIONS

The following options will only be applicable under the Policy, if the Schedule specifies that the option is in effect under the Policy.

a) Profit / Loss Sharing

This benefit may be opted for only on the inception, renewal or revival of the Policy and can be exercised provided that:

- i) This option may only be exercised on a yearly basis;
- ii) Any refund[#] offered under this option shall be offered as an adjustment of the Premium payable on renewal;
- iii) Any negative surplus due to a loss will be carried forward for the purpose of exercise of this option;

Experience refund = x% of (Premium net of service tax) as mentioned in Schedule

less marketing & operating expenses depending on the size of the Group

less Stamp duty(actual)

less (Claims + IBNR Provisions)

less losses carried forward of the previous years, if any)

b) **CONVERSION OPTION**

If an Insured Member ceases to be a member of the Group due to retrenchment, resignation or ill-health of the Insured Member, then the Insured Member may apply to Us to issue individual life insurance cover in place of the insurance cover under this Policy "without evidence of good health or medical underwriting" provided that:

- i) The Policyholder has opted for this option at inception/renewal of this policy and premium for this has been received by Us
- ii) We have received the Insured Member's application for conversion within 90 days from the Insured Member ceasing to be a member of the Group;
- iii) We will only issue a linked or non-linked endowment assurance plan with a sum assured that is not larger than the "Sum Assured for the Insured Member under this policy" and the Insured Member agrees to pay the premiums for the converted policy thereon;



- iv) The term of the individual insurance plan issued will not extend beyond the earlier of the Insured Member's normal retirement age or Age 65;
- v) Any medical or avocational loadings which applied under this Policy will continue to apply under the individual insurance plan issued by Us;
- vi) No benefits under any Riders applicable under this Policy can be extended/ converted under the individual insurance plan issued.

c) **SPOUSE COVER OPTION**

An Insured Member's spouse may also be covered as an Insured under the Policy if We have received Premium in respect of the spouse.

If the Insured member dies when the spouse cover option is in force under the Policy, then cover for the Insured Member's spouse as an Insured under the Policy will continue to be in effect even after the Insured's death till the end of the term for which the premium has been paid.

If the Insured Member ceases to be a member of the Group during the term of the Policy, cover for the Insured Member's spouse under the Policy and all applicable Riders shall immediately and automatically terminate and pro-rata premium is payable or allowed to be adjusted against premium required for new joiners as desired by the policyholder.

Policyholder / members will have choice to discontinue the spouse cover anytime, and surrender value as described in section 2(c) will become payable.

6) PAYMENT OF PREMIUM

a)	Payment of Premium	
	You shall pay the Premium under the Policy on the due dates as mentioned in the Schedule above.	
	Members Joining the Group: Pro-rata Premium for the remaining term based on rate charged to the Group at the time of quotation will be charged	
	Members exiting the Group: Pro-rata Premium for the remaining term based on rate charged to the Group at the time of quotation will be refundable.	
b)	Renewal	
	The policy may be renewed at the end of the term for a further term, subject to the acceptance of such renewal by Us, at terms and conditions prescribed and at such premium rates quoted by Us.	



c)	Grace Period
	If the Premium in respect of any Insured is not received by the due date, then the Grace Period of 30 days from annual renewal date is available for all premium paying modes. If the Insured's death occurs during the Grace Period, the claim shall become payable subject to the receipt of the Premium due for the Group.
d)	Revival of Policy
	If the due Premium is not received in full within the Grace Period, the Policy will be lapse.
	You can revive the Policy within three years from the date of lapse upon payment of all premiums due and other charges if any. The company reserves the right to revive the policy and set underwriting requirements as required. The revival will be done at a recalculated price based on the new ages of the members as on revival date and the claim experience till the revival date. On receipt of the premium, the cover will commence from the revival date.

7) GENERAL CONDITIONS

a) Free Look Period

The plan offers 15 days free look period. If you are not satisfied with the terms and conditions of the policy, and want to cancel the policy you can do so by returning the policy to the company along with a letter requesting for cancellation within 15 days from the date of receipt of policy. Premium paid by You will be refunded after deducting proportionate risk premium for the period on cover, stamp duty and cost of medical expenses incurred in that connection.

b) Policy Loan

No loan is available under this Policy.

c) Claims Procedure

We shall be given written notice of a claim arising under the Policy or any Rider and, upon request, We shall be provided with the following for Us to investigate and process the claim:

- (i) Our claim form which must be duly completed
- (ii) Copy of the death certificate
- (iii) Certificate from the Employer/ Master Policyholder
- (iv) Any other information or documentation that We request.

You are requested to send the claim intimation to any of Our branch offices or to Our



registered office specified below.

Claim officer

Edelweiss Tokio Life Insurance Company Ltd Edelweiss House, Off. C. S. T. Road, Kalina,

Mumbai – 400 098

Email ID: claims@edelweisstokio.in

Tel no: 1800 2121 212

d) Nomination as per section 39 of Insurance Act 1938

Nomination is allowed. The nominee/s shall be a person/s nominated by the group member in accordance with the provisions of section (39) of the Insurance Act 1938 to receive the benefits under the Policy in the event of his/her death.

e) **Assignment**

Assignment is not allowed under this Policy.

f) Fraud/Breach of Good Faith

- (i) If You, or the Insured or the Nominee, or anyone acting on Your/their behalf or with Your/their knowledge makes or advances any claim under this Policy knowing it to be false, fraudulent, misleading or dishonest in any respect, then the claim would be rejected.
- (ii) This policy is issued on "utmost good faith" on the past experience information provided by You. If in future it is discovered/becomes evident that information provided is incorrect/ false then company reserve the right to terminate the Policy. The termination of the Policy shall be subject to section 45 of the Insurance Act.

(iii) Section 45 of the Insurance Act 1938:

No policy effected before the commencement of this Act shall after the expiry of two years from the date of commencement of this Act and no coverage under this Policy effected after the coming into force of this Act shall, after the expiry of two years from the date on which it was effected, be called in question by an insurer 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 certificate of insurance, was inaccurate or false, unless the insurer 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 Insured and that the Insured knew at the time of making it that the statement was false or that it suppressed facts which it was material to disclose.

Provided that nothing in this section shall prevent the insurer from calling for proof of age



at any time if he is entitled to do so, and no Certificate of Insurance shall be deemed to be called in question merely because the terms of the coverage are adjusted on subsequent proof that the age of the Insured was incorrectly stated in the proposal.

g) Currency, Governing Law & Jurisdiction

- (i) The Premiums and benefits payable under the Policy shall be payable in India and in Indian Rupees;
- (ii) The Policy and any disputes or differences arising under or in relation to the Policy shall be construed in accordance with Indian law and by the Indian courts.

h) **Taxation**

The Premiums and benefits payable under the Policy shall be subject to the deduction of applicable taxes in accordance with Indian law.

i) Duplicate Master Policy Document

- (i) If You lose or misplace the Policy document You may request Us to issue You a duplicate Policy document by giving Us a written request and making payment of the fee which will be specified at the time of request.
- (ii) On issue of the duplicate Policy document, the original shall automatically cease to have any legal effect and You agree to indemnify and hold Us harmless from and against any and all claims, demands, costs, expenses, awards or judgments arising from or in connection with the original Policy document or the issue of a duplicate Policy document.

j) Notices

- (i) All notices meant for Us shall be given to Us at Our address specified in the Schedule or at any of Our branch offices.
- (ii) All notices meant for You will be sent to Your address specified in the Schedule. If You do not notify Us of any changes to Your address, then notices or correspondence sent by Us to the last recorded address shall be valid and legally effective.

k) Entire Contract

- i) The Policy comprises the entire contract of insurance between You and Us. We shall not be bound or be deemed to be bound by any alterations or changes, unless such changes are made by Us in writing through an endorsement to the Schedule.
- ii)Notwithstanding anything contained in this Policy Document, the provisions herein shall stand altered or superseded to such extent and in such manner as may be required by any



change in applicable law including but not limited to any regulations made or circulars / guidelines issued by IRDA.

8) **DEFINITIONS**

Defined Term	Meaning		
Active-at-Work Clause	"All employees who have availed more than 10 continuous days of leave on grounds of sickness in the last one year (including the date		
	of commencement of coverage) before the date of commencement		
	of the policy or for new employees before the date of joining the		
	group (including date of joining the group) are considered as not		
	Active-at-work."		
Age	Age of the Insured Member at last birthday.		
Annual Renewal Date	The date in any calendar year, corresponding with the		
	Commencement Date.		
Commencement Date	The date specified in the Schedule on which the Policy commenced.		
Effective Date	The date specified in the Policy Document/ Endorsement		
	/Certificate of Insurance from which the coverage of the Insured		
	under the Policy becomes effective.		
Endorsement	Is an instrument issued by us to effect any change/modifications to		
Fuer Course Limit (FOL)	this policy contract.		
Free Cover Limit (FCL)	Free Cover Limit (FCL) is decided at the time of quotation/ Renewal		
	and is based on Group size and sum assured. All members crossing FCL have to be underwritten as per underwriting guidelines. FCL for		
	members aged above Normal Retirement Age(NRA) is NIL.		
Group	A group of members accepted by Us as constituting a Group for the		
	purposes of the Policy		
Grace Period	A period of 30 days from the due date of Premium.		
IRDA	Insurance Regulatory and Development Authority.		
Insured	A person who satisfies and continues to satisfy all the eligibility		
	criteria under Clause 1(a).		
Nominee	The person specified in the Certificate of Insurance nominated in		
	accordance with the Policy.		
Normal Retirement Age (NRA)	The retirement age as per rules/policy of Master Policyholder.		
Policy	This master Policy which is issued by Us and which includes the		
	copy of the proposal form, premium quotation and details of the		
	members being insured.		
Premium	The premium which is payable in accordance with the terms of this		
	Policy.		
Sum Assured	The sum assured declared for the member/employee.		
We/Our/Us	Edelweiss Tokio Life Insurance Company Limited.		
You/ Your	The master policyholder under the Policy.		



<u>Interpretation</u>: In this Policy document, where appropriate, references to the singular will include references to the plural and references to one gender will include references to the other.

<u>Grievance Redressal Mechanism:</u> Grievance Redressal Mechanism has been set up by Us for the resolution any dispute or grievances/ complaints in respect of the Policy. You are requested to submit Your written complaint at any of the below mentioned touch points:

- Toll free customer care number 1-800-2121-212 between 8 am to 8 pm on Monday to Saturday, except public holidays.
- Email us at care@edelweisstokio.in
- Write to us at Customer Care, Edelweiss Tokio Life Insurance Company Ltd, Edelweiss House, Off CST Road, Kalina, Mumbai – 400098

If you are not satisfied with the response provided by any of the above touch points you may write to the Grievance Redressal Officer at complaints@edelweisstokio.in

To further escalate the matter you may write to the Chief Grievance Redressal Officer at cgro@edelweisstokio.in

If the complaint/grievance has still not been resolved You may any time approach the office of the Insurance Ombudsman established by the Central Government of India. The list of the Ombudsman with their addresses has been given below:

Office of the Ombudsman	Contact Details	Areas of Jurisdiction
AHMEDABAD	Office of the Insurance Ombudsman 2 nd floor, Ambica House Nr. C.U.Shah College, Ashram Road, AHMEDABAD - 380 014	Gujarat , UT of Dadra & Nagar Haveli, Daman and Diu
	Tel. :079-27546840 / Fax: 079-27546142 E-mail: ins.omb@rediffmail.com	
BHOPAL	Office of the Insurance Ombudsman Janak Vihar Complex, 2 nd floor 6, Malviya Nagar, Opp. Airtel, Near new market, BHOPAL (M.P.) – 462 023 Tel.: 0755-2569201/02 & Fax:0755-2769203 E-mail: bimalokpalbhopal@airtelmail.in	Madhya Pradesh & Chhattisgarh
BHUBANESHWAR	Office of the Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR - 751 009	Orissa



	Tel.:0674-2596455 Fax - 0674-2596429 E-mail: <u>ioobbsr@dataone.in</u>	
CHANDIGARH	Office of the Insurance Ombudsman S.C.O. No.101 – 103, 2 nd floor, Batra Building, Sector 17-D, CHANDIGARH - 160 017 Tel.: 0172- 2706468 & Fax: 0172-2708274 E-mail: ombchd@yahoo.co.in	Punjab , Haryana, Himachal Pradesh, Jammu & Kashmir , UT Chandigarh
CHENNAI	Office of the Insurance Ombudsman Fatima Akhtar Court , 4 th floor, 453 (old 312) Anna Salai, Teynampet, CHENNAI - 600 018 Tel. 044-24333668/5284 Fax: 044-24333664 E-mail: chennaiinsuranceombudsman@gmail.com	Tamil Nadu, UT- Pondicherry Town and Karaikal (which are pa of UT of Pondicherry)
ERNAKULAM	Office of the Insurance Ombudsman 2 nd Floor, CC 27/2603, Pulinat Building, Opp. Cochin Shipyard, M.G. Road, ERNAKULAM - 682 015 Tel: 0484-2358759 & Fax:0484-2359336 E-mail: iokochi@asianetindia.com	Kerala , UT of (a) Lakshadweep , (b) Mal - a part of UT of Pondicherry
GUWAHATI	Office of the Insurance Ombudsman Jeevan Nivesh, 5 th floor Nr. Panbazar Overbridge, S.S. Road GUWAHATI - 781 001 (ASSAM) Tel.: 0361-2132204/5 Fax:0361-2732937 E-mail: ombudsmanghy@rediffmail.com	Assam , Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura
HYDERABAD	Office of the Insurance Ombudsman 6-2-46, 1 st floor, Moin Court Lane, A.C.Guards, Lakdi-Ka-Pool, HYDERABAD - 500 004 Tel. 040-65504123 & Fax: 040-23376599 E-mail: insombudhyd@gmail.in	Andhra Pradesh, Karnataka and UT of Yanam - a part of the U of Pondicherry
KOLKATA	Office of the Insurance Ombudsman 4 th Floor, Hindustan Building Annexe 4, C R Avenue, KOLKATA - 700 072 Tel.:033-22124346/(40) & Fax: 033-2124341	West Bengal , Bihar , Jharkhand and UT of Andaman & Nicobar Islands , Sikkim



Delhi & Rajasthan

	E-mail: iombsbpa@bsnl.in	
LUCKNOW	Office of the Insurance Ombudsman	Uttar Pradesh and
	Jeevan Bhawan, Phase 2,	Uttaranchal
	6 th floor, Nawal Kishore Rd. Hazratganj,	
	LUCKNOW - 226 001	
	Tel.:0522-2231331	
	Fax: 0522-2231310	
	E-mail: insombudsman@rediffmail.com	
MUMBAI	Office of the Insurance Ombudsman,	Maharashtra , Goa
	Jeevan Seva Annexe, 3 rd floor, S.V.Road,	
	Santacruz(W),	
	MUMBAI - 400 054	
	Tel: 022-26106928	
	Fax: 022-26106052	
	E-mail: ombudsmanmumbai@gmail.com	

Office of the Insurance Ombudsman

2/2A, Universal Insurance Bldg.,

E-mail: iobdelraj@rediffmail.com

Asaf Ali Road

NEW DELHI - 110 002 Tel. 011-23239633 Fax: 011-23230858

NEW DELHI