



Citizens Charter

Introduction

About us:

Established in 2008, Bandhan Life (formerly Aegon Life) is your trusted partner in achieving financial security. We are at the forefront of transforming the life insurance industry, striving to bring peace of mind and prosperity to every corner of India. Leveraging cutting-edge technology, we're redefining insurance services to make them more accessible, user-friendly, and in tune with the digital age.

Our Vision:

To empower every Indian household with financial security and well-being.

Core Values:

1. Openness

- We believe in transparent and clear communication, where our policies, services, and processes are open and easy to understand. We encourage you to ask questions and will always provide honest, straightforward answers.
- We are committed to fostering an environment of trust, where information is freely shared, and concerns are addressed without delay.

2. Agility

- We adapt quickly to meet your evolving needs. Whether it's a change in your life circumstances or new developments in the insurance landscape, we are prepared to act swiftly and efficiently.
- Our commitment is to provide you with timely solutions that cater to your dynamic needs, always remaining responsive in a fast-paced world.

3. Collaboration

- We value teamwork and believe in working closely with you, our partners, and the community. By collaborating, we ensure that your experience with Bandhan Life Insurance is seamless, efficient, and centered around your best interests.

- Through open collaboration, we co-create solutions that are personalized, impactful, and aligned with your goals.

4. Accountability

- We take full responsibility for our actions and decisions, ensuring that we deliver on our promises. If something goes wrong, we own it and work diligently to make things right.
- Our commitment to you is reflected in our promise to be accountable, ensuring that we meet our obligations and take ownership of our service quality at every step.

5. Outcome-Focused

- We are dedicated to delivering tangible, positive results for you. Whether it's providing you with the best coverage options or resolving issues promptly, our focus is on outcomes that matter most to you.
- We prioritize your needs and aim to achieve meaningful results that secure your financial future, always keeping your goals at the heart of our efforts.

Service Standard

Our Commitment to Service Excellence:

At Bandhan Life, we are committed to providing exceptional service through transparency, reliability, and efficiency in everything we do. Our goal is to deliver timely and accurate solutions that meet customer needs while striving to exceed expectations. We aim to foster long-term satisfaction and ensure that every interaction reflects our dedication to your well-being and peace of mind.

Policy Servicing Standard:

We are responsible for managing a variety of administrative and customer service activities against your insurance policy. Acting as the vital link between the company and policyholders, our team ensures smooth handling of your policy from issuance to maturity.

Policy Servicing Department is devoted to delivering exceptional customer service by meeting policyholders' needs at every stage, building a strong relationship based on trust and transparency, also by always having the right set of technology solutions in place.

Claim Settlement Standard:

We are proud to have one of the highest claim settlement ratios in the industry. Your trust is our top priority, always. We ensure that your claims are handled with the highest level of integrity and care. Our claims process is designed to be:

- Efficient
- Transparent
- Hassle-free

We keep policyholders and beneficiaries informed at every stage and offer multiple communication channels, including branch, call centers, and our website.

Our focus on efficiency ensures that claims are:

- Settled promptly.
- Adhering strictly to regulatory guidelines
- Maintaining fairness in every evaluation.

We also have robust fraud prevention measures in place, safeguarding legitimate claimants while preventing misuse.

Your peace of mind is our priority. We are committed to delivering on our promises with care, integrity, and unwavering support.

Customer Touchpoints

At Bandhan Life Insurance, we offer a variety of ways for you to connect with us, making it as convenient as possible!

1. Customer Care Helpline

For any queries or concerns, call our customer care helpline at 1800-209-9090. Our support is available from 9 AM to 7 PM, Monday to Saturday.

2. Write to Us

For email support, write to us at **customer.care@bandhanlife.com**.

3. Want to Chat?

Send a “Hi” to **9867452226** on WhatsApp. Our WhatsApp Bot is enabled with a variety of self-service options like accessing policy details, getting important documents like policy document, premium receipts, etc. in simple and user-friendly interface. Should you need to connect to an agent over chat for any support, our WhatsApp bot also facilitates you with that option.

4. Self-Managing Portal - iAssist

iAssist - <https://iassist.bandhanlife.com/login>, is your all-in-one self-service portal offering services around managing your policy details, placing and tracking any requests, making renewal payments, downloading important documents such as policy document, premium receipts, managing personal details such as mobile number, email id, address and bank update. All of this in an absolutely secured environment.

5. In-Person Assistance at Service Centers

For personalized assistance, visit any of our service centers. Our team is ready to assist you with policy-related needs and resolve any concerns.

You can find the nearest service center on <https://www.bandhanlife.com/locate-service-center>.

6. Visit Our Head Office at:

A-201, 2nd Floor, Leela Business Park, Andheri-Kurla Road, Andheri (E), Mumbai – 400059.

Grievance Redressal Policy

Bandhan Life Insurance is committed to resolving customer complaints efficiently and impartially. Our complaints management process is designed to ensure that grievances are addressed effectively, with root-cause analysis to eliminate recurring issues. Our Grievance Redressal Process is detailed on our website: www.bandhanlife.com.

As per the IRDAI (Protection of Policyholders' Interests, Operations, and Allied Matters of Insurers) Regulations, 2024, Bandhan Life aims to:

- Protect the interests of insurance policyholders.
- Ensure that insurers and distribution channels meet their obligations with best practices in sales and service.
- Promote policyholder-centric governance, with a strong focus on grievance redressal.
- Empower customers by making them aware of their rights and providing an escalation matrix on our website.
- Always treat all customers fairly.

Complaints Management Procedure: We follow a four-step process to track complaints, ensure their resolution, and eliminate the root causes to prevent recurrence.

Complaints Intimation: Customers can register complaints through:

- **Website:** Via the complaints form available on www.bandhanlife.com.
- **Customer Portal:** Through self-service portal iAssist - <https://iassist.bandhanlife.com/login>
- **Email:** Write to us at customer.care@bandhanlife.com from your registered email ID.
- **Contact Center:** Call us at **1800 209 9090** (9 AM to 7 PM, Monday to Saturday).

- **Letters:** Send a letter to the nearest CAMS office or Head Office. Addresses are available on our website.

We will resolve your complaint within **14 days** from the date of the registration.

Escalation Matrix

- **Level 1:** If no response is received within 2 weeks, or if the response is unsatisfactory, escalate to:
Grievance Redressal Officer
Ms. Ankur Roy
A-201, 2nd Floor, Leela Business Park, Andheri-Kurla Road, Andheri (E), Mumbai – 400059.
Email: gro@bandhanlife.com
We will respond within **7 working days**.
- **Level 2:** If the grievance remains unresolved or is only partially resolved, escalate the issue to the **Insurance Ombudsman**. Details of the Ombudsman are available on our website: www.bandhanlife.com.
- **Level 3:** If still unsatisfied, the complainant can escalate to the **Bima Bharosa Portal**: <https://bimabharosa.irdai.gov.in/>.

Service Time Frame

Sr NO.	SERVICE	DESCRIPTION	TAT
1	New Business Proposal processing	Processing of Insurance proposal and seeking further requirements for consideration of the proposal	7 days
		Decision on proposal from the date of receipt of proposal or from the date of receipt of additional requirement whichever is later	
		Providing Copy of the policy along with the proposal form	15 days
2	Post Policy Service Request	Post Policy Service Requests concerning mistakes / corrections in the Policy document	7 days
3	Free-Look Cancellation	Free Look Cancellation & Refund from the date of receipt of request	
4	Policy Servicing (from the date of receipt of request for the service specified)	Change Of Address (KYC Norms to be complied)	7 days
		Registration /Change of Nomination, Assignment	
		Inclusion of new member in case of group policy	

		Alteration in ORIGINAL POLICY CONDITIONS (where applicable)	
		Policy loan	
		Unit / Index Linked Insurance policy— Switch, Top-up, and Other related Services.	
		Decision on Policy Revival after receipt of all requirements.	
		Issue of Premium Payment Certificates	
		Issue Of Duplicate policy	
5	Death claims	Death claims settlements (not requiring investigations)	15 days
		Early death claims requiring investigations — decision & payment	45 days
6	Survival, Maturity, annuity payments	Settlement Of Maturity Claims	On due date
		Settlement of Survival Benefits	
		Annuity payments/ Pension Payment	
		Surrender or partial withdrawal of policy	7 days
7	Auto Action by the Insurer	Premium Due Intimation	One month before due date
		Policy payments information (Survival Benefits, Maturity Benefits, etc.)	
		Acknowledgement to complainant	Immediately
		Action on Complaint &	14 days
		Intimation Of Decision to the complainant	
8	Complaints	If the complaint is NOT resolved by the Insurer, communicate the details to the Policyholder of options including referring to the complainant to Insurance Ombudsman / Consumer Court	14 days from the date of receipt of complaint (The policyholder may approach the Insurance Ombudsman if his / her complaint is not resolved within 30 days or if the decision of the company is not acceptable to the policyholder.)

*Penal interest will be paid in case of delay in applicable services as per IRDAI guidelines.

This document reflects our intent on operating with utmost trust and transparency for our customers. However, it does not form a part of the policy contract of the customers or employee service conditions.