

PART - A

Date: < _____ >

Name of Policyholder:

Address of Policyholder:

Contact Number/(s) of Policyholder:

Dear <Policyholder Name>,

Sub.: Your Policy No. << _____ >> - Edelweiss Life – Assured Income STAR (An Individual, Non-Linked, Non-Participating, Savings, Life Insurance Product)

Thank you for choosing Edelweiss Life as your preferred life insurance partner.

We are confident that the product chosen by you will suit your need.

Policy Document:

We have prepared your Policy on the basis of the Proposal Form submitted by you. We request you to go through your Policy Document in detail and check for the accuracy of information. A copy of your Proposal Form as submitted by you, Customer Information Sheet (CIS) and other relevant documents (if any), including are also enclosed along with this Policy Document for your information and records.

Please preserve this Policy Document safely and inform your Nominee about the same.

For your reference, we are sharing results of your medical examination (if applicable) which were obtained for assessment of your health condition relevant to take a decision on the Proposal for insurance. The report is only indicative in nature and we do not express any opinion on the matter contained in the medical examination report.

In case you are keen to know more about your Policy or you need further assistance, you may contact your sales person who has advised you while purchasing this Policy at the below details:

Name of the PFA / Corporate Agent/ Relationship Manager/ Broker	Code/License No.	Contact Details.

Alternatively, you may contact our Service Expert at 1800 2121 212 or email us at care@edelweisslife.in

Cancellation in the Free Look Period:

You have a Free Look period of thirty (30) days beginning from the date of receipt of the Policy Document, whether received electronically or otherwise, to review the terms and conditions of this Policy. If you disagree with any of the terms or conditions, or otherwise, and you have not made any claims, you may return this Policy for cancellation to us by giving us written reasons for your objection within the said Free Look period. We will refund the Premium received after deducting stamp duty charges, proportionate risk premium for the period of cover and expenses incurred by us on medical examination (if any) of Proposer/Life Insured

To exercise the Free Look option, you would need to send the Policy Document along with a request letter to us at any of our branches or at our Corporate Office address provided below. You are required to maintain the acknowledgement received from the Company as a proof of submission.

Please note that if the Policy is opted through Insurance Repository ('IR'), the computation of the said Free Look Period will be as stated below: -

- For existing e-Insurance Account (eIA): Computation of the said Free Look Period will commence from the date of delivery of the e mail confirming the credit of the Insurance Policy by the IR.
- For New e-Insurance Account: If an application for e-Insurance Account accompanies the proposal for insurance, the date of receipt of the 'welcome kit' from the IR with the credentials to log on to the e-Insurance Account(eIA) or the delivery date of the email confirming the grant of access to the eIA or the delivery date of the email confirming the credit of the Insurance policy by the IR to the eIA, whichever is later, shall be reckoned for the purpose of computation of the free look period.

We look forward to serve you.

Regards,

For Edelweiss Life Insurance Company Limited

Authorised Signatory

Registered & Corporate Office- 6th Floor, Tower 3, Wing 'B', Kohinoor City, Kiroi Road, Kurla (W), Mumbai - 400070

Edelweiss Life Insurance Company Limited
(formerly known as Edelweiss Tokio Life Insurance Company Limited)
Registered & Corporate Office - 6th Floor, Tower 3, Wing 'B', Kohinoor City, Kiroli
Road, Kurla (W), Mumbai - 400070

POLICY DOCUMENT - Edelweiss Life – Assured Income STAR
An Individual, Non-Linked, Non-Participating, Savings, Life Insurance Product
UIN: 147N116V01

POLICY PREAMBLE

This Policy is an Individual, Non-Linked, Non-Participating, Savings, Life Insurance Product. This document is the evidence of a contract of insurance between Edelweiss Life Insurance Company Limited ('the Company') and the Policyholder as described in the Policy Schedule given below. This Policy is based on the proposal made by the within named Policyholder and submitted to the Company along with the required documents, declarations, statements, applicable medical evidence and other information received by the Company from the Policyholder, Life Insured or on behalf of the Policyholder ('Proposal'). This Policy is effective upon receipt and realisation, by the Company, of the consideration payable under the Policy. This Policy is written under and will be governed by the applicable laws in force in India and all Premiums and Benefits are expressed and payable in Indian Rupees.

POLICY SCHEDULE

Policy Number	Plan Name and UIN
	Edelweiss Life – Assured Income STAR (UIN: 147N116V01)

Details of the Policyholder:

Name	Date of Birth	Age	Gender	CKYC Number

Address of the Policyholder

Details of the Life Insured:

Name	Date of Birth	Age	Gender	CKYC Number

Address of the Life Insured

Policy Details	
Date of Commencement of Policy	<<dd/mm/yyyy>>
Date of Commencement of Risk	<<dd/mm/yyyy>>
Policy Term (in years)	<< 20,25,30,35,40 >>
Premium Paying Term (PPT) (in years)	<< 5 6 7 8 10 12 >>
Premium Paying Frequency	<< Yearly / Half-Yearly / Quarterly / Monthly >
Annual Premium	Rs. <<amount>>
Annualized premium	Rs. <<amount>>
Modal Premium	Rs. << amount>>
Premium Paying Due Date	<< Date & Month of every year / Date of every month >>
Last Premium Due Date	<<dd/mm/yyyy>>
Plan Option	<< Regular Income / Regular Income Advantage >>
Advantage %	<< NA 40%,50% >>
Existing Customer	<< Yes / No >>
Auto Debit	<< Yes / No >>
Death Benefit Option	<< Death Benefit Option 1 Death Benefit Option 2 >>
Sum Assured on Maturity Option	<< Option 1 Option 2 NA >>
SAM Multiple	<< 7 7.5 8 9 10 12 >>

Option to receive Income Benefits in advance	<< Yes / No >>
Income Benefit Pay-out Frequency	<<Yearly / Half-Yearly / Quarterly / Monthly>>
First Income Benefit Pay-out date	<<dd/mm/yyyy>>
Maturity Date	<<dd/mm/yyyy>>

BENEFIT INFORMATION:

Sum Assured on Death (at the inception of the policy)	:Rs.
Sum Assured on Maturity	:Rs.
Income Benefit Pay-out	:Rs.
Advantage Benefit (applicable for Regular Income Advantage only)	:Rs.

Income Benefit Factor:

Policy Year	Income Benefit Factor
1	:
2	:
3	:
4	:
5	:
6	:
7	:
8	:
9	:
10	:
11	:
12	:
13 to Policy Term	:

Rider Name	UIN	Rider Sum Assured	Modal Premium plus applicable taxes	Policy Term (years)	PPT (years)
Edelweiss Life – Accidental Total and Permanent Disability Rider	147B001V05	Rs.	Rs. incl. any u/w extra		
Edelweiss Life – Accidental Death Benefit Rider	147B002V05	Rs.	Rs. incl. any u/w extra		
Edelweiss Life – Critical Illness Rider	147B005V05	Rs.	Rs. incl. any u/w extra		
Edelweiss Life – Waiver of Premium Rider	147B003V06	NA	Rs. incl. any u/w extra		
Edelweiss Life – Payor Waiver Benefit Rider	147B014V06	<input type="checkbox"/> Death <input type="checkbox"/> CI & ATPD	Rs. incl. any u/w extra		

		<input type="checkbox"/> Death, CI & ATPD			
Total					

Nomination details of Nominees of Life Insured:

Name of the Nominee(s)	<Nominee 1>	<Nominee 2>	<Nominee 3>
Age of the Nominee(s)			
Gender of the Nominee			
Nomination Percentage			
Relationship with Life Insured			
Name of the Appointee (if Nominee is a minor)	<Appointee 1>	< Appointee 2>	< Appointee 3>
Gender of the Appointee			
Relationship of the Appointee with the Nominee			

Stamp Duty of Rs. /- is paid as provided under Article 47 (D) of Indian Stamp Act, 1899 and included in Consolidated Stamp Duty Paid to the Government of Maharashtra Treasury vide Order of Addl. Controller Of Stamps, Mumbai at General Stamp Office, Fort, Mumbai - 400001., vide this Order No.(LOA/CSD/ /2021/Validity Period Dt. / / To Dt. // (O/w.No.)/Date : / /).

For and on behalf of
Edelweiss Life Insurance Company Limited

Authorised Signatory

This Policy Document is signed using a digital signature for and on behalf of Edelweiss Life Insurance Company Limited. Hence it does not require physical signature.

We request you to go through the Policy Document in detail and check for the accuracy of information provided therein. In case you notice any mistake, you may return the Policy Document to us for necessary correction.

PART – B

DEFINITIONS

Defined Term	Meaning
Age:	means Age of the Life Insured on the last birthday at the time of commencement of the Policy
Annual Premium:	means the Premium amount payable in a Policy Year chosen by the Policyholder as stated in the Policy Schedule, including loadings for Modal Premiums and the Underwriting Extra premiums, if any but excluding the taxes and rider premiums, if any.
Annualized Premium:	means the Premium amount payable in a year excluding taxes, rider premiums, Underwriting Extra premiums and loadings for Modal Premiums
Appointee:	means the person registered with us and mentioned in the Policy Schedule, who is authorised to receive and hold in trust the benefits under this Policy on behalf of the Nominee/(s), if the Nominee/(s) is/are less than Age 18 on the date of payment.
Assignee:	means the person to whom the rights and benefits under this Policy are transferred by virtue of an Assignment.
Assignment:	means the process of transferring the rights and benefits to an "Assignee," in accordance with the provisions of Section 38 of Insurance Act, 1938, as amended from time to time.
Assignor:	means the person who transfers the rights of the life insurance Policy to the Assignee.
Advantage Benefit:	means a benefit calculated as a percentage of the Annualized Premium, payable at the beginning of the first Policy Year in case of Regular Income Advantage Plan Option.
Advantage %:	means a percentage of the Annualized Premium, chosen by the Policyholder at inception in case of Regular Income Advantage Plan Option and is as stated in the Policy Schedule.
Date of Commencement of Policy:	Date of Commencement of Policy is the start date of this Policy.
Date of Commencement of Risk:	Date of Commencement of Risk is the date on which the Company accepts the risk for insurance (cover) as evidenced in the schedule of the Policy.
Date of Maturity/Maturity Date:	means the date specified in the Schedule on which the Policy Term is completed.
Death Benefit:	means the benefit, which is payable on death of the Life Insured, as stated in the Policy Document.
Death Benefit Option:	means an option of Sum Assured on Death selected by the Policyholder and is as mentioned in the Policy Schedule.
Due Date:	means a fixed date on which the Policy Premium is due and payable by the Policyholder.
Endorsement:	means conditions attached/ affixed to this Policy incorporating any amendments or modifications agreed to or issued by the Company.
First Income Benefit Pay-out Date:	means the date on which the first Income Benefit Pay-out is paid and is as mentioned in the Policy Schedule
Free Look Period:	means a period of thirty (30) days beginning from the date of receipt of the Policy Document, whether received electronically or otherwise, to review the terms and conditions of this Policy. If you disagree with any of the terms or conditions, or otherwise, and you have not made any claims, you have the option to return this policy as detailed in Condition 4 of Part D of this Policy Document.

Grace Period:	means the time granted by the insurer from the Due Date for the payment of Premium, without any penalty or late fee, during which time the Policy is considered to be In-Force with the risk cover without any interruption as per the terms & conditions of the Policy. The Grace Period for payment of the Premium for all types of life insurance policies shall be 15 days, where the Policyholder pays the Premium on a monthly basis and 30 days in all other cases.
Income Benefit Pay-out:	means a regular guaranteed income payable in arrears starting from the First Income Benefit Pay-out Date, as mentioned in the Policy Schedule, till maturity or death of the Life Assured, whichever is earlier, while the Policy is In-Force. It is calculated as Income Benefit Factor multiplied by Total Annualized Premium Paid till that Policy Year.
Income Benefit Pay-out Frequency:	means a frequency as specified in the Policy Schedule at which the Income Benefit Pay-outs will be payable in the Policy.
In-Force:	means the status of the policy during the Policy Term when all the due premiums have been paid/waived off or the Policy is not in a state of discontinuance.
Income Benefit Factor:	means a percentage specified for each Policy Year, which shall be used to determine the amount of Income Benefit Pay-out under the Policy.
Insurance Act:	means the Insurance Act, 1938 (4 of 1938) as amended from time to time.
IRDAI / Authority:	means the Insurance Regulatory and Development Authority of India established under the provisions of section 3 of the Insurance Regulatory and Development Authority Act, 1999
Life Insured:	means the person on whose life the insurance cover has been accepted.
Material Information:	means the information already known to the Life Insured at the time of applying for Life Insurance, which has a bearing on underwriting of the proposal /Policy submitted.
Maturity Benefit:	means Sum Assured on Maturity as shown in the Policy Schedule which is payable on Maturity in accordance with the terms and conditions of the Policy.
MCLR:	means Marginal Cost of Funds Based Lending Rate declared by Banks from time to time.
Nomination:	Nomination is the process of nominating a person(s) in accordance with provisions of Section 39 of the Insurance Act, 1938 as amended from time to time.
Nominee:	means the person/(s) named in the Policy Schedule who has/have been nominated by the Policyholder (who is also the Life Insured in the Policy) in accordance with the Section 39 of the Insurance Act, 1938 as amended from time to time to receive the benefits in respect of this Policy in the event of death of Life Assured.
Non-Participating:	means products where policies are not entitled for any share in surplus(profits) during the term of Policy.
Plan Option:	means one of the following options, as stated in the Policy Schedule, and cannot be changed anytime during the Policy Term. <ol style="list-style-type: none"> <u>1. Regular Income</u> <u>2. Regular Income Advantage</u>
Policy:	means the contract of insurance as evidenced by this Policy Document, the Proposal Form, the Policy Schedule/(s) and any other information/document/(s) provided to us in respect of the Proposal Form and any endorsement issued by us.
Policyholder/You/you/Your/your:	means or refers to the Policyholder stated in the Policy Schedule.
Policy Anniversary:	means one year from the Date of Commencement of the Policy and the same date falling each year thereafter, till the Date of Maturity.

Policy Document:	means this document along with endorsements, if any, issued by the Company which evidences the contract of Insurance between the Policyholder and the Company.
Policy Schedule/Schedule:	means the Schedule and any endorsements attached to and forming part of this Policy and if any updated Schedule is issued, then, the Schedule latest in time.
Policy Term:	means the period, in years and mentioned in the Policy Schedule, commencing from the Date of Commencement of Policy till the Date of Maturity.
Policy Year:	means the period between two consecutive Policy Anniversaries. This period includes the first day and excludes the next policy anniversary day.
Premium / Modal Premium:	means the contractual amount payable by the Policyholder at specified times periodically as mentioned in the schedule of this Policy Document to secure the benefits under the policy. The premium payable will be "Instalment Premium" which includes Instalment Premium for the Base Policy and instalment Premium for Rider(s), if rider(s) has/have been opted for. The term 'Premium' used anywhere in this Policy Document does not include any taxes, if any which are payable separately.
Premium Discontinuance:	means the non-payment of Premiums by you before the expiry of Grace Period.
Premium Paying Frequency:	means a frequency as specified in the Policy Schedule at which premiums are payable.
Premium Paying Term (PPT):	means the period, in years, during which Premium is payable.
Proof of Continued Insurability:	means the information that may be sought from the Policyholder to decide revival of the Policy. This includes Form of declaration of Good Health, Medical Reports, Special Reports and any such document as may be called for by the Company, in accordance with the Board Approved Underwriting Policy of the Company.
Proposal Form:	means the signed and dated form and any accompanying declarations or statements submitted to us by the Policyholder and/or Life Insured as applicable for the purpose of obtaining insurance cover under this Policy.
Proposer:	means a person who proposes the life insurance proposal.
Reduced Paid-up:	means or refers to the status explained in clause 6(d) of Part C
Regulations:	means the IRDAI (Insurance Products) Regulations, 2024 and any other applicable laws issued and as may be amended from time to time.
Revival / Revival of a Policy:	means restoration of the Policy, which was discontinued due to the non-payment of Premium, by the insurer with all the benefits mentioned in the Policy Document, with or without rider benefits if any, upon the receipt of all the Premiums due and other charges or late fee if any, during the revival period, as per the terms and conditions of the Policy, upon being satisfied as to the continued insurability of the insured or Policyholder on the basis of the information, documents and reports furnished by the Policyholder, in accordance with Board approved Underwriting policy.
Revival Period:	means the period of five consecutive complete years from the date of first unpaid Premium.
Rider:	means the insurance cover(s) added to a base product for additional Premium or charge.
Rider Premium:	means the Premium payable by the Policyholder which is in addition to the Premium paid under Base Policy towards the additional cover/benefit opted under the rider, if opted.
Rider Sum Assured:	means the assured amount payable on happening of a specified event covered under the rider, if opted.

Sum Assured on Death (SAD):	means an absolute amount of benefit which is guaranteed to become payable on death of the Life Insured in accordance with the terms and conditions of the Policy.
Sum Assured on Maturity (SAM):	means an absolute amount of benefit, which is guaranteed to become payable at the end of the Policy Term that is on Maturity of the Policy in accordance with the terms and conditions of the Policy.
Surrender:	means complete withdrawal or termination of the entire Policy contract.
Surrender Value:	means an amount, if any, that becomes payable on Surrender of a policy during its term, in accordance with the terms and conditions of this Policy.
Survival Benefit:	means an amount including Income Benefit Pay-outs and Advantage Benefit, if applicable.
Total Annualized Premiums Paid:	means total of all the Premiums paid excluding taxes, rider premiums, Underwriting Extra Premiums and loadings for Modal Premiums
Total Premiums Paid:	means total of all the premiums paid under the base product, excluding any extra Premium and taxes, if collected explicitly.
Underwriting:	Underwriting is the term used to describe the process of assessing risk and ensuring that the cost of the cover is proportionate to the risks faced by the individual concerned. Based on underwriting, a decision on acceptance or rejection of cover as well as applicability of suitable premium or modified terms, if any, is taken.
Underwriting Extra:	means an additional amount charged by us as Premium, as per our Board Approved Underwriting Policy, which is determined on the basis of disclosures made by you in the Proposal Form or on the basis of any other information received by us including through medical examinations of the Life Insured in relation to this Policy.
UIN:	UIN means the Unique Identification Number allotted to this plan by the IRDAI.
We/we/Our/our/Us/us/ Company:	means Edelweiss Life Insurance Company Limited.

Interpretation: In this Policy, where appropriate, references to the singular will include references to the plural and references to one gender will include references to the other.

PART – C

BENEFITS

1) Death Benefit:

Events	Plan Option	How and when Benefits are payable	Size of such benefits
Death of the Life Insured	Regular Income	In case of death of the Life Insured during the Policy Term, while the Policy is In-Force, the Death Benefit will be payable as lump sum, and the policy will terminate without any further benefits.	<p>The Death Benefit payable is higher of:</p> <ul style="list-style-type: none">• Sum Assured on Death[#] as per the chosen Death Benefit Option• 105% of Total Premiums Paid• Surrender Value applicable at the time of death <p>In addition, the 'Income Benefit Pay-out' due in the Policy Year of death will be paid on pro-rata basis considering the number of months elapsed in the Policy Year in which death happens and duly adjusted for the Survival Benefits already paid out in that Policy Year.</p>
	Regular Income Advantage	In case of death of the Life Insured during the Policy Term, while the Policy is In-Force, the Death Benefit will be payable as lump sum, and the policy will terminate without any further benefits.	<p>The Death Benefit payable is higher of:</p> <ul style="list-style-type: none">• Sum Assured on Death[#] as per the chosen Death Benefit Option• 105% of Total Premiums Paid• Surrender Value applicable at the time of death <p>In addition, the 'Income Benefit Pay-out' due in the Policy Year of death will be paid on pro-rata basis considering the number of months elapsed in the Policy Year in which death happens and duly adjusted for the Survival Benefits already paid out in that Policy Year.</p>

In case of death of the Life Insured who is a minor, the Death Benefit will be paid to the Proposer in the policy.

[#]Sum Assured on Death (SAD) varies with the Death Benefit Option chosen by the policyholder as follows:

- Death Benefit Option 1 :
SAD is 7 times the Annualized Premium (for age at entry less than 50 years)
and 5 times the Annualized Premium (for age at entry 50 years and above).

- Death Benefit Option 2 :
SAD is Higher of 10 times the Annualized Premium and 10 times the Annual Premium.

2) Survival Benefit:

Events	Plan Option	How and when Benefits are payable	Size of such benefits
Applicable Policy Anniversary(ies)	Regular Income	On survival of the Life Insured, while the Policy is In-Force, Income Benefit Pay-out will commence from the 1 st Policy Year and on the date mentioned in the Policy Schedule. Income Benefit Pay-outs will be payable in arrears based on the Income Benefit Pay-out Frequency chosen. The Income Benefit Pay-outs will be continued till the date of death of the Life Insured or till the Date of Maturity, whichever is earlier.	Income Benefit Pay-out, as mentioned in the Policy Schedule
	Regular Income Advantage	An Advantage Benefit is payable at the beginning of the 1 st Policy Year, after receipt of 1 st Premium. Further, on survival of the Life Insured, while the Policy is In-Force, Income Benefit Pay-out will commence from the 2 nd Policy Year and on the date mentioned in the Policy Schedule. Income Benefit Pay-outs will be payable in arrears based on the Income Benefit Pay-out Frequency chosen. The Income Benefit Pay-outs will be continued till the date of death of the Life Insured or till the Date of Maturity, whichever is earlier.	Advantage Benefit and Income Benefit Pay-out, as mentioned in the Policy Schedule

If opted to receive Income Benefit in advance, the event and timing of benefits will be as mentioned in the Policy Schedule.

3) Maturity Benefit:

Events	Plan Option	How and when Benefits are payable	Size of such benefits
Maturity of the Policy	Regular Income	On survival of the Life Insured till the Date of Maturity, while the Policy is In-Force, the Maturity Benefit is payable as Lumpsum and the Policy will be terminated.	Sum Assured on Maturity \$, as mentioned in the Policy Schedule
	Regular Income Advantage	On survival of the Life Insured till the Date of Maturity, while the Policy is In-Force, the Maturity Benefit is payable as Lumpsum and the Policy will be terminated.	Sum Assured on Maturity, as mentioned in the Policy Schedule

\$Sum Assured on Maturity (SAM) varies with the Sum Assured on Maturity Option chosen by the Policyholder at the inception of the policy and is as stated in the Policy Schedule.

4) Accrual of Survival Benefits:

At any point during the Policy Term, the Policyholder will have the option to accrue the Income Benefit instead of receiving it as cash pay outs. Under this option, the Income Benefit will accumulate at an interest rate as mentioned below:

The interest rate for calculation of accumulation will be declared every year by the Company on 1st April using the rate as at 31st March of same calendar year and 1st October using the rate as at 30th September of same calendar year and the declared rate will be applicable for next 6 months till the next declaration date for calculation of the benefits. The interest rate will be determined as (SBI Fixed Deposit rate for 6 months tenure + 0.50% p.a.) capped at 6.00% p.a. The interest rate as on 1st October 2025 is 6.00% (SBI Fixed Deposit rate as on 30th September 2025 is 5.65% for 6 months tenure).

The Policyholder can withdraw the accrued Income Benefit Pay-outs at any point during the Policy Term (10% to 100%, in multiples of 10%). The unpaid accrued Income Benefit shall be paid along with other benefits payable at the time of termination of the Policy due to death, Maturity, or Surrender. The Policyholder can choose to opt in or opt out of this feature multiple times during the Policy Term. In case the Policyholder has opted for Accumulation and intends to take a loan, first the accrued Income Benefit will be paid out and then the loan will be granted against the Policy.

These options can be availed under an in-force as well as a reduced paid-up policy provided there is no outstanding loan at the time of opting for these options.

5) Option to receive Income Benefits in advance:

The default option in the product is to receive the Income Benefits in arrears. The Policyholder has the option to receive the Income Benefits in advance only if the Premium Payment

Frequency and Income Benefit Frequency is yearly. This option can be chosen at the time of inception only.

The Income Benefits for an In-Force Policy will be paid only after receiving the Premiums due for the Policy Year.

Income Benefit amount in advance = 93.2401% X Income Benefit Pay out in arrear

If the policyholder chooses to change the Premium Payment Frequency to other than annual mode, the Income Benefit Pay-out frequency will be converted to annual instalments in arrears; which will be effective from the next Policy Anniversary onwards.

6) Payment of Premium and Discontinuance of Premium Payment:

a)	Payment of Premium:
	You shall pay the Premium for the entire Premium Paying Term. The amount of Premium payable, the frequency at which it must be paid, the Premium Paying Term and the Premium Paying Due Date are stated in the Policy Schedule. In case of Regular Income Option, if agreed by us, you may change your Premium Paying Frequency during the Premium Paying Term, to any other Premium Paying Frequency as allowed under the plan. For Premium Paying Frequencies other than annual mode, additional loadings as applicable will be applied on the Annualized Premium.
b)	Grace Period:
	If we do not receive the Premium in full by the premium due date, then: (i) We will allow a Grace Period of 15 days where the Policyholder pays the Premium on a monthly basis, and 30 days in all other cases during which you must pay the Premium due in full. The Policy will be In-Force during the Grace Period. (ii) All the benefits under the Policy will continue to apply during the Grace Period. In case of death during the Grace Period, the Death Benefit will be paid (after deducting the Premium due for the Policy Year in which death occurs).
c)	Premium Discontinuance
	i. If all the Premiums have not been paid in full for at least the first Policy Year, then on premium discontinuance, the Policy will lapse, and no Surrender Value or paid-up value will be payable. ii. The Policy will acquire Surrender Value provided one full year's Premium has been paid and is payable after completion of the first Policy Year.
d)	Reduced Paid-up
	If all Premiums for at least first Policy Year, have not been paid in full, then paid-up value is nil. After completion of first Policy Year provided one full year's Premium has been paid, then on premium discontinuance the policy will continue as a 'Reduced Paid-up' policy and all the benefits shall be reduced proportionately. Once your Policy has acquired the Reduced Paid-Up status, the following amounts will be applicable: Reduced Paid-up Sum Assured on Maturity : Sum Assured on Maturity x PUP Fac Reduced Paid-up Death Benefit : Higher of: i. Sum Assured on Death as per the chosen Death Benefit Option x PUP Fac ii. 105% of Total Premium Paid iii. Surrender Value applicable at the time of death

In addition, the Reduced Paid-up Survival Benefit due in the Policy Year of death will be paid on pro-rata basis considering the number of months elapsed in the Policy Year and duly adjusted for the Survival Benefits already paid out in that Policy Year.

Reduced Paid-up Survival Benefit: $\text{Income Benefit Factor} \times \text{Total Annualized Premium Paid} \times \text{PUP Fac}$

If the Policy continues in Reduced Paid up status, any Survival Benefit paid over and above the applicable Reduced Paid-up Survival Benefit, till the Policy became Reduced Paid-up, will be duly adjusted from the Reduced Paid-up Survival Benefit, as provided below:

Total Survival Benefit already paid till the policy becomes Reduced paid-up $\times (1 - \text{PUP Fac}) /$ Remaining number of 'Income Benefit Pay-out' instalments till Policy Term after the policy became Reduced paid-up

Where Paid Up Factor (PUP Fac) = $\frac{\text{Total number of months for which Premiums are paid}}{\text{Total number of months for which Premiums were originally payable}}$

The Reduced Paid-up benefits are summarized below:

Events	How and when Benefits are payable	Size of such benefits/policy monies
Death of the Life Assured	In case of death of the Life Assured during the Policy Term, Reduced Paid-up Death Benefit will be payable as lump sum and Policy will terminate without any further benefit.	Reduced Paid-up Death Benefit
Survival Benefit	<p><u>Regular Income</u> On survival of the Life Assured, Reduced Paid-up Survival Benefit will be payable in arrears till the date of death of the Life Assured or till the Maturity Date, whichever is earlier.</p> <p><u>Regular Income Advantage</u> On survival of the Life Assured, Reduced Paid-up Survival Benefit will be payable till the date of death of the Life Assured or till the Maturity Date, whichever is earlier.</p>	Reduced Paid-up Survival Benefit
Maturity of the Policy	On survival of the Life Assured till the Date of Maturity, Reduced Paid-up Maturity Benefit is payable as lump sum, and the Policy will terminate without any further benefit.	Maximum of (Reduced paid-up Sum Assured on Maturity, Total Premiums Paid less Total Survival Benefits paid)

PART – D

1. Surrender Benefit:

The Policy will acquire Surrender Value provided one full year's Premium has been paid and is payable after completion of the first Policy year. On receipt of a written request for Surrender from you, the Surrender Value, if any, will be paid, the Policy will be terminated and all the benefits under the Policy shall cease to apply.

Surrender Value:

The surrender value payable is higher of Guaranteed Surrender Value (GSV) and Special Surrender Value (SSV).

a) Guaranteed Surrender Value (GSV):

The policy shall acquire a Guaranteed Surrender Value on payment of Premium for at least two consecutive years. The Guaranteed Surrender Value shall be:

$\text{Max}\{(\text{GSV Factor} \times \text{Total Premiums Paid}) - \text{total Survival Benefits already paid till the date of surrender}, 0\}$

The GSV Factors varies with Policy Year of Surrender and Policy Term as mentioned in Annexure IV.

b) Special Surrender Value (SSV):

Your Policy also acquires a Special Surrender Value. Before making a request for Surrender, you may approach us to know about the Surrender Value in respect of your Policy

2. Loan under the Policy:

Conditions for grant of a loan under the Policy: Policy loan is available once the policy acquires surrender value. Maximum loan amount is 60% of the surrender value.

Effect of grant of loan under the Policy: If a loan is granted by us under the Policy, then:

- Interest will be charged on the outstanding loan amount at a rate declared by the Company from time to time based on then prevailing market conditions and will be equal to "Three-year (tenure) SBI MCLR + 0.50%, subject to floor of 7.00%". The rate of interest for policy loan as on 15th December 2025 is 9.30% per annum. The interest rate methodology is reviewable with prior approval from IRDAI. The Company will review the interest rate at least once a year and if the interest rate is revised, the same interest rate will be applied to both existing and new loan from the date of revision.
- For other than in-force and fully paid-up policies, if at any point of time outstanding loan amount and accumulated interest balance equal or exceed surrender value, then the policy shall be terminated without value. Prior to this, the Company will notify the customer when his/her outstanding loan balance is 95% of the surrender value and will give an opportunity to repay all or part of the loan balance. The outstanding loan amount and accumulated interest will be recovered from any benefits payable (including Survival Benefit, Death Benefit, Maturity Benefit, Surrender Benefit) and rest of the benefit amount, if any, will be paid. For in-force and fully paid-up policies: Policy can't be foreclosed on the ground of outstanding loan amount including interest exceeding the surrender value.

- Any benefit payable by us (including Survival Benefit, if applicable, Death Benefit, Maturity Benefit, and Surrender Benefit) will first be reduced by any outstanding Policy loan and accumulated interests, if any.

3. **Revival:**

If Premiums are not paid within the Grace Period, the Policy lapses without any benefit or becomes Reduced Paid-up. The Policy may be revived within the Revival Period. Revival Period means the period of five consecutive complete years from the date of first unpaid Premium, during which period the Policyholder is entitled to revive the Policy which was discontinued due to the non-payment of Premium. The revival will be considered on receipt of written application from the Policyholder along with the proof of continued insurability of Life Insured and on payment of all overdue Premiums. Company may charge interest (simple basis), as decided from time to time, on the unpaid Premium for every completed month from the date of first unpaid Premium.

The revival interest rate will be declared on 1st April every year using G-sec rate with 2 years maturity as of 31st March of the same calendar year. The per month revival interest rate shall be $(x + 3\%)/12$ rounded up to nearest 0.25%, where x is G-Sec rate with 2 years maturity. Source to determine the G-Sec yield is www.ccilindia.com. The declared revival rate will be applicable for all the revivals till next declaration date i.e., 1st April of next year.

Any change in basis of determination of interest rate for revival shall only be done after prior approval of the Authority. The interest rate to be charged at effective from April 2025 is 1% per month (simple basis) on unpaid premiums for every completed month from the date of the first unpaid premium. The Proof of Continued Insurability and medical examination if required (medical examination cost to be borne by the Policyholder) and the results thereof would be interpreted and if the life is acceptable from the underwriting point of view, then it will be allowed to revive. Revival would be as per 'Board Approved Underwriting Policy'. All the benefits of the Policy will be reinstated on the Policy revival including any past applicable Survival Benefit.

4. **Free Look Period:**

You have a Free Look period of thirty (30) days beginning from the date of receipt of the Policy Document, whether received electronically or otherwise, to review the terms and conditions of this Policy. If you disagree with any of the terms or conditions, or otherwise, and you have not made any claims, you may return this Policy for cancellation to us by giving us written reasons for your objection within the said Free Look period. We will refund the Premium received after deducting stamp duty charges, proportionate risk premium for the period of cover and expenses incurred by us on medical examination (if any) of Proposer/Life Insured

To exercise the Free Look option, you would need to send the Policy Document along with a request letter to us at any of our branches or at our Corporate Office address provided below. You are required to maintain the acknowledgement received from the Company as a proof of submission.

Computation of Free Look Period for e-Insurance Account:

If the Policy is opted through Insurance Repository ('IR'), the computation of the said Free Look Period will be as stated below:

- a. For existing e-Insurance Account: Computation of the said Free Look Period will commence from the date of delivery of the e mail confirming the credit of the Insurance policy by the IR.

- b. For New e-Insurance Account: If an application for e-Insurance Account accompanies the proposal for insurance, the date of receipt of the 'welcome kit' from the IR with the credentials to log on to the e-Insurance Account (e IA) or the delivery date of the email confirming the grant of access to the eIA or the delivery date of the email confirming the credit of the Insurance policy by the IR to the eIA, whichever is later, shall be reckoned for the purpose of computation of the Free Look Period.

5. Termination of Policy:

The Policy will terminate at the earliest of:

- i. The date of processing the Free Look cancellation request; or
- ii. The date of intimation of the death of the Life Insured
- iii. The Date of Maturity; or
- iv. The date of payment of Surrender Value of the Policy; or
- v. The date on which the Revival Period ends, while Policy continues to be in lapsed status as per clause 6 (c) of Part C on Premium Discontinuance; or
- vi. For Reduced Paid-up policies, the date on which the outstanding loan amount along with accrued interest exceeds the Surrender Value

Upon termination all the benefits under the Policy shall cease to apply.

PART – E

Not Applicable.

SAMPLE

PART – F

GENERAL TERMS AND CONDITIONS

a)	Exclusions: Suicide In case of death of the Life Assured due to suicide within 12 months from the Date of Commencement of Risk under the Policy or from the date of Revival of the policy, as applicable, the Nominee or Beneficiary of the Policyholder shall be entitled to 80% of the Total Premiums Paid till the date of death or the Surrender Value available as on the date of death whichever is higher, provided the Policy is In-Force. The Policy will terminate on making such a payment, and no further benefits are payable.
b)	Death Claim Procedure: We shall be given a written notice of the Life Insured's death and, shall be provided with the following documents for us to assess the claim: <ul style="list-style-type: none">i. The claim form, duly completed;ii. The original or an attested copy of the death certificate;iii. The original Policy Document;iv. Documents to establish right of the claimant in the absence of valid nominationv. Any other information or documentation that we request. In case of Death due to Accident and unnatural death, the following additional documents are required: <ul style="list-style-type: none">i. Copy of FIR and Panchnama;ii. Copy of the Post mortem report;iii. Copy of Newspaper clipping, if any;iv. Copy of the final Police Investigation Report;v. Copy of the Chargesheet in case of murder;vi. Copy of Driving License if the Life Insured was driving at the time of death You are requested to intimate us of the claim at any of our branch offices or to our Corporate Office address mentioned below: Claims Officer Edelweiss Life Insurance Company Limited 6 th Floor, Tower 3, Wing 'B', Kohinoor City, Kiroh Road, Kurla (W), Mumbai - 400070 Email Id: claims@edelweisslife.in Phone no: 1800 2121 212 Receipt of the claim intimation does not amount to acceptance of claim by the Company under the Policy and is subject to review by the Company. The decision on acceptance and admissibility of the Claim will be communicated separately by the Company to the claimant. The claim is required to be intimated to us along with all necessary claim documents required within 90 days from the date of death. However, we may condone the delay in claim intimation, if any, provided valid reasons are given for the delay.
c)	Maturity Claim Procedure: Company shall process Maturity claim payout on or before due date as per the terms and condition. Policyholder must update their latest bank account details in Company records for seamless processing.
d)	Nomination: Nomination should be in accordance with the provisions of Section 39 of the Insurance Act, 1938 as amended from time to time.

	<i>[A Leaflet containing the simplified version of the provisions of Section 39 of the Insurance Act, 1938 as amended from time to time is enclosed in Annexure (1) for reference].</i>
e)	Assignment:
	<p>Assignment should be in accordance with the provisions of Section 38 of the Insurance Act, 1938 as amended from time to time.</p> <p><i>[A Leaflet containing the simplified version of the provisions of Section 38 of the Insurance Act, 1938 as amended from time to time is enclosed in Annexure – (2) for reference].</i></p>
f)	Validity/ Non-Disclosure:
	<p>(i) If you or anyone acting on your behalf makes, fraudulent, misleading or dishonest representation in any respect, then this Policy shall be dealt with in accordance with Section 45 of the Insurance Act, 1938 as amended from time to time.</p> <p>(ii) <u>Misstatement of Age</u> If the date of birth of the Life Insured has been misstated, any amount payable shall be increased or decreased to the amount that would have been provided, as determined by us, given the correct age.</p> <p>If at the correct age, the Life Insured was not insurable under this Policy according to our requirements, we reserve the right to terminate the Policy and any Premiums paid till date, if any, shall be payable by us (subject to Section 45 of the Insurance Act, 1938 as amended from time to time).</p> <p>(iii) <u>Section 41:</u> No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables or the insurer. Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakh rupees.</p> <p>(iv) <u>Section 45:</u> Fraud and Misstatement shall be dealt with in accordance with the provisions of Section 45 of the Insurance Act, 1938 as amended from time to time.</p> <p><i>[A Leaflet containing the simplified version of the provisions of Section 45 of the Insurance Act, 1938 as amended from time to time is enclosed in Annexure – (3) for reference].</i></p>
g)	Currency, Governing Law and Jurisdiction
	<p>The Premiums and benefits payable under the Policy shall be payable in India and in Indian Rupees.</p> <p>The Policy and any disputes or differences arising under or in relation to the Policy shall be construed in accordance with Indian law and by the Indian courts.</p>
h)	Taxation
	<p>Statutory Taxes, if any, imposed on such insurance plans by the Government of India or any other constitutional tax Authority of India shall be as per the Tax laws and the rate of tax as applicable from time to time.</p> <p>The amount of applicable taxes as per the prevailing rates, shall be payable by the Policyholder on Premiums (for base policy and rider, if any) including extra amount if charged under the policy due to underwriting decisions, which shall be collected separately over and above in addition to the premiums payable by the policyholder.</p>

	<p>The amount of tax paid shall not be considered for the calculation of benefits payable under the plan.</p> <p>The tax benefits, if any, maybe available as per the prevailing provisions of the tax laws in India. The Policyholder or the nominee shall be liable for compliance of applicable tax provisions.</p>
i)	Duplicate Policy Document
	<p>If you lose or misplace the Policy Document then you may request us to issue you a duplicate Policy Document by giving us a written notice. The Company may charge a fee which is currently Rs. 200 (fee is subject to review and maybe amended from time to time) plus a Stamp Duty Fee, as applicable. On issue of the duplicate Policy Document, the original shall automatically cease to have any legal effect.</p>
j)	Intimations and Notices
	<p>All intimations meant for us shall be given to us at our address specified in the Policy document or at any of our branch offices.</p> <p>All notices meant for you will be sent to your address specified in the Policy Schedule. If you do not notify us of any changes to your address, then notices or correspondence sent by us to the last recorded address shall be valid and legally effective.</p> <p>You would need to intimate us of any change in your address to enable us to provide important information pertaining to your Policy.</p>
k)	Entire Contract
	<p>The Policy comprises the entire contract of insurance between you and us. We shall not be bound or be deemed to be bound by any alterations or changes, unless such changes are made by us in writing through an endorsement.</p> <p>Notwithstanding anything contained in this Policy Document, the provisions herein shall stand altered or superseded to such extent and in such manner as may be required by any change in applicable law including but not limited to any regulations, circulars or guidelines issued by IRDAI.</p>
l)	Mode of Communication
	<p>The Company and the Policyholder may exchange communication pertaining to this Policy either through normal correspondence or through electronic mail and the Company shall be within its right to seek clarifications / carry out the mandates of the Policyholder on merits in accordance with such communication.</p> <p>While accepting requests / mandate from the Policyholder through electronic mail, the Company may stipulate such conditions as deemed fit to give effect to and comply with the provisions of Information Technology Act, 2000 as amended from time to time and/or such other applicable laws in force from time to time.</p>
m)	Vesting of Ownership
	<p>In case the Life Insured is a minor, on attainment of majority the ownership of Policy will automatically vest on the Life Insured.</p>

PART - G

Grievance Redressal Mechanism:

We have established a Grievance Redressal Mechanism to assist in the resolution of any complaint, grievance, or dispute in respect of the Policy. You are requested to submit your complaint at any of the below mentioned touch points:

- Toll free customer care number: 1-800-2121-212 (Mon-Sat 10 AM TO 7 PM).
- Email us at: complaints@edelweisslife.in / care@edelweisslife.in
- Write to us at: Customer Care, Edelweiss Life Insurance Company Ltd, 6th Floor, Tower 3, Wing 'B', Kohinoor City, Kirod Road, Kurla (W), Mumbai 400070.
- You can lodge your grievance/complaint at any of our branches/offices
- You can also lodge a grievance/complaint on our website at: pl <https://www.edelweisslife.in/web/guest/contact-us#fileAComplaint>

Details of Grievance Redressal officer:

+91-22-71013322 (Between 10 am to 7 pm on Monday to Friday, except public holidays),

Email ID: GRO@edelweisslife.in.

We will respond with a resolution within 14 days

In case the resolution does not meet your expectations or if you have not received any reply, you may approach the Grievance Cell of Insurance Regulatory and Development Authority of India (IRDAI) on the following contact details:

- IRDAI Grievance Call Centre (Bima Bharosa Shikayat Nivaran Kendra) (IGCC) - Toll free No: 155255 / 1800 425 4732
- Email ID: complaints@irdai.gov.in
- Register online at: <https://bimabharosa.irdai.gov.in/LoginAdmin/Login>

Address for sending the complaint through courier / letter:

Consumer Affairs Department
Insurance Regulatory and Development Authority of
India Survey No. 115/1
Financial District
Nanakramguda
Gachibowli
Hyderabad – 500 032, Telangana

At any point of time, if the resolution does not meet your expectation or if you have not received any reply within a period of one month from the date of receipt of complaint by the Company, you may approach the Insurance Ombudsman for redressal as per Rule 13 and 14 of the Insurance Ombudsman Rules, 2017 ('Insurance Ombudsman Rules').

Powers of Insurance Ombudsman under Rule 13 of the Insurance Ombudsman Rules:

The Ombudsman shall receive and consider the following complaints or disputes relating to:

- a. delay in settlement of claims, beyond the time specified in the Regulations, framed

- b. under Insurance Regulatory and Development Authority of India Act, 1999;
- c. any partial or total repudiation of claims by the Company;
- d. disputes over Premium paid or payable in terms of insurance Policy;
- e. misrepresentation of Policy terms and conditions at any time in the Policy Document or Policy contract;
- f. legal construction of insurance policies in so far as the dispute relates to claim;
- g. Policy servicing related grievances against the Company and their agents and intermediaries;
- h. issuance of life insurance Policy including health insurance Policy which is not in conformity with the Proposal Form submitted by the Proposer;
- i. non-issuance of insurance Policy after receipt of Premium in life insurance including health insurance; and
- j. any other matter resulting from the violation of provisions of the Insurance Act, 1938 as amended from time to time 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 (f) as mentioned above.

Manner in which complaint is to be made in accordance with Rule 14 of the Insurance Ombudsman Rules:

1. Any person who has a grievance against the Insurer/Company/Us, may himself or through his legal heirs make a complaint in writing to the Ombudsman within whose territorial jurisdiction the branch or office of the Company, complaint 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 which the complaint is made, the fact giving rise to complaint, supported by documents, the nature and extent of the loss caused to the complainant and the relief sought from the Ombudsman.
3. No complaint to the Insurance Ombudsman shall lie unless:
 - (a) the complainant makes a written representation to the Company named in the complaint and—
 - i. either the Company had rejected the complaint; or
 - ii. the complainant had not received any reply within a period of one month after the Company received the complainant's representation; or
 - iii. the complainant is not satisfied with the reply given to him by the Company;
 - (b) The complaint is made within one year—
 - i. after the order of the Company rejecting the representation is received; or
 - ii. after receipt of decision of the Company 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 Company if the Company named in the complaint fails to furnish reply to the complainant.
4. The Insurance Ombudsman shall be empowered to condone the delay in filing a complaint as mentioned above under (3) (b), as he may consider necessary, after calling for objections of the Company 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 the Insurance Ombudsman 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.

THE LIST OF THE OMBUDSMAN WITH THEIR ADDRESSES IS GIVEN BELOW:

<p>Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor, Tilak Marg, Relief Road, <u>AHMEDABAD-380 001.</u> Tel.: 079-25501201/02/05/06</p> <p>Email: bimalokpal.ahmedabad@cioins.co.in</p>	<p>Office of the Insurance Ombudsman, 1st floor, South wing, Jeevan Shikha, Opp. Gayatri Mandir 60-B, Hoshangabad Road <u>BHOPAL-462011</u> Tel.: 0755-2769201/9202/9203</p> <p>Email: bimalokpal.bhopal@cioins.co.in</p>
<p>Office of the Insurance Ombudsman 62, Forest Park, <u>BHUBANESHWAR-751 009.</u> Tel.: 0674-2596455/2596461</p> <p>Email: bimalokpal.bhubaneshwar@cioins.co.in</p>	<p>Office of the Insurance Ombudsman, Jeevan Deep, Ground floor, LIC of India bldg., SCO 20-27, Sector 17-A, <u>CHANDIGARH-160 017.</u> Tel.: 0172-2707468/2706468</p> <p>Email: bimalokpal.chandigarh@cioins.co.in</p>
<p>Office of the Insurance Ombudsman, Fathima Akhtar Court, 4th Floor, 453 Anna Salai, Teynampet, <u>CHENNAI-600 018.</u> Tel.: 044-24333668/3678</p> <p>Email: bimalokpal.chennai@cioins.co.in</p>	<p>Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Bldg., Asaf Ali Road, <u>NEW DELHI-110 002.</u> Tel.: 011- 23232481/23213504</p> <p>Email: bimalokpal.delhi@cioins.co.in</p>
<p>Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, <u>GUWAHATI-781 001 (ASSAM).</u> Tel.: 0361- 2632204 / 2602205</p> <p>Email: bimalokpal.guwahati@cioins.co.in</p>	<p>Office of the Insurance Ombudsman, 6-2-46, 1st Floor, "Moin Court", Lane Opp. Saleem Function Palace, A. C. Guards, Lakdi-Ka-Pool, <u>HYDERABAD-500 004.</u> Tel.: 040-23312122</p> <p>Email: bimalokpal.hyderabad@cioins.co.in</p>
<p>Office of the Insurance Ombudsman, 10th floor, LIC Bldg, Jeevan Prakash Opp Maharaj College Ground M.G Road <u>ERNAKULAM, KOCHI- 682011</u> Tel: 0484-2358759</p> <p>Email: bimalokpal.ernakulam@cioins.co.in</p>	<p>Office of the Insurance Ombudsman, 7th Floor of Hindusthan Building (Annex), 4, C R Avenue <u>KOLKATA - 700072</u> Tel: 033-22124339/4341</p> <p>Email: bimalokpal.kolkata@cioins.co.in</p>
<p>Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, <u>LUCKNOW-226 001.</u> Tel : 0522- 4002082/3500613</p> <p>Email: bimalokpal.lucknow@cioins.co.in</p>	<p>Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S.V. Road, Santacruz(W), <u>MUMBAI-400 054.</u> Tel:022-69038800/8833</p> <p>Email: bimalokpal.mumbai@cioins.co.in</p>

Office of the Insurance Ombudsman, Gr. Floor, Jeevan Nidhi - II, Bhawani Singh Marg, <u>JAIPUR – 302005.</u> Tel: 0141-2740363 Email: bimalokpal.jaipur@cioins.co.in	Office of the Insurance Ombudsman, 3 rd Floor, Jeevan Darshan, C.T.S. Nos. 195 to 198, N.C. Kelkar Road, Narayan Peth <u>PUNE - 411030.</u> Tel: 020- 24471175 Email: bimalokpal.pune@cioins.co.in
Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No. 57-27-N-19 Ground Floor, 19/19, 24th Main Road, JP Nagar, 1st Phase, <u>BENGALURU – 560 078.</u> Tel.: 080 - 26652048 / 26652049 Email: bimalokpal.bengaluru@cioins.co.in	Office of the Insurance Ombudsman, Bhagwan Sahai Palace, 4 th Floor, Main Road Naya Bans, Sector 15, Distt: Gautam Buddh Nagar <u>NOIDA – 201301.</u> Tel: 0120- 2514252 / 2514253 Email: bimalokpal.noida@cioins.co.in
Office of the Insurance Ombudsman, 2nd Floor, Lalit Bhawan, Bailey Road, <u>Patna 800 001.</u> Tel No: 0612- 2547068 Email id : bimalokpal.patna@ecoi.co.in	Office of the Insurance Ombudsman, 2nd Floor, Jeevan Chintamani Building, Vasant Rao Naik Mahamarg, <u>Thane (West)- 400604</u> Tel.: 022-20812868/69 Email: oio.thane@cioins.co.in

You may refer to the list of Ombudsman with their addresses on <https://cioins.co.in/Ombudsman>

Annexure - 1

Section 39 - Nomination by policyholder

Nomination of a life insurance Policy is as below in accordance with Section 39 of the Insurance Act, 1938 as amended from time to time. The extant provisions in this regard are as follows:

01. 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.
02. 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.
03. Nomination can be made at any time before the maturity of the policy.
04. 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.
05. 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.
06. 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.
07. Fee to be paid to the insurer for registering change or cancellation of a nomination can be specified by the Authority through Regulations.
08. 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.
09. 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 but shall affect the rights of the nominee 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. The provisions of sub-section 7 and 8 (13 and 14 above) shall apply to all policies maturing for payment on the commencement of The Insurance Act, 1938 as amended from time to time.
16. 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.

17. The provisions of this Section 39 are not applicable to any life insurance policy to which Section 6 of Married Women's Property Act, 1874 ('MWP Act') applies or has at any time applied except where, a nomination is made in favour of spouse or children or spouse and children whether or not on the face of the policy it is mentioned that it is made under Section 39. 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. \

[Disclaimer: This is a simplified version of Section 39 of the Insurance Act, 1938 as amended from time to time. The Policyholders are advised to refer to The Insurance Act, 1938 as amended from time to time for complete and accurate details.]

SAMPLE

Annexure - 2

Section 38 - Assignment and Transfer of Insurance Policies

Assignment or Transfer of a Policy should be in accordance with Section 38 of the Insurance Act, 1938 as amended from time to time. The extant provisions in this regard are as follows:

1. This policy may be transferred/assigned, wholly or in part, with or without consideration.
 2. An Assignment may be effected in a policy by an endorsement upon the policy itself or by a separate instrument under notice to the Insurer.
 3. The instrument of assignment should indicate the fact of transfer or assignment and the reasons for the assignment or transfer, antecedents of the assignee and terms on which assignment is made.
 4. The assignment must be signed by the transferor or assignor or duly authorized agent and attested by at least one witness.
 5. The transfer of assignment shall not be operative as against an insurer until a notice in writing of the transfer or assignment and either the said endorsement or instrument itself or copy there of certified to be correct by both transferor and transferee or their duly authorised agents have been delivered to the insurer.
 6. Fee to be paid for assignment or transfer can be specified by the Authority through Regulations.
 7. On receipt of notice with fee, the insurer should Grant a written acknowledgement of receipt of notice. Such notice shall be conclusive evidence against the insurer of duly receiving the notice.
 8. If the insurer maintains one or more places of business, such notices shall be delivered only at the place where the policy is being serviced.
 9. The insurer may accept or decline to act upon any transfer or assignment or endorsement, if it has sufficient reasons to believe that it is
 - a. not bonafide or
 - b. not in the interest of the policyholder or
 - c. not in public interest or
 - d. is for the purpose of trading of the insurance policy.
 10. Before refusing to act upon endorsement, the Insurer should record the reasons in writing and communicate the same in writing to Policyholder within 30 days from the date of policyholder giving a notice of transfer or assignment.
 11. In case of refusal to act upon the endorsement by the Insurer, any person aggrieved by the refusal may prefer a claim to IRDAI within 30 days of receipt of the refusal letter from the Insurer.
 12. The priority of claims of persons interested in an insurance policy would depend on the date on which the notices of assignment or transfer is delivered to the insurer; where there are more than one instruments of transfer or assignment, the priority will depend on dates of delivery of such notices. Any dispute in this regard as to priority should be referred to Authority.
 13. Every assignment or transfer shall be deemed to be absolute assignment or transfer and the assignee or transferee shall be deemed to be absolute assignee or transferee, except
 - a. where assignment or transfer is subject to terms and conditions of transfer or assignment; OR
 - b. where the transfer or assignment is made upon condition that
 - i. the proceeds under the policy shall become payable to policyholder or Nominee(s) in the event of assignee or transferee dying before the insured OR
 - ii. the insured surviving the term of the policy
- Such conditional assignee will not be entitled to obtain a loan on policy or Surrender the policy. This provision will prevail notwithstanding any law or custom having force of law which is contrary to the above position.
14. In other cases, the insurer shall, subject to terms and conditions of assignment, recognize the transferee or assignee named in the notice as the absolute transferee or assignee and such person
 - a. shall be subject to all liabilities and equities to which the transferor or assignor was subject to at the date of transfer or assignment and
 - b. may institute any proceedings in relation to the policy

c. obtain loan under the policy or Surrender the policy without obtaining the consent of the transferor or assignor or making him a party to the proceedings

15. Any rights and remedies of an assignee or transferee of a life insurance policy under an assignment or transfer effected before commencement of the Insurance Laws (Amendment) Ordinance, 2014 shall not be affected by this section.

[Disclaimer: This is a simplified version of Section 38 of the Insurance Act, 1938 as amended from time to time. The Policyholders are advised to refer to The Insurance Act, 1938 as amended from time to time for complete and accurate details.]

SAMPLE

Annexure - 3

Section 45 – Policy shall not be called in question on the ground of mis-statement after three years

Provisions regarding policy not being called into question in terms of Section 45 of the Insurance Act, 1938 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 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.

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 misstatement 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.

[Disclaimer: This is a simplified version of Section 45 of the Insurance Act, 1938 as amended from time to time. The Policyholders are advised to refer to The Insurance Act, 1938 as amended from time to time for complete and accurate details.]

Annexure - 4: GSV factors

GSV as a % of Total Premiums Paid

Policy Year\Policy Term	20	25	30	35	40
1	-	-	-	-	-
2	30%	30%	30%	30%	30%
3	35%	35%	35%	35%	35%
4	50%	50%	50%	50%	50%
5	50%	50%	50%	50%	50%
6	50%	50%	50%	50%	50%
7	50%	50%	50%	50%	50%
8	53%	52%	52%	51%	51%
9	56%	54%	54%	53%	52%
10	59%	56%	56%	54%	53%
11	62%	58%	58%	56%	54%
12	66%	60%	60%	57%	55%
13	69%	63%	62%	59%	56%
14	73%	65%	64%	60%	57%
15	76%	68%	66%	62%	58%
16	79%	70%	68%	63%	59%
17	83%	73%	70%	65%	60%
18	86%	75%	72%	66%	61%
19	90%	78%	74%	68%	62%
20	90%	80%	76%	69%	63%
21	-	82%	78%	71%	64%
22	-	85%	80%	72%	65%
23	-	87%	81%	74%	66%
24	-	90%	83%	75%	68%
25	-	90%	84%	77%	69%
26	-	-	85%	78%	71%
27	-	-	87%	80%	72%
28	-	-	88%	81%	74%

29	-	-	90%	83%	75%
30	-	-	90%	84%	77%
31	-	-	-	85%	78%
32	-	-	-	87%	80%
33	-	-	-	88%	81%
34	-	-	-	90%	83%
35	-	-	-	90%	84%
36	-	-	-	-	85%
37	-	-	-	-	87%
38	-	-	-	-	88%
39	-	-	-	-	90%
40	-	-	-	-	90%