



**Bandhan Life**  
Linked  
**Enhanced Accidental  
Death Benefit Rider**

A Linked Non-Participating Individual Life Insurance Pure Risk Rider | UIN: 138A031V01

**Bharat Ki Udaan, Bandhan Se.**

## Policy Summary

Policyholder's Name	<< First Name Last Name >>
Product Name	<< product name >>
Rider Name	Bandhan Life Linked Enhanced Accidental Death Benefit Rider   UIN: 138A031V01
Rider Variant	<<Classic/Premium>>
Rider Sum Assured	<< >>
Rider Premium First Year	<< >>
Rider Premium Second Year onwards	<< >>

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#### **Want To Initiate A Claim?**

**Step 1: Inform:** Just give us a call on 1800-209-0909 and we will explain the process

**Step 2: Verification:** Submit the required documents for verification

**Step 3: That's All:** We will do the rest of the work and the claim amount will be transferred to the nominee. Simple!

#### **Quick Actions:**

**Enable Auto – Debit**

**Get Receipts**

**Get Tax Certificate**

**Get More Coverage**

**Pay Premium**

## Part A

### **Bandhan Life Insurance Limited**

Bandhan Life Linked Enhanced Accidental Death Benefit Rider  
**A Linked Non-Participating Individual Life Insurance Pure Risk Rider**  
UIN: 138A031V01

Dear <<policyholder>>,

<<Address of the Policyholder>>

We thank You for including our Rider in Your financial planning. We are delighted to present Your Policy Document which represents Your contract with Bandhan Life Insurance Limited (formerly Aegon Life). These are original and important documents.

We also enclose a copy of your proposal form, other declarations and Customer Information Sheet where Your Policy details are mentioned in a nutshell. In case You are not satisfied with any of the terms and conditions of the Rider or otherwise and have not made any claim, You may request the Company for the cancellation of the Rider within 30 days from date of receipt of Policy document, whether received electronically or otherwise.

Upon such cancellation, We will return the premium paid under the Rider (including taxes) subject to the deduction of proportionate risk premium (including taxes) for the period of cover, stamp duty paid and medical costs incurred (if any).

On cancellation of the Base Plan, the Rider will also stand cancelled.

And of course, should You need any assistance feel free to contact us on 1800 209 9090 or email us at [customer.care@bandhanlife.com](mailto:customer.care@bandhanlife.com). You can find us at, Bandhan Life Insurance Limited (Formerly Aegon Life Insurance Company Limited), A-201, 2nd Floor, Leela Business Park, Andheri-Kurla Road, Andheri (East), Mumbai – 400 059.

Once again, welcome to Bandhan Life.

Warm regards

Authorized Signatory

#### **Your Relationship Manager / Intermediary Contact Details**

Name	
Code	
Mobile / Landline Number	

## Policy Preamble

### Policy Number:

### Life Assured:

Bandhan Life Insurance Limited has entered into this contract of insurance on the basis of the Proposal Form together with the Premium deposit, statements, report or other documents and declarations received from the Proposer for effecting a Rider contract on the life of the person named in the Schedule hereto.

The Company agrees to pay the benefits under this Rider on the happening of the insured event, while this Rider is in force, subject to the Terms and Conditions stated herein below and endorsements if any.

On examination of this Policy, if You notice any mistake or error, this Policy should be returned to Us for rectifying the same.

## Policy Schedule

Name of the Plan: Bandhan Life Linked Enhanced Accidental Death Benefit Rider  
 A Linked Non-Participating Individual Life Insurance Pure Risk Rider  
 (UIN – 138A031V01)

The Policy is evidence of contract of Insurance between Bandhan Life Insurance Limited (“The Company”) and the Policyholder (“You”). The Policy is based on the proposal made by You to the Company along with necessary documents, information, statements, medical examination reports, if any, and declarations made by You or obtained by the Company on your behalf, and are governed by the Terms and Conditions and the Schedule hereunder written which forms part of the Contract of insurance

<b>Policy No</b>	
<b>Date of Inception of Rider</b>	
<b>Date of Commencement of Risk</b>	
<b>Name of the Policyholder</b>	
<b>Gender of the Policyholder</b>	
<b>Address of the Policyholder</b>	
<b>Name of the Life Assured</b>	
<b>Gender of the Life Assured</b>	
<b>Address of the Life Assured</b>	
<b>Date of Birth of Life Assured</b>	
<b>Whether Age Admitted</b>	<Yes/No>

## Rider Particulars

<b>Parameter</b>	<b>Bandhan Life AD Rider</b>
<b>Parameter</b>	Bandhan Life Linked Enhanced Accidental Death Benefit Rider
<b>Sum Assured (₹)</b>	
<b>Annualized Rider Premium (₹)</b>	
<b>Rider Premium for 1st Year (₹)</b>	
<b>Rider Premium from 2<sup>nd</sup> Year Onwards (₹)</b>	
<b>Rider Term (years)</b>	

<b>Rider Premium Payment Term (years)</b>	
<b>Rider Premium Payment Frequency</b>	
<b>Premium Due Date</b>	
<b>Date of last Rider Premium Payment</b>	
<b>Date of Maturity</b>	
<b>Rider Variant</b>	<<Classic/Premium>>

Authorized Signatory

Name

Designation

Endorsement of Stamp Duty payment:

Indication as to Digital Signature on the Document

## Part B

### Definitions of Legal/ Technical Terms

#### Policy Definitions

The words and phrases defined below shall have the meanings assigned to them in this Policy unless the context otherwise requires. Words implying masculine include the feminine, and vice versa. Words in singular include the plural and vice versa.

<<**Act** means the Insurance Act, 1938 as amended from time to time.>>

**Accident** is a sudden, unforeseen and involuntary event caused by external, visible and violent means.

**Accidental Death** means a death due to an Accident, and such an Accident shall within 180 (one hundred and eighty) days of its occurrence, solely, directly and independently of any other cause, result in the Rider Life Assured's death.

**Age** means age of the Life Assured as on the last birthday unless specifically otherwise provided.

**Age at Entry** means Age of the Life Assured as of Date of Inception of Rider.

**Annualized Rider Premium** shall be the Premium amount payable in a year, excluding taxes, underwriting extra premiums and loadings for modal premiums.

**Appointee** is the person who has the right to give a valid discharge to the insurer of the Policy monies in case of the death of the Policyholder before the Maturity of the Policy while the Nominee is a Minor.

**Assignee** is the person to whom the rights and benefits under the Policy are transferred by way of an Assignment.

<<**Assignment** means that the rights and benefits under the Policy are transferred to an Assignee and would be applicable as per the provisions under Section 38 of the Insurance Act, 1938, as amended from time to time.>>

**Base Policy** is the Base Plan to which the Rider is attached.

**Claimant** means the Nominee / Appointee (if Nominee is a minor)/ Assignee; and where there is no assignment or nomination in existence, the legal heir/s of the Policyholder.

**Company, We, Us, Our** means Bandhan Life Insurance Limited or its successors.

**Date of Commencement of Rider** is the start date of the Rider.

**Date of Commencement of Risk** is the date from which the insurance cover under the Rider commences.

**Date of Maturity** means the date on which the Rider Terminates and is mentioned in the Policy Schedule.

**Due Date** means the date on which the Rider Premium is due and payable as per the Premium Payment Frequency opted by You.

**Free-look Period** is the period during which the Policyholder has the option to return the Policy Document of Rider and cancel the contract

**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 fifteen days, where the policyholder pays the premium on a monthly basis and 30 days in all other cases.

**In-force** A Policy is said to be in-force if all due premiums have been paid on or before the due date or the Policy is in Grace Period.

**Injury** Accidental physical bodily harm excluding illness or disease and directly caused by external, violent, visible and evident means which is verified and certified by a Medical Practitioner.

<<IRDAI/ Authority means the Insurance Regulatory and Development Authority of India.>>

**Lapsed Rider** is a Rider where the due Premium is not received till the expiry of the Grace Period and at least one full year's premiums have not been paid.

**Lapse means a condition wherein the due premiums have not been paid in full, as required under the Rider, thereby rendering this Rider unenforceable.**

**Life Assured** is the person named in Policy Schedule/ Customer Information Sheet on whose life the Policy is affected.

**Limited Pay Rider** is any Rider where the Premium Payment Term is less than Policy Term.

**Proposal Form** is the application form submitted to the Company for purchasing the base Policy.

**Policy Anniversary** is the annual anniversary of the Date of Inception of Policy.

**Policy Year** is measured from the Date of Inception of the Policy and is a period of 12 calendar months.

**Revival** 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. Rider cannot be revived independently and can only be revived along with the revival of the base policy. A lapsed Rider can be revived subject to the revival conditions applicable to the base Policy.

**Revival Period** means the period of five consecutive complete years from the date of first unpaid

premium and before the end of the Policy term, during which period You are entitled to revive the Policy, which was discontinued due to non-payment of premium.

**Regular Pay Rider** is a Rider where the Premiums are payable till the last year of Rider Policy Term or Date of Death of Life Assured whichever is earlier.

**Rider** means the insurance cover(s) added to a base product for additional premium or charge.

**Rider Premium** is the amount payable by You to avail the Benefits under this Rider. This amount depends on the Sum Assured, Policy Term, Rider Variant, Premium Payment Term, Premium Payment Frequency selected by You and includes applicable Goods & Service Tax which may change depending upon the prevailing tax rules.

**Rider Premium Payment Frequency** is the period as specified in the Policy Schedule, between two consecutive premium due dates for the Rider.

**Rider Premium Payment Term** means the period during which the Rider Premium is payable. If the Rider is purchased at the time of purchase of the Base Policy, the Rider Premium Payment Term will be same as the Premium Payment Term under the Base Policy Rider Premium Payment term shall not be more than the outstanding Premium Payment term of the base plan if rider is taken after policy inception.

**Rider Sum Assured** means the amount of insurance cover opted by You at the time of the purchase of the Rider and is specified in the Policy schedule.

**Rider Term** is the period for which this Rider cover is granted as per the rules of the Company. If the Rider is purchased at the time of purchase of the Base Policy, the Rider Policy Term shall not be more than the outstanding Policy Term under the Base Policy.

**Single Pay Rider** is a Rider where the Premium is payable once in Lump-sum on the date of Inception of Rider.

**Surrender Value** is the amount of benefit payable to the Policyholder on Surrender of the Rider in accordance with the Terms & Conditions of the Policy. , if any.

**Total Rider Premiums Paid** means total of all the premiums paid under the Rider, excluding any extra premiums, and taxes if collected explicitly.

<<**Taxes** means all applicable statutory (direct and indirect) taxes as may be levied by the government from time to time which may change depending upon the prevailing tax rules. Goods & Service Tax is one such example of indirect tax.>>

<<**UIN** means the Unique Identification Number of this product that is allotted by IRDAI.>>

**Unexpired Risk Premium Value** means the amount of benefit payable to the Policyholder in accordance to Clause D.2

You, Your & Policyholder means or refers to the person specified in the Rider Schedule.

## Part C

### Benefits and related Clauses

This is an add-on benefit which is in addition to the benefits under the Base Policy and this Rider is only granted along with the Base Policy and benefits shall be subject to continuation of the Base Policy along with this Rider.

All the payments under the Rider will be made in Indian rupees and will be subject to prevailing tax laws.

#### C.1 Death Benefit

If the Life Assured dies due to an Accident during the Rider Term, We will pay to the Claimant an amount equal to the Sum Assured under this Rider, as mentioned in the Policy Schedule. This amount will be in addition to the death benefit under the Base Policy. The Rider benefit is available only when, both the Rider as well as the Base Policy to which it is attached, are in-force.

There are two variants in this rider to be chosen at inception:

##### Option 1: Classic Variant:

This variant provides accidental death benefit equal to the rider Sum Assured chosen.

At the time of purchase, you can choose rider Sum Assured (i.e. Accidental Death Benefit Sum Assured) up to 3 times of the Base policy Sum Assured (i.e. up to 3x times the Sum Assured of Base Policy to which it is attached), subject to the maximum Rider Sum Assured.

On accidental death, 100% of the rider Sum Assured shall be paid as the death benefit.

##### Option 2: Premium:

This variant shall provide double/triple death benefit on death due to specific conditions.

At the time of purchase, you can choose the Accidental Death Rider Sum Assured only up to 100% of the Base Sum Assured (i.e. 1x times the Sum Assured of Base Policy) at policy inception.

On accidental death due to any of the specific conditions listed below, enhanced death benefit shall be provided.

Conditions applicable for enhanced benefit under Premium Variant -

#### 1. On Accidental Death due to the following Accidents, double the Rider Sum Assured will be payable and the rider terminates:

- a. Accidental Death due to Train Accidents: 200% of Rider Sum Assured on Accidental Death due to Train Accident will be payable only if you are travelling as a bona fide fare-paying passenger on a reserved ticket in any passenger carrying train of Indian Railways. The passenger's name must be there in the Reserved Ticket List/Chart prepared by Indian Railways. Train Accident, herein, means an "accident" of the nature described in Section 124 of Indian Railways Act, 1989.
- b. Accidental Death due to stampede or fire at large public places or public religious gatherings: 200% of Rider Sum Assured on Accidental Death due to stampede or fire at large public places or public religious gatherings will be payable subject to the below conditions:

- i. Public Places will be limited only to hospitals, malls/shopping complexes, cinema halls, multiplexes, bus stations, railway stations, airports, sports complex/stadiums.
- ii. The Public Place must be in India and must have been authorized by appropriate government authority for public use.
- iii. The Public Place must have a valid license for public use at the time of the event.
- iv. Public Religious gathering must have valid permission from appropriate government authority.
- v. Public Religious gathering must be conducted/supervised by appropriate government department/authority.
- vi. Any kind of private/personal religious gathering is excluded.
- vii. The occurrence of the event (Stampede or Fire) must be recognized and acknowledged by the appropriate government department/authority.
- viii. The insured's name must be in the deceased persons' list published by the appropriate government department/authority following a stampede or fire at large public places or public religious gatherings.

**2. On Accidental Death due to the Airplane Accidents, triple the Rider Sum Assured will be payable and the rider terminates.**

300% of Rider Sum Assured on Accidental Death due to Plane Accident will be payable only if you are travelling as a bona fide fare-paying passenger of a recognized commercial airline flying on regular routes and on a scheduled timetable. Apart from Airplane, any other types of aircraft such as helicopters, gliders, hot air ballons, drones etc. are excluded.

Else if death occurs due to accident other than any of these specific conditions given above, 100% of the rider Sum Assured shall be paid as death benefit.

The death must occur within 180 days of the accident in question. The claim due to Accidental death, where death happens within 180 days of occurrence of the accident but beyond the Rider term, will be honored. The Rider will terminate on payment of this benefit.

## C.2 Maturity Benefit

The Rider does not provide any Maturity Benefit.

## C.3 Payment Of Rider Premium

1. During the Premium Payment Term, the Premium is payable to Us by the due date specified in the Schedule. If the Premium is not paid by the due date, You have an option to pay it during the Grace Period. During the Grace Period the Policy will continue to be in-force.
2. The Premium can be paid as per the premium payment frequency opted by You. It can be annual, semi-annual, quarterly or monthly. You have an option to change the premium payment frequency during the premium payment term. The modal factor applicable to the Premium Payment frequencies other than Annual will be as under:
  - a. Half-Yearly Premium = Annualized Premium x 0.512
  - b. Quarterly Premium = Annualized Premium x 0.259
  - c. Monthly Premium = Annualized Premium x 0.087
3. You may pay the Premium through Our Customer portal [assist.bandhanlife.com](http://assist.bandhanlife.com) or at any of Our Service Centre or by any other means as informed by Us from time to time. Any Premium paid by You will be deemed to have been received by Us only after the same has been realized and credited to Our bank account.

4. The Premium payment receipt shall be issued in Your name and shall be subject to realization of Premium.
5. The Company can charge transaction fee from the policyholders who are paying Premiums through credit cards or such other instrument for which the Company is required to pay the transaction fee.
6. You may make advance payment of Premium falling within the same financial year and for a maximum period of 3 months in advance in case of Due Dates is falling in the next financial year. The advance Premium so collected shall only be adjusted on the Due Date of the Premium.

## **C.4 Grace Period**

The Grace Period applicable to this Rider will be same as applicable to the Base Policy. If any premium remains unpaid after the expiry of the Grace Period, the rider will lapse and the cover will cease to exist.

If the Life Assured dies due to accident during the Grace Period, the unpaid due Premiums (if any), as on the date of occurrence will be deducted from the Benefit payout.

## **C.5 Change In Rider Sum Assured**

- In case there is a reduction in the Sum Assured under the base policy, then the existing Rider Sum Assured can continue without any change, provided the Rider Sum Assured remains within the rider limits.
- If the original rider Sum Assured does not remain compliant with the rider limits due to change in base Sum Assured, then you shall be mandated to update the rider Sum Assured as per the rider limits allowed.
- If the original rider Sum Assured remains compliant with the rider limits, it will be optional for you to increase or decrease Rider Sum Assured due to revision of Base Sum Assured, subject to the rider limits.

## Part D

### Policy Servicing Aspects

#### D.1 Free Look Cancellation

In case if you are not satisfied with any of the terms and conditions of the Rider or otherwise and has not made any claim, you may request the Company for the cancellation of the Rider within 30 days from date of receipt of Policy document, whether received electronically or otherwise.

On cancellation of the rider policy within the above-mentioned free-look period, the Company shall refund the premiums paid after deducting the proportionate risk premium for the period of cover, and the expenses incurred by the Company for medical examination (if any) and stamp duty (if any).

The Rider will terminate on payment of this amount and all rights, benefits and interests under this Policy will stand extinguished.

The Rider can be cancelled in the free-look period even if the base policy to which it is attached is continued. The Rider shall automatically be cancelled if the Base Policy to which it is attached is cancelled.

Freelook clause will be as mentioned in the base Policy but will be applicable from the Date of Commencement of Rider, if different from the Date of Commencement of Risk (of the base Policy).

A Rider once cancelled shall not be revived, reinstated or restored at any point of time and a new proposal will have to be made for a new rider.

In the event of any variation in the Free Look Period clause of the rider/s, the provisions of base plan shall prevail.

#### D.2 Premium Discontinuance

##### D.2.1 In case You Have Opted For Regular Pay Rider

If you discontinue payment of premiums, then the policy will immediately & automatically, lapse at the expiry of the grace period. In case of a lapsed policy, no benefit shall be payable and the rider cover will cease to exist.

##### D.2.2 In case You have Opted for Limited Pay Rider

If any premium remains unpaid after the expiry of the grace period, the policy shall lapse and the cover will cease to exist.

However, in case you have paid premiums for at least 1 full year then the Unexpired Risk Premium Value (if any) shall be payable under such policies in case of the following circumstances:

- You voluntarily terminate the rider anytime after the first policy year; or
- The Life Assured survives to the end of the revival period for a lapsed policy.

### **D.2.3 In case You Have Opted For Single Pay Rider**

The rider will acquire Unexpired Risk Premium Value immediately after the premium payment.

The Unexpired Risk Premium Value (URPV) is computed as:

$$\text{URPV} = \text{URPV Factor} * \text{Total Premiums Paid} * \text{Outstanding rider coverage term (in months)} / \text{Total rider coverage term (in months)}$$

Where URPV factor will be as follows:

1. Single Pay: 50%
2. Limited Pay:
  - a. 1 full year premium is paid: 30%
  - b. At least 2 full year premiums are paid: 50%

The Policy will terminate on payment of the above benefit.

Total Premiums Paid\*: shall include discounts (if any), UW extra premiums, and loadings for modal premiums.

### **D.3 Revival of Lapsed Rider**

If the policy has lapsed, it may be revived subject to the IRDAI (Insurance Products) Regulations, 2024 as amended from time to time.

Rider cannot be revived independently and can only be revived along with the revival of the base policy. A lapsed Rider can be revived subject to the revival conditions applicable to the base Policy.

On payment of due premiums, the rider will automatically be renewed with base policy.

If the rider is not revived along with the base plan, revival of rider will not be allowed at a later stage.

### **D.4 Addition of Rider**

If a rider has been attached, the outstanding base policy term and the rider policy term should not be less than 5 years.

This rider can be chosen at inception of base policy or attached anytime to a base plan during the premium payment term of the base plan. A proportionate premium would be collected if the Rider is attached anytime other than a premium due date of the Base Plan. Addition of the Rider will be subject to underwriting requirements and rider eligibility criteria.

### **Detachment of Rider**

The rider can be detached from the next premium due date after the request has been made.

Rider can be excluded any time during the rider premium payment term. In case of exclusion, the rider benefit will immediately cease and no further rider premium will be collected.

### **D.5 Surrender Benefit**

There shall be no surrender benefit under this rider.

### **D.6 Loan**

Loan is not available under the policy.

### **D.7 Policy Alteration**

This will be as per the base plan.

## Part E

### Charges and Fund Details

## Part F

### F.1 Assignment & Nomination

- Assignment shall be as per Section 38 of the Insurance Act, 1938 as amended from time to time.
- Nomination shall be as per Section 39 of the Insurance Act, 1938 as amended from time to time.

### F.2 Fraud Or Misrepresentation

Fraud, Misrepresentation and forfeiture would be dealt with in accordance with provisions of Sec 45 of the Insurance Act 1938 as amended from time to time.

(A simplified version of the provisions of Section 45 is enclosed in Annexure for reference).

### F.3 Misstatement Of Age Or Gender

As per the clause F.2, if the age or gender of the Life Assured has been misstated or incorrectly mentioned, then We may at Our sole discretion take the following action subject to the underwriting norms prevailing at the time of taking such action:

If at the correct age, the Life Assured was not insurable under this Rider according to Our requirements, we reserve the right to refund the Rider Premium paid and terminate the Rider.

If at the correct age, the Life Assured was insurable, then we may revise the Rider Premium and/or applicable benefits payable under the Rider from the Date of Commencement of Risk by adjusting or deducting the differential Rider Premium that would have been payable.

### F.4 Suicide Exclusion

In case of death due to suicide anytime during the policy term, no benefit shall be payable to the policyholder.

The Suicide Claim provision will only be applicable to the death benefit under the Base Plan as suicide related deaths are part of exclusions under this Rider.

### F.5 Exclusions

The accidental death benefit will not be payable in the following situations:

1. Death occurs as a result of participation by the insured person in a criminal or unlawful act
2. Death occurs as a consequence of the insured person being under the influence of alcohol, drugs, narcotics or psychotropic substances unless taken in accordance with the lawful directions and prescription of a qualified & registered medical practitioner.
3. Death occurs as a result of self-inflicted injuries or attempted suicide; while sane or insane
4. Death occurs as a result of taking part in any naval, military or air force operation during peace time or during service in any police, paramilitary or any similar organisation.
5. Death occurs as a result of the person engaging in or taking part in professional sport(s) or any hazardous pursuits, including but not limited to any kind of race; diving or underwater activities involving the use of breathing apparatus or not; martial arts; hunting; mountaineering; parachuting; bungee-jumping etc.

6. Death occurs as a result of participation by the insured person in any flying activity, except as a bona fide fare-paying passenger of a recognized airline flying on regular routes and on a scheduled timetable.
7. Death occurs as a result of war, invasion, act of foreign enemy, hostilities (whether war be declared or not), armed or unarmed truce, civil war, mutiny, rebellion, revolution, insurrection, military or usurped power, riot or civil commotion, strikes.
8. Death occurs as a result of nuclear or radio-active contamination.

## F.6 Payment of Accidental Death Claim

We will require the following primary documents in support of an Accidental Death claim to enable processing of the claim intimation under the Rider. All benefits will be paid to the Claimant.

Benefits Claimed	Requirements
Death	<ol style="list-style-type: none"> <li>1. Claimant statement form.</li> <li>2. Copy of death certificate issued by municipal corporation under section 12/17.</li> <li>3. KYC documents of claimant (Mandatory)               <ol style="list-style-type: none"> <li>a. PAN or Form No. 60 (Mandatory)</li> <li>b. Copy of any one of the following (Identity &amp; address proof of claimant)                   <ol style="list-style-type: none"> <li>i. Proof of possession of Aadhaar number in such form as are issued by the Unique Identification Authority of India (means 'Aadhaar Card')</li> <li>ii. Passport (unexpired),</li> <li>iii. Driving License (unexpired),</li> <li>iv. Voter's Identity Card,</li> <li>v. Job card issued by NREGA duly signed by an officer of the State Government.</li> </ol> </li> <li>c. One recent photograph of the claimant.</li> </ol> </li> <li>4. Copy of self-attested cancelled cheque / Passbook copy of the claimant.</li> <li>5. Relationship proof (wherever applicable).</li> <li>6. Copy of First Information Report (FIR) (Mandatory)</li> <li>7. Copy of Post Mortem Report (Mandatory)</li> <li>8. Inquest report</li> <li>9. Panchnama</li> <li>10. Newspaper clipping</li> <li>11. Copy of Driving Licence of Insured (if Life Assured was driving a vehicle)</li> <li>12. Final Police Investigation Report</li> </ol>
In addition to the above-mentioned documents, we may ask for the following documents:	
Sudden Death/Death due to illness	<ol style="list-style-type: none"> <li>1. Cause of death certificate issued by the treating doctor.</li> <li>2. Medical records for all the treatments taken in past (Admission notes, discharge summary, test reports, consultation papers etc.)</li> </ol>

	<ol style="list-style-type: none"> <li>3. Copy of medical records at the time of death (Admission notes, discharge/ death summary, test reports, etc.)</li> <li>4. Bandhan Life Insurance Limited's attending physician statement for death claim</li> <li>5. Bandhan Life Insurance Limited's Hospital treatment statement for death claim</li> </ol>
Death due to Accident / Murder	<ol style="list-style-type: none"> <li>1. Copy of First Information Report (FIR)</li> <li>2. Copy of Post-Mortem Report</li> <li>3. Inquest report</li> <li>4. Police Panchnama</li> <li>5. Newspaper clipping (if available)</li> <li>6. Police Final Report</li> <li>7. Viscera Report / Chemical Analysis Report (if required)</li> </ol>

Please note that our Claims dept may call for further requirements wherever necessary.

Filing Proof of Claim – Unless otherwise specified, duly filled in requisite forms along with necessary documents as stated above shall be furnished to Us, at the claimant's expenses, within 90 days from the date of death of Life Assured. However, submission of such documents, forms or other proof shall not be construed as an admission of liabilities by the Company and we reserve right to request additional proof and/or documents in support.

We are entitled to ask for additional documents (including Policy document of Rider) or information for the processing of the claim ,in particular under circumstances where there is a delay in intimation of claim beyond 90 days from the Date of Death of the Life Assured. We may also seek professional/independent assistance for speedy disposal of the claim. You and/or the Nominee/legal heir/s shall have no objection for Us to obtain any details/information to form an opinion about the claim. The Claimant is required to intimate us on the Claim by submitting the requisite documents within 90 days of the occurrence of event. However, claims filed even beyond this period would be considered if there are valid reason for the delay. In case of delay in payments by Us, penal interest as specified in the relevant sections/clauses of the IRDAI (Protection of Policyholders' Interests, Operations and Allied Matters of Insurers) Regulations, 2024 and Master Circular issued thereunder will be paid.

## **F.7 Force Majeure**

If due to any act of God or State, strike, lock out, legislation or restriction by any government or any other authority or any other circumstances which are beyond our control, which restricts performance of our obligations of the Company, the performance of this Contract will be wholly or partially suspended during the continuance of such force majeure conditions with prior approval of the appropriate Authority.

## **F.8 Electronic Transactions**

You shall adhere to and comply with all such terms and conditions as, We may prescribe from time to time. Any transactions carried out by or through any electronic facilities or means established by or on behalf of Us, in respect of the Policy, shall constitute legally binding and valid transactions on You.

## **F.9 Taxation**

The tax benefits and benefits payable under the Policy would be as per the prevailing provisions of the tax laws in India. Tax benefits are subject to changes in tax laws. You are requested to consult Your tax consultant and obtain independent advice for eligibility and before claiming any benefit under the policy.

We reserve the right to recover statutory levies << including Goods and Services Tax (plus any applicable cess) >> by way of adjustment to the Premiums payable or make necessary recoveries from the benefits payable under the Policy.

## **F.10 Travel, Residence And Occupation**

This Policy does not impose any restrictions as to travel, residence or occupation except for Exclusions mentioned under clause F.5

## **F.11 Rider Termination**

The Rider will terminate on the earliest of the following:

- The Date of Maturity of the Rider as stated in the Policy Schedule, if the Life Assured survives till the Date of Maturity;
- On payment of Rider Sum Assured as may be applicable;
- The next premium Due Date following the receipt of a request to Us of discontinuance of the Rider under Clause D.2;
- On Surrender of the Rider as mentioned in Clause D.5;
- On payment of amount pursuant to the exercise of Free-Look Cancellation as mentioned in Clause D.1 or
- The Date on which the Base Policy is Terminated

All the rights, benefits and interests under this Rider will stand extinguished upon termination.

## **F.12 Applicable Law**

This Policy is subject to the provisions of the laws of India.

## **F.13 Currency And Payment**

All payments to or by the Company will be in Indian rupees and shall be in accordance with the prevailing regulations and other relevant laws of India.

## **F.14 Issuance of duplicate Policy**

You can apply for a duplicate Policy document along with relevant documents. Additional charges not exceeding Rs. 200/- may be applicable for issuance of the duplicate Policy.

## Part G

### Grievance Redressal Procedure

#### G.1 Notices

Any notice, direction or instruction given to Us under the Policy shall be through any of the following modes:

Write to Your **Customer Service Department**

Bandhan Life Insurance Limited, A - 201, 2nd Floor, Leela Business Park, Andheri-Kurla Road, Andheri (E), Mumbai - 400059.

Call on Toll free number: 1800 209 9090

From Your registered Email ID to: **customer.care@bandhanlife.com** or such other address as may be informed by Us.

You may also log in to our online customer portal: iAssist

Any notice, direction or instruction to be given by Us under the Policy shall be in writing and delivered via message to your registered contact number or to the registered electronic mail id updated in the records of the Company or by making general announcement in a national newspaper in English.

You are requested to communicate any change in address immediately to enable us to serve You promptly.

#### G.2 Grievance Redressal Mechanism

You can register complaint with any of the following touch points:

- Website: You can register the complaint via the complaints form available on our website - **[www.bandhanlife.com](http://www.bandhanlife.com)**.
- Customer Portal: Customer can register a complaint via our customer portal **[iassist.bandhanlife.com/login/](http://iassist.bandhanlife.com/login/)**.
- Emails: You can write to us on **customer.care@bandhanlife.com** from the registered e-mail ID.
- Contact Centre: You can call us on 1800 209 9090 from 9.00 am to 7.00 pm, Monday to Saturday excluding public holidays.
- Letters: You can write to Us via letter at the nearest policyholder Service centre or the Head Office. The addresses are available on our company website. You are requested to visit our website [www.bandhanlife.com](http://www.bandhanlife.com) for updated contact details/service centre address.

#### Escalation Matrix

The Company shall consider and appropriately respond to the complaint even if the complaint is received directly or at any of these escalation levels. You can directly approach the Grievance Redressal Officer (GRO) of the Company as per the details mentioned. This is irrespective of the complaint not being made to or being active at any of the mentioned stages.

- All the complaint is responded from the Grievance Manager email address. In case You do not get any response within 14 days You can write to **[grievance.manager@bandhanlife.com](mailto:grievance.manager@bandhanlife.com)**

- If You fail to get a response within 2 weeks or You are not satisfied with the response provided with regards to the complaint, You can also escalate the matter to the Grievance Redressal Officer: A - 201, 2nd Floor, Leela Business Park, Andheri-Kurla Road, Andheri (E), Mumbai - 400059. Email id - [gro@bandhanlife.com](mailto:gro@bandhanlife.com)

The response will be sent within 7 working days of receipt of the grievance.

- In case the grievance is not resolved or is partially resolved in favour of the complainant, the complainant also has the option to take up the matter before insurance ombudsman. The name, address and contact numbers of ombudsman of competent jurisdiction are readily available on the company's website [www.bandhanlife.com](http://www.bandhanlife.com). You can also approach the ombudsman, once the stipulated period of 30 days from the date of filing the complaint with the insurer is over, irrespective of the complaint lying in different stages of the grievance redressal process.
- If You are still not satisfied with the resolution provided, You have an option to raise a complaint on the Bima Bharosa portal: [bimabharosa.irdai.gov.in/](http://bimabharosa.irdai.gov.in/).

A complaint will be considered closed and disposed when:

- The Company has accepted the request of the complainant fully OR
- Where the complainant has indicated in writing, acceptance of the response of the Company OR
- The complaint of the complainant is rejected OR
- Where the complainant has not responded to the insurer within 8 weeks of the insurer's written response.

### G.3 Grievance Redressal Mechanism Of IRDAI

In case you are not satisfied with the response or does not receive a response from the Company within 15 days, then the customer may approach the Grievance Cell of the IRDAI through any of the following modes:

- Calling Toll Free Number 155255 / 18004254732 (i.e. IRDAI Grievance Call Centre)
- Sending an email to [complaints@irdai.gov.in](mailto:complaints@irdai.gov.in)
- Register the complaint online at Bima Bharosa at [www.igms.irda.gov.in](http://www.igms.irda.gov.in)
- Address for sending the complaint through courier / letter: Policyholder's Protection & Grievance Redressal Department, Insurance Regulatory and Development Authority of India, SurveyNo.115/1, Financial District, Nanakramguda, Gachibowli, Hyderabad-500032, Telangana.

### G.4 Insurance Ombudsman

Where the redressal provided by the Company is not satisfactory despite the escalation above, the complainant may represent the case to the Ombudsman for Redressal of the grievance, if it pertains to the following:

- Delay in settlement of claims, beyond the time specified in the regulations, framed under the Insurance Regulatory and Development Authority of India Act,1999.
- Any partial or total repudiation of claims by the insurer;
- Disputes over premium paid or payable in terms of insurance Policy;
- Misrepresentation of policy terms and conditions;
- Legal construction of insurance policies insofar as the dispute relates to claim;
- Policy servicing related grievances against insurers and their agents and intermediaries;
- Issuance of insurance Policy, which is not in conformity with the proposal form submitted by the Policyholder;

- Non-issuance of insurance Policy after receipt of premium; and
- 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 IRDAI from time to time or the terms and conditions of the Policy contract, in so far as they relate to issues mentioned herein above.

The Ombudsman shall act as a counsellor and mediator to the matters specified above provided there is written consent of the parties to the dispute.

You or Your legal heirs, nominee or assignee can make a complaint in writing to the Insurance Ombudsman within whose territorial jurisdiction the branch or office of the insurer complained against or the residential address or place of residence of the complainant is located. The complaint shall be in writing, duly signed by You or Your legal heirs, nominee or assignee and shall state clearly the name and address of the complainant, the name of the insurer against whom the complaint is made, the facts giving rise to the complaint, supported by documents, the nature and extent of the loss caused to the complainant and the relief sought from the Insurance Ombudsman.

No complaint to the Insurance Ombudsman shall lie unless:

1. The complainant makes a written representation to the insurer named in the complaint and:
  - a. either the insurer had rejected the complaint; or
  - b. the complainant had not received any reply within a period of one month after the insurer received his representation; or
  - c. the complainant is not satisfied with the reply given to him by the insurer;
2. The complaint is made within one year:
  - a. after the order of the insurer rejecting the representation is received; or
  - b. after receipt of decision of the insurer which is not to the satisfaction of the complainant;
  - c. after expiry of a period of one month from the date of sending the written representation to the insurer if the insurer named fails to furnish reply to the complainant.

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 addresses of the Insurance Ombudsmen are given on the last page of this document. You are requested to visit the website of the Company for updated information on contact details of the Company and Insurance Ombudsmen.

## Insurance Ombudsman Centres/ Contact Details

City	Address	Area of Jurisdiction
Ahmedabad	Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor, Tilak Marg, Relief Road, Ahmedabad – 380 001. Tel.: 079 - 25501201/02 Email: <a href="mailto:oiio.ahmedabad@cioins.co.in">oiio.ahmedabad@cioins.co.in</a>	Gujarat, Dadra & Nagar Haveli, Daman and Diu.
Bengaluru	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, Bengaluru – 560 078. Tel.: 080 - 26652048 / 26652049 Email: <a href="mailto:oiio.bengaluru@cioins.co.in">oiio.bengaluru@cioins.co.in</a>	Karnataka
Bhopal	Office of the Insurance Ombudsman, 1st floor, "Jeevan Shikha", 60-B, Hoshangabad Road, Opp. Gayatri Mandir, Arera Hills Bhopal – 462 011. Tel.: 0755 - 2769201 / 2769202 / 2769203 Email: <a href="mailto:oiio.bhopal@cioins.co.in">oiio.bhopal@cioins.co.in</a>	Madhya Pradesh, Chhattisgarh.
Bhubaneswar	Office of the Insurance Ombudsman, 62, Forest park, Bhubaneswar – 751 009. Tel.: 0674 - 2596461/2596455/2596429/2596003. Email: <a href="mailto:oiio.bhubaneswar@cioins.co.in">oiio.bhubaneswar@cioins.co.in</a>	Odisha
Chandigarh	Office of the Insurance Ombudsman, Jeevan Deep Building SCO 20-27, Ground Floor Sector- 17 A, Chandigarh – 160 017. Tel.: 0172-2706468 Email: <a href="mailto:oiio.chandigarh@cioins.co.in">oiio.chandigarh@cioins.co.in</a>	Punjab, Haryana (excluding Gurugram, Faridabad, Sonapat and Bahadurgarh), Himachal Pradesh, Union Territories of Jammu & Kashmir, Ladakh & Chandigarh

Chennai	Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018. Tel.: 044 - 24333668 / 24333678 Email: <a href="mailto:oiio.chennai@cioins.co.in">oiio.chennai@cioins.co.in</a>	Tamil Nadu, Puducherry Town and Karaikal (which are part of Puducherry).
Delhi	Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel.: 011- 46013992/ 23213504/ 23232481 Email: <a href="mailto:oiio.delhi@cioins.co.in">oiio.delhi@cioins.co.in</a>	Delhi & Following Districts of Haryana - Gurugram, Faridabad, Sonapat & Bahadurgarh
Guwahati	Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Near Pan Bazar, S.S. Road, Guwahati – 781001(ASSAM). Tel.: 0361 - 2632204 / 2602205 / 2631307 Email: <a href="mailto:oiio.guwahati@cioins.co.in">oiio.guwahati@cioins.co.in</a>	Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura
Hyderabad	Office of the Insurance Ombudsman 6-2-46, 1st floor, "Moin Court", Lane Opp. Hyundai Showroom, A.C.Guards, Lakdi-Ka-Pool, Hyderabad - 500 004.Tel.: 040 - 23312122 / 23376991 / 23376599 / 23328709 / 23325325 Email: <a href="mailto:oiio.hyderabad@cioins.co.in">oiio.hyderabad@cioins.co.in</a>	Areas of Jurisdiction- Andhra Pradesh, Telangana, Yanam and part of Union Territory of Puducherry
Jaipur	Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141 – 2740363 Email: <a href="mailto:oiio.jaipur@cioins.co.in">oiio.jaipur@cioins.co.in</a>	Rajasthan

Kochi	Office of the Insurance Ombudsman, 10th Floor, Jeevan Prakash, LIC Building, Opp to Maharaja's College Ground, M.G. Road, Kochi - 682 011. Tel.: 0484 – 2358759 Email: <a href="mailto:oiio.ernakulam@cioins.co.in">oiio.ernakulam@cioins.co.in</a>	Kerala, Lakshadweep, Mahe-a part of Union Territory of Puducherry
Kolkata	Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 7th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339/ 22124341 Email: <a href="mailto:oiio.kolkata@cioins.co.in">oiio.kolkata@cioins.co.in</a>	West Bengal, Sikkim, Andaman & Nicobar Islands
Lucknow	Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, Lucknow - 226 001. Tel.: 0522 - 4002082 / 3500613 Email: <a href="mailto:oiio.lucknow@cioins.co.in">oiio.lucknow@cioins.co.in</a>	Districts of Uttar Pradesh - Lalitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar
Mumbai	Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 022 - 69038800/27/29/31/32/33 Email: <a href="mailto:oiio.mumbai@cioins.co.in">oiio.mumbai@cioins.co.in</a>	<b>List of wards</b> under Mumbai Metropolitan Region excluding wards in Mumbai – i.e. M/E, M/W, N , S and T covered under Office of Insurance Ombudsman Thane and areas of Navi Mumbai.

<p>Noida</p>	<p>Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 022 - 69038800/27/29/31/32/33 Email: <a href="mailto:io.mumbai@cioins.co.in">io.mumbai@cioins.co.in</a></p>	<p>State of Uttarakhand and the following Districts of Uttar Pradesh- Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kannauj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautam Buddha nagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur</p>
<p>Patna</p>	<p>Office of the Insurance Ombudsman, 2nd Floor, Lalit Bhawan, Bailey Road, Patna 800 001. Tel.: 0612-2547068 Email: <a href="mailto:io.patna@cioins.co.in">io.patna@cioins.co.in</a></p>	<p>Bihar, Jharkhand</p>
<p>Pune</p>	<p>Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 3rd Floor, C.T.S. Nos. 195 to 198, N.C. Kelkar Road, Pune – 411 030. Tel.: 020-24471175 Email: <a href="mailto:io.pune@cioins.co.in">io.pune@cioins.co.in</a></p>	<p>State of Goa and State of Maharashtra excluding areas of Navi Mumbai, Thane district, Palghar District, Raigad district &amp; Mumbai Metropolitan Region</p>
<p>Thane</p>	<p>Office of the Insurance Ombudsman, 2nd Floor, Jeevan Chintamani Building, Vasanttrao Naik Mahamarg, Thane (West) – 400604 Tel.: 022-20812868/69 Email: <a href="mailto:io.thane@cioins.co.in">io.thane@cioins.co.in</a></p>	<p>Area of Navi Mumbai, Thane District, Raigad District, Palghar District and <b>wards of Mumbai</b>, M/East, M/West, N, S and T."</p>

## Annexure: 1

### Section 38: Assignment And Transfer Of Insurance Policies

Assignment or transfer of a life insurance Policy is as below 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) Act, 2015 shall not be affected by this section.

***[Disclaimer: This is not a comprehensive list as mentioned in Insurance Act, 1938 (as amended from time to time), but only a simplified version prepared for general information. Policy Holders are advised to refer to the Act for complete and accurate details.]***

## Annexure: 2

### Section 39: Nomination

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:

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

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

14. If nominee(s) die after the policyholder but before his share of the amount secured under the policy is paid, the share of the expired nominee(s) shall be payable to the heirs or legal representative of the nominee or holder of succession certificate of such nominee(s).

15. The provisions of sub-section 7 and 8 (13 and 14 above) shall apply to all life insurance policies maturing for payment after the amendment of Insurance Act, 1938 (i.e. 26.12.2014).
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 Section 39 are not applicable to any life insurance policy to which Section 6 of Married Women's Property Act, 1874 applies or has at any time applied except where before or after Insurance Act 1938 (as amended from time to time), 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 not a comprehensive list as mentioned in Insurance Act 1938 (as amended from time to time), but only a simplified version prepared for general information. Policy Holders are advised to refer to the Act for complete and accurate details.]***

## Annexure: 3

### Section 45: Policy Shall Not Be Called In Question On The Ground Of Misstatement 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 Assured. So, this Section will not be applicable for questioning age or adjustment based on proof of age submitted subsequently.

*[Disclaimer: This is not a comprehensive list as mentioned Insurance Act 1938 (as amended from time to time) but, only a simplified version prepared for general information. Policy Holders are advised to refer to the Act for complete and accurate details.]*

## Annexure: 4

Year	URPV Factor/PPT Type	Limited Pay	Single Pay
1	Rider URPV factor after 1 full year premium	30%	50%
2	Rider URPV factor after atleast 2 full year premiums	50%	50%

*[Disclaimer: This is not a comprehensive list as mentioned Insurance Act 1938 (as amended from time to time) but, only a simplified version prepared for general information. Policy Holders are advised to refer to the Act for complete and accurate details.]*