

PART A

Date: < _____ >

Name of Policyholder:

Address of Policyholder:

Contact Number/(s) of Policyholder:

Dear <Policyholder Name>,

Sub.: Your Policy No. << _____ >>- Edelweiss Life – Suraksha Kavach Bima Yojana (Micro Insurance Plan) An Individual, Non-Linked, Non-Participating, Pure Risk, Life, Micro 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 and that you have read and understood the terms and conditions of the product brochure.

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 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 salesperson 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 Address: 6th Floor, Tower 3, Wing 'B', Kohinoor City, Kiroli 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, Kiroi Road,
Kurla (W), Mumbai 40070

POLICY DOCUMENT - Edelweiss Life - Suraksha Kavach Bima Yojana (Micro Insurance Plan)

(An Individual, Non-Linked, Non-Participating, Pure Risk, Life, Micro Insurance Product)

UIN No: 147N083V01

POLICY PREAMBLE

This policy is an Individual, Non-Linked, Non-Participating, Pure Risk, Life, Micro 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 and/or Life Insured. 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 & UIN No
	Edelweiss Life – Suraksha Kavach Bima Yojana (Micro Insurance Plan) (147N083V01)

Details of the <<Policyholder>>

Name	Date of Birth	Age (in years)	Gender	CKYC Number

Address of the <<Policyholder>>

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Details of the << Life Insured >>

Name	Date of Birth	Age (in years)	Gender	CKYC Number

Address of the << Life Insured >>

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Policy Details

Date of Commencement of Risk	<<dd/mm/yyyy>>
Date of Commencement of Policy	<<dd/mm/yyyy>>
Policy Term (years)	<<1/2/5>>
Premium Payment Frequency	<<Single Pay/Annual>>
Premium Paying Term (PPT)	<<Single Pay/Regular Pay >>
Date of Maturity	<<dd/mm/yyyy>>
Annual Premium	Rs. << amount>>
Annualized Premium	Rs. << amount>>
Premium Due Date	<<NA/ Date & Month of every year till Last Premium Due date >>
Last Premium Due Date	<<dd/mm/yyyy>>/<<NA>>

BENEFIT INFORMATION

Sum Assured : Rs. Sum Assured

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

We request you to go through the Policy in detail and check for the accuracy of information provided in the Policy and return the Policy Document to Us for correcting the discrepancies if any.

SAMPLE

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
Appointee:	means the person registered with us and mentioned in the Policy Schedule, who is authorized 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.
Annualized Premium:	means the Premium amount payable in a year excluding taxes, rider Premiums, Underwriting Extra Premiums and loadings for Modal Premiums.
Death Benefit:	means the benefit, which is payable on death of the Life Insured, as stated in the Policy Document.
Date of Maturity/Maturity Date:	means the date specified in the Schedule on which the Policy Term is completed.
Due Date:	means a fixed date on which the Policy Premium is due and payable by the Policyholder.
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 this Policy Document.
Grace Period for other than Single Premium policies:	means the time granted by the insurer from the Due date of 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 30 days in all cases.
Life Insured:	means the person on whose life the insurance cover has been accepted.
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.
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
Insurance Act:	means The Insurance Act, 1938 (4 of 1938) as amended from time to time.
Maturity Benefit:	means sum assured on maturity, any additional and accrued benefit, which is payable on maturity in accordance with the terms and conditions of the policy.
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

	Section 39 of the Insurance Act, 1938 as amended from time to time to receive benefits in respect of this Policy.
Non-Participating:	means products where policies are not entitled for any share in surplus (profits) during the term of the Policy;
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 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 Term:	means the period, in years, as chosen by the Policyholder and mentioned in the Schedule, commencing from the Date of commencement of Policy to the Date of Maturity.
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 during which Premium is payable, as mentioned in the Policy Schedule.
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 Annuitant, as applicable for the purpose of obtaining insurance cover under this Policy.
Proposer:	means a person who proposes the life insurance proposal.
Risk Commencement Date/Date of Commencement of Risk:	means the date on which the Company accepts the risk for insurance (cover) as evidenced in the Schedule of the Policy.
Policy Commencement Date/Date of Commencement of Policy:	means the date as shown in the Policy Schedule from which the Policy commences.
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. Applicable for Regular Pay only.
Revival Period:	means the period of five consecutive complete years from the date of first unpaid Premium.
Schedule / Policy Schedule:	means the part of Policy Document that gives the specific details of your policy.
Single Premium:	means the Premium amount chosen by the Policyholder, excluding the taxes and Underwriting Extra Premiums, if any.
Sum Assured:	means the amount specified in the Schedule.
Total Premiums Paid:	means total of all the Premiums paid under the base product, excluding any extra Premium and taxes, if collected explicitly.
Underwriting:	means 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:	means a unique number allotted to each product which is required to be disclosed in product related literature, Policy Documents and any other supporting documents for such product
We/Our/Us/ Company:	Edelweiss Life Insurance Company Limited.

Interpretation: In this Policy Document, 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

1) **BENEFITS**

1 (a) Death Benefit	
How and when Benefits are payable	Size of such benefits/policy monies
<p>In case of death of the Life Insured during the Policy Term, while the Policy is In-Force, the Death Benefit will be payable in Lumpsum.</p>	<p>Death Benefit at any time during the Policy Term is equal to:</p> <p>For age at entry less than 50 years is higher of:</p> <ol style="list-style-type: none"> 1. 125% of single premium; or 2. Sum Assured chosen at the outset. <p>For age at entry 50 years and above is higher of:</p> <ol style="list-style-type: none"> 1. 110% of single premium; or 2. Sum Assured chosen at the outset. <p>For other than Single Pay Policy, higher of:</p> <ol style="list-style-type: none"> 1. 10 times the Annualized Premium or 2. 105% of Total Premiums Paid upto the date of death <p style="text-align: center;">Or</p> <ol style="list-style-type: none"> 3. Sum Assured chosen at the outset
1 (b) Maturity Benefit	
<p>On the Life Insured surviving the Term of the Policy then:</p>	<p>No Maturity Benefit is payable</p>

2) **PAYMENT OF PREMIUM & DISCONTINUANCE OF PREMIUM PAYMENT**

(a) Payment of Premium:
<p>You shall pay Premium for the Premium Paying Term. The amount of Premium payable, the frequency at which it must be paid and the Due Dates for each installment of Premium are stated in the Schedule.</p>
(b) Grace Period:
<p>If we do not receive the Premium in full by the Premium Due Date, then:</p> <p>(i) We will allow a Grace Period of 30 days during which you must pay the Premium due in full. The Policy will be In force during the Grace Period.</p> <p>(ii) All the benefits under the Policy will continue to apply during the Grace Period.</p> <p>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).</p>
(c) Premium Discontinuance:
<p><u>Single Pay</u> Not applicable.</p> <p><u>Regular Pay</u> On Premium Discontinuance the coverage will be lapsed, and no Unexpired Risk Premium Value or paid-up value will be payable.</p>

(d) Lapsation:

The Policy would stand lapsed if the due Premiums are not paid within the Grace Period and the Death Benefit under the Policy will cease to apply.
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SAMPLE

PART D

a) Surrender	Surrender Value is not applicable under this product. However, an Unexpired Risk Premium Value is available for Single Premium Policy for Policy Term 2 and 5.																					
b) Unexpired Risk Premium Value:	Unexpired Risk Premium Value will be acquired immediately after the Single Premium has been paid. The following Unexpired Risk Premium value is payable upon termination (other than death) for Single Pay policies:																					
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr style="background-color: #003366; color: white;"> <th rowspan="2">Policy Year</th> <th colspan="2">Unexpired Risk Premium Value (as a % of Single Premium)</th> </tr> <tr style="background-color: #003366; color: white;"> <th>PT: 5 years</th> <th>PT: 2 years</th> </tr> </thead> <tbody> <tr> <td>Year 1</td> <td>60%</td> <td>35%</td> </tr> <tr> <td>Year 2</td> <td>45%</td> <td>0%</td> </tr> <tr> <td>Year 3</td> <td>30%</td> <td>NA</td> </tr> <tr> <td>Year 4</td> <td>15%</td> <td>NA</td> </tr> <tr> <td>Year 5</td> <td>0%</td> <td>NA</td> </tr> </tbody> </table>		Policy Year	Unexpired Risk Premium Value (as a % of Single Premium)		PT: 5 years	PT: 2 years	Year 1	60%	35%	Year 2	45%	0%	Year 3	30%	NA	Year 4	15%	NA	Year 5	0%	NA
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Year 3	30%	NA																				
Year 4	15%	NA																				
Year 5	0%	NA																				
	No Unexpired Risk Premium Value is payable for Regular Pay policies and Single Pay policies with Policy Term 1.																					
c) Loan under the Policy	No loan is available under the Policy.																					
d) Free Look Period	<p>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.</p> <p>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.</p>																					
e) Revival	<p>Regular Pay:</p> <p>If Premiums are not paid within the Grace Period, the Policy lapses and 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 and before the date of Maturity, 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 Assured and on payment of all overdue Premiums. Company may charge interest, as decided from time to time, on the unpaid Premium for every completed month from the date of first unpaid Premium.</p> <p>The Revival interest rate will be declared on 1st April every year using G-sec rate with 2 years maturity as at 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</p>																					

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 effective from April 2025 is 1% per month 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 guidelines. All the benefits of the Policy will be reinstated on the Policy Revival.

Single Pay

Not Applicable

f) 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 payment of Surrender Value or Unexpired Risk Premium of the Policy; or
- iv. The Date of Maturity; or
- v. The date on which the revival period ends, while Policy continues to be in lapsed status as per clause 2(d) of Part C on Premium Discontinuance

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

PART E

Not Applicable

SAMPLE

PART F

GENERAL 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 or unexpired risk premium 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, Kirol 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. Nomination
Nomination should be in accordance with the provisions of Section 39 of the Insurance Act, 1938 as amended from time to time. [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].
d. Assignment

Assignment should be in accordance with the provisions of Section 38 of the Insurance Act, 1938 as amended from time to time.

[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].

e. Validity/ Non Disclosure:

(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.

(ii) Misstatement of Age

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.

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).

(iii) Section 41:

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.

(iv) Section 45:

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.

[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].

f. Currency, Governing Law & Jurisdiction

(i) The Premiums and benefits payable under the Policy shall be payable in India and in Indian Rupees.

(ii) 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.

g. Taxation

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.

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.

The amount of tax paid shall not be considered for the calculation of benefits payable under the plan.

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.

h. Duplicate Policy Document

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 (fees 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.

i. Intimations and Notices

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.

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.

You would need to intimate us of any change in your address to enable us to provide important information pertaining to your Policy.

j. Entire Contract

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.

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 made or circulars / guidelines issued by IRDAI.

k. Mode of Communication

The Company and the Policyholder may exchange communications pertaining to this Policy either through normal correspondence or through electronic mail and the Company shall be within its right to seek clarifications / to carry out the mandates of the Policyholder on merits in accordance with such communications.

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.

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, Kiro 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: <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 Policyholder's Protection and Grievance Redressal Department 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 under Insurance Regulatory and Development Authority of India Act, 1999;
- b. any partial or total repudiation of claims by the Company;

- c. disputes over Premium paid or payable in terms of insurance Policy;
- d. misrepresentation of Policy terms and conditions at any time in the Policy Document or Policy contract;
- e. legal construction of insurance policies in so far as the dispute relates to claim;
- f. Policy servicing related grievances against the Company and their agents and intermediaries;
- g. issuance of life insurance Policy including health insurance Policy which is not in conformity with the Proposal Form submitted by the Proposer;
- h. non-issuance of insurance Policy after receipt of Premium in life insurance including health insurance; and
- i. 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>
<p>Office of the Insurance Ombudsman, Gr. Floor, Jeevan Nidhi - II, Bhawani Singh Marg, <u>JAIPUR – 302005.</u> Tel: 0141-2740363</p>	<p>Office of the Insurance Ombudsman, 3rd Floor, Jeevan Darshan, C.T.S. Nos. 195 to 198, N.C. Kelkar Road, Narayan Peth <u>PUNE - 411030.</u> Tel: 020- 24471175</p>

Email: bimalokpal.jaipur@cioins.co.in	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, 1 st Phase, BENGALURU-560078. 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 NOIDA – 201301. Tel: 0120- 2514252 / 2514253 Email: bimalokpal.noida@cioins.co.in
Office of the Insurance Ombudsman, 2nd Floor, Lalit Bhawan, Bailey Road, PATNA - 800 001, Tel No: 0612- 2547068 Email id : bimalokpal.patna@ecoi.co.in	Office of the Insurance Ombudsman, 2nd Floor, Jeevan Chintamani Building, Vasantrya Naik Mahamarg, THANE WEST- 400604 Tel.: 022-20812868/69 Email: io.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 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.
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 thereof 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 PolicySuch 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 mis-statement and not on fraud, the Premium collected on policy till the date of repudiation shall be paid to the insured or legal representative or Nominee or assignees of insured, within a period of 90 days from the date of repudiation.

8. Fact shall not be considered material unless it has a direct bearing on the risk undertaken by the insurer. The onus is on insurer to show that if the insurer had been aware of the said fact, no life insurance policy would have been issued to the insured.

9. The insurer can call for proof of Age at any time if he is entitled to do so and no policy shall be deemed to be called in question merely because the terms of the policy are adjusted on subsequent proof of Age of Life Insured. So, this Section will not be applicable for questioning Age or adjustment based on proof of Age submitted subsequently.

[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.]

SAMPLE