

This is a summary of the Master Policy issued to the Master Policyholder and contains important terms and conditions about the Benefits which are applicable to the Member/ Annuitant(s).

1. **Accident** means sudden, unforeseen and involuntary event caused by external, visible and violent means.
2. **Age** means age at last birthday.
3. **Annuitant** means the Member/Primary Annuitant/Secondary Annuitant entitled to receive the Annuity as per the option chosen.
4. **Annuity** means a series of payments to be made to the Annuitant by the company basis the Purchase Price payable to the company by the Master Policyholder. The annuity amount chosen at policy inception is guaranteed for life of the Member and would be payable on every annuity anniversary based on the frequency of annuity as chosen by the Member at inception, i.e. Yearly, Half-Yearly, Quarterly or Monthly anniversary. Annuity Frequency once selected cannot be changed except in Freelook Period.
5. **Appointee** means the person appointed by the Member to receive the benefits payable under the Policy till the Member's Nominee is a minor.
6. **Certificate of Insurance** means the certificate issued by the Company to Member to confirm the Member's annuity details under the Master Policy.
7. **Claimant** means the person entitled to receive the Policy benefits and includes the member, the annuitant, the nominee, the assignee, the legal heir, the legal representative(s) or the holder(s) of succession certificate as the case may be.
8. **Distance Mode** means 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 service (SMS) (iii) electronic mode which includes e-mail, internet and interactive television (DTH) (iv) physical mode which includes direct postal mail and newspaper and magazine inserts and (v) solicitation through any means of communication other than in person.
9. **Group** means a group of Members accepted by the Company as constituting a Group for the purposes of the Master Policy.
10. **Joint Life** means the type of annuity options that can be selected where the Member can opt for the annuity to be received by a Secondary Annuitant after his/her death.
11. **Master Policy** shall mean the policy document, any supplementary contracts or endorsements therein, whenever executed, any amendments thereto agreed to and signed by Us, the proposal form provided by Members, the Schemes Rules, the quotation of the Company for the Scheme and the individual enrolment forms, if any, of the insured Members, which together constitute the entire contract between Us and the Master Policyholder.
12. **Member** is someone who is covered under the Master Policy as per the Rules of the Scheme and is therefore eligible for the benefits under this Policy. In case of Joint Life annuity options, the Member shall be the same as Primary Annuitant.
13. **Member Policy** means the annuity option selected by the Member.
14. **Nominee** means the person named in the Certificate of Insurance who has been nominated by the Member to receive benefit payable under the Policy on the death of the Annuitant(s), as applicable.
15. **Primary Annuitant** refers to the Primary person/Member entitled to receive the annuity payment under Joint Life Annuity options.
16. **Proposal for Annuity** means an application to be furnished to the Company for availing of Benefits in respect of a Member.
17. **Purchase Price/Premium** shall mean the amount paid by the Master Policyholder to purchase the Annuity instalment for each Member including Top up purchase price, if any.
18. **Secondary Annuitant** refers to the person entitled to receive the annuity payment, in the event of death of the Primary Annuitant, Secondary Annuitant can only be the spouse/child/parent or sibling of the Primary Annuitant.
19. **Spouse** shall mean the named legal spouse at the time of purchase of annuity.
20. **Surrender** means complete withdrawal/termination of the Member Policy by the Member.
21. **Surrender Value** means an amount, if any, that becomes payable in case of surrender in accordance with the terms and conditions of the Policy.

21. Annuity Options: The Master policy offers choice of 11 annuity options to Member. The Annuity payable to Member shall depend upon the Annuity option chosen by Member vide the Proposal for Annuity at inception. Annuity would be payable as per the annuity frequency as chosen by the Member at inception, i.e. Yearly, Half-Yearly, Quarterly or Monthly anniversary. The Annuity payable shall be basis the Annuity rates prevailing at the time of payment of Purchase Price by the Master Policyholder, frequency and Annuity Option as opted for by the Member. The Annuity payout to Member shall commence from the Date of First Annuity payment as mentioned in the Certificate of Insurance. The various Annuity options available under the Master Policy are described as below:

21.1. Life Annuity: The Member shall receive annuity for life. On death of the Member, the annuity payment with respect to the Member shall cease and the Member Policy shall terminate and thereafter Company shall not be liable for any payment whatsoever in respect of such deceased Member.

21.2 Life Annuity with an annual increase of 5%: The Member shall receive annuity for life. Annuity amount increases annually by a simple rate of 5% p.a. of the annuity amount at inception. Upon death of Member, the Member Policy shall terminate and thereafter Company shall not be liable for any payment whatsoever in respect of such deceased Member.

21.3 Life Annuity with Return of Balance Purchase Price: The Member shall receive annuity for life. Upon death of the Member, balance Purchase Price shall be payable to the Nominee/Legal heir. Balance Purchase Price will be equal to the Purchase Price less sum total of the annuities already paid till the death of the Member. If the sum total of annuities paid exceeds the Purchase Price, no benefit will be paid on death. On death of the Member and payment of balance Purchase Price if any to the Nominee/Legal heir, the Member Policy shall terminate and the Company thereafter shall not be liable for any payment whatsoever in respect of such deceased Member or Nominee/Legal heir.

21.4 Life Annuity with Return of Purchase Price: The Member shall receive annuity for life. On death of the Member, the Purchase Price shall be payable to the Nominee/Legal heir. Upon such payment to the Nominee/Legal heir, the Member Policy shall terminate and the Company thereafter shall not be liable for any payment whatsoever in respect of such deceased Member or Nominee/Legal heir.

21.5 Life Annuity with Return of 50% Purchase Price: The Member shall receive annuity for life. On death of the Member, 50% of the Purchase Price shall be payable to the Nominee/Legal heir. Upon such payment to the Nominee/Legal heir, the Member Policy shall terminate and the Company thereafter shall not be liable for any payment whatsoever in respect of such deceased Member or Nominee/Legal heir.

21.6 Life Annuity with Return of 75% Purchase Price: The Member shall receive annuity for life. On death of the Member, 75% of the Purchase Price shall be payable to the Nominee/Legal heir. Upon such payment to the Nominee/Legal heir, the Member Policy shall terminate and the Company thereafter shall not be liable for any payment whatsoever in respect of such deceased Member or Nominee/Legal heir.

21.7 Annuity guaranteed for a period of 5 years, 10 years or 15 years and thereafter for life : The annuity shall be payable for a certain period as selected by the Member (5, 10 or 15 years) under the Proposal of Annuity. If the Member survives the chosen selected period (5, 10 or 15 years) the annuity payments will continue while the Member is alive. If, however, the Member dies before all the annuity instalments due during the selected period (5, 10 or 15 years) have been paid, the balance annuity instalments payable for and during the selected period shall be paid to the Nominee/Legal heir. The Member Policy shall terminate on the said payment and the Company shall not be liable for paying annuity beyond the selected period.

21.8 Life Annuity with return of Purchase Price on Critical illness (CI) or Permanent Disability due to accident (PD) or Death: This option pays the Member annuity for life till first occurrence of any of the 7 specified CI or PD before the age of 80, or death.

Purchase Price would be payable on the earlier of:

1. Occurrence of any of the 7 Specified CI or PD before the member attains age of 80 years; or
2. Death of the Member

In case of no occurrence of any of the 7 Specified CI or PD till the member attains age of 80 years, annuity will continue to be paid till the annuitant survives. On or after the Member attains age 80 years, the Purchase Price is paid to the nominee/legal heir only on death of the Member.

Details of benefits payable are as below:

Age of the annuitant	Event	Benefit payable	Recipient of Benefit
All ages	For life of the annuitant, provided, no benefits on specified CI, PD or death have been claimed	Annuity for life	Annuitant
Before the annuitant attains 80 years of age	On occurrence of specified CI or PD	Purchase Price	Annuitant; The Member Policy terminates after the said payment.
	On death	Purchase Price	Nominee/Legal heir; The Member Policy terminates after the said payment.
On or after the annuitant attains 80 years of age	On occurrence of specified CI or PD	Nil	Not applicable
	On death	Purchase Price	Nominee/Legal heir; The Member Policy terminates after the said payment.

The Member Policy shall terminate on said payment and the Company shall not be liable for making any further payment.

Definitions, conditions of Critical Illness (CI) and Permanent Disability due to Accident (PD)

a) Cancer of Specified Severity

A malignant tumor characterized by the uncontrolled growth and spread of malignant cells with invasion and destruction of normal tissues. This diagnosis must be supported by histological evidence of malignancy. The term cancer includes leukemia, lymphoma and sarcoma.

The following are excluded:

- i. All tumors which are histologically described as carcinoma in situ, benign, pre-malignant, borderline malignant, low malignant potential, neoplasm of unknown behavior, or non-invasive, including but not limited to: Carcinoma in situ of breasts, Cervical dysplasia CIN-1, CIN - 2 and CIN-3.
- ii. Any non-melanoma skin carcinoma unless there is evidence of metastases to lymph nodes or beyond;
- iii. Malignant melanoma that has not caused invasion beyond the epidermis;
- iv. All tumors of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least clinical TNM classification T2N0M0
- v. All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below;
- vi. Chronic lymphocytic leukaemia less than RAI stage 3

- vii. Non-invasive papillary cancer of the bladder histologically described as TaN0M0 or of a lesser classification,
- viii. All Gastro-Intestinal Stromal Tumors histologically classified as T1N0M0 (TNM Classification) or below and with mitotic count of less than or equal to 5/50 HPFs;

b) First Heart Attack of specified severity (Myocardial Infarction):

The first occurrence of heart attack or myocardial infarction, which means the death of a portion of the heart muscle as a result of inadequate blood supply to the relevant area. The diagnosis for Myocardial Infarction should be evidenced by all of the following criteria:

- i. A history of typical clinical symptoms consistent with the diagnosis of acute myocardial infarction (For e.g. typical chest pain)
- ii. New characteristic electrocardiogram changes
- iii. Elevation of infarction specific enzymes, Troponins or other specific biochemical markers.

The following are excluded:

- i. Other acute Coronary Syndromes
- ii. Any type of angina pectoris
- iii. A rise in cardiac biomarkers or Troponin T or I in absence of overt ischemic heart disease OR following an intra-arterial cardiac procedure.

c) Open Chest CABG:

The actual undergoing of heart surgery to correct blockage or narrowing in one or more coronary artery(s), by coronary artery bypass grafting done via a sternotomy (cutting through the breast bone) or minimally invasive keyhole coronary artery bypass procedures. The diagnosis must be supported by a coronary angiography and the realization of surgery has to be confirmed by a cardiologist.

The following are excluded:

- i. Angioplasty and/or any other intra-arterial procedures

d) Kidney Failure Requiring Regular Dialysis:

End stage renal disease presenting as chronic irreversible failure of both kidneys to function, as a result of which either regular renal dialysis (haemodialysis or peritoneal dialysis) is instituted or renal transplantation is carried out. Diagnosis has to be confirmed by a specialist medical practitioner.

e) Stroke Resulting In Permanent Symptoms:

Any cerebrovascular incident producing permanent neurological sequelae. This includes infarction of brain tissue, thrombosis in an intracranial vessel, haemorrhage and embolisation from an extracranial source. Diagnosis has to be confirmed by a specialist medical practitioner and evidenced by typical clinical symptoms as well as typical findings in CT Scan or MRI of the brain. Evidence of permanent neurological deficit lasting for at least 3 months has to be produced.

The following are excluded:

- i. Transient ischemic attacks (TIA)
- ii. Traumatic injury of the brain
- iii. Vascular disease affecting only the eye or optic nerve or vestibular functions.

f) Major Organ/ Bone Marrow Transplant:

The actual undergoing of a transplant of:

- i. One of the following human organs: heart, lung, liver, kidney, pancreas, that resulted from irreversible end-stage failure of the relevant organ, or
- ii. Human bone marrow using haematopoietic stem cells. The undergoing of a transplant has to be confirmed by a specialist medical practitioner.

The following are excluded:

- i. Other stem-cell transplants
- ii. Where only islets of langerhans are transplanted

g) Permanent Paralysis of limbs:

Total and irreversible loss of use of two or more limbs as a result of injury or disease of the brain or spinal cord. A specialist medical practitioner must be of the opinion that the paralysis will be permanent with no hope of recovery and must be present for more than 3 months.

h) Permanent Disability due to accident:

Permanent Disability will be established if the life assured is unable to perform 3 out of the 6 following activities of daily work:

- i. Mobility: The ability to walk a distance of 200 meters on flat ground.
- ii. Bending: The ability to bend or kneel to touch the floor and straighten up again and the ability to get into a standard saloon car, and out again.
- iii. Climbing: The ability to climb up a flight of 12 stairs and down again, using the handrail if needed.
- iv. Lifting: The ability to pick up an object weighing 2kg at table height and hold for 60 seconds before replacing the object on the table.
- v. Writing: The manual dexterity to write legibly using a pen or pencil, or type using a desktop personal computer keyboard.
- vi. Blindness – permanent and irreversible - Permanent and irreversible loss of sight to the extent that even when tested with the use of visual aids, vision is measured at 3/60 or worse in the better eye using a Snellen eye chart.

For the purpose of PD to apply, the disability should have lasted for at least 180 days without interruption from the date of disability and must be deemed permanent by a Company empanelled medical practitioner.

21.9 Joint Life, Last Survivor without Return of Purchase Price: Annuity shall be paid for the life of the Primary Annuitant. On death of the Primary Annuitant, the annuity shall be payable for the life of the named Secondary Annuitant. On death of the named Secondary Annuitant, the Member Policy shall terminate and thereafter the Company shall not be liable for making any further payments. In case where the named Secondary Annuitant has predeceased at the time of death of the Primary Annuitant, the Member Policy shall terminate on the death of the Primary Annuitant and no benefits shall be payable on the death of the Primary Annuitant.

21.10 Joint Life, Last Survivor with Return of Purchase Price: Annuity shall be paid for the life of the Primary Annuitant. On death of the Primary Annuitant, the annuity shall be payable for the life of the named Secondary Annuitant. On death of the named Secondary Annuitant after the payment of annuity has commenced on his/her life, the Purchase Price shall become payable to Nominee/Legal heir. The Member Policy shall terminate on said payment to the Nominee/Legal heir, and the Company shall not be liable for making any further payment. Where the named Secondary Annuitant has predeceased the Primary Annuitant, the Purchase Price shall be payable to the Nominee/Legal heir on the death of the Primary Annuitant and the Member Policy shall thereafter terminate.

21.11 Joint Life, Last Survivor with Return of Purchase Price in parts: Annuity shall be paid for the life of the Primary Annuitant. On death of the Primary Annuitant, after the annuity has commenced, the annuity shall be payable for the life of the named Secondary Annuitant. Upon death of either of the Annuitant(s), 50% of the Purchase Price shall be paid to the surviving Annuitant. On death of the last survivor, balance 50% of the Purchase Price shall be payable to the Nominee/Legal heir and the Member Policy shall terminate and no further benefits would be payable. In the event of death of both the Annuitants at the same time 100% of the Purchase Price shall be paid to the Nominee/Legal heir.

The Member Policy shall terminate on said payment to the Nominee/Legal heir and the Company shall not be liable for making any further payment.

NOTE:

- No loans shall be available under this plan
- In case of any conflict between this Member Policy document and Master Policy document, the terms mentioned in Master policy document shall be final and shall prevail.

22. Surrender

Surrender of Member policy by a member/annuitant shall be allowed only for options with return of Purchase Price under the circumstances mentioned below:

- i. For Life Annuity with Return of Purchase Price on Critical illness (CI) or Permanent Disability due to accident (PD) or Death annuity option, if the annuitant is diagnosed with any of the critical illnesses mentioned in annuity option 8 beyond the age of 80 years.
- ii. For other annuity options with return of Purchase Price, if either of the annuitant(s) is diagnosed with any of the critical illnesses mentioned in annuity option 8

For conditions i and ii mentioned above, the annuitant will need to produce relevant documents confirming the critical illness condition to the satisfaction of the Company's empanelled medical practitioner.

- iii. If the Primary Annuitant/Secondary Annuitant is shifting to another country permanently as evidenced in their visa or citizenship documents.

Surrender Value will be payable if the Member/ annuitant voluntarily terminates the annuity by satisfying any of the above conditions. After the payment of the Surrender Value by the Company, the Member policy shall terminate with all rights and benefits thereunder.

Surrender Value = Surrender Value Factor X Purchase Price

Here, to determine the Surrender Value, the Purchase Price considered shall be the Purchase Price that is payable as per Annuity option selected by the Member at inception

Surrender Value Factor is 95%

23. Top Up: The Member/Master Policyholder can choose to top-up the annuity by paying an additional premium, which will be calculated using the then prevailing annuity rates and the age of the annuitant at that time.

In case of a top-up of annuity, the new purchase price will be added to the original purchase price for the purpose of giving the annuitant the benefit of 'high purchase price benefit'. The prevailing annuity rate for revised purchase price slab will be applicable for the additional purchase price. The original annuity amount shall remain unchanged.

24. Tax Benefits:

Provisions related to Tax deduction (TDS) and Tax benefits under the policy may be as per the prevailing provisions of The Income Act 1961. We recommend that to seek professional advice for applicability of tax benefit on premium paid and benefits received. Goods and Services tax and applicable cesses will be charged extra, as per applicable rates. The tax laws are subject to amendments from time to time.

25. Existence Check

The Company may require the Annuitant to prove his survival as on the day on which an annuity falls due in such manner as it may deem fit. In case if the annuity option selected provides for Joint Life or return of Purchase Price option, Company may require the Secondary Annuitant to furnish the death certificate and / or provide such other information / document in this regard as may be required by the Company.

The existence check will be carried out once every year by us as per the company policies and norms. An intimation letter will be sent along with a detailed life verification certificate. Member are requested to fill in the details in the life verification certificate and get it attested from an authorized personnel i.e. Post

Master / Principal of the nearest College or School / Manager of Nationalized or Scheduled Bank. The duly completed certificate must reach our office before the due date as mentioned in the covering letter. If the existence check formality is not completed within 2 months from the date of intimation, the Annuity payment will be kept on hold till we receive the duly filled & attested life verification certificate from Member.

26. Annuity Claim

The Claimant will raise claims to avail Benefits with the following documents:

- a) Duly filled claim form
- b) Original Certificate of Insurance
- c) Claimant's statement
- d) Death certificate issued by the local authority in case of death claim
- e) In case of Critical illness or Total and Permanent Disability benefit - Definition Fulfilment documents are required
 - List of Definition Fulfilment documents –
 - a. Medical records (Admission notes, Test & surgery reports, Discharge Summary etc.)
 - b. All consultation notes in connection with the diagnosis of the illness
 - c. All diagnostic reports such as blood test, X-ray, ECG & CT scan, etc.
 - d. Disability Certificate from Govt. Authority
 - e. Copy of FIR/ Panchanama/ Inquest Report
 - f. Copy of Driving License if Life Assured was driving Vehicle at the time of accident
 - g. Treating Doctor Certificate confirming the degree of disability after 180 days from diagnosis of disability
 - f) Any other documents or information as may be required by the Company for processing of the claim depending on the cause of the claim.
 - g) The Company reserves the right to call for additional information, documents or particulars, in such form and manner as the Company would prescribe, and the Benefits would be paid only after receipt of such additional information, documents or particulars.

All claims payments will be made in Indian currency in accordance with the prevailing exchange control regulations and other relevant laws and regulations in India.

27. Free look period

The Member has the option to review the policy after receipt of the Certificate of Insurance. If the Member is not satisfied with the terms and conditions of this Member Policy, the Certificate of Insurance needs to be returned to the Company for cancellation of the policy with reasons within:

- i. 15 days from the date of receipt of the Certificate of Insurance
- ii. 30 days from the date of receipt of the Certificate of Insurance, in case of electronic policies or policies purchased through Distance Mode. If the policy is purchased online or through Distance Marketing.

Distance Marketing means 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 service (SMS) (iii) electronic mode which includes e-mail, internet and interactive television (DTH) (iv) physical mode which includes direct postal mail and newspaper and magazine inserts and (v) solicitation through any means of communication other than in person.

On cancellation of the Member Policy during the free-look period the treatment will be as below:

1. **Policies purchased out of proceeds of a group superannuation plan of ICICI Prudential Life Insurance Co. Ltd. where Open Market Option is available:** Premium paid less stamp duty and annuity paid, if any, will be transferred back to the.
2. **Policies purchased out of proceeds of a group superannuation plan of other insurance companies:** Premium paid less stamp duty and annuity paid, if any, will be transferred back to that insurance company.
3. **Policies purchased out of NPS proceeds:** Premium paid less stamp duty and annuity paid, if any, will be transferred back to Central Record keeping Agency (CRA) from where the premium was received.

4. **Other Policies:** The Company will return the premium paid after deduction of stamp duty and annuity paid, if any under the Member Policy.

The Member Policy shall terminate on payment of the said amount and all rights, benefits and interests under this Member Policy will stand extinguished.

Cancellation of policy in free-look period is not allowed for policies purchased from the proceeds of a group superannuation plan of ICICI Prudential Life Insurance Co. Ltd. where Open Market Option is not available and it is mandatory to annuitize the vesting benefit.

Any other changes such as change of nomination, address change, bank details change, bank payout mode change or name change due to spelling mistake etc. can be done anytime during the life time of the Member Policy.

28. Nomination

Nomination shall be allowed for a member. Nomination will be governed by Section 39 of the Insurance Act, 1938 as amended from time to time. Please refer to Annexure I for details on this section.

29. Assignment

Assignment will be governed by Section 38 of the Insurance Act, 1938 as amended from time to time. Please refer to Annexure II for details on this section.

30. Incontestability

Incontestability will be as per Section 45 of the Insurance Act, 1938 as amended from time to time. Please refer to Annexure III for details on this section.

31. Non-Disclosure & Fraud

Non-disclosure and Fraud will be as per Section 45 of the Insurance Act, 1938 as amended from time to time. Please refer to Annexure III for details on this section.

The Policy is subject to the terms and conditions as mentioned in the Policy document and is governed by the Laws of India.

32. Discharge of liability

A receipt duly signed by the Master Policyholder or any other person authorized by the Master Policyholder will be a valid and sufficient discharge for us. The encashment of the cheque or credit of the proceeds to the bank account of Master Policyholder or person directed by the Master Policyholder will be sufficient discharge for the Company.

33. Our communication address is: Customer Service Desk, ICICI Prudential Life Insurance Co. Ltd., Ground Floor & Upper Basement, Unit No. 1A & 2A, Raheja Tipco Plaza, Rani Sati Marg, Malad (East), Mumbai- 400097 Maharashtra. E-mail: myannuity@iciciprulife.com, Telephone/ Facsimile: 022 42058222

Fraud or Misrepresentation - Non-disclosure and Fraud will be as per section 45 of the Insurance Act, 1938.

Please refer the Master Policy document or contact the Master Policy Holder for more details on the terms and conditions.

34. Grievance Redressal Officer:

If You do not receive any resolution from Us or if You are not satisfied with Our resolution, You may get in touch with Our designated grievance redressal officer (GRO) at gro@iciciprulife.com or 1860 266 7766.

Address: ICICI Prudential Life Insurance Company Limited,
Ground Floor & Upper Basement,
Unit No. 1A & 2A, Raheja Tipco Plaza,
Rani Sati Marg, Malad (East),
Mumbai-400097

For more details please refer to the "Grievance Redressal" section on www.iciciprulife.com.

i. Grievance Redressal Committee:

If You do not receive any resolution or if You are not satisfied with the resolution provided by the GRO, You may escalate the matter to Our internal grievance redressal committee at the address mentioned below:

ICICI Prudential Life Insurance Co. Ltd.
Ground Floor & Upper Basement,
Unit No. 1A & 2A, RahejaTipco Plaza,
Rani Sati Marg, Malad (East),Mumbai- 400097
Maharashtra.

If you are not satisfied with the response or do not receive a response from us within 15 days, you may approach the Grievance Cell of the Insurance Regulatory and Development Authority of India (IRDAI) on the following contact details:

IRDAI Grievance Call Centre (IGCC) TOLL FREE NO: **155255 (or) 1800 4254 732**
Email ID: complaints@irdai.gov.in

You can also register your complaint online at igms.irda.gov.in

Address for communication for complaints by fax/paper:

Consumer Affairs Department

Insurance Regulatory and Development Authority of India

Survey No. 115/1, Financial District, Nanakramguda, Gachibowli,

Hyderabad, Telangana State – 500032

Insurance Ombudsman:

The Central Government has established an office of the Insurance Ombudsman for redressal of grievances with respect to life insurance policies. As per Insurance Ombudsman Rules, 2017 and Insurance Ombudsman (Amendment) Rules, 2021, the Ombudsman shall receive and consider complaints or disputes relating to:

- a. delay in settlement of claims, beyond the time specified in the regulations, framed under the Insurance Regulatory and Development Authority of India Act, 1999;
- b. any partial or total repudiation of claims;
- c. disputes over premium paid or payable in terms of insurance policy;
- d. misrepresentation of policy terms and conditions at any time in the policy document or policy contract;
- e. legal construction of insurance policies in so far as the dispute relates to claim;
- f. policy servicing related grievances against insurers and their agents and intermediaries;
- g. issuance of life insurance policy, general insurance policy including health insurance policy which is not in conformity with the proposal form submitted by the proposer;
- h. non-issuance of insurance policy after receipt of premium in life insurance and general insurance including health insurance; and
- i. any other matter arising from non-observance of or non-adherence to the provisions of any regulations made by the Authority with regard to protection of policyholders' interests or otherwise, or of any circular, guideline or instruction issued by the Authority, or of the terms and conditions of the policy contract, in so far as such matter relates to issues referred to in clauses (a) to (h).

Manner in which complaint to be made

1. Any person who has a grievance against an insurer or insurance broker, may himself or through his legal heirs, nominee or assignee, make a complaint in writing to the Insurance Ombudsman within whose territorial jurisdiction the branch or office of the insurer or the insurance broker, as the case may be complained against or the residential address or place of residence of the complainant is located.

2. The complaint shall be in writing, duly signed or made by way of electronic mail or online through the website of the Council for Insurance Ombudsmen by the complainant or through his legal heirs, nominee or assignee and shall state clearly the name and address of the complainant, the name of the branch or office of the insurer against whom the complaint is made, the facts giving rise to the complaint, supported by documents, the nature and extent of the loss caused to the complainant and the relief sought from the Insurance Ombudsman.
3. No complaint to the Insurance Ombudsman shall lie unless—
 - a) the complainant has made a representation in writing or through electronic mail or online through website of the insurer or insurance broker concerned or the insurer named in the complaint and—
 - i. either the insurer or insurance broker, as the case may be had rejected the complaint; or
 - ii. the complainant had not received any reply within a period of one month after the insurer or insurance broker, as the case may be received his representation; or
 - iii. the complainant is not satisfied with the reply given to him by the insurer or insurance broker, as the case may be;
 - b) The complaint is made within one year—
 - i. after the order of the insurer rejecting the representation is received; or
 - ii. after receipt of decision of the insurer or insurance broker, as the case may be which is not to the satisfaction of the complainant;
 - iii. after expiry of a period of one month from the date of sending the written representation to the insurer or insurance broker, as the case may be if the insurer or insurance broker, as the case may be named fails to furnish reply to the complainant.
4. The Ombudsman shall be empowered to condone the delay in such cases as he may consider necessary, after calling for objections of the insurer or insurance broker, as the case may be against the proposed condonation and after recording reasons for condoning the delay and in case the delay is condoned, the date of condonation of delay shall be deemed to be the date of filing of the complaint, for further proceedings under these rules.
5. No complaint before the Insurance Ombudsman shall be maintainable on the same subject matter on which proceedings are pending before or disposed of by any court or consumer forum or arbitrator.
6. The Council for Insurance Ombudsmen shall develop a complaints management system, which shall include an online platform developed for the purpose of online submission and tracking of the status of complaints made under rule 14

The Ombudsman shall not award compensation exceeding more than Rupees Thirty Lakhs (including relevant expenses, if any).

We have given below the details of the existing offices of the Insurance Ombudsman. We request You to regularly check our website at www.iciciprulife.com or the website of the IRDAI at www.irdai.gov.in for updated contact details.

Office of the Ombudsman	Address	Contact Details	Areas of Jurisdiction
AHMEDABAD	Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor, Tilak Marg, Relief Road, Ahmedabad - 380 001	Tel.: - 079 - 25501201/02/05/06 Email: bimalokpal.ahmedabad@cioins.co.in	Gujarat , Dadra & Nagar Haveli, Daman and Diu
BENGALURU	Office of Insurance Ombudsman, Jeevan Soudha Building, PID No. 57-27-N-19, Ground Floor, 19/19, 24th Main Road, JP Nagar, 1st Phase, Bengaluru – 560078	Tel No: 080 - 26652048 / 26652049 Email: bimalokpal.bengaluru@cioins.co.in	Karnataka
BHOPAL	Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp. Airtel Office, Near New Market, Bhopal – 462 003.	Tel.: - 0755-2769201, 2769202 Fax : 0755-2769203 Email: bimalokpal.bhopal@cioins.co.in	Madhya Pradesh & Chhattisgarh
BHUBANESHWAR	Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar – 751 009.	Tel.: - 0674-2596455/2596461, Fax : 0674-2596429 Email: bimalokpal.bhubaneswar@cioins.co.in	Orissa
CHANDIGARH	Office of the Insurance Ombudsman, S.C.O. No. 101, 102 & 103, 2nd Floor, Batra Building, Sector 17 – D, Chandigarh – 160 017	Tel.: 0172 - 2706196 / 2706468 Fax: 0172 – 2708274 Email: bimalokpal.chandigarh@cioins.co.in	Punjab, Haryana(excluding Gurugram, Faridabad, Sonapat and Bahadurgarh) Himachal Pradesh, Union Territories of Jammu & Kashmir, Ladakh & Chandigarh.
CHENNAI	Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, Chennai – 600 018.	Tel.: 044 - 24333668 / 24335284 Fax: 044 – 24333664 Email: bimalokpal.chennai@cioins.co.in	Tamil Nadu, Tamil Nadu Puducherry Town and Karaikal (which are part of Puducherry).
DELHI	Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002.	Tel.: 011 - 23232481/23213504 Email: bimalokpal.delhi@cioins.co.in	Delhi & Following Districts of Haryana - Gurugram, Faridabad, Sonapat & Bahadurgarh.
ERNAKULAM	Office of the Insurance Ombudsman, 2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard, M. G. Road, Ernakulam - 682 015.	Tel.: 0484 - 2358759 / 2359338 Fax: 0484 - 2359336 Email: bimalokpal.ernakulam@cioins.co.in	Kerala, Lakshadweep, Mahe-a part of Union Territory of Puducherry.
GUWAHATI	Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati – 781001 (Assam).	Tel.: 0361 - 2632204 / 2602205 Email: bimalokpal.guwahati@cioins.co.in	Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and

			Tripura.
HYDERABAD	Office of the Insurance Ombudsman, 6-2-46, 1st floor, "Moin Court", Lane Opp. Saleem Function Palace, A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004.	Tel.: 040 - 23312122 Fax: 040 - 23376599 Email: bimalokpal.hyderabad@cioins.co.in	Andhra Pradesh, Telangana, Yanam and part of Union Territory of Puducherry.
JAIPUR	Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005.	Tel.: 0141 - 2740363 Email: bimalokpal.jaipur@cioins.co.in	Rajasthan
KOLKATA	Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue, Kolkatta - 700 072	Tel.: 033 - 22124339 / 22124340 Fax : 033 - 22124341 Email: bimalokpal.kolkata@cioins.co.in	West Bengal, Sikkim, Andaman & Nicobar Islands.
LUCKNOW	Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, Lucknow - 226 001.	Tel.: 0522 - 2231330 / 2231331 Fax: 0522 - 2231310 Email: bimalokpal.lucknow@cioins.co.in	Districts of Uttar Pradesh : Lalitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar.
MUMBAI	Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054.	Tel.: 022 - 26106552 / 26106960 Fax: 022 - 26106052 Email: bimalokpal.mumbai@cioins.co.in	Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane.
NOIDA	Office of the Insurance Ombudsman, Bhagwan Sahai Palace 4 th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddha Nagar, U.P-201301.	Tel.: 0120-2514252 / 2514253 Email: bimalokpal.noida@cioins.co.in	State of Uttaranchal and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat,

			Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.
PATNA	Office of the Insurance Ombudsman, 1st Floor, Kalpana Arcade Building, Bazar Samiti Road, Bahadurpur, Patna 800 006.	Tel.: 0612-2680952 Email: bimalokpal.patna@cioins.co.in	Bihar, Jharkhand
PUNE	Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 3rd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune – 411 030.	Tel.: 020-41312555 Email: bimalokpal.pune@cioins.co.in	Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region.