Policy Document - Terms and Conditions of your policy

ICICI Pru iCare II Option I

(This is a non-participating non-linked life insurance plan)

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

UIN number: ICICI Pru iCare II Option I : 105N140V02

In this document, "you" or "your" will refer to the Policyholder or the Proposer i.e. the owner of this policy and "we", "us", "our", "insurer" or "the Company" will refer to ICICI Prudential Life Insurance Company Limited, or any of its successors.

1. Free look period

If you are not satisfied with the policy, you may cancel it by returning the policy document to the Company, with reasons within • 15 days from the date you received it, if your policy is not purchased through Distance marketing* • 30 days from the date you received it, in case of electronic policy or if your policy is purchased through Distance marketing* On cancellation of the policy during the free look period, we will return the premium subject to the deduction of: a. Stamp duty under the policy, b. Expenses borne by the Company on medical examination, if any c. Proportionate risk premium for the period of cover The policy shall terminate on payment of this amount and all rights, benefits and interests under this policy will stand extinguished. *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 service (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. Key benefits:

2.1 Death Benefit i. The Policy has to be in force as on the date of death of the Life Assured. **ii**. We shall pay the Sum Assured on death as stated on your Policy certificate on death of the Life Assured. **iii**. The Policy shall terminate on payment of death benefit. **iv**. Death Benefit may be taxable as per the prevailing tax laws.

2.2 Maturity/Survival benefit i. There is no maturity or survival benefit payable under this Policy. ii. This Policy shall automatically cease to exist on the Date of Termination.
2.3 Paid-up Value There is no paid-up value under this Policy.

3. Discontinuance and revival of the Policy

3.1 Surrender i. Surrender means voluntary termination of the Policy by you. **ii**. For Regular Pay, surrender is not allowed and hence no benefit shall become payable on surrender of the Policy. **iii**. For One Pay: The surrender value will be calculated as given below: Surrender Value = Surrender Value Factor * Single Premium Surrender Value Factors are provided below:

Policy year of surrender \ Policy Term	5 years	10 years
Year 1	30%	45%
Year 2	25%	40%
Year 3	15%	35%
Year 4	10%	30%
Year 5	0%	25%
Year 6	N/A	20%
Year 7	N/A	15%
Year 8	N/A	10%
Year 9	N/A	5%
Year 10	N/A	0%

N/A = Not applicable

iv. The Policy will terminate on surrender and all the rights / title and interest under the Policy shall stand extinguished. v. Surrender value may be taxable as per the prevailing tax laws. vi. The bases for computing Surrender Value factors will be reviewed from time to time and the factors applicable to existing business may be revised subject to the prior approval of the IRDAI.

3.2 Revival of the Policy This section is applicable in case of Regular Pay: You can revive your Policy which has lapsed due to non payment of premium, subject to the below conditions: a. The application for revival is made within 2 years from the due date of the first unpaid premium. The Policy cannot be revived after the Date of Termination of Policy. b. Revival will be on the basis of the revival norms applicable at that point of time. c. The arrears of premiums together with interest at such rate as the Company may charge for late payment of premiums are paid. d. If the Policy is not revived during this two years period, the Policy will terminate and the premiums paid under the Policy will not be refunded. e. You will have to submit satisfactory evidence of health of the Life Assured, as required by the Company at your own cost. You will have to pay the outstanding premiums along with interest as may be applicable for late payment of premiums at that point of time. f. The revival of the Policy may be on terms different from those applicable to the Policy before it lapsed. g. If permitted by the Board approved underwriting policy, we reserve the right to refuse to reinstate the Policy. In that case, only the premium paid towards reinstatement of the Policy shall be refunded without interest. h. We will specifically communicate to you the decision of the revival. Till then the Policy cannot be considered as revived.

4. General Conditions

4.1 To whom are the benefits payable Benefits are payable to the Proposer or to the assignee(s) where a valid assignment (in accordance with Section 38 of the Insurance Act, 1938) or endorsement has been recorded, or to the nominee(s) where a valid nomination has been registered by the Company (in accordance with section 39 of the Insurance Act, 1938), or to the executors, administrators or other legal representatives who obtain representation to the estate of the Policyholder or to such person or persons as directed by a court of competent jurisdiction in India, limited at all times to the monies payable under this Policy. The Company does hereby agree to pay the appropriate benefits under the Policy subject to: **i.** The

satisfaction of the Company of the benefits having become payable as per the Policy terms and conditions, **ii**. The title of the said person or persons claiming payment, **iii**. The correctness of the age of the Life Assured as stated in the proposal (if not previously admitted) and **iv**. The happening of an event upon which one or more benefits become payable under this Policy.

4.2 Death of the nominee In the event of death of the nominee before the death of the Life Assured, you have an option to nominate some other person.

4.3 Premium payment This section is applicable only in case of Regular Pay: i. You are required to pay premiums on the due dates or during the grace period mentioned in the Policy certificate. ii. A grace period of 30 days, where the mode of payment of premium is other than monthly and 15 days in the case of monthly mode is allowed iii. You are required to pay premiums for the entire policy term. iv. The Policy will lapse and the cover will cease if you do not pay the premiums either on the due date or during the grace period. v. If the premium is paid before the due date then the same shall be applied to the Policy only on the due date, except as required by applicable regulations. vii. Mentioned below are the discount / loading based on premium paying modes

Premium paying modes	Discount / Loading	
Yearly	1% discount	
Half-yearly	0%	
Monthly	5% loading unless the payment is made by direct debit	

This section is applicable for both Regular Pay and One Pay

i. You may pay premium through any of the following modes: 1) Cash* 2) Cheques 3) Demand Drafts 4) Pay Orders 5) Bankers Cheque 6) Internet facility as approved by the Company from time to time. 7) Electronic Clearing System 8) Credit or Debit cards held in your name *Amount and modalities will be subject to Company rules and relevant legislation/ regulation ii. Premiums will be construed to be received by us only when received at any of our offices. iii. The application of the premiums received will be conditional on the realisation of the proceeds of the instrument of payment, including electronic mode. iv. If you suspend payment of premium for any reason whatsoever, we will not be held liable. In such an event, benefits, if any, will be available only in accordance with the Policy terms and conditions. v. Where the premium paying frequency is changed, there will be a revision in premium amount as per the then norms of the Company.

4.4 Age i. The premiums have been calculated on the basis of the age of the Life Assured as declared in the proposal form. In case you have not provided proof of age of the Life Assured with the proposal form, you shall furnish such proof of age of the Life Assured as is acceptable to us and have the age admitted. ii. If the "Correct Age" is found to be different from the age declared in the Proposal form, without prejudice to our rights and remedies including those under the Insurance Act, 1938, we will take one of the following actions: a. If the correct age of the Life Assured makes him ineligible for this product, we will offer a suitable plan as per our underwriting norms. If you do not wish to opt for the alternative plan or if it is not possible for us to grant any other plan, the policy will stand cancelled from the date of issuance and the premiums paid under the policy will be returned subject to the deduction of expenses incurred by the Company and the policy will terminate thereafter. b. If the Life Assured is alive and the correct age of the Life Assured makes him eligible for this Policy, the revised premium as per the correct age will be recovered from the next Policy anniversary date. In such case, in the event of acceptance of claim under the Policy, we shall pay the Sum Assured on death after adjusting the premiums as may be applicable for such correct age of the Life Assured. c. If the Life Assured has died and the correct age of the Life Assured makes him eligible for this policy, the difference between the revised premium, as per the correct age and the original premium, with interest, will be adjusted in the Death Benefit payable. The provisions of Section 45 of the Insurance Act, 1938 shall be applicable.

4.5 Loans No Policy loans are allowed under this plan.

4.6 Assignment and nomination i. Assignment a. You may assign the Policy and serve a written notice on the Company. The assignment must be duly recorded in the Company's books to be effective as against the Company. b. Assignment can be made either by an endorsement on the Policy or by way of a separate instrument. In either case, it must be signed by the assignor stating the fact of assignment and must be duly attested. The first assignment can be made only by the Policyholder. c. Assignment will automatically cancel the nomination except where the assignment is in favour of the Company. d. Assignment is not permitted where the Policy is taken under the Married Women's Property Act, 1874. e. We do not express any opinion on the validity or legality of the assignment. f. Please refer to Section 38 of the Insurance Act, 1938 for complete details. ii. Nomination a. nomination to receive the benefit payable under the Policy. b. If the nominee is a minor, you may appoint an appointee to receive the benefit on behalf of the nominee. c. You need to inform us about change in the nomination. d. You may change the nomination anytime under the Policy before the Date of Termination. e. We do not express any opinion on the validity or legality of the nomination. f. Please refer to Section 39 of the Insurance Act, 1938 for complete details.

4.7 Suicide If the Life Assured whether sane or insane, commits suicide within one year from the date of commencement of this Policy, the Policy shall be void. The Company will refund the premium and all rights, benefits and interests under this Policy will stand extinguished. The Policy will terminate on this payment. In the case of a reinstated Regular Pay Policy, if the Life Assured, whether sane or insane, commits suicide within one year from the date of reinstatement of the Policy the Company will only refund 80% of the premiums paid till the date of death The Policy will terminate on this payment.

4.8 Incontestability i. 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 a statement made in the proposal for insurance or in any report of a medical officer, or referee, or friend of the insured, or in any other document leading to the issue of the 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 Policyholder and that the Policyholder knew at the time of making it that the statement was false or that it suppressed facts which were 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. ii. We rely upon the information given by you in the proposal form and in any other document(s) submitted in support of the proposal form. We also rely upon your certification that the document(s) provided in support of the proposal form is or are genuine and bona fide. iii. In case of fraud or misrepresentation, the policy shall be cancelled immediately by paying the surrender value, if any, subject to the fraud or misrepresentation being established by the Company in accordance with Section 45 of the Insurance Act, 1938. iv. The Policy is subject to the terms and conditions as mentioned in the Policy document and is governed by the laws of India.

4.9 Communication address Our communication address is: Address Customer Service Desk ICICI Prudential Life Insurance Company Limited, Unit No. 1A & 2A, Raheja Tipco Plaza, Rani Sati Marg, Malad (East), Mumbai 400097. Facsimile: 022-42058222. E-mail: lifeline@iciciprulife.com The Company's website must be checked for the updated contact details. Notices and instructions sent by us to the Policyholders will be deemed served seven days after posting or immediately upon receipt in the case of hand delivery, facsimile or e-mail. It is very important that you immediately inform us about any change in the address or the nominee particulars. 4.10 Payment of claim i. Before payment of any claim under the Policy, we will require the following documents: a. Claimant's Statement b. Original Policy document c. Proof of Date of birth of the Life Assured d. Death Certificate of the Life Assured issued by the local and medical authority e. Any other documents or information as may be required by the Company for processing of the claim depending on the cause of the claim. ii. Claim payments are made only in Indian rupees. iii. The Company will repudiate the claim if there is any discrepancy found in the age of the Life Assured as declared in the Proposal form submitted to the Company and as admitted under the Policy.

4.11 Electronic transactions All transactions carried out by the Policyholder through 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 will be valid and legally binding on the Company as well as the Policyholder. This will be subject to the relevant guidelines and terms and conditions as may be made applicable by the Company. The Company reserves the sole right to terminate, stop or do away with all or any of the said facilities without any prior intimation to the Policyholder.

4.12 Jurisdiction The Policy is subject to the terms and conditions as mentioned in the Policy document and is governed by the laws of India. Only the Courts, Judicial, Quasi Judicial and Regulatory bodies created under laws or regulations prevailing in India for the time being in force will have the jurisdiction to consider or adjudicate disputes, if any, under this Policy. All payments to or by us will be in accordance with the prevailing Exchange Control regulations and other relevant laws and regulations of India.

4.13 Legislative changes This Policy including the premiums and the benefits under the Policy will be subject to the taxes and other statutory levies as may be applicable from time to time. You will be required to pay taxes and/or cess as per the prevailing laws, regulations and other financial enactments as may exist from time to time, wherever applicable as per Company's Policy.

4.14 Force majeure If the performance of the Company of any of its obligations herein shall be in any way prevented or hindered in consequence of any act of God or State, Strike, Lock out, Legislation or restriction of any Government or other authority or any other circumstances beyond the anticipation or control of the Company, the performance of this contract shall be wholly or partially suspended during the continuance of contract.

4.15 Customer service 1. For any clarification or assistance, you may contact our advisor or call the Company's Customer Service Representative during office hours (10:00 a.m. to 7:00 p.m., Monday to Saturday; excluding national holidays.) on the numbers mentioned on the reverse of the Policy Folder or on the Company's website at www.iciciprulife.com Alternatively you may communicate with us at the customer service desk address as stated in clause 4.10. The Company's website must be checked for the updated contact details. i. Grievance Redressal Officer For any complaints or grievances, you may get in touch with our designated Grievance Redressal Officer (GRO). Please refer to the Grievance Redressal section on our website www.iciciprulife.com for GRO contact details. ii. Senior Grievance Redressal Officer: If you do not receive any resolution or the resolution provided by the GRO is not satisfactory, you may write to our Senior Grievance Redressal Officer (SGRO). For SGRO contact details please refer to the Grievance Redressal section on www.iciciprulife.com. iii. Grievance Redressal Committee If You do not receive any resolution or if You are not satisfied with the resolution provided by the SGRO, 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 Number : 1800 4254 732 Email ID: complaints@irda.gov.in You can also register your complaint online at http://www.igms.irda.gov.in/ Address for communication for complaints by fax/paper: Consumer Affairs Department, Insurance Regulatory and Development Authority of India, Sy. No. 115/1, Financial District, Nanakramguda, Gachibowli, Hyderabad - 500032. iv. 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, the Ombudsman shall receive and consider complaints or disputes relating to: a. delay in settlement of claims, any partial or total repudiation of claims; b. disputes over premium paid or payable in terms of insurance policy; c. misrepresentation of policy terms and conditions at any time in the policy document or policy contract; d. legal construction of insurance policies in so far as the dispute relates to claim; e. policy servicing related grievances against insurers and their agents and intermediaries; f. 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; g. non-issuance of insurance policy after receipt of premium in life insurance and general insurance including health insurance; h. any other matter resulting from the violation of provisions of the Insurance Act, 1938 or the regulations, circulars, guidelines or instructions issued by the IRDAI from time to time or the terms and conditions of the policy contract, in so far as they relate to issues mentioned at clauses (a) to (e).

Manner in which complaint to be made (1) Any person who has a grievance against an insurer, 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 complained against or the residential address or place of residence of the complainant is located. (2) The complaint shall be in writing, duly signed 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 makes a written representation to the insurer named in the complaint and- i. either the insurer had rejected the complaint; or ii. the complainant had not received any reply within a period of one month after the insurer received his representation; or iii. the complainant is not satisfied with the reply given to him by the insurer; (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 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 if the insurer 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 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. 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.

- 1. 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@ecoi.co.in Jurisdiction: Gujarat, Dadra & Nagar Haveli, Daman and Diu.
- BENGALURU: Office of Insurance Ombudsman, JeevanSoudha 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@ecoi.co.in Jurisdiction: Karnataka.
- BHOPAL: Office of the Insurance Ombudsman, JanakVihar 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@ecoi.co.in Jurisdiction: Madhya Pradesh & Chhattisgarh.
- 4. BHUBANESHWAR: Office of the Insurance Ombudsman, 62, Forest Park, Bhubaneshwar -751 009. Tel.:- 0674-2596455/2596461. Fax : 0674-2596429 Email: bimalokpal.bhubaneswar@ecoi.co.in Jurisdiction: 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.:- 0172-2706468/2706196. Fax: 0172-2708274. Email: bimalokpal.chandigarh@ecoi.co.in Jurisdiction: Punjab , Haryana, Himachal Pradesh, Jammu & Kashmir , UT of Chandigarh.
- CHENNAI: Office of the Insurance Ombudsman, Fathima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, Chennai -600 018. Tel.:- 044-24333668 /24335284. Fax : 044-24333664. Email: bimalokpal.chennai@ecoi.co.in Jurisdiction: Tamil Nadu, UT–Pondicherry Town and Karaikal (which are part of UT of Pondicherry)
- 7. DELHI: Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Bldg., Asaf Ali Road, New Delhi -110 002. Tel.:- 011-23237532/23239633 Fax : 011-23230858. Email: bimalokpal.delhi@ecoi.co.in Jurisdiction: Delhi.
- ERNAKULAM: Office of the Insurance Ombudsman, 2nd Floor, Pulinat Building, Opp. Cochin Shipyard, M.G. Road, Ernakulam-682 015. Tel: 0484-2358759/2359338. Fax: 0484-2359336. Email: bimalokpal.ernakulam@ecoi.co.in Jurisdiction: Kerala, Lakshadweep, Mahe–a part of Pondicherry.
- 9. GUWAHATI: Office of the Insurance Ombudsman, JeevanNivesh, 5th Floor, Near PanbazarOverbridge, S.S. Road, Guwahati -781 001. Tel.:- 0361-2132204/2132205. Fax: 0361-2732937. Email: bimalokpal.guwahati@ecoi.co.in Jurisdiction: Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.
- 10. HYDERABAD: Office of the Insurance Ombudsman, 6-2-46, 1st Floor, Moin Court, Lane opp Salem Function Palace, A.C. Guards, Lakdi-Ka-Pool, Hyderabad -500 004. Tel : 040-65504123/23312122. Fax: 040-23376599. Email: bimalokpal.hyderabad@ecoi.co.in Jurisdiction: Andhra Pradesh, Telangana, UT

of Yanam& part of the UT of Pondicherry.

- JAIPUR: Office of Insurance Ombudsman, Jeevan Nidhi II, Ground floor, Bhawani Singh Road, Ambedkar circle, Jaipur- 302005. Tel : 0141 -2740363. Email: bimalokpal.jaipur@ecoi.co.in. Jurisdiction: Rajasthan.
- 12. KOLKATA: Office of the Insurance Ombudsman, 4th Floor, Hindusthan Building Annexe, 4, C.R.Avenue, Kolkatta – 700 072. Tel: 033- 22124339/22124340. Fax: 033-22124341. Email: bimalokpal.kolkata@ecoi.co.in Jurisdiction: West Bengal, Sikkim and Andeman & Nicobar Islands.
- 13. LUCKNOW: Office of the Insurance Ombudsman, 6th Floor, JeevanBhawan, Phase II, Nawal Kishore Road, Hazaratganj, Lucknow - 226 001. Tel: 0522 -2231331/2231330. Fax : 0522-2231310. Email: bimalokpal.lucknow@ecoi.co.in Jurisdiction: Districts of Uttar Pradesh: Laitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhabdra, 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, JeevanSevaAnnexe, S.V. Road, Santacruz(W), Mumbai - 400 054. Tel : 022 -26106960/26106552. Fax : 022-26106052. Email: bimalokpal.mumbai@ecoi.co.in Jurisdiction: Goa and Mumbai Metropolitan region (excluding Navi Mumbai & Thane)
- 15. NOIDA: Office of Insurance Ombudsman, BhagwanSahai Palace, 4th Floor, Main Road, Naya Bans, Sector 15, Noida Distt - Gautam Buddh Nagar, U.P - 201 301. Tel: 0120-2514250 / 2514251 / 2514253. Email: bimalokpal.noida@ecoi.co.in Jurisdiction: 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.
- 16. PATNA: Office of the Insurance Ombudsman, 1st Floor, Kalpana Arcade Building, Bazar Samiti Road, Bahadurpur, Patna - 800 006. Tel : 0612-2680952. Email: bimalokpal.patna@ecoi.co.in Jurisdiction: Bihar, Jharkhand.
- 17. PUNE: Office of Insurance Ombudsman, Il Floor, JeevanDarshan, N C Kelkar Road, C.T.S No 195 to 198, Narayanpeth, Pune-411030. Tel: 020-41312555. Email: bimalokpal.pune@ecoi.co.in Jurisdiction: State of Maharashtra, Area of Navi Mumbai & Thane(excluding Mumbai Metropolitan region).

Policy Certificate, terms and conditions of the Policy and all the endorsements by the Company, if any, will form an integral part of this contract and will be binding on the parties (Ver T38: 1)

5. Definitions

In the Policy document, unless the context otherwise requires: **i. Life Assured** is the person on whose life the Policy contract has been issued. **ii. One Pay** means that premium is payable once. **iii. Regular Pay** means that premiums are payable for the entire policy term. **iv. Policyholder** is the owner of the Policy at any point of time. **v. Regulator** is the authority that has regulatory jurisdiction and powers over the Company. **vi. Sum Assured on death** is the fixed amount payable on the death of the Life Assured. **vii. Risk Commencement Date** is the date of acceptance of proposal by the Company. **viii. Date of Termination** is the date on which the contract comes to an end and all the rights, title and interest under the Policy stand extinguished. **ix. Policy** is a legal contract between you and the Company and is being issued on the basis of the details provided by you in the proposal form submitted to the Company.