Policy Schedule : ICICI Pru Group Unit Linked Superannuation (Annually Renewable unit-linked Pension Group Product)

This Policy is the evidence of a contract between ICICI Prudential Life Insurance Company Limited (Us/ We/ Company) and the Master Policyholder/ Trustees (You) referred to below.

This Policy is issued on the basis of the details provided by Master Policyholder/ Trustees in the Proposal Form submitted along with the required declarations, personal statement, applicable medical reports, trust related documents, the first contribution deposit, scheme rules and any other information and documentation which constitute evidence of the insurability of the Life Assured for the issuance of the Policy.

We agree to provide the benefits set out in this Policy subject to its the terms and conditions.

Policy Number:	
Name of the Master Policyholder:	
Name of the Employer:	
Name of Trust:	
Name of the Scheme:	
Type of Scheme	Defined Contribution
	Defined Contribution with Comprehensive Capital Guarantee
	Defined Benefit
Option	Option A / Option B
For DB schemes, Extra Allocation Percentage (For Option B only)	1% / 2% / 3% / 4%
Policy Commencement Date:	dd-mmm-yyyy
Date of Issue:	dd-mmm-yyyy
Annuity purchase only from ICICI Prudential Life Insurance	Yes / No
Normal Retirement Age for group members (should not exceed 86 years):	Not to exceed 86 years
Number of Members:	On the Policy Commencement Date
For Defined Benefit Schemes	
Date of Actuarial Liability Value	dd-mmm-yyyy

Actuarial Liability Value	As per the most recently available actuarial valuation as on the Policy Commencement
	Date

This Policy document together with the Policy schedule consisting of the particulars of the Grantees, contributions and other details; Parts A to G appended hereto; Annexure A to E and Schedules if any to this Policy Document, each of the endorsements that will be made hereafter to this Policy Document and the related proposal form shall constitute a single document, and the provisions hereinafter contained shall form part of this Policy Document as fully as if recited over the signature affixed hereto.

Policy Schedule, terms and conditions of the Policy and the endorsements by Us, if any, shall form an integral part of this contract and shall be binding on Us and You.

In this Policy, singular words will include plural words and vice-a-versa, as applicable. The words importing the masculine gender will include the feminine gender.

The headings used in this Policy are only for the purpose of convenience and should not be used for interpretation.

The Policy will stand cancelled immediately in the event of non-realisation of the initial Contribution deposit by the Master Policyholder towards ICICI Prudential Life Insurance Company Limited.

Signed for and on behalf of the ICICI Prudential Life Insurance Company Limited, at Head Office, Mumbai on (Issue Date)

This is an output of a digitally signed print file Please immediately inform Us about any change in address or contact details. *Please examine the policy and approach Us immediately in case of any discrepancies.*

PART B

Definitions

- 1. **"Annual Renewal Date"** is the identical date in every calendar year, subsequent to the Policy Commencement date.
- 2. "Benefits" mean Benefits payable as stated in Part C of this Policy document.
- 3. **"Defined Benefit Scheme" or "DB Scheme"** is a Superannuation Scheme where the Benefit under the Scheme is fixed irrespective of the Contribution.
- 4. **"Defined Contribution Scheme" or "DC Scheme"** is a Superannuation Scheme where the Contribution under the Scheme is fixed irrespective of the Benefits payable.
- 5. **"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.
- 6. **"Employee"** means a person in the permanent employment of the Employer, and shall include a person who is on probation for a permanent post but shall not include a trainee/apprentice or a personal or domestic, servant.
- 7. **"Employer"** means the company, firm or body corporate which is mentioned on the Policy Schedule or a company, firm or body corporate which may in future manage or control the named Employer.
- 8. **"Extra Allocation"** is the amount credited to this Policy's Scheme Account or Member Accounts' by the Company.
- 9. **"Financial Year"** is the period from 1st April of a calendar year to 31st of March of the next calendar year.
- 10. **"Fund"** means any of the segregated Funds mentioned herein which are earmarked by the Company for the Unit linked business of the Company under the Insurance Regulatory and Development Authority of India (the "IRDAI") regulations and the word "Funds" shall be construed accordingly.
- 11. **"Fund Value"** is the number of units held in a fund multiplied by the prevailing fund NAV.
- 12. "Loyalty Additions" will be made by allocation of extra units. Allocation of Loyalty Addition is guaranteed and shall not be revoked by the Company under any circumstances.
- 13. **"Master Policy"** shall mean this document, any supplementary contracts or endorsements therein, whenever executed, any amendments thereto agreed to and signed by Us, the application form provided by You, the Schemes Rules and the individual enrollment forms, if any, of the insured Members, which together constitute the entire contract between the parties.
- 14. **"Member"** is an Employee or ex-Employee who is covered under the Scheme as per the Rules of the Scheme and is eligible for the Benefits under this Policy.

- 15. **"Member Account"** is a notional account under the Policy in which the monies invested by the Policyholder towards a Member are invested. Only DC Schemes will have Member Accounts. Each Member under the Policy will have a separate Member Account.
- 16. **"Member Account Value"** is the sum of Fund Values in respect of investments in the unitlinked funds for a Member.
- 17. "Net Asset Value" (NAV) is the price of the Unit calculated in Rupees.
- 18. **Policy Commencement Date** means the date specified in the Policy Schedule on which the Master Policy comes into effect.
- 19. **Policy Schedule** means the policy schedule and any endorsements attached to and forming part of this Policy.
- 20. **Proposal Form** means the form filled in and completed by You for the purpose of obtaining insurance coverage under this Master Policy.
- 21. **Policy Value** is the sum of Member Account Values across all Members in Defined Contribution Schemes and is the Scheme Account Value in Defined Benefit Schemes.
- 22. **"Policy year"** is a period of twelve months starting from the Policy commencement date or from Policy renewal date.
- 23. **"Premium"** also referred to as **"Contribution"** is the consideration received from the Policyholder towards the Policy.
- 24. **"Regulator"** or **"Authority**" is the Authority that has Regulatory jurisdiction and powers over the Company. The present regulator is Insurance Regulatory and Development Authority of India (IRDAI).
- 25. **"Rules"** or **"Scheme Rule"** or **"Rules of the Scheme"** mean the rules governing the grant of Superannuation Benefits to the Members, which are framed by the Policyholder and accepted by the Company.
- 26. **"Scheme Account"** is a notional account under the Policy in which the monies of the Policyholder are invested. Only DB Schemes will have a Scheme Account.
- 27. "Scheme Account Value" is the sum of Fund Values across all Funds in the policy.
- 28. **"Units"** means the portion or a part of the underlying segregated unit linked Fund.
- 29. "We" or "Us" or "Our" or "Company" means ICICI Prudential Life Insurance Company Limited.
- 30. **"You"** or **"Your"** or **"Trustees"** or **"Grantees"** or **"Policyholder"** means the Master Policyholder named in the Policy Schedule.
- 31. The following terms used in this Policy will have meanings as assigned to them in the Trust Deed and Trust Rules, as amended from time to time:
 - i. Beneficiary
 - ii. Eligible Employee(s)
 - iii. Member(s) of the Scheme
- iv. Normal Retirement Date
- v. Salary
- vi. Scheme

vii. Trust

viii. Trustee(s)

PART C

1. For Defined Contributions Scheme

- i. The Policyholder will make Contributions based on the Rules of the Scheme.
- ii. The Policyholder shall furnish data requested by the Company in the format prescribed by the Company.
- iii. The Policyholder shall indicate the allocation among the available unit-linked funds.
- iv. Contributions made by the Policyholder will be invested in the respective Member Accounts.
- v. The Policyholder may through a written communication to the Company allow Members to carry out the following activities; choose the allocation among the unitlinked funds, Switching, Automatic Transfer of Funds, Premium Redirection etc.

1.1 Benefits Payable under the Policy

i. The benefits payments will be as per the Rules of the Scheme. The Company's liability to the Policyholder will at all times be limited to the unit fund of the Policy, subject to guarantees as stated in Part C, Clause 1.2.

(*These are model clauses of "Benefits payable" and will change based on the Rules* of the Scheme or as provided by the Employer.)

ii. The benefits are payable as per the Scheme Rules.

In the event of benefits becoming payable on a Member's exit due to retirement. The Member shall be entitled to the higher of the following benefits:

- Member's Account value and
- Guaranteed benefit as described in Part C, Clause 1.2.
- iii. In the event of benefits becoming payable on a Member's exit due to any other reason other than retirement or death. The Member shall be entitled to the Member's Account value.
- iv. In the event of death of a member, higher of Member Account Value and Guaranteed Benefit as described below, shall be used to provide Benefits.

Please note that all claims are settled in line with the Scheme Rules in consultation with the Policyholder and the liability of the company is limited to funds available in the Policy. It is the Policyholders discretion to pay a higher amount of benefit to the member as per the Scheme Rules and the difference in the amounts will be paid by the Policyholder.

1.2 Guarantee

The following guarantee shall apply at a Member level:

Event	Guarantee
Retirement/Death	101% of Contributions to a Member Account i.e.
excluding Voluntary	101% of Contributions
Retirement Schemes	
floated by the Employer	

2. Defined Contributions Schemes with Comprehensive Capital Guarantee

- i. The Policyholder will make Contributions based on the Rules of the Scheme.
- ii. The Policyholder shall furnish data requested by the Company in the format prescribed by the Company.
- iii. The Policyholder shall indicate the allocation among the available unit-linked funds.
- iv. Contributions made by the Policyholder will be invested in the respective Member Accounts.
- v. The Policyholder may through a written communication to the Company allow Members to carry out the following activities; choose the allocation among the unitlinked funds, Switching, Automatic Transfer of Funds, Premium Redirection etc.

2.1 Benefits Payable under the Policy

i. The benefits payments will be as per the Rules of the Scheme. The Company's liability to the Policyholder will at all times be limited to the unit fund of the Policy, subject to guarantees as stated in Part C, Clause 2.2.

(<u>These are model clauses of "Benefits payable" and will change based on the Rules</u> of the Scheme or as provided by the Employer.)

- ii. The benefits are payable as per the Scheme Rules.
- iii. In the event of benefits becoming payable on a Member's exit due to retirement or Member leaving service except for Voluntary Retirement Scheme. The Member shall be entitled to the higher of the following benefits:
 - Member's Account value and
 - Guaranteed benefit as described in Part C, Clause 2.2.

iv. In the event of benefits becoming payable on a Member's exit due to Voluntary

Retirement Scheme floated by the employer. The Member shall be entitled to the Member's Account value.

v. In the event of death of a member, higher of Member Account Value and Guaranteed Benefit as described below, shall be used to provide Benefits.

Please note that all claims are settled in line with the Scheme Rules in consultation with the Policyholder and the liability of the company is limited to sum of funds available and assured benefit in the Policy. It is the Policyholder's discretion to pay a higher amount of benefit to the member as per the Scheme Rules and the difference in the amounts will be paid by the Policyholder.

2.2 Guarantee

The following guarantee shall apply at a Member level:

Event	Guarantee
Member leaving service for any	101% of Contributions to a Member Account
reason except for Voluntary	i.e. 101% of Contributions
Retirement Schemes floated by	
the Employer	

3. Defined Benefit Scheme:

- i. The Policyholder will make Contributions based on the Rules of the Scheme and such Contributions should be in accordance with the Actuary's certificate submitted by the Policyholder as per extant accounting standard governing the measurement of long term employee benefits.
- ii. Contributions made by the Policyholder will be invested in the Policy's Scheme Account.
- iii. The Policyholder shall indicate the allocation among the available unit-linked funds. Currently only Group Short Term Debt Fund II is available.

3.1 Benefits Payable under the Policy

i. The benefits payments will be as per the Rules of the Scheme. The Company's liability to the Policyholder will at all times be limited to the unit fund of the Policy, subject to guarantees as stated in Part C, Clause 3.2.

(*These are model clauses of "Benefits payable" and will change based on the Rules* of the Scheme or as provided by the Employer.)

3.2 Guarantee

A Policy level guarantee applies which is called the Assured Benefit.

Assured Benefit = 100.1% x (sum of contributions net of claims).

The Assured Benefit shall be applicable on the entire superannuation fund available with the insurer.

4. Membership

- i. To be recognized under the Policy,
 - a. A Member must be at least 20 years of age, last birthday and must not be older than 85 years of age, last birthday.
 - b. The Company must be provided necessary information on the Member.
- ii. All existing Members of the Scheme from the Policy Commencement Date will be covered under this Policy subject to the criteria as stated in Part C, Clause 4, Sub Clause i.
- iii. All future employees of the Employer that become Members of the Scheme shall be covered under this Policy subject to the criteria as stated in Part C, Clause 4.i, Sub Clause i.

5. Contributions

- i. 'Contributions' also referred to as 'Premium' shall, depending on the context, mean Initial Contributions and / or Ordinary Annual Contributions, towards the Superannuation liability and / or Contributions by the Member.
- ii. The Contributions to this Policy can be made either in lump sum, or in multiple instalments in any Policy year. Alternatively, Contributions can be on dates mutually agreed upon between the Policyholder and the Company.
- iii. The Contributions can comprise the following:
 - a. Initial Contribution for past service
 - b. Contribution for past service
 - c. Ordinary Annual Contribution
 - d. Contributions through transfer of the accumulated fund from another Superannuation Scheme.
- iv. Premiums under the Policy are payable without any obligation on us to send a premium reminder notice.
- v. If the Scheme is Defined Benefit, Contributions can be altered as per extant accounting standard governing the measurement of long term employee benefits certificate. The master policyholder may not pay future contributions or premiums under the policy and the policy shall not be treated as discontinued.
- vi. If the Scheme is Defined Contribution, Contributions into the Member Accounts should be as per the Rules of the Scheme.
- vii. The Contributions to this Policy are regulated by the guidelines issued by the Authority or any subsequent pronouncements made by the Authority.
- viii. Premiums are payable through any of the following modes:
 - a. Real Time Gross Settlement (RTGS)
 - b. Cheques

- c. Demand Drafts
- d. Pay Orders
- e. Banker's Cheque
- f. Such other mode as may be permitted from time to time.
- ix. Contributions received in respect of this Policy will be credited to this Policy's Scheme Account or Member Accounts, as applicable.
- x. Contributions received and accepted at the Company's office before the cut-off timings as defined by IRDA (currently 3:00 p.m.) shall be invested in the Unit Linked Funds as set out in Section E, Clause 11.
- xi. The Units of the relevant Fund to be created will be computed using the NAV on the Valuation Date on which the cheque towards the Contributions and other required documents are received at the Company's office.
- xii. If the cheque is an outstation cheque, the valuation date would be the clearance date of the said cheque. In the event of, the cheque being dishonoured and any loss suffered by the Company, the same will be recovered from the Grantees.

6. Renewal of the Policy

- i. This is a one-year renewable policy and the Grantees may renew the Policy every year, on Annual Renewal Date.
- ii. Even on non-receipt of premium towards the policy fund, the policy will automatically get renewed at the then existing terms and conditions on each annual renewal date provided there is sufficient balance in the policy fund towards applicable charges.
- iii. The master policyholder may not pay future contributions or premiums under the policy and the policy shall not be treated as discontinued. Policy shall be inforce provided there is sufficient balance in the policy fund towards applicable charges. However, the Policyholder will be entitled to resume the contributions with notice to the Company at any time. The terms and conditions shall remain unchanged.

7. Loyalty Additions

- i. The Policy will offer Loyalty Additions based on the Policy Value.
- ii. The Company will make Loyalty Additions to the Policy at the end of every financial year, based on the Policy Value, Option, Extra Allocation and whether Comprehensive Capital Guarantee is selected.
- iii. The Loyalty Additions will be made in the form of additional units.
- iv. Loyalty Additions are computed based on daily Policy Values and applicable Loyalty Addition percentage. The additional units will be allocated to the unit-linked funds at the end of a financial year in the same ratio as the monies held in the various unit-linked funds of the Policy at the time of allocation.
- v. The NAVs on the date of allocation will be used for allocation of these units.
- vi. On termination of Member Accounts or Scheme Account during a financial year, Loyalty Addition will be made at the date of exit on prorata basis, which is after taking

into account the period of the Financial Year that has completed.

vii. The Loyalty Additions applicable to the Policy are detailed in Annexure A.

8. Extra Allocation (Only applicable for option B)

- i. If Extra Allocation is not opted for by the Policyholder, or the Scheme type is Defined Contribution, this section will not be applicable.
- ii. The Extra Allocation that has been selected is set out in the Policy Certificate.
- iii. The Company will apply this Extra Allocation percentage on Contributions and credit the Extra Allocation amount to the Scheme Account.
- iv. The Extra Allocation percentage is applied to, the lower of:
 - a. Contributions received up to the end of the first Policy year, and
 - b. The superannuation scheme's liability based on the most recently available actuarial valuation, as on the Policy commencement date.
- v. The Extra Allocation amount will apply to all Contributions to the Scheme Accounts, in the Policy, subject to Part C, Clause 8, Sub Clause iv.
- vi. The recovery of Outstanding Extra Allocation is as set out in Annexure B.
- vii. Outstanding Extra Allocation is Extra Allocation in Rupees less total amount of Extra Allocation already recovered.

9. Annuity purchase

The Scheme will be administered in line with the Rules of the Scheme. Where the Policyholder maintains a superannuation policy with more than one approved Insurer, the Policyholder may choose to purchase an immediate annuity from any of the Insurers with whom such investments have been made. Otherwise, if the Policyholder is required to purchase an annuity, the Policyholder shall purchase an ICICI Prudential immediate annuity unless permitted by applicable regulation to purchase an annuity with another insurer. Currently, the Company's Immediate Annuity product carries UIN 105N009V13.

Annuity types or options available at the time of purchase of annuity may be different from those that are currently available. The Policyholder may choose from the options available at that time.

- i. In all cases, the annuity rates are not guaranteed in advance but will be determined at the time of vesting.
- ii. Currently we offer following annuity options:
 - a. Life Annuity
 - b. Life Annuity with Return of Purchase Price
 - c. Life Annuity with Return of 50% Purchase Price
 - d. Life Annuity with Return of 75% Purchase Price
 - e. Life Annuity with Return of Balance Purchase Price
 - f. Life Annuity with an annual increase of 5%
 - g. Life Annuity with Return of Purchase Price on Critical Illness (CI) or Permanent Disability due to Accident (PD) or Death

- h. Life Annuity Guaranteed for 5/10/15 years and payable for life thereafter
- i. Joint Life, Last Survivor without Return of Purchase Price
- j. Joint Life, Last Survivor with Return of Purchase Price
- k. Joint Life, Last Survivor with Return of Purchase Price in Parts
- iii. To claim annuity payments, the survival of the annuitant has to be duly certified in such manner as may be required by us.

10. Member and Nominee information

The Policyholder will provide records of all its Members covered under the Scheme. These records should include Member's age, gender, date of birth, date of entry, nominee details and any other information that may be necessary. The Policyholder will send us the updated information with respect to Members from time to time. The Benefits will not be payable if the data with respect to the Member is not provided to us. The Policyholder is responsible to collect the necessary information of nominee from the Members and facilitate the payments to Nominee, if required.

11. Other information

The Policyholder shall furnish the Company with all particulars relevant to the Scheme and to the operation of this Policy and such further information, document and particulars as the Company may request and the information, documents and particulars so furnished may be accepted by the Company as conclusive.

12. Payment of Benefits

The Company is responsible to ensure that the claim payment is made in the name of the insured member, with respect to the life cover. For other claim payments, the payments shall be made in accordance with the scheme rules.

PART D

1. Free look period

The Policyholder has the option to review the Policy following receipt of the Policy document. If the Policyholder wishes to cancel the Policy the Policy document needs to be returned to the Company with reasons for cancellation of the Policy within:

- 15 days from the date of receipt of the policy document, if the policy was not purchased through Distance Marketing.
- 30 days from the date of receipt of the policy document, in case of electronic policies or if the policy was purchased through Distance Marketing.

On cancellation of the policy during the free look period, the Policyholder shall be entitled to an amount which shall be equal to non-allocated premium plus charges levied by cancellation of units plus Fund Value at the date of cancellation less stamp duty expenses under the policy. Thereafter this policy shall terminate and all rights, benefits and interests under this policy shall be extinguished.

2. Loans

No loans are available under this Policy.

3. Riders

No riders are allowed under this Policy

4. Surrender:

- 4.1 For Defined Contribution Schemes:
 - i. The Grantees may surrender this Policy at any time by giving a written notice of one month.
 - ii. The Surrender Value is the Policy Value after crediting the applicable Loyalty Additions and after deducting the surrender charge, as applicable.
 - iii. The surrender charge will be as set out in Annexure C
- 4.2 For Defined Contribution Schemes with Comprehensive Capital Guarantee:
 - i. The Grantees may surrender this Policy at any time by giving a written notice of 30 days.
 - ii. The Surrender Value is the Policy Value after crediting the applicable Loyalty Additions and after deducting the surrender charge, as applicable.
 - iii. The surrender charge will be as set out in Annexure C
- 4.3 For Defined Benefit Scheme:
 - i. The Grantees may surrender this Policy at any time by giving a written notice of one month.
 - ii. The Surrender Value is the Policy Value after crediting the applicable Loyalty Additions and after deducting the Outstanding Extra Allocation and surrender charge, as applicable. The Surrender Value will be at least equal to the Assured

Benefit.

- iii. The Outstanding Extra Allocation deducted will be as set out in Annexure B
- iv. The surrender charge will be as set out in Annexure C

5. Alterations to Policy

Any amendment or modification to the Scheme by the Master Policyholder will be effected to this Policy only after a written acceptance by the Company. The acceptance is by way of an endorsement to this Policy. All variations and amendments shall be binding on the Company and the Master Policyholder with effect from the date of endorsement or such date as agreed mutually between the Company and the Master Policyholder.

6. Premium Redirection

This is applicable for Defined Contribution and Defined Contribution with Comprehensive Capital Guarantee only. Contributions can be redirected for investment at any time into any available fund of the Policy and need not adhere to the original investment pattern.

7. Switching

This is applicable for Defined Contribution and Defined Contribution with Comprehensive Capital Guarantee only. The Policyholder or Member can request to switch a certain number of units or a certain amount. The request shall be made by the Grantees in writing and on the format prescribed by the Company. The minimum switch amount is Rs. 2,000.

Where a request for a switch of Units is received from the Grantees and accepted at the Company's Office before the cut-off timings as defined by the Regulator, the number of Units of the relevant Fund to be switched will be computed using the NAV on the Valuation Date on which the request is received before the cut-off time as defined by the Regulator. Switching of Units from one Fund to another will be allowed without any charge.

<u>PART E</u>

1. Unit Linked Investment Fund Details

The Grantees have the option to allocate the Contribution among one or more of the Unitlinked Investment Fund(s) ("Funds") as enumerated Part E, Clause 11, for purchase of Units thereof.

The Policy entitles the Grantees to participate only in the investment performance of the Fund, to the extent of allocated Units and does not in any way confer any right whatsoever on the Grantees to otherwise share in the profits or surplus of the business of the Company in any manner whatsoever or make any claim in relation to the assets of the Company.

2. Net Asset Value (NAV)

The Net Asset Value for the different Segregated Funds shall be declared on a daily basis except on days on which the Banks or Exchange are closed or on account of political or economic 'Force Majeure' conditions or if permitted by the Regulator.

The Net Asset Value of each segregated Fund shall be computed as follows or by such other method as may be prescribed by regulation:

[Market Value of investment held by the Fund plus value of current assets less value of current liabilities and provisions] *Divided by*, Number of units existing under the Fund at valuation date, before any new units are created or redeemed.

3. Risks of investment in the Funds

- i. Any investment in any of the Funds available under the Policy is subject to market and other risks.
- ii. The investment risk in the investment portfolio is borne the Grantees or Members.
- iii. The NAV of any of the Funds may increase or decrease as per the performance of financial markets.
- iv. The past performance of any of the Funds does not indicate the future performance of these Funds.
- v. The name of the product and the Funds do not in any manner indicate the quality or their future prospects or the returns that can be expected from these Funds.
- vi. The funds do not offer a guaranteed or assured return.

4. Valuation date

Valuation date is any date on which the NAV is declared by the Company.

5. Valuation of the Funds

Valuation of the Funds is the determination of the value of the underlying assets of the Funds. The valuation of the assets will be made as per the valuation norms prescribed by the Regulator and implemented by the Company.

6. Investment of the Funds

The Company will select the investments, including derivatives and units of mutual funds, of the Fund at our sole discretion subject to the investment objectives of the Fund and the applicable regulations in this regard.

7. Grantees rights with respect to the Funds

This Policy enables the Policyholder to participate only in the investment performance of the Funds, to the extent of allocated units. It does not in any way confer any right whatsoever on the Policyholder or on the Member to share in the profits or surplus of the business of the Company in any manner whatsoever or make any claim in relation to the assets of the Company.

All assets relating to the Funds shall be and shall remain in the absolute beneficial ownership and control of the Company. There is no trust created, whether express or implied, by us in respect of the investments in favour of the Policyholder.

8. Fund closure

Although the Funds are open ended, we may, at our sole discretion and subject to prior approval from the Regulator, completely close any of the Funds on the happening of any event, which in our sole opinion requires the said Fund to be closed. The Policyholder shall be given at least three months' prior written notice of our intention to close any of the Funds completely or partially except in 'Force Majeure' conditions as mentioned in Part F, Clause 13, where we may give a shorter notice.

In case of complete closure of a Fund, on and from the date of such closure, we shall cease to issue and cancel units of the said Fund and cease to carry on activities in respect of the said Fund, except such acts as are required to complete the closure. In such an event if the units are not switched to another Fund by the Policyholder or members, as applicable, we will switch the said units to any other appropriate Fund with similar characteristics at our sole discretion, with due weightage for the respective NAVs at the time of switching, subject to prior approval from the Regulator. However, no fee would be charged by us for switching to another Fund or exiting from the Policy in the event of complete closure of Funds. However, the Outstanding Extra Allocation will be recovered on exit from the Policy as on Policy surrender as described in Part D, Clause 4.

The guarantees as set out in Part C, Clause 1.2, 2.2 and 3.2, as applicable, will remain unchanged through the term of the contract, irrespective of the closure of the Fund.

9. Unit encashment conditions

Units can be encashed for payment of benefits as per the Rules of the scheme; on the retirement date, death or on leaving service of any Member. The NAV of the date of receipt of request will be applicable. If the request is received before the cut-off time, the same day's NAV will be applicable. If the request is received after the cut-off time, the next day's NAV will be applicable. The cut-off time currently is 3:00 p.m. and the same can be revised by the Regulator in the future.

In case of Policy surrender of the Scheme, if the request is received before the cut-off time, the Surrender Value will be paid using the same day's NAV. If the request is received after the cut-off time, the next day's NAV will be applicable.

10. Charges

The following charges apply:

- a. Fund Management Charge
- b. Charge for Investment Guarantees
- c. Surrender Charge

These charges are set out in Annexure C.

11. Unit Linked Investment Funds

11.1 For Defined Contribution Schemes:

The following Funds will be offered:

Fund name	SFIN
Group Capital Guarantee Short Term Debt	(ULGF 031 01/03/12 GCGSTDebt3 105)
Fund III	
Group Capital Guarantee Debt Fund III	(ULGF 033 01/03/12 GCGDebt3 105)
Group Capital Guarantee Balanced Fund III	(ULGF 032 01/03/12 GCGBal3 105)
Group Capital Guarantee Growth Fund III	(ULGF 034 01/03/12 GCGGrowth3 105)

Group Capital Guarantee Short Term Debt Fund III

Objective: To provide suitable returns through low risk investments in debt and money market instruments to protect the capital deployed in the fund.

Portfolio Allocation	Max (%)	Min (%)
Debt	50	0
Money market & Cash	100	50

Potential Risk- Reward profile of the fund: Low

Group Capital Guarantee Debt Fund III

Objective: To provide accumulation of income through investment in various fixed income securities. The fund seeks to provide capital appreciation while maintaining a suitable balance between return, safety and liquidity.

Portfolio Allocation	Max (%)	Min (%)
Debt	100	60
Money market & Cash	40	0

Potential Risk- Reward profile of the fund: Low

Group Capital Guarantee Balanced Fund III

Objective:

To provide a balance between long-term capital appreciation and current income through investment in equity as well as fixed income instruments in appropriate proportions depending on market conditions prevalent from time to time.

Portfolio Allocation	Max (%)	Min (%)
Equity & equity related securities	20	10
Debt	80	50
Money market & Cash	30	0

Potential Risk- Reward profile of the fund: Moderate

Group Capital Guarantee Growth Fund III

Objective:

To provide long-term capital appreciation through investments primarily in equity and equity-related instruments.

Portfolio Allocation	Max (%)	Min (%)
Equity & equity related securities	40	20
Debt	80	40
Money market & Cash	20	0

Potential Risk- Reward profile of the fund: Moderate to High

11.2 For Defined Contribution with comprehensive capital guarantee:

The following Funds will be offered:

Fund name	SFIN
Group Capital Guarantee Short Term Debt	(ULGF 031 01/03/12 GCGSTDebt3 105)
Fund III	
Group Capital Guarantee Debt Fund III	(ULGF 033 01/03/12 GCGDebt3 105)
Group Capital Guarantee Balanced Fund III	(ULGF 032 01/03/12 GCGBal3 105)

Group Capital Guarantee Short Term Debt Fund III

Objective: To provide suitable returns through low risk investments in debt and money market instruments to protect the capital deployed in the fund.

Portfolio Allocation	Max (%)	Min (%)
Debt	50	0
Money market & Cash	100	50

Potential Risk- Reward profile of the fund: Low

Group Capital Guarantee Debt Fund III

Objective: To provide accumulation of income through investment in various fixed income securities. The fund seeks to provide capital appreciation while maintaining a suitable balance between return, safety and liquidity.

Portfolio Allocation	Max (%)	Min (%)
Debt	100	60
Money market & Cash	40	0

Potential Risk- Reward profile of the fund: Low

Group Capital Guarantee Balanced Fund III

Objective:

To provide a balance between long-term capital appreciation and current income through investment in equity as well as fixed income instruments in appropriate proportions depending on market conditions prevalent from time to time.

Portfolio Allocation	Max (%)	Min (%)
Equity & equity related securities	20	10
Debt	80	50
Money market & Cash	30	0

Potential Risk- Reward profile of the fund: Moderate

11.3 For Defined Benefit

Monies will be invested in Group Short Term Debt Fund II with a SFIN of ULGF 038 11/07/12 GSTDebt2 105. Details of the fund are as follows:

Group Short Term Debt Fund II

Objective: To provide suitable returns through low risk investments in debt and money market instruments while attempting to protect the capital deployed in the fund.

Portfolio Allocation	Max (%)	Min (%)
Debt	50	0
Money market & Cash	100	0

Potential Risk- Reward profile of the fund: Low

12. Automatic Transfer Strategy (ATS)

This is applicable for Defined Contribution and Defined Contribution with Comprehensive Capital Guarantee only. The Policyholder or the Member can choose to automatically transfer, a pre-defined amount, from investments in a fund, every month, into any of the funds then available.

Funds can be moved to other available funds over a predetermined period of time, as chosen by the Policyholder or the Member. When choosing this option, the Master Policyholder or member must specify the source fund that monies are to be transferred from and the target fund that monies are to be transferred to.

If choosing the ATS option, the Policyholder or the Member must opt for a transfer date of either 1st or 15th of every month. If the 1st or 15th of the month is a non-valuation date, then the next working day's NAV will be applicable.

At the time of transfer, the required number of units will be withdrawn from the specified Fund, at the applicable NAV, and new units will be allocated in the specified destination fund. The minimum transfer amount is Rs. 2,000. This value is subject to change as per the rules of the Company and subject to prior approval of the Regulator from time to time.

The Automatic Transfer Strategy will be regularly processed for the Policyholder or Member till the Company is notified, through a written communication, to discontinue the same. The Automatic Transfer Strategy will not be applicable if the source Fund Value is less than the amount nominated for transfer.

13. Revision of charges and penalties

The Company reserves the right to change the Surrender Charge, Fund Management Charge, or Charge for Investment Guarantee at any time with prior approval from the Regulator up to the maximum allowable as per applicable regulation. Any revision will apply with prospective effect after giving a notice to the Master Policyholder. Any Master Policyholder who does not agree with an increase, shall be allowed to cancel the units in the Policy at the then prevailing Net Asset Value and terminate the Policy.

<u>PART F</u>

1. Assignment of Benefit

The Benefits under the Policy are strictly personal and cannot be assigned, charged or alienated in any way by the Member or Master Policyholder.

2. Nomination

The Member will nominate a beneficiary to receive the benefits in case of death under the policy. The Master Policyholder will collect the Member's nomination and furnish this information to the Company. We may register a nomination of beneficiary, or any change of nomination of any beneficiaries, in our records only upon receipt of notice of nomination/ change in nomination, submitted in writing to us. If the Master Policyholder provides authority to us to pay benefits directly to a member's beneficiary(s) it is the responsibility of the trustees to advise company in writing of this request and the authority should include the beneficiary details as decided and agreed by the trustees and a statement of nomination signed by the member.—In registering a nomination, Company does not accept any responsibility or express any opinion as to its validity or legal effect.

Nomination under the Policy will be governed by Section 39 of the Insurance Laws (Amendment) Act, 2015, as amended from time to time. Please refer to Annexure D for details on this section.

3. Discharge of liability

A receipt duly signed by the Master Policyholder or any other person authorised 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 us.

4. Claim payment

The claim payment will be as per Scheme Rules. The Policyholder will raise claims to avail Benefits with the following documents:

- Claim intimation form
- Member Policy schedule, as applicable
- Death certificate issued by the local authority in case of death claim
- Any other documents or information as may be required by the Company for processing of the claim depending on the cause of the claim
- 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.

Upon retirement or cessation of service or on death of a Member on the request made by the Policyholder, the Company shall pay the Benefits according to Part C, of this Policy, as the case may be.

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. The Policy Value will be debited on the day of effecting the claim request.

5. Fraud or Misrepresentation

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 insurer in accordance with Section 45 of the Insurance Laws (Amendment) Act, 2015, as amended from time to time. Please refer to Annexure E for details on this section.

6. Recovery

We reserve the right to recover the amount from the Master Policyholder or the Member or any other person, if applicable, if it is found that the Benefits are erroneously paid due to the fault of the Master Policyholder. In case we are not in a position to recover such amounts from the Member or any other person, the Master Policyholder will be liable to pay the said amount to the Company within 15 days from the date of its demand. However, the Master Policyholder will not be liable or responsible for any wrong payments made by the Company without any fault on the part of the Master Policyholder.

7. Incontestability

Incontestability will be as per Section 45 of the Insurance Laws (Amendment) Act, 2015, as amended from time to time. Please refer to Annexure E for details on this section.

8. Governing Law and Jurisdiction

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

Indian courts shall have exclusive jurisdiction over any and all differences or disputes arising in relation to this Policy.

9. Notices

Any notice, direction or instruction given under this Policy shall be in writing and delivered by hand, post, facsimile or e-mail to-

In case of the Master Policyholder:

As per the details specified by the Grantees in the Proposal Form / Change of Address intimation submitted by them.

In case of the Company:

 Address: Group Solutions Service Desk ICICI Prudential Life Insurance Ground Floor & Upper Basement, Unit No. 1A & 2A, Raheja Tipco Plaza, Rani Sati Marg, Malad (East), Mumbai- 400097 Maharashtra.
E-mail: grouplife@iciciprulife.com The Company's website must be checked for the updated contact details.

Notices and instructions sent by us to the Master 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.

10. 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.-Service tax on FMC is payable under the Policy as per tax laws and other financial enactments as they exist from time to time. Such monies will be charged to the Master Policyholder in accordance with company policy and as per prevailing rates and regulations wherever applicable. The Master Policyholder will be required to pay service tax, education cess or any other form of taxes or charges or levies as per the prevailing laws, regulations and other financial enactments as may exist from time to time, wherever applicable. These will be deducted by redemption of Units, wherever applicable.

All benefits payable under the policy are subject to the tax laws and other financial enactments as they exist from time to time.

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.

11. Electronic Transactions

The Grantees and the Members shall adhere to and comply with all such terms and conditions as the Company may prescribe from time to time.

All transactions carried out through Internet, electronic data interchange, call centers, 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 shall constitute to be legally binding on the Company as well as the Master Policyholder/Members/Beneficiaries.

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 Master Policyholder/Members/Beneficiaries.

12. Change of Trustees

The Master Policyholder agrees to execute all necessary documents to assign the rights to the Trustees in office, in case of change in Trustees or if any Trustee (s) resigns or dies while in office. The Company will duly endorse this Policy to effect such a change.

13. Force Majeure Conditions

Under 'Force Majeure' conditions, the Company may in the general interest of the holders of unit linked policies and keeping in view unforeseen circumstances or unusual market conditions, limit the total number of Units withdrawn on any day from each fund. Claims from each of the Company's funds may be limited to 5% of the total number of Units then outstanding from each respective fund. In exceptional circumstances, such as unusually high volume of sale of investments within a short period, exceptional redemption, market conditions or political or economic 'Force Majeure' conditions, the Company may, defer the surrender of the Policy or a claim until such time as normality returns, based on the directions of the Regulator at that time.

The Company reserves the right to value assets less frequently than daily under 'Force Majeure' conditions, where the value of the assets may be too uncertain. In such circumstances the extent of deferment will be as per the directions of the Regulator at that time.

Force Majeure consists of:

- a. When one or more stock exchanges which provide a basis for valuation for a substantial portion of the assets of the fund are closed other than for ordinary holidays
- b. When, as a result of political, economic, monetary or any circumstances out of our control, the disposal of the assets of the unit fund are not reasonable or would not reasonably be practicable without being detrimental to the interests of the remaining unit holders
- c. During periods of extreme volatility of markets during which surrenders and switches would, in our opinion, be detrimental to the interests of the existing unit holders of the fund
- d. In the case of natural calamities, strikes, war, civil unrest, riots and bandhs
- e. In the event of any disaster that affects our normal functioning
- f. If so directed by the Regulator

PART G

Grievance Mechanism and List of Ombudsman

1. Customer service

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.

I. 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.

II. Senior Grievance Redressal Officer:

If You do not receive any resolution or if You are not satisfied with the resolution provided by the GRO, You may get in touch with Our senior grievance redressal officer (SGRO) at smgro@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 Maharashtra. For more 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 NO: 155255 or (or) 1800 4254 732 Email ID: complaints@irda.gov.in You can also register your complaint online at http://www.igms.irda.gov.in/ Communication address to share complaints by post or courier: Consumer Affairs Department Insurance Regulatory and Development Authority of India Sy. No. 115/1, Financial District, Nanakramguda, Gachibowli Hyderabad– 500032 Telangana State

2. 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.

Office of the	Contact Details	Areas of Jurisdiction
Ombudsman		
AHMEDABAD	Office of the Insurance Ombudsman,	Gujarat, Dadra &
	Jeevan Prakash Building, 6th floor,	Nagar Haveli,
	Tilak Marg, Relief Road,	Daman and Diu.
	Ahmedabad -380 001	
	Tel.:- 079 - 25501201/02/05/06	
	Email: <u>bimalokpal.ahmedabad@ecoi.co.in</u>	
BENGALURU	Office of Insurance Ombudsman,	Karnataka.
	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@ecoi.co.in	
BHOPAL	Office of the Insurance Ombudsman,	Madhya Pradesh
	Janak Vihar Complex, 2nd Floor	and Chattisgarh.
	6, Malviya Nagar, Opp Airtel Office	
	Near New Market,	
	Bhopal - 462 003	
	Tel.:- 0755-2769201, 2769202	

Office of the Ombudsman	Contact Details	Areas of Jurisdiction
	Fax : 0755-2769203	
	Email: bimalokpal.bhopal@ecoi.co.in	
BHUBANESHWAR		
	62, Forest Park,	
	Bhubaneshwar -751 009	
	Tel.:- 0674-2596455/2596461	
	Fax : 0674-2596429	
	Email: bimalokpal.bhubaneswar@ecoi.co.in	
CHANDIGARH	Office of the Insurance Ombudsman,	Punjab, Haryana,
	S.C.O. No.101, 102 & 103, 2nd Floor	Himachal Pradesh,
	Batra Building, Sector 17-D	Jammu & Kashmir
	Chandigarh - 160 017	and UT of
	Tel.:- 0172-2706468/2706196	Chandigarh.
	Fax : 0172-2708274	C C
	Email: bimalokpal.chandigarh@ecoi.co.in	
CHENNAI	Office of the Insurance Ombudsman,	Tamil Nadu, UT-
	Fathima Akhtar Court,	Pondicherry Town
	4th Floor, 453,	and Karaikal (which
	Anna Salai, Teynampet,	are part of UT of
	Chennai -600 018	Pondicherry
	Tel.:- 044-24333668 /24335284	
	Fax : 044-24333664	
	Email: bimalokpal.chennai@ecoi.co.in	
DELHI	Office of the Insurance Ombudsman,	Delhi.
	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	
ERNAKULAM	Office of the Insurance Ombudsman,	Kerala ,
	2nd Floor, Pulinat Building	Lakshadweep ,
	Opp. Cochin Shipyard, M.G. Road,	Mahe– a part of
	Ernakulam-682 015	Pondicherry
	Tel : 0484-2358759/2359338	
	Fax : 0484-2359336	
	Email: bimalokpal.ernakulam@ecoi.co.in	
GUWAHATI	Office of the Insurance Ombudsman,	Assam, Meghalaya,
	Jeevan Nivesh, 5 th Floor,	Manipur, Mizoram,
	Near Panbazar Overbridge, S.S. Road,	Arunachal Pradesh,
	Guwahati -781 001	Nagaland and
	Tel.:- 0361-2132204/2132205	Tripura
	Fax : 0361-2732937	
	Email: bimalokpal.guwahati@ecoi.co.in	
HYDERABAD	Office of the Insurance Ombudsman,	Andhra Pradesh,
	6-2-46, 1 st Floor, Moin Court,	Telangana, UT of

Office of the Ombudsman	Contact Details	Areas of Jurisdiction
	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	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	Rajasthan.
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	West Bengal, Bihar, Sikkim, Jharkhand and Andaman and Nicobar Islands.
LUCKNOW	Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase II, Nawal Kishore Road, Hazaratganj, Lucknow - 226 001 Tel : 0522 -2231331/2231330 Fax : 0522-2231310 Email: bimalokpal.lucknow@ecoi.co.in	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,

Office of the Ombudsman	Contact Details	Areas of Jurisdiction
		Chandauli, Ballia, Sidharathnagar.
MUMBAI	Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe S.V. Road, Santacruz(W), Mumbai - 400 054 Tel : 022-26106960/26106552 Fax : 022-26106052 Email: bimalokpal.mumbai@ecoi.co.in	Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane
NOIDA	Office of Insurance Ombudsman, Bhagwan Sahai 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	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@ecoi.co.in	Bihar, Jharkhand

Office of	the	Contact Details	Areas of Jurisdiction
Ombudsman			
PUNE		Office of Insurance Ombudsman, II Floor, Jeevan Darshan,N C Kelkar Road, C.T.S No 195 to 198, Narayanpeth Pune-411030 Tel: 020-41312555 Email: bimalokpal.pune@ecoi.co.in	Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region.

Annexure A - Annual Loyalty Additions

For Option A:

Annual Loyalty Addition (% of Policy value)	
Policy value (Rs. millions)	
< 10	0.20%
10 to 20	0.30%
20 to 50	0.50%
50 to 100	0.70%
100 to 150	0.75%
150 to 200	0.80%
200 to 250	0.85%
250 to 300	0.90%
300 to 500	0.95%
500 to 2500	1.00%
> 2500	1.05%

For Option B:

	Annual Loyalty Addition (% of Policy value)			
	Ex	Extra Allocation selected at policy inception		
Policy value (Rs. millions)	1%	2%	3%	4%
< 10	0.15%	0.10%	0.05%	0.00%
10 to 20	0.25%	0.20%	0.15%	0.10%
20 to 50	0.45%	0.40%	0.35%	0.30%
50 to 100	0.65%	0.60%	0.55%	0.50%
100 to 150	0.70%	0.65%	0.60%	0.55%
150 to 200	0.75%	0.70%	0.68%	0.63%
200 to 250	0.80%	0.75%	0.70%	0.65%
250 to 300	0.85%	0.80%	0.75%	0.70%
300 to 500	0.90%	0.85%	0.80%	0.75%
500 to 2500	0.95%	0.90%	0.85%	0.70%
> 2500	1.00%	0.95%	0.90%	0.85%

If the Policyholder opts for Defined Contribution Comprehensive Capital Guarantees as set out in the Policy schedule, then annual Loyalty Addition will be reduced by 8 basis points subject to a minimum annual Loyalty Addition of 0%.

<u>Annexure B – Outstanding Extra Allocation</u>

Option A

Outstanding Extra Allocation will not apply since Extra Allocation is not available under Option A.

Option B

Outstanding Extra Allocation is Extra Allocation in Rupees less total amount of Extra Allocation already explicitly recovered.

Defined Benefit Schemes:

The Outstanding Extra Allocation is recovered from the Policy:

- While the Policy is inforce on each Policy anniversary following policy inception as per the table below
- In full on Policy Surrender

The annual recovery of Outstanding Extra Allocation while the Policy is inforce shall be from the Scheme Account and is as per the following table:

Policy anniversary	% of Outstanding Extra Allocation recovered
1 st	20%
2 nd	25%
3 rd	33%
4 th	50%
5 th	100%
Thereafter	Nil

Foreclosure of the Policy

If the Policy Value is equal to or less than the Outstanding Extra Allocation, then the Outstanding Extra Allocation will be recovered and the Policy will be terminated.

Annexure C - Charges Applicable

Defined Contribution Scheme:

Charges applicable are as follows

Switch Charge: Nil

Premium Allocation Charge: Nil

Premium Redirection Charge: Nil

Fund Management Charge (FMC) and Charge for Investment Guarantee (CIG)

Fund	FMC (p.a. as % of funds)	CIG (p.a. as % of funds)
Group Capital Guarantee Short Term Debt Fund III	1.30%	0.10%
Group Capital Guarantee Debt Fund III	1.30%	0.10%
Group Capital Guarantee Balanced Fund III	1.30%	0.10%
Group Capital Guarantee Growth Fund III	1.30%	0.15%

FMC and CIG are charged daily by adjustment to the NAV.

Surrender Charges

The charges applicable on Policy surrender are shown below subject to maximum of Rs 500,000. Surrender charge is surrender percentage multiplied by Policy Value after crediting the Loyalty Additions.

Policy Year	Surrender Charge
1 – 3	0.05%
Thereafter	0%

For Defined Contribution Scheme with Comprehensive Capital Guarantee:

Charges applicable are as follows

Switch Charge: Nil

Premium Allocation Charge: Nil

Premium Redirection Charge: Nil

Fund Management Charge (FMC) and Charge for Investment Guarantee (CIG)

Fund	FMC (p.a. as % of funds)	CIG (p.a. as % of funds)
Group Capital Guarantee Short Term Debt Fund III	1.30%	0.10%
Group Capital Guarantee Debt Fund III	1.30%	0.10%
Group Capital Guarantee Balanced Fund III	1.30%	0.10%

FMC and CIG are charged daily by adjustment to the NAV.

Surrender Charges

The charges applicable on Policy surrender are shown below subject to maximum of Rs 500,000. Surrender charge is surrender percentage multiplied by Policy Value after crediting the Loyalty Additions.

Policy Year	Surrender Charge
1 – 3	0.05%
Thereafter	0%

For Defined Benefit Scheme:

Charges applicable are as follows

Switch Charge: Nil

Premium Allocation Charge: Nil

Premium Redirection Charge: Nil

Fund Management Charge (FMC) and Charge for Investment Guarantee (CIG)

Fund	FMC (p.a. as % of funds)	CIG (p.a. as % of funds)
Group Short Term Debt Fund II	1.30%	0.10%

FMC and CIG are charged daily by adjustment to the NAV.

Surrender Charges

The charges applicable on Policy surrender are shown below subject to maximum of Rs 500,000. Surrender charge is surrender percentage multiplied by Policy Value after crediting the Loyalty Additions and recovery of Outstanding Extra Allocation, if any.

Policy Year	Surrender Charge
1 – 3	0.05%
Thereafter	0%

<u>Annexure D – Section 39 – Nomination by policyholder</u>

Nomination of a life insurance Policy is as below in accordance with Section 39 of the Insurance laws (Amendment) Act, 2015 as amended from time to time. The extant provisions in this regard are as follows:

- 1. The policyholder of a life insurance on his own life may nominate a person or persons to whom money secured by the policy shall be paid in the event of his death.
- 2. Where the nominee is a minor, the policyholder may appoint any person to receive the money secured by the policy in the event of policyholder's death during the minority of the nominee. The manner of appointment to be laid down by the insurer.
- 3. Nomination can be made at any time before the maturity of the policy.
- 4. Nomination may be incorporated in the text of the policy itself or may be endorsed on the policy communicated to the insurer and can be registered by the insurer in the records relating to the policy.
- 5. Nomination can be cancelled or changed at any time before policy matures, by an endorsement or a further endorsement or a will as the case may be.
- 6. A notice in writing of Change or Cancellation of nomination must be delivered to the insurer for the insurer to be liable to such nominee. Otherwise, insurer will not be liable if a bonafide payment is made to the person named in the text of the policy or in the registered records of the insurer.
- 7. Fee to be paid to the insurer for registering change or cancellation of a nomination can be specified by the Authority through Regulations.
- 8. On receipt of notice with fee, the insurer should grant a written acknowledgement to the policyholder of having registered a nomination or cancellation or change thereof.
- 9. A transfer or assignment made in accordance with Section 38 shall automatically cancel the nomination except in case of assignment to the insurer or other transferee or assignee for purpose of loan or against security or its reassignment after repayment. In such case, the nomination will not get cancelled to the extent of insurer's or transferee's or assignee's interest in the policy. The nomination will get revived on repayment of the loan.
- 10. The right of any creditor to be paid out of the proceeds of any policy of life insurance shall not be affected by the nomination.
- 11. In case of nomination by policyholder whose life is insured, if the nominees die before the policyholder, the proceeds are payable to policyholder or his heirs or legal representatives or holder of succession certificate.

- 12. In case nominee(s) survive the person whose life is insured, the amount secured by the policy shall be paid to such survivor(s).
- 13. Where the policyholder whose life is insured nominates his
 - a. parents or
 - b. spouse or
 - c. children or
 - d. spouse and children
 - e. or any of them

the nominees are beneficially entitled to the amount payable by the insurer to the policyholder unless it is proved that policyholder could not have conferred such beneficial title on the nominee having regard to the nature of his title.

- 14. If nominee(s) die after the policyholder but before his share of the amount secured under the policy is paid, the share of the expired nominee(s) shall be payable to the heirs or legal representative of the nominee or holder of succession certificate of such nominee(s).
- 15. If policyholder dies after maturity but the proceeds and benefit of the policy has not been paid to him because of his death, his nominee(s) shall be entitled to the proceeds and benefit of the policy.
- 16. The provisions of Section 39 are not applicable to any life insurance policy to which Section 6 of Married Women's Property Act, 1874 applies or has at any time applied. Where nomination is intended to be made to spouse or children or spouse and children under Section 6 of MWP Act, it should be specifically mentioned on the policy. In such a case only, the provisions of Section 39 will not apply.

<u>Annexure E – Section 45 – Policy shall not be called in question on the ground of mis-</u> statement after three years

Provisions regarding policy not being called into question in terms of Section 45 of the Insurance laws (Amendment) Act, 2015, as amended from time to time are as follows:

- 1. No Policy of Life Insurance shall be called in question on any ground whatsoever after expiry of 3 yrs from
 - a) the date of issuance of policy or
 - b) the date of commencement of risk or
 - c) the date of revival of policy or
 - d) the date of rider to the policy

whichever is later.

- 2. On the ground of fraud, a policy of Life Insurance may be called in question within 3 years from
 - a) the date of issuance of policy or
 - b) the date of commencement of risk or
 - c) the date of revival of policy or
 - d) the date of rider to the policy

whichever is later.

For this, the insurer should communicate in writing to the insured or legal representative or nominee or assignees of insured, as applicable, mentioning the ground and materials on which such decision is based.

- 3. Fraud means any of the following acts committed by insured or by his agent, with the intent to deceive the insurer or to induce the insurer to issue a life insurance policy:
 - a) The suggestion, as a fact of that which is not true and which the insured does not believe to be true;
 - b) The active concealment of a fact by the insured having knowledge or belief of the fact;
 - c) Any other act fitted to deceive; and
 - d) Any such act or omission as the law specifically declares to be fraudulent.
- 4. Mere silence is not fraud unless, depending on circumstances of the case, it is the duty of the insured or his agent keeping silence to speak or silence is in itself equivalent to speak.
- 5. No Insurer shall repudiate a life insurance Policy on the ground of Fraud, if the Insured / beneficiary can prove that the misstatement was true to the best of his knowledge and there was no deliberate intention to suppress the fact or that such mis-statement of or suppression of material fact are within the knowledge of the insurer. Onus of disproving is upon the policyholder, if alive, or beneficiaries.
- 6. Life insurance Policy can be called in question within 3 years on the ground that any statement of or suppression of a fact material to expectancy of life of the insured was incorrectly made in the proposal or other document basis which policy was issued or

revived or rider issued. For this, the insurer should communicate in writing to the insured or legal representative or nominee or assignees of insured, as applicable, mentioning the ground and materials on which decision to repudiate the policy of life insurance is based.

- 7. In case repudiation is on ground of mis-statement and not on fraud, the premium collected on policy till the date of repudiation shall be paid to the insured or legal representative or nominee or assignees of insured, within a period of 90 days from the date of repudiation.
- 8. Fact shall not be considered material unless it has a direct bearing on the risk undertaken by the insurer. The onus is on insurer to show that if the insurer had been aware of the said fact, no life insurance policy would have been issued to the insured.
- 9. The insurer can call 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 of age of life insured. So, this Section will not be applicable for questioning age or adjustment based on proof of age submitted subsequently.