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Reliance's Guaranteed Money Back Plan

Policy Terms and Conditions and Privileges within referred to

This Policy is the evidence of the contract between Reliance Life Insurance Company Limited ('the Company') and the Policyholder referred to below.

Reliance Life Insurance Company Limited (hereinafter called "RLIC") agrees to pay the benefits, as stipulated in the Policy Schedule to the Policyholder on the basis of the statements, proposal, declarations and premium along with taxes as applicable from the Policyholder on the assurance that the Policyholder has agreed to all the Policy terms and conditions referred to in the Reliance's Guaranteed Money Back Plan (UIN: 121N084V02) Policy Document. The Benefits shall be paid only when the same are payable as per the stipulations in the Policy Document. The Claimant/ Nominee needs to submit satisfactory proof of title and other applicable documents pertaining to the Policy at the RLIC offices for claiming the benefit.

It is hereby further declared that this Policy shall be subject to the terms, conditions and privileges in this Policy Document kit and that the Policy Schedule and every endorsement placed on this Policy by RLIC shall be deemed to be a part of the Policy.

Plan description

Reliance's Guaranteed Money Back Plan is a non-linked, non- participating, non-variable, money back plan where the Policyholder pays premiums regularly throughout the premium paying term. On each of the last five policy anniversaries, the Money Back Benefits are paid to the Policyholder as specified in Section 3.1 of this Policy Document. On maturity, the accrued Guaranteed Loyalty Additions and Guaranteed Maturity Addition are paid to the Policyholder. On death of the Life Assured during the policy term, the applicable Death Benefit is paid immediately to the nominee, irrespective of the Money Back Benefits paid. In addition to the Sum Assured paid on death of the Life Assured, the future premiums will be waived and the nominee will get the Money Back Benefits and the Maturity Benefits as mentioned under the contract at the specified times.

Terms and conditions

1. Free look

In the event you disagree with any of the terms and conditions of the Policy, you may return the Policy to the Company within 15 days (applicable for all distribution channels, except for Distance Marketing* channel, which will have 30 days) of its receipt for cancellation, stating your objections, in which case, you shall be entitled to a refund of the premiums paid, subject only to a deduction of the proportionate risk premium for the period on cover and the expenses incurred by the insurer on medical examination of the Life Assured and stamp duty charges.

*Distance Marketing includes every activity of solicitation (including lead generation) and sale of insurance products through the following modes:

- (i) Voice mode, which includes telephone-calling
- (ii) Short Messaging services (SMS)
- (iii) Electronic mode which includes e-mail, internet and interactive television (DTH)
- (iv) Physical mode, which includes direct postal mail and newspaper & magazine inserts and
- (v) Solicitation through any means of communication other than in person

2. Definitions:

"Accidental Death" means death due to accident, where accident is a sudden, unforeseen and involuntary event caused by external and visible means

"Annualized Premium" means the due premium contribution as calculated and applicable for a Policy Year. Annualized Premium excludes extra premium, if any.

"Base Plan/Plan" means Reliance's Guaranteed Money Back Plan (UIN: 121084V02)

"Base Premium" means the premiums that are paid towards the Policy and excludes the premiums paid towards the Riders and does not include any taxes and/or levies.

"Benefit Illustration" means an Annexure along with the Policy Schedule that illustrates the premiums, guarantees, returns, benefits and values of the proposed policy. This Benefit Illustration complies with IRDA Regulations and contains clear disclosure of both guaranteed and non-guaranteed benefits, if any, of the Policy.

"Benefits" means the Death Benefit, Maturity Benefit, Surrender Benefit or any other benefit, as the case may be, applicable in the terms and conditions of this Policy.

"Claimant" means either:

- a) the Policyholder in the event of a survival or maturity claim, OR
- b) the person who is entitled to receive the death benefits under the Plan. In the event of a death claim, the claimant is the nominee under the Policy. In the absence of the nominee, the claimant is the legal heir of the Life Assured. In instances where the Policyholder and Life Assured are different, the claimant is the Policyholder, if alive.

In the event of assignment under this Policy, the assignee would be entitled to the benefits under the policy, subject to Section 38 of Insurance Act, 1938.

"Commencement Date" means the commencement date of this policy as mentioned in the Policy Schedule and means the Policy start date.

"Company/Us/We/Our" means Reliance Life Insurance Company Limited (RLIC).

"Date of Commencement of risk" means the date as mentioned in the Policy Schedule from which the insurance benefits start under the Policy or on which date the risk commences under the Riders, if opted for. The commencement of risk cover on the Life Assured shall depend on the age of the Life Assured on commencement of the Policy.

"Death Benefit" means the amount payable to the nominee, on death of the Life Assured during the Policy term, as agreed at inception of the Policy contract, provided the Policy has not lapsed or terminated.

"Free look/Free look cancellation of the Policy" means where the Policyholder disagrees to any of the Policy terms and conditions stipulated in the Policy Document, he/she may cancel the Policy by returning it to the company stating the reasons for his/her objections.

"In-force status" means a condition during the term of the Policy, wherein the Policyholder has paid all the due premiums under the Policy contract.

"Lapse" means a condition wherein the due premiums for the first Policy year have not been paid in full within the grace period for the Policy, thereby rendering the Policy unenforceable. No benefits will be payable when the Policy is in Lapse status.

"Maturity Benefit" means the amount of benefit which is payable on maturity i.e. at the end of the Policy term, as stated at the inception of the Policy contract and specified in the Policy Schedule.

"Maturity Date" means the date specified in the Policy Schedule on which the Maturity Benefit is paid to the Policyholder.

"Money Back Benefit/s" means the specified amount of benefit, which is payable on survival of specified intervals during the specified policy term, as stated in the policy contract and specified in the Policy Schedule.

"Nominee" means the person or persons appointed under Section 39 of the Insurance Act, 1938, by the Policyholder, to receive the admissible benefits, in the event of death of the Policyholder.

"Non-Participating" means the Policy does not participate in the profits of the participating fund of the Company.

"Paid-up Benefit" means the amount payable upon the occurrence of events, as specified under the Plan, when the Policy is in Paid-up status

"Paid-up/Paid-up status" means the reduced Sum Assured applicable to the Policy when the Policy is in Paid-up status subject to the conditions mentioned in this Policy Document

"Person to whom the Benefits are payable" means the Policyholder, including Nominees or proving executors of administration or other legal representatives, as per the applicable Regulations.

"Policy Anniversary" means the start date of every subsequent Policy Year.

"Policy Commencement Date" means the start date of this Policy as mentioned in the Policy Schedule.

"Policy Document" means this document, which is the evidence of the contract between Reliance Life Insurance Company Limited ('the Company') and the Policyholder.

"Policy Maturity Date" means the date specified as such in the Policy Schedule.

"Policy Schedule/Schedule" means the attached Schedule that provides your Policy Benefits, the terms of the contract and details about You and the Life Assured, along with all its annexes, issued by us for this Policy. The Schedule also includes any amendments to the attached Schedule which may be issued from time to time.

"Policy Year" means a period of 12 consecutive months starting from the date of commencement of the Policy as stated in the Policy Schedule and ending on the day immediately preceding the following anniversary date and each subsequent period of 12 consecutive months thereafter.

"Policyholder/ Policy owner/Proposer/You" means the person specified as such in the Policy Schedule or such other person, who may become the holder of this Policy in respect of the terms and conditions of this contract or by virtue of operation of law. In case the Proposer is different from the Life Assured, then the Proposer shall be the Policyholder.

"Premium" means the amount stipulated in the Policy Schedule and paid at regular intervals (yearly/half yearly/quarterly or monthly mode as shall be applicable) by the Policyholder as consideration for acceptance of risk and benefits specified as such in the Policy Document.

"Premium payment term" means the period or the term of the Policy contract during which the Policyholder is required to pay the premiums with respect to the Policy, to the Company.

"Prevailing rate of interest" means the applicable rates of interest as declared by the Company from time to time that shall be charged to the Policyholder on specified transactions related to the policy, as specified under the Plan. Upon any revisions in the interest rates, the Company shall communicate the same to the customers.

"Regulation" means the laws and regulations as in effect from time to time and applicable to this Policy, including without limitation, the regulations and directions issued by the Regulatory Authority from time to time.

"Regulatory Authority" means the Insurance Regulatory and Development Authority (IRDA) or such other authority or authorities, as may be designated under the applicable laws and regulations.

"Revival" means payment of all due premiums that are in arrears to convert a Policy from "Lapse" or "Paid-up" status into "In force" status

"Rider" means an optional cover available as an add-on benefit, which can be purchased by you along with the base Plan on payment of additional premium as applicable

"Rider Benefits" means the benefits payable on specified events applicable under the Riders as may be purchased by you.

"Rider Premium" means the Premium paid towards the Riders and does not include any taxes and/or levies.

"Sum Assured/Base Sum Assured" is the absolute amount of benefit as specified in the attached Policy Schedule

"Surrender" means the termination of the contract in its entirety at the instance of the Policyholder.

"Surrender Value" means an amount, as specified under the Plan, that is payable upon complete withdrawal/termination of the entire Policy by the Policyholder.

"You" / "Your" mean the Policy Owner, Policyholder, Proposer, named in the Schedule or his or her legal heir or personal representative.

3. Key Benefits:

3.1. **Money Back Benefits:** Money Back benefits as a percentage of the Base Sum Assured/Paid-up Sum Assured will be payable as per the table below on the specified Policy Anniversaries called 'Money Back period' irrespective of the survival of the Life Assured

Policy term	15 Years	20 Years	Money Back Benefits (as a percentage of Sum Assured)
End of Policy Year	11	16	15%
	12	17	15%
	13	18	15%
	14	19	15%
	15	20	40%

3.2. **Maturity Benefit:** At the end of the policy term irrespective of survival of the Life Assured provided the policy is not Paid-up, the total of the following two benefits will be payable:-

- i. Guaranteed Maturity Additions, if any, as per Section 3.2.1 and
- ii. Accrued Guaranteed Loyalty Additions as per Section 3.2.2

3.2.1. **Guaranteed Maturity Addition:** Guaranteed Maturity Addition as a percentage of the Base Sum Assured (shown in the table below) will be payable on maturity provided the policy is not Paid-up. The Guaranteed Maturity Addition depends on the policy term as given in the table below.

Policy Term	Guaranteed Maturity Addition (as a percentage of Base Sum Assured)
15	15%
20	20%

3.2.2. **Guaranteed Loyalty Additions:** Guaranteed Loyalty Additions of 2% of the Base Sum Assured/Paid-up Sum Assured will be accrued at the end of every policy year, provided the policy is not surrendered or lapsed.

Completed Policy Year	Guaranteed Loyalty Additions (as a percentage of Base Sum Assured/Paid-up Sum Assured)	Accumulated Guaranteed Loyalty Additions (as a percentage of Base Sum Assured/Paid-up Sum Assured) at the end of the policy year
1	2%	2%
2	2%	4%
3	2%	6%
4	2%	8%
5	2%	10%
6	2%	12%
7	2%	14%
8	2%	16%
9	2%	18%
10	2%	20%
11	2%	22%
12	2%	24%
13	2%	26%
14	2%	28%
15	2%	30%
16	2%	32%
17	2%	34%
18	2%	36%
19	2%	38%
20	2%	40%

3.3. **Death Benefit:** On death of the Life Assured during the policy term, provided the policy is in force as on the date of death, the claimant shall receive the following benefits:

i. In the event of death of the Life Assured

Highest of (Sum Assured, 10 times of the Annualized Premium or 105% of the Base Premiums paid) will be payable, irrespective of how many periodic lump sum benefits have already been paid

ii. In the event of death on account of an accident on or before age 65

An additional amount equal to the Base Sum Assured will be payable. The additional Sum Assured on accidental death (including the Sum Assured under Reliance Accidental Death and Total and Permanent Disablement Rider across all policies with Reliance Life) will not exceed Rs. 50 lakh.

In addition to the benefits paid on death of the Life Assured as mentioned above, the future premiums will be waived and the nominee will also receive the Money Back Benefits and Maturity Benefits as mentioned under the contract at the specified times.

4. Other benefits and features

4.1. **Rider Benefits:** At the time of inception of this Policy, riders are not available with this plan. However, we may allow riders in this plan in the future, subject to approval by the Regulator.

4.2. **Surrender Benefit:** The Surrender Value payable is higher of the Guaranteed Surrender Value (GSV) and Special Surrender Value (SSV), as given below.

The policy will acquire a Surrender Value provided the first annualized premium is paid in full. If the first annualised premium is paid in full and the policy is surrendered before the completion of three policy years, the applicable surrender value will be payable only after the completion of three policy years.

In such a scenario, in case of death before the completion of three policy years, the applicable Surrender Value will be paid.

Guaranteed Surrender Value (GSV): Guaranteed Surrender Value is equal to the GSV factor multiplied by the total premiums paid, excluding rider premiums and extra premium paid, if any, less any survival benefits already paid. Policy will acquire GSV only if the first full policy year's premiums have been paid.

Number of full annualised premiums paid / Policy term	15	20
1	15%	15%
2*	20/30%	20/30%
3	30%	30%
4	50%	50%
5	50%	50%
6	50%	50%
7	50%	50%
8	53%	52%
9	56%	54%
10	60%	57%
11	63%	59%
12	67%	61%
13	71%	64%
14	75%	67%
15	80%	69%
16	NA	72%
17	NA	75%
18	NA	78%
19	NA	82%
20	NA	85%

*For premium paying term less than 10 years, applicable GSV factor shall be 30%, else for more than 10 years premium paying term 20% GSV factor is applicable.

Special Surrender Value: The special surrender value will be applicable in the following manner:

i. For PPT of less than 10 years: If all annualized premiums have been paid for at least first two consecutive years.

ii. For PPT of 10 years or more: If all annualized premiums have been paid for at least first three

consecutive years.

The Special Surrender Value is an amount equal to the Surrender Value factor multiplied by the Paid-up Sum Assured.

The company reserves the rights to change the Special Surrender Value Factor from time to time depending on the economic environment, experience and other factors, subject to IRDA approval.

The current Special Surrender Value factors are given in Annexure B of the policy document.

Note: If the policy is surrendered it cannot be reinstated. The policy will be terminated once it is surrendered

5. Premium

5.1. **Payment of premium:** The Policyholder is required to pay regular premiums for the entire premium paying term as per the mode of premium specified in the Policy Schedule.

Premiums shall be deemed to have been paid only when received at the Company's offices which are authorized by the Company to accept payment of Premiums. The official receipt issued by the Company is the only valid evidence of payment of Premiums.

In case a valid claim arises under the Policy during the grace period but before payment of the due premium, the Company will still admit the claim.

Any unpaid premium for the Policy year will become due and payable immediately. In the event, the said unpaid premium is not received by the Company, the Company will adjust the said unpaid premium, while settling such a claim.

5.2. **Mode of payment of premium:** The Policyholder may pay regular premiums either in yearly, half yearly, quarterly or monthly modes by cash, cheque, debit/credit card, ECS, online payment, demand draft, Salary Deduction Scheme (SDS) and direct debit. The Policyholder may request to change the mode and frequency of payment of regular premiums on any Policy Anniversary date during the premium payment term but not at other times. The Company, at its sole discretion, may agree to accept the payment of the Premium in any mode (annual / half-yearly / quarterly / monthly) as requested by Policyholder. The amended Schedule notifying the changed installment Premium shall be issued to the Policyholder.

If the monthly mode is chosen at the time of issuance, first two months premium will be collected at the time of issuance of the Policy. In case the Policyholder has opted for Electronic Clearing System (ECS) mode for premium payment, the Policyholder shall have the option to withdraw from ECS mode at least 15 days prior to the premium due date.

Quarterly and monthly modes of premium payment are allowed only if the premiums are paid electronically.

5.3. **Rider premium:** Rider premiums, if any, shall be collected over and above the regular premiums. Rider premium should be paid on the due date or within the grace period. The mode of rider premium payment shall be same as the mode of premium payment under the base Plan. The rider premium payment term will be either co-terminus or lower than the premium payment term of the base Plan.

5.4. **Grace period for payment of premium:** There is a grace period of 30 days applicable from the due date for payment of premiums if the payment is made in yearly, half-yearly or quarterly modes. In case the premiums are paid in monthly mode, then the grace period applicable is of 15 days.

5.5. **High Sum Assured rebate:** A rebate is applicable on the premium amount depending on the chosen Sum Assured. Rebates per Rs. 1,000 Sum Assured applicable on the premium paid by the Policyholder are as follows:

Sum Assured	Rebate per Rs. 1,000 Sum Assured
Less than Rs. 1,00,000/-	Nil
Rs.1,00,000/- and above but less than Rs.2,50,000/-	Rs.1
Rs.2,50,000/- and above but less than Rs.5,00,000/-	Rs.2
Rs.5,00,000/- and above but less than Rs.10,00,000/-	Rs.3
Rs.10,00,000/- and above	Rs.4

5.6. Premium Mode rebate

A rebate on premiums is allowed, if the premiums are paid annually and half yearly as per the table below.

Policy Term	Rebate
Yearly	5%
Half yearly	2.5%
Quarterly	Nil
Monthly	Nil

5.7. Discontinuance of payment of premium

If the Policyholder discontinues the payment of premiums, the policy will be treated as:

1. Lapse: If the first annualised premium is not paid in full then the policy lapses at the end of the grace period and the insurance cover, inbuilt accidental death benefit, inbuilt waiver of premium benefit and rider benefits, if any, will cease immediately. In such a scenario, no benefits will be paid if the policy is not revived within the revival period.

For policies with a premium payment term of less than 10 years: If at least the first annualised premium is paid in full and the first two annualised premiums are not paid in full before end of the grace period then the insurance cover, inbuilt accidental death benefit, inbuilt waiver of premium benefit and rider benefits, if any, will cease immediately at the end of the grace period. In this case the policy will acquire a Surrender Value which will be payable only after the completion of three policy years or at the end of the revival period, whichever is later. Refer to the Surrender section for details on surrender value. In such a scenario, no other benefits will be paid if the policy is not revived within the revival period.

For policies with a premium payment term of 10 years or more: If at least the first annualised premium is paid in full and the first three annualised premiums are not paid in full before end of the grace period then the insurance cover, inbuilt accidental death benefit, inbuilt waiver of premium benefit and rider benefits, if any, will cease immediately at the end of the grace period. In this case the policy will acquire a Surrender Value which will be payable only after the completion of three policy years or at the end of the revival period, whichever is later. Refer to the Surrender section for details on surrender value. In such a scenario, no other benefits will be paid if the policy is not revived within the revival period.

A lapsed policy can be revived within the revival period (i.e. a period of 2 years from the due date of first unpaid premium). The revival is subject to the board approved underwriting policy.

If a lapsed policy is not revived within the revival period, the policy will be terminated. A terminated

Policy cannot be reinstated.

2. Paid-up

a) For policies with a premium payment term of less than 10 years

After paying premiums for at least the first two full policy years, if the Policyholder discontinues paying further premiums then the policy will acquire a Paid-up status.

b) For policies with a premium payment term greater than or equal to 10 years

After paying premiums for at least the first three full policy years, if the Policyholder discontinues paying further premiums then the policy will acquire a Paid-up status.

The Sum Assured under the base Plan will be reduced as given below:

Paid-up Sum Assured = Base Sum Assured * (Number of premiums paid/total number of premiums payable)

The inbuilt Accidental Death Benefit, Inbuilt Waiver of Premium Benefit and any Rider Benefits will cease immediately once the policy acquires a Paid-up status.

There will not be any changes in the Guaranteed Loyalty Additions accrued up to the date of Paid-up.

Once the policy becomes Paid-up, further Guaranteed Loyalty Additions will be accrued as a percentage of the Paid-up Sum Assured. Any accrued Guaranteed Loyalty Additions will be paid either on surrender or on maturity, whichever is earlier.

No Guaranteed Maturity Additions will be payable for a Paid-up policy.

During the Money Back period, periodic lump sum benefits as a percentage of the Paid-up Sum Assured will be paid as per the table given below:

i. For a policy term of 15 years

Policy Anniversary	Periodic lump sum benefit as a percentage of Base Sum Assured/Paid-up Sum Assured
11	Nil
12	Rs.1
13	Rs.2
14	Rs.3
15	Rs.4

ii. For a policy term of 20 years

Policy Anniversary	Periodic lump sum benefit as a percentage of Base Sum Assured/Paid-up Sum Assured
16	15%
17	15%
18	15%
19	15%
20	40%

On death of the Life Assured, the Paid-up Sum Assured is paid irrespective of how many periodic lump sum benefits have already been paid.

5.8. Revival of a lapsed or Paid-up Policy: A lapsed/Paid-up Policy can be revived within the revival period (i.e. a period of two years from the due date of the first unpaid regular premium but before the maturity date of the base Policy), by paying the arrears of premiums along with interest at the prevailing rate of interest. If the base Plan is revived, the rider benefits can be revived by paying the arrears of premiums under the riders with interest at the prevailing rate of interest. The current rate of interest is 9% p.a. and is subject to change from time to time.

The revival of the policy and riders, if any, will be subject to satisfactory medical and financial underwriting. The revival is subject to company's board approved underwriting policy.

On revival, the Policy will be eligible for future Guaranteed Loyalty Additions and Guaranteed Maturity Additions. All due Guaranteed Loyalty Additions paid during the period the Policy was Paid-up will be re-calculated on the full Base Sum Assured.

If a Lapsed policy is not revived within the revival period, the Policy will be terminated with no benefits payable. A terminated Policy cannot be reinstated.

6. General conditions:

6.1. Service tax and other taxes: The Service tax will be levied on the Base Premium and Rider Premiums, if any. The level of this tax will be as per the rate of service tax, declared by the Government from time to time. The Service tax on the Base Premium and Rider Premiums will be collected from the Policyholder along with the Base Premium and Rider Premiums respectively.

6.2. Charges levied by the Government in future: In future, the Company may decide to pass on any additional charges levied by the government or any statutory authority, from time to time, to the Policyholder. Whenever the Company decides to pass on the additional charges to the Policyholder, the method of collection of these taxes shall be informed to them.

6.3. Employee staff discount: No commissions are payable on policies purchased by Reliance Life Insurance Company Limited staff and staff of other Anil Dhirubhai Ambani Group companies, where the discount of 5% applies on the premiums every year. However, if the person ceases to be an employee of Reliance Life Insurance Company Limited or any other company of the Reliance Anil Dhirubhai Ambani Group, the premium rates without discount will be applicable from the date the person ceases to be an employee of the Reliance Group company.

6.4. Loans: Loan facility is not available under this plan.

6.5. Exclusions for inbuilt Accidental Death benefit: The Company will not pay any accidental death claim which results directly or indirectly from anyone or more of the following:

- An act or attempted act of self-injury
- Participation in any criminal or illegal act
- Being under the influence of alcohol or drugs except under direction of a registered medical practitioner
- Racing or practicing racing of any kind other than on foot
- Flying or attempting to fly in, or using or attempting to use an aerial device of any description, other than as a fare paying passenger on a recognized airline or charter service
- Participating in any riot, strike or civic commotion, active military, naval, air force, police or similar service, or
- War, invasion, act of foreign enemies, hostilities or war like operations (whether war be

declared or not), civic war, mutiny, military rising, insurrection, rebellion, military or usurped power or any act of terrorism or violence

6.6. Claims: The Company will pay the Maturity Benefit to the Policyholder when it is satisfied of the identity of the Insured Person, Age of the Insured Person and all relevant provisions of the Policy have been met.

The Company will pay the Death Benefit to the Claimant when it is satisfied of the identity of the Insured Person, Age of the Insured Person, the Insured Person is dead and all relevant provisions of the Policy have been met.

In the event of assignment under this Policy, the assignee would be entitled to the benefits under the policy, subject to Section 38 of Insurance Act, 1938.

In case it is found that the age of the Insured Person as declared to us is incorrect, the Company shall adjust the Maturity Benefit or Death Benefit payable in proportion of:

- the amount of insurance premium that was actually paid in relation to that person (in the policy period in which he/she died) and
- the amount of insurance premium that should have been paid for that person (in that policy period) with regard to the rate of insurance premium applicable to his/her correct age.

In case the customer is ineligible for the policy based on the correct age, subject to Section 45 of the Insurance Act, 1938, the Company will pay the Surrender Value.

6.7. Requirements for maturity and death claims: In the event of a claim for Maturity Benefit or Death Benefit arising under this Policy, the person to whom the benefits are payable shall endeavor to intimate the Company in writing of the claim and provide the following documents to the Company preferably within 90 days of the claim arising. This is to enable the Company to process the claim in a speedy manner. The Company may accept/process the claim on merits of the case even beyond the period of 90 days, provided:

- the reasons for delay are due to unavoidable circumstances beyond the control of the Claimant and
- the submission of documents in respect of the said delays is evidenced to the satisfaction of the Company

I. List of documents required in case of a Maturity Benefit:

- Original Policy Document
- Discharge form
- KYC documents of the Policyholder as per the Anti Money Laundering (AML) Guidelines. (These include address proof & identity proof)
- ECS Mandate form/ Cancelled cheque leaf/ Self-attested passbook copy of the claimant
- Any other document, as may be required by the Company

II. List of documents required in the event of a claim for Death Benefit arising due to reasons other than accidents or unnatural deaths:

- Policy Document in original
- Death certificate in original issued by the competent authority
- Hospitalization documents (discharge summary along with all investigation reports) if the Life Assured has taken treatment for illness leading to his death
- Claim Form (A) to be filled in by the claimant
- Claim Form (B) to be filled in by the last treating doctor
- Claim Form (C) to be filled in by a third person (who is not a relative of the claimant)
- KYC documents of the claimant as per AML Guidelines (Address proof & identity proof)
- ECS Mandate form/ Cancelled cheque leaf of the claimant, any other document as may be sought by the Company

III. In the event of a claim for Death Benefit arising out of accidents or unnatural deaths:

- Policy Document in original
- Death certificate in original issued by the competent authority
- Copies of the First Information Report and the Final Investigation Report thereof, duly attested by the concerned police officials
- Copy of the post-mortem report duly attested by the concerned officials
- Claim Form (A) to be filled in by the claimant
- Claim Form (B) to be filled in by the last treating doctor
- Claim Form (C) to be filled in by a third person (who is not a relative of the claimant)
- KYC documents of the claimant as per AML Guidelines (Address proof & identity proof)
- ECS Mandate form/Cancelled cheque leaf of the claimant and any other document as may be sought by the Company

Notwithstanding anything contained in the clauses mentioned above, depending upon the cause or nature of the claim, the Company reserves the right to call for other and/or additional documents or information, including documents/ information concerning the title of the person claiming Benefits under this Policy to the satisfaction of the Company, for processing the claim. If the

documents called for are not submitted or not given, then valid reasons for not providing the same in a letter should be submitted within the time mentioned in the letter.

6.8. Tax benefit: Premiums paid under the base Policy and Riders, if available with the base plan and opted for by the Policyholder, are eligible for tax deduction subject to applicable tax laws and conditions. Income tax benefits shall be under the prevailing income tax laws and are subject to amendments and interpretation from time to time. The Policyholder is recommended to consult a tax advisor.

6.9. Nomination (Section 39 of Insurance Act, 1938): The Life Assured, where he is the Policyholder, may, at any time during the Policy term, make a nomination for the purpose of payment of Benefits in the event of his death. Where the Nominee is a minor, the Policyholder may also appoint a person to receive the money during the minority of the Nominee. Nomination may be made by an endorsement on the Policy and by communicating the same in writing to the Company. Any change of nomination, which may be effected before the termination of the Policy shall also be communicated to the Company. In registering a nomination, the Company does not accept any responsibility or express any opinion as to its validity or legal effect.

6.10. Assignment (Section 38 of Insurance Act, 1938): An assignment of the Policy may be

made by an endorsement upon the Policy itself or by a separate instrument signed in either case by the assignee or specifically stating the fact of assignment and duly attested. Only the Policyholder may make the first assignment. Such assignment shall be effective, as against the Company, from and upon the service of a written notice to the Company and the Company recording the assignment in its books. In case of assignment under this Policy, the assignee would not be entitled to increase the Death Benefit. In registering an assignment, the Company does not accept any responsibility or express any opinion as to its validity or legal effect.

6.11. Proof of age: The age of the Life Assured has been admitted on the basis of the declaration made by the Policyholder/ Life Assured in the Proposal and/or in any statement based on which this Policy has been issued. If the age of the Life Assured is found to be different from that declared, the Policy shall be cancelled immediately and the premiums received shall be refunded after deducting all the charges by the Company or the Company may adjust the premiums and/or the Benefits under this Policy and/or recover the applicable balance amounts, if any, as it deems fit. This Policy shall however become void from commencement, if the age of the Life Assured as at the Policy Commencement Date is found to be higher than the maximum or lower than the minimum entry age that was permissible under the plan of this Policy at the time of its issue. The Company shall cease to be liable for any Benefits under this Policy. In such a case, the Policy shall be cancelled immediately by paying the Surrender Value in accordance with Section 45 of the Insurance Act, 1938.

6.12. Policy becoming null and void in certain events: In issuing this Policy, the Company has relied on and may rely on the accuracy and completeness of the information provided by the Proposer /Life Assured and any other declarations or statements made or as may be made hereafter, by the Policyholder/Life Assured. Subject to the provisions of the applicable regulations including Section 45 of the Insurance Act, 1938, in the event any such information, declaration or statement is found to be false or incorrect or any material information is found to be withheld or misrepresented, the Policy shall become null and void from commencement and the Company shall cease to be liable for any Benefits under this Policy. In such a case, the Policy shall be cancelled immediately by paying the Surrender Value.

6.13. Suicide: If the Life Assured, whether sane or insane, commits suicide within 12 months

- from the date of inception of the Policy, the nominee or beneficiary of the Policyholder shall be entitled to at least 80% of the premiums paid, provided the Policy is in force or
- from the date of revival of the Policy, the nominee or beneficiary of the Policyholder shall be entitled to an amount which is higher of 80% of premiums paid till the date of death or the surrender value as available on the date of death.

The Company will not pay any insured benefit in case of suicide.

6.14. Special provisions: Any special provisions subject to which this Policy has been entered into, whether endorsed in the Policy or in any separate instrument shall be deemed to be part of the Policy and shall have effect accordingly.

This product is approved by the Insurance Regulatory and Development Authority (IRDA). The terms and conditions of this Policy is in accordance with the Insurance Act, 1938, Insurance Rules, 1939, IRDA Regulations and other such relevant laws, rules, regulations, and guidelines, directives, circulars, clarifications including that of the Life Insurance Council of the Insurance Association of India constituted under the provisions of Sec 64-C of the Insurance Act, 1938, ,Governing Body of Insurance Council constituted under the Redressal of Public Grievances Rules, 1998, other such regulatory, statutory, administrative, judicial authority(s) and local customs, the terms of which shall be subject to change by virtue of any change/amendment(s) in such laws, rules, regulations, and guidelines, IRDA, Life Insurance Council of the Insurance Association of India ,Governing Body of Insurance Council, other such regulatory, statutory, administrative, judicial authority(s) at all time.

6.15. Recovery of additional expenses incurred on account of acts of Policyholders: RLIC also reserves the right to recover "cheque bounce charges", incurred by it from the Policyholders, on account of dishonour of cheque issued towards premium payment, by Policyholders. The Company may recover these additional costs by requisitioning additional payments from the Policyholders.

RLIC reserves the right to recover "electronic debit bounce charges", incurred by it from the Policyholders, on account of bounce of electronic debit towards premium payment, by Policyholders. The Company may recover these additional costs by requisitioning additional payments from the Policyholders.

6.16. Mode of payment of benefits: All Benefits under this Policy shall be payable in the manner and currency allowed / permitted under the Regulations. All amounts payable either to or by the company and shall be payable in Indian currency.

6.17. Valid discharge: Any discharge given by the person to whom the benefits are payable, or by any person authorized by the person to whom the benefits are payable, in writing, in respect of the Benefits payable under this Policy shall constitute a valid discharge to RLIC in respect of such payment. The Company's liability under the Policy shall be discharged by such payment and the Company shall not be required to see the application of the monies so paid.

6.18. Limitation of liability: The maximum liability of the Company under this Policy shall not, in any circumstances, exceed the aggregate amount of the relevant Benefits payable hereunder.

6.19. Incontestability: In the event of any inconsistency or conflict between the terms and conditions contained in the Policy Document and the terms and conditions contained in any other document such as marketing material or sales brochure, the terms and conditions contained in the Policy Document shall prevail over all other terms and conditions contained in various other documents.

6.20. Fraud: In case fraud or misrepresentation, the Policy shall be cancelled immediately by paying the Surrender Value, subject to the fraud or misrepresentation being established by the insurer in accordance with Section 45 of the Insurance Act, 1938.

6.21. Loss of Policy Document: If the Policy Document is lost or destroyed, then at the request of the Policyholder, the Company, if satisfied, that the Policy Document has been lost or destroyed, will issue a copy Policy Document duly endorsed to show that it is issued following the loss or destruction of the original Policy Document. The Company reserves the right to make such investigations into and call for such evidence of the loss or destruction of the Policy Document at the expense of the Policyholder as it considers necessary before issuing a copy of the Policy Document. The Company may charge a fee for the issuance of a copy of the Policy Document.

Upon the issuance of a copy Policy Document, the original Policy Document will cease to have any legal effect

It is hereby understood and agreed that the Policyholder will protect the Company and hold the Company harmless against any claims, costs, expenses, awards or judgments arising out of, or howsoever, connected with the original Policy Document or arising out of the issuance of a copy of

the Policy Document.

6.22. Waiver: Failure or neglect by either party to enforce at anytime the provisions of this Policy shall not be construed or be deemed to be waiver of either party's right herein nor in anyway affect the validity of the whole or any part of this Policy nor prejudice either party's right to take subsequent action.

6.23. Governing laws and jurisdiction: This Policy shall be governed by and interpreted in accordance with the laws of India. All actions, suits and proceedings under this Policy shall be subject to the exclusive jurisdiction of the courts of law within whose territorial jurisdiction the registered office of the Company is situated.

6.24. Electronic transaction: The Policyholder shall adhere to and comply with all such terms and conditions as prescribed by RLIC from time to time and hereby agree and confirm that all transactions effected by or through facilities for effecting remote transactions including the Internet, World Wide Web, electronic data interchange, call centers, tele-service operations (whether voice, video, data or combination thereof) or by means of electronic, computer, automated machines network or through other means of telecommunication, established by or on behalf of RLIC, for and in respect of the Policy or its terms, or RLIC's other products and services, shall constitute legally binding and valid transactions when done in adherence to and in compliance with RLIC's terms and conditions for such facilities, as may be prescribed from time to time.

6.25. Notice under the Policy: Any of the notices required to be issued in terms of this Policy may be issued, either by issuing individual notices to the Policyholder, including by electronic mail, SMS, telephonic conversation and/or facsimile, or by issuing a general notice, including by publishing such notices in the newspapers and/or on the Company's website.

i. In case of the Proposer

As per the details specified by the Policyholder in the Proposal Form/Change of address intimation submitted by him, notices and instructions are sent through various modes such as electronic mail and/or facsimile, or by issuing a general notice, including by publishing such notices in newspapers and/or on RLIC's website.

ii. In case of the Company

To Reliance Life Customer Service

Address: Reliance Life Insurance Company Limited, H Block, 1st Floor, Dhirubhai Ambani Knowledge City

Navi Mumbai, Maharashtra 400710, India

Reliance Life representatives may be contacted between 10am- 5pm, Monday to Friday on Customer Care number 1800 300 08181 (Toll free) or 30338181 (local call charges apply).

Email: rlife.customerservice@relianceada.com

6.26. Entire Contract: This Policy comprises the terms and conditions set forth in this Policy document, Policy Schedule, and the endorsements, if any, made on or applicable to this Policy, which shall form an integral part and the entire contract, evidenced by this Policy. The liability of RLIC is at all times subject to the terms and conditions of this Policy and the endorsements made from time to time.

The Provision of this policy cannot be changed or varied except by a policy endorsement signed by an officer of the Company authorized for the purpose. This Policy Document constitutes the complete contract of insurance. This Policy Document cannot be changed or varied by any one (including an insurance advisor) except by a Policy endorsement in writing signed by an officer of the Company authorized for this purpose.

This contract is entered into between Reliance Life Insurance Company Limited and the Policyholder named in the Schedule to this Policy and sets forth the terms and conditions governing this Policy. The Policy is issued on the basis of the Proposal and Declaration from the Proposer and on the express understanding that the said Proposal and Declaration and any statements made or referred to therein shall be part and parcel of this Policy.

6.27. Taxes, duties and levies and disclosure of information:

a) This Policy, and the Benefits and the surrender value payable under this Policy shall be subject to the Regulations, including taxation laws in effect from time to time. All taxes, duties, levies or imposts including without limitation any sale, use, value added, service or other taxes, as may be imposed now or in future by any authority (collectively "Taxes") on the Premiums and other sums payable to RLIC or RLIC's obligations under the Policy or the Benefits payable under the Policy or in any way relating to this Policy, shall be borne and paid by the Policyholder or the Person to whom Benefits payable, as the case may be. The Premium and other sums payable under or in relation to the Policy do not include the Taxes. If, however, the applicable law imposes such Taxes on RLIC, then RLIC shall have the right to recover the same from the Policyholder or the Person to whom Benefits payable. The Company may at its sole discretion raise a specific demand to pay the said direct / Indirect taxes or levies or may deduct the said direct / Indirect taxes or levies from Surrender, Death and /or Maturity Benefits payable to You and /or Your Claimant(s).

b) The persons receiving the Benefits shall be solely liable for complying with all the applicable provisions of the Regulations, including taxation laws, and payment of all applicable Taxes. Except as otherwise required by law, RLIC shall not be responsible for any Tax liability arising in relation to this Policy or the Benefits payable in terms of this Policy. In any case where RLIC is obliged to account to the revenue authorities for any Taxes applicable to this Policy or the Benefits payable under this Policy, RLIC shall be entitled to deduct such Taxes from any sum payable under this Policy, and deposit the amount so deducted with the appropriate governmental or regulatory authorities.

c) In any case where RLIC is obliged to disclose to the revenue or other regulatory authorities any information concerning the Policy, including information concerning the Premium and the Benefits under this Policy, RLIC shall be entitled to disclose the required information to the appropriate governmental or regulatory authorities.

d) It shall be the responsibility of the Policyholder to satisfy himself and ensure that the payment of the Additional Premium does not adversely affect his entitlement or claim for tax benefits, if any, available or admissible under this Policy.

6.28. Payment of taxes, stamp duties: The Company reserves the right to deduct all applicable taxes, duties and surcharges on premiums and benefits, as per the applicable rate imposed by the Government authorities from time to time.

6.29. Grievance Redressal

Step 1: If you are dissatisfied with any of our services, please feel free to contact us –

Step 1.1: 24 hours contact centre: 30338181 (Local call charges apply) & 1800 300 08181(Toll free) or Email: rlife.customerservice@relianceada.com OR

Step 1.2: Contact the Customer Service Executive at your nearest branch (this is a link for branch location details) of the Company OR

Step 1.3: Write to

Reliance Life Customer Care

Reliance Life Insurance Company Limited, H Block, 1st Floor, Dhirubhai Ambani Knowledge City, Navi Mumbai, Maharashtra 400710. India

If your complaint is unresolved for more than 10 days,

Step 2: Please contact our Branch Manager, who is also the Local Grievance Redressal Officer at your nearest branch.

If you are unhappy with the solution offered,

Step 3: Write to Head of Customer Care at rlife.headcustomerservice@relianceada.com or at the address mentioned above.

If you are still not happy with the solution offered,

Step 4: Write to our Grievance Redressal Officer, Head of Legal & Compliance at rlife.gro@relianceada.com or at the address mentioned above.

If the issues remain unresolved; a further reference may be made to the Insurance Ombudsman in terms of Rule 12 & 13 of the Redressal of Public Grievance Rules, 1998.

6.30. Procedure for filing complaint with the Insurance Ombudsman: While we expect to satisfactorily resolve your grievances, you may also at any time approach the Insurance Ombudsman. The Insurance Ombudsman may receive and consider any complaints under Rule 12 & 13 of the Redressal of Public Grievance Rules, 1998; which relates to any partial or total repudiation of claims by RLIC, any dispute in regard to premium paid or payable in terms of the Policy, any dispute on the legal construction of the policies insofar as such disputes relates to claims; delay in settlement of claims and non-issue of any insurance document to customers after receipt of premium. On the above grounds, any person may himself or through his legal heirs make a complaint in writing to the Insurance Ombudsman within whose jurisdiction the RLIC branch is located. The complaint shall be in writing duly signed by the complainant or through his legal heirs and shall state clearly the name and address of the complainant, the name of the branch, the fact giving rise to complaint supported by documents, if any, the nature and extent of the loss caused to the complainant and the relief sought from the Ombudsman.

However as per Provision of Rule 13(3) of the Redressal of Public Grievance Rules, 1998 the complaint to the Ombudsman can be made:

i. Only if the grievance has been rejected by the Grievance Redressal Machinery of the Insurer or complainant has not received any reply within 30 days from the date of complaint or the complainant is not satisfied with the reply given to him by the Company

ii. The complaint has been filed within one year from the date of rejection by the Company

iii. If it is not simultaneously under any litigation

The detailed list of the Ombudsmen is provided in Annexure A of this Policy Document.

The Policyholder's attention is invited to Sections 41 and 45 of the Insurance Act, 1938, which are reproduced below for reference:

6.31. Prohibition of rebate (Section 41 of the Insurance Act, 1938)

1) No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the Policy, nor shall any person taking out or renewing or continuing a Policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer:

Provided that acceptance by an insurance agent of commission in connection with a Policy of life insurance taken out by himself on his own life shall not be deemed to be acceptance of a rebate of premium within the meaning of this sub-section if at the time of such acceptance the insurance agent satisfies the prescribed conditions establishing that he is a bona fide insurance agent employed by the insurer.

2) Any person making default in complying with the provisions of this section shall be punishable with fine which may extend to five hundred rupees.

6.32. Policy not to be called in question on ground of mis-statement after two years (Section 45 of the Insurance Act, 1938): No Policy of life insurance effected before the commencement of this Act shall after the expiry of two years from the date of commencement of this Act and no Policy of life insurance 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 statement made in the proposal 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, 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 Policy holder and that the Policy holder 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 Policy shall be deemed to be called in question merely because the terms of the Policy are adjusted on subsequent proof that the age of the life insured was incorrectly stated in the proposal.

About Reliance Life Insurance

Reliance Life Insurance Company Limited is a licensed life insurance company registered with the Insurance Regulatory & Development Authority (IRDA) Registration No. 121. Reliance Life Insurance Company Limited offers you products that fulfill your savings and protection needs. Our aim is to emerge as a transnational Life Insurer of global scale and standard.

Tax laws are subject to change, consulting a tax expert is advisable.

Insurance is the subject matter of the solicitation

Reliance Life Insurance Company Limited (Reg. No. 121)

Registered Office: H Block, 1st Floor, Dhirubhai Ambani Knowledge City, Navi Mumbai, Maharashtra -400710, India

Corporate Office: 9th floor/ 10th floor, Building No. 2, R-Tech Park, Nirlon Compound, Next to Hub Mall, Behind Oracle Building, Goregaon (East), Mumbai - 400 063

For more information call us at our 24 x 7 Call Centre number - 30338181(Local call charges apply) or our Toll Free Number 1800 300 08181 or email us at: rlife.customerservice@relianceada.com

Visit us at www.reliance.life.com

UIN for Reliance's Guaranteed Money Back Plan: 121N084V02

Annexure A: Insurance 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. 079-27546840 Fax:079-27546142 E-mail: ins.omb@rediffmail.com	Gujarat , UT of Dadra & Nagar Haveli, Daman and Diu
BHOPAL	Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor, Malviya Nagar, BHOPAL 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 Tel. 0674-2596455 Fax - 0674-2596429 E-mail: iobbsr@dataone.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.: 0172-2706468 Fax: 0172-2708274 E-mail: ombchd@yahoo.co.in	Punjab , Haryana, Himachal Pradesh, Jammu & Kashmir, UT of Chandigarh
CHENNAI	Office of the Insurance Ombudsman, Fatima Akhtar Court , 4th Floor, 453 (old 312) Anna Salai, Teynampet, CHENNAI – 600 018 Tel. 044-24333668/5284 Fax: 044-24333664 Email: chennaiinsuranceombudsman@g-mail.com	Tamil Nadu, UT–Pondicherry Town and Karaikal (which are part of UT of Pondicherry)
NEW DELHI	Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Bldg. Asaf Ali Road, NEW DELHI – 110 002 Tel. 011-23239633 Fax: 011-23230858 E-mail: iobdelraj@rediffmail.com	Delhi & Rajasthan
GUWAHATI	Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar Overbridge , S.S. Road, GUWAHATI – 781 001 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, Opp. Saleem Function Palace, A.C.Guards, Lakdi-Ka-Pool, HYDERABAD – 500 004 Tel. 040-65504123 Fax: 040-23376599 E-mail: insombudhyd@gmail.com	Andhra Pradesh, Karnataka and UT of Yanam – a part of the UT of Pondicherry
KOCHI	Office of the Insurance Ombudsman, 2nd Floor, CC 27/2603, Pulinat Building, Opp. Cochin Shipyards, M.G. Road, ERNAKULAM – 682 015 Tel: 0484-2358759 Fax: 0484-2359336 E-mail: iokochi@asianetindia.com	Kerala , UT of (a) Lakshadweep , (b) Mahe – a part of UT of Pondicherry
KOLKATA	Office of the Insurance Ombudsman, 4th Floor, Hindusthan Bldg. Annexe, 4, C.R. Avenue, KOLKATA -700 072 . Tel: 033 22124346/(40); Fax 033 22124341; Email: iombsbpa@bsnl.in	West Bengal, Bihar, Jharkhand and UT of Andaman & Nicobar Islands, Sikkim
LUCKNOW	Office of the Insurance Ombudsman, Jeevan Bhawan, Phase 2, 6th Floor, Nawal Kishore Road, Hazratganj, LUCKNOW – 226 001 Tel.: 0522-2231331 Fax: 0522-2231310 E-mail: insombudsman@rediffmail.com	Uttar Pradesh and Uttaranchal
MUMBAI	Office of the Insurance Ombudsman, Jeevan Seva Annexe, 3rd Floor, S.V.Road, Santacruz (W), MUMBAI – 400 054 Tel: 022-26106928; Fax: 022-26106052; E-mail: ombudsmanmumbai@gmail.com	Maharashtra , Goa

