

Policy Document - Terms and Conditions of your policy

ICICI Pru Cash Bak – 20

In this Policy, the investment risk in investment portfolio is borne by the Policyholder.

Unique Identification Number (UIN) allotted by Insurance Regulatory and Development Authority (IRDA):

UIN: ICICI Pru Cash Bak-20: 105N005V02

Accident and Disability Benefit Rider: 105B001V01

Accident Benefit Rider: 105B012V01

Critical Illness Benefit Rider: 105B002V01

1. Benefits Payable subject to the policy being in force

Maturity / Death Benefit: (1) The Sum Assured as specified in the policy certificate shall be payable together with guaranteed additions and vested bonuses, if any, on the death of the Life Assured before the maturity date of Policy. In the event of the Life Assured having opted for Critical Illness Benefit and the said benefit has become payable, the benefits paid thereunder shall be deemed to be the payment of the Death Benefit referred to above, upto the extent of the Sum Assured under the Critical Illness Benefits. No rights, interests and claims shall accrue to the Life Assured or any one claiming through him in respect of this Policy to the extent of Critical Illness Sum Assured. However, where the Sum Assured as shown in the Policy Certificate and the Sum Assured under the Critical Illness Benefit is equivalent the Policy shall terminate and no rights, interests and claims shall accrue to the Life Assured or any one claiming through him in respect of the Policy. (2) On the Life Assured surviving the periods mentioned below, computed with reference to the Date of Commencement of Policy mentioned in Policy Certificate, the corresponding amount mentioned shall be payable: **On Life Assured surviving a period of 4 yrs:** 10% amount shall be payable expresses as percentage of the Sum Assured. **On Life Assured surviving a period of 8 yrs:** 15% amount shall be payable expresses as percentage of the Sum Assured. **On Life Assured surviving a period of 12 yrs:** 20% amount shall be payable expresses as percentage of the Sum Assured. **On Life Assured surviving a period of 16 yrs:** 25% amount shall be payable expresses as percentage of the Sum Assured. **On Life Assured surviving a period of 20 yrs i.e. Maturity Date of policy:** 50% amount shall be payable expresses as percentage of the Sum Assured. The guaranteed additions and vested bonuses, if any, shall be paid along with the amount mentioned in Column (2) on the Life Assured surviving the maturity date of Policy. **Supplementary Benefits:** As specified in the Annexure and are applicable if opted for.

2. Payment of premiums: (i) Premiums are payable on the due dates and at the rate mentioned in the Policy Certificate or at such altered rate as is payable in terms of Condition 1 (ii) of the General Conditions of this Policy Document. However, a grace period of not more than 30 days, where the mode of payment of premium is other than monthly and not more than 15 days in the case of monthly mode is allowed. The benefits payable on death / critical illness under this Policy during the grace period will be paid after deduction of the premium falling due during the then current policy year. (ii) Premiums are payable on the due dates mentioned in the Policy Certificate or within the grace period allowed without any obligation on the Company to notify the Life Assured / policyholder of the due dates. If the premiums are not paid on the due dates or even during the grace period, the Policy lapses and no benefits shall be payable thereunder except to the extent indicated in condition 3 below. (iii) You may pay premium through any of the following modes: **a.** Cash **b.** Cheque **c.** Demand Draft **d.** Pay Order **e.** Banker's cheque **f.** Internet facility as approved by the Company from time to time **g.** Electronic Clearing System / Direct Debit **h.** Credit or Debit cards held in your name. *Amount and modalities will be subject to our rules and relevant legislation or regulation.*

Not allowed for Monthly modes.

3. Paid-up Value: If premiums have been paid for at least three consecutive years and any subsequent premium has not been paid within the grace period, the Sum Assured under this Policy shall stand reduced to a paid-up sum as shown in the table below, to which will be added the guaranteed additions and vested bonuses, if any, provided that such paid-up sum together with the guaranteed additions and vested bonuses is not less than five hundred Rupees.

If premiums are paid for 3 yrs: Paidup assurance per thousand S.A. – 390

If premiums are paid for 4 yrs: Paidup assurance per thousand S.A. – 560*

If premiums are paid for 5 yrs: Paidup assurance per thousand S.A. – 335

If premiums are paid for 6 yrs: Paidup assurance per thousand S.A. – 480

If premiums are paid for 7 yrs: Paidup assurance per thousand S.A. – 615

If premiums are paid for 8 yrs: Paidup assurance per thousand S.A. – 740*

If premiums are paid for 9 yrs: Paidup assurance per thousand S.A. – 440

If premiums are paid for 10 yrs: Paidup assurance per thousand S.A. – 545

If premiums are paid for 11 yrs: Paidup assurance per thousand S.A. – 645

If premiums are paid for 12 yrs: Paidup assurance per thousand S.A. – 735*

If premiums are paid for 13 yrs: Paidup assurance per thousand S.A. – 425

If premiums are paid for 14 yrs: Paidup assurance per thousand S.A. – 500

If premiums are paid for 15 yrs: Paidup assurance per thousand S.A. – 570

If premiums are paid for 16 yrs: Paidup assurance per thousand S.A. – 635*

If premiums are paid for 17 yrs: Paidup assurance per thousand S.A. – 345

If premiums are paid for 18 yrs: Paidup assurance per thousand S.A. – 400

If premiums are paid for 19 yrs: Paidup assurance per thousand S.A. – 450

* This paid-up value Table is applicable where the Survival Benefit has not fallen due at the end of the year specified. However if Survival Benefit has fallen due at the end of the specified year the paid – up value shall be Rs.180, Rs.330, Rs.350 and Rs. 290 per thousand Sum Assured at the end of the 4th, 8th, 12th and 16th year respectively. The paid-up Policy shall not be allocated any further guaranteed additions nor participate in any future allocation of profits by way of bonuses. The Policy will be entitled only to the paid-up Sum together with the guaranteed additions and vested bonuses, if any, on the maturity date of Policy or on the previous death of the Life Assured. A paid up Policy is not entitled to any of Supplementary Benefits mentioned in the Annexure. No survival benefit will become payable after the policy has acquired paid-up status.

4. Guaranteed Surrender Value: If premiums are paid for at least three consecutive years, the policy acquires a Surrender Value which is equal to thirty five percent of the premiums paid, excluding the premiums paid during the first year of the policy; all extra premiums paid and the premiums paid for the supplementary benefits. Any survival benefits already paid will also be reduced from this value. The cash value of the guaranteed additions and vested bonuses, if any, will also be allowed. The Policy which has acquired a Surrender Value can be surrendered. The surrender shall extinguish all the rights, benefits and interests under the Policy.

5. General Provisions: Where the policy has been issued on the life of a minor, the policy will automatically vest on him on his attaining majority. The Policy will continue to vest on the proposer, if the policy is proposed by HUF on the life of a minor.

Policy Document

GENERAL CONDITIONS

1. Age: i. The premium payable under the policy has been calculated on the basis of the age of the Life Assured as declared in the Proposal. In case the age of the Life Assured has not been admitted by the Company, the Proposer / Life Assured shall furnish such proof of age of the Life Assured as is acceptable to the Company and have the age admitted. ii. In the event the age so admitted ("the correct age") is found to be different from the age declared in the Proposal, without prejudice to the Company's other rights and remedies including those under the Insurance Act, 1938, one of the following actions shall be taken: **a)** If the correct age of the Life Assured is such as would have made the Life Assured uninsurable under the plan of assurance specified in the Policy Certificate, the plan of assurance shall stand altered to such plan of assurance as is generally granted by the Company for the correct age of the Life Assured, subject to the terms and conditions as are applicable to that plan of assurance. If it is not possible to grant any other plan of assurance, the policy shall stand cancelled from the date of issue of the policy and the premium paid shall be refunded subject to the deduction of the expenses incurred by the Company on the policy. **b)** If the correct age of the Life Assured is found to be higher than the age declared in the Proposal, then

subject to the underwriting evaluation at point of such knowledge, if the Life Assured is found insurable then, the premium payable under the policy shall be altered corresponding to the correct age of the Life Assured ("the corrected premium") from the date of commencement of the policy and the Proposer / Life Assured shall pay to the Company the accumulated difference between the corrected premium and the original premium from the commencement of the policy up to the date of such payment with interest at such rate and in such manner as is charged by the Company for late payment of premium. If the Life Assured fails to pay the difference of premium with interest thereon as mentioned above, the same shall be treated as a debt due to the Company and shall be recovered with further interest thereon as mentioned above from the moneys payable under the policy. Where the Life Assured is not found insurable, then the company would return the premiums (excluding extra premiums, if any) paid under the policy and terminate the policy. **c)** If the correct age of the Life Assured is found to be lower than the age declared in the Proposal, the premium payable under the policy shall be altered corresponding to the correct age of the Life Assured ("the corrected premium") from the date of commencement of the policy and the Company may, at its discretion, refund without interest, the accumulated difference between the original premium paid and the corrected premium.

2. Bonus: Guaranteed additions and bonuses (if applicable, under with profit policies) will be payable in terms of the prospectus and Company's internal guidelines and policies and Insurance Regulatory and Development Authority (IRDA) rules and regulations.

3. Revival of the policy: A policy, which has lapsed for non-payment of premium within the days of grace may be revived subject to the following conditions: **a)** The application for revival is made within 5 years from the date of the first unpaid premium and before the Maturity Date of policy; **b)** The applicant being the Proposer / Life Assured furnishes, at his own expense, satisfactory evidence of health of the Life Assured; **c)** The arrears of premiums together with interest at such rate as the company may charge for late payment of premium are paid; **d)** The revival of the policy may be on terms different from those applicable to the policy before it lapsed; and **e)** The Revival will take effect only on it being specifically communicated by the Company to the Life Assured or the applicant.

4. Assignment and nomination: i. An assignment of this policy may be made by an endorsement upon the policy itself or by a separate instrument signed in either case by the assignor specifically stating the fact of assignment and duly attested. The first assignment may be only made by the Life Assured or the Proposer. Such assignment shall be effective, as against the Company, from and upon the service of a written notice upon the Company and the Company recording the assignment in its books. Assignment will not be permitted where the policy is under the Married Women's Property Act, 1874. ii. The Life Assured, where he is the holder of the policy, may, at any time before the Maturity Date of policy, make a nomination for the purpose of payment of the moneys secured by the policy in the event of his death. Where the nominee is a minor, he 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 Maturity Date of policy shall also be communicated to the Company. The Company does not express itself upon the validity or accepts any responsibility on the assignment or nomination in recording the assignment or registering the nomination or change in nomination.

5. Suicide: If the Life assured whether sane or insane commits suicide, within one year from the date of issue of this policy, the policy shall be void and the premiums paid hereunder will be refunded after deducting the expenses incurred by the Company for the issue of the policy.

6. Special Condition for Occupation to be taken up by a minor: In case of a policy being on the life of a minor or a student upon his attaining majority and engaging in a particular occupation, he must give information to the ICICI Prudential Life Insurance Co. Ltd. of his chosen employment and if the occupation is such that it is considered necessary to charge an appropriate occupational extra premium, such premium would be intimated to the life assured by the Company and the life assured would be required to pay such extra premium.

7. Incontestability: In accordance to the Section 45 of the Insurance Act, 1938, no Policy of life insurance 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 of insurance or any report of a medical officer, or a 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 statements was on material matter or suppressed facts which it was material to disclose and that it was fraudulently made by the Policyholder and that the Policyholder 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 the 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.

8. Notices: Any notice, direction or instruction given under the Policy shall be in writing and delivered by hand, post, facsimile or e-mail to: **In case of the Policyholder or Nominee:** As per the details specified by the Policyholder or Nominee in the Proposal Form or Change of Address intimation submitted by him **In case of the Company:** Address: Customer Service Desk, ICICI Prudential Life Insurance Company Limited, Vinod Silk Mills Compound, Chakravathy Ashok Nagar, Ashok Road, Kandivali (East), Mumbai-400 101. Facsimile: 022 67100803 / 67170805. E-mail: lifeline@iciciprulife.com. Notice and instructions sent by the Company to the Policyholders will be deemed served 7 days after posting or immediately upon receipt in the case of hand delivery, facsimile or e-mail.

9. Legislative Changes: The terms and conditions including the premiums and the benefits payable are subject to variation in accordance with the relevant legislations. All provisions stated in this Policy are subject to the current guidelines issued by the Regulator as on date. All future guidelines that may be issued by the Regulator from time to time will also be applicable to this Policy.

10. Payment of Claim: Before payment of any claim under the Policy, the Company shall require the delivery of the original of this Policy document the following documents establishing the right of the claimant or claimants to receive payment. **1.** Claimant's statement. **2.** Death certificate issued by the local and medical authority in case of death claim. **3.** Medical evidence in case of health and disability rider claims. **4.** Any other documents or information as may be required by the Company for processing of the claim depending on the cause of the claim.

11. Electronic Transactions: The Customer shall adhere to and comply with all such terms and conditions as the Company may prescribe from time to time, and that all transactions effected by or through facilities for conducting remote transactions including the Internet, World Wide Web, electronic data interchange, call centres, teleservice 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 the Company, for and in respect of the Policy or its terms, or the Company's other products and services, shall constitute legally binding and valid transactions when done in adherence to and in compliance with the Company's terms and conditions for such facilities, as may be prescribed from time to time.

12. Customer Service: (a) **For any clarification or assistance,** the Policyholder may contact our advisor or call our Customer Service Representative (between 9.00 a.m. to 9.00 p.m, Monday to Saturday; excluding national holidays) on the numbers mentioned on the reverse of the Policy Folder or on our website: www.iciciprulife.com. Alternatively the Policyholder may communicate with us at the Customer Service Desk details mentioned earlier. The Company's website must be checked for the updated contact details. (b) **Grievance Redressal Officer:** If the Policyholder does not receive any resolution or the resolution provided is not satisfactory, the Policyholder may get in touch with our designated Grievance Redressal Officer (GRO). For GRO contact details please refer to the "Grievance Redressal" section on www.iciciprulife.com. (c) **Senior Grievance Redressal Officer:** If the Policyholder does not receive any resolution or the resolution provided by the GRO is not satisfactory, the Policyholder may write to our Senior Grievance Redressal Officer (SGRO). For SGRO contact details please refer to the "Grievance Redressal" section on www.iciciprulife.com. (d) **Grievance Redressal Committee:** In the event that any complaint / grievance addressed to the SGRO is not resolved, the Policyholder may escalate the same to the Grievance Redressal Committee at the following address: ICICI Prudential Life Insurance Company Limited, Vinod Silk Mills Compound, Chakravathy Ashok Road, Ashok Nagar, Kandivali (East), Mumbai - 400 101. (e) **Insurance Ombudsman:** i. The Central Government has established an office of the Insurance Ombudsman for

redressal of grievances with respect to life insurance policies. **ii.** As per provision 13(3) of the Redressal of Public Grievances Rules 1998, the complaint to the Ombudsman can be made only if: **(1)** The grievance has been rejected by the Grievance Redressal Machinery of the Insurance Company **(2)** Within a period of one year from the date of rejection by the Insurance Company **(3)** If any other Judicial authority has not been approached **iii.** In case if the Policyholder is not satisfied with the decision / resolution of the Company, the Policyholder may approach the Insurance Ombudsman at the address given below if the grievance pertains to • any partial or total repudiation of claims or • the premium paid or payable in terms of the policy • any claim related dispute on the legal construction of the policies in so far as such dispute relate to claims or • delay in settlement of claims • non-issue of policy document to customers after receipt of premiums **iv.** The complaint to the office of the Insurance Ombudsman should be made in writing duly signed by the complainant (Policyholder) or by his legal heirs with full details of the complaint and the contact information of complainant. Given below are details of the ombudsman office considering address of the Policyholder mentioned in the application form. The Insurance Regulatory and Development Authority's or the Company's website must be checked for the updated contact details.

1. Ahmedabad: Insurance Ombudsman, Office of the Insurance Ombudsman, 2nd Floor, Ambica House, Nr. C.U. Shah College, Ashram Road, AHMEDABAD-380 014. **Jurisdiction:** State of Gujarat, UT of Dadra & Nagar Haveli, Daman and Diu. Tel: 079-27546840, Fax: 079-27546142, E-mail: ins.omb@rediffmail.com

2. Bhopal: Insurance Ombudsman, Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd floor, 6, Malviya Nagar, Opp. Airtel, Near New Market, BHOPAL (M.P.)-462 023. **Jurisdiction:** States of Madhya Pradesh & Chhattisgarh. Tel: 0755-2569201, Fax: 0755-2769203, E-mail: bimalokpalbhopal@airtelmail.in

3. Bhubneshwar: Insurance Ombudsman, Office of the Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR-751 009. **Jurisdiction:** State of Orissa. Tel: 0674-2596455, Fax: 0674-2596429, E-mail: iobbsr@dataone.in

4. Chandigarh: Insurance Ombudsman, Office of the Insurance Ombudsman, S.C.O. No.101-103, 2nd Floor, Batra Building, Sector 17-D, CHANDIGARH-160 017. **Jurisdiction:** State of Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir, UT of Chandigarh. Tel: 0172-2706468, Fax: 0172-2708274, E-mail: ombchd@yahoo.co.in

5. Chennai: Insurance Ombudsman, Office of the Insurance Ombudsman, Fathima Akhtar Court, 4th Floor, 453 (old 312), Anna Salai, Neynampet, CHENNAI-600 018. **Jurisdiction:** State of Tamil Nadu, UT-Pondicherry Town and Karaikal (which are part of UT of Pondicherry) Tel: 044-24333668 /5284, Fax: 044-24333664, E-mail: insombud@md4.vsnl.net.in

6. New Delhi: Insurance Ombudsman, Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Bldg., Asaf Ali Road, NEW DELHI-110 002. **Jurisdiction:** States of Delhi & Rajasthan. Tel: 011-23239633, Fax: 011-23230858, E-mail: iobdelraj@rediffmail.com

7. Guwahati: Insurance Ombudsman, Office of the Insurance Ombudsman, "Jeevan Nivesh", 5th Floor, Near Panbazar Overbridge, S.S. Road, GUWAHATI-781 001 (ASSAM). **Jurisdiction:** States of Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura. Tel: 0361-2132204/5, Fax: 0361-2732937, E-mail: ombudsmananghy@rediffmail.com

8. Hyderabad: Insurance Ombudsman, Office of the Insurance Ombudsman, 6-2-46, 1st Floor, Main Court, A.C. Guards, Lakdi-Ka-Pool, HYDERABAD-500 004. **Jurisdiction:** States of Andhra Pradesh, Karnataka and UT of Yanam – a part of the UT of Pondicherry. Tel: 040-65504123, Fax: 040-23376599, E-mail: insombudhyd@gmail.com

9. Kochi: Insurance Ombudsman, Office of the Insurance Ombudsman, 2nd Floor, CC 27/2603, Pulina Bldg., Opp. Cochin Shipyard, M.G. Road, ERNAKULAM-682 015. **Jurisdiction:** State of Kerala, UT of (a) Lakshadweep, (b) Mahe – a part of UT of Pondicherry. Tel: 0484-2358759, Fax: 0484-2359336, E-mail: iokochi@asianetindia.com

10. Kolkata: Insurance Ombudsman, Office of the Insurance Ombudsman, North British Bldg., 29, N.S. Road, 4th Floor, KOLKATA-700 001. **Jurisdiction:** States of West Bengal, Bihar, Jharkhand and UT of Andaman & Nicobar Islands, Sikkim. Tel: 033-22134866, Fax: 033-22134868, E-mail: iombkol@vsnl.net

11. Lucknow: Insurance Ombudsman, Office of the Insurance Ombudsman, Jeevan Bhawan, Phase-2, 6th Floor, Nawal Kishore Road, Hazaratganj, LUCKNOW-226 001. **Jurisdiction:** State of Uttar Pradesh and Uttaranchal. Tel: 0522-2231331, Fax: 0522-2231310, E-mail: insombudsman@rediffmail.com

12. Mumbai: Insurance Ombudsman, Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S.V. Road, Santacruz(W), MUMBAI-400 054. **Jurisdiction:** States of Maharashtra, Goa. Tel: 022-26106928, Fax: 022-26106052, E-mail: ombudsmanmumbai@gmail.com

ANNEXURE

Supplementary Benefits applicable if opted for

A Accident and Disability Benefit: (I) Accident Benefit: Subject to the conditions set out below, if whilst the policy is in force for the full Sum Assured, the Life Assured is involved in an accident, at any time before the expiry of the period for which premiums are payable or before the policy anniversary on which his age nearer birthday is 65, whichever is earlier, resulting in his death the Company agrees to pay the person / s to whom the benefits are payable under the Policy an additional amount equal to the Accident and Disability Benefit Sum Assured (hereinafter referred to as "accidental cover") under this supplementary benefit. In the event of such death occurring while the Life Assured is using, as a fare paying passenger, authorised public mass surface transport namely bus or train, operating under terms of such authorisation, the additional amount payable under this benefit shall be enhanced to twice the amount of accidental cover under this supplementary benefit. The conditions subject to which this benefit is payable, are: **(a)** the death due to accident must be caused by violent, external and visible means; **(b)** the death due to accident is not caused: **(i)** by attempted suicide or self inflicted injuries while sane or insane, or whilst the Life Assured is under the influence of any narcotic substance or drug or intoxicating liquor; or **(ii)** by engaging in aerial flights (including parachuting and skydiving) other than as a fare paying passenger on a licensed passenger-carrying commercial aircraft (being a multi-engined aircraft) operating on a regular scheduled route; or **(iii)** by the Life Assured committing any breach of law; or **(iv)** due to war, whether declared or not or civil commotion; or **(v)** by engaging in hazardous sports / pastimes, i.e. taking part in (or practising for) boxing, caving, climbing, horse racing, jet skiing, martial arts, mountaineering, off piste skiing, pot holing, power boat racing, underwater diving, yacht racing or any race, trial or timed motor sport. **(c)** the accident shall result in bodily injury or injuries to the Life Assured independently of any other means; **(d)** such injury or injuries shall, within 180 days of its occurrence, directly and independently of any other means cause the death of the Life Assured; and **(e)** the death of the Life Assured shall occur before the expiry of the period for which premiums are payable or before the policy anniversary on which his age nearer birthday is 65, whichever is earlier; However, if the period of 180 days from the occurrence of the accident is current on the policy anniversary on which the Life Assured attains age 65 nearer birthday, the accidental cover shall be payable on death during that period. **II. Disability Benefit:** Subject to the conditions set out below, if whilst the policy is in force for the full Sum Assured, the Life Assured is involved in an accident, at any time before the expiry of the period for which premiums are payable or before the policy anniversary on which his age nearer birthday is 65, whichever is earlier, resulting in his total and permanent disablement, which will disable him to work or follow any occupation or profession, then with effect from and including the date of such disability (hereinafter called "Disability Date") the Company agrees to provide the following benefit: **1.** Commencing from the first anniversary of the Disability Date and on each anniversary thereafter pay in ten annual installments, each equal to one-tenth of the amount of accidental cover under this Supplementary Benefit. In the event of the policy resulting in a claim before the receipt by the Life Assured of the last such installment, then the installments remaining unpaid shall become payable along with the claim. **2.** The premiums falling due on or after the disability date in respect of the Sum Assured under the basic plan equal to the accidental cover and not exceeding Rs 10,00,000/-, shall be waived. The balance amount of premium, if any, shall be continued to be payable. **3.** The conditions subject to which the benefits are payable, are: **(a)** the disability must be caused by violent, external and visible means; **(b)** the disability is not caused, **(i)** by attempted suicide or self inflicted injuries while sane or insane, or whilst the Life Assured is under the influence of any narcotic substance or drug or intoxicating liquor; or **(ii)** by engaging in aerial flights (including parachuting and skydiving) other than as a fare paying passenger on a licensed passenger-carrying commercial aircraft operating (being a multi engined aircraft) on a regular scheduled route; or **(iii)** by the Life Assured committing any breach of law; or **(iv)** due to war, whether declared or not or civil commotion; or **(v)** by engaging in hazardous sports / pastimes, i.e. taking part in (or

practising for) boxing, caving, climbing, horse racing, jet skiing, martial arts, mountaineering, off piste skiing, pot holing, power boat racing, underwater diving, yacht racing or any race, trial or timed motor sport. **(c)** If there are any other benefits payable under this supplementary benefit, then all such benefits shall cease to be available on and after the Disability Date. **(d)** The Disability must result within 180 days from the date of occurrence of the accident.

(e) Written notice of any claim for the benefit shall be served on the Company within 120 days of the Disability Date and the admission of any claim for Disability Benefit will be subject to such proof (at the expense of the Life Assured), as the Company may reasonably require, that the Life Assured has become totally and permanently disabled. Such proof shall be furnished to the Company along with the submission of the notice of the disability.

(f) The Company reserves the right to call for such medical examinations as they may require and for this purpose, may advise the Life Assured to submit himself to one or more medical examinations conducted by medical practitioner / s appointed by the Company, the cost of which shall be borne by the company. **(g)** The payment of the Disability Benefit and the continuation thereof shall be subject to such proof, as the Company may require, that the Life Assured has been totally and permanently disabled and has continued to be totally and permanently disabled. If such proof is not furnished or if the Life Assured shall refuse or fail to submit for medical examination / s when required to do so, or if at any time the Company is satisfied that a claim for benefit under this clause has been wrongly admitted, the Life Assured shall be deemed to have ceased to be totally and permanently disabled immediately from the date on which the Company has requested for the supply of such proof or submission to medical examination/s or, as the case may be, from the date on which the Life Assured is communicated of wrongful admission of the claim, and thereafter the policy shall continue under such terms and conditions as the Company may decide. For the purpose of this benefit, a person shall only be regarded as "Totally and Permanently Disabled" if that person, due to accident or injury has suffered a loss such as: • the loss by physical separation of two limbs or the complete and irremediable loss of sight in both eyes or the loss by physical separation of one limb accompanied by the complete and irremediable loss of sight in one eye (where limb means an entire hand or foot), or • has been continuously disabled for a period of six consecutive months and has been determined by the Company, after consideration of the reports and other information supplied by the Company's own medical practitioner, appointed to examine that person, to be incapacitated to such an extent as to render that person unlikely ever to resume work or to attend any gainful employment or occupation.

B Accident Benefit Rider: Subject to the conditions set out below, if whilst the policy is in force for the full Sum Assured, the Life Assured is involved in an accident, at any time before the expiry of the period for which premiums are payable or before the policy anniversary on which his age nearer birthday is 65, whichever is earlier, resulting in his death the Company agrees to pay the person/s to whom the benefits are payable under the Policy an additional amount equal to the Accident Benefit Rider Sum Assured (hereinafter referred to as "accidental death cover") under this supplementary benefit. The conditions subject to which this benefit is payable, are: **(a)** the death due to accident must be caused by violent, external and visible means; **(b)** the death due to accident is not caused: **i.** by attempted suicide or self inflicted injuries while sane or insane, or whilst the Life Assured is under the influence of any narcotic substance or drug or intoxicating liquor; or **ii.** by engaging in aerial flights (including parachuting and skydiving) other than as a fare paying passenger on a licensed passenger-carrying commercial aircraft (being a multi-engined aircraft) operating on a regular scheduled route; or **iii.** by the Life Assured committing any breach of law; or **iv.** due to war, whether declared or not or civil commotion; or **v.** by engaging in hazardous sports / pastimes, i.e. taking part in (or practising for) boxing, caving, climbing, horse racing, jet skiing, martial arts, mountaineering, off piste skiing, pot holing, power boat racing, underwater diving, yacht racing or any race, trial or timed motor sport. **(c)** the accident shall result in bodily injury or injuries to the Life Assured independently of any other means; **(d)** such injury or injuries shall, within 180 days of its occurrence, directly and independently of any other means cause the death of the Life Assured; and **(e)** the death of the Life Assured shall occur before the expiry of the period for which premiums are payable or before the policy anniversary on which his age nearer birthday is 65, whichever is earlier; However, if the period of 180 days from the occurrence of the accident is current on the policy anniversary on which the Life Assured attains age 65 nearer birthday, the accidental death cover shall be payable on death during that period.

C Critical Illness Benefit: Provided the policy is in force for the full Sum Assured, the Life Assured is diagnosed to be suffering from a Critical Illness (as defined below) after six months from the Date of issue of Policy but before the policy anniversary on which he attains the age 65 years nearer birthday, or before the expiry of the period for which the premiums are payable, whichever is earlier, the Sum Assured under this Policy shall fall to be paid together with guaranteed additions and bonuses vested till then, subject to conditions set out below: **(1) The benefit shall not be payable in respect of any illness other than those defined as Critical Illness, nor shall it apply or be payable in respect of any of those said illnesses the symptoms of which have occurred or which has been diagnosed or for which the insured person received treatment, prior to policy issue date or during the first 6 months from the date of issue of policy or during the first 6 months from the date of commencement of this rider.** **(2) The Critical Illness shall not have been caused by the existence of Acquired Immune Deficiency Syndrome or the presence of any Human Immuno-deficiency Virus Infection in the person of the Life Assured, self inflicted injury, drug abuse, failure to follow medical advice, war, whether declared or not and civil commotion, pregnancy, breach of law, aviation other than as a fare paying passenger in a commercial licenced aircraft (being a multi-engined aircraft), hazardous sports and pastimes;** **(3) Written Notice of any claim for the benefit must be given to the Company within 60 days of such diagnosis.** **(4) The admission of any claim for this benefit will be subject to satisfactory proof that** **(5) On the payment of the Sum Assured under the Critical Illness Benefit together with guaranteed additions and the vested bonuses if any, but subject to any claim the Company may have in respect of the moneys payable under the policy, the contract as evidenced by the Policy, shall be deemed to have been discharged to the extent of the Sum Assured under this benefit. No rights, interests or claims shall enure to the Life Assured or anyone claiming through him in respect of the Sum Assured under Critical Illness benefit so discharged; However, where the Sum Assured as shown in the Policy Certificate and the Sum Assured under the Critical Illness Benefit is equivalent the Policy shall terminate and no rights, interests and claims shall enure to the Life Assured or any one claiming him in respect of the Policy.** **(6) The benefit shall automatically cease to be available when the policy is surrendered for cash or converted into a paid-up policy for a reduced Sum Assured;** **(7) The maximum aggregate of Critical Illness Benefit granted by the Company under this and all the other policies of the Life Assured shall not exceed Rs 10,00,000/- (Rupees ten lakhs)**

Note 1: A "Critical Illness" shall mean any one of the following illnesses as defined separately hereunder occurring after 6 months from the date of issue of policy: **(a) Cancer:** A malignant tumour characterized by uncontrolled growth and spread of malignant cells and the invasion of tissue. The diagnosis must be histologically confirmed. The term Cancer includes Leukaemia but excludes the following: **(i)** All tumours which are histologically described as pre-malignant, non-invasive or carcinoma in situ; **(ii)** All forms of lymphoma in presence of any Human Immuno-deficiency Virus; **(iii)** Kaposi's Sarcoma in the presence of any Human Immuno-deficiency virus; **(iv)** Any Skin Cancer other than invasive malignant melanoma; and **(v)** Early Prostate Cancer which is histologically described as T1 (including T1a and T1b) or another equivalent or lesser classification. **(b) Coronary Artery By-Pass Graft Surgery (CABGS):** the undergoing of open heart surgery on the advice of a Consultant Cardiologist to correct narrowing or blockage of one or more coronary arteries with by-pass grafts; Angiographic evidence to support the necessity of the surgery will be required. Balloon angioplasty, laser or any catheter-based procedures are not covered. **(c) Heart attack:** The death of a portion of heart muscle as a result of inadequate blood supply as evidenced by an episode of typical chest pain, new electrocardiographic changes and by elevation of the cardiac enzymes. Diagnosis must be confirmed by a consultant physician. **(d) Kidney failure:** End stage renal failure presenting as chronic irreversible failure of both kidneys to function, as a result of which either regular renal dialysis or renal transplant is undertaken. Evidence of end stage kidney disease must be provided and the requirement for dialysis or transplantation must be confirmed by a consultant physician.

(e) Major Organ Transplant: The actual undergoing as a recipient of a transplant of heart, liver, lung, pancreas or bone marrow as a result of chronic irreversible failure. Evidence of end stage disease must be provided and the requirement for transplantation must be confirmed by a consultant physician.

(f) Stroke: A cerebrovascular incident resulting in permanent neurological damage. Transient ischaemic attacks are specifically excluded.

(g) Paralysis: Complete and permanent loss of the use of two or more limbs as a result of injury or disease of the brain or spinal cord. To establish permanence the paralysis must normally have persisted for at least 6 months.

(h) Aorta-surgery: The actual undergoing of surgery (including key-hole type) for a disease or injury of the aorta needing excision and surgical replacement of the diseased part of the aorta with a graft

(i) Heart valve replacement / surgery: The undergoing of open heart surgery, on the advice of a consultant cardiologist, to replace or repair one or more heart valves

Note 2: "Diagnosis" shall mean diagnosis made by a physician based on such specific evidence as referred to in the definition of the particular Critical Illness concerned or, in the absence of such specified reference, based upon radiological, clinical, histological or laboratory tests acceptable to the Company. In event of any doubt regarding the appropriateness or correctness of the diagnosis, the Company shall have the right to call for an examination of the Life Assured on the evidence used in arriving at such diagnosis, by a Medical Specialist appointed by the Company and the opinion of such specialist as to such diagnosis shall be considered binding on both the Life Assured and the Company. "Physician" shall mean any person registered with the Indian Medical Council to render medical or surgical services, but excluding a person who is the Life Assured himself or a blood relative of the Life Assured.

Premium Review: The premium for this benefit is guaranteed for five years only from the date of commencement of Policy. The Company reserves the right to carry out a general review of the experience from time to time and change the premium as a result of such review. The Company will give notice in writing about the change and the Life Assured will have the option not to pay any increased premium. In such a case the benefit will be appropriately reduced from the effective date of the change in premium and the Company will advise the Life Assured accordingly.

"The policy shall be subject to and be governed by this policy document and the terms and conditions of the schedule enclosed herewith including every endorsement by the Company and shall together form a single contract" (Ver A02: 11)