



MU01 C219578608 BD 85/514 BROK Term_NonEIA C-37

January 29, 2022

ANKUR NATH TIWARI
B 288
KENDRIYA VIHAR SECTOR 51
NEAR SECTOR 34 METRO STATION
NOIDA 201307
UTTAR PRADESH INDIA
M- 9696508217

TATA AIA LIFE SAMPOORNA RAKSHA SUPREME

Non-Linked, Non-Participating Individual Life Insurance Plan

1. Part A

Dear ANKUR NATH TIWARI,

Thank You for choosing Us for Your insurance needs. Tata AIA Life Insurance Company Limited is committed to give You world-class products and professional service.

We take great pleasure in presenting Your Policy document. Please check Your personal details and the Policy provisions carefully. Should You have any queries, please contact Your agent/intermediary or contact Us at the address mentioned below. You can also reach Us via email at customercare@tataaia.com or call Our helpline number 1860-266-9966 (Local charges apply).

Agent/Intermediary Name: POLICYBAZAAR INSURANCE BROKERS PRIVATE LIMITED

Agency/Intermediary Code/License: 004665695

Agent/Intermediary Contact details: 18002585970 / care@policybazaar.com

In order to provide better services, We request You to intimate Us in the event of any change in the address of the Policyholder or the Nominee.

You have a free look period of 30 days from the date of receipt of the policy document, to review the terms and conditions of the Policy. If You disagree to any of these terms or conditions, You have the option to return the Policy for cancellation, stating the reasons for objection and be entitled to a refund of the premiums paid without interest after deduction of proportionate risk premium, stamp duty and medical examination cost along with applicable taxes, if any. If You notice any error on examination of the Policy, please return the Policy to the Company immediately for correction.

At Tata AIA Life Insurance Company Limited, We believe that life inspires Us to think ahead. Our insurance solutions are therefore designed to be a step ahead, thus giving You an advantage to adapt to tomorrow's changes, starting today.

We look forward to a long and cherished relationship with You.

Best wishes,
For and on behalf of
Tata AIA Life Insurance Company Limited



Naveen Tahilyani
CEO & Managing Director
Authorised Signatory

Policy Servicing Branch : 1st Flr, Simran Cntr, 30/H Parsi, Panchayat Mrg, Andheri-E, Mumbai - 400093

Tata AIA Life Insurance Company Ltd (IRDA of India Regn.No.110) (CIN - U66010MH2000PLC128403)
Registered & Corporate Office: 14th Floor, Tower A, Peninsula Business Park, Senapati Bapat Marg, Lower Parel, Mumbai 400013.

"Stamp duty of Rs. 2250 is paid as provided under Article 47(C)/(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 his order No. LOA/CSD/212/2021/6126 / Date 14/12/2021 / Validity period Dt. 20/12/2021 to Dt. 31/12/2022"

(Signature)
Proper Officer

TATA AIA LIFE SAMPOORNA RAKSHA SUPREME, Non-Linked, Non-Participating Individual Life Insurance Plan

LIFE INSURED ANKUR NATH TIWARI

POLICY NUMBER C219578608

PREAMBLE

Tata AIA Life Insurance Company Limited ("the Company") having received a Proposal Form and other related documents with Declaration thereto and initial Premium from the Policyholder hereby issues Tata AIA Life Sampoorna Raksha Supreme, a Non-Linked, Non-Participating Individual Life Insurance Plan. The basic insurance plan, coverage, Premium and benefits provided under this Policy, are specified in the Policy Schedule.

We agree to pay the benefits under this Policy on the happening of the insured event, while this Policy is in force subject to the terms and conditions stated herein.

Signature valid

Signed by: Naveen Tahilyani
Date:
Location:



This is a system generated document requiring no physical signature.



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January 29, 2022

Subject: Important information related to Total Death benefit in Tata AIA Life Insurance Sampoorna Raksha Supreme (UIN: 110N160V02) with Term Benefit with Accelerated Terminal Illness (Tata AIA Life Insurance Comprehensive Protection Rider UIN: 110B033V02) – Policy No. C219578608

Dear Policyholder,

Congratulations on becoming your family's Rakshakarta !!

We are delighted that you have opted for our Tata AIA Life Insurance Sampoorna Raksha Supreme (UIN: 110N160V02) with Term Benefit with Accelerated Terminal Illness (Tata AIA Life Insurance Comprehensive Protection Rider UIN: 110B033V02) which will provide you a Basic Sum Assured of Rs. 69,00,000 and an additional Term benefit with Accelerated Terminal Illness Sum Assured of Rs. 31,00,000 – helping you secure your loved ones' financial future.

In case of any eventuality during the Policy Term; the nominee is entitled to a Total Sum Assured of Rs. 1,00,00,000 (Basic Sum Assured of Rs. 69,00,000 + Term benefit with Accelerated Terminal Illness Sum Assured of Rs 31,00,000)

Further details are provided in the policy bond.

At Tata AIA Life Insurance, we are committed to help you with solutions that will provide Sampoorna Rakshakaran to your family so that you can enjoy life without any worries.

Best Wishes

Tata AIA Life Insurance Company Limited

Naveen Tahilyani
CEO & Managing Director
Authorised Signatory

Policy Servicing Branch : 1st Flr, Simran Cntr, 30/H Parsi, Panchayat Mrg, Andheri-E, Mumbai - 400093

Tata AIA Life Insurance Company Ltd (IRDA of India Regn.No.110) (CIN - U66010MH2000PLC128403)
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January 29, 2022

**Tata AIA Life Insurance Non-Linked Comprehensive Protection Rider (UIN: 110B033V02)
Non-linked, Non-participating Individual Health Rider**

PART A

Dear ANKUR NATH TIWARI,

Thank you for choosing us for your insurance needs. Tata AIA Life is committed to give you world-class products and professional service.

We take great pleasure in presenting your Rider Pack for our Tata AIA Life Insurance Non-Linked Comprehensive Protection Rider, a Non-linked, Non-participating Individual Health Rider. Please check your personal details and the rider provisions carefully. Should you have any queries, please contact your agent or contact us at the address mentioned below. You can also reach us via email at customercare@tataaia.com or call our helpline number 1860-266-9966 (Local charges apply).

Agent Name: POLICYBAZAAR INSURANCE BROKERS PRIVATE LIMITED

Agency Code: 004665695

Agent/Intermediary Contact details: 18002585970 / care@policybazaar.com

In order to provide better service, We request you to intimate us in the event of any change in the address of the Policyholder or the nominee.

You have a free look period of 30 days from the date of receipt of the Rider document to review the terms and conditions of the Rider. If You disagree to any of those terms or conditions, You have the option to return the Rider document for cancellation of the benefit option, stating the reasons for objection and be entitled to a refund of the premiums paid, for the benefit option, without interest after deduction of proportionate risk premium, stamp duty and medical examination cost along with applicable taxes and cesses or levies, if any.

On examination of the Rider, if you notice any mistake, please return the Rider document to the Company immediately for correction.

At Tata AIA Life we believe that life inspires us to think ahead. Our insurance solutions are therefore designed to be a step ahead, thus giving you an advantage to adapt to tomorrow's changes, starting today.

We look forward to a long and cherished relationship with you.

Best wishes,
For and on behalf of
Tata AIA Life Insurance Company Limited

Naveen Tahilyani
CEO & Managing Director
Authorised Signatory

Policy Servicing Branch : 1st Flr, Simran Cntr, 30/H Parsi, Panchayat Mrg, Andheri-E, Mumbai - 400093

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(Signature)
Proper Officer

Tata AIA Life Insurance Non-Linked Comprehensive Protection Rider (UIN: 110B033V02), a Non-linked, Non-participating Individual Health Rider

Tata AIA Life Insurance Company Limited

INSURED: ANKUR NATH TIWARI

RIDER NUMBER: C219578608

PREAMBLE

Tata AIA Life Insurance Company Limited has entered into this contract of insurance on the basis of the information given in the Proposal Form together with the premium deposit, statements, reports or other documents and declarations received from or on behalf of the proposer for effecting a life insurance contract on the life of the person named in the Schedule below.

We agree to pay the benefits under the Rider on the happening of the insured event, while the Policy and Rider are in force subject to the terms and conditions stated herein.

Signature valid

Signed by: Naveen Tahilyani
Date:
Location:



Tata AIA Life Insurance Company Limited

This is a system generated document requiring no physical signature.

POLICY SCHEDULE

Tata AIA Life Insurance Sampoorna Raksha Supreme (UIN: 110N160V02)

Non-Linked, Non-Participating Individual Life Insurance Plan

THIS SCHEDULE MUST BE READ WITH THE POLICY DOCUMENT AND IS PART OF THE LIFE INSURANCE CONTRACT

Policyholder Details	Policyholder/ Life Assured (First Life)	Life Assured (Second Life)
Name	ANKUR NATH TIWARI	N/A
Address	B 288 KENDRIYA VIHAR SECTOR 51 NEAR SECTOR 34 METRO STATION NOIDA UTTAR PRADESH 201307	N/A N/A N/A N/A N/A N/A N/A
Client ID	319110740	N/A
Date of Birth	02/02/1987	N/A
Age at entry	34 years	N/A
Age Admitted	Y	N/A
Gender	MALE	N/A

Policy Details		
Policy Number	: C219578608	Mode of Premium Payment : Monthly
Plan Option	: Life	Annualised Premium (Excl. taxes) Rs : 8,489.00
Date of Commencement of Policy	: 29/01/2022	Premium (Excl. taxes) Rs. : 1,226.00
Date of Commencement of Risk	: 29/01/2022	Applicable taxes, cessess and levies Rs. : 221.00
Date of Maturity of Policy	: 29/01/2048	Total Modal Premium (Incl. taxes) Rs. : 1,447.00
Premium Due Date (s)	: 28/02/2022	Top-Up : N/A
Policy Term	: 26 years	Top-Up Rate : N/A
Premium Paying Term	: 26 years	Mode of Premium Payment on Top-up : N/A
Life stage Option	: No	
Income Start Age	: N/A	
Income Rate	: N/A	
Credit Interest Rate	: N/A	

Base Plan/Rider Name	Basic Sum Assured (Rs.)	Modal Premium (Incl. taxes) (Rs.)	Date of Maturity of Policy	Due Date of Last Premium Payment	Policy Term(Years)	Premium Payment Term (Years)
Tata AIA Life Insurance Sampoorna Raksha Supreme (UIN: 110N160V02)	69,00,000.00	885.00	29/01/2048	29/12/2047	26	26

Please refer Schedule Page 2 for additional rider details

Benefit Payable:				
As per the Clause 3.1 of Part C and Plan Option chosen				

Nominee details (under section 39 of the Insurance Act 1938)				
Name of the Nominee (s)	Relationship with Life Assured	Gender	Age	Nomination %
VIJAY LAXMI TIWARI	Parents	Female	59	100.00

Appointee Details (Applicable in case the Nominee is a minor)			
Name of the Appointee (s)	Relationship with nominee	Gender	Age
NA	NA	NA	0

On examination of the Policy, if you notice any mistake, please return the Policy to the Company immediately for correction.

SCHEDULE

Tata AIA Life Insurance Non-Linked Comprehensive Protection Rider - (UIN: 110B033V02)
Non-Linked, Non-Participating Individual Health Rider

Benefit Option	Accidental Total and Permanent Disability Benefit	Term Benefit with Accelerated Terminal Illness		
UIN	110B033V02	110B033V02		
Life Insured Name	ANKUR NATH TIWARI	ANKUR NATH TIWARI		
Address	as per proposal form	as per proposal form		
Client ID	319110740	319110740		
DOB	02/02/1987	02/02/1987		
Age at entry (Years)	34	34		
Age Admitted	Y	Y		
Gender	Male	Male		
Sum Assured under Benefit Option (Rs.)	25,00,000	31,00,000		
Benefit Payout Option	Lumpsum	Lumpsum		
Lumpsum (Rs.)	25,00,000	31,00,000		
Income p.a. (Rs.)	NA	NA		
Income Duration (Years)	NA	NA		
Return of Balance premium option	No	No		
Coverage Term (Years)	26	26		
Premium Payment Term (Years)	26	26		
Date of Commencement of Risk	29/01/2022	29/01/2022		
Due Date of Last Premium Payment	29/12/2047	29/12/2047		
Maturity/Expiry Date	29/01/2048	29/01/2048		
Annualised Premium (Excl taxes) (Rs.)	675.00	4,712.00		
Modal Premium (Excl taxes) (Rs.)	60.00	416.00		
Tax, Surcharge and Cess (Rs.)	11.00	75.00		
Total Modal Premium (Incl taxes) (Rs.)	71.00	491.00		

Details of Nominee (not applicable if Benefit Payout Option is Partner Care)

As per Base Plan

Details of Partner (applicable only if Benefit Payout Option is Partner Care)

Benefit Option	Name of Rider Life Insured	Name of Partner	DOB of Partner	Gender	Percentage	Relationship with Rider Life Insured

Note: This schedule must be read with the accompanying policy document and is part of the life insurance contract

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intentionally**

You are the Rakshakaran Hero.



Dear ANKUR NATH TIWARI,

You are now the proud owner of a **Tata AIA Life Insurance Sampoorna Raksha Supreme**. (Policy number **C219578608**)

We at Tata AIA Life Insurance have embarked on an initiative – Rakshakaran Hero – through which we will plant a sapling for every Term plan that we sell. We will do this on your behalf, thereby ensuring that you safeguard your family's financial future and also secure the world.

Your decision to secure your family is truly commendable in more ways than one. You secured your family's financial future and have also helped protect the world.

Your sapling is geo-tagged with a unique number 3169176

You can log on to <https://www.grow-trees.com/locatetree.php>.

Enter your unique number to view the location of your sapling.

Congratulations on becoming a Rakshakaran Hero and making the world a greener and better place.

Naveen Tahilyani

Managing Director & Chief Executive Officer
Tata AIA Life Insurance



#RakshakaranHero

For more details on risk factors, terms and conditions please read sales brochure carefully before concluding a sale. **Tata AIA Life Insurance Company Limited** (IRDAI Regn. No.110) CIN: U66010MH2000PLC128403. **Registered & Corporate Office:** 14th Floor, Tower A, Peninsula Business Park, Senapati Bapat Marg, Lower Parel, Mumbai - 400013. Trade logo displayed above belongs to Tata Sons Ltd and AIA Group Ltd. and is used by Tata AIA Life Insurance Company Ltd under a license. For any information including cancellation, claims and complaints, please contact our Insurance Advisor / Intermediary or visit Tata AIA Life's nearest branch office or call 1-860-266-9966 (local charges apply) or write to us at customercare@tataaia.com. Visit us at: www.tataaia.com or SMS 'LIFE' to 58888. • UIN:110N129V03 • L&C/Misc/2019/Sep/351



Presented to

ANKUR NATH TIWARI

Policy Number: **C219578608**

Project Name : **Trees for Himalayan Biodiversity, Nainital, Uttarakhand, Ind**

A token of appreciation for securing your family's financial future
and protecting the world, one tree at a time.

A handwritten signature in black ink.

Naveen Tahilyani

Managing Director & Chief Executive Officer, Tata AIA Life Insurance

TATA AIA
— LIFE INSURANCE



#RakshakaranHero

Tata AIA Life Insurance Company Ltd. (IRDA of India Regn. No. 110). CIN: U66010MH2000PLC128403.
Registered & Corporate Office: 14th Floor, Tower A, Peninsula Business Park, Senapati Bapat Marg, Lower Parel, Mumbai 400013.

OTHER ENDORSEMENT

2 PART B

Tata AIA Life New Term Insurance Plan is an Non-linked, Non-participating Individual Life Insurance Plan.

2.1. Basic definitions

"Age" means age as on the last birthday; i.e. the age of the Life Insured in completed years as on Date of Commencement of Policy and is as shown in the Policy Schedule;

"Annualised Premium" shall be the Premium payable in a Policy Year under a non-Single Pay option chosen by the Policyholder, excluding taxes, Rider Premiums, Extra Premiums and loading for Modal Premiums, if any; as specified in the Policy Schedule;

"Basic Sum Assured/Base SA" is as mentioned in the Policy Schedule;

"Claimant" means the person entitled to receive the Policy benefits and includes the Policyholder, surviving Life Insured, the Nominee, the assignee, the legal heir, the legal representative(s) or the holder(s) of succession certificate as the case may be;

"Date of Maturity of Policy" means the date specified in the Policy Schedule on which the Policy Term expires;

"Extra Premium" means an additional amount charged by Us, as per Our Underwriting Policy, which is determined on the basis of disclosures made by You in the Proposal Form or any other information received by Us including medical examination report of the Life Insured;

"Grace Period" means a period of 15 (Fifteen) days from the due date of the unpaid Premium for monthly Premium payment mode and 30 (Thirty) days from the due date of unpaid Premium for all other Premium payment mode, except Single Pay;

"Guaranteed Surrender Value" shall be the minimum Surrender Value under Life Plus and Life Income Plan Option computed in accordance with Clause 4.2.1 of Part D, which is guaranteed by Us. The Guaranteed Surrender Value will be determined in the Policy Year in which the Surrender is effected;

"IRDAI/Authority" means the Insurance Regulatory and Development Authority of India;

"Lapsed Policy" means a Policy where the due Premium has not been received till the expiry of the Grace Period and if Life Plus or Life Income option has been chosen, at least 2 (two) full years' Premiums have not been paid (except in case of Single Pay Policy);

"Life Insured/Assured" means the person whose life is insured or assured under the Policy and is shown in the Policy Schedule;

"Medical Practitioner" means a person who holds a valid registration from the Medical Council of any State or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within its scope and jurisdiction of license. This would mean a practitioner treating the Life Insured must be holding a degree equivalent to MD/MS or higher in the relevant field to certify the medical condition. The Medical practitioner should not be:

- the Policyholder/Life Insured himself/herself; or
- An authorized insurance intermediary (or related persons) * involved with selling or servicing the insurance contract in question; or
- Employed by or under contractual engagement with the Company; or
- Related to the Policyholder/Life Insured by blood or marriage.

*"Related Persons" refers to individuals related to the insurance intermediary by blood or by marriage who are practicing as Medical Practitioners;

"Nominee" means the person named in the Policy Schedule who has been nominated by You in accordance with Section 39 of the Insurance Act, 1938 as amended from time to time to receive benefits in respect of this Policy;

"Paid-up Policy" means a Policy wherein all the due Premiums have been received by the Company;

"Policy" means the contract of insurance entered into between You and Us as evidenced by this document, the Proposal Form, the Policy Schedule and any additional information/document(s) provided to Us in respect of the Proposal Form along with any written instructions from You subject to Our acceptance of the same and any endorsement issued by Us;

"Policy Anniversary" refers to the annual anniversary of the Date of Commencement of Policy;

"Policy Schedule" means the policy schedule and any endorsements attached to and forming part of the Policy and if any updated Schedule is issued, then, the Schedule latest in time;

"Policy Year" means a period of 12 (Twelve) months commencing from the Date of Commencement of Policy and every Policy Anniversary thereafter;

"Premium" means the amount specified in the Policy Schedule, payable by you, by the due dates to secure the benefits under the Policy, excluding applicable tax, Rider Premiums, Extra Premiums, if any;

"Proposal Form" means the form filled in and completed by You for the purpose of obtaining insurance coverage under the Policy;

"Reduced Paid-up Policy" mean a Policy which has acquired Surrender Value under Life Plus or Life Income Plan Option and subsequent Premium remains unpaid at the end of Grace Period;

"Revival Period" means a period of 5 (five) years from the due date of the first unpaid Premium;

"Single Premium" shall be the Premium payable under a Single Pay option as chosen by the Policyholder at the inception of the Policy, excluding the applicable taxes Rider Premiums, Extra Premiums, if any;

"Special Surrender Value" means the Special Surrender Value under Life Plus and Life Income Plan Option computed in accordance with Clause 4.2.1 of Part D;

"Special Surrender Value Factors" are factors determined to compute the Special Surrender Value, which can be revised by Us on the basis of Our experience from time to time as per the provisions of Clause 4.2.1 'Surrender Benefit' under Part C;

"Surrender Value" means an amount payable on Surrender of this Policy, which will be the higher of the Guaranteed Surrender Value or the Special Surrender Value.;

"Total Premiums Paid" means total of all the premiums received, excluding any Extra Premiums, any rider premiums and taxes.;

"Underwriting Policy" means our then prevailing Underwriting Policy as approved by Our board of directors;

"Waiting Period" means a period of first 90 days from the Date of Commencement of Risk;

"We", "Us", "Our" or "Company" refers to Tata AIA Life Insurance Company Limited; and

"You" or "Your" means the Policyholder of this Policy.

Whenever the context requires, the masculine form shall apply to feminine and singular terms shall include the plural.

3. PART C

3.1. Benefits

The benefits shall depend on the Plan Option and Sum Assured Option (if any) chosen by You at the inception of the Policy and cannot be changed once chosen.

Sum Assured Options: (A. Available only under Life and Life Plus options. B. Not applicable if the Policy is availed under Point of Sale product norms)

I. Life Stage:

If you have chosen Life Stage Plan Option at the inception of the Policy, You may increase the Base SA on happening of any one of the following events, subject to Underwriting Policy and the option to increase the Base SA is exercised within 180 days of the happening/incidence of the following event(s):

Event	Additional Sum Assured as % of Base SA
Marriage (One Marriage Only)	50%
Birth/Adoption of 1st Child	25%
Birth/Adoption of 2nd Child	25%
Home Loan disbursal*	100%, subject to home loan amount sanctioned

*Subject to Underwriting Policy.

The Additional Sum Assured can only be taken in the form of (up to) 4 tranches as mentioned in the above table provided no prior claim

payment has been made under Payor Accelerator Benefit, where We will charge additional Premium for each tranche of the Additional Sum Assured. The Premium amount for the original Base SA remains unaltered. Any increase in the Base SA shall be effective from the Policy Anniversary succeeding the option exercise date.

After the payment of Premiums for first 5 (five) completed Policy Years, You may opt to surrender the Additional Sum Assured tranches at once or successively. The tranches shall be terminated after payment of any applicable value on surrender. The tranches will be surrendered in reverse order to which they were availed, i.e. the latest tranche will be surrendered first, followed by the penultimate tranche, and so on. This shall be allowed till all incremental tranches are removed. Once reduced, the Premium or sum assured cannot be subsequently increased. The Policy shall continue with the Effective Sum Assured (as defined under Clause 3.1.2 'Death Benefit' of Part C), as applicable at the time of termination of the tranche(s), for rest of the Policy Term.

II. Top-Up Sum Assured:

Where the Premium Payment Term is at least 5 years, You can opt to exercise the Top-SA option at the time of purchase of the Policy subject to Underwriting Policy. Under this option, the life cover shall increase, at every Policy Anniversary, by a fixed percentage of 5% of the Base SA chosen at inception ("Additional Sum Assured") till the earlier of:

- The maximum sum assured eligibility as per the Underwriting Policy has reached;
- The outstanding Premium Payment Term is less than 13 months;
- The outstanding Policy Term is less than the minimum Policy Term allowed under this product;
- The Age at the time of increase of Base SA is higher than the below Maximum Entry Age as applicable under the product (applicable as per the benefit option chosen by You at inception of the Policy):

Benefit Option	Age
Life	65
Life Plus	65

or

- Claim under Payor Accelerator Benefit.

This is subject to the Underwriting Policy of the Company.

You may opt to terminate the future increments at any time during the Policy Term and such termination will be effective from the next Policy Anniversary. Once the future increments are terminated, it is not possible to initiate the increments again over the remaining Premium Paying Term of the Policy.

In case You opt to terminate the future increments, You may opt to surrender the Additional Sum Assured tranches (i.e. in multiples of 5% of Base SA) at once or successively, after payment of premiums for first five completed Policy Years. The Additional Sum Assured tranches shall be terminated after payment of any applicable value on surrender. The Additional Sum Assured tranches will be surrendered in reverse order to which they were availed, i.e. the latest tranche will be surrendered first, followed by the penultimate tranche, and so on. This shall be allowed till all incremental Additional Sum Assured tranches are removed. Once reduced, the Premium or sum assured cannot be subsequently increased. The Policy shall continue with the Effective Sum Assured (as defined under Clause 3.1.2 'Death Benefit' of Part C) as applicable at the time of termination of the tranche(s) for rest of the Policy Term.

Under both Life Stage and Top-up Sum Assured option, an additional Premium as may be applicable for each tranche of Additional Sum Assured shall be payable by You and shall be determined using Additional Sum Assured and the Premium Rate which will be derived basis the following:

- Attained Age as of the Policy Anniversary as on the date of opting for Additional Sum Assured, subject to the below Maximum Entry Age (as on last birthday) as applicable under the product (applicable as per the benefit option chosen by You at inception of the Policy):

Benefit Option	Age
Life	65
Life Plus	65

- Outstanding Policy Term as of the Policy Anniversary following the date of opting for Additional Sum Assured, subject to the minimum Policy Term.
- Outstanding Premium Paying Term as of the Policy Anniversary following the date of opting for Additional Sum Assured, subject to a minimum Premium Paying Term of 13 months.
- Aggregate sum assured (including the requested Additional Sum Assured) under the Policy.
- Underwriting Policy of the Company.

3.1.1. Maturity Benefit

3.1.1.1. Life/Life Income/Credit Protect Option (as chosen)- No benefit shall be payable.

3.1.1.2. Life Plus Option -

Under Life Plus Option, an amount equal to the 105% of the Total Premiums Paid (excluding loading for modal Premiums and discount, if any) shall be payable at the end of the Policy Term, provided the Life Insured survives till the Date of Maturity of Policy and the Policy is not terminated earlier.

Upon payment of this benefit, the Policy shall terminate and no other benefit shall be payable.

3.1.2. Death Benefit

Life/Life Plus/Life Income option (as chosen)

On death of the Life Insured during the Policy Term where the Policy is in force, We shall pay death benefit to the Claimant, which shall be highest of the following:

- a) $1.25 \times \text{Single Premium}$ (excluding discount, if any) (where Single Premium payment is opted) or Death Benefit Multiple¹ \times Annualised Premium² (excluding discount, if any) (where Regular Premium payment or Limited Premium payment is opted);
- b) 105% of Total Premiums Paid (excluding loading for modal Premiums and discount, if any) up to date of death; or
- c) An absolute amount assured to be paid on death³

¹DB multiple is 7 in case of Life Option and 11 in case of Life Plus and Life Income options (as chosen by You)

²in aggregate for Base SA and all tranches of Additional Sum Assured (if applicable)

³The absolute amount assured to be paid on death is the Effective Sum Assured applicable as on the date of death.

Here, Effective Sum Assured shall depend on the plan option chosen, as below:

- For Life/Life Plus option - The Effective Sum Assured applicable for computation of Death Benefit would include any Additional Sum Assured purchased by exercising either the Life Stage or the Top-Up Sum Assured option along with the Base SA.
- For Life Income option - The Effective Sum Assured applicable for computation of Death Benefit shall be the Base SA less total Regular Income payouts due up to that time.

In case of Life Income option, We shall adjust any excess Regular Income payouts from the Death Benefit, in case any payments were made post date of death.

Under Credit Protect option (as chosen)

On death of the Life Insured during the Policy Term where the Policy is in force, We shall pay Effective Sum Assured as on the date of death to the Claimant, which shall be as below:

The Effective Sum Assured ("Eff_SA") applicable for computation of Death Benefit at the start of month 't' computed for an underlying interest rate 'i'

p.a. is defined as per the formula below:

$$\text{Eff_SA}_t = \begin{cases} \text{Base SA} & \text{if } t = 1 \\ \text{Eff_SA}_{t-1} * \left(1 + \frac{i}{12}\right) - \frac{\text{Base SA}}{1-v^{PT}} * \left(\frac{i}{12}\right) & \text{if } 1 < t \leq PT \text{ and } i > 0\% \\ \text{Eff_SA}_{t-1} - \frac{\text{Base SA}}{PT} & \text{if } 1 < t \leq PT \text{ and } i = 0\% \end{cases}$$

Here:

- o PT = Policy Term, in months
- o $v = (1 + i/12)^{-1}$

The above Death Benefit payable on death would be reduced by the claim payout already made (if any) under Payor Accelerator Benefit.

The Policy will terminate on payment of entire Death Benefit and no other benefits shall be payable under the Policy.

3.1.2.1. Death Benefit Payout Plan

At the inception of the Policy, You may choose to receive the Death Benefit in any one of the below options:

- a) Lump Sum – Claimant shall receive the Death Benefit in lump sum.
- b) Staggered Benefit – Claimant shall also receive staggered benefit for chosen benefit period (up to maximum of 60 months) as per the chosen frequency which can be Annual / Half Yearly / Quarterly / Monthly, starting from the modal anniversary following the date of occurrence of insured event. Any accrued staggered benefit, due before intimation, will be paid along with first payout under this option.
- c) Combination of Lump Sum and Staggered Benefit - The Death Benefit shall be payable as per the chosen ratio of lump sum and income. Along with the lump sum amount, the Claimant shall also receive income for chosen benefit period (up to 60 months) as per the chosen frequency which can be Annual / Half Yearly / Quarterly / Monthly, starting from the modal anniversary of the date of occurrence of insured event. Any accrued income, due before intimation, will be paid along with first payout under this option.

At any time during the chosen benefit period, the Claimant has an option to receive the commuted value of the future staggered benefits as a lumpsum, discounted at the higher of –

- 4.00% p.a.; or
- State Bank of India domestic 10-year term deposit rate prevailing at the time of commutation + 2.00%.

In case of death of the Life Assured after a valid claim under the Payor accelerator benefit, the above Death Benefit shall be reduced by the amount already paid under Payor Accelerator Benefit under Clause

3.1.3. Payor Accelerator Benefit

Upon diagnosis of Terminal Illness of the Life Insured, an amount equal to,

- Under Life/Life Plus option - 50% of the Base SA shall be payable as lump sum.
- Under Life Income/Credit Protect option – 50% of the Effective Sum Assured as defined under Clause 3.1.2 ‘Death Benefit’ of Part C (as on the date of diagnosis) shall be payable as lump sum. If the stipulated Death Benefit under Life Income option or Effective Sum Assured under Credit Protect option (Clause 3.1.2 ‘Death Benefit’ of Part C) falls below the Payor Accelerated Benefit already paid, the Policy shall terminate and no additional benefit shall be payable.

Here:

“Terminal Illness” is defined as an advanced or rapidly progressing incurable and un-correctable medical condition which, in the opinion of two (2) independent Medical Practitioners specializing in treatment of such illness, has greater than 50% chance of death of the Life Insured within 6 months of the date of diagnosis of the Terminal Illness. The Company reserves the right for independent assessment of the Terminal Illness.

The coverage under this benefit shall commence after 2 (two) years from the Date of Commencement of Policy. This is an accelerated benefit, i.e. on payment of this benefit, the Death Benefit shall be automatically reduced by the amount paid under this benefit and the Policyholder shall continue to pay all Premiums as due (if any) under the Policy. This benefit is not payable if the Policy is availed under Point of Sale product norms.

3.1.4. Survival Benefit (Applicable only if Life Income option is chosen)

Provided the Policy is in force, You shall receive this benefit depending on the Income Start Age and Income Rate (as defined below) chosen by the Policyholder at the time of inception of the Policy. Starting at the end of every month after the Policy Anniversary, following attainment of Income Start Age by the Life Assured, the Regular Income (as defined below) shall be paid in arrears until the death of the Life Assured or end of the Policy Term, whichever is earlier. All Regular Income payouts will be paid to the Policyholder.

In case the Life Assured survives till maturity, no additional benefit is payable and the Policy shall terminate.

Here:

- “Income Start Age” means the age of the Life Insured at which the monthly Regular Income, if applicable, starts. The choices available are 55, 60 and 65 years, last birthday as selected by the Policyholder at the time of inception of the Policy. Once selected, Income Start Age cannot be changed.
- “Income Rate” is a fixed rate of the Base SA which is used to determine the quantum of Regular Income payable to the Policyholder, if applicable. The rate can be any percentage between 0.01% to 0.15%, in increments of 0.01%, as selected by the Policyholder at the time of inception of the Policy. Once selected, the Income Rate cannot be changed.
- “Regular Income” is the amount of monthly income payable from the Income Start Age and is set as Income Rate multiplied by Base SA.

3.1.5. Optional Features

3.1.5.1. Health Management Services:

The Life Insured may avail second opinion/personal medical case management services/medical consultation from the service provider/s affiliated to/registered with Us. The services are expected to assist the Life Insured to ascertain correct diagnosis of a medical condition and obtain due care to the Life Insured in case of illness. These services are subject to:

- the availability of a suitable service provider/s;
- primary diagnosis has been done by a registered medical practitioner as may be authorized by a competent statutory authority; and
- the eligibility of the Life Insured as may be determined as per the Company’s Underwriting Policy.

Note:

- Medical Second Opinion/Personal Medical Case Management/medical consultation is an optional service offered to You at no additional cost. You may exercise Your own discretion to avail the services and to follow the treatment path suggested by the service provider/s.
- These services shall be directly provided by the service provider/s.
- The services can be availed only where the policy is in force.
- All the supporting medical records should be available to avail the service.
- We reserve the right to discontinue the service or change the service provider/s at any time.
- The services are being provided by third party service provider/s and We will not be liable for any liability.

3.1.6. Premium details

3.1.6.1. Payment of Premium

- You can pay Premium at any of Our offices or through our website www.tataaia.com or by any other means, as informed by Us. 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.
- Collection of advance premium shall be allowed within the same financial year for the Premium due in that financial year. However, where the Premium due in one financial year is being collected in advance in earlier financial year, the Company may collect the same for a maximum period of three months in advance of the due date of the Premium.
- The Premium so collected in advance shall only be adjusted on the due date of the Premium.
- Discount for Auto Premium Debit: An additional discount of 1% will be

offered on the first-year instalment due Premiums for all payments paid through any permissible electronic mode debited through an auto-debit mandate. Such discount shall be capped to a maximum of ₹100 over the Policy Year.

3.1.6.2. Change of frequency of Premium payment

You may change the frequency of Premium payments by written request. Subject to our minimum Premium requirements and except in case of Single Pay, Premiums may be paid on monthly, quarterly, half-yearly or annual mode at the Premium rates applicable on the Date of Commencement of Policy. Alteration in the frequency of Premium payment may lead to a change in the Premium. No alterations are permissible under the Policy except change in frequency of Premium payment.

The loading on Premium shall be applicable as below:

Mode	Modal Loading
Single Premium	Multiply Annual Premium Rate by 1 (i.e. No loading)
Annual	Multiply Annual Premium Rate by 1 (i.e. No loading)
Half - Yearly	Multiply Annual Premium Rate by 0.51
Quarterly	Multiply Annual Premium Rate by 0.26
Monthly	Multiply Annual Premium Rate by 0.0883

If the chosen premium paying term or policy term is not in integer years, the permissible mode of premium payment shall be restricted to Single or Monthly only.

3.1.6.3. Grace period

The Premium is due and payable by the due date specified in the Schedule. If the Premium is not paid by the due date, You may pay the same during the Grace Period without any interest. The Policy will remain in force during this period.

During the Grace Period, if the overdue Premium is not paid and the Life Insured dies, then We shall pay the Death Benefit Benefit after deducting the due Premium (without interest) for the Policy Year in which the death occurs.

3.1.7. Payment of benefits

- The benefit under the Policy shall be payable to the Claimant.
- Once the benefits under this Policy are paid to a Claimant, the same shall constitute a valid discharge of Our liability under this Policy.

3.1.8. Change in address of Policyholder or Nominee

In order to provide better services, We request you to intimate us in the event of any change in the address of the Policyholder or the Nominee.

4. PART D

4.1. Free look period

You have a free look period of 15 days from the date of receipt of the policy document and period of 30 days in case of policy obtained through electronic or distance marketing mode, to review the terms and conditions of the Policy. If You disagree to any of these terms or conditions, You have the option to return the Policy for cancellation, stating the reasons for objection and be entitled to a refund of the premiums paid without interest after deduction of proportionate risk premium, stamp duty and medical examination cost along with applicable taxes, if any.

4.2. Non-forfeiture provisions

4.2.1. Surrender Benefit: (Where surrender value is payable)

Depending on the Plan Option chosen, the Surrender Benefit shall be as follows:

I. Life/Credit Protect Option (as chosen) –

The Policy may be surrendered at any point during the Policy Term, however it shall acquire a Lapse Value only if:

- Single Premium – throughout the Policy Term;
- at least 2 (two) full years' Premiums have been paid, in case of Policy other than Single Premium

Applicable Lapse Value as per the Premium payment option chosen, shall be as below -

a) Regular Pay: Lapse Value will be zero.

b) Limited Pay:

- Where less than 2 (two) Policy Years' Premium have been paid – Lapse Value will be zero.

- Where at least 2 (two) Policy Years' Premium have been paid – Lapse Value shall be equal to -

Lapse Value Factor (LVF) * Total Premiums paid (excluding loading for modal premiums and discount, if any)

For a fully paid-up Policy, a positive Lapse Value is payable on surrender at any time after the payment of last due Premium. The Lapse Value Factor applicable at time (t) of surrender will depend on the Premium Paying Term (PPT) and the Policy Term (PT), and is given by the following formula:

$$\text{For Life Option, LVF} = 0.5 * \left[\min\left(1, \frac{PPT}{t}\right) - \frac{PPT}{PT} \right]$$

$$\text{For Credit Protect Option, LVF} = 0.5 * \left[\min\left(1, \frac{PPT}{t}\right) - \frac{PPT}{PT} \right] * \frac{\text{Effective SA}}{\text{Base SA}}$$

c) Single Pay: Lapse Value will be equal to –

Lapse Value Factor (LVF) * Single Premium paid (excluding discount, if any)

A positive Lapse Value is payable on surrender at any time after the Premium is paid. The Lapse Value Factor applicable at time (t) of surrender will depend on the Policy Term (PT) and is given by the following formula:

$$\text{For Life Option, LVF} = 0.5 * \left[1 - \frac{t}{PT} \right]$$

$$\text{For Credit Protect Option, LVF} = 0.5 * \left[1 - \frac{t}{PT} \right] * \frac{\text{Effective SA}}{\text{Base SA}}$$

Such Lapse Value is determined separately for the Base SA and each tranche of Additional Sum Assured and all conditions are applicable for each tranche separately. The total Lapse Value payable will be sum of such computed Lapse Value for each tranche.

II. Life Plus/Life Income Option (as chosen)

The Policy may be surrendered at any point during the Policy Term, however it shall acquire a Surrender Value only if:

- Single Premium – throughout the Policy Term;
- at least 2 (two) full years' Premiums have been paid, in case of Policy other than Single Premium

The Surrender Value shall be equal to the higher of the Guaranteed Surrender Value (GSV) and the Special Surrender Value (SSV).

Here,

- **Guaranteed Surrender Value (GSV)** shall be the guaranteed minimum non-negative value which is equal to

[GSV factor x Total Premiums paid (excluding loading for modal premiums and discount, if any)] less total Regular Income already paid (if applicable) up to the date of surrender

The GSV factor (expressed as a percentage of the Total Premiums Paid excluding loading for modal premiums and discount, if any) as specified in the Annexure A will depend on the Policy Year of surrender and the Policy Term.

- **Special Surrender Value (SSV)** may be declared by the Company. Given that the underlying interest rate used reflects the prevailing market conditions, the Company may revise the SSV factors (if declared) from time to time subject to the Asset and Liability committee's (ALCO) approval. However, any change in the methodology/formula for calculating SSV factors shall be subject to IRDAI approval. Any change in SSV factors shall be filed with the Authority and shall be intimated to You from time to time.

The SSV will be as below:

- **Life Plus option:** SSV factor x 105% of Total Premiums Paid (excluding loading for modal Premiums and discount, if any)
- **Life Income option:** SSV factor x (Paid-Up Terminal Value less total Regular Income already paid up to the date of surrender)

The SSV factors provided are applicable at the end of the year and shall be interpolated, on a daily basis, to arrive at the factors applicable at the time of surrender.

The Surrender Value shall be determined separately for the Base SA and each tranche of Additional Sum Assured, wherever applicable. The total Surrender Value payable will be sum of such computed Surrender Value for each tranche of Additional SA.

4.2.2. Lapsation of Policy

If the Premium is not paid within the Grace Period and if the Policy has not acquired Surrender Value, the Policy will lapse from the due date of first unpaid Premium and no benefits will be payable.

4.3. Reduced Paid-up: (Applicable only under Life Plus/Life Income Option as chosen)

Provided the Policy has acquired Surrender Value, if subsequent Premium remain unpaid at the end of Grace Period, the Policy will be converted into a Reduced Paid-up Policy by default.

Reduced Paid-up policy is a default non-forfeiture benefit. Reduced Paid-Up Policy, shall continue as Reduced Paid-up Policy unless revived within Revival Period by payment of all due Premiums together with interest as mentioned in Clause 4.4 ("Revival") of Part D. However, where a prior claim under Payor Accelerated Benefit has been paid,

- Policy shall continue provided the Reduced Paid-up Benefit is higher than the Payor Accelerated Benefit claim amount already paid.
- Policy shall lapse if the Reduced Paid-up Benefit is lesser than the Payor Accelerated Benefit claim amount already paid.

In case of Reduced Paid-up Policy, the benefit shall be payable as under:

4.3.1. In case of no prior claim under Payor Accelerated Benefit –

a. Maturity Benefit:

- Life Plus option: The benefit shall be equal to Maturity benefit as per Clause 3.1.1 of Part C.
- Life Income option: Paid-Up Terminal Value³ (as computed below) shall be paid.

b. Death Benefit: On death of the Life Insured during the Policy Term, We shall pay Reduced Paid-up Sum Assured¹.

c. Payor Accelerated Benefit: Upon diagnosis of Terminal Illness of the Life Insured as per Clause 3.1.3 of Part C, We shall pay-

- Life Plus option: 50% multiplied by Reduced Paid up Factor² multiplied by Base SA
- Life Income option: 50% multiplied by Reduced Paid-up Factor² multiplied by Effective SA

d. Survival Benefit: No survival benefit is payable.

4.3.2. In case of prior claim under Payor Accelerated Benefit –

a. Maturity Benefit:

- Life Plus option: The benefit shall be equal to Maturity benefit as per Clause 3.1.1. of Part C.
- Life Income option: Paid-Up Terminal Value³ (as computed below) shall be paid.

b. Death Benefit: On death of the Life Insured during the Policy Term, We shall pay

Reduced Paid-up Sum Assured¹ minus the Payor Accelerated Benefit amount already paid

Here,

- **1Reduced Paid-Up Sum Assured** is defined as –

Sum of Reduced Paid-Up Factor multiplied by Sum Assured, determined separately for the Base SA and for each tranche of Additional Sum Assured.

- **2Reduced Paid-Up Factor** (in respect of Base SA and each tranche) shall be equal to –

Total period for which Premiums have already been paid divided by the maximum period for which Premiums were originally payable

- **3Paid-up Terminal Value** = Reduced Paid-Up Factor multiplied by Base SA multiplied by [12 multiplied by Income Rate multiplied by (Maturity Age – Income Start Age)], where Maturity Age = Age (last birthday) of the Life Assured at Date of Maturity.

c. Payor Accelerated Benefit: No benefit shall be payable.

d. Survival Benefit: No survival benefit is payable.

e. Surrender Benefit – This benefit is same as per Clause 4.2.1 of Part D.

4.4. Revival

If there is default in Premium Payment beyond the Grace Period and subject to the Policy not having been surrendered, it may be revived, in accordance with Underwriting Policy within Revival Period but before the

Date of Maturity of Policy, subject to: (i) Your written application for revival; (ii) production of Insured's current health certificate and other evidence of insurability; and (iii) payment of all overdue Premiums with interest.

The applicable interest rate for revival is determined using the SBI (State Bank of India) [or any other public sector undertaking bank] domestic term deposit rate for tenure '1 year to less than 2 years', plus 2%. The interest rate applicable is reviewed every 6 months and gets updated as per the given formula. Any alteration in the formula will be subject to prior approval of IRDAI. The simple interest rate applicable as on 1st October 2020, is 6.90% p.a. [i.e. SBI interest rate of 4.90% (which rate may be revised from time to time) + 2%].

Upon revival, the benefits of the Policy shall be restored with effect from the date of revival.

5. PART E

Not Applicable for this Product

6. PART F

6.1. Fraud, Misstatement and Suppression

Any fraud, mis-statement or suppression of a material fact under the Policy shall be dealt in accordance with Section 45 of the Insurance Act, 1938 as amended from time to time.

The simplified version of the provisions of Section 45 of the Insurance Act, 1938 is enclosed in **Annexure 4** for reference.

6.2. Exclusions

6.2.1. Suicide

In case of death 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 Claimant shall be entitled to at least 80% of the Total Premiums Paid till the date of death or the Surrender Value available as on the date of death (if applicable) whichever is higher, provided the Policy is in force; OR
- where the Life Stage Option has been chosen, from the date of exercising the Life Stage Option, the Claimant shall be entitled to 80% of the Premiums paid (excluding applicable taxes, Rider Premiums and Extra Premiums) for the increased tranche(s). The Death Benefit based on the Base SA and any Death Benefit increased by exercising the Life Stage Option subsequently but prior to 12 months from the date of death (due to suicide) will remain payable in full.

6.2.2. Waiting Period (Applicable only if the Policy is availed under Point of Sale product norms)

If death of the Life Assured occurs during the Waiting Period, We shall refund Total Premiums Paid and the Policy will terminate with immediate effect. Waiting period shall not be applicable in case of death due to accident provided all due Premiums have been paid.

6.2.3. Payor Accelerator Benefit

No claim shall be payable if the diagnosis of Terminal Illness of the Life Insured arises directly or indirectly because of attempted suicide in the first year from inception or revival of the Policy. In case a claim under Payor Accelerator Benefit is not payable due to the above exclusion, the Policy shall continue with the applicable death cover.

6.3. Misstatement of Age

Declaration of the correct Age of the Life Insured is important for Our underwriting process and calculation of Premiums payable under the Policy. If the Age declared in the Proposal Form is found to be incorrect at any time during the Policy Term or at the time of claim, We may revise the Premium with interest and/or applicable benefits payable under the Policy in accordance with the Premium and benefits that would have been payable, if the correct Age would have made the Life Insured eligible to be covered under the Policy on the Date of Commencement of Policy. If at the correct Age the Life Insured is not insurable under this Policy pursuant to our Underwriting Policy, the Policy shall be void ab-initio and the Company will refund the Total Premiums Paid without interest after deducting all charges incurred by the Company under the Policy.

6.4. Nomination

Nomination allowed as per provisions of Section 39 of the Insurance Act 1938 as amended from time to time. The simplified version of the provisions of Section 39 is enclosed in **Annexure 3** for reference.

6.5. Assignment

Assignment shall be as per Section 38 of the Insurance Act 1938 as amended from time to time. The simplified version of the provisions of Section 38 is enclosed in **Annexure 2** for reference.

6.6. Loss of Policy document

If the Policy document is lost or destroyed, then at the request of the Policyholder, the Company will issue a duplicate Policy document duly endorsed to show that it is issued following the loss or destruction of the original Policy document. Upon the issuance of the duplicate Policy document, the original Policy document immediately and automatically ceases to have any validity. The Company will charge a fee of ₹ 250/- along with the applicable tax and surcharge/cess, for the issuance of a duplicate Policy document. These charges are subject to revision by the Company from time to time.

6.7. Taxes

All Premiums and interest payable under the policy are exclusive of applicable taxes, duties, surcharge, cesses or levies which will be entirely borne/ paid by the Policyholder, in addition to the payment of such Premium or interest. Tata AIA Life shall have the right to claim, deduct, adjust and recover the amount of any applicable tax or imposition, levied by any statutory or administrative body, from the benefits payable under the Policy.

6.8. Termination of Policy:

This Policy will terminate upon the happening of any of the following events:

1. On the date of refund of Premium under Freelook request.
2. On the date of payment of the Maturity Benefit (if applicable), death claim in accordance with the provisions of this Policy or date of intimation of repudiation of claim by Us;
3. On the expiry of the Revival Period, if the Lapsed Policy has not been revived;
4. On the date of payment of Surrender Benefit of this Policy;
5. On the date of payment of last income instalment under Death Benefit (if chosen),
6. If the stipulated Death Benefit under Life Income option or Effective Sum Assured under Credit Protect option (Clause 3.1.2 'Death Benefit' of Part C) falls below the Payor Accelerated Benefit already paid; or
7. On cancellation/ termination of this Policy by Us on grounds of fraud, misstatement and suppression of a material fact established in terms of Section 45 of the Insurance Act, 1938 as amended from time to time.

6.9. Claims

Notice of Claim – All cases of death must be notified, within a period of 90 days, to us in writing. However, We may condone delay on merit for delayed claims where the reason for delay is proved to be for reasons beyond the control of the Claimant. In case of any delay on the part of the Company to process the claim within extant regulatory timeline, We shall pay interest as may be prescribed by the IRDAI from time to time.

Please note that all death claims will be payable to the Claimant. Appropriate forms and supporting documents must be submitted, at the Claimant's expenses, within 90 days after the date the Insured event happens, unless specified otherwise. A list of primary claim documents listing the normally required documents is attached to the Policy. Submission of the listed documents, forms or other proof, however, shall not be construed as an admission of liabilities by the Company.

We reserve the right to require any additional proof and documents in support of the claim.

6.9.1. Claims requirements

Death claims requirements

For processing the claim request under this Policy, we will require the following documents:

Type of Claim	Requirement
Death (All causes of death other than the Accidental Death)	<ol style="list-style-type: none"> 1. Claimant Statement 2. Copy of Death Certificate issued by a local Municipal Authority 3. Original Policy Document 4. Copy of Claimant's Photo Identification Proof & Current Address Proof (List of acceptable photo ID and Address proofs)

Type of Claim	Requirement
Death (All causes of death other than the Accidental Death)	<p>5. Cancelled cheque with name and account number printed or cancelled cheque with copy of Bank Passbook / Bank Statement</p> <p>6. If no nomination - Proof of legal title to the claim proceeds (e.g. legal succession paper)</p> <p>Additional documents required on basis of cause of death Medical/Natural death:</p> <ol style="list-style-type: none"> 1) Attending Physician's Statement 2) Medical Records (Admission Notes, Discharge/Death Summary, Indoor Case Papers, Test Reports etc.)[#]
If Death due to Accident (to be submitted in addition to the above)	<ul style="list-style-type: none"> - Copy of the First Information Report (FIR) or Panchanama/Police complaint - Copy of Post Mortem report (PMR)/Autopsy and Viscera report - Copy of the Final Police Investigation report (FPIR)/Charge sheet
Additional documents for NRI (to be submitted in addition to the above)	<ol style="list-style-type: none"> 1) FATCACRS self-certification forms Individual 2) FATCACRS self-certification forms Non-Individual

[#]This is applicable if Life Assured was in hospital at the time of death or any time prior to the date of death.

Please submit copies of the following documents certified / attested by the issuing authority. (Original Seen Verified (OSV) by Branch Personnel will also be accepted) –

- All Police papers – Panchanama, Inquest, First Information Report and Final Investigation Report.
 - Medical Records (Admission Notes, Discharge/Death Summary, Indoor Case Papers, Test Reports etc.).
 - Postmortem report (Autopsy report) & Chemical Viscera report (certified by Police / Magistrate / Court will also be accepted)
- Copies of the other documents to be submitted by self-attestation of the claimant

Payor Accelerator Claim requirements

Terminal illness should be confirmed by the treating specialist practitioner on his written statement

along with relevant lab reports and other treatment papers which should involve the below noting's

- If insured in undergoing palliative treatment or Curative care treatment
- Status or stage of the disease
- Prognosis of the illness

Survival rate as per the diagnosis

Maturity Claim Requirements

To ensure processing the maturity payout on or before the Maturity Date, We shall consider the bank account details available in Your Policy record. If there is any change, please submit below documents sufficiently in advance, to enable us release the maturity payout on or before the Maturity Date:

- a) NEFT Form;
- b) a cancelled cheque or copy of passbook with pre-printed name and bank account number, for payout through NEFT, and
- c) a self-attested photo ID proof.

Note-

- In case the claim warrants any additional requirement, We reserve the right to call for the same.
- Notification of claim & submission of the claim requirements does not mean admission of the claim liability by the Company.
- No agent is authorized to admit any liabilities on behalf of the Company, nor to alter this list of documents or any claims requirements called for by the Company.

6.10. Claims Intimation Process

Mentioned below is a list of various mediums through which Claimant can contact us.

- a. Online claim intimation at <https://www.tataaia.com/claims/claims-process.html>
- b. WhatsApp (SMS CLAIM) to **7045669966**
- c. Email – **claims@tataaia.com** or **Customercare@tataaia.com**
- d. Call our helpline number **1-860-266-9966** (local charges apply)
- e. Visit any of our branch offices
- f. Write directly to us on following address:

Tata AIA Life Insurance Company Limited

B - Wing, 9th Floor, I-Think Techno Campus, Behind TCS, Pokhran Road No.2, Close to Eastern Express Highway, Thane (West) – 400 607, Maharashtra.

6.11. Governing Law and Jurisdiction

The Policy will be governed by and enforced in accordance with the laws of India. The competent courts in India will have exclusive jurisdiction in all matters and causes arising out of the Policy.

6.12. Material Information & Disclosures

This Policy is issued on the basis of the information provided and disclosures made in the Proposal Form, in respect of the Life Insured's health, income, occupation, education, other existing life insurance policies, etc. (as applicable) which are material and essential for the issuance of the Policy. Sharing of any incorrect information/disclosures or suppression of accurate facts by You, can result in cancellation of the Policy and/or rejection of the claim during or after Your life time.

PART G

CONSUMER INFORMATION

POLICYHOLDER'S SERVICING

With regards to any query or issue related to the Policy, the Policyholder can contact the Company through the following service avenues

- Contact your Tata AIA Life Agent/ Distributor
- Call our helpline number at **1-860-266-9966** (local charges apply)
- E-mail us at **customercare@tataaia.com**
- Visit the nearest the Tata AIA Life branch or CAMS Service Center
- Log on to Online Customer Portal by visiting www.tataaia.com
- Write to Us at – **Tata AIA Life Insurance Company Limited** B-Wing, 9th Floor, I-Think Techno Campus, Behind TCS, Pokhran Road No.2, Close to Eastern Express Highway, Thane (West) – 400 607, Maharashtra.

GRIEVANCE REDRESSAL PROCEDURE

1) Resolution of Grievances

Customers can register their grievances through multiple service avenues:

- Call our helpline number at **1-860-266-9966** (local charges apply)
Email us at life.complaints@tataaia.com
- Login to online policy account on www.tataaia.com
- Visit any of the nearest Tata AIA Life branches or CAMS Service Centers
- Contact your Tata AIA Life Agent / Distributor
- Log on to IGMS website www.igms.irda.gov.in
- Write to us on the following address:

Grievance Redressal Department Tata AIA Life Insurance Company Limited, B- wing, 9th Floor, I-Think Techno Campus, Behind TCS, Pokhran Road No.2, Close to Eastern Express Highway, Thane (West) – 400 607, Maharashtra.

- We shall acknowledge a customer's grievance within 3 business days by providing the customer with the name of the Grievance Redressal Executive who is responsible to handle the grievance.
- We shall provide the customer with an equitable resolution within 2 weeks of receipt of the grievance.

- In case customers wishes to contact us during the course of the assessment, they can contact us at any of the above mentioned touch points.
- All Tata AIA Life branches have a Grievance Redressal Officer who can be contacted for any support during the grievance redressal process

2) Escalation Mechanism

In case customers are not satisfied with the decision of the above offices, or has not received any response within the stipulated timelines, they may contact the following officials for resolution:

- 1st level of Escalation: Head - Customer Service
- 2nd level of Escalation: Grievance Redressal Officer (GRO)

For escalations, customers can email to head.customerservice@tataaia.com or write to –

Tata AIA Life Insurance Company Limited, B-Wing, 9th Floor, I-Think Techno Campus, Behind TCS, Pokhran Road No.2, Close to Eastern Express Highway, Thane (West) – 400 607, Maharashtra

We request our customers to follow the escalation mechanism in case of non-receipt of response or unsatisfactory response from the concerned persons mentioned above.

If you are not satisfied with the response or do not receive a response from us within 15 days, you may approach the Grievance Cell of the Insurance Regulatory and Development Authority of India (IRDAI) on the following contact details:

IRDAI Grievance Call Centre (IGCC) TOLL FREE NO: **155255** or **1800 4254 732**

Email ID: complaints@irdai.gov.in

You can also register your complaint online at <http://www.igms.irda.gov.in/>. Address for communication for complaints by fax/paper:

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

3) Insurance Ombudsman:

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

- Delay in settlement of claim;
- Partial or total rejection of claim;
- Dispute with regard to premium;
- Misrepresentation of policy terms and conditions;
- Legal construction of the policy in so far as dispute related to claim;
- Grievance relating to policy servicing;
- Issuance of policy which is not in conformity with proposal form;
- Non- issuance of your insurance document; and
- Any other matter resulting from the violation of provisions of the Insurance Act, 1938 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 hereinabove.

Please refer to our website www.tataaia.com for further details in this regard. The list of Ombudsman address is attached as Annexure 1

The complaint should be made 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 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. As per provision 14(3) of the Insurance Ombudsman Rules, 2017, the complaint to the Ombudsman can be made, within a period of one year provided it is not simultaneously under any litigation:

- Only if the grievance has been rejected by the Grievance Redressal Machinery of the Insurer; or
- the complainant had not received any reply within a period of one month after the Insurer received his representation; or
- the complainant is not satisfied with the reply given to him by the Insurer.

ANNEXURE A
SURRENDER VALUE FACTORS

GUARANTEED SURRENDER VALUE FACTORS:

Life Plus Plan Option – Single Pay

Policy Years/Term	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25
1	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%
2	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%
3	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%
4	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
5	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
6	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
7	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
8	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
9	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
10	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
11		90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
12			90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
13				90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
14					90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
15						90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
16							90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
17								90%	90%	90%	90%	90%	90%	90%	90%	90%
18									90%	90%	90%	90%	90%	90%	90%	90%
19										90%	90%	90%	90%	90%	90%	90%
20											90%	90%	90%	90%	90%	90%
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Policy Years/Term	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	
1	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%
2	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%
3	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%	75%
4	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
5	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
6	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
7	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
8	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
9	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
10	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
11	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
12	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
13	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
14	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
15	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
16	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%

Policy Years/Term	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40
17	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
18	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
19	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
20	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
21	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
22	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
23	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
24	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
25	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
26	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
27		90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
28			90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
29				90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
30					90%	90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
31						90%	90%	90%	90%	90%	90%	90%	90%	90%	90%
32							90%	90%	90%	90%	90%	90%	90%	90%	90%
33								90%	90%	90%	90%	90%	90%	90%	90%
34									90%	90%	90%	90%	90%	90%	90%
35										90%	90%	90%	90%	90%	90%
36											90%	90%	90%	90%	90%
37												90%	90%	90%	90%
38													90%	90%	90%
39														90%	90%
40															90%

Life Plus Plan Option – Limited Pay / Regular Pay

Policy Years/Term	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25
1	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
2	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%
3	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%
4	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
5	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
6	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
7	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
8	70%	63%	60%	58%	57%	56%	55%	54%	54%	54%	53%	53%	53%	53%	53%	52%
9	90%	77%	70%	66%	63%	61%	60%	59%	58%	57%	57%	56%	56%	55%	55%	55%
10	90%	90%	80%	74%	70%	67%	65%	63%	62%	61%	60%	59%	59%	58%	58%	57%
11		90%	90%	82%	77%	73%	70%	68%	66%	65%	63%	62%	61%	61%	60%	59%
12			90%	90%	83%	79%	75%	72%	70%	68%	67%	65%	64%	63%	63%	62%
13				90%	90%	84%	80%	77%	74%	72%	70%	68%	67%	66%	65%	64%
14					90%	90%	85%	81%	78%	75%	73%	72%	70%	69%	68%	66%
15						90%	90%	86%	82%	79%	77%	75%	73%	71%	70%	69%
16							90%	90%	86%	83%	80%	78%	76%	74%	73%	71%
17								90%	90%	86%	83%	81%	79%	77%	75%	74%
18									90%	90%	87%	84%	81%	79%	78%	76%
19										90%	90%	87%	84%	82%	80%	78%
20											90%	90%	87%	85%	83%	81%
21												90%	90%	87%	85%	83%
22													90%	90%	88%	85%
23														90%	90%	88%
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Policy Years/Term	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25
36																
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Policy Years/Term	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	
1	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
2	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%
3	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%
4	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
5	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
6	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
7	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
8	52%	52%	52%	52%	52%	52%	52%	52%	52%	51%	51%	51%	51%	51%	51%	51%
9	54%	54%	54%	54%	54%	53%	53%	53%	53%	53%	53%	53%	53%	53%	53%	53%
10	57%	56%	56%	56%	55%	55%	55%	55%	55%	54%	54%	54%	54%	54%	54%	54%
11	59%	58%	58%	58%	57%	57%	56%	56%	56%	56%	56%	55%	55%	55%	55%	55%
12	61%	61%	60%	60%	59%	59%	58%	58%	58%	57%	57%	57%	56%	56%	56%	56%
13	63%	63%	62%	61%	61%	60%	60%	60%	59%	59%	59%	58%	58%	58%	58%	58%
14	66%	65%	64%	63%	63%	62%	62%	61%	61%	60%	60%	60%	59%	59%	59%	59%
15	68%	67%	66%	65%	65%	64%	63%	63%	62%	62%	61%	61%	61%	60%	60%	60%
16	70%	69%	68%	67%	66%	66%	65%	64%	64%	63%	63%	62%	62%	62%	61%	61%
17	72%	71%	70%	69%	68%	67%	67%	66%	65%	65%	64%	64%	63%	63%	63%	63%
18	74%	73%	72%	71%	70%	69%	68%	68%	67%	66%	66%	65%	65%	64%	64%	64%
19	77%	75%	74%	73%	72%	71%	70%	69%	68%	68%	67%	67%	66%	65%	65%	65%
20	79%	77%	76%	75%	74%	73%	72%	71%	70%	69%	69%	68%	67%	67%	66%	66%
21	81%	79%	78%	77%	75%	74%	73%	72%	72%	71%	70%	69%	69%	68%	67%	67%
22	83%	82%	80%	79%	77%	76%	75%	74%	73%	72%	71%	71%	70%	69%	69%	69%
23	86%	84%	82%	80%	79%	78%	77%	76%	75%	74%	73%	72%	71%	71%	70%	70%
24	88%	86%	84%	82%	81%	80%	78%	77%	76%	75%	74%	73%	73%	72%	71%	71%
25	90%	88%	86%	84%	83%	81%	80%	79%	78%	77%	76%	75%	74%	73%	72%	72%
26	90%	90%	88%	86%	85%	83%	82%	80%	79%	78%	77%	76%	75%	75%	74%	74%
27		90%	90%	88%	86%	85%	83%	82%	81%	80%	79%	78%	77%	76%	75%	75%
28			90%	90%	88%	87%	85%	84%	82%	81%	80%	79%	78%	77%	76%	76%
29				90%	90%	88%	87%	85%	84%	83%	81%	80%	79%	78%	77%	77%
30					90%	90%	88%	87%	85%	84%	83%	82%	81%	80%	79%	79%
31						90%	90%	88%	87%	86%	84%	83%	82%	81%	80%	80%
32							90%	90%	88%	87%	86%	84%	83%	82%	81%	81%
33								90%	90%	89%	87%	86%	85%	84%	82%	82%
34									90%	90%	89%	87%	86%	85%	84%	84%
35										90%	90%	89%	87%	86%	85%	85%
36											90%	90%	89%	87%	86%	86%
37												90%	90%	89%	87%	87%
38													90%	90%	89%	89%
39														90%	90%	90%
40																90%

Life Income Option – Limited Pay

Policy Years/Term	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36
1	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
2	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%
3	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%
4	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
5	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
6	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
7	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
8	53%	53%	53%	53%	53%	52%	52%	52%	52%	52%	52%	52%	52%	52%	52%	52%	51%
9	57%	56%	56%	55%	55%	55%	54%	54%	54%	54%	54%	53%	53%	53%	53%	53%	53%
10	60%	59%	59%	58%	58%	57%	57%	56%	56%	56%	55%	55%	55%	55%	55%	54%	54%
11	63%	62%	61%	61%	60%	59%	59%	58%	58%	58%	57%	57%	57%	56%	56%	56%	56%
12	67%	65%	64%	63%	63%	62%	61%	61%	60%	60%	59%	59%	58%	58%	57%	57%	57%
13	70%	68%	67%	66%	65%	64%	63%	63%	62%	61%	61%	60%	60%	59%	59%	59%	59%

Policy Years/Term	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36
14	73%	72%	70%	69%	68%	66%	66%	65%	64%	63%	63%	62%	62%	61%	61%	60%	60%
15	77%	75%	73%	71%	70%	69%	68%	67%	66%	65%	65%	64%	63%	63%	62%	62%	61%
16	80%	78%	76%	74%	73%	71%	70%	69%	68%	67%	66%	66%	65%	64%	64%	63%	63%
17	83%	81%	79%	77%	75%	74%	72%	71%	70%	69%	68%	67%	67%	66%	65%	65%	64%
18	87%	84%	81%	79%	78%	76%	74%	73%	72%	71%	70%	69%	68%	68%	67%	66%	66%
19	90%	87%	84%	82%	80%	78%	77%	75%	74%	73%	72%	71%	70%	69%	68%	68%	67%
20	90%	90%	87%	85%	83%	81%	79%	77%	76%	75%	74%	73%	72%	71%	70%	69%	69%
21		90%	90%	87%	85%	83%	81%	79%	78%	77%	75%	74%	73%	72%	72%	71%	70%
22			90%	90%	88%	85%	83%	82%	80%	79%	77%	76%	75%	74%	73%	72%	71%
23				90%	90%	88%	86%	84%	82%	80%	79%	78%	77%	76%	75%	74%	73%
24					90%	90%	88%	86%	84%	82%	81%	80%	78%	77%	76%	75%	74%
25						90%	90%	88%	86%	84%	83%	81%	80%	79%	78%	77%	76%
26							90%	90%	88%	86%	85%	83%	82%	80%	79%	78%	77%
27								90%	90%	88%	86%	85%	83%	82%	81%	80%	79%
28									90%	90%	88%	87%	85%	84%	82%	81%	80%
29										90%	90%	88%	87%	85%	84%	83%	81%
30											90%	90%	88%	87%	85%	84%	83%
31												90%	90%	88%	87%	86%	84%
32													90%	90%	88%	87%	86%
33														90%	90%	89%	87%
34															90%	90%	89%
35																90%	90%
36																	90%
37																	
38																	
39																	
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Policy Years/Term	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53
1	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
2	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%
3	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%
4	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
5	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
6	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
7	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
8	51%	51%	51%	51%	51%	51%	51%	51%	51%	51%	51%	51%	51%	51%	51%	51%	51%
9	53%	53%	53%	53%	52%	52%	52%	52%	52%	52%	52%	52%	52%	52%	52%	52%	52%
10	54%	54%	54%	54%	54%	54%	53%	53%	53%	53%	53%	53%	53%	53%	53%	53%	53%
11	56%	55%	55%	55%	55%	55%	54%	54%	54%	54%	54%	54%	54%	54%	54%	54%	54%
12	57%	57%	56%	56%	56%	56%	56%	56%	55%	55%	55%	55%	55%	55%	55%	55%	54%
13	58%	58%	58%	58%	57%	57%	57%	57%	56%	56%	56%	56%	56%	56%	55%	55%	55%
14	60%	59%	59%	59%	58%	58%	58%	58%	58%	57%	57%	57%	57%	57%	56%	56%	56%
15	61%	61%	60%	60%	60%	59%	59%	59%	59%	58%	58%	58%	58%	58%	57%	57%	57%
16	62%	62%	62%	61%	61%	61%	60%	60%	60%	59%	59%	59%	59%	59%	58%	58%	58%
17	64%	63%	63%	63%	62%	62%	61%	61%	61%	61%	60%	60%	60%	60%	59%	59%	59%
18	65%	65%	64%	64%	63%	63%	63%	62%	62%	62%	61%	61%	61%	60%	60%	60%	60%
19	67%	66%	65%	65%	65%	64%	64%	63%	63%	63%	62%	62%	62%	61%	61%	61%	61%
20	68%	67%	67%	66%	66%	65%	65%	64%	64%	64%	63%	63%	63%	62%	62%	62%	62%
21	69%	69%	68%	67%	67%	66%	66%	66%	65%	65%	64%	64%	64%	63%	63%	63%	62%
22	71%	70%	69%	69%	68%	68%	67%	67%	66%	66%	65%	65%	65%	64%	64%	63%	63%
23	72%	71%	71%	70%	69%	69%	68%	68%	67%	67%	66%	66%	66%	65%	65%	65%	64%
24	73%	73%	72%	71%	71%	70%	69%	69%	68%	68%	67%	67%	67%	66%	66%	65%	65%
25	75%	74%	73%	72%	72%	71%	71%	70%	69%	69%	68%	68%	68%	67%	67%	66%	66%
26	76%	75%	75%	74%	73%	72%	72%	71%	71%	70%	69%	69%	69%	68%	68%	67%	67%
27	78%	77%	76%	75%	74%	74%	73%	72%	72%	71%	71%	70%	70%	69%	69%	68%	68%
28	79%	78%	77%	76%	75%	75%	74%	73%	73%	72%	72%	71%	70%	70%	70%	69%	69%
29	80%	79%	78%	77%	77%	76%	75%	74%	74%	73%	73%	72%	71%	71%	70%	70%	70%
30	82%	81%	80%	79%	78%	77%	76%	76%	75%	74%	74%	73%	72%	72%	71%	71%	70%
31	83%	82%	81%	80%	79%	78%	77%	77%	76%	75%	75%	74%	73%	73%	72%	72%	71%
32	84%	83%	82%	81%	80%	79%	79%	78%	77%	76%	76%	75%	74%	73%	73%	72%	72%
33	86%	85%	84%	82%	82%	81%	80%	79%	78%	77%	77%	76%	75%	75%	74%	74%	73%
34	87%	86%	85%	84%	83%	82%	81%	80%	79%	78%	78%	77%	76%	76%	75%	75%	74%
35	89%	87%	86%	85%	84%	83%	82%	81%	80%	79%	79%	78%	77%	77%	76%	75%	75%
36	90%	89%	87%	86%	85%	84%	83%	82%	81%	81%	80%	79%	78%	78%	77%	76%	76%
37	90%	90%	89%	87%	86%	85%	84%	83%	82%	82%	81%	80%	79%	79%	78%	77%	77%
38		90%	90%	89%	88%	86%	85%	84%	84%	83%	82%	81%	80%	80%	79%	78%	78%
39			90%	90%	89%	88%	87%	86%	85%	84%	83%	82%	81%	80%	80%	79%	78%
40				90%	90%	89%	88%	87%	86%	85%	84%	83%	82%	81%	81%	80%	79%
41					90%	90%	89%	88%	87%	86%	85%	84%	83%	82%	82%	81%	80%
42						90%	90%	89%	88%	87%	86%	85%	84%	83%	83%	82%	81%
43							90%	90%	89%	88%	87%	86%	85%	84%	83%	83%	82%
44								90%	90%	89%	88%	87%	86%	85%	84%	84%	83%
45									90%	90%	89%	88%	87%	86%	85%	85%	84%
46										90%	90%	89%	88%	87%	86%	85%	85%
47											90%	90%	89%	88%	87%	86%	86%
48												90%	90%	89%	88%	87%	86%
49													90%	90%	89%	88%	87%
50														90%	90%	89%	88%
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Policy Years/Term	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53
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Policy Years/Term	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70
1	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
2	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%
3	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%	35%
4	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
5	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
6	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
7	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
8	51%	51%	51%	51%	51%	51%	51%	51%	51%	51%	51%	51%	51%	51%	51%	51%	51%
9	52%	52%	52%	52%	52%	52%	52%	52%	52%	52%	52%	52%	52%	52%	52%	52%	52%
10	53%	53%	53%	52%	52%	52%	52%	52%	52%	52%	52%	52%	52%	52%	52%	52%	52%
11	53%	53%	53%	53%	53%	53%	53%	53%	53%	53%	53%	53%	53%	53%	53%	53%	53%
12	54%	54%	54%	54%	54%	54%	54%	54%	54%	54%	54%	54%	54%	54%	54%	54%	54%
13	55%	55%	55%	55%	55%	55%	55%	55%	55%	55%	55%	55%	55%	55%	55%	55%	55%
14	56%	56%	56%	56%	56%	55%	55%	55%	55%	55%	55%	55%	55%	55%	55%	55%	55%
15	57%	57%	57%	57%	56%	56%	56%	56%	56%	56%	56%	56%	56%	55%	55%	55%	55%
16	58%	58%	58%	57%	57%	57%	57%	57%	57%	57%	56%	56%	56%	56%	56%	56%	56%
17	59%	59%	58%	58%	58%	58%	58%	58%	57%	57%	57%	57%	57%	57%	57%	57%	56%
18	60%	59%	59%	59%	59%	59%	58%	58%	58%	58%	58%	58%	58%	58%	57%	57%	57%
19	60%	60%	60%	60%	60%	59%	59%	59%	59%	59%	59%	58%	58%	58%	58%	58%	58%
20	61%	61%	61%	61%	60%	60%	60%	60%	60%	59%	59%	59%	59%	59%	59%	59%	58%
21	62%	62%	62%	61%	61%	61%	61%	61%	60%	60%	60%	60%	60%	59%	59%	59%	59%
22	63%	63%	63%	62%	62%	62%	62%	61%	61%	61%	61%	60%	60%	60%	60%	60%	60%
23	64%	64%	63%	63%	63%	63%	62%	62%	62%	62%	61%	61%	61%	61%	60%	60%	60%
24	65%	64%	64%	64%	64%	63%	63%	63%	63%	62%	62%	62%	62%	61%	61%	61%	61%
25	66%	65%	65%	65%	64%	64%	64%	64%	63%	63%	63%	63%	62%	62%	62%	62%	62%
26	67%	66%	66%	66%	65%	65%	64%	64%	64%	64%	64%	63%	63%	63%	63%	62%	62%
27	67%	67%	67%	66%	66%	66%	65%	65%	65%	64%	64%	64%	64%	63%	63%	63%	63%
28	68%	68%	67%	67%	67%	66%	66%	66%	66%	65%	65%	65%	64%	64%	64%	64%	64%
29	69%	69%	68%	68%	68%	67%	67%	67%	66%	66%	66%	65%	65%	65%	64%	64%	64%
30	70%	70%	69%	69%	68%	68%	68%	67%	67%	67%	66%	66%	66%	65%	65%	65%	65%
31	71%	70%	70%	70%	69%	69%	68%	68%	68%	67%	67%	67%	66%	66%	66%	66%	65%
32	72%	71%	71%	70%	70%	69%	69%	69%	69%	68%	68%	68%	67%	67%	67%	66%	66%
33	73%	72%	72%	71%	71%	70%	70%	70%	69%	69%	69%	68%	68%	68%	67%	67%	67%
34	73%	73%	72%	72%	72%	71%	71%	70%	70%	70%	69%	69%	68%	68%	68%	68%	67%
35	74%	74%	73%	73%	72%	72%	72%	71%	71%	70%	70%	70%	69%	69%	68%	68%	68%
36	75%	75%	74%	74%	73%	73%	72%	72%	71%	71%	71%	70%	70%	70%	69%	69%	69%
37	76%	76%	75%	74%	74%	74%	73%	73%	72%	72%	71%	71%	70%	70%	70%	69%	69%
38	77%	76%	76%	75%	75%	74%	74%	73%	73%	72%	72%	71%	71%	70%	70%	70%	70%
39	78%	77%	77%	76%	76%	75%	75%	74%	74%	73%	73%	72%	72%	71%	71%	71%	71%
40	79%	78%	77%	77%	76%	76%	75%	75%	74%	74%	74%	73%	73%	72%	72%	71%	71%
41	80%	79%	78%	78%	77%	77%	76%	76%	75%	75%	74%	74%	73%	73%	72%	72%	72%
42	80%	80%	79%	79%	78%	77%	77%	76%	76%	75%	75%	75%	74%	74%	73%	73%	73%
43	81%	81%	80%	79%	79%	78%	78%	77%	77%	76%	76%	75%	75%	74%	74%	73%	73%
44	82%	81%	81%	80%	80%	79%	78%	78%	77%	77%	76%	76%	75%	75%	74%	74%	74%
45	83%	82%	82%	81%	80%	80%	79%	79%	78%	78%	77%	77%	76%	75%	75%	75%	75%
46	84%	83%	82%	82%	81%	81%	80%	79%	79%	78%	78%	77%	77%	76%	76%	76%	75%
47	85%	84%	83%	83%	82%	81%	81%	80%	80%	79%	79%	78%	78%	77%	77%	76%	76%
48	86%	85%	84%	83%	83%	82%	82%	81%	80%	80%	79%	79%	78%	78%	77%	77%	76%
49	87%	86%	85%	84%	84%	83%	82%	82%	81%	81%	80%	79%	79%	78%	78%	78%	77%
50	87%	87%	86%	85%	84%	84%	83%	82%	82%	81%	81%	80%	80%	79%	79%	78%	78%
51	88%	87%	87%	86%	85%	85%	84%	83%	83%	82%	81%	81%	80%	80%	79%	79%	78%
52	89%	88%	87%	87%	86%	85%	85%	84%	83%	83%	82%	82%	81%	81%	80%	80%	79%
53	90%	89%	88%	88%	87%	86%	85%	85%	84%	83%	82%	82%	81%	81%	80%	80%	80%
54	90%	90%	89%	88%	88%	87%	86%	85%	85%	84%	84%	83%	82%	81%	81%	80%	80%
55		90%	90%	89%	88%	88%	87%	86%	86%	85%	84%	84%	83%	82%	81%	81%	81%

Policy Years/Term	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70
56			90%	90%	89%	88%	88%	87%	86%	86%	85%	84%	84%	83%	83%	82%	82%
57				90%	90%	89%	88%	88%	87%	86%	86%	85%	84%	84%	83%	83%	82%
58					90%	90%	89%	88%	88%	87%	86%	86%	85%	85%	84%	83%	83%
59						90%	90%	89%	89%	88%	87%	86%	86%	85%	85%	84%	84%
60							90%	90%	89%	89%	88%	87%	87%	86%	85%	85%	84%
61								90%	90%	89%	89%	88%	87%	87%	86%	85%	85%
62									90%	90%	89%	89%	88%	87%	87%	86%	85%
63										90%	90%	89%	89%	88%	87%	87%	86%
64											90%	90%	89%	89%	88%	87%	87%
65												90%	90%	89%	89%	88%	87%
66													90%	90%	89%	89%	88%
67														90%	90%	89%	89%
68															90%	90%	89%
69																90%	90%
70																	90%

SPECIAL SURRENDER VALUE FACTORS:

Life Plus Plan Option – Single Pay

Policy Years/Term	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25
1	52%	49%	45%	42%	39%	37%	34%	32%	29%	27%	26%	24%	22%	21%	19%	18%
2	56%	52%	49%	45%	42%	39%	37%	34%	32%	30%	28%	26%	24%	22%	21%	19%
3	60%	56%	52%	49%	45%	42%	39%	37%	34%	32%	30%	28%	26%	24%	22%	21%
4	65%	60%	56%	52%	49%	45%	42%	39%	37%	34%	32%	30%	28%	26%	24%	22%
5	70%	65%	60%	56%	52%	49%	45%	42%	39%	37%	34%	32%	30%	28%	26%	24%
6	75%	70%	65%	60%	56%	52%	49%	45%	42%	39%	37%	34%	32%	30%	28%	26%
7	81%	75%	70%	65%	60%	56%	52%	49%	45%	42%	39%	37%	34%	32%	30%	28%
8	87%	81%	75%	70%	65%	60%	56%	52%	49%	45%	42%	39%	37%	34%	32%	30%
9	93%	87%	81%	75%	70%	65%	60%	56%	52%	49%	45%	42%	39%	37%	34%	32%
10	100%	93%	87%	81%	75%	70%	65%	60%	56%	52%	49%	45%	42%	39%	37%	34%
11		100%	93%	87%	81%	75%	70%	65%	60%	56%	52%	49%	45%	42%	39%	37%
12			100%	93%	87%	81%	75%	70%	65%	60%	56%	52%	49%	45%	42%	39%
13				100%	93%	87%	81%	75%	70%	65%	60%	56%	52%	49%	45%	42%
14					100%	93%	87%	81%	75%	70%	65%	60%	56%	52%	49%	46%
15						100%	93%	87%	81%	75%	70%	65%	60%	56%	52%	49%
16							100%	93%	87%	81%	75%	70%	65%	60%	56%	52%
17								100%	93%	87%	81%	75%	70%	65%	60%	56%
18									100%	93%	87%	81%	75%	70%	65%	61%
19										100%	93%	87%	81%	75%	70%	65%
20											100%	93%	87%	81%	75%	70%
21												100%	93%	87%	81%	75%
22													100%	93%	87%	81%
23														100%	93%	87%
24															100%	93%
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Policy Years/Term	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40
1	17%	16%	15%	14%	13%	12%	11%	11%	10%	9%	9%	8%	8%	7%	7%
2	18%	17%	16%	15%	14%	13%	12%	11%	11%	10%	10%	9%	8%	8%	8%
3	19%	18%	17%	16%	15%	14%	13%	12%	12%	11%	10%	10%	9%	9%	8%
4	21%	20%	18%	17%	16%	15%	14%	13%	12%	12%	11%	10%	10%	9%	9%
5	22%	21%	20%	18%	17%	16%	15%	14%	13%	12%	12%	11%	10%	10%	9%
6	24%	22%	21%	20%	18%	17%	16%	15%	14%	13%	13%	12%	11%	11%	10%
7	26%	24%	23%	21%	20%	18%	17%	16%	15%	14%	13%	13%	12%	11%	11%
8	28%	26%	24%	23%	21%	20%	19%	17%	16%	15%	14%	14%	13%	12%	11%
9	30%	28%	26%	24%	23%	21%	20%	19%	17%	16%	15%	15%	14%	13%	12%
10	32%	30%	28%	26%	24%	23%	21%	20%	19%	18%	17%	16%	15%	14%	13%
11	34%	32%	30%	28%	26%	24%	23%	21%	20%	19%	18%	17%	16%	15%	14%
12	37%	34%	32%	30%	28%	26%	25%	23%	22%	20%	19%	18%	17%	16%	15%
13	40%	37%	34%	32%	30%	28%	26%	25%	23%	22%	20%	19%	18%	17%	16%
14	42%	40%	37%	34%	32%	30%	28%	26%	25%	23%	22%	20%	19%	18%	17%
15	46%	42%	40%	37%	35%	32%	30%	28%	26%	25%	23%	22%	21%	19%	18%
16	49%	46%	43%	40%	37%	35%	32%	30%	28%	27%	25%	23%	22%	21%	20%
17	53%	49%	46%	43%	40%	37%	35%	32%	30%	28%	27%	25%	24%	22%	21%
18	56%	53%	49%	46%	43%	40%	37%	35%	33%	30%	29%	27%	25%	24%	22%
19	61%	56%	53%	49%	46%	43%	40%	37%	35%	33%	31%	29%	27%	25%	24%
20	65%	61%	56%	53%	49%	46%	43%	40%	37%	35%	33%	31%	29%	27%	25%
21	70%	65%	61%	56%	53%	49%	46%	43%	40%	37%	35%	33%	31%	29%	27%
22	75%	70%	65%	61%	56%	53%	49%	46%	43%	40%	38%	35%	33%	31%	29%
23	81%	75%	70%	65%	61%	57%	53%	49%	46%	43%	40%	38%	35%	33%	31%
24	87%	81%	75%	70%	65%	61%	57%	53%	49%	46%	43%	40%	38%	35%	33%
25	93%	87%	81%	75%	70%	65%	61%	57%	53%	49%	46%	43%	40%	38%	35%
26	100%	93%	87%	81%	75%	70%	65%	61%	57%	53%	49%	46%	43%	40%	38%
27		100%	93%	87%	81%	75%	70%	65%	61%	57%	53%	49%	46%	43%	41%
28			100%	93%	87%	81%	75%	70%	65%	61%	57%	53%	50%	46%	43%
29				100%	93%	87%	81%	75%	70%	65%	61%	57%	53%	50%	46%
30					100%	93%	87%	81%	75%	70%	65%	61%	57%	53%	50%
31						100%	93%	87%	81%	75%	70%	65%	61%	57%	53%
32							100%	93%	87%	81%	75%	70%	65%	61%	57%
33								100%	93%	87%	81%	75%	70%	65%	61%
34									100%	93%	87%	81%	75%	70%	65%
35										100%	93%	87%	81%	75%	70%
36											100%	93%	87%	81%	75%
37												100%	93%	87%	81%
38													100%	93%	87%
39														100%	93%
40															100%

Life Plus Plan Option – Limited Pay / Regular Pay

Policy Years/Term	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25
1	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
2	56%	52%	49%	45%	42%	39%	37%	34%	32%	30%	28%	26%	24%	22%	21%	19%
3	60%	56%	52%	49%	45%	42%	39%	37%	34%	32%	30%	28%	26%	24%	22%	21%
4	65%	60%	56%	52%	49%	45%	42%	39%	37%	34%	32%	30%	28%	26%	24%	22%
5	70%	65%	60%	56%	52%	49%	45%	42%	39%	37%	34%	32%	30%	28%	26%	24%
6	75%	70%	65%	60%	56%	52%	49%	45%	42%	39%	37%	34%	32%	30%	28%	26%
7	81%	75%	70%	65%	60%	56%	52%	49%	45%	42%	39%	37%	34%	32%	30%	28%
8	87%	81%	75%	70%	65%	60%	56%	52%	49%	45%	42%	39%	37%	34%	32%	30%
9	93%	87%	81%	75%	70%	65%	60%	56%	52%	49%	45%	42%	39%	37%	34%	32%
10	100%	93%	87%	81%	75%	70%	65%	60%	56%	52%	49%	45%	42%	39%	37%	34%
11		100%	93%	87%	81%	75%	70%	65%	60%	56%	52%	49%	45%	42%	39%	37%
12			100%	93%	87%	81%	75%	70%	65%	60%	56%	52%	49%	45%	42%	39%
13				100%	93%	87%	81%	75%	70%	65%	60%	56%	52%	49%	45%	42%
14					100%	93%	87%	81%	75%	70%	65%	60%	56%	52%	49%	46%
15						100%	93%	87%	81%	75%	70%	65%	60%	56%	52%	49%
16							100%	93%	87%	81%	75%	70%	65%	60%	56%	52%
17								100%	93%	87%	81%	75%	70%	65%	60%	56%
18									100%	93%	87%	81%	75%	70%	65%	61%
19										100%	93%	87%	81%	75%	70%	65%
20											100%	93%	87%	81%	75%	70%

Policy Years/Term	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25
21												100%	93%	87%	81%	75%
22													100%	93%	87%	81%
23														100%	93%	87%
24															100%	93%
25																100%
26																
27																
28																
29																
30																
31																
32																
33																
34																
35																
36																
37																
38																
39																
40																

Policy Years/Term	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40
1	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
2	18%	17%	16%	15%	14%	13%	12%	11%	11%	10%	10%	9%	8%	8%	8%
3	19%	18%	17%	16%	15%	14%	13%	12%	12%	11%	10%	10%	9%	9%	8%
4	21%	20%	18%	17%	16%	15%	14%	13%	12%	12%	11%	10%	10%	9%	9%
5	22%	21%	20%	18%	17%	16%	15%	14%	13%	12%	12%	11%	10%	10%	9%
6	24%	22%	21%	20%	18%	17%	16%	15%	14%	13%	13%	12%	11%	11%	10%
7	26%	24%	23%	21%	20%	18%	17%	16%	15%	14%	13%	13%	12%	11%	11%
8	28%	26%	24%	23%	21%	20%	19%	17%	16%	15%	14%	14%	13%	12%	11%
9	30%	28%	26%	24%	23%	21%	20%	19%	17%	16%	15%	15%	14%	13%	12%
10	32%	30%	28%	26%	24%	23%	21%	20%	19%	18%	17%	16%	15%	14%	13%
11	34%	32%	30%	28%	26%	24%	23%	21%	20%	19%	18%	17%	16%	15%	14%
12	37%	34%	32%	30%	28%	26%	25%	23%	22%	20%	19%	18%	17%	16%	15%
13	40%	37%	34%	32%	30%	28%	26%	25%	23%	22%	20%	19%	18%	17%	16%
14	42%	40%	37%	34%	32%	30%	28%	26%	25%	23%	22%	20%	19%	18%	17%
15	46%	42%	40%	37%	35%	32%	30%	28%	26%	25%	23%	22%	21%	19%	18%
16	49%	46%	43%	40%	37%	35%	32%	30%	28%	27%	25%	23%	22%	21%	20%
17	53%	49%	46%	43%	40%	37%	35%	32%	30%	28%	27%	25%	24%	22%	21%
18	56%	53%	49%	46%	43%	40%	37%	35%	33%	30%	29%	27%	25%	24%	22%
19	61%	56%	53%	49%	46%	43%	40%	37%	35%	33%	31%	29%	27%	25%	24%
20	65%	61%	56%	53%	49%	46%	43%	40%	37%	35%	33%	31%	29%	27%	25%
21	70%	65%	61%	56%	53%	49%	46%	43%	40%	37%	35%	33%	31%	29%	27%
22	75%	70%	65%	61%	56%	53%	49%	46%	43%	40%	38%	35%	33%	31%	29%
23	81%	75%	70%	65%	61%	57%	53%	49%	46%	43%	40%	38%	35%	33%	31%
24	87%	81%	75%	70%	65%	61%	57%	53%	49%	46%	43%	40%	38%	35%	33%
25	93%	87%	81%	75%	70%	65%	61%	57%	53%	49%	46%	43%	40%	38%	35%
26	100%	93%	87%	81%	75%	70%	65%	61%	57%	53%	49%	46%	43%	40%	38%
27		100%	93%	87%	81%	75%	70%	65%	61%	57%	53%	49%	46%	43%	41%
28			100%	93%	87%	81%	75%	70%	65%	61%	57%	53%	50%	46%	43%
29				100%	93%	87%	81%	75%	70%	65%	61%	57%	53%	50%	46%
30					100%	93%	87%	81%	75%	70%	65%	61%	57%	53%	50%
31						100%	93%	87%	81%	75%	70%	65%	61%	57%	53%
32							100%	93%	87%	81%	75%	70%	65%	61%	57%
33								100%	93%	87%	81%	75%	70%	65%	61%
34									100%	93%	87%	81%	75%	70%	65%
35										100%	93%	87%	81%	75%	70%
36											100%	93%	87%	81%	75%
37												100%	93%	87%	81%
38													100%	93%	87%
39														100%	93%
40															100%

Life Income Option – Limited Pay

Policy Years/Term	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36
1	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
2	28%	26%	24%	22%	21%	19%	18%	17%	16%	15%	14%	13%	12%	11%	11%	10%	10%
3	30%	28%	26%	24%	22%	21%	19%	18%	17%	16%	15%	14%	13%	12%	12%	11%	10%
4	32%	30%	28%	26%	24%	22%	21%	20%	18%	17%	16%	15%	14%	13%	12%	12%	11%
5	34%	32%	30%	28%	26%	24%	22%	21%	20%	18%	17%	16%	15%	14%	13%	12%	12%
6	37%	34%	32%	30%	28%	26%	24%	22%	21%	20%	18%	17%	16%	15%	14%	13%	13%
7	39%	37%	34%	32%	30%	28%	26%	24%	23%	21%	20%	18%	17%	16%	15%	14%	13%
8	42%	39%	37%	34%	32%	30%	28%	26%	24%	23%	21%	20%	19%	17%	16%	15%	14%
9	45%	42%	39%	37%	34%	32%	30%	28%	26%	24%	23%	21%	20%	19%	17%	16%	15%
10	49%	45%	42%	39%	37%	34%	32%	30%	28%	26%	24%	23%	21%	20%	19%	18%	17%
11	52%	49%	45%	42%	39%	37%	34%	32%	30%	28%	26%	24%	23%	21%	20%	19%	18%
12	56%	52%	49%	45%	42%	39%	37%	34%	32%	30%	28%	26%	25%	23%	22%	20%	19%
13	60%	56%	52%	49%	45%	42%	40%	37%	34%	32%	30%	28%	26%	25%	23%	22%	20%
14	65%	60%	56%	52%	49%	46%	42%	40%	37%	34%	32%	30%	28%	26%	25%	23%	22%
15	70%	65%	60%	56%	52%	49%	46%	42%	40%	37%	35%	32%	30%	28%	26%	25%	23%
16	75%	70%	65%	60%	56%	52%	49%	46%	43%	40%	37%	35%	32%	30%	28%	27%	25%
17	81%	75%	70%	65%	60%	56%	53%	49%	46%	43%	40%	37%	35%	32%	30%	28%	27%
18	87%	81%	75%	70%	65%	61%	56%	53%	49%	46%	43%	40%	37%	35%	33%	30%	29%
19	93%	87%	81%	75%	70%	65%	61%	56%	53%	49%	46%	43%	40%	37%	35%	33%	31%
20	100%	93%	87%	81%	75%	70%	65%	61%	56%	53%	49%	46%	43%	40%	37%	35%	33%
21		100%	93%	87%	81%	75%	70%	65%	61%	56%	53%	49%	46%	43%	40%	37%	35%
22			100%	93%	87%	81%	75%	70%	65%	61%	56%	53%	49%	46%	43%	40%	38%
23				100%	93%	87%	81%	75%	70%	65%	61%	57%	53%	49%	46%	43%	40%
24					100%	93%	87%	81%	75%	70%	65%	61%	57%	53%	49%	46%	43%
25						100%	93%	87%	81%	75%	70%	65%	61%	57%	53%	49%	46%
26							100%	93%	87%	81%	75%	70%	65%	61%	57%	53%	49%
27								100%	93%	87%	81%	75%	70%	65%	61%	57%	53%
28									100%	93%	87%	81%	75%	70%	65%	61%	57%
29										100%	93%	87%	81%	75%	70%	65%	61%
30											100%	93%	87%	81%	75%	70%	65%
31												100%	93%	87%	81%	75%	70%
32													100%	93%	87%	81%	75%
33														100%	93%	87%	81%
34															100%	93%	87%
35																100%	93%
36																	100%
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61																	
62																	

Policy Years/Term	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36
63																	
64																	
65																	
66																	
67																	
68																	
69																	
70																	

Policy Years/Term	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53
1	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
2	9%	8%	8%	8%	7%	7%	6%	6%	6%	5%	5%	5%	5%	5%	5%	5%	4%
3	10%	9%	9%	8%	8%	7%	7%	7%	6%	6%	6%	6%	5%	5%	5%	5%	5%
4	10%	10%	9%	9%	8%	8%	7%	7%	7%	6%	6%	6%	6%	5%	5%	5%	5%
5	11%	10%	10%	9%	9%	8%	8%	8%	7%	7%	7%	6%	6%	6%	6%	6%	5%
6	12%	11%	11%	10%	9%	9%	8%	8%	8%	7%	7%	7%	6%	6%	6%	6%	6%
7	13%	12%	11%	11%	10%	10%	9%	9%	8%	8%	8%	7%	7%	7%	6%	6%	6%
8	14%	13%	12%	11%	11%	10%	10%	9%	9%	8%	8%	8%	7%	7%	7%	7%	6%
9	15%	14%	13%	12%	12%	11%	10%	10%	9%	9%	9%	8%	8%	8%	7%	7%	7%
10	16%	15%	14%	13%	12%	12%	11%	11%	10%	10%	9%	9%	8%	8%	8%	8%	7%
11	17%	16%	15%	14%	13%	12%	12%	11%	11%	10%	10%	9%	9%	9%	8%	8%	8%
12	18%	17%	16%	15%	14%	13%	13%	12%	11%	11%	10%	10%	10%	9%	9%	9%	8%
13	19%	18%	17%	16%	15%	14%	14%	13%	12%	12%	11%	11%	10%	10%	9%	9%	9%
14	20%	19%	18%	17%	16%	15%	14%	14%	13%	12%	12%	11%	11%	10%	10%	9%	9%
15	22%	21%	19%	18%	17%	16%	15%	15%	14%	13%	13%	12%	12%	11%	11%	10%	10%
16	23%	22%	21%	20%	18%	17%	16%	16%	15%	14%	13%	13%	12%	12%	11%	11%	11%
17	25%	24%	22%	21%	20%	19%	18%	17%	16%	15%	14%	14%	13%	13%	12%	12%	11%
18	27%	25%	24%	22%	21%	20%	19%	18%	17%	16%	15%	15%	14%	13%	12%	12%	12%
19	29%	27%	25%	24%	22%	21%	20%	19%	18%	17%	16%	16%	15%	14%	14%	13%	13%
20	31%	29%	27%	25%	24%	23%	21%	20%	19%	18%	17%	17%	16%	15%	15%	14%	14%
21	33%	31%	29%	27%	26%	24%	23%	22%	20%	19%	18%	18%	17%	16%	16%	15%	14%
22	35%	33%	31%	29%	27%	26%	24%	23%	22%	21%	20%	19%	18%	17%	16%	16%	15%
23	38%	35%	33%	31%	29%	28%	26%	25%	23%	22%	21%	20%	19%	18%	17%	17%	16%
24	40%	38%	35%	33%	31%	29%	28%	26%	25%	23%	22%	21%	20%	19%	19%	18%	17%
25	43%	40%	38%	35%	33%	31%	30%	28%	26%	25%	24%	23%	21%	21%	20%	19%	18%
26	46%	43%	40%	38%	36%	33%	32%	30%	28%	27%	25%	24%	23%	22%	21%	20%	19%
27	49%	46%	43%	41%	38%	36%	34%	32%	30%	28%	27%	25%	24%	23%	22%	21%	21%
28	53%	50%	46%	43%	41%	38%	36%	34%	32%	30%	29%	27%	26%	25%	24%	23%	22%
29	57%	53%	50%	46%	44%	41%	38%	36%	34%	32%	30%	29%	27%	26%	25%	24%	23%
30	61%	57%	53%	50%	47%	44%	41%	39%	36%	34%	32%	31%	29%	28%	27%	25%	25%
31	65%	61%	57%	53%	50%	47%	44%	41%	39%	37%	35%	33%	31%	30%	28%	27%	26%
32	70%	65%	61%	57%	53%	50%	47%	44%	41%	39%	37%	35%	33%	31%	30%	29%	28%
33	75%	70%	65%	61%	57%	53%	50%	47%	44%	42%	39%	37%	35%	33%	32%	30%	29%
34	81%	75%	70%	65%	61%	57%	54%	50%	47%	44%	42%	39%	37%	36%	34%	32%	31%
35	87%	81%	75%	70%	65%	61%	57%	54%	50%	47%	45%	42%	40%	38%	36%	34%	33%
36	93%	87%	81%	75%	70%	66%	61%	57%	54%	51%	48%	45%	42%	40%	38%	36%	35%
37	100%	93%	87%	81%	75%	70%	66%	61%	58%	54%	51%	48%	45%	43%	41%	39%	37%
38		100%	93%	87%	81%	75%	70%	66%	61%	58%	54%	51%	48%	45%	43%	41%	39%
39			100%	93%	87%	81%	75%	70%	66%	62%	58%	54%	51%	48%	46%	44%	42%
40				100%	93%	87%	81%	75%	70%	66%	62%	58%	55%	52%	49%	46%	44%
41					100%	93%	87%	81%	75%	70%	66%	62%	58%	55%	52%	49%	47%
42						100%	93%	87%	81%	75%	71%	66%	62%	58%	55%	52%	50%
43							100%	93%	87%	81%	75%	71%	66%	62%	59%	56%	53%
44								100%	93%	87%	81%	76%	71%	66%	63%	59%	56%
45									100%	93%	87%	81%	76%	71%	67%	63%	60%
46										100%	93%	87%	81%	76%	71%	67%	64%
47											100%	93%	87%	81%	76%	71%	67%
48												100%	93%	87%	81%	76%	72%
49													100%	93%	87%	81%	76%
50														100%	93%	87%	81%
51															100%	93%	87%
52																100%	93%
53																	100%

Policy Years/Term	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53
54																	
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62																	
63																	
64																	
65																	
66																	
67																	
68																	
69																	
70																	

Policy Years/Term	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70
1	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
2	4%	4%	4%	4%	4%	4%	4%	4%	4%	4%	4%	4%	4%	4%	4%	4%	4%
3	5%	5%	4%	4%	4%	4%	4%	4%	4%	4%	4%	4%	4%	4%	4%	4%	4%
4	5%	5%	5%	5%	5%	5%	4%	4%	4%	4%	4%	4%	4%	4%	4%	4%	4%
5	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%
6	6%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%
7	6%	6%	6%	6%	6%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%	5%
8	6%	6%	6%	6%	6%	6%	6%	6%	6%	6%	6%	6%	6%	6%	6%	6%	6%
9	7%	7%	6%	6%	6%	6%	6%	6%	6%	6%	6%	6%	6%	6%	6%	6%	6%
10	7%	7%	7%	7%	7%	7%	7%	6%	6%	6%	6%	6%	6%	6%	6%	6%	6%
11	8%	7%	7%	7%	7%	7%	7%	7%	7%	7%	7%	7%	7%	7%	7%	7%	7%
12	8%	8%	8%	8%	8%	7%	7%	7%	7%	7%	7%	7%	7%	7%	7%	7%	7%
13	9%	8%	8%	8%	8%	8%	8%	8%	8%	8%	8%	8%	8%	8%	8%	8%	8%
14	9%	9%	9%	9%	9%	8%	8%	8%	8%	8%	8%	8%	8%	8%	8%	8%	8%
15	10%	10%	9%	9%	9%	9%	9%	9%	9%	9%	9%	9%	9%	9%	9%	9%	9%
16	10%	10%	10%	10%	10%	9%	9%	9%	9%	9%	9%	9%	9%	9%	9%	9%	9%
17	11%	11%	11%	10%	10%	10%	10%	10%	10%	10%	10%	10%	10%	10%	10%	10%	10%
18	12%	11%	11%	11%	11%	11%	11%	10%	10%	10%	10%	10%	10%	10%	10%	10%	10%
19	12%	12%	12%	12%	11%	11%	11%	11%	11%	11%	11%	11%	11%	11%	11%	11%	11%
20	13%	13%	13%	12%	12%	12%	12%	12%	12%	12%	12%	12%	11%	11%	11%	11%	11%
21	14%	14%	13%	13%	13%	13%	13%	12%	12%	12%	12%	12%	12%	12%	12%	12%	12%
22	15%	14%	14%	14%	14%	13%	13%	13%	13%	13%	13%	13%	13%	13%	13%	13%	13%
23	16%	15%	15%	15%	14%	14%	14%	14%	14%	14%	14%	14%	14%	14%	14%	14%	14%
24	17%	16%	16%	16%	15%	15%	15%	15%	14%	14%	14%	14%	14%	14%	14%	14%	14%
25	18%	17%	17%	16%	16%	16%	16%	16%	15%	15%	15%	15%	15%	15%	15%	15%	15%
26	19%	18%	18%	17%	17%	17%	17%	16%	16%	16%	16%	16%	16%	16%	16%	16%	16%
27	20%	19%	19%	18%	18%	18%	17%	17%	17%	17%	17%	17%	17%	17%	17%	17%	17%
28	21%	20%	20%	19%	19%	19%	18%	18%	18%	18%	18%	18%	18%	18%	18%	18%	18%
29	22%	22%	21%	21%	20%	20%	20%	19%	19%	19%	19%	19%	19%	19%	19%	19%	19%
30	24%	23%	22%	22%	21%	21%	21%	20%	20%	20%	20%	20%	20%	20%	20%	20%	20%
31	25%	24%	24%	23%	23%	22%	22%	22%	21%	21%	21%	21%	21%	21%	21%	21%	21%
32	27%	26%	25%	24%	24%	23%	23%	23%	23%	22%	22%	22%	22%	22%	22%	22%	22%
33	28%	27%	26%	26%	25%	25%	24%	24%	24%	24%	24%	24%	24%	23%	23%	23%	23%
34	30%	29%	28%	27%	27%	26%	26%	25%	25%	25%	25%	25%	25%	25%	25%	25%	25%
35	32%	31%	30%	29%	28%	28%	27%	27%	27%	26%	26%	26%	26%	26%	26%	26%	26%
36	34%	32%	31%	31%	30%	29%	29%	28%	28%	28%	28%	28%	28%	28%	28%	28%	28%
37	36%	34%	33%	32%	31%	31%	30%	30%	30%	29%	29%	29%	29%	29%	29%	29%	29%
38	38%	36%	35%	34%	33%	33%	32%	32%	31%	31%	31%	31%	31%	31%	31%	31%	31%
39	40%	38%	37%	36%	35%	34%	34%	33%	33%	33%	33%	32%	32%	32%	32%	32%	32%
40	42%	41%	39%	38%	37%	36%	36%	35%	35%	35%	34%	34%	34%	34%	34%	34%	34%
41	45%	43%	42%	40%	39%	38%	38%	37%	37%	36%	36%	36%	36%	36%	36%	36%	36%
42	48%	46%	44%	43%	41%	40%	40%	39%	39%	38%	38%	38%	38%	38%	38%	38%	38%
43	50%	48%	47%	45%	44%	43%	42%	41%	41%	40%	40%	40%	40%	40%	40%	40%	40%
44	54%	51%	49%	48%	46%	45%	44%	43%	43%	43%	42%	42%	42%	42%	42%	42%	42%
45	57%	54%	52%	50%	49%	48%	47%	46%	45%	45%	44%	44%	44%	44%	44%	44%	44%

Tata AIA Life Insurance Sampoorna Raksha Supreme (UIN: 110N160V02) • IRDA of India Regn no. 110

Policy Years/Term	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70
46	60%	58%	55%	53%	52%	50%	49%	48%	48%	47%	47%	47%	46%	46%	46%	46%	46%
47	64%	61%	58%	56%	54%	53%	52%	51%	50%	49%	49%	49%	49%	49%	49%	49%	49%
48	68%	65%	62%	59%	57%	55%	54%	53%	52%	52%	51%	51%	51%	51%	51%	51%	51%
49	72%	68%	65%	62%	60%	58%	57%	56%	55%	54%	54%	53%	53%	53%	53%	53%	53%
50	77%	72%	69%	66%	63%	61%	60%	58%	57%	57%	56%	56%	56%	55%	55%	55%	55%
51	81%	77%	73%	69%	67%	64%	62%	61%	60%	59%	58%	58%	58%	58%	58%	58%	58%
52	87%	82%	77%	73%	70%	67%	65%	64%	62%	61%	61%	60%	60%	60%	60%	60%	60%
53	93%	87%	82%	77%	74%	71%	68%	66%	65%	64%	63%	63%	62%	62%	62%	62%	62%
54	100%	93%	87%	82%	78%	74%	71%	69%	68%	67%	66%	65%	65%	65%	64%	64%	64%
55		100%	93%	87%	82%	78%	75%	72%	71%	69%	68%	68%	67%	67%	67%	67%	67%
56			100%	93%	87%	82%	79%	76%	73%	72%	71%	70%	69%	69%	69%	69%	69%
57				100%	93%	87%	83%	79%	76%	75%	73%	72%	72%	71%	71%	71%	71%
58					100%	93%	87%	83%	80%	77%	76%	75%	74%	74%	73%	73%	73%
59						100%	93%	88%	83%	80%	78%	77%	76%	76%	75%	75%	75%
60							100%	93%	88%	84%	81%	80%	78%	78%	77%	77%	77%
61								100%	93%	88%	84%	82%	81%	80%	79%	79%	79%
62									100%	93%	88%	85%	83%	82%	81%	81%	81%
63										100%	93%	88%	86%	84%	83%	83%	82%
64											100%	93%	89%	86%	85%	84%	84%
65												100%	93%	89%	87%	85%	85%
66													100%	93%	89%	87%	86%
67														100%	93%	89%	87%
68															100%	93%	90%
69																100%	93%
70																	100%

ANNEXURE- 1

NAMES OF OMBUDSMAN AND ADDRESSES OF OMBUDSMAN CENTRES

AHMEDABAD - Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th Floor, Tilak Marg, Relief Road, Ahmedabad, 380001. Tel: 079-25501201/02/05/06 Fax : 079-27546142 Email: bimalokpal.ahmedabad@cioins.co.in (State of Gujarat and Union Territories of Dadra & Nagar Haveli and Daman and Diu.) **BENGALURU** - Office of the Insurance Ombudsman, J24th Main Road, Jeevan Soudha Bldg.,JP Nagar, 1st Phase, Ground Floor Bengaluru – 560 078. Tel.: 080-26652049/26652048Email: bimalokpal.bengaluru@ecoi.co.in. (State of Karnataka) **BHOPAL** - Office of the Insurance Ombudsman, 2nd Floor, Janak Vihar Complex, 6, Malviya Nagar, Bhopal(M.P)-462 003. Tel.: 0755-2769201/9202 Fax : 0755-2769203 Email: bimalokpal.bhopal@ecoi.co.in (States of Madhya Pradesh and Chattisgarh.) **BHUBANESHWAR** - Office of the Insurance Ombudsman, 62, Forest Park, Bhubaneshwar-751 009. Tel.: 0674-2596455/2596003 Fax : 0674-2596429 Email: bimalokpal.bhubaneswar@ecoi.co.in (State of Orissa). **CHANDIGARH** - Office of the Insurance Ombudsman, S.C.O. No.101-103,2nd Floor, Batra Building, Sector 17-D, Chandigarh-160017. Tel.: 0172-2706468/2772101 Fax : 0172-2708274 Email:bimalokpal.chandigarh@ecoi.co.in (States of Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir and Union territory of Chandigarh.) **CHEENNAI**- Office of the Insurance Ombudsman, Fathima Akhtar Court, 4th Floor, 453 (old 312), Anna Salai, Teynampet, Chennai-600 018.Tel.: 044-24333668 /24335284 Fax : 044-24333664 Email: bimalokpal.chennai@ecoi.co.in [State of Tamil Nadu and Union Territories - Pondicherry Town and Karaikal (which are part of Union Territory of Pondicherry).] **DELHI**- Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building,, Asaf Ali Road, New Delhi-110 002. Tel.: 011-011-23234057/23232037 Fax : 011-23230858 Email: bimalokpal.delhi@ecoi.co.in (States of Delhi) **GUWAHATI** - Office of the Insurance Ombudsman, “Jeevan Nivesh”, 5th Floor, S.S. Road, Guwahati-781 001 Tel.: 0361-2132204/5 Fax : 0361-2732937 Email: bimalokpal.guwahati@ecoi.co.in (States of Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.) **HYDERABAD** - Office of the Insurance Ombudsman, 6-2-46, 1st Floor, Moin Court, A.C. Guards, Lakdi-Ka-Pool, Hyderabad-500 004. Tel : 040-65504123/23312122 Fax: 040-23376599 Email: bimalokpal.hyderabad@ecoi.co.in (States of Andhra Pradesh and Union Territory of Yanam – a part of the Union Territory of Pondicherry.) **JAIPUR**-Office of the Insurance Ombudsman, Ground Floor, Jeevan Nidhi II,

Bhawani Singh Road, Jaipur – 302005 Tel : 0141-2740363 Email: bimalokpal.jaipur@ecoi.co.in (State of Rajasthan) **ERNAKULAM** - Office of the Insurance Ombudsman, 2nd Floor, CC 27/2603, Pulinat Bldg., M.G. Road, Ernakulam-682 015. Tel : 0484-2358759/2359338 Fax : 0484-2359336 Email: bimalokpal.ernakulam@ecoi.co.in [State of Kerala and Union Territory of (a) Lakshadweep (b) Mahe-a part of Union Territory of Pondicherry.] **KOLKATA** - Office of the Insurance Ombudsman, Hindustan Building, Annexe, 4th Floor, C.R. Avenue, Kolkata-700 072. Tel : 033-22124339/22124346 Fax : 033-22124341 Email: bimalokpal.kolkata@ecoi.co.in (States of West Bengal, Bihar, Sikkim, Jharkhand and Union Territories of Andaman and Nicobar Islands.) **LUCKNOW**- Office of the Insurance Ombudsman,Jeevan Bhawan, Phase-2, 6th Floor, Nawal Kishore Road, Hazarhatganj, Lucknow-226 001. Tel : 0522 -2231331/2231330 Fax : 0522-2231310 Email: bimalokpal.lucknow@ecoi.co.in (States of Uttar Pradesh and Uttaranchal.) **MUMBAI** - Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S.V. Road, Santacruz(W), Mumbai 400054. Tel : 022-26106960/26106552 Fax : 022-26106052 Email: bimalokpal.mumbai@ecoi.co.in (State of Goa and Mumbai Metropolitan Region including Navi Mumbai and Thane) **PUNE** - Office of the Insurance Ombudsman,3rd Floor, Jeevan Darshan Bldg,N.C. Kelkar Road,Narayanpet, Pune – 411030. Tel: 020-41312555Email: bimalokpal.pune@ecoi.co.in (State of Maharashtra including Navi Mumbai and Thane and excluding Mumbai Metropolitan Region.) **NOIDA** - Office of the Insurance Ombudsman,4th Floor, Bhagwan Sahai Palace,Main Road, Naya Bans, Sector-15,Noida - 201301.Tel: 0120-2514250/51/53Email: bimalokpal.noida@ecoi.co.in (State of Uttaranchal and the following Districts of Uttar Pradesh:Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.) **PATNA** - Office of the Insurance Ombudsman, 1st Floor, Kalpana Arcade Building, Bazar Samiti Road, Bahadurpur, Patna – 800006, Tel No: 06122680952, Email id : bimalokpal.patna@ecoi.co.in.(Bihar, Jharkhand.)

For further information or latest updated list of Ombudsman Office addresses, kindly visit the IRDAI website <http://www.Policyholder.gov.in/> - Ombudsman / List of Insurance Ombudsmen OR our website www.tataaia.com

ANNEXURE 2

A. 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 by Insurance Laws (Amendment) Act, 2015. The extant provisions in this regard are as follows:

01. This Policy may be transferred/assigned, wholly or in part, with or without consideration.
02. 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.
03. 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.
04. The assignment must be signed by the transferor or assignor or duly authorized agent and attested by at least one witness.
05. 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.
06. Fee to be paid for assignment or transfer can be specified by the Authority through Regulations.
07. 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.
08. 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.
09. 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 Life Assured OR
 - ii. the Life Assured surviving the term of the Policy

Such conditional assignee will not be entitled to obtain a loan on Policy or surrender the Policy. This provision will prevail notwithstanding any law or custom having force of law which is contrary to the above position.
14. In other cases, the insurer shall, subject to terms and conditions of assignment, recognize the transferee or assignee named in the notice as the absolute transferee or assignee and such person
 - a. shall be subject to all liabilities and equities to which the transferor or assignor was subject to at the date of transfer or assignment

and

- b. may institute any proceedings in relation to the Policy
- c. obtain loan under the Policy or surrender the Policy without obtaining the consent of the transferor or assignor or making him a party to the proceedings
15. Any rights and remedies of an assignee or transferee of a life Insurance Policy under an assignment or transfer effected before commencement of the Insurance Laws (Amendment) Act, 2015 shall not be affected by this section.

[Disclaimer: This is not a comprehensive list of amendments of Insurance Laws (Amendment) Act, 2015 and only a simplified version prepared for general information. Policyholders are advised to refer to Insurance Laws (Amendment) Act, 2015 for complete and accurate details.]

ANNEXURE 3

B. 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 by Insurance Laws (Amendment) Act, 2015. 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 Life Assured 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 commencement of Insurance Laws (Amendment) Act, 2015.

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 Laws (Amendment) Act, 2015., 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 of amendments of Insurance Laws (Amendment) Act, 2015 and only a simplified version prepared for general information. Policyholders are advised to refer to Insurance Laws (Amendment) Act, 2015 for complete and accurate details.]

ANNEXURE 4

C. 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 by Insurance Laws (Amendment) Act, 2015 are as follows:

01. No Policy of Life Insurance shall be called in question on any ground whatsoever after expiry of 3 yrs 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.

02. 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 Life Assured or legal representative or nominee or assignees of insured, as applicable, mentioning the ground and materials on which such decision is based.

03. Fraud means any of the following acts committed by Life Assured 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 Life Assured does not believe to be true;
- b. The active concealment of a fact by the Life Assured 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.

04. Mere silence is not fraud unless, depending on circumstances of the case, it is the duty of the Life Assured or his agent keeping silence to speak or silence is in itself equivalent to speak.

05. No Insurer shall repudiate a life Insurance Policy on the ground of Fraud, if the Life Assured/ 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.

06. 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 Life Assured 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 Life Assured 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.

07. 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 Life Assured or legal representative or nominee or assignees of insured, within a period of 90 days from the date of repudiation.

08. 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.

09. 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 not a comprehensive list of amendments of Insurance Laws (Amendment) Act, 2015. and only a simplified version prepared for general information. Policyholders are advised to refer to Insurance Laws (Amendment) Act, 2015 for complete and accurate details.]

Tata AIA Life Insurance Non-Linked Comprehensive Protection Rider

PART B

Tata AIA Life Insurance Non-Linked Comprehensive Protection Rider is a non-linked, non-participating Individual Health Rider.

DEFINITIONS

The words and phrases listed below will have the meanings attributed to them wherever they appear in this Rider unless the context otherwise requires. The terms used in this Rider but not defined will derive their meaning from the Policy.

1. **"Age"** means age as on the last birthday; i.e. the age of the Life Insured in completed years as on Date of Commencement of Policy and is as shown in the Policy Schedule.
2. **"Annualised Premium"** means the Rider Premium payable in a year chosen by the Policyholder, excluding the taxes, underwriting extra premiums and loadings for modal Rider Premium, if any, as specified in the Schedule.
3. **"Claimant"** means the person entitled to receive the Policy benefits and includes the Policyholder, the nominee, the assignee, the legal heir, the legal representative(s) or the holder(s) of succession certificate as the case may be;
4. **"Coverage Term"** means the term in respect of the chosen Benefit Option as specified in the Schedule;
5. **"Insured Amount"** shall be -
 - a) **Combination of Lump sum and Income:** Highest of:
 - 11 times the Annualised Premium for Limited Pay/Regular Pay and 1.25 times for Single Premium [excluding the underwriting extra premiums, modal loading and applicable taxes, cess or levies (if any)] for the respective Benefit Option.
 - 105% of Total Premiums Paid (Excluding loading for modal Rider Premiums) up to the date of occurrence of the insured event.
 - Sum Assured under Benefit Option.
 - b) **Partner Care:** Equal to the Sum Assured under Benefit Option as specified in the Schedule.
 - c) **Waiver of Premium Benefit** – The outstanding future Premium under the Base Plan, Rider/s and any attached Benefit Option/s, if any. In case the payout under Waiver of Premium Benefit is triggered, the Premiums waived shall be added to the Premiums paid by You for the calculation of the Insured amount for that condition.
6. **"IRDAI"** means the Insurance Regulatory and Development Authority of India;
7. **"Life Insured"** shall mean the person insured under the respective Benefit Option as specified in the Schedule;
8. **"Maturity/Expiry Date"** means the date specified in the Schedule, on which the Coverage Term expires;
9. **"Policy/Base Plan"** means the base policy to which this Rider is attached;
10. **"Rider"** means this rider contract containing these terms and conditions;
11. **"Rider Premium"** means an amount specified in the Schedule against respective Benefit Option, payable by You, by the due dates to secure the benefits under the Rider, excluding applicable taxes, cesses or levies, if any;
12. **"Sum Assured"** refers to the sum assured under respective Benefit Option as specified in the Schedule.
13. **"Schedule"** means the Policy schedule and any endorsements attached to and forming part of the Base Plan and Rider and if any, updated Schedule is issued, then, the Schedule latest in time;
14. **"Survival Period"** in respect of a chosen Benefit Option shall be:

Benefit option	Survival Period (from the date of diagnosis of illness/actual undergoing of procedure)
CritiCare Plus Benefit	30 days

15. **"Total Premiums Paid"** shall be defined as the sum of all the Premiums paid to date in respect of chosen Benefit Option/s, excluding underwriting extra premiums and applicable taxes, cesses or levies, if any.
16. **"Underwriting Policy"** means an underwriting policy approved by Our board of directors;
17. **"We", "Us" or "Our"** means Tata AIA Life Insurance Company Limited; and
18. **"You", "Your" or "Policyholder"** means the policyholder as named in

the Schedule, who is the policyholder under the Base Plan and Rider.

The capitalized words used but not defined herein, shall borrow meaning as per the term and conditions of the Policy.

PART C

1. BENEFITS

The benefits shall depend on the Benefit Option/s chosen by You, which cannot be changed once chosen. Subject to insurable interest between the Policyholder and the Life Insured, and as per the Board Approved Underwriting Policy, You may propose to avail additional Benefit Option/s under the Rider on one or more lives (may or may not include coverage on self), except in 'CritiCare Benefit', where the Life Insured under the Benefit Option must be the same as Life Insured under the Base Plan. Such Benefit Option can be added:

- a) In case of Single Pay: at the inception or any policy anniversary of the Base Plan, post premium payment term of the Base Plan provided the Base Plan is fully paid-up.
- b) In case of Non-Single Pay: at the inception or any policy anniversary of the Base Plan during the premium payment term of the Base Plan.

If there is an overlapping benefit between the Base Plan and the Benefit option, the Benefit option shall not be offered.

At no point both unit-deduction rider and this rider shall be allowed to be attached during the Policy Term of a unit-linked policy.

Provided the Rider/Base Plan is in force, the following benefit(s) shall be payable:

I. TERM BENEFIT WITH ACCELERATED TERMINAL ILLNESS

In the case of death or Diagnosis of Terminal Illness (as detailed in Annexure A) of the Life Insured, the Insured Amount shall be payable.

This benefit is payable only once during the Coverage Term and shall terminate upon death or Diagnosis of Terminal Illness of the Life Insured or expiry of the Coverage Term, whichever is earlier.

II. ACCIDENTAL DEATH BENEFIT

In the event of the death of the Life Insured due to an Accident (as detailed in Annexure A) during the Coverage Term, We shall pay the Insured Amount, provided the death occurs within 180 days from the date of that Accident.

The benefit shall be payable even if the Accident takes place within the Coverage Term and the death occurs beyond the Coverage Term, provided the date of death is within 180 days of the Accident.

DOUBLE BENEFIT

We shall pay twice the amount of this benefit if the death occurs under any of the following circumstances:

1. While the Life Insured is riding as a fare paying passenger on commercially licensed public land transportation over an established route such as a bus, tram or train. A taxi or any form of transport chartered for private travel is excluded;
2. While the Life Insured is in an elevator car (elevators in mines, rigs and on construction sites excluded) duly certified to carry passengers;
3. As a direct result of the burning of the following public buildings only: theatre, cinema, public auditorium, hotel, school and hospital; or
4. When the Life Insured is on a commercial passenger airline on a regular scheduled passenger trip over its established passenger route.

This benefit is payable only once during the Coverage Term and shall terminate upon death of the Life Insured or expiry of the Coverage Term, whichever earlier.

III. ACCIDENTAL TOTAL AND PERMANENT DISABILITY BENEFIT

In the event of the Total and Permanent Disability (as detailed in Annexure A) of the Life Insured due to an Accident within the Coverage Term, the Insured Amount shall be payable, provided the Total and Permanent Disability occurs within 180 days from the date of that Accident.

The benefit shall be payable even if the Accident takes place within the Coverage Term and the Total and Permanent Disability occurs beyond the Coverage Term, provided the date of death is within 180 days of the Accident.

This benefit is payable only once during the Coverage Term and shall terminate upon payment of benefit or expiry of the Coverage Term, whichever earlier.

DOUBLE BENEFIT

If you have not chosen Waiver of Premium Benefit, We shall pay twice the

amount of this benefit if the disability occurs under any of the following circumstances:

1. While the Life Insured is riding as a fare paying passenger on commercially licensed public land transportation over an established route such as a bus, tram or train. A taxi or any form of transport chartered for private travel is excluded.
2. While the Life Insured is in an elevator car (elevators in mines, rigs and on construction sites excluded) duly certified to carry passengers;
3. As a direct result of the burning of the following public buildings only: theatre, cinema, public auditorium, hotel, school and hospital; or
4. When the Life Insured is on a commercial passenger airline on a regular scheduled passenger trip over its established passenger route.

IV. CRITICARE BENEFIT

It accelerates the payout of death benefit under the Base Plan upon first Diagnosis of or actual undergoing of any of the below listed illnesses or procedure (as explained in Annexure A):

No	Illness / Procedure
	Cancer:
1	Cancer of Specified Severity
	Cardiac Conditions:
2	Myocardial Infarction (First Heart Attack of specified severity)
3	Open Chest CABG (Coronary Artery Bypass Graft)
4	Open Heart Replacement or Repair of Heart Valves
5	Major surgery of Aorta
6	Heart transplant
7	Cardiomyopathy (of specified severity)
8	Stroke resulting into permanent symptoms
9	Primary (Idiopathic) Pulmonary Hypertension
	Critical Illness:
10	Apallic Syndrome
11	Benign Brain Tumor
12	Blindness
13	Severe Rheumatoid Arthritis
14	End Stage Lung Failure
15	Coma of Specified Severity
16	End Stage Liver Failure
17	Kidney Failure requiring Regular Dialysis
18	Encephalitis
19	Third Degree Burns
20	Major Head Trauma
21	Major Organ (less heart)/ Bone Marrow Transplant
22	Permanent Paralysis of Limbs
23	Loss of limbs
24	Fulminant Viral Hepatitis
25	Alzheimer's Disease
26	Aplastic Anaemia
27	Deafness
28	Loss of Speech
29	Medullary Cystic Kidney Disease
30	Motor Neuron Disease with Permanent Symptoms
31	Multiple Sclerosis with Persisting Symptoms
32	Muscular Dystrophy
33	Parkinson's Disease
34	Progressive Scleroderma
35	SLE with Renal Involvement
36	Bacterial Meningitis
37	Chronic Recurrent Pancreatitis
38	Loss of Independent Existence
39	Poliomyelitis
40	Creutzfeldt-Jacob disease

This benefit is payable only once during the Coverage Term and the cover shall terminate upon payout of the benefit. The Base Plan shall continue for the balance Sum Assured on Death.

The benefit will be payable only if the Diagnosis/procedure of any of the covered condition is the first Diagnosis/procedure of that condition in the lifetime of the Life Insured.

V. CRITICARE PLUS BENEFIT

The Insured Amount under the Benefit Option shall be paid upon first Diagnosis of or actual undergoing of any of the below listed illnesses or procedure (as explained in Annexure A), provided the Life Insured survives during the Survival Period:

No	Illness / Procedure
	Cancer:
1	Cancer of Specified Severity
	Cardiac Conditions:
2	Myocardial Infarction (First Heart Attack of specified severity)
3	Open Chest CABG (Coronary Artery Bypass Graft)
4	Open Heart Replacement or Repair of Heart Valves
5	Major surgery of Aorta
6	Heart transplant
7	Cardiomyopathy (of specified severity)
8	Stroke resulting into permanent symptoms
9	Primary (Idiopathic) Pulmonary Hypertension
	Critical Illness:
10	Apallic Syndrome
11	Benign Brain Tumor
12	Blindness
13	Severe Rheumatoid Arthritis
14	End Stage Lung Failure
15	Coma of Specified Severity
16	End Stage Liver Failure
17	Kidney Failure requiring Regular Dialysis
18	Encephalitis
19	Third Degree Burns
20	Major Head Trauma
21	Major Organ (less heart)/ Bone Marrow Transplant
22	Permanent Paralysis of Limbs
23	Loss of limbs
24	Fulminant Viral Hepatitis
25	Alzheimer's Disease
26	Aplastic Anaemia
27	Deafness
28	Loss of Speech
29	Medullary Cystic Kidney Disease
30	Motor Neuron Disease with Permanent Symptoms
31	Multiple Sclerosis with Persisting Symptoms
32	Muscular Dystrophy
33	Parkinson's Disease
34	Progressive Scleroderma
35	SLE with Renal Involvement
36	Bacterial Meningitis
37	Chronic Recurrent Pancreatitis
38	Loss of Independent Existence
39	Poliomyelitis
40	Creutzfeldt-Jacob disease

This benefit is payable only once during the Coverage Term and shall terminate upon payout of the benefit.

The benefit will be payable only if the Diagnosis/procedure of any of the covered condition is the first Diagnosis/procedure of that condition in the lifetime of the Life Insured.

2. MATURITY BENEFIT

If You have chosen Return of Premium option at the inception of the Rider, on survival till end of the Coverage Term, the Total Premiums Paid (Excluding loading for modal Rider Premiums) towards the respective Benefit Option shall be returned, after deduction of any claim payout made under the under the respective Benefit Option, provided the Rider/Benefit Option is not terminated.

In case the payout under Return of Premium option is triggered, the Premiums waived (if any) shall be added to the Total Premiums Paid by the Policyholder for the calculation of the Return of Balance Premium for the respective Benefit Option.

3. SERVICE FEATURE

I. MEDICAL SECOND OPINION

The Life Insured may avail second opinion / personal medical case management services from the service provider/s affiliated to/registered with Us. The services are expected to assist the Life Insured to ascertain correct diagnosis of a medical condition and obtain due care to the Life Insured in case of illness. These services are subject to:

- the availability of a suitable service provider;
- primary diagnosis has been done by a registered medical practitioner as may be authorized by a competent statutory authority; and
- the eligibility of the Life Insured as may be determined by the Company from time to time.

Note:

- Medical Second Opinion/Personal Medical Case Management is an optional service offered to You at no additional cost. You may exercise Your own discretion to avail the services and to follow the treatment path suggested by the service provider.
- These services shall be directly provided by the service provider.
- The services can be availed only where the policy / rider is in-force.
- All the supporting medical records should be available to avail the service.
- We reserve the right to discontinue the service or change the service provider at any time.
- The services are being provided by third party service provider and We will not be liable for any liability.

4. PAYMENT OF PREMIUM

You may pay the Rider Premiums in annual, semi-annual, quarterly or monthly payment modes, as specified below, provided that the Rider Premium payment mode under this Rider shall always be same as the premium payment mode of the Base Plan and can only be changed with the change of premium payment mode of the Base Plan. The Rider Premium will change, if the premium payment mode under Base Plan is changed by You.

5. MODE OF PAYOUT

For 'Criticare Benefit', the only payout option available is "Combination of Lump Sum and Income", and for 'Accidental Death Benefit', the payout options available shall be "Combination of Lump Sum and Income" or "Partner Care".

You may choose one of the following options to receive benefit, depending on the Benefit Option selected:

- a) **Combination of Lump sum and Income:** You may choose to receive the payout as either:
- Lump sum benefit OR
 - Income for the income period chosen OR
 - Combination of lump sum and income for the income period chosen.

If 'Combination of lump sum and income for the income period chosen' has been opted, You shall have the flexibility to choose payout in the form of lump-sum and/or income for the chosen income period. Along with the lump sum amount, the Claimant shall also receive regular income in arrears for chosen income period as per the chosen frequency which can be Annual / Half Yearly / Quarterly / Monthly, from the date of occurrence of insured event. The payment frequency cannot be changed once the regular income commences. Any accrued income, due before intimation, will be paid along with first payout under this option.

The income chosen will be paid as per the frequency chosen for the income period (A period up to 10 years as chosen).

The regular income instalments for frequencies other than annual shall be as specified below, where the 'Yearly Income' below refers to the regular income payable in respect of annual frequency:

Frequency	Income Instalment (per frequency)
Half-yearly	98% of Yearly Income x 1/2
Quarterly	97% of Yearly Income x 1/4
Monthly	96% of Yearly Income x 1/12

In case of a Reduced Paid-up Rider, the regular income payable shall be based on the adjusted Yearly Income defined as: (Number of premiums paid under benefit option / Number of premiums payable under benefit option) * Yearly Income applicable at the time of Reduced Paid-Up

Where the Insured Amount is higher than the Sum Assured under Benefit Option, the amount in excess of Sum Assured under Benefit Option shall be paid in lump sum.

The Claimant also has an option to receive the commuted value of the future income benefits as a lumpsum, discounted at the higher of -

- a) 4.00%,
- b) SBI domestic term deposit rate for '5 years and up to 10 years' + 2.00%.

- b) **Partner Care:** Upon occurrence of the insured event, Insured Amount shall be paid to the chosen dependent partner/s as a regular income. The mode of payout shall be annual, quarterly, half yearly or monthly from the occurrence of the insured event, as may be chosen by You at the inception of the Benefit Option. The payout frequency can't be changed once the regular income commences. Any accrued income, due before intimation of the insured event, shall be paid with the first payout under this option.

The regular income instalments for frequencies other than annual shall be as specified below, where the Yearly Income below refers to the regular income payable in respect of annual frequency:

Frequency	Income Instalment (per frequency)
Half-yearly	98% of Yearly Income x 1/2
Quarterly	97% of Yearly Income x 1/4
Monthly	96% of Yearly Income x 1/12

The income streams are payable as per the payout frequency chosen and shall continue, -

- a) till the partner dies or reaches age 100 (last birthday), whichever happens first, if one dependent partner is chosen to receive income;
- b) till the last surviving partner dies or reaches age 100 (last birthday), whichever happens first, if two dependent partners are chosen to receive income.

The regular income shall be triggered only once during the Coverage Term. If the partner/surviving partner dies before the Coverage Term and insured event occurs after such death, the claimant shall be entitled to receive 'Surrender Benefit' as per Clause 4 of Part D.

In case of a Reduced Paid-up Rider, the regular income payout shall be based on the adjusted Yearly Income defined as: (Number of Premiums paid under Benefit Option / Number of Premiums payable under Benefit Option) * Yearly Income applicable at the time of Reduced Paid-Up.

- c) **Waiver of Premium Benefit:** : Under this mode, payout is available as a Regular Pay without Return of Balance of Premium option. Under this mode of payout, the future Premium under the Base Plan, Rider/s and any attached Benefit Option/s, if any, shall be waived off throughout the remaining Premium Payment Term of the Base Plan/Rider or until the termination of the Base Plan/Rider, whichever is earlier. The 'Waiver of Premium Benefit' opted shall not be applicable for Benefit Options availed subsequent to the selection of 'Waiver of Premium Benefit' option and You may opt for 'Waiver of Premium Benefit' additionally in respect of such Benefit Options chosen subsequently. Where Waiver of Premium Benefit is opted under multiple Benefit Options, benefit of waiver under this mode of payment shall terminate all the Waiver of Premium Benefits under the Rider.

6. PREMIUM GUARANTEE

The sum assured shall remain unchanged for a period as specified under 'Guaranteed Period' from the policy commencement date of the benefit option. Upon the completion of 'Guaranteed Period', the sum assured as applicable for the benefit option may be revised subject to IRDAI's approval. Any revision in the sum assured under the benefit option shall be notified to the policyholder at least three months prior to the policy anniversary (i.e. the effective date of change) and policy holder will be given a period of 30 days from the effective date of change to confirm with the revised terms under the benefit option. If the policy holder is not willing to continue the benefit option with the revised terms, all coverage under the respective benefit option benefit will get surrendered. The Sum Assured, if and when revised, shall be guaranteed to the policyholder for a subsequent block as specified under 'Guaranteed Period'.

Benefit Option	Guaranteed Period
Criticare Plus Benefit	5 years
Criticare Benefit	10 years
All other Benefit Options	Entire term of the Benefit Option

7. WAITING PERIOD

'Waiting Period' means a period during which specified

diseases/treatments which have been diagnosed and/or have received medical advice/treatment are not covered. In the event of occurrence of any of such scenarios during the applicable Waiting Period,

- No benefit shall be payable;
- the Premiums paid towards the Benefit Option during the Waiting Period will be refunded without any interest; and
- the Benefit Option shall terminate and no future Premiums and benefits shall be payable.

Waiting Period as per the chosen Benefit Option shall be as under:

Benefit Option	Waiting Period applicable ^a
Criticare Benefit	A waiting period of 90 days is applicable on the first Diagnosis of any of the illness covered under the respective Benefit Option
Criticare Plus Benefit	

^aThe Waiting Period for all benefits shall be applicable from later of:

- Date of Commencement of Risk, if Benefit Option is opted at inception;
- Policy Anniversary at which Benefit Option is opted (If Benefit Option is opted for on the Policy Anniversary); or
- Date of revival (in case of revival of the Benefit Option).

8. GRACE PERIOD

A Grace Period of fifteen (15) days for monthly mode and thirty (30) days for all other modes, from the due date of Rider Premium will be allowed for payment of each subsequent Rider Premium. The coverage under the chosen Benefit Option will remain in force during this period. If the full Rider Premium for the first 2 years from the Date of Commencement of Risk under Rider remains unpaid at the end of Grace Period, the coverage under the chosen Benefit Option shall lapse from the due date of the first unpaid Rider Premium. If any claim occurs during the Grace Period, any due Rider Premium (without interest) for the full coverage year, in which the insured event has occurred will be deducted from the claim pay-out.

PART D

POLICY SERVICING

1. FREE LOOK PERIOD

You have a free look period of 15 days from the date of receipt of the Rider document and period of 30 days in case of Rider obtained through distribution channels like Web Aggregators, online mode and direct sales (other than in person), to review the terms and conditions of the Rider. If You disagree to any of those terms or conditions, You have the option to return the Rider for cancellation, stating the reasons for objection and be entitled to a refund of the premiums paid without interest after deduction of proportionate risk premium, stamp duty and medical examination cost along with applicable taxes and cesses or levies, if any.

2. LOANS

You are not entitled to any loans under this Rider.

3. NON-FORFEITURE PROVISIONS

If any Rider Premium for a non-single pay Benefit Option remains unpaid at the end of the Grace Period, the Benefit Option shall lapse/be converted to a Reduced Paid-up Policy from the due date of the first unpaid Rider Premium. No benefits are payable under a lapsed Benefit Option.

4. SURRENDER BENEFIT

Surrender Benefit shall be the higher of the Guaranteed Surrender Value (GSV) or Special Surrender Value (SSV) payable under the following scenarios:

Conditions for acquiring Surrender Value	Guaranteed Surrender Value (GSV)	Special Surrender Value (SSV)
• Single Pay - Without Return of balance premium		
Immediately on receiving the Premium	Not available	75% * (sum of Premiums paid) * (1-Premium Paying Term / Benefit Option Coverage Term) * (Balance Benefit Option Coverage Term / Benefit Option Coverage Term)
• Single Pay - With Return of balance premium		
Immediately on receiving the Premium	GSV Factor x Return of Balance Premiums as on date of surrender	SSV Factor x Return of Balance Premiums as on date of surrender

• Regular Pay - Without Return of balance premium: No Surrender Value		
• Regular Pay - With Return of Balance Premium		
If at least 2 full years' Premiums have been paid	GSV Factor x Return of Balance Premiums as on date of surrender	SSV Factor x Return of Balance Premiums as on date of surrender
• Limited Pay - Without Return of balance premium		
If at least 2 full years' Premiums have been paid	Not available	75% * (sum of Premiums paid excluding the first years' Premium) * (1-Premium Paying Term / Benefit Option Coverage Term) * (Balance Benefit Option Coverage Term / Benefit Option Coverage Term)
• Limited Pay - With Return of Balance Premium		
If at least 2 full years' Premiums have been paid	GSV Factor x Return of Balance Premiums as on date of surrender	SSV Factor x Return of Balance Premiums as on date of surrender

As the pricing interest rate reflects the prevailing market conditions, the Company may revise the SSV factors from time to time. However, any change in the methodology/formula for calculating SSV factors shall be subject to IRDAI approval. Any change in SSV factors shall be filed with the Authority and any changes therein shall be communicated to the Policyholder. Please refer Company's website or visit nearest branch for more details on the applicable GSV or SSV factor.

The SSV factors are applicable at the end of the year and shall be interpolated, on a daily basis, to arrive at the factors applicable at the time of surrender.

All or any of the Benefit Options may be surrendered / discontinued separately or it gets surrendered / discontinued if the Base Plan is surrendered / discontinued or made paid-up.

No surrender benefit is payable if the total claim/s value paid exceeds the Total Premiums Paid.

5. REDUCED PAID-UP

If any Rider Premium for a non-single pay Benefit Option remains unpaid at the end of the Grace Period, the Benefit Option shall lapse/be converted to a Reduced Paid-up Rider from the due date of the first unpaid Rider Premium. The following is the treatment under various scenarios:

Cover Continuance		
PPT	Before 2 years' premium paid	After 2 years' premium paid
Without Return of Balance Premium		
Regular Pay / Limited Pay	Cover ceases to exist	Cover ceases to exist
With Return of Balance Premium		
Regular Pay / Limited Pay	Cover ceases to exist	Cover continues with Reduced Paid-Up Sum Assured if the Base Plan is converted to Reduced Paid-up Policy/Cover cease to exist if Base Plan is lapsed.

In case a Policy is converted to Reduced Paid-up on Premium discontinuance, the coverage will continue to be in reduced paid-up status with the Insured Amount re-set to the Reduced Paid Up Sum Assured under the Benefit Option less any claims paid/payable.

Under Reduced Paid-up ("RPU") Rider, the RPU Sum Assured shall be as below:

RPU Sum Assured = (Number of Premiums Paid under Benefit Option/ Number of Premiums payable under Benefit Option) x Sum Assured under the Benefit Option

Maturity Benefit – As per 'MATURITY BENEFIT provisions under Part C 'BENEFITS' of this Rider.

6. REVIVAL OF THE RIDER

6.1 The lapsed Benefit Option may be revived (along with the Base Plan) on the payment of all due Premiums within Revival Period as applicable under the Base Plan, by paying interest or late payment fee, if any.

If there is default in Premium beyond the Grace Period (as applicable under the Base Plan) and subject to the Rider not having been surrendered, it may be revived, in accordance with the prevailing Underwriting Policy

within Revival Period (as applicable under the Base Plan) but before the Maturity/Expiry Date of Benefit Option, subject to:

- Your written application for reinstatement / revival;
- Production of Insured's current health certificate and other evidence of insurability satisfactory to Us; and
- Payment of all overdue premiums with interest.

6.2 If the Rider/Benefit Option is not revived along with the Base Plan, the Rider/Benefit Option shall be terminated by paying any residual Surrender Value (if any) as on the date of revival of the Base Plan and revival of such terminated Rider/Benefit Option will not be allowed at a later stage.

6.3 The applicable interest rate for revival shall be the same as Base Plan. Any alteration in the formula basis of determination of interest rate will be subject to prior approval of IRDAI.

6.4 Upon revival, the benefits option shall be restored with effect from the date of revival.

6.5 The Benefit Option cannot be revived independently and can only be revived along with the revival of the Base Plan.

7. PAYMENT OF RIDER BENEFITS

As per base Policy.

8. TERMINATION OF THE RIDER/BENEFIT OPTION

8.1 The Benefit Option shall terminate upon the happening of the first of the following events:

- 8.1.1** on the expiry of Coverage Term;
- 8.1.2** on payment of Surrender Value of the Benefit Option;
- 8.1.3** on the date on which We receive free look cancellation request for the Benefit Option within requisite period;
- 8.1.4** on the payment of the benefit under Benefit Option or last instalment of income benefit payment or the date of intimation of repudiation of the claim by Us;
- 8.1.5** on the expiry of the Revival Period, if the lapsed Benefit Option has not been revived;
- 8.1.6** on termination of Base Plan
- 8.1.7** on the Maturity/Expiry Date or the date on which the Base Plan is surrendered, terminated or cancelled for any reason;
- 8.1.8** on receipt of Your written request for cancellation of the Benefit Option effective from the next Premium Due Date, after the completion of the free look period;
- 8.1.9** on cancellation/ termination of this Rider/Benefit Option by Us on grounds of misrepresentation, fraud or non-disclosure established in terms of Section 45 of the Insurance Act, 1938 as amended from time to time.

PART E

1. FEES/CHARGES

This Rider is a Non-Linked Rider, therefore Part E is not applicable to this Rider.

PART F

GENERAL PROVISIONS

1. TAXES

1.1 All Premiums, Charges and interest payable under the Benefit Option are exclusive of applicable taxes, cesses or levies, if any, which will be entirely borne/paid by You, in addition to the payment of such Premium, charges or interest. We shall have the right to claim, deduct, adjust, recover the amount of any applicable tax or imposition, levied by any statutory or administrative body from the benefits payable under the Benefit Option.

1.2 Tax benefits and liabilities under the Benefit Option are subject to prevailing tax laws. Tax laws and the benefits arising thereunder are subject to change. You are advised to seek an opinion of Your tax advisor in relation to the tax benefits and liabilities applicable to You.

2. CLAIM PROCEDURE

As per base Policy.

3. MISTATEMENT OF AGE

As per base Policy.

4. FRAUD AND NON-DISCLOSURE

As per base Policy.

5. CURRENCY AND PLACE OF PAYMENT

As per base Policy.

6. FREEDOM FROM RESTRICTIONS

There are no restrictions on travel or occupation under this Rider.

7. NOMINEE

As per Base Plan.

8. ASSIGNMENT

As per Base Plan.

9. CHANGE IN ADDRESS

In order to provide better service, We request you to intimate us in the event of any change in the address of the Policyholder or the nominee.

10. DUPLICATE RIDER DOCUMENT

If the Rider document is lost or destroyed, then at Your request, the Company will issue a duplicate Rider document. Upon the issuance of the duplicate Rider document, the original Rider document immediately and automatically ceases to have any validity. The Company will charge a fee of Rs. 250/- along with the applicable taxes, cesses or levies, if any, for the issuance of a duplicate Rider document. These charges are subject to revision by the Company from time to time.

11. AMENDMENT

As per base Policy.

12. REGULATORY AND JUDICIAL INTERVENTION

As per base Policy.

13. COMMUNICATION AND NOTICES

As per base Policy.

14. GOVERNING LAW AND JURISDICTION

As per base Policy.

PART G

1. CONSUMER INFORMATION

As per base Policy.

ANNEXURE 1 – DEFINITIONS AND EXCLUSIONS

Definitions of Conditions covered (as applicable under the respective benefit)

A. Term Benefit with Accelerated Terminal Illness

Terminal Illness: Terminal Illness is defined as an advanced or rapidly progressing incurable and un-correctable medical condition which, in the opinion of two (2) independent Medical Practitioners specializing in treatment of such illness, life expectancy is no greater than twelve months from the date of notification of claim. The terminal illness must be diagnosed and confirmed by independent medical practitioners' specializing in treatment of such illness and registered with the Indian Medical Association and the diagnosis of Terminal Illness should be approved by the Company. The Company reserve the right for independent assessment of the Terminal Illness.

B. Accidental Death Benefit

C. Accidental Total and Permanent Disability

Accidental Death: Accidental Death shall mean death which

- is caused by bodily injury resulting from an accident and
- occurs due to the said bodily injury solely, directly and independently of any other causes and
- occurs within 180 days of the occurrence of such accident

The benefit due to accidental death will be payable if the accident occurs within the Benefit Option term even if death occurs beyond the term (however within 180 days of the accident)

Accidental Total and Permanent Disability: Accidental Total and Permanent Disability means disability as a result of bodily injury caused by

an accident and such injury shall within 180 days of its occurrence solely, directly and independently of any other cause, result in the Member's disability which must be total and permanent, and must result in at least one of the following:

- i. iLoss of sight in both eyes
- ii. Loss of both arms or both hands;
- iii. Loss of one arm and one leg;
- iv. Loss of one arm and one foot;
- v. Loss of one hand and one foot;
- vi. Loss of one hand and one leg;
- vii. Loss of both legs;
- viii. Loss of both feet;
- ix. Removal of the entire lower jaw
- x. Loss of one hand and loss of sight in one eye
- xi. Loss of one foot and loss of sight in one eye

If the disability is due to amputation/dismemberment, the loss of hand will mean amputation/dismemberment above wrist, the loss of arm will mean amputation/ dismemberment above elbow, the loss of feet will mean amputation/dismemberment above ankle and the loss of leg will mean amputation/dismemberment above knee. This will include medically necessary amputation necessitated by injury or disease. The separation has to be permanent without any chance of surgical correction. If the disability is not due to amputation/dismemberment, the loss will mean loss of usage of both limbs and the limbs should have motor power grade 0/5, 1/5 or 2/5 only.

Loss of a limb resulting directly or indirectly from self-inflicted injury, alcohol or drug abuse is excluded. The loss of use of the particular limb must be certified by a relevant Medical Practitioner and documented for an uninterrupted period of at least six months.

The total Loss of Sight in one eye means total, permanent and irreversible loss of all vision in an eye as a result of accident, evidenced by:

- i. corrected visual acuity being 3/60 or less in one eye or;
- ii. the field of vision being less than 10 degrees in one eye

The diagnosis of Loss of Sight in one eye must be certified by an Ophthalmologist to be permanent in nature and must not be correctable by aids or surgical procedure

Loss of Sight in both eyes - Total, permanent and irreversible loss of all vision in both eyes as a result of accident, evidenced by:

- i. icorrected visual acuity being 3/60 or less in both eyes or;
- ii. the field of vision being less than 10 degrees in both eyes

The diagnosis of Loss of Sight in both eyes must be certified by an Ophthalmologist to be permanent in nature and must not be correctable by aids or surgical procedure.

D. Criticare

E. Criticare Plus Benefit

1. Cancer of specified severity:

A malignant tumor characterized by the uncontrolled growth and spread of malignant cells with invasion and destruction of normal tissues. This diagnosis must be supported by histological evidence of malignancy. The term cancer includes leukemia, lymphoma and sarcoma.

The following are excluded –

- i. All tumors which are histologically described as carcinoma in situ, benign, pre-malignant, borderline malignant, low malignant potential, neoplasm of unknown behavior, or non-invasive, including but not limited to: Carcinoma in situ of breasts, Cervical dysplasia CIN-1, CIN-2 and CIN-3.
- ii. Any non-melanoma skin carcinoma unless there is evidence of metastases to lymph nodes or beyond;
- iii. Malignant melanoma that has not caused invasion beyond the epidermis;
- iv. All tumors of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least clinical TNM classification T2N0M0
- v. All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below;
- vi. Chronic lymphocytic leukemia less than RAI stage 3
- vii. Non-invasive papillary cancer of the bladder histologically described as TaN0M0 or of a lesser classification,

viii. All Gastro-Intestinal Stromal Tumors histologically classified as T1N0M0 (TNM Classification) or below and with mitotic count of less than or equal to 5/50 HPFs;

2. Cardiomyopathy (of specified severity):

An impaired function of the heart muscle, unequivocally diagnosed as Cardiomyopathy by a Registered Medical Practitioner who is a cardiologist, and which results in permanent physical impairment to the degree of New York Heart Association Classification Class III or Class IV, or its equivalent, for at least six (6) months based on the following classification criteria:

- • Class III - Marked functional limitation. Affected patients are comfortable at rest but performing activities involving less than ordinary exertion will lead to symptoms of congestive cardiac failure
- Class IV - Inability to carry out any activity without discomfort. Symptoms of congestive cardiac failure are present even at rest. With any increase in physical activity, discomfort will be experienced and Echocardiography findings confirming presence of cardiomyopathy and Left Ventricular Ejection Fraction (LVEF %) of 40% or less.

The following are excluded:

Cardiomyopathy directly related to alcohol or drug abuse.

3. Heart Transplant:

The actual undergoing of a transplant of human heart that resulted from irreversible end stage heart failure. The undergoing of a heart transplant has to be confirmed by a specialist medical practitioner.

Stem Cell transplants are excluded.

4. Major Surgery of Aorta:

The actual undergoing of major surgery to repair or correct an aneurysm, narrowing, obstruction or dissection of the aorta through surgical opening of the chest or abdomen. For the purpose of this definition, aorta shall mean the thoracic and abdominal aorta but not its branches (including aortofemoral or aortoiliac bypass grafts). The surgery must be determined to be medically necessary by a Consultant Cardiologist / Surgeon and supported by imaging findings.

The following are excluded:

- Surgery performed using only minimally invasive or intra-arterial techniques.
- Procedures done for treatment of Congenital heart disease are excluded.

5. Myocardial Infarction (First Heart Attack of specified severity):

The first occurrence of heart attack or myocardial infarction, which means the death of a portion of the heart muscle as a result of inadequate blood supply to the relevant area. The diagnosis for Myocardial Infarction should be evidenced by all of the following criteria:

- i. A history of typical clinical symptoms consistent with the diagnosis of acute myocardial infarction (For e.g. typical chest pain)
- ii. New characteristic electrocardiogram changes
- iii. Elevation of infarction specific enzymes, Troponins or other specific biochemical markers.

The following are excluded:

- i. Other acute Coronary Syndromes
- ii. Any type of angina pectoris
- iii. A rise in cardiac biomarkers or Troponin T or I in absence of overt ischemic heart disease OR following an intra-arterial cardiac procedure.

6. Open Chest CABG (Coronary Artery Bypass Graft):

The actual undergoing of heart surgery to correct blockage or narrowing in one or more coronary artery(s), by coronary artery bypass grafting done via a sternotomy (cutting through the breast bone) or minimally invasive keyhole coronary artery bypass procedures. The diagnosis must be supported by a coronary angiography and the realization of surgery has to be confirmed by a cardiologist.

The following are excluded:

- Angioplasty and/or any other intra-arterial procedures

7. Open Heart Replacement or Repair of Heart Valves:

The actual undergoing of open-heart valve surgery is to replace or repair one or more heart valves, as a consequence of defects in, abnormalities of, or disease affected cardiac valve(s). The diagnosis of the valve abnormality must be supported by an echocardiography and the realization of surgery has to be confirmed by a specialist medical practitioner. Catheter based techniques including but not limited to,

balloon valvotomy/valvuloplasty are excluded.

8. Primary (Idiopathic) Pulmonary Hypertension:

- A. An unequivocal diagnosis of Primary (Idiopathic) Pulmonary Hypertension by a Cardiologist or Specialist in respiratory medicine with evidence of right ventricular enlargement and the pulmonary artery pressure above 30 mm of Hg on Cardiac Cauterization. There must be permanent irreversible physical impairment to the degree of at least Class IV of the New York Heart Association Classification (NYHA) of cardiac impairment.
- B. The NYHA Classification of Cardiac Impairment are as follows:
 - i. Class III: Marked limitation of physical activity. Comfortable at rest, but less than ordinary activity causes symptoms.
 - ii. Class IV: Unable to engage in any physical activity without discomfort. Symptoms may be present even at rest.
- C. Pulmonary hypertension associated with lung disease, chronic hypoventilation, pulmonary thromboembolic disease, drugs and toxins, diseases of the left side of the heart, congenital heart disease and any secondary cause are specifically excluded

9. Stroke resulting into permanent symptoms:

Any cerebrovascular incident producing permanent neurological sequelae. This includes infarction of brain tissue, thrombosis in an intracranial vessel, haemorrhage and embolisation from an extra cranial source. Diagnosis has to be confirmed by a specialist medical practitioner and evidenced by typical clinical symptoms as well as typical findings in CT Scan or MRI of the brain. Evidence of permanent neurological deficit lasting for at least 3 months has to be produced.

The following are excluded:

- Transient ischemic attacks (TIA)
- Traumatic injury of the brain
- Vascular disease affecting only the eye or optic nerve or vestibular functions.

10. Alzheimer's Disease

Progressive and permanent deterioration of memory and intellectual capacity as evidenced by accepted standardised questionnaires and cerebral imaging. The diagnosis of Alzheimer's disease must be confirmed by an appropriate consultant and supported by the Company's appointed doctor. There must be significant reduction in mental and social functioning requiring the continuous supervision of the life assured. There must also be an inability of the Life Assured to perform (whether aided or unaided) at least 3 of the 6 "Activities of Daily Living" (defined in 'Generic Definitions' section below) for a continuous period of at least 3 months.

The following are excluded:

- Any other type of irreversible organic disorder/dementia
- Non-organic disease such as neurosis and psychiatric illnesses; and
- Alcohol-related brain damage.

11. Apallic Syndrome:

A persistent vegetative state in which patients with severe brain damage (universal necrosis of the brain cortex with the brainstem remaining intact), are in a state of partial arousal rather than true awareness. The Diagnosis must be confirmed by a Specialist Medical Practitioner (Neurologist) acceptable to the Company and condition must be documented for at least 30 days

12. Aplastic Anaemia:

Chronic Irreversible persistent bone marrow failure which results in anaemia, neutropenia and thrombocytopenia requiring treatment with at least two (2) of the following:

- (a) Regular Blood product transfusion;
- (b) Marrow stimulating agents;
- (c) Immunosuppressive agents; or
- (d) Bone marrow transplantation.

The Diagnosis and suggested line of treatment of aplastic anaemia must be confirmed by a Haematologist acceptable to the company using relevant laboratory investigations including bone marrow biopsy. Two out of the following three values should be present:

- Absolute Neutrophil count of 500 per cubic millimetre or less;
- Absolute Reticulocyte count of 20,000 per cubic millimetre or less; and
- Platelet count of 20,000 per cubic millimetre or less.

Temporary or reversible aplastic anaemia is excluded

13. Bacterial Meningitis:

A definite diagnosis of bacterial meningitis resulting in a persistent neurological deficit documented for at least 3 months following the date of diagnosis. The diagnosis must be confirmed by a Consultant Neurologist and supported by growth of pathogenic bacteria from cerebrospinal fluid culture.

For the above definition, the following are not covered:

- Aseptic, viral, parasitic or non-infectious meningitis

14. Benign Brain Tumor

Benign brain tumor is defined as a life threatening, non-cancerous tumor in the brain, cranial nerves or meninges within the skull. The presence of the underlying tumor must be confirmed by imaging studies such as CT scan or MRI.

This brain tumor must result in at least one of the following and must be confirmed by the relevant medical specialist:

- Permanent Neurological deficit with persisting clinical symptoms for a continuous period of at least 90 consecutive days or
- Undergone surgical resection or radiation therapy to treat the brain tumor

The following conditions are excluded:

Cysts, Granulomas, malformations in the arteries or veins of the brain, hematomas, abscesses, pituitary tumors, tumors of skull bones and tumors of the spinal cord.

15. Blindness:

Total, permanent and irreversible loss of all vision in both eyes as a result of illness or accident.

The Blindness is evidenced by:

- corrected visual acuity being 3/60 or less in both eyes or;
- the field of vision being less than 10 degrees in both eyes.

The diagnosis of blindness must be confirmed and must not be correctable by aids or surgical procedure.

16. Chronic Recurrent Pancreatitis:

An unequivocal diagnosis of Chronic Relapsing Pancreatitis, made by a Specialist in gastroenterology and confirmed as a continuing inflammatory disease of the pancreas characterised by irreversible morphological change and typically causing pain and/or permanent impairment of function. The condition must be confirmed by pancreatic function tests and radiographic and imaging evidence.

Relapsing Pancreatitis caused directly or indirectly, wholly or partly, by alcohol is excluded.

17. Coma of Specified Severity:

A state of unconsciousness with no reaction or response to external stimuli or internal needs. This diagnosis must be supported by evidence of all of the following:

- No response to external stimuli continuously for at least 96 hours;
- Life support measures are necessary to sustain life; and
- Permanent neurological deficit which must be assessed at least 30 days after the onset of the coma.

The condition has to be confirmed by a specialist medical practitioner. Coma resulting from alcohol or drug abuse is excluded.

18. Creutzfeldt-Jacob disease:

Creutzfeldt-Jacob disease is an incurable brain infection that causes rapidly progressive deterioration of mental function and movement. A neurologist must make a definite diagnosis of Creutzfeldt-Jacob disease based on clinical assessment, EEG and imaging. There must be objective permanent neurological abnormalities persisting for more than 180 days along with severe progressive dementia.

19. Deafness:

Total and irreversible loss of hearing in both ears as a result of illness or accident. This diagnosis must be supported by pure tone audiogram test and certified by an Ear, Nose and Throat (ENT) specialist. Total means "the loss of hearing to the extent that the loss is greater than 90decibels across all frequencies of hearing" in both ears.

20. Encephalitis:

Severe inflammation of the brain substance (cerebral hemisphere, brainstem or cerebellum) caused by viral infection and resulting in permanent neurological deficit for a min period of 60 days. This diagnosis must be certified by a consultant neurologist and the permanent neurological deficit must result in an inability to perform at least three of the

Activities of Daily Living (defined in 'Generic Definitions' section below) either with or without the use of mechanical equipment, special devices or other aids and adaptations in use for disabled persons.

21. End Stage Liver Failure:

Permanent and irreversible failure of liver function that has resulted in all three of the following:

- permanent jaundice; and
- ascites; and
- hepatic encephalopathy.

Liver failure secondary to drug or alcohol abuse is excluded.

22. End Stage Lung Failure:

End stage lung disease, causing chronic respiratory failure, as confirmed and evidenced by all of the following:

- FEV1 test results consistently less than 1 litre measured on 3 occasions 3 months apart; and
- Requiring continuous permanent supplementary oxygen therapy for hypoxemia; and
- Arterial blood gas analyses with partial oxygen pressures of 55mmHg or less ($\text{PaO}_2 < 55 \text{ mmHg}$); and
- Dyspnea at rest.

23. Fulminant Viral Hepatitis:

A definite diagnosis of fulminant viral hepatitis evidenced by all of the following:

- Typical serological course of acute viral hepatitis
- Development of hepatic encephalopathy
- Decrease in liver size
- Increase in bilirubin levels
- Coagulopathy with an international normalized ratio (INR) greater than 1.5
- Development of liver failure within 7 days of onset of symptoms
- No known history of liver disease

The diagnosis must be confirmed by a Consultant Gastroenterologist.

For the above definition, the following are not covered:

- All other non-viral causes of acute liver failure (including but not limited to paracetamol or aflatoxin intoxication)
- Fulminant viral hepatitis associated with intravenous drug use

24. Kidney Failure Requiring Dialysis:

End stage renal disease presenting as chronic irreversible failure of both kidneys to function, as a result of which either regular renal dialysis (hemodialysis or peritoneal dialysis) is instituted or renal transplantation is carried out. Diagnosis has to be confirmed by a specialist medical practitioner.

25. Loss of Independent Existence:

Confirmation by a consultant physician acceptable to the Company of the loss of independent existence due to illness or trauma, which has lasted for a minimum period of 6 months and results in a permanent inability to perform at least three (3) of the Activities of Daily Living (either with or without the use of mechanical equipment, special devices or other aids and adaptations in use for disabled persons). For the purpose of this benefit, the word "permanent", shall mean beyond the hope of recovery with current medical knowledge and technology. The "Activities of Daily Living" have been defined in 'Generic Definitions' section below

The following is excluded:

Any injury or loss as a result of War, invasion, hostilities (whether war is declared or not), civil war, rebellion, revolution or taking part in a riot or civil commotion.

26. Loss of Limbs:

The physical separation of two or more limbs, at or above the wrist or ankle level limbs as a result of injury or disease. This will include medically necessary amputation necessitated by injury or disease. The separation has to be permanent without any chance of surgical correction. Loss of Limbs resulting directly or indirectly from self-inflicted injury, alcohol or drug abuse is excluded.

27. Loss of Speech:

Total and irrecoverable loss of the ability to speak as a result of injury or disease to the vocal cords. The inability to speak must be established for

a continuous period of 12 months. This diagnosis must be supported by medical evidence furnished by an Ear, Nose, and Throat (ENT) specialist. All psychiatric related causes are excluded.

28. Major Head Trauma:

Accidental head injury resulting in permanent Neurological deficit to be assessed no sooner than 3 months from the date of the accident. This diagnosis must be supported by unequivocal findings on Magnetic Resonance Imaging, Computerized Tomography, or other reliable imaging techniques. The accident must be caused solely and directly by accidental, violent, external and visible means and independently of all other causes.

The Accidental Head injury must result in an inability to perform at least three (3) of the following Activities of Daily Living (defined in 'Generic Definitions' section below) either with or without the use of mechanical equipment, special devices or other aids and adaptations in use for disabled persons. For the purpose of this benefit, the word "permanent" shall mean beyond the scope of recovery with current medical knowledge and technology.

The following are excluded:

- Spinal cord injury

29. Major Organ (less heart)/ Bone Marrow Transplant:

The actual undergoing of a transplant of:

- One of the following human organs: lung, liver, kidney, pancreas, that resulted from irreversible end stage failure of the relevant organ, or
- Human bone marrow using haematopoietic stem cells

The undergoing of a transplant has to be confirmed by a specialist medical practitioner.

The following are excluded:

- Other stem-cell transplants
- Where only Islets of Langerhans are transplanted

30. Medullary Cystic Kidney Disease:

Medullary Cystic Disease is a disease where the following criteria are met:

- The presence in the kidney of multiple cysts in the renal medulla accompanied by the presence of tubular atrophy and interstitial fibrosis;
- Clinical manifestations of anaemia, polyuria and progressive deterioration in kidney function; and
- The diagnosis of medullary cystic disease is confirmed by renal biopsy.
- Isolated or benign kidney cysts are specifically excluded from this benefit.

31. Motor Neuron Disease with Permanent Symptoms:

Motor neuron disease diagnosed by a Specialist Medical Practitioner as spinal muscular atrophy, progressive bulbar palsy, amyotrophic lateral sclerosis or primary lateral sclerosis. There must be progressive degeneration of corticospinal tracts and anterior horn cells or bulbar efferent neurons. There must be current significant and permanent functional neurological impairment with objective evidence of motor dysfunction that has persisted for a continuous period of at least 3 months.

32. Multiple Sclerosis with Persisting Symptoms:

The unequivocal diagnosis of Definite Multiple Sclerosis confirmed and evidenced by all of the following:

- investigations including typical MRI findings which unequivocally confirm the diagnosis to be multiple sclerosis and
- there must be current clinical impairment of motor or sensory function, which must have persisted for a continuous period of at least 6 months.

Other causes of neurological damage such as SLE are excluded.

33. Muscular Dystrophy:

Muscular Dystrophy is a disease of the muscle causing progressive and permanent weakening of certain muscle groups. The diagnosis of muscular dystrophy must be made by a consultant neurologist, and confirmed with the appropriate laboratory, biochemical, histological, and electromyographic evidence. The disease must result in the permanent inability of the insured to perform (whether aided or unaided) at least three (3) of the six (6) "Activities of Daily Living" (defined in 'Generic Definitions' section below).

34. Parkinson's Disease:

Unequivocal Diagnosis of progressive degenerative primary idiopathic

Parkinson's disease (all other forms of Parkinsonism are excluded) by a Registered Medical Practitioner who is a neurologist where the condition:

- cannot be controlled with medication; and
- shows objective signs of progressive impairment; and
- Activities of Daily Living assessment confirms the inability of the Member to perform at least 3 of the Activities of Daily Living as defined in "Generic Definitions" section below, either with or without the use of mechanical equipment, special devices or other aids or adaptations in use for disabled persons, for a continuous period of six months.

35. Permanent Paralysis of Limbs:

Total and irreversible loss of use of two or more limbs as a result of injury or disease of the brain or spinal cord. A specialist medical practitioner must be of the opinion that the paralysis will be permanent with no hope of recovery and must be present for more than 3 months.

36. Poliomyelitis:

The first occurrence of poliomyelitis where the following conditions are met:

- i. Poliovirus is identified as the cause and is provided by stool analysis
- ii. Paralysis of the limb muscles or respiratory muscles must be present and persist for at least 3 months

37. Progressive Scleroderma:

A systemic collagen-vascular disease causing progressive diffuse fibrosis in the skin, blood vessels and visceral organs. This diagnosis must be unequivocally supported by biopsy and serological evidence and the disorder must have reached systemic proportions to involve the heart, lungs or kidneys.

The systemic involvement should be evidenced by any two of the following findings -

- Lung fibrosis with a diffusing capacity (DCO) of less than 70% of predicted
- Pulmonary hypertension with a mean pulmonary artery pressure of more than 25 mmHg at rest measured by right heart catheterization
- Chronic kidney disease with a GFR of less than 60 ml/min (MDRD-formula)
- Echocardiographic findings suggestive of Grade III and above left ventricular diastolic dysfunction

The diagnosis must be confirmed by a Consultant Rheumatologist or Nephrologist.

The following conditions are excluded:

- Localised scleroderma (linear scleroderma or morphea);
- Eosinophilic fascitis; and
- CREST syndrome

38. Severe Rheumatoid Arthritis:

Unequivocal Diagnosis of systemic immune disorder of rheumatoid arthritis where all of the following criteria are met:

- (a) Diagnostic criteria of the American College of Rheumatology for Rheumatoid Arthritis and has been diagnosed by a Rheumatologist;
- (b) Permanent inability to perform at least three (3) of the six (6) Activities of Daily Living (defined in 'Generic Definitions' section below);
- (c) Widespread joint destruction and major clinical deformity of three (3) or more of the following joint areas: hands, wrists, elbows, knees, hips, ankle, cervical spine or feet confirmed by clinical and radiological evidence; and
- (d) The foregoing conditions have been present for at least six (6) months.

For the above definition, the following are not covered:

- Reactive arthritis, psoriatic arthritis and activated osteoarthritis

39. Systemic Lupus Erythematosus (SLE) with Renal Involvement:

Multi-system, autoimmune disorder characterized by the development of auto-antibodies, directed against various self-antigens. For purposes of the definition of "Critical Illness", SLE is restricted to only those forms of systemic lupus erythematosus, which involve the kidneys and are characterized as Class III, Class IV, Class V or Class VI lupus nephritis under the Abbreviated International Society of Nephrology/Renal Pathology Society (ISN/RPS) classification of lupus nephritis (2003) below based on renal biopsy. Other forms such as discoid lupus, and those forms

with only hematological and joint involvement are specifically excluded.

Abbreviated ISN/RPS classification of lupus nephritis (2003):

Class I - Minimal mesangial lupus nephritis

Class II - Mesangial proliferative lupus nephritis

Class III - Focal lupus nephritis

Class IV - Diffuse segmental (IV-S) or global (IV-G) lupus nephritis

Class V - Membranous lupus nephritis

Class VI - Advanced sclerosing lupus nephritis

The final diagnosis must be confirmed by a certified doctor specialising in Rheumatology and Immunology.

40. Third Degree Burns:

There must be third-degree burns with scarring that cover at least 20% of the body's surface area. The diagnosis must confirm the total area involved using standardized, clinically accepted, body surface area charts covering 20% of the body surface area.

Generic Definitions

Accident: An Accident means sudden, unforeseen and involuntary event caused by external, visible and violent means.

Activities of Daily Living: The Activities of Daily Living are:

- i. **Washing:** the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means;
- ii. **Dressing:** the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances;
- iii. **Transferring:** the ability to move from a bed to an upright chair or wheelchair and vice versa;
- iv. **Mobility:** the ability to move indoors from room to room on level surfaces;
- v. **Toileting:** the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
- vi. **Feeding:** the ability to feed oneself once food has been prepared and made available.

Adventurous Pursuits or Hobbies: Adventurous Pursuits or Hobbies include but are not limited to any kind martial arts, racing (other than on foot or swimming); potholing, rock climbing (except on man-made walls), hunting, mountaineering or climbing requiring the use of ropes or guides, any underwater activities involving the use of underwater breathing apparatus including deep sea diving, sky diving, cliff diving, bungee jumping, paragliding, hand gliding and parachuting.

Biological attack: Biological attack or weapons means the emission, discharge, dispersal, release or escape of any pathogenic (disease producing) microorganisms and/or biologically produced toxins (including genetically modified organisms and chemically synthesized toxins) which are capable of causing any illness, incapacitating disablement or death.

Chemical attack: Chemical attack or weapons means the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous chemical compound which, when suitably distributed, is capable of causing any illness, incapacitating disablement or death.

Congenital Anomaly: Congenital Anomaly means a condition which is present since birth, and which is abnormal with reference to form, structure or position.

- a) **Internal Congenital Anomaly:** Congenital anomaly which is not in the visible and accessible parts of the body.
- b) **External Congenital Anomaly:** Congenital anomaly which is in the visible and accessible parts of the body

Cooling Off Period: In case of multiple minor stage claims under the same category (Critical illness, Cancer or Cardiac as applicable), the acceptance of the claims shall be subject to a Cooling Off Period. Cooling off Period shall apply after each occurrence of the condition/procedure, provided such occurrence resulted into a valid minor stage claim.

- For multiple minor stage claims, there needs to be a period of at least 180 days between the date of occurrence of a minor stage condition and date of occurrence of a subsequent minor stage condition. No minor claims shall be payable in this period for the aforementioned scenario.
- Date of occurrence is the date of diagnosis of a covered illness or the date of undergoing any procedure covered under minor conditions

- However, this requirement of 180 days is not applicable in case of diagnosis of a major stage condition following a minor stage claim.
- A particular minor condition can be claimed only once during the Benefit Option Term.

Hospital: A Hospital means any institution established for in-patient care and day care treatment of illness and/or injuries and which has been registered as a hospital with the local authorities under the Clinical Establishments (Registration and Regulation) Act, 2010 or under enactments specified under the Schedule of Section 56(1) and the said Act or, complies with all minimum criteria as under:

- Has at least 10 inpatient beds, in those towns having a population of less than 10,00,000 and atleast 15 inpatient beds in all other places;
- Has qualified nursing staff under its employment round the clock;
- Has qualified medical practitioner(s) in charge round the clock;
- Has a fully equipped operation theatre of its own where surgical procedures are carried out; and
- Maintains daily records of patients and makes these accessible to the Tata AIA's authorized personnel.

Hospitalization: Hospitalization means admission in hospital for minimum period of 24 consecutive 'In patient care' hours except for specified procedures / treatments, where such admission could be for a period of less than 24 consecutive hours.

Illness: An Illness means a sickness or a disease or pathological condition leading to the impairment of normal physiological function and requires medical treatment.

- (a) **Acute condition** - Acute condition is a disease, illness or injury that is likely to respond quickly to treatment which aims to return the person to his or her state of health immediately before suffering the disease/ illness/ injury which leads to full recovery
- (b) **Chronic condition** - A chronic condition is defined as a disease, illness, or injury that has one or more of the following characteristics:
 1. it needs ongoing or long-term monitoring through consultations, examinations, check-ups, and /or tests
 2. it needs ongoing or long-term control or relief of symptoms
 3. it requires rehabilitation for the patient or for the patient to be specially trained to cope with it
 4. it continues indefinitely
 5. it recurs or is likely to recur

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

Intensive Care Unit: Intensive Care Unit (ICU) means an identified section, ward or wing of a hospital which is under the constant supervision of a dedicated medical practitioner(s), and which is specially equipped for the continuous monitoring and treatment of patients who are in a critical condition, or require life support facilities and where the level of care and supervision is considerably more sophisticated and intensive than in the ordinary and other wards.

Medical Advice: Medical Advice means any consultation or advice from a Medical Practitioner including the issuance of any prescription or follow-up prescription.

Medical Practitioner: A Medical Practitioner means person who holds a valid registration from the Medical Council of any State or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within its scope and jurisdiction of license.

The person must be qualified in allopathic system of medicine and shall not be

- The Policyholder/ Insured person himself/herself; or
- An authorized Insurance Intermediary (or related persons) involved with selling or servicing the insurance contract in question; or
- Employed by or under contractual engagement with the Insurance Company;
- Related to the Policyholder/ Insured person by blood or marriage.

Medically Necessary Treatment: Medically Necessary Treatment means any treatment, tests, medication, or stay in hospital or part of a stay in hospital which

- is required for the medical management of the illness or injury suffered

by the insured;

- must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration, or intensity;
- must have been prescribed by a medical practitioner;
- must conform to the professional standards widely accepted in international medical practice or by the medical community in India.

Pre-Existing disease: Pre-Existing condition means any condition, ailment, injury or disease:

- That is/are diagnosed by a physician within 48 months prior to the effective date of the policy issued by the Company or its revival
- For which medical advice or treatment was recommended by, or received from, a physician within 48 months prior to the effective date of the policy issued by the Company or its revival

Surgery / Surgical Procedure: Surgery / Surgical Procedure means manual and/or operative procedure(s) required for treatment of an illness or injury, correction of deformities and defects, diagnosis and cure of diseases, relief from suffering or prolongation of life, performed in a hospital or day care centre by a medical practitioner.

Symptom: Symptom is a physical or mental feature which is regarded as indicating presence of a disease, particularly such a feature is apparent to an individual and will result in a medical consultation and/or further investigations to confirm the cause.

Exclusions:

Details of the Exclusions applicable under the various 'Health Benefit options' are given below

Term Benefit with Accelerated Terminal Illness (T&TI)

Suicide Exclusion: In case of death 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 at least 80% of the total premiums paid till the date of death or the surrender value available as on the date of death whichever is higher, provided the policy is in force.

No other claim would be entertained by the Company except the refund of 80% Total Premiums Paid or the acquired surrender value, as applicable.

Apart from Suicide exclusion detailed above, no other exclusion is applicable in the event of death.

Terminal Illness Exclusion: The Life Insured will not be entitled to any Terminal Illness benefit if it is caused directly or indirectly due to or occasioned, accelerated or aggravated by intentional self-inflicted injury or attempted suicide, whether medically sane or insane.

Accidental Death Benefit (ADB)

Accidental Death Benefit shall not be payable for any losses caused directly or indirectly, wholly or partly, by any one of the following occurrences:

- Death as a result of any disease or infection
- Death arising due to any condition other than death solely and directly as a result of an accident
- Any Pre-existing condition or Disability arising out of a Pre-existing Diseases or any complication arising therefrom. Wherever the proximate cause is accident which has occurred after the rider inception date, this exclusion shall not apply.
- Suicide, attempted suicide, intentional self-inflicted injury, acts of self-destruction, irrespective of mental condition.
- Death arising from or caused due to use, abuse or a consequence or influence of an abuse of any substance, intoxicant, drug, alcohol or hallucinogen
- Death arising out of or attributable to foreign invasion, act of foreign enemies, hostilities, warlike operations (whether war be declared or not or while performing duties in the armed forces of any country during war or at peace time), participation in any naval, military or air-force operation, civil war, public defense, rebellion, revolution, insurrection, military or usurped power.
- Death caused by participation of the insured person in any flying activity, except as a bona fide, fare-paying passenger of a recognized airline on regular routes and on a scheduled timetable.
- Insured Person whilst engaging in a speed contest or racing of any kind (other than on foot), bungee jumping, parasailing, ballooning, parachuting, skydiving, paragliding, hang gliding, mountain or rock

climbing necessitating the use of guides or ropes, potholing, abseiling, deep sea diving using hard helmet and breathing apparatus, polo, snow and ice sports in so far as they involve the training for or participation in competitions or professional sports, or involving a naval, military or air force operation and is specifically specified in the Policy Schedule.

- Working in underground mines, tunnelling or explosives, or involving electrical installation with high tension supply, or as jockeys or circus personnel, or engaged in Hazardous Activities
- Death arising or resulting from the Insured Person committing any breach of law or participating in an actual or attempted felony, riot, crime, misdemeanor, or civil commotion with criminal intent.
- Death arising from or caused by ionizing radiation or contamination by radioactivity from any nuclear fuel (explosive or hazardous form) or resulting from or from any other cause or event contributing concurrently or in any other sequence to the loss, claim or expense from any nuclear waste from the combustion of nuclear fuel, nuclear, chemical or biological attack.

Accidental Total and Permanent Disability Benefit (ATPD)

Accidental Disability Benefit shall be not payable for any losses caused directly or indirectly, wholly or partly, by any one of the following occurrences:

- Disablement as a result of any disease or infection
- Disablement arising due to any condition other than disablement solely and directly as a result of an accident
- Any Pre-existing condition or Disability arising out of a Pre-existing Diseases or any complication arising therefrom. Wherever the proximate cause is accident which has occurred after the rider inception date, this exclusion shall not apply.
- If the Disability has not persisted for at least 180 days and is not in the opinion of a medical practitioner, deemed to be permanent.
- Attempted suicide, intentional self-inflicted injury, acts of self-destruction irrespective of mental condition.
- Disablement arising from or caused due to use, abuse or a consequence or influence of an abuse of any substance, intoxicant, drug, alcohol or hallucinogen
- Disablement arising out of or attributable to foreign invasion, act of foreign enemies, hostilities, warlike operations (whether war be declared or not or while performing duties in the armed forces of any country during war or at peace time), participation in any naval, military or air-force operation, civil war, public defense, rebellion, revolution, insurrection, military or usurped power.
- Disablement caused by participation of the insured person in any flying activity, except as a bona fide, fare-paying passenger of a recognized airline on regular routes and on a scheduled timetable.
- Insured Person whilst engaging in a speed contest or racing of any kind (other than on foot), bungee jumping, parasailing, ballooning, parachuting, skydiving, paragliding, hang gliding, mountain or rock climbing necessitating the use of guides or ropes, potholing, abseiling, deep sea diving using hard helmet and breathing apparatus, polo, snow and ice sports in so far as they involve the training for or participation in competitions or professional sports, or involving a naval, military or air force operation and is specifically specified in the Policy Schedule.
- Working in underground mines, tunnelling or explosives, or involving electrical installation with high tension supply, or as jockeys or circus personnel, or engaged in Hazardous Activities
- Disablement arising or resulting from the Insured Person committing any breach of law or participating in an actual or attempted felony, riot, crime, misdemeanor, or civil commotion with criminal intent.
- Disablement arising from or caused by ionizing radiation or contamination by radioactivity from any nuclear fuel (explosive or hazardous form) or resulting from or from any other cause or event contributing concurrently or in any other sequence to the loss, claim or expense from any nuclear waste from the combustion of nuclear fuel, nuclear, chemical or biological attack.

CritiCare Benefit (CB) and CritiCare Plus Benefit (CPB)

In addition to the disease specific exclusions given along with definitions of the respective diseases covered under the Benefit Option, no benefit will be payable if death or the illness covered under

the policy is caused or aggravated directly or indirectly by any of the following:

- Pre-Existing Diseases are not covered. Any pre-existing disease at the time of inception of the policy.
- Any investigation or treatment for any illness, disorder, complication or ailment arising out of or connected with the pre-existing illness shall be considered part of that pre-existing illness.
- No benefits will be payable for any condition(s) which is a direct or indirect result of any pre-existing conditions unless Life Assured has disclosed the same at the time of proposal or date of revival whichever is later and the Company has accepted the same.
- Any covered condition which is diagnosed and/or received medical advice/treatment within the waiting period.
- Self-inflicted injuries, attempted suicide, insanity, and deliberate participation of the Life Assured in an illegal or criminal act with criminal intent.
- Use of intoxicating drugs / alcohol / solvent, taking of drugs except under the direction of a medical practitioner.
- Any illness due to an external congenital defect
- Engaging in hazardous sports / pastimes, i.e. taking part in (or practising for) boxing, caving, climbing, horse racing, jet skiing, martial arts, mountaineering, off piste skiing, pot holing, power boat racing, underwater diving, yacht racing or any race, trial or timed motor sport, bungee jumping, hand gliding etc.
- Any injury, sickness or disease received as a result of aviation (including parachuting or skydiving), gliding or any form of aerial flight other than as a fare-paying passenger or crew on a licensed passenger-carrying commercial aircraft operating on regular routes and on a scheduled timetable unless agreed by special endorsement.
- War, invasion, hostilities (whether war is declared or not), civil war, rebellion, terrorist activity, revolution or taking part in a riot or civil commotion, strikes or industrial action.
- Any treatment of a donor for the replacement of an organ
- Nuclear reaction, Biological, Chemical or Radioactive contamination due to nuclear accident
- Diagnosis and treatment outside India.
- Ayurvedic, Homeopathy, Unani, herbalist treatment, any other treatments other than Allopathy / western medicines.

CUSTOMER INFORMATION SHEET

Description is illustrative and not exhaustive

Sr. No	Title	Description	Policy Clause Number
1	Product Name	Tata AIA Life Insurance Non-Linked Comprehensive Protection Rider (UIN: 110B033V02) (A Non-Linked, Non- Participating Individual Health Rider)	
2	What am I covered for:	Benefit Option: Accidental Total and Permanent Disability Benefit: 100% of the Insured Amount under this Benefit Option will be payable in the event of the Total and Permanent Disability of the Life Insured due to an accident within the Benefit Option Term, provided the disability occurs within 180 days from that accident as per Part C Clause 1 (III) of the Policy Document.	Part C Clause 1 (III)
3	What are the major exclusions in the policy:	<p>Accidental Disability Benefit shall be not payable for any losses caused directly or indirectly, wholly or partly, by any one of the following occurrences:</p> <ul style="list-style-type: none"> • Disablement as a result of any disease or infection. • Disablement arising due to any condition other than disablement solely and directly as a result of an accident. • Any pre-existing condition or disability arising out of a pre-existing diseases or any complication arising therefrom. Wherever the proximate cause is accident which has occurred after the rider inception date, this exclusion shall not apply • If the Disability has not persisted for at least 180 days and is not in the opinion of a medical practitioner, deemed to be permanent. • Attempted suicide, attempted self-destruction or self-inflicted injury, irrespective of mental condition. • Disablement arising from or caused due to use, abuse or a consequence or influence of an abuse of any substance, intoxicant, drug, alcohol or hallucinogen • Disablement arising out of or attributable to foreign invasion, act of foreign enemies, hostilities, warlike operations (whether war be declared or not or while performing duties in the armed forces of any country during war or at peace time), participation in any naval, military or air-force operation, civil war, public defense, rebellion, revolution, insurrection, military or usurped power • Disablement caused by Participation by the insured person in any flying activity, except as a bona fide, fare-paying passenger of a recognized airline on regular routes and on a scheduled timetable. • Insured Person whilst engaging in a speed contest or racing of any kind (other than on foot), bungee jumping, parasailing, ballooning, parachuting, skydiving, paragliding, hang gliding, mountain or rock climbing necessitating the use of guides or ropes, potholing, abseiling, deep sea diving using hard helmet and breathing apparatus, polo, snow and ice sports in so far as they involve the training for or participation in competitions or professional sports, or involving a naval, military or air force operation and is specifically specified in the Policy Schedule • Working in underground mines, tunnelling or explosives, or involving electrical installation with high tension supply, or as jockeys or circus personnel, or engaged in Hazardous Activities • Disablement arising or resulting from the Insured Person committing any breach of law or participating in an actual or attempted felony, riot, crime, misdemeanor, or civil commotion with criminal intent. • Disablement arising from or caused by ionizing radiation or contamination by radioactivity from any nuclear fuel (explosive or hazardous form) or resulting from or from any other cause or event contributing concurrently or in any other sequence to the loss, claim or expense from any nuclear waste from the combustion of nuclear fuel, nuclear, chemical or biological attack. 	Annexure 1 'Exclusions' Section
4	Waiting period	Not Applicable	-
5	Payment Basis	<p>Benefit as described in Part C Clause 1 (III) of the Policy Document will be paid on the occurrence of a covered event. You can choose to receive the benefits as a</p> <ol style="list-style-type: none"> 1. Combination of Lump sum and income for a fixed income period chosen 2. Income till survival of chosen dependent partner(s) (Partner Care) 3. Waiver of future premiums <p>For more details please refer Part C, Clause 5 of Policy Document</p>	Part C Clause 5
6	Loss Sharing	Not Applicable	-
7	Renewal Conditions	Not Applicable	-
8	Renewal Benefits:	Not Applicable	-
9	Cancellation	<p>This policy will be cancelled, and no claim or refund would be due to you if;</p> <ol style="list-style-type: none"> a. You have not correctly disclosed details about current and past health status OR b. Have otherwise encouraged or participated in any fraudulent claim under the policy OR c. In case of misrepresentation of material information <p>Also, this Benefit Option shall automatically terminate on the occurrence of any of the events described in Part D Clause 8</p>	
10	Claims	<p>For processing the claim request under this rider, please share documents as listed under Part F Clause 2 of the Policy Document.</p> <p>The evidence of travel in public land transportation, airline or visit to theatre, cinema, public auditorium, hotel will be required for Double Benefit claim to be considered.</p>	Part F Clause 2
11	Policy Servicing/ Grievance/ Complaints	For details on policy servicing/grievances/complaints, please refer the terms and conditions of the base plan	Part D and Part G

12	Insured's Right	<ul style="list-style-type: none"> Free look & Revival: For the purpose of this Supplementary Contract, the provisions of the base plan in respect of Free look cancellation and revival, shall apply. Turn Around Time (TAT) for Claim Processing: For Health Claims: The claim will be decided within 30 days of receiving all documents and clarification. If the claim is investigated, the investigation will be completed within 30 days and the claim decided in another 15 days, therefore not exceeding 45 days in total. 	Part D
13	Insured's Obligations	<ul style="list-style-type: none"> Please disclose all pre-existing disease/s or condition/s before buying a Policy. Non-disclosure may result in claim not being paid. Disclosure of Material Information and any changes therein during the Policy period should be communicated to us by: <ul style="list-style-type: none"> - Sending an email to customercare@tataaia.com from your email id registered with us - Submission of the Request for Change form* (filled and signed) at any Tata AIA Life Insurance Branch or Service Centre <p>*Request for Change form is available on our website – www.tataaia.com</p>	Part F Clause 4

1) Kindly note that this document does not substitute the Policy Contract.

2) In case the age is found to be higher/lower than the actual age, the rights and remedies would get affected

(LEGAL DISCLAIMER) NOTE: The information must be read in conjunction with the Product Brochure and Policy Document. In case of any conflict between the Customer Information Sheet and the Policy Document, the terms and conditions mentioned in the Policy Document shall prevail.

CUSTOMER INFORMATION SHEET

Description is illustrative and not exhaustive

Sr. NO	TITLE	DESCRIPTION	POLICY CLAUSE NUMBER
1	Product Name	Tata AIA Life Insurance Non-Linked Comprehensive Protection Rider (UIN: 110B033V02) (A Non-Linked, Non- Participating Individual Health Rider)	
2	What am I covered for:	Benefit Option: Term Benefit with Accelerated Terminal Illness The Insured Amount under this option is payable on earlier of death or diagnosis of Terminal illness of the Life Insured as per Part C Clause 1 (I) of the Policy Document.	Part C Clause 1 (I)
3	What are the major exclusions in the policy:	Suicide Exclusion: In case of death 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 at least 80% of the total premiums paid till the date of death or the surrender value available as on the date of death whichever is higher, provided the policy is in force. No other claim would be entertained by the Company except the refund of 80% Total Premiums Paid or the acquired surrender value, as applicable. Apart from Suicide exclusion detailed above, no other exclusion is applicable in the event of death. Terminal Illness Exclusion: The Life Insured will not be entitled to any Terminal Illness benefit if it is caused directly or indirectly due to or occasioned, accelerated or aggravated by intentional self-inflicted injury or attempted suicide, whether medically sane or insane.	Annexure 1 'Exclusions' Section
4	Waiting period	Not Applicable	-
5	Payment basis	Benefit as described in Part C Clause 1 (I) of the Policy Document will be paid on the occurrence of a covered event. You can choose to receive the benefits as a 1. Combination of Lump sum and income for a fixed income period chosen 2. Income till survival of chosen dependent partner(s) (Partner Care) 3. Waiver of future premiums For more details please refer Part C, Clause 5 of Policy Document	Part C Clause 5
6	Loss Sharing	Not Applicable	-
7	Renewal Conditions	Not Applicable	-
8	Renewal Benefits:	Not Applicable	-
9	Cancellation	This policy will be cancelled, and no claim or refund would be due to you if: a) You have not correctly disclosed details about current and past health status OR b) Have otherwise encouraged or participated in any fraudulent claim under the policy OR c) In case of misrepresentation of material information Also, this Benefit Option shall automatically terminate on the occurrence of any of the events described in Part D Clause 8 of the Policy Document.	
10	Claims	For processing the claim request under this rider, please share documents as listed under Part F Clause 2 of the Policy Document.	Part F Clause 2
11	Policy Servicing/ Grievance/ Complaints	For details on policy servicing/grievances/complaints, please refer the terms and conditions of the base plan	Part D and Part G
12	Insured's Right	<ul style="list-style-type: none"> Free look & Revival: For the purpose of this Supplementary Contract, the provisions of the base plan in respect of Free look cancellation and revival, shall apply. Turn Around Time (TAT) for Claim Processing: For Health Claims: The claim will be decided within 30 days of receiving all documents and clarification. If the claim is investigated, the investigation will be completed within 30 days and the claim decided in another 15 days, therefore not exceeding 45 days in total. 	Part D
13	Insured's Obligations	<ul style="list-style-type: none"> Please disclose all pre-existing disease/s or condition/s before buying a Policy. Non-disclosure may result in claim not being paid. Disclosure of Material Information and any changes therein during the Policy period should be communicated to us by: <ul style="list-style-type: none"> Sending an email to customercare@tataaia.com from your email id registered with us Submission of the Request for Change form* (filled and signed) at any Tata AIA Life Insurance Branch or Service Centre 	Part F Clause 4

- 1) Kindly note that this document does not substitute the Policy Contract.
- 2) In case the age is found to be higher/lower than the actual age, the rights and remedies would get affected

(LEGAL DISCLAIMER) NOTE: The information must be read in conjunction with the Product Brochure and Policy Document. In case of any conflict between the Customer Information Sheet and the Policy Document, the terms and conditions mentioned in the Policy Document shall prevail.

CLAIM DOCUMENT LIST

Requirements for Hospitalization & Critical Illness Claim		Requirements for Disability and Dismemberment Claim	Requirements for Death Claim (all causes of Death)
A	Claim Forms Part I: Application Form for Hospitalization/Critical Illness Claim (Claimant's Statement) along with NEFT form Part II: Confidential Medical Report -to be filled by attending physician	A Claim Forms Part I: Application Form for Disability/Dismemberment Claim (Claimant's Statement) along with NEFT form Part II: Confidential Medical Report -to be filled by attending physician	A Claim Forms Part I: Application Form for Death Claim (Claimant's Statement) along with NEFT form Part II: Physician's Statement - to be filled by last attending physician
B	Hospital Bills for the confinement.	B Attested True Copy of Indoor Case Papers of the Hospital	B Death Certificate issued by a local government body like Municipal Corporation
C	Attested True Copy of Indoor Case Papers of the Hospital	C Discharge Summary of Present and Past Hospitalizations	C Medical Records (Admission Notes, Discharge/Death Summary, Indoor Case Papers, Test Reports etc)1
D	Discharge Summary of Present and Past Hospitalizations	D Photo Identity of insured with age and address proof	D Original Policy document
E	Photo Identity of insured with age and address proof	E Bank Details of the claimant – Cancelled cheque (with printed name and account number)/bank passbook and NEFT Form	E Claimant's Photo ID with age proof & relationship with the Insured along with Address proof of the claimant and Cancelled cheque with name and account number printed or cancelled cheque with copy of Bank Passbook / Bank Statement If no nomination - Proof of legal title to the claim proceeds (e.g. legal succession paper)
F	Bank Details of the claimant – Cancelled cheque (with printed name and account number)/bank passbook and NEFT Form	F Disability Certificate by attending Physician / Institute for disabled	
G	Certificate of Diagnosis	G Rehabilitation Certificate - if applicable	
H	Medical Examination Certificate (First Consultation Notes).	H Employer's written confirmation / statement - for Disability claim	
I	All related clinical Reports pertaining to the claim event - Laboratory test reports X-Ray / CT Scan / MRI Reports & Plates Ultrasonography Report Histopathology Report Clinical / Hospital Reports Angiography Reports & Plates. Others (please specify).	I All related Medical Examination Reports, e.g. - Laboratory test reports X-Ray / CT Scan / MRI Reports & Plates Ultrasonography Report Clinical / Hospital Reports	
J	All follow-up Consultation Notes in relation to the hospitalized condition.	J Clinical Photographs showing the injured areas - if available	
If Claims is due to accidental causes (submit in addition to the above)		If Claims is due to accidental causes (submit in addition to the above).	
K	All police reports- First Information Report Final Investigation Report	K All police reports- First Information Report Final Investigation Report	In case of accidental death inaddition to the above documents, we would require the following documents – F Postmortem report (Autopsy report) & Chemical Viscera report - if performed G All Police Papers – Panchnama, Inquest, First Information Report (FIR) and Final Investigation Report H Newspaper cutting / Photographs of the accident - if available

1. This is applicable if insured was in hospital at the time of death or any time prior to the date of death.
 • Please submit copies of the following documents certified / attested by the issuing authority. (Original Seen Verified (OSV) by Branch Personnel will also be accepted) -
 o All Police papers – Panchnama, Inquest, First Information Report and Final Investigation Report
 o Medical Records (Admission Notes, Discharge/Death Summary, Indoor Case Papers, Test Reports etc)1
 o Postmortem report (Autopsy report) & Chemical Viscera report (certified by Police / Magistrate / Court will also be accepted)
 • Copies of the other documents to be submitted by self attestation of the claimant

NOTE:

- In case the claim warrants any additional requirement, **TATA AIA LIFE** reserves the right to call for the same.
- Notification of claim & submission of the claim requirements does not mean admission of the claim liability by the Company.
- No agent is authorized to admit any liabilities on behalf of the Company, nor to alter this list of documents or any claims requirements called for by the Company.

FREQUENTLY ASKED QUESTIONS (FAQs)

1. How can I cancel my policy under Free Look?

- The policy can be cancelled anytime within 15 days from the date of receipt of the policy document. Kindly submit the policy document along with a duly signed letter at any of the Tata AIA Life branches[#].

2. How can I change the premium payment mode?

- Please submit a duly signed copy of the Mode change form* at any of the Tata AIA Life branches[#] at least 10 days before the due date of the policy.
- Please contact the branch or call center for mode changes allowed on your policy

3. How can I make the below mentioned changes in my policy?

- Name change	- Address / Contact Number Change
- Ownership Change	- Signature Change
- Nominee Change	- Basic Plan Change

- Please submit a duly signed copy of the respective change form* along with the documents mentioned in the form at any of the Tata AIA Life branches[#].

4. Can I opt for automatic premium payment facility on my policy?

- You can avail of any of the following facilities wherein your account / Credit Card will be debited on the due date of your policy.
 - ECS** - A signed copy of the ECS form* along with a cancelled cheque or copy of cancelled cheque needs to be submitted at any of the Tata AIA Life branches at least 10 days prior to the due date
 - Credit Card** – A signed copy of the Credit Card form* along with a copy of Front page of credit card needs to be submitted at any of the Tata AIA Life branches at least 10 days prior to the due date
 - Direct debit** – You can avail of Direct Debit facility by providing a copy of an 'ECS & Direct Debit' form* with copy of cancelled cheque or bank attestation at least 30 days before the due date. To know the list of banks wherein this facility is available, kindly visit the 'Premium Payment Options' on www.tataaia.com.

5. I have lost my PIP and need a duplicate PIP.

- Please submit a duly signed copy of the Duplicate PIP form* along with the documents mentioned in the form at any of the Tata AIA Life branches[#].

6. How can I view my policy related details online?

- You can create your online account by logging in to www.tataaia.com and avail of the following benefits –
 - Easy access to policy related details (Premium Due Date, NAV, Payment Summary, etc.,)
 - Single access for all your policies
 - Perform Online ULIP transactions
 - Pay Premium Online
 - Generate e-statements (Premium Certificates, Unit Statements)
 - Raise Service Requests

7. How do I request for a Premium Payment Certificate for my policies?

- You can request for your Premium Certificate through the following modes -
 - Online Customer Portal** - Kindly logon to your Online Account by visiting www.tataaia.com
 - SMS** - Kindly SMS the following to 5676799:

- PCT <space> 10 digit policy no <space> email address (in case you wish to receive by email, else will be sent to your communication address) <space> financial year (yyyy-yyyy format)

- The mobile number from where the SMS has been sent should be registered with the company. In case your mobile number is not registered, please send the following SMS to 5676799:

REG <space> 10 digit policy no <space> Insured's DOB in DDMMYYYY format <space>
Sum Assured

(For Health, Annuity and Pension plans, Sum Assured should be mentioned as '0')

- **Email / Call / Branch** - Request for the Premium Certificate by sending an email to customercare@tataaia.com or call our helpline number at 1-860-266-9966 (local charges apply) or visit the nearest branch[#].

8. For my unit linked policy, how can I request for Fund Switch, Premium Redirection & Top-up?

- You can create your online account by logging in to www.tataaia.com and perform Fund Switch, Premium Redirection and Top-up transactions instantly (or)
- Please submit a duly signed copy of the Fund Allocation, Switch & Top-up form* pertaining to your product at any of the Tata AIA Life branches[#].

* You can download the forms by visiting 'Customer Services' section on www.tataaia.com

[#] For your nearest Tata AIA Life branch, please visit 'Contact Us' section on www.tataaia.com.

You can also send the forms along with the documents to the below mentioned address –

Policy Owners Services

Tata AIA Life Insurance Company Limited,
B-Wing, 9th Floor, I-Think Techno Campus,
Behind TCS, Pokhran Road No.2,
Close to Eastern Express Highway,
Thane (West) – 400 607, Maharashtra

PROPOSAL FORM

Tata AIA Life Insurance Company Limited.
COMMON PROPOSAL FORM

Kindly Fill the form in CAPITAL and only in blue or black
(For Official Use only)



Proposal Number: C219578608

Branch Code: MU01

Channel: Broking

Campaign Code:

Sub Office Code:

RM CAMS Code: 4967389

Agent/Broker/Specified Person/Employee: Policy Bazaar

Code:

Contact Details:

License No. & Validity Details:

Customer Relationship No. (For Bancassurance Channel)

PAN No.

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IMPORTANT GUIDELINES: 1) IN UNIT-LINKED INSURANCE POLICIES (ULIPs), THE INVESTMENT RISK IN INVESTMENT PORTFOLIO IS BORNE BY THE POLICYHOLDER. 2) Insurance is a contract of utmost good faith between the Insurer and the Insured. The Proposer and the Life to be Assured are required to disclose all facts in response to the questions in this application form. 3) Any cancellation/alteration is to be signed by Proposer/Life to be assured as applicable. 4) KYC documents will be required for all the parties to the contract.

I. GENERIC DETAILS

Is this policy self-proposed? Yes . If No, please answer the following details

Type of Proposer:

Relation with Life Assured: Self

Type of Proposal:

II. ELECTRONIC INSURANCE ACCOUNT (eIA) DETAILS OF THE PROPOSER/POLICYOWNER

If you have an e-Insurance Account (eIA) Number, please provide:

I would like to receive my Insurance Policy and all the information related to the proposed Insurance Policy through Tata AIA Life Insurance Company Ltd. In electronic format (Physical copy would be sent even if proposer opts for electronic format; however, in case proposer has e-Insurance Account, only electronic copy of the Insurance Policy will be provided)

I would like to receive my Insurance Policy and all the information related to the proposed Insurance Policy through Insurance Repository in the Electronic Format as and when applicable. Please select the name of the Insurance Repository.

NSDL Data Management Limited

III. PRODUCT DETAILS

Base Plan/ Rider (Benefit Option) Name	Unit Linked (Yes/No)	Life Insured Name	Sum Assured (₹)	Policy Term(Years)	Premium Paying Term(Years)	Premium (₹) (Inclusive of applicable taxes, cesses & levies)	Premium Paying Mode	Return of Premium option
Tata AIA Life Insurance Sampoorna Raksha Supreme	No	ANKUR NATH TIWARI	6900000	26	26	886	Monthly	NA
Tata AIA Life Insurance Non Linked Comprehensive Protection Rider (Accidental Total and Permanent Disability Benefit)	No	ANKUR NATH TIWARI	2500000	26	26	71	Monthly	No
Tata AIA Life Insurance Non Linked Comprehensive Protection Rider (Term Benefit with Accelerated Terminal Illness)	No	ANKUR NATH TIWARI	3100000	26	26	490	Monthly	No

Rider (Benefit Option) Name	Life Insured Details			Benefit Payout Option	Benefit Payout Option Details			
	Name	DOB	Gender		Lumpsum (₹)	Income p.a (₹)	Income Duration(Years)	Income Frequency
Tata AIA Life Insurance Non Linked Comprehensive Protection Rider (Accidental Total and Permanent Disability Benefit)	ANKUR NATH TIWARI	02-02-1987	MALE	Lump sum and Fixed Income	2500000	NA	NA	NA
Tata AIA Life Insurance Non Linked Comprehensive Protection Rider (Term Benefit with Accelerated Terminal Illness)	ANKUR NATH TIWARI	02-02-1987	MALE	Lump sum and Fixed Income	3100000	NA	NA	NA

Kindly DATE BACK my Application to 1. Allowed only as per product specifications 2. Allowed within the same financial year 3. In case of juvenile (less than 1 year) back date is not allowed. 4. Date Back of policy is allowed only up to the official launch date of the product.

FUND SELECTION DETAILS (To be filled for Unit Linked Products) a. Kindly mention the names of the fund chosen b. Incase you opt for a specific Portfolio Strategy (as available with individual products), kindly mention the Fund Names or other details as applicable c. Kindly fill in whole numbers in percentage only. Decimals and Fractions not allowed.

Name of Fund	% Allocation

OR

Portfolio Strategy	
Funds for the chosen Portfolio Strategy (If Applicable)	
Debt oriented fund	Equity oriented fund
Other Details(if applicable)	

IV. PROPOSER / POLICYHOLDER DETAILS (Please fill in details of Life Assured if same as Proposer)

1. Title	Mr
2. Name	ANKUR NATH TIWARI
3. Father's Name / Spouse Name	DINESHWAR TIWARI
4. Mother's Name	VIJAY LAXMI TIWARI
5. Maiden Name(For female lives only)	
6. Gender/Date of Birth	MALE/ 02-02-1987

7. Which is your Dominant Hand? (Question to be answered only if ADDL Rider is selected)	Right
8. Marital Status	Single
9. Nationality (If other than resident Indian, Passport as an age proof is mandatory)	Nationality: Resident Indian Country of Residence : India (If country of residence or nationality outside India then FATCA/ CRS-Self Certification Form to be mandatorily completed)
Residence for Tax purposes in Jurisdiction(s) outside India	No (If 'Yes' then FATCA/ CRS-Self Certification Form to be mandatorily completed)
10. Highest Educational Qualification	Graduate
11. Current Residence Address	B 288 KENDRIYA VIHAR SECTOR 51 Landmark: NEAR SECTOR 34 METRO STATION City: Noida State: Uttar Pradesh Country: India Pin code: 201307
12. Permanent Address	53 TULA RAM BAGH Landmark: NEAR FORT ROAD CHOWK City: Allahabad State: Uttar Pradesh Country: India Pin code: 211006
13. Address for Communication	Current Address
14. Telephone and Email Details	Residence No: Mobile No: 9696508217 E-mail: ankurnath@gmail.com
15. Occupation Class	Salaried
a. Name of Organisation /School / College	HCL TECHNOLOGIES PVT LTD
b. Organisation Type	Private Limited
c. Industry	Information Technology
d. Nature of Work	Software Professional
e. Annual Income (₹)	1400000
16. Income Proof	Salary Certificate Of Current Financial Year
17. Identity Proof (In case of Passport & Driving License please mention expiry date)	Aadhar Card, Uid
18. Address Proof (Utility bills should not be older than 2 months)	Aadhar Card, Uid
19. Permanent Account Number (PAN) :	ALVPT3385K (kindly attach copy of Pan card)
20. CKYC No. (If available)	
21. Source of Funds	
22. Are you a Politically Exposed Person? No (Definition of PEP: "PEP are individuals who are or have been entrusted with prominent public functions, domestically/in an international organisation /in a foreign country. This would include individuals who have or have had positions of Heads of State or of government, senior politicians, senior government, judicial or military officials, senior executives of state owned corporations, important political party officials". "Close relations of PEP: Family members are individuals who are related to a PEP either directly (consanguinity) or through marriage or similar (civil) forms of partnership. Close associates are individuals closely connected to a PEP, either socially or professionally")	

IV. LIFE ASSURED DETAILS (Please fill in this section only if Life Assured is different from Proposer)

1. Title	
2. Name	
3. Maiden Name(For female lives only)	
4. Gender/Date of Birth	
5. Which is your Dominant Hand? (Question to be answered only if ADDL Rider is selected)	
6. Marital Status	
7. Nationality (If other than resident Indian, Passport as an age proof is mandatory)	Country of Residence

8. Highest Educational Qualification	
9. Occupation Class	
10. Name of Organisation/ School/College	
11. Organisation Type	
12. Industry	
13. Nature of Work	
14. Annual Income (₹)	
15. Income Proof	
16. Identity Proof (In case of Passport & Driving License please mention expiry date)	Expiry Date : Others :
17. Address Proof (Utility bills should not be older than 2 months)	
18. Permanent Account Number (PAN):	(kindly attach copy of Pan card)

19. Are you a Politically Exposed Person? (Definition of PEP: "PEP are individuals who are or have been entrusted with prominent public functions, domestically/in an international organisation /in a foreign country. This would include individuals who have or have had positions of Heads of State or of government, senior politicians, senior government, judicial or military officials, senior executives of state owned corporations, important political party officials". "Close relations of PEP: Family members are individuals who are related to a PEP either directly (consanguinity) or through marriage or similar (civil) forms of partnership. Close associates are individuals closely connected to a PEP, either socially or professionally")

VI. HEALTH & LIFESTYLE DETAILS OF THE LIFE ASSURED

1. Nature of Age proof (Non-standard age proof submission will attract extra premium)
Aadhar Id Card - Standard

2. a) Height (cms or ft) b) Weight (kg or lbs). 177.8cms 60Kg

PART A: LIFESTYLE DETAILS

- | | |
|---|----|
| 1. Are you employed in the Armed Forces, Paramilitary, Police Forces, Fire Brigade or any other similar occupation? | No |
| 2. Is your occupation/your hobbies associated with any specific accident/health hazard or are dangerous in any way (e.g. working with dangerous or corrosive chemicals, explosives, radiation, working underwater/underground or at height, working in mines, non-commercial flying activities, diving, mountaineering, any form of motorbike/car racing etc.)? | No |
| 3. Have you ever been charge sheeted or convicted of any criminal proceedings or have any criminal case or charge pending against you in any court of law in India or abroad? If Yes, please provide complete details. | No |
| 4. Do you intend to live or travel outside India for more than 30 days for reason other than family vacation in next 6 months? | No |
| 5. Do you consume or have consumed any of the following? Please tick all relevant options and provide details | |

Substance Consumed	Yes/ No	Consumed As	Quantity/ Per Day for Tobacco & Per week for Alcohol and Narcotics	No. of Years	If stopped consumption, mention month and year in which last consumed
Tobacco	No				
Alcohol	No				
Any Narcotics	No				

PART B: HEALTH & PERSONAL DETAILS

- | | |
|---|----|
| 1. Has any of your insurance application or reinstatement application on life, accident, medical or health, critical illness, or disability ever been declined, postponed or accepted at extra premium or modified terms? | No |
| 2. Did you have any loss or Gain of weight of 10 kgs or more in the last six months? | No |
| 3. Do you have any physical deformity / handicap or congenital defect / abnormality? | No |
| 4. Have you ever been advised to and / or have undergone any tests, investigations or surgery or had signs or symptoms of any condition, ailment or injury and / or were advised treatment for or have been hospitalized for check-up or treatment other than minor flu, cold or influenza? | No |
| 5. Have you ever been diagnosed with or investigated for any of the following: | |
| a. Cardio: High or Low Blood Pressure / Raised Cholesterol / Chest Pain / Palpitation / Rheumatic Fever / Heart Murmur / Shortness of Breath / Heart Attack / Stroke / Any other heart condition | No |
| b. Hormonal: High Blood Sugar/ Diabetes / Thyroid or endocrine disorder / Sugar in Urine / Any other hormonal disorder | No |
| c. Respiratory: Asthma / Tuberculosis / chronic cough, chronic bronchitis, emphysema, pneumonia / Any other respiratory disorder | No |
| d. Blood/Cellular: Cancer / Tumor or malignant growth / Leukemia / Anemia / Enlarged lymph nodes/ Any blood disorder | No |
| e. Digestive/Regulatory: Recurrent indigestion / Gastritis / Stomach or Duodenal Ulcer / Hernia / Jaundice / Disorders of the liver / Cirrhosis and Gastrointestinal System/ Any other disease | No |

f. Mental/Psychiatric / Neurological ailment: Symptoms or ailment relating to Brain Depression / Anxiety / Brain Disorder or disease / Mental / Psychiatric / Transient ischemic attack /Parkinson's disease / Multiple Sclerosis / Nervous disorder / Paralysis or Paraplegia / Epilepsy / Any other mental or psychiatric ailment							No	
g. Neural/Skeletal/Muscular: Musculoskeletal disorders such as Arthritis / Recurrent Back Pain / muscular dystrophies/ musculoskeletal deformities/ Slipped disc or any other disorder of Spine, Joints, Limbs or Leprosy; / Disorders of Eye, Ear, Nose,Throat including defective sight / Disorder of speech or hearing and discharge from ears / Any other disorder							No	
h. Infectious/Contagious: Were you or your spouse ever tested for Hepatitis B or C, HIV /AIDS or any other Sexually Transmitted Disease / Any other disorder							No	
i. Genitourinary: Hydrocele / fistula / piles / symptoms or ailment relating to Kidney / Kidney Stones/ Prostate, Urinary System or Reproductive System / Any other disorder							No	
6. Have you had/ are having any other illness or impairment not mentioned above?							No	
7. Are you presently in good health?							Yes	
8. Has any of your family member (Parents and Siblings) ever been diagnosed with diabetes, Hypertension, Kidney Failure, Cancer, Heart Attack or any Hereditary Disorder before the age of 60?							No	
9. Have you ever been advised to undergo any surgery or treatment or laboratory investigations (stress ECG, echocardiogram, angiography, MRI/CT scan etc.) by any doctor or specialist?							No	
10. Have you been off work due to illness for a continuous period of 7 days and above during the last 5 years?							No	
11. Female Life Questionnaire								
a. Are you now Pregnant? If Yes, kindly state expected delivery date								
b. Have you undergone any gynaecological investigations for illness, internal checkups, breast checks such as mammogram or biopsy?								
c. Have you ever consulted a doctor because of an irregularity at the breast, vagina, uterus, ovary, fallopian tubes, menstruation, complications during pregnancy or child delivery or a sexually transmitted disease?								
d. Have you suffered from any other disorder of the breast or reproductive organs, abnormal smear test(s) and irregular menses?								
12. If answer to any of the question above is 'yes', kindly give full details noting the question number (attach relevant copies) Question No.: Details:								
13. Family Details (Mandatory if the life to insured is Juvenile/Student/Housewife)								
Family Details	Name	Gender (M / F)	Date of Birth	Occupation	Annual Income (₹)	Insurance Details (Existing /Applied for)		
Father/Husband								
First Child / Sibling								
Second Child / Sibling								
14. Family Details to be filled for Life Assured only				Father	Mother	Brother	Sister	Spouse
a. If Alive, Health Status								
b. If Deceased, Cause of Death								
c. Age at Death/Current Age								
VII. EXISTING INSURANCE DETAILS								
Do you currently hold or have applied for Life Insurance/Pension/Health/Personal Accident Policies? Y / N If Yes, kindly provide details as below:								
Life Assured				Proposer (If Life Assured is Juvenile/Student/Housewife)				
Type of Insurance (Life/ Health/ Unit Linked /Pension/Personal Accident)	Company Name	Basic Sum Assured (₹)	Type of Insurance (Life/ Health/ Unit Linked /Pension/Personal Accident)	Company Name	Basic Sum Assured (₹)			
VIII. NOMINEE DETAILS (Required only if Proposer & Life Assure are the same)								
Base Plan/ Rider (Benefit Option)Name	Name	Date of Birth	Gender (M/F)	Relationship	Percentage (%) (Do not enter % in decimals & total % should be equal to 100)			
Tata AIA Life Insurance Sampoorna Raksha Supreme	VIJAY LAXMI TIWARI	09-11-1962	Female	Mother	100			
IX. APPOINTEE DETAILS (Required only if Nominee is less than 18 years of age)								
Name	Date of Birth		Gender (M/F)	Relationship				

X. PAYMENT DETAILS

Premium Payment Method: Digital/Online Payment

Name of Credit Card/Debit Card Holder: Credit Card/Debit Card Number
Cheque/DD No. Issuing Bank Branch Amount Date: DD/MM/YYYY

Premium[#] ₹ 1225 + Taxes, cesses & levies ₹ 221 = Total Payment ₹ 1446 for months initial deposit (To be filled for monthly mode only)

On the first policy/modal anniversary I would like to change the premium payment mode to , subject to policy contract provisions. For Annual/Monthly mode issued # policies mode change shall be accepted only on completion of first policy anniversary. #Premium is exclusive of applicable taxes, cesses & levies. All Premiums are subject to applicable taxes, cesses & levies which will entirely be borne by the Policyholder and will always be paid by the Policyholder along with the payment of Premium. If any imposition (tax or otherwise) is levied by any statutory or administrative body under the Policy, Tata AIA Life Insurance Company Limited reserves the right to claim the same from the Policyholder. Alternatively, Tata AIA Life Insurance Company Limited has the right to deduct the amount from the benefits payable by Us under the Policy. Cheque/DD should be drawn in favor of "Tata AIA Life Insurance Company Ltd. (Proposal No)". Do not issue blank cheque.

Renewal Payment Mode:

XI. Mandatory Bank Account Details:

Please provide below bank details. Bank details provided should be in the name of Proposer. All policy payouts will be made to the below mentioned bank account through electronic transfer (NEFT). Payout would be in accordance and subject to terms and conditions of the policy.

Name of Account Holder	Bank Account No.	Bank Name and Branch	Account Type	IFSC Code

Note: 1. Please provide a cancelled copy of your personalized cheque. If personalized cancelled cheque is not available, attach bank statement showing account holder name, address and account number. 2. In case of Non-Credit to the given bank account with/without assigning any reason thereof or if the transaction is delayed or not effected at all for any reason of incomplete information, Tata AIA Life Insurance Co Ltd will not be responsible. 3. Further, the Company reserves the right to use any alternative payout option inspite of opting for Direct Credit option. 4. If Account type is NRE/NRO then FATCA/CRS-Self Certification Form to be mandatorily completed.

XII. DECLARATION & CONSENT

- I hereby declare, on my behalf and on behalf of all persons proposed to be insured, that the above statements, answers and/or particulars given by me are true and complete in all respects to the best of my knowledge and that I am authorised to propose on behalf of these other persons (applicable where the proposer and life insured are different).
- I understand that the information provided by me will form the basis of the insurance policy, is subject to the Board approved underwriting policy of the insurer and that the policy will come into force only after full payment of the premium chargeable.
- I further declare that I will notify in writing any change occurring in the occupation or general health of the life to be insured/proposer after the proposal has been submitted but before communication of the risk acceptance by the company.
- I declare that I consent to the company seeking medical information from any doctor or hospital who/which at any time has attended on the person to be insured/ proposer or from any past or present employer concerning anything which affects the physical or mental health of the person to be insured/ proposer and seeking information from any insurer to whom an application for insurance on the person to be insured /proposer has been made for the purpose of underwriting the proposal and/or claim settlement.
- I authorize the company to share information pertaining to my proposal including the medical records of the insured/proposer (if any) for the sole purpose of underwriting the proposal and/or claims settlement and with any Governmental and/or Regulatory authority.
- I confirm that I have understood the contents of this Proposal Form and I am submitting this Proposal Form with all the details which are true and correct. I have not withheld any material information or suppressed any fact which are essential for issuance of the policy. I also hereby irrevocably authorize the Company to ascertain all the details from any third parties, as may be required for assessing the risk.
- I agree to undergo all medical tests as determined by the Company for obtaining the policy and I further understand that the Company reserves the right to issue the policy if all the required criteria are met and in case of any fraud or misrepresentation being established, the insurer shall take action in accordance with Section 45 of the Insurance Act, 1938 as amended time to time. I understand that the contract will be governed by the provisions of the Insurance Act, 1938 as amended time to time, the IRDA Act, 1999 and the Regulations framed there under and that the contract will not commence until the Company's written acceptance of this Proposal Form is received. In case of the life to be insured being a minor, I further declare and affirm that this proposal of insurance is for the benefit of the life to be insured.
- Anti-Money Laundering Declaration:** I hereby confirm that all premiums will be paid from bona fide sources and no premiums will be paid out of proceeds of crime related to any of the offence listed in Prevention of Money Laundering Act, 2002. The Company has the right to peruse my financial profile and also agree that the Company has right to cancel the insurance contract in case I have been found guilty of any of the provisions of any law, directly or indirectly, having relation to the laws governing prevention of money laundering in the country, by any competent court of law.
- I/We understand that in accordance with the IRDAI (Protection of Policyholders Interests) Regulations, 2017, the insurer is permitted to share policyholder information only with the statutory authorities. I permit/authorize the Company to collect, store, communicate and process information relating to the Policy/Account and all transactions therein, by the Company and any of its affiliates or service providers wherever situated including sharing, transfer and disclosure between them or with any entity or entities for the purpose of underwriting, policyholder servicing and claims; and to the authorities in and/or outside India for compliance with any law or regulation whether domestic or foreign.

Signature/Thumb Impression of Life Assured
Authenticated through OTP

Signature/Thumb impression of Proposer

Date: 25-01-2022
Place: Noida

I hereby declare that the details furnished above are true and correct to the best of my/our knowledge and belief and I undertake to inform you of any changes therein, immediately in case any of the above information is found to be false or untrue or misleading or misrepresenting, before issuance of the proposal. "I, the undersigned confirm that I have verified photocopies of the proofs submitted along with this proposal form against the originals and certify the same to be true copy".

I declare and confirm that I have carried out necessary suitability analysis while advising this product to the proposer and that the product is suitable to the proposer.

Signature of Agent/ Specified Person/ Broker/ Employee

X

ACKNOWLEDGEMENT

Tear away portion (To be handed over to the customer)

Proposal Number: _____

Dear Customer

We acknowledge receipt of your Cash/Cheque/DD for Rs._____ by number _____ dated ____ / ____ / ____ drawn on _____ toward's Initial Deposit. We request you to kindly verify the details filled in the proposal form before signing the same. Please do insist on Official Receipt issued by Tata AIA Life from your advisor within 2 working days from submission of this proposal form. In case you do not hear from us or do not receive your policy within 15 days from the date of submission of your proposal, please visit us at www.tataaia.com or call our helpline number 1860 266 9966 (local charges apply) or email us at customercare@tataaia.com.

This is only acknowledgement slip and not the premium receipt.

[Redacted]

Agent code

[Redacted]

Agent name

[Redacted]

Signature of Agent

[Redacted]

Date of Acknowledgement

IN CASE ANSWERS TO THE QUESTIONS ARE FILLED IN BY A PERSON OTHER THAN THE PROPOSER OR WHERE THE ANSWERS/SIGNATURE OF THE PROPOSER/ ANNUITANTS ARE IN VERNACULAR.

Note: The below must be witnessed by someone other than advisor/employee of the company.

Declaration by Agent/Intermediary of Tata AIA Life Insurance Company Limited

I, _____ (name) have explained the contents of this proposal to the _____
(Proposer) in _____ (language) and ensured that the contents have been fully understood by him/her. I have accurately recorded the Proposer responses to the information sought in the proposal form and I have read out the responses to the Proposer and he/she has confirmed that they are correct.

Date: 25-01-2022

Place: Noida

(Signature of the person making the declaration)

Address of the person making the declaration:

Declaration by Proposer:

I have understood the contents of this proposal explained to me in _____ language and confirm that the responses provided by me are correct.

Date:
Place:

Date: 25-01-2022
Place: Noida

Signature/Thumb Impression of the Life Assured

Signature/Thumb impression of Proposer

(Prohibition of Rebates) Section 41 - of the Insurance Act, 1938 as amended from time to time: 1. No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out 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 of the insurer. 2. 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."

SECTION 45 OF THE INSURANCE ACT, 1938 STATES: No policy of life insurance shall be called in question on any ground whatsoever after the expiry of three years from the date of policy, i.e. from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later. A policy of life insurance may be called in question at any time within three years from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later, on the ground of fraud: Provided that the insurer shall have to communicate in writing to the insured or the legal representatives or nominees or assignees of the insured the grounds and materials on which such decision is based. Nothing in this section shall prevent the insurer from calling for proof of age at any time if he is entitled to do so, and no policy shall be deemed to be called in question merely because the terms of the policy adjusted on subsequent proof that the age of the life insured was incorrectly stated in the proposal. For further details, please refer to the Insurance Act, as amended from time to time.

Disclaimers: IN CASE OF A ULIP POLICY, THE INVESTMENT RISK IN INVESTMENT PORTFOLIO IS BORNE BY THE POLICYHOLDER. Tata AIA Life Insurance Company Limited is only the name of the Company and any contract bearing the prefix "Tata AIA Life" is only the name of the contract and does not in any way indicate the quality of the contracts, its future prospects or returns. Premium paid in ULIP is subject to investment risks associated with capital markets & the NAV of the units may go up or down based on the performance of the funds and factors influencing capital markets and the insured is responsible for his decision. Past performance is not indicative of future results. For more details on risk factors, terms and conditions please read sales brochure carefully before concluding a sale.

L&C/Advt/2021/May/0629

✓

1. Please carry valid Identity card to the medical examination center wherever applicable. 2. For cash payment, please visit our nearest Tata AIA Life branch. Please do not handover cash to Agent. If handed over to the agent, the company will not be liable for any loss. 3. In case there is any change in the particulars given above including Life Assured/Proposer's health and/or medical and/or financial and/or occupational status and/or being charged with and/or arrested for any criminal offence after the date of proposal but before risk acceptance by the company, please inform the company. 4. Acceptance of premium does not constitute risk commencement. 5. Risk commencement starts after the acceptance of risk by the company. 6. Freeloop Period: If you are not satisfied with the terms & conditions/features of the policy, you have the right to cancel the Policy by providing written notice to the Company and receive the premiums after deducting a) Proportionate risk premium for the period on cover & b) Stamp duty and medical examination costs including applicable taxes, cesses & levies, which have been incurred for issuing the Policy. Such notice must be signed by you and received directly by the Company within 15 days from the date of receipt of the policy document by you or person authorized by you. The said period of 15 days shall stand extended to 30 days, if the policy sourced through distance marketing mode which includes solicitation through any means of communication other than in person. For Unit Linked Life Insurance products, you would receive the non - allocated premiums plus charges levied by cancellation of units plus fund value at the date of cancellation and after deducting the charges as mentioned in (a) & (b) above.

Tata AIA Life Insurance Company Limited (IRDAI Regn. No.110 CIN: U66010MH2000PLC128403). Registered & Corporate Office: 14th Floor, Tower A, Peninsula Business Park, Senapati Bapat Marg, Lower Parel, Mumbai - 400013. Trade logo displayed above belongs to Tata Sons Ltd and AIA Group Ltd. and is used by Tata AIA Life Insurance Company Ltd under a license. For any information including cancellation, claims and complaints, please contact our Insurance Advisor/ Intermediary or visit Tata AIA Life's nearest branch office or call 1- 860-266-9966 (local charges apply) or write to us at customercare@tataaia.com. Visit us at: www.tataaia.com.

BENEFIT ILLUSTRATION



Tata AIA Life Insurance Sampoorna Raksha Supreme

Name of the Prospect / Policyholder:	ANKUR NATH TIWARI	Proposal No:	C219578608
Age (years) :	34 Gender: Male	Name of the Product:	Tata AIA Life Insurance Sampoorna Raksha Supreme
Name of the Life Assured :	ANKUR NATH TIWARI	Tag Line :	Non-Linked, Non-Participating Life Insurance Plan
Age (years) :	34 Gender: Male Smoker: No	Unique Identification No.:	110N160V02
Policy Term :	26 Years 00 months	GST Rate Year 1:	18.00%
Premium Payment Term :	26 Years 00 months	GST Rate Year 2 onwards:	18.00%
Amount of Instalment Premium (Rs.):	1,446		
Mode of Payment of Premium :	Monthly		

This benefit illustration is intended to show year-wise premiums payable and benefits under the policy.

Policy Details					
Policy Option:			Life Option	Lumpsum(Rs):	
Sum Assured (Rs):			69,00,000	Income Duration (months):	
Sum Assured on Death (at inception of the policy) (Rs):			69,00,000	Income p.a. (Rs):	

Rider Details											
Rider Name/UIN^ (Benefit Option/Benefit Payout Option)	Details of Life Insured/Partner under the Benefit Option			Benefit Payout			Return of premium Option	Benefit Option Term	Premium Payment Term	Sum Assured (Rs.)	Premium without GST (Rs.)
	Name	Age(yrs)	Gender	Lumpsum (Rs.)	Income p.a.(Rs.)	Income Duration (yrs)					
CPR - Accidental Total and Permanent Disability Benefit(Lumpsum and Fixed Income)	ANKUR NATH TIWARI	34	Male	25,00,000	0	0	NO	26	26	25,00,000	675
CPR - Term Benefit with Accelerated Terminal Illness (Lumpsum and Fixed Income)#	ANKUR NATH TIWARI	34	Male	31,00,000	0	0	NO	26	26	31,00,000	4,712

^CPR: Tata AIA Life Insurance Non-Linked Comprehensive Protection Rider, UIN:110B033V02

^CHR: Tata AIA Life Insurance Non-Linked Comprehensive Health Rider, UIN:110B031V02

#Premium calculated for Term with Terminal Illness on Mr insured is considering underwriting class as super preferred

Premium Summary									
Instalment Premium without GST (Rs.)					Base Plan		Riders		Total Instalment Premium
Instalment Premium with First year GST (Rs.)					749		476		1,225
Instalment Premium with GST 2nd year onwards (Rs.)					885		561		1,446

(Amount in Rupees)

Policy Year	Single/ Annualised Premium	Guaranteed [#]					Non - Guaranteed
		Survival Benefit / Loyalty Additions	Other Benefits, if any	Maturity Benefit	Death Benefit	Min Guaranteed Surrender Value	
1	8,489	0	NA	0	69,00,000	0	0
2	8,489	0	NA	0	69,00,000	0	0
3	8,489	0	NA	0	69,00,000	0	0
4	8,489	0	NA	0	69,00,000	0	0
5	8,489	0	NA	0	69,00,000	0	0
6	8,489	0	NA	0	69,00,000	0	0
7	8,489	0	NA	0	69,00,000	0	0
8	8,489	0	NA	0	69,00,000	0	0
9	8,489	0	NA	0	69,00,000	0	0
10	8,489	0	NA	0	69,00,000	0	0
11	8,489	0	NA	0	69,00,000	0	0
12	8,489	0	NA	0	69,00,000	0	0
13	8,489	0	NA	0	69,00,000	0	0
14	8,489	0	NA	0	69,00,000	0	0
15	8,489	0	NA	0	69,00,000	0	0
16	8,489	0	NA	0	69,00,000	0	0
17	8,489	0	NA	0	69,00,000	0	0
18	8,489	0	NA	0	69,00,000	0	0
19	8,489	0	NA	0	69,00,000	0	0
20	8,489	0	NA	0	69,00,000	0	0
21	8,489	0	NA	0	69,00,000	0	0
22	8,489	0	NA	0	69,00,000	0	0
23	8,489	0	NA	0	69,00,000	0	0
24	8,489	0	NA	0	69,00,000	0	0
25	8,489	0	NA	0	69,00,000	0	0
26	8,489	0	NA	0	69,00,000	0	0

Note: "Annualized Premium" shall be the premium payable in a year under a non-single pay option chosen by the policyholder, excluding the taxes, rider premiums, underwriting extra premiums, loading for modal premiums, if any.

"Single Premium" shall be the premium payable under a single pay option chosen by the policyholder, excluding the taxes, rider premiums, underwriting extra premiums if any.

[#]The benefits illustrated are as at the end of the policy year.

I _____ (name), have explained the premiums and benefits under the product fully to the prospect/ policyholder.	I _____ (name), having received the information with respect to the above, have understood the above statement before entering into the contract.
Place:	
Date: Signature of Agent/ Intermediary / Official	Date: Signature of Prospect/ Policyholder

Unique Reference Number - L&C/Advt/2021/May/0627 (Rider - L&C/Advt/2020/Dec/1539)

Tata AIA Life Insurance Company Ltd. (IRDA of India Regn No. 110) (CIN: U66010MH2000PLC128403)

Registered and Corporate Office: 14th Floor, Tower A, Peninsula Business Park, Senapati Bapat Marg, Lower Parel, Mumbai- 400013

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For more information, Call the Tata AIA Life Insurance Company Ltd Helpline number 1860-266-9966 (local charges apply) or Visit us at: www.tataaia.com

COVID-19 (Coronavirus) Exposure Questionnaire

Name Of Proposed Insured : ANKUR NATH TIWARI

Policy no: C219578608

Dated: 25-Jan-2022

Please answer the following questions in as much detail as possible:

1. Have you been in close contact with anyone who has been quarantined (including your family members) or who has been diagnosed with novel coronavirus (SARS-CoV-2/COVID-19) within the last three weeks? Yes No

• If yes, then please confirm if you had any COVID 19 symptoms?

2. Have you been advised to be tested to rule in or rule out, a diagnosis of novel coronavirus (SARS-CoV-2/COVID-19)? Yes No

• If yes, then please confirm status

Test Result Received Awaiting Test Results Not Yet Tested

If you have received the Test Result, it is mandatory answer to sub questions a and b

a. Date of Last COVID 19 result -

b. Result of Last COVID 19 test -

c. Did you require,

Admission to hospital Home Quarantine/Isolation Not Required

i. If Hospitalized:

- Date of Admission []

- Date of Discharge []

- Did you require treatment in the Intensive Care unit (ICU) and/or a machine [ventilator support] to help you breathe? Yes No

- Did you experience any complication(s) related to lungs, Kidney, liver or heart problems(s)? Yes No

ii. If home quarantine / Isolation,

- Please specify the last date of home quarantine / Isolation -

3. If Question no 2 is answered as "Yes", then please answer below questions a and b"

a. Do you currently experience or did you had any recurrence of symptoms related to COVID 19 infection?

b. Do you have any pending or recommended follow-up appointments or tests related to COVID-19 Yes No
diagnosis? Yes No

4. Are you a Healthcare professional (Includes Doctors, Nurses, Pathologist, Paramedics, Pharmacist, Yes No Ward helpers) & enrolled as Corona warrior or working in Hospitals/ Clinics with novel coronavirus (SARS-CoV-2/COVID-19) ward/unit or treating/in contact with COVID-19 infected individuals?

5. Travel Declaration

a. Have you travelled outside of India in the past 3 weeks? If Yes, please provide your travel details Yes No over the past 3 weeks:

COUNTRY	DATE ARRIVED	DATE DEPARTED
COUNTRY	DATE of TRAVEL	INTENDED DURATION

6. Have you been vaccinated for COVID19?

Yes No

If yes , Please provide your details:

- Date of administration of the first dose (Non-Mandatory)
- Date of administration of the second dose (Non-Mandatory)
- Have you experienced any adverse reaction post vaccination? Yes No

If yes, please share details including treatment taken for the same and date of complete recovery

Declaration

I confirm that the answers I have given are, to the best of my knowledge, true, and that I have not withheld any material information that may influence the assessment or acceptance of this application.

I agree that this form will constitute part of my application for insurance(s) and that failure to disclose any material fact known to me may invalidate my insurance(s)

Signature of
Proposed insured

ANKUR NATH
TIWARI

Date:

25-Jan-2022

Signature of
Applicant:

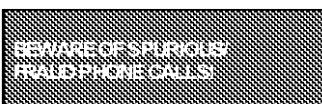
(If applicant is different
from the Proposed
insured)

Date:

#RakshakaranKIRaat

Tata AIA Life Insurance Company Limited (IRDA of India Regn. No. 110) CIN - U66010MH2000PLC128403.

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Medical Examination Report

Transcript of the Telephonic Medical Examination Report

This is the transcript of the answers provided by Life to be assured verbally to the questions asked below in a telephonic verification by the underwriting team of Tata AIA Life Insurance Company Ltd. The answers provided by the Life to be assured would form a part of the application for insurance.

We request you to go through the transcript carefully. In case of any disagreement, you are requested to highlight the same within 15 days of the receipt of this transcript; otherwise this would be taken as acceptable to you and thereby binding on you. Please retain this transcript for future reference.

Application No.	C219578608	Date	25-Jan-2022
Life to be Assured (LA)	Mr ANKUR NATH TIWARI	Contact No.	9696508217
Date of Birth	02-Feb-1987	Gender	MALE
ID Details		BMI	18.94

These are the following questions, along with their answers, that were asked during the examination:

		YES	NO	IF YES, please give details
1	Can you state your education and highest degree?	Yes		Qualification - Graduate Others - B tech Year of passing - 2010
2	Can you Please state your occupation?	Yes		Occupation - Salaried Others - Software engineer
3	Your current Organization (for Salaried) /Business details (for type and name of owned business firm)	Yes		HCL technologies
4	Your annual income as per records (LPA)	Yes		14 lakhs per annum
5	How much Insurance cover have you applied for?	Yes		1 crore
6	Who is the nominee (proposer wherever applicable) for this policy?	Yes		- Mother
7	Please confirm name of the nominee	Yes		vijaylaxmi tiwari
8	Please confirm name of the appointee in case nominee is minor	Yes		NA
9	Are you currently in Good Health ?	Yes		
10	Are you taking any type of medication currently?		No	
11	Weight	Yes		60
12	Height	Yes		178

13	Did you have any loss or gain of weight of 10 kg or more in the last six months?		No	
14	Have you ever in the past or are currently consuming Tobacco?		No	
15	Have you ever in the past or are currently consuming Alcohol?	Yes	<p>Alcohol consumption</p> <ul style="list-style-type: none"> - Beer <p>Per day consumption</p> <ul style="list-style-type: none"> - Occassional/Social drinking <p>Duration/Frequency</p> <ul style="list-style-type: none"> - once in 3 or 6 months since 2-3 years; 500 ml <p>Have you ever been advised by Doctor to reduce/stop the consumption of alcohol?</p> <ul style="list-style-type: none"> - No <p>Remarks</p> <ul style="list-style-type: none"> - 	
16	Have you ever in the past or are currently consuming Narcotics?		No	
17	Have you ever been diagnosed with &/OR are you currently or in the past have received treatment/undergone surgery for Diabetes/High blood sugar?		No	
18	Have you ever been diagnosed with Hypertension/High BP?		No	
19	Have you ever been diagnosed with High Cholesterol?		No	
20	Have you ever been diagnosed with Chest pain, heart attack, palpitation, any other heart disease or circulatory disease?		No	
21	Have you ever been diagnosed with Any lung/respiratory Disease or Urine/Kidney disease or any Liver /gastric disorders?		No	
22	Have you ever been diagnosed with Cancer or tumor of any kind?		No	
23	Do you or your spouse has been tested positive or is under treatment for HIV / AIDS /Sexually transmitted diseases (e.g. syphilis, gonorrhea, etc.)?		No	
24	Have you ever been diagnosed with Any Accidental injury/Disability?		No	
25	Do you have any other health condition or are you currently/in past were under any treatment for any health condition not covered above?		No	
26	Have you undergone any investigations like blood / urine test / X-ray / ECG or any special test like CTMT / MRI scan etc?	Yes	<p>Reason for undergoing test</p> <ul style="list-style-type: none"> - Annual health checkp <p>Results of the test</p> <ul style="list-style-type: none"> - Normal <p>Past Surgery</p> <ul style="list-style-type: none"> - <p>Remarks</p>	

				- Blood test 2- 2.5 months back for job purpose; normal findings
27	Have you ever been hospitalized for any illness, sickness, disease, injury, accident or disorder in the last 5 years?		No	
28	Have either of your natural parents or any siblings suffered from or are suffering from any medical condition like Cancer, Heart related Problems, Diabetes, Blood Pressure, Hepatitis etc.?		No	
29	Has any of your insurance application or reinstatement application on life, accident, medical or health, critical illness, or disability ever been declined, postponed or accepted at extra premium or modified terms?		No	
30	Have you ever been tested positive for coronavirus (COVID-19)?		No	
31	Have you ever self-isolated/quarantined due to symptoms of coronavirus (COVID-19)?	Yes		Fever; sore throat in April 2021; no antigen test/ RT PCR was done ; no loss of taste and smell , recovered in 3 days, no complications, not self quarantined
32	Have you been vaccinated for COVID19?	Yes		When was vaccination done? - > 3 months Have both doses been completed? - Yes Have you experienced any adverse reaction post-vaccination? - No Date of Vaccination - July and Oct 2021 Remarks -
33	[For Male]Have you ever been diagnosed &/OR treated for Prostate related disorder or been under follow up for the same with PSA test, USG pelvis etc.		No	
34	[For Female]Are you currently pregnant ?		No	
35	[For Female]Have you undergone any gynaecological investigations for any problems of breast / uterus / cervix etc., internal check-ups, breast-checks such as mammogram, pap smear or biopsy?		No	
36	[For Female]Have you ever consulted a doctor because of an irregularity at the breast, vagina, uterus, ovary, fallopian tubes, menstruation, complications during pregnancy or child delivery or a sexually transmitted disease?		No	
37	Is there anything else that you would like to share with us with respect to your health/ habits or anything else that you believe is important to ensure that policy is processed basis all facts & information?		No	

DECLARATION:

You **ANKUR NATH TIWARI**, declare that, you have fully understood the questions asked to you as per this call and have furnished complete, true and accurate information after fully understanding the same.

Sir/Mam' are you in agreement with the declaration that I have read out to you.

We thank you for having taken the time to confirm the details. We will process your proposal based on the information provided.

Name and Signature of the Medical Doctor/ Medical Underwriter	
	Dr. Shefali Saxena Reg no: 84023 UP MEDICAL COUNCIL
Dated Time of Medical Verification	25/01/2022 18:23

Date: 29/01/2022

FIRST PREMIUM RECEIPT

PERSONAL DETAILS

Policy Number	: C219578608	Plan Name	: Tata AIA Life Insurance Sampoorna Raksha Supreme (110N160V02)
Policy Owner Name	: ANKUR NATH TIWARI	Life Assured Name	: ANKUR NATH TIWARI
Email ID	: ANKURNATHT@GMAIL.COM	Distributor/Agent Name	: POLICYBAZAAR INSURANCE BROKERS PRIVATE
Contact no.	: 9696508217	Distributor/Agent Contact number	: 18002585970
PAN details	: ALVPT3385K		

PREMIUM DETAILS

Premium Amount Due (In Rs.)	: 1226.00	Payment Mode	: Monthly
Goods & Service Tax (GST)	: 221.00	Next Premium Due on	: 28/02/2022
Total Amount (In Rs.) (a)	: 1447.00	Excess Amount (In Rs.) (b-a)	: 0.00
Amount Received (In Rs.) (b)	: 1,446.00		

TAX BENEFIT DETAILS

Sec 80 C	Sec 80 CCC	Sec 80 D
971.00	.00	476.00

PAYMENT DETAILS

Receipt Number	Receipt Date	Amount (In Rs.)	Payment Method
PP1208524	25/01/2022	1,446.00	Online Payment

Please note:

- This document can be used as a proof for claiming deduction while filling your tax returns and tax benefits would be applicable as per the prevailing tax laws.
- Payments made through modes other than cash are subject to clearance including through electronic mode payments.
- Any excess premium will be adjusted towards premium due in the current financial year or due in the next three months, whichever is later. Else premium will be auto refunded post 15 days.
- Applicable govt taxes, surcharge, cess including GST would be charged in accordance with applicable Laws and Company will have the right to recover the same from the policyholder.
- Please refer to the policy document for detailed terms and conditions and our website for FAQ on applicable tax benefits.

GST Details

Base Premium	Taxable Value	CGST .00%	SGST/UTGST .00%	IGST 18.00%	Reverse Charge
₹ 1226.00	₹ 1226.00	₹ .00	₹ .00	₹ 221.00	
Tata AIA Life Insurance State	HARYANA	Tata AIA Life Insurance GST IN	06AABCT3784C1ZH	SAC Description	Life Insurance
Policy Owner's GST State	UTTAR PRADESH	Policy Owner's GSTIN	NOT REGISTERED	SAC Code	997132

#RakshakaranHero

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SMS HELP to 5676799



customercare@tataaia.com



18602669966 - 24*7 Interactive Voice Response (IVR) [Customer Service Executive available from 10am to 7pm, Mon-Sat]



Customer Service Department: 9th Floor, Tower B, I- Think Lodha Techno Campus, Off Pokharan Road Number 2, Thane (West) - 400604.