

# Policy Document - Terms and Conditions of your policy

## ICICI Pru Assure Wealth - Plus Variant

In this Policy, the investment risk in investment portfolio is borne by the Policyholder  
Unique Identification Number (UIN) allotted by Insurance Regulatory and Development Authority (IRDA)  
UIN number: ICICI Pru Assure Wealth Plus: 105L098V01

In this document, "you" or "your" will refer to the Policyholder 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.

Freelook period: A period of 15 days is available to you to review the Policy. If you do not find the Policy suitable, this Policy Document must be returned to the Company within 15 days from the date you received the same. On cancellation of the Policy during the freelook period, we will return the premium subject to the deduction of: a. Stamp duty under the Policy, if any, b. Expenses borne by the Company on medical examination, if any. The Policy shall terminate on payment of this amount and all rights, benefits and interests under this Policy will stand extinguished.

### 1. Definitions

In the Policy Document, unless the context otherwise requires: i. Allocation is attachment of Units to your Policy at the applicable NAV. ii. Fund is the pool of assets hypothecated to the unit-linked liabilities and invested to achieve the Fund's objective. The price of each Unit in a Fund depends on how the investments in the Fund perform. The Fund is managed by the Company. iii. Fund Value is the Value obtained by multiplying the number of units allocated to your Policy by their corresponding NAVs. iv. Life Assured is the person on whose life the Policy contract has been issued. v. Life Insurance Cover is the excess of Sum Assured (adjusted for Partial Withdrawals) over Fund Value. vi. Sum Assured is the guaranteed amount, payable on the death of the Life Assured vii. Net Asset Value (NAV) is the value per unit calculated in Rupees. viii. Policyholder is the Proposer under the Policy or the owner of the Policy at any point of time. ix. Unit is a portion or a part of the Fund.

### 2. Benefits Payable

2.1 Additional Allocation of Units: There will be additional allocation of Units every year on premium payment starting from the beginning of the 8th Policy year as per table given below till the end of the Policy:

Policy Year	Additional allocation of Units (as a % of regular premium)
8 <sup>th</sup> year onwards	2%

The date of the Additional Allocation of Units will be the same as that of the allocation of units on receipt of due premium. Allocation of Additional Units will be made only if the Policy is in force and all due premiums have been paid up to, and including, the date of allocation. The additional Units shall be allocated amongst the Funds in the same proportion as the due Premium. No Additional units would be allocated where the cover continuation option is chosen.

2.2 Guaranteed Addition (GA): i. GA as a percentage of one annual premium will be allocated to the Fund Value at the end of the 15th policy year, depending on the number of premiums paid, as shown in the below table:

Number of completed Policy years for which premiums are paid	GA payable at the end of 15 <sup>th</sup> Policy year (percentage of annual premium)
7	140
8	145
9	150
10	155
11	160
12	165
13	170
14	175
15	180

ii. The GA shall be paid only if the Policy has not been terminated as on the date of said payment. iii. The GA shall be allocated amongst the Funds in same proportion as the Fund Value held in each Fund at the time of allocation. iv. GA shall be allocated even if the cover continuation option is chosen. v. GA shall be allocated irrespective of the investment strategy chosen.

2.3 Surrender: Surrender means voluntary termination of the Policy by you. The Surrender Value is the Fund Value. No charges shall be levied for Surrender of the Policy. Your policy acquires a surrender value after payment of more than one full year's premium. However, the surrender value would be payable only after completion of three policy years or whenever the Policy is surrendered thereafter. If a surrender is sought within the first three years, the Surrender Value shall be payable at the end of third policy year and shall equal the Fund Value at the end of third policy year. The Policy shall terminate on payment of the Surrender Value. All rights, benefits and interests under this policy shall stand extinguished upon this payment.

2.4 Death Benefit: i. In the unfortunate event of death of Life Assured during the term of the Policy (subject to the Policy being in force), we shall pay the nominee the Sum Assured (reduced by Partial Withdrawals) or the Fund Value, whichever is higher: (i) Where the death of Life Assured occurs before or at age 60, the Sum Assured shall be reduced to the extent of partial withdrawals made during the two years immediately preceding the date of death. (ii) Where the death of the Life Assured occurs after age 60, the Sum Assured shall be reduced to the extent of all partial withdrawals made after attaining age 58. ii. In case you discontinue paying premiums within the first three Policy years, only the Fund Value shall be payable and that only until the Policy terminates. iii. In case of the death of the Life Assured before age 7, only the Fund value shall be payable. iv. The Policy shall terminate on payment of the Death benefit. All rights, benefits and interests under this Policy shall stand extinguished upon this payment.

2.5 To whom the Benefits are payable: To the Proposer, Life Assured, or the assign(s) where a valid assignment (in accordance with Section 38 of the Insurance Act, 1938) or endorsement has been recorded, or the nominee(s) where a valid nomination has been registered by the Company (in accordance with section 39 of the Insurance Act, 1938), or the executors, administrators or other legal representatives who should take out representation to the estate or to such person 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, that on proof to the satisfaction of the Company of the benefits having become payable as set out in the Schedule and of the title of the said person or persons claiming payment and of the correctness of the age of the Life Assured stated in the Proposal (if not previously admitted) or upon the happening of an event upon which one or more benefits become payable under this Policy, the Sum Assured or the appropriate benefit will be paid by the Company.

### 3. Premium

3.1 Premium Payment: i. You are required to pay premiums on the due date and for the amount mentioned in the Policy certificate. There is a grace period of 15 days, where the frequency of payment is monthly and 30 days for all other frequencies. If you do not pay premium on the due date or during the days of grace, the provisions as per Clause 3.2 shall apply. ii. Premiums are payable without any obligation on us to issue a notice for the same. iii. You may pay premium through any of the following modes: a. Cash b. Cheque c. Demand Draft d. Pay Order e. Banker's Cheque f. Internet g. Electronic Clearing System h. Credit Card. Amount and modalities will be subject to our rules and relevant legislation or regulation. iv. Premiums shall be construed to be received only when received at any of our offices. v. Where premiums have been remitted otherwise than in cash, the application of the premiums received is conditional upon the realization of the proceeds of the instrument of payment, including electronic

mode. vi. If you suspend payment of premium for any reason whatsoever, we shall not be held liable. In such an event, benefits, if any, will be available only in accordance with the Policy terms and conditions.

3.2 Continuation of the Policy: i. Before payment of three full years' premiums, if you do not pay any premium on the due date or during the grace period, the Life Insurance Cover will cease and mortality charges will not be deducted. The policy administration and fund management charges would continue to be applicable. You may revive the Policy within two years (subject to underwriting, where applicable) from the due date of the first unpaid premium so long as the policy has not been terminated. During this period of two years, you will continue to be invested in the respective Funds and only the Fund Value will be payable in case of death of the Life Assured. If the Policy is not revived within this period and the Policy is not terminated, we will terminate the Policy at the end of the third Policy year or at the end of the revival period, whichever is later, by paying the Surrender Value as applicable. ii. In case of discontinuance of premium after paying three full years' premium and before payment of seven full years' premium, a revival period of two years, from the date when the first unpaid premium was due, will be provided. During this revival period you will continue to be invested in the Funds and the Life Insurance Cover will continue to apply. All charges will continue to be levied. If the premium payment is not resumed within the period of two years from the due date of the first unpaid premium, we will terminate the Policy at the end of the revival period by paying the Surrender Value as applicable. iii. In case of discontinuance of premium after paying seven full years' premium, if the premium payment is not resumed within the revival period of two years from the due date of the first unpaid premium, you will have the option of continuing the Policy beyond the period of two years without any further payment of premium. This option is known as the Cover Continuation Option (CCO). Life Insurance Cover would be maintained, with deduction of mortality charges and other charges. If you, opt for CCO the Policy will continue, subject to the foreclosure conditions as described below. However, if you do not choose to continue the Policy, the Policy will be foreclosed by payment of Surrender Value as per the Policy terms and conditions. The Surrender Value shall be the Fund Value at that time. iv. Foreclosure: If after premiums for three full Policy years have been paid and three Policy years have elapsed, the Fund Value under the Policy falls below 110% of one full year's premium, the Policy shall be terminated by paying the Fund Value.

### 4. Funds

4.1 Investment Objectives of the Funds and Portfolio Allocation:

Fund Name and Its Objective	Asset Allocation	% (Min)	% (Max)	Risk-Reward Profile
<b>Multi Cap Growth Fund:</b> To generate superior long-term returns from a diversified portfolio of equity and equity related instruments of large, mid and small cap companies.	Equity & Equity Related Securities Debt, Money Market & Cash	80% 0%	100 20	High
<b>Opportunities Fund:</b> To generate superior long-term returns from a diversified portfolio of equity and equity related instruments of companies operating in four important types of industries viz., Resources, Investment-related, Consumption-related and Human Capital leveraged industries.	Equity & Equity Related Securities Debt, Money Market & Cash	80% 0%	100% 20%	High
<b>Bluechip Fund:</b> To provide long-term capital appreciation from equity portfolio predominantly invested in NIFTY scrips.	Equity & Equity Related Securities Debt, Money Market & Cash	80% 0%	100% 20%	High
<b>Multi Cap Balanced Fund:</b> To achieve a balance between capital appreciation and stable returns by investing in a mix of equity and equity related instruments of large, mid and small cap companies and debt and debt related instruments.	Equity & Equity Related Securities Debt, Money Market & Cash	0% 40%	60% 100%	Moderate
<b>Income Fund:</b> 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.	Debt Instruments, Money Market & Cash	100%	100%	Low
<b>Money Market Fund:</b> To provide suitable returns through low risk investments in debt and money market instruments while attempting to protect the capital deployed in the Fund.	Debt Instruments Money Market & Cash	0% 50%	50% 100%	Low

Fund Name & Its Objective	P/E Range	Allocation in Equity and Equity related securities	Risk-Reward Profile
<b>Dynamic P/E Fund:</b> To provide long term capital appreciation through dynamic asset allocation between equity and debt. The allocation to equity and equity related securities is determined by reference to the P/E multiple on the NIFTY 50 <sup>11</sup> ; the remainder is to be invested in debt instruments, money market and cash.	< 14 14 to 16 16 to 18 18 to 20 >20	90% to 100% 80% to 100% 60% to 100% 40% to 80% 0% to 40%	High

<sup>11</sup> Source: Based on prices and consensus earnings estimates from Bloomberg.

4.2 Units: The nominal Value of the Units is Rs. 10 each. The Units are allocated in the manner described below and such allocations may be made up to 1/1000th of a Unit or such other fraction as the Company may, in its sole discretion, decide.

4.3 NAV: The NAV will be based on the appropriation price when the Fund is expanding and the expropriation price when the Fund is contracting. The appropriation price is defined as follows. [Market or Fair Value of the Investments plus expenses incurred in the purchase of assets plus Current Assets and accrued interest (net of fund management charges) less Current Liabilities and provisions], Divided by, Number of Units outstanding under the Fund at Valuation Date, before any new Units are created. The expropriation price is defined as follows. [Market or Fair Value of the Investments minus expenses incurred in the sale of assets plus Current Assets and accrued interest (net of fund management charges) less Current Liabilities and provisions], Divided By, Number of Units outstanding under the Fund at Valuation Date, before any Units are cancelled

4.4 Risks of Investment in the Fund: Investment in Funds is subject to the following risks, amongst others: i. The investment risk in the investment portfolio is borne by you. ii. ICICI Pru Assure Wealth Plus is only the name of the Policy and does not in any way indicate the quality of the Policy, its future prospects or returns. iii. Names of the Funds mentioned above do not in any manner indicate the quality of the Funds, their future prospects or returns. iv. The investments in the Funds are subject to market and other risks and there can be no assurance that the objectives of the Funds will be achieved. v. The past performance of our Funds is not necessarily indicative of the future performance of the Funds available with this Policy.

4.5. Valuation Date: Valuation Date is any date when NAV is declared by us. The NAV shall be declared by the Company on a daily basis except on Bank holidays, Exchange holidays, Saturdays, Sundays and the days on which our Corporate Office or Banks or Exchange are closed.

4.6. Valuation of the Fund: Valuation of Funds is the determination of the Value of the underlying assets of the Funds. The valuation of the assets shall be made as per the valuation norms prescribed by the Insurance Regulatory and Development Authority and implemented by us.

4.7. Investment of the Fund: We shall select the investments, including derivatives and units of mutual Funds, for each Fund at our sole discretion subject to the investment objectives of the respective Funds and IRDA regulations.

4.8 Your Rights with Respect to the Fund: The Policy enables you 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 you or on the Life Assured 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. 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 the Company in respect of the investments in favour of the Policyholder or Assignee or Nominee of the Policy or any other person.

4.9 New Funds: New Funds may be introduced by the Company subject to approval from IRDA from time to time and the Policyholder shall be notified of the introduction of such New Funds. The Company may offer to the Policyholder the option to switch to those Funds at such NAV and subject to such terms and conditions as may be specified by the Company at that time. Switching between the existing Funds is subject to the terms and conditions detailed in Clause 5.3.

4.10 Fund Closure: i. Although all the Funds, are open ended, we may, at our discretion and subject only to approval from IRDA, completely close any of the Funds on the happening of any event, which in our sole opinion requires the said Fund to be closed. You 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' situations described in Section 8.2, where we may give a shorter notice. ii. 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 you, we will switch the said Units to any another Fund at our discretion and subject only to approval from IRDA. 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. iii. In case of complete closure of the any of the Fund(s) of LifeCycle-based Portfolio Strategy, the Company shall continue the LifeCycle-based Portfolio Strategy by switching all the Units in the closed Fund(s) to other Fund(s) with similar asset allocation and risk-reward profile. In case of partial closure of a Fund, after giving notice as above of the date of such closure, the Company shall cease to accept any premium for investing in the said Fund.

#### 5. Options Available

5.1 Top Up Premium: i. This is an additional amount that you can choose to pay at irregular intervals during the term of the Policy, provided all due premiums are paid. ii. Currently the minimum Top up premium is Rs. 2,000, and shall be subject to change as per the rules of the Company from time to time, subject to prior approval from IRDA. iii. A 1% allocation charge will apply to all Top up premiums. iv. On payment of this amount you will have an option to increase the Sum Assured either by 125% or by 500% of the Top up premium amount, subject to our underwriting guidelines. v. There is a lock in period of 3 years for each Top up premium from the date of payment of the top up premium for the purpose of Partial Withdrawals.

5.2 Partial Withdrawal: You shall have an option to withdraw units by either specifying the number of Units to be withdrawn or the amount to be withdrawn, subject to the conditions mentioned below: (a) One partial withdrawal will be allowed every three policy years after completion of seven policy years, provided premiums for the first seven policy years have been paid. There would be no charge for this withdrawal. For example, partial withdrawal can be done once from the 8th to the 10th policy year, once from the 11th to 13th policy year and so on. (b) Currently, the minimum withdrawal amount is Rs. 2,000 and the maximum amount is 20% of the Fund Value as on the date of Partial Withdrawal. There would be no charge for this Withdrawal. We reserve the right to change the minimum and maximum amount from time to time. (c) Partial withdrawal will affect the death benefit as mentioned in Clause 2.4 above (d) On partial withdrawal the remaining Fund Value must be greater than 110% of the annual premium. If the Fund Value falls below 110% of the annual premium, the balance shall be withdrawn fully and the Policy would be foreclosed as stated in Clause 3.2. (e) There will be a 3 year lock-in period (from the date of payment) on the top-up premiums for the purpose of partial withdrawal. However this condition will not apply if the top up premiums are paid during the last three years of the Policy term. (f) For policies issued on minor lives, Partial Withdrawals will be allowed only after the Life Assured reached age 18 years last birthday. (g) Any unused partial withdrawal cannot be carried forward.

5.3 Switches: You have an option to switch Units from one Fund to another by redeeming Units in the first Fund and allocation of Units in the second Fund, based on the NAV of the relevant Funds. This feature will be available only with Fixed Portfolio Strategy. i. You are allowed four free switches in each Policy year starting from the date of commencement of the Policy. Any unutilized free switch cannot be carried forward. ii. Currently, for any non-free switch, a Switching charge of Rs 100 shall be applicable except in case of complete or partial closure of the Funds. This charge is subject to change, as per the rules of the Company from time to time subject to IRDA approval. iii. Currently, the minimum amount per switch is Rs. 2,000 and shall be subject to change as per the rules of the Company from time to time. iv. During the first three Policy years, switches shall not be allowed unless all due premiums till date have been paid.

5.4 Premium Redirection: i. This is the facility allowing you to modify the allocation of amount of renewal premium into a different investment pattern from the option exercised at the inception of the Policy. This feature will be available only with Fixed Portfolio Strategy. ii. You will have an option to specify the Funds and the proportion in which the premiums are to be invested in the Funds at the inception of the Policy. At the time of subsequent premiums, you may change the proportion in which the said premiums are to be invested. Once chosen, this Fund allocation will apply for all subsequent premiums. This option is available without any charge and it will not be counted as a switch.

5.5 Increase of Sum Assured: i. Increase in Sum Assured will be allowed only on the Policy anniversary, provided all due premiums till date have been paid. ii. This shall be subject to underwriting. You shall have to bear the cost of any medical report(s) and charges. The increase in Sum Assured shall be in multiples of Rs. 1,000 and subject to the maximum Sum Assured multiples (refer to Annexure II). iii. This shall not be allowed on or after the Policy anniversary on which the Life Assured attains age 60. iv. You shall have to pay increased mortality charges as a result of this increase. v. All costs and increased mortality charges shall be recovered through cancellation of units. vi. We reserve the right to change the multiple of Rs. 1,000 from time to time.

5.6 Decrease of Sum Assured: i. This decrease will be allowed only on a Policy anniversary. ii. This shall be in multiples of Rs 1,000 subject to a minimum Sum Assured as applicable for this plan. iii. Once you opt for decreasing the Sum Assured, any subsequent request for increase of Sum Assured will be considered as per Clause 5.5 above. iv. We reserve the right to change the multiple of Rs.1,000 from time to time. v. No reduction in premium is allowed.

5.7 Loans: No Loans are allowed under this plan.

5.8 Increase or Decrease in Premium: No increase or decrease in premium is allowed under this plan.

5.9 Portfolio Strategies: You have the option to choose from the following portfolio strategies. i. LifeCycle based Portfolio Strategy: a. Under this strategy, investment will be in the Funds - Income Fund and Multi Cap

Growth Fund - in the proportions shown in the table below according to the age of Life Assured.

Age of the Life Assured (in years) at the time of Policy inception or on quarterly Policy anniversary as the case may be	Multi Cap Growth Fund	Income Fund
20 – 25	85%	15%
26 – 35	75%	25%
36 – 45	65%	35%
46 – 55	55%	45%
56 – 65	45%	55%
66 – 72.5	35%	65%

b. On a quarterly basis, Units shall be rebalanced as necessary to achieve the above proportion of the Fund Value in the Multi Cap Growth Fund and Income Fund as stated above. The re-balancing of units shall be done on the last day of each Policy quarter. The above proportions shall apply until the last ten quarters of the Policy are remaining.

c. From age 72.5 to age 75 last birthday, the exposure in Multi Cap Growth Fund will be systematically reduced as per the table below by automatic switches to the Income Fund.

Age of Policy holder	Multi Cap Growth Fund	Exposure in the Last Ten Quarters prior to Policyholder completing 75 years of age										
		10	9	8	7	6	5	4	3	2	1	
72.5	75	35%	31.5%	28.0%	24.5%	21.0%	17.5%	14.0%	10.5%	7.0%	3.5%	0.0%

After the Life Assured attains age 75, the exposure to equity through Multi Cap Growth Fund will be 0% and the entire Fund Value will be allocated to Income Fund. d. You do not have the flexibility to alter the above stated proportions of Multi Cap Growth Fund and Income Fund while the investments are in the LifeCycle based Portfolio Strategy. However, you can change the strategy to the Fixed Portfolio Strategy at any point of time by opting for Change in Portfolio Strategy as detailed in Clause 5.10. e. If the date of rebalancing Policy quarter is not a Valuation Date then we shall apply the NAV of the next immediate Valuation Date. The Policy quarter means the quarterly anniversary of the Policy with reference to Date of Commencement of the Policy. f. Partial withdrawals may result in the proportion of funds in the Multi Cap Growth and Income Fund to differ from the LifeCycle schedule mentioned earlier. This will be rebalanced by automatic switching of units at the next Policy quarterly anniversary if the LifeCycle-based Portfolio Strategy has been opted for. ii. Fixed Portfolio Strategy: Under this option, you have the option to choose amongst the Funds as outlined in Clause 4.1. You shall specify the Fund(s) and the proportion in which the premiums and any existing Fund Value are to be invested in the chosen Fund(s) at the inception of the Policy or at the time of change to the Fixed Portfolio Strategy from the LifeCycle-based Portfolio Strategy, as the case may be. iii. Change in Portfolio Strategy (CIPS): You have the flexibility to change your portfolio between the LifeCycle based Portfolio Strategy and Fixed Portfolio Strategy. On moving from the Fixed Portfolio Strategy to the LifeCycle based Portfolio Strategy, the existing funds as well as all future premiums will be allocated between Multi Cap Growth Fund and Income Fund as per the LifeCycle schedule mentioned earlier. On moving from LifeCycle based Portfolio Strategy to the Fixed Portfolio Strategy, you must specify the proportions among the choice of funds available in which your existing funds and future premium should be invested. This option to switch between Fixed and LifeCycle based Portfolio Strategy can be exercised only once every policy year. This facility will be provided free of cost. At any point of time the entire investment under the policy can be only in invested only in one portfolio strategy. iv. Automatic Transfer: a. This option is available only with Fixed Portfolio Strategy. b. You may opt for an automatic monthly transfer of a pre-defined amount from your investments in the Money Market Fund, into any one of the equity Funds available under the plan (namely Bluechip Fund, Multi Cap Growth Fund, and Opportunities Fund). You may 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. If you have not specified the transfer date, then the transfer will occur on the 1st of every month. c. At the time of transfer, the required number of units will be redeemed from Money Market Fund, at the applicable unit Value and new units will be created in the chosen destination Fund. The minimum transfer amount is Rs. 2,000. This value is subject to change from time to time as per rules of the Company and subject to prior approval of IRDA. d. The Automatic Transfer Strategy will be regularly processed till you notify us to discontinue the same through a written communication. The Automatic Transfer Strategy will not be applicable if the source Fund Value is less than the amount nominated for transfer.

5.10 Riders: The riders mentioned below are available under this Policy. However the benefit under the Riders shall become payable only if the same are opted for and premiums for the same are duly paid. The Riders can be chosen at the inception of the Policy or at any Policy anniversary during the Policy term, subject to underwriting. • Accident and Disability Benefit Rider (ADBR) • Critical Illness Benefit Rider (CIBR). The amount of Rider cover will be restricted to the initial chosen Sum Assured of the base plan. For minor lives, rider cover will be available only on the Life Assured reaching age 18 last birthday. The details of the riders are mentioned in Annexure III.

#### 6. Applicability of NAV

i. The allocation and redemption of units for various transactions would be at the NAV as described below

Type of transaction	Applicable NAV (Where transaction is received before cut-off time *)
First Premium Deposit received by way of local cheque or pay order or demand drafts payable at par	NAV of the date of commencement of the Policy
First Premium Deposit received by way of outstation cheque or pay order or demand drafts	NAV of the date of commencement of Policy or date of realization of the amount by the Company, whichever is later
Renewal premiums received by way of Direct debit, ECS, credit card, etc.	NAV of the date of receipt of instruction or the due date, whichever is later
Renewal premiums received by way of local cheque or pay order or demand drafts payable at par	NAV of the date of receipt of instrument or the due date, whichever is later
Renewal premiums received by way of outstation cheque or pay order or demand drafts	NAV of the date of receipt of instrument or the due date or date of realization of the amount by the Company, whichever is later
Partial Withdrawal	NAV of the date of receipt of the request
• Free Look cancellation • Death claim	NAV of the date of receipt of the request or intimation of claim (Intimation for the purpose of claim must be in writing. For free look cancellation, request must be in writing or through electronic mode or any other manner as decided by the Company from time to time)
Surrender	If request received after three Policy years: NAV of the date of receipt of the request. If request received before three Policy years: NAV of the date on which 4th Policy year commences.
Foreclosure or revival	NAV of the date of effect of foreclosure or revival
Additional allocation of Units and Guaranteed Addition	NAV of the date of allocation
Top Up	NAV of the date of receipt of request

ii. Currently the cut-off time is 3.00 p.m. The cut-off time may be changed as per the prevailing IRDA guidelines. iii. If the transaction request is received after the cut-off time, then NAV of the next date or in case of prepayment of renewal premium, NAV of the due date, shall be applicable. iv. If the same day or the next day or the transaction due date is not a Valuation date, then we shall apply the NAV of the next immediate Valuation Date. v. In the event of the new applications or proposals received on the last day of the financial year, the NAV of that day would be applicable.

The cut-off time shall not be applicable for such transactions. vi. The units allocated shall be reversed in case of non realization of the premium amount. vii. We shall follow the norms as stated above for any transactions, which are not specifically mentioned herein but involve allocation and redemption of units.

#### 7. Charges

7.1 Premium Allocation Charge: Premiums are allocated to the chosen Fund after deducting the premium allocation charges as given below.

Policy years	Year 1	Year 2-5	Year 6-7	Thereafter
Premium Allocation Charge (% of premium)	100%	4%	4%	0%

The number of Units purchased would be computed based on the NAV as provided in Clause 6. Service Tax on the first year's premium allocation charge will be borne by the Company.

7.2 Top up Allocation Charge: The Top-Up Allocation Charge shall be 1% of the top up amount.

7.3 Mortality Charge: i. The Mortality and rider charge together with applicable Service tax & Education cess shall be recovered on the date of commencement of the Policy and on each Monthly Due Date whilst the Policy remains in force and shall be made by redemption of units. ii. The age dependent standard Mortality and Rider charges table is provided in Annexure I. At inception, the charges may be revised based on the occupation, health and age of the Life Assured. iii. Mortality charge would be levied only after the Life Assured attains age 7 last birthday.

7.4 Policy Administration Charge: The Policy administration charge of Rs. 50 per month will be levied every month from the second Policy year till the end of the tenth Policy year by way of redemption of units. This is charged irrespective of the premium payment status.

7.5 Fund Management Charge (FMC):

Fund Name	FMC as % age per annum of the Net Assets
Multi Cap Growth Fund	1.35%
Bluechip Fund	1.35%
Opportunities Fund	1.35%
Multi Cap Balanced Fund	1.35%
Income Fund	1.35%
Dynamic P/E Fund	1.35%
Money Market Fund	0.75%

7.6 Miscellaneous Charge: A miscellaneous charge of Rs. 250 shall be levied per Policy alteration.

7.7 Nature of charges: i. The Fund management charge will be made by adjustment to the NAV. ii. Premium allocation charge and Top-Up allocation charge is made by way of deduction from Premium. iii. All other charges would be made by redemption of Units. In the event that the Units are held in more than one Fund, the redemption of Units in respect of charges will be effected in the same proportion as the Fund Value held in each Fund.

7.8 Revision of Charges: i. We reserve the right to increase the following Charges at any time during the term of the Policy. Any revision will be affected after giving a notice to the Policyholders.

Fund Management Charge	maximum of 2.50% per annum
Policy Administration Charge	maximum of Rs. 240 per month
Miscellaneous Charge	maximum of Rs. 500 per alteration
Switching charge	maximum of Rs. 200

ii. Any revision will be with prospective effect subject to prior IRDA approval and if permitted by the then prevailing rules. iii. You will be given due notice of the revision. In case you do not agree with the revision, you can withdraw the units in the plans at the then prevailing NAV. The Policy shall terminate upon this payment. iv. The Surrender Charge, Mortality Charge, Top-Up allocation charge and Premium Allocation Charge are guaranteed for the term of the Policy. v. The rider charges under Accident and Disability Benefit Rider (ADBR) are guaranteed for the term of the policy. In case of Critical Illness Benefit rider, the Company reserves the right to revise the rider charge at any time during the term of the policy with prospective effect after getting approval from IRDA and by giving the notice to the Policyholders. Any Policyholder who does not agree with the revision of charges under the Critical Illness Benefit Rider will be allowed to discontinue the rider and only continue with the Base plan.

#### 8. General Conditions

8.1 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 shall be required to pay Service tax, education cess or any other form of taxes or charges or levies as per prevailing laws and regulations, 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.

8.2 Force majeure: i. We shall notify you about the change in investment strategy when the change is on account of market conditions or political or economic "Force Majeure" situations (like but not limited to floods, cyclones, earthquake, war etc). Examples of such Force Majeure or unforeseen circumstances would include: 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 otherwise 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 IRDA. If the performance by 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 on account of market conditions or political or economic "Force Majeure" conditions or any other circumstances beyond the anticipation or control of the parties, the performance of this contract shall be wholly or partially suspended during the continuance of the contract. ii. We shall obtain your consent, when any change in the investment strategy of the Fund described above is considered necessary other than on account of market conditions and or political and economic force Majeure situations as described above. Such change shall be carried out as long as not more than one fourth of the Policyholders disagree. In case you do not consent to the change, you shall be allowed to withdraw the Units in the Funds at the then prevailing NAV and terminate the Policy. iii. We 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 to 5% of the total number of Units then outstanding. iv. 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, we may, at our sole discretion, defer the partial withdrawal of Units and the Surrender of the Policy for a period not exceeding one month from the date of receipt of application.

8.3 Age: i. We have calculated the Mortality charges on the basis of the age of the Life Assured as declared in the Proposal. In case you have not provided proof of age of the Life Assured with the proposal, you shall furnish such proof of age of the Life Assured as is acceptable to us and have the age admitted. ii. In the event the age so admitted (the "correct age") is found to be different from the age declared in the Proposal, without prejudice to our rights and remedies including those under the Insurance Act, 1938, we shall take one of the following actions: a. If the correct age of the Life Assured makes him ineligible for this product, we shall offer a suitable plan as per our underwriting norms. If you do not wish to opt for altered Plan or if it is not possible for us to grant any other Plan, the Policy shall stand cancelled from the date of issue and the Surrender Value shall be returned. b. If the correct age of the Life Assured is found to be higher than the age declared in the Proposal, we shall evaluate the same as per our underwriting norms. If the Life Assured is found insurable the revised mortality charges as per the correct age will be recovered from the next Policy anniversary date. Where the Life Assured is not found insurable, we would pay the Surrender Value and terminate the Policy. c. If the correct age of the Life Assured is found to be lower than the

age declared in the Proposal, we shall evaluate the same as per our underwriting norms. If the Life Assured is found insurable the revised mortality charges as per the correct age will be charged from the next Policy anniversary date. Where the Life Assured is not found insurable, we would pay the Surrender Value and terminate the Policy. For the purpose of a, b and c clauses, the Surrender Value shall be calculated by using the NAV of the date of cancellation or termination of the Policy.

8.4 Revival of the policy: Your Policy will lapse in case of non-payment of premium either on the due date or within the days of grace. You may revive your Policy subject to the following conditions: i. You must apply for revival within two years from the date of the first unpaid premium. The revival shall be subject to our revival norms as may be applicable at the time of revival. ii. You or the Life Assured will have to furnish, at your own expense, satisfactory evidence of health of the Life Assured. iii. You will have to pay the arrears of premiums. iv. The revival of the Policy may be on terms different from those applicable to the Policy before it lapsed. The mortality charges may be revised as per our underwriting norms. v. We reserve the right to refuse revival of the Policy. In such cases, we shall return only the amount received towards the revival of the Policy. vi. The revival will take effect only when we specifically communicate the same to you. vii. Even after revival, no benefit shall become payable for an event which occurred or symptoms of which occurred during the period when the Policy was in lapsed condition.

8.5 Assignment and Nomination: i. An assignment of this Policy may be made by an endorsement upon the Policy itself or by a separate instrument signed in either case by the assignor specifically stating the fact of assignment and duly attested. The first assignment may be only made by the Life Assured or the Proposer. Such assignment shall be effective, as against the Company, from and upon the service of a written notice upon the Company and the Company's recording the assignment in its books. Assignment will not be permitted where Policy is under the Married Women's Property Act, 1874. Section 38 of the Insurance Act, 1938 may be referred to for complete provision. ii. The Life Assured, where he is the holder of the Policy, may, at any time during the tenure of the Policy, make a nomination for the purpose of payment of the monies secured by the Policy in the event of his death. Where the nominee is a minor, the Life Assured may also appoint a person to receive the money during the minority of the nominee. Nomination may be made by an endorsement on the Policy and by communicating the same in writing to the Company. Any change of nomination, which may be effected before the termination of the Policy shall also be communicated to the Company. Section 39 of the Insurance Act, 1938 may be referred to for complete provision. The Company does not express itself upon the validity or accept any responsibility on the assignment or nomination in recording the assignment or registering the nomination or change in nomination.

8.6 Suicide: If the Life Assured, whether sane or insane, commits suicide within one year from date of issue of this Policy, then the Policy shall terminate and no benefits shall become payable. All rights, benefits and interests under this Policy will stand extinguished. If the Life Assured, whether sane or insane, commits suicide within one year from the effective date of increase in the Sum Assured, then the amount of increase shall not be considered in the calculation of the Death Benefit. If the Life Assured, whether sane or insane, commits suicide within one year from the date of re-instatement of the policy, then the Policy shall terminate and death benefit shall not be payable. All rights, benefits and interests under this Policy will stand extinguished.

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

8.8 Policy Alterations: Policy Alterations would be allowed after payment of at least one full year's premium subject to the rules of the company and IRDA guidelines at that point in time.

8.9 Incontestability: In accordance with 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 shall after the expiry of two years from the date on which it was 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 of insurance or any report of a medical officer, or a referee, or friend of the insured, or in any other document leading to the issue of the Policy, was inaccurate or false, unless the insurer shows that such statements were on material matter or suppressed facts which it was material to disclose and that it was fraudulently made by the Policyholder and that the Policyholder knew at the time of making it that the statement was false or that it suppressed facts which it was material to disclose. Provided that nothing in the section shall prevent the insurer from calling for proof of age at any time if he is entitled to do so and no Policy shall be deemed to be called in question merely because the terms of the Policy are adjusted on subsequent proof that the age of the Life Insured was incorrectly stated in the proposal.

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

8.11 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 Policy holder or Nominee: As per the details specified by the Policy holder or Nominee in the Proposal Form or Change of Address intimation submitted to the Company. In case of the Company: Address: Customer Service Desk, ICICI Prudential Life Insurance Company Limited, Vinod Silk Mills Compound, Chakravathy Ashok Nagar, Ashok Road, Kandivali (East), Mumbai- 400 101, Facsimile: 022 67100803 / 805, E-mail: lifeline@iciciprulife.com. Notice and instructions sent by us to the Policyholders will be deemed served 7 days after posting or immediately upon receipt in the case of hand delivery, facsimile or e-mail. It is very important that you immediately inform us about any change in the address or the nominee particulars.

8.12 Payment of Claim: Before payment of any claim under the Policy, the Company shall require the delivery of the original of this Policy document alongwith written intimation and the following documents establishing the right of the claimant or claimants to receive payment. i. Claimant's statement ii. Death certificate issued by the local and medical authority in case of death claim iii. Medical evidence in case of health and disability rider claims. iv. Any other documents or information as may be required by the Company for processing of the claim depending on the cause of the claim. Claim payments are made only in Indian currency.

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

8.14 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, Regulatory bodies created under laws or regulations prevailing in India for the time being in force shall have the jurisdiction to consider or adjudicate dispute, if any, under this Policy.

8.15 Customer Service: a. For any clarification or assistance, you may contact our advisor or get in touch with any of the touch points as mentioned on the reverse of the booklet. Alternatively you may communicate with us at the Customer Service Desk address mentioned above. The Company's website must be checked for the updated contact details. b. Grievance Redressal Officer: For any complaints or grievances, you may get in touch with our designated Grievance Redressal Officer (GRO). For GRO contact details please refer to the Grievance Redressal section on our website www.iciciprulife.com c. Grievance Redressal Committee: In the event that any complaint or grievance addressed to the GRO is not resolved within 10 days you may escalate the same to the

Grievance Redressal Committee at the address mentioned below. ICICI Prudential Life Insurance Company Limited, Fourth Floor, ICICI Venture House (Stanrose House), ICICI Venture Building, Appasaheb Marathe Marg, Prabhadevi, Mumbai – 400 025. d. Insurance Ombudsman: i. The Central Government has established an office of the Insurance Ombudsman for redressal of grievances with respect to life insurance policies. ii. As per provision 13(3) of the Redressal of Public Grievances Rules 1998, the complaint to the Ombudsman can be made only if: The grievance has been rejected by the Grievance Redressal Machinery of the Insurance Company Within a period of one year from the date of rejection by the Insurance Company If any other Judicial authority has not been approached iii. In case if the Policyholder is not satisfied with the decision or resolution of the Company, the Policyholder may approach the Insurance Ombudsman at the address given below if the grievance pertains to:

any partial or total repudiation of claims the premium paid or payable in terms of the Policy any claim related dispute on the legal construction of the policies in so far as such dispute relate to claims delay in settlement of claims non-issuance of Policy document to customers after receipt of premiums iv. The complaint to the office of the Insurance Ombudsman (contact details given below) should be made in writing duly signed by the complainant (Policyholder) or by his legal heirs with full details of the complaint and the contact information of complainant.

1. Ahmedabad: Office of the Insurance Ombudsman, 2<sup>nd</sup> floor, Ambica House, Nr. C.U.Shah College 5, Navyug Colony, Ashram Road, Ahmedabad - 380 014. Jurisdiction: State of Gujarat, UT of Dadra & Nagar Haveli, Daman and Diu. Tel: 079-27546150, Fax: 079-27546142, E-mail: insombahd@rediffmail.com

2. Bhopal: Office of the Insurance Ombudsman Janak Vihar Complex, 2<sup>nd</sup> floor Malviya Nagar, Bhopal. Jurisdiction: States of Madhya Pradesh & Chhattisgarh. Tel: 0755-2769201/02, Fax: 0755-2769203, E-mail: bimalokpalbhopal@airtelbroadband.in

3. Bhubaneswar: Office of the Insurance Ombudsman 62, Forest Park Bhubaneswar - 751 009 Jurisdiction: State of Orissa Tel:0674-2596461(Direct), Secretary No.: 0674-2596455 Tele Fax: 0674-2596429, E-mail: iobbsr@dataone.in

4. Chandigarh: Office of the Insurance Ombudsman S.C.O. No.101, 102 & 103 2nd floor, Batra Building, Sector 17-D, Chandigarh - 160 017. Jurisdiction: State of Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir, UT of Chandigarh. Tel: 0172-2706196, Fax: 0172-2708274, E-mail: ombchd@yahoo.co.in

5. Chennai: Office of the Insurance Ombudsman Fatima Akhtar Court, 4<sup>th</sup> floor, 453 (old 312) Anna Salai, Teynampet, Chennai- 600 018. Jurisdiction: State of Tamil Nadu, UT-Pondicherry Town and Karaikal (which are part of UT of Pondicherry) Tel: 044-24333678, Fax: 044-24333664, E-mail: insombud@md4.vsnl.net.in

6. New Delhi: Office of the Insurance Ombudsman 2/2 A, Universal Insurance Bldg. Asaf Ali Road, New Delhi-110 002. Jurisdiction: States of Delhi & Rajasthan. Tel: 011-23239611, Fax: 011-23230858, E-mail: iobdelraj@rediffmail.com

7. Guwahati: Office of the Insurance Ombudsman Jeevan Nivesh, 5<sup>th</sup> floor, Nr. Panbazar Overbridge, S.S. Road, Guwahati- 781 001. Jurisdiction: States of Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura. Tel: 0361-2131307, Fax: 0361-2732937, E-mail: omb\_ghy@sify.com

8. Hyderabad: Office of the Insurance Ombudsman 6-2-46, 1<sup>st</sup> floor, Main Court Lane Opp. Saleem Function Palace, A.C.Guards, Lakdi-Ka-Pool, Hyderabad- 500 004. Jurisdiction: States of Andhra Pradesh, Karnataka and UT of Yanam—a part of the UT of Pondicherry. Tel: 040-23325325, Fax: 040-23376599, E-mail: hyd2\_insombud@sancharnet.in

9. Ernakulam: Office of the Insurance Ombudsman 2<sup>nd</sup> Floor, CC 27/2603, Pulinat Building, Opp. Cochin Shipyard, M.G. Road, Ernakulam – 682 015. Jurisdiction: State of Kerala, UT of (a) Lakshadweep, (b) Mahe – a part of UT of Pondicherry. Tel: 0484-2358734, Fax: 0484-2359336, E-mail: iokochi@asianetglobal.com

10. Kolkata: Office of the Insurance Ombudsman North British Bldg. 29, N.S. Road, 3<sup>rd</sup> floor, Kolkata- 700 001. Jurisdiction: States of West Bengal, Bihar, Jharkhand and UT of Andaman & Nicobar Islands, Sikkim. Tel: 033-22134869, Fax: 033-22134868, E-mail: iombkol@vsnl.net

11. Lucknow: Office of the Insurance Ombudsman Jeevan Bhawan, Phase 2, 6<sup>th</sup> floor, Nawal Kishore Rd. Hazratganj, Lucknow- 226 001. Jurisdiction: State of Uttar Pradesh and Uttaranchal Tel: 0522-2201188, Fax: 0522-2231310, E-mail: ioblko@sancharnet.in

12. Mumbai: Office of the Insurance Ombudsman Jeevan Seva Annexe, 3<sup>rd</sup> floor, S.V.Road, Santacruz(W), Mumbai - 400 054. Jurisdiction: States of Maharashtra, Goa. PBX: 022-26106928, Fax: 022-26106052, E-mail: ombudsman@vsnl.net

The Policy shall be subject to and be governed by this Policy document and the terms and conditions of the schedule enclosed herewith including every endorsement by the Company and shall together form a single contract (U72: Ver 1)

#### Annexure

##### Rider Benefit(s) applicable if opted for

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

liquor; or ii) by engaging in aerial flights (including parachuting and skydiving) other than as a fare paying passenger on a licensed passenger-carrying commercial aircraft operating (being a multi engined aircraft) on a regular scheduled route; or iii) by the Life Assured committing any breach of law; or iv) due to war, whether declared or not or civil commotion; or v) by engaging in hazardous sports / pastimes, i.e. taking part in (or practising for) boxing, caving, climbing, horse racing, jet skiing, martial arts, mountaineering, off piste skiing, pot holding, power boat racing, underwater diving, yacht racing or any race, trial or timed motor sport. (c) If there are any other benefits payable under this rider benefit, then all such benefits shall cease to be available on and after the Disability Date. (d) The Disability must result within 180 days from the date of occurrence of the accident. (e) Written notice of any claim for the benefit shall be served on the Company within 120 days of the Disability Date and the admission of any claim for Disability Benefit will be subject to such proof (at the expense of the Life Assured), as the Company may reasonably require, that the Life Assured has become totally and permanently disabled. Such proof shall be furnished to the Company along with the submission of the notice of the disability (f) The Company reserves the right to call for such medical examinations as they may require and for this purpose, may advise the Life Assured to submit himself to one or more medical examinations conducted by medical practitioner/s appointed by the Company, the cost of which shall be borne by the company. (g) The payment of the Disability Benefit and the continuation thereof shall be subject to such proof, as the Company may require, that the Life Assured has been totally and permanently disabled and has continued to be totally and permanently disabled. If such proof is not furnished or if the Life Assured shall refuse or fail to submit for medical examination/s when required to do so, or if at any time the Company is satisfied that a claim for benefit under this clause has been wrongly admitted, the Life Assured shall be deemed to have ceased to be totally and permanently disabled immediately from the date on which the Company has requested for the supply of such proof or submission to medical examination/s or, as the case may be, from the date on which the Life Assured is communicated of wrongful admission of the claim, and thereafter the Policy shall continue under such terms and conditions as the Company may decide. For the purpose of this benefit, a person shall only be regarded as "Totally and permanently disabled" if that person, due to accident or injury has suffered a loss such as:

- the loss by physical separation of two limbs or the complete and irremediable loss of sight in both eyes or the loss by physical separation of one limb accompanied by the complete and irremediable loss of sight in one eye (where limb means an entire hand or foot), or
- has been continuously disabled for a period of six consecutive months and has been determined by the Company, after consideration of the reports and other information supplied by the Company's own medical practitioner, appointed to examine that person, to be incapacitated to such an extent as to render that person unlikely ever to resume work or to attend any gainful employment or occupation.

B. Critical Illness Benefit – (Not sure if this is accelerated CI or normal CI): Provided the policy is in force and the Life Assured is diagnosed to be suffering from any one of the Critical Illnesses (as defined below) after six months from the Date of issue of the Policy but before the Policy anniversary on which he attains age 65 years nearer birthday, an amount equal to Sum Assured under this rider benefit shall fall to be paid, subject to conditions set out below: (1) The benefit shall not be payable in respect of any illness other than those defined as Critical Illness, nor shall it apply or be payable in respect of any of those said illnesses the symptoms of which have occurred or which has been diagnosed or for which the insured person received treatment prior to or during the first 6 months from the date of issue of the policy or from the date of commencement of the Policy. (2) The benefit shall be payable on the Life Assured surviving 28 days from such diagnosis. (3) The Critical Illness shall not have been caused by the existence of Acquired Immune Deficiency Syndrome or the presence of any Human Immuno-deficiency Virus Infection in the person of the Life Assured, self inflicted injury, drug abuse, failure to follow medical advice, war, whether declared or not and civil commotion, pregnancy, breach of law, aviation other than as a fare paying passenger in a commercial licensed aircraft (being a multi-engined aircraft), hazardous sports and pastimes; (4) Written Notice of any claim for the benefit must be given to the Company within 60 days of such diagnosis. (5) The admission of any claim for this benefit will be subject to satisfactory proof that the Life Assured is diagnosed to be suffering from any one of the specified Critical Illness, as the Company may reasonably require. (6) The benefit shall automatically cease to be available when the policy is surrendered.

Note 1: A "Critical Illness" shall mean anyone of the following illnesses as defined separately hereunder occurring after 6 months from the issue date of policy:

(a) Cancer: A malignant tumour characterized by uncontrolled growth and spread of malignant cells and the invasion of tissue. The diagnosis must be histologically confirmed. The term Cancer includes Leukemia but excludes the following: i) All tumours which are histologically described as pre-malignant, non-invasive or carcinoma in situ; ii) All forms of lymphoma in presence of any Human Immuno-deficiency Virus; iii) Kaposi's Sarcoma in the presence of any Human Immuno-deficiency virus; iv) Any Skin Cancer other than invasive malignant melanoma; and v) Early Prostate Cancer which is histologically described as T1 (including T1a and T1b) or another equivalent or lesser classification. (b) Coronary Artery By-Pass Graft Surgery (CABGS): the undergoing of open heart surgery on the advice of a Consultant Cardiologist to correct narrowing or blockage of one or more coronary arteries with by-pass grafts; Angiographic evidence to support the necessity of the surgery will be required. Balloon angioplasty, laser or any catheter-based procedures are not covered. (c) Heart attack: The death of a portion of heart muscle as a result of inadequate blood supply as evidenced by an episode of typical chest pain, new electrocardiographic changes and by elevation of the cardiac enzymes. Diagnosis must be confirmed by a consultant physician. (d) Kidney failure: End stage renal failure presenting as chronic irreversible failure of both kidneys to function, as a result of which either regular renal dialysis or renal transplant is undertaken. Evidence of end stage kidney disease must be provided and the requirement for dialysis or transplantation must be confirmed by a consultant physician (e) Major Organ Transplant: The actual undergoing as a recipient of a transplant of heart, liver, lung, pancreas or bone marrow as a result of chronic irreversible failure. Evidence of end stage disease must be provided and the requirement for transplantation must be confirmed by a consultant physician. (f) Stroke: A cerebrovascular incident resulting in permanent neurological damage. Transient ischaemic attacks are specifically excluded. (g) Paralysis: Complete and permanent loss of the use of two or more limbs as a result of injury or disease of the brain or spinal cord. To establish permanence the paralysis must normally have persisted for at least 6 months. (h) Aorta-surgery: The actual undergoing of surgery (including key hole type) for a disease or injury of the aorta needing excision and surgical replacement of the diseased part of the aorta with a graft. (i) Heart valve replacement/surgery: The undergoing of open heart surgery, on the advice of a consultant cardiologist, to replace or repair one or more heart valves

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

Note 3: The charges under the Critical Illness Benefit rider are not guaranteed and may be revised with prospective effect by giving the policyholder notice and after approval from IRDA.

Annexure I

Standard Mortality charges per thousand life Insurance cover (For Male Life Assured)

Age completed birthday	Basic Mortality Charges	Age completed birthday	Basic Mortality Charges
		41	2.65
7	0.72	42	2.82
8	0.72	43	3.04
9	0.75	44	3.31
10	0.77	45	3.62
11	0.85	46	3.98
12	0.96	47	4.39
13	1.02	48	4.85
14	1.08	49	5.35
15	1.13	50	5.91
16	1.17	51	6.51
17	1.22	52	7.15
18	1.26	53	7.85
19	1.29	54	8.60
20	1.33	55	9.39
21	1.35	56	10.23
22	1.38	57	10.93
23	1.40	58	11.83
24	1.42	59	12.93
25	1.43	60	14.21
26	1.45	61	15.69
27	1.45	62	17.37
28	1.46	63	19.25
29	1.46	64	21.32
30	1.46	65	22.42
31	1.49	66	25.30
32	1.53	67	28.51
33	1.59	68	32.09
34	1.66	69	36.08
35	1.75	70	40.51
36	1.86	71	45.44
37	1.98	72	50.92
38	2.12	73	57.00
39	2.30	74	63.75
40	2.48	75	71.25

Notes:

The Mortality charges applicable to Female Life Assured will be two year's younger as compared to Male Life Assured.

For Female Life Assured of age 7 and 8, the charges will be those applicable to Male Life Assured of age 7.

Sustainability Matrix – Annexure II

Allowed Maximum Sum Assured Multiples

Age (Years)	Riders Chosen			
	None	ADBR	CIBR	ADBR and CIBR
0-20	95	70	70	55
21-25	70	50	50	45
26-30	45	40	35	30
31-35	30	25	20	20
36-40	20	15	15	15
41-45	10	10	5	5
46-50	10	10	5	5
>50	10	10	5	5

Note: The above multiples are of the yearly premiums, subject to a minimum Sum Assured of Rs. 100,000.

Annexure III - Rider Charges

Critical Illness Benefit Rider

Rider Charges per mille Sum Assured

Age nearest birthday	Rider Charges		Class I Extra Charges	
	Males	Females	Male	Female
18	0.61	0.54	0.21	0.19
19	0.61	0.54	0.21	0.19
20	0.61	0.54	0.21	0.19
21	0.63	0.58	0.22	0.20
22	0.65	0.63	0.23	0.22
23	0.69	0.68	0.24	0.24
24	0.71	0.74	0.25	0.26
25	0.75	0.81	0.26	0.28
26	0.80	0.89	0.28	0.31
27	0.86	0.99	0.30	0.35
28	0.93	1.11	0.32	0.39
29	1.03	1.25	0.36	0.44
30	1.14	1.40	0.40	0.49
31	1.28	1.59	0.45	0.56
32	1.44	1.79	0.50	0.63
33	1.63	2.00	0.57	0.70
34	1.85	2.25	0.65	0.79
35	2.09	2.51	0.73	0.88
36	2.35	2.79	0.82	0.98
37	2.64	3.10	0.92	1.09
38	2.94	3.43	1.03	1.20
39	3.25	3.79	1.14	1.33
40	3.60	4.15	1.26	1.45
41	3.98	4.54	1.39	1.59
42	4.41	4.96	1.54	1.74
43	4.94	5.40	1.73	1.89
44	5.54	5.90	1.94	2.07
45	6.23	6.43	2.18	2.25
46	7.01	7.01	2.45	2.45
47	7.89	7.65	2.76	2.68
48	8.89	8.33	3.11	2.91
49	9.99	9.03	3.50	3.16
50	11.11	9.73	3.89	3.40
51	12.21	10.40	4.27	3.64
52	13.30	11.0	64.66	3.87
53	14.36	11.70	5.03	4.10
54	15.39	12.33	5.39	4.31
55	16.31	12.95	5.71	4.53
56	17.18	13.59	6.01	4.76
57	18.03	14.29	6.31	5.00
58	18.96	15.06	6.64	5.27
59	19.98	15.93	6.99	5.57
60	21.06	16.84	7.37	5.89
61	22.21	17.78	7.77	6.22
62	23.48	18.74	8.22	6.56
63	24.83	19.73	8.69	6.90
64	26.25	20.70	9.19	7.25
65	27.69	21.68	9.69	7.59

NB: These rates are not guaranteed. Any change would be made with approval from IRDA.

Accidental Death and Disability Benefit Rider	
Charges for all ages	0.9 per mille Sum Assured