

**CERTIFICATE OF INSURANCE
SCHEDULE I OF BENEFITS**

I.Master Policy Holder Details

Master Policy Holder Name	State Bank of India	Master Policy Number	72200029101
Date of Commencement of Policy	18/07/2025	Branch Code	04654
Next Annual Renewal Date (ARD)	18/07/2026	Bank Code	00
CIF No.	88727780570		

II.Member Details

Group Member

Group Member name	Mr.	SAJAN KUMAR
Address	S/O-RAJESH KUMAR GUPTA,WARD NO-04 PS BELSAND,VILL-BASAUL PO-BELSAND(M-8890549826)	
City	Sitamarhi	
State	Bihar	Pincode:
Age	23	
Account Number	35271039619	
Date of joining the Group	18/07/2025	

III. A.Nominee Details

Group Member Nominee	SHUBHAM KUMAR	
Age	22	Relationship : Brother

B.Appointee Details

Group Member Appointee	Not Applicable	
Age	Not Applicable	Relationship : Not Applicable

IV.Life Cover Details

Date of Commencement of cover	18/07/2025	Cover End Date	17/07/2026
Basic Premium	₹600.00	Basic Sum Assured	₹ 500000
Total applicable taxes	₹ 108.00		
Premium Amount Paid**	₹ 708.00		
Suicide Clause Applicable	Yes	Active At Work clause applicable	No
Waiting Period	Not Applicable		
Premium Paid By	Insured Member		
Premium Due Date(s)	18/07/2026	Premium Frequency :	Yearly

Additional Clauses:

i. On receipt of this COI (Certificate of Insurance), you will have an option to review the Terms and Conditions of the Policy. In case you are not satisfied with Terms and Conditions as stated in this COI, you have an option to return the COI to the Company within 30 days of its receipt (as this is an electronically issued cover), with a letter requesting cancellation, stating reasons for the same. On such cancellation of the Master/Member Policy, the Company will refund the premium after deducting a reasonable cost of insurance for the period already covered, expenses incurred towards medical examinations carried out and expenses towards stamp duty.

ii. Total Basic Sum Assured under this scheme across all my SBI savings & current bank accounts will not exceed Rs. 40 Lakh for ages 18-35 years, Rs 30 Lakh for ages 36-45 years, 20 Lakh for 46-50 years, and 10 Lakh for 51-55 years. The maximum benefit payable by the SBI Life Insurance Company Ltd. under all the schemes, through a single application or multiple applications of same member shall not exceed Rs. 40 Lakh, 30 Lakh, 20 Lakh, or 10 Lakh as the case may be. In the event of there being more than one claim (multiple covers), claims will be processed in the chronological order of receipt by the Insurance Company and claims only up to the aforementioned limit will be payable. All other claims will be declined and premiums paid under such policies (exclusive of applicable taxes) net of stamp duty will be refunded without interest to the nominee/ beneficiary or legal heir.

NA: Not Applicable

**Premium Amount is the total amount paid towards Basic Sum Assured and this amount is inclusive of taxes.Taxes include all forms of applicable taxes and/or any other statutory levy/duty/ surcharge,as notified by the Central and/or State Government from time to time as per the provisions of the prevalent tax laws.

SBI Life Insurance Company Limited (the Company) is pleased to acknowledge that the Group member designated above has joined SBI Life – Sampooran Suraksha under which the Insured Members are provided term insurance cover for the Sum Assured, subject to the terms and conditions contained in the Master Policy.

A summary of the key features of the Scheme are given below. Please note that this is merely a summary of the key features of the Scheme and that the conclusive document evidencing the insurance arrangement is the Master Policy document here in above referred to.

The terms and conditions of the Master Policy are binding on the Insured members and their legal representatives.

Dated: 18/07/2025



Authorized signatory

Key features of Your Policy

1. Premium

- i. Premium shall be payable as per the frequency opted and as per schedule. SBI Life is not responsible either for any delay in remittance of premium or for non-remittance of premium by MPH. The Insurance Cover automatically lapses in case of non-remittance of premium within the days of grace.
- ii. The Premium as stated above is valid for one year from the date of Commencement of policy or ARD of the Master Policy. It is valid up to the Next ARD of the policy as mentioned in the schedule.
- iii. If the premium is not paid on or before the expiry of the grace period, the life cover for the member will automatically lapse.
- iv. Payment of premium in advance is a must for keeping the policy in force.
- v. No premium notices shall be sent by the Company either to the insured member or to the Master Policy Holder.

2. Grace Period

A grace period of 15 days from premium due date for monthly premium mode and 30 days from the premium due date for other premium modes will be allowed for payment of premiums. The insurance cover, in respect of the insured member, will continue as in-force during the grace period. If the premium due to be paid remains unpaid at the end of the grace period, the policy shall lapse. In case of death during the grace period, the death claim benefit will be payable subject to the deduction of outstanding premiums with interest, if any.

3. Benefits

- i. Maturity Benefit for members: There is no maturity benefit.
- ii. Death Benefit
 - a. Death benefit payable will be Basic sum assured for which cover has been provided on date of death and for which the premium has been paid. The Death Benefit shall be payable on the death of the employee / member provided the cover of the employee / member and the master policy are in full force and the claim is found admissible and payable. For Employer – Employee Groups ,the Death benefits will be payable to the Master policyholder and for Non-Employer Employee groups and EDLI schemes it will be paid to the nominee or legal heir as the case may be.
 - b. Cases where by insured member has authorized to pay claim proceeds to the Master Policyholder, we will pay the claim proceeds as per the specific authorisation obtained from the insured member at the time of member joining the scheme/ policy or at a later date. This is applicable only for eligible entities under lender – borrower schemes and administrated by following as Master Policy holders:
 - 1) RBI regulated Scheduled Commercial Banks (including Co-operative Banks)
 - 2) NBFC having Certificate of Registration from RBI
 - 3) National Housing Board (NHB) regulated Housing Finance Companies
 - 4) National Minority Development Financial Corporation (NMDFC) and its State Channelizing Agencies
 - 5) Small Finance Banks regulated by RBI
 - 6) Mutually Aided Cooperative Societies formed & registered under applicable State Act concerning such societies
 - 7) Microfinance companies registered under section 8 of Company's Act' 2013
 - 8) Any Other category as approved by Authority
 - c. Additional Clauses (if any) as mentioned in section V of schedule I will be applicable.
 - d. If a death claim is admitted, the Company shall recover the outstanding premiums in respect of the deceased member for that policy year, from the claim amount payable. Death Claim shall not be considered if the insurance cover is in lapsed condition as on the date of death of the member.
 - e. On payment of the Death Benefit as above, all insurance cover provided under the Master Policy would automatically terminate and all liability of the Company in respect of that Member(including rider benefits,if any) would automatically cease.

4. Revival

If premiums are not paid within the grace period the policy shall lapse. The policy can then be revived within 5 years from the date of first unpaid premium. The cover will recommence from the date of reinstatement and the premium will be collected accordingly.

5. Termination of Cover:

Risk Cover for the member shall automatically cease on occurrence any one of the following events

- i. Expiry of the policy term, or
- ii. The date the member attains cover ceasing age, or
- iii. Date of receipt of death claim, or
- iv. The date the member ceases to be a member of the group as defined in master policy, or
- v. On expiry of the grace period, or
- vi. On termination of the master policy contract

6. Surrender Benefits: There is no Surrender Benefit.

7. Claim Intimation & Claim Documents

- i. All claim intimations should be sent to the Nearest SBI Life Office or to the following address:
 SBI Life Insurance Company Limited
 Claims Department
 7th Level (D Wing) & 8th Level, Seawoods Grand Central,
 Tower 2, Plot No. R-1, Sector 40, Seawoods,
 Nerul Node, Navi Mumbai - 400 706
 Dist. Thane, Maharashtra
 Telephone: +91 – 22 – 6645 6000
 Facsimile: +91 – 22 – 6645 6655
 E-mail: claims@sbilife.co.in
- ii. Master Policyholder shall inform the Company of any claim within 180 days of the claim event.
- iii. However, without prejudice, in case of delay in intimation or submission of claim documents beyond the stipulated period in the policy document or in the Statutes, the Company, at its sole discretion, may condone such delay and examine the admissibility or otherwise of the claim, if such delay is proved to be for reasons beyond the control of the claimant. The decision of the Company shall be final in this regard and shall be binding on the Master Policy Holder and the insured members.

- iv. Payment of any benefits under this Master Policy shall be made to the insured member or his nominee / legal heir as per provisions of Section 39 of the Insurance Act, 1938. Payment may be made through the Master Policyholder as receiving agent for the Insured Member or his nominee / legal heir for administrative convenience.
- v. Death Benefit Settlement: This option can be availed by member's nominee/legal heir at time of claim request. Under this option beneficiary will receive death benefit sum assured in equal monthly / quarterly / half-yearly / yearly installments for a period of 5 years
- vi. Primary claim documents required for settlement of claim are:

- a. Document required are
 - 1. Application Form for Death Claim (Claimant's Statement)
 - 2. Physician's Statement, relevant Hospital records and report from the concerned medical specialist giving nature of disability and illness.
 - 3. Death Certificate issued by a local government body like Municipal Corporation / Village Panchayat
 - 4. Medical Cause of Death Certificate issued by attending physician / hospital
 - 5. Attested True Copies of Indoor case Papers of the hospital(s)
- b. The Beneficiary's
 - 1. Photo ID with DOB with relationship to the insured
 - 2. Proof of legal title to the claim proceeds (e.g. legal succession papers, assignment deed etc.)
 - 3. Employer's Certificate
- c. If Death due to Accident (submit in addition to the above)
 - 1. Post-mortem Report (Autopsy Report) & Chemical Viscera Report – if performed
 - 2. All Police Reports / First Information & Final Investigation Report
 - 3. Proof of Accident – Panchnamra / Inquest Report
 - 4. Newspaper cutting / Photographs of the accident – if available

The Company however, reserves the right to call for additional proofs and documents in support of the claim

8. Other conditions:

- i. The Company shall not be liable for any action taken in good faith upon any statements and particulars furnished by the Master Policyholder, which shall be, or shall be proved to have been erroneous.
- ii. The Master Policy is subject to prevailing Indian Laws. Any dispute that may arise in connection with this Certificate of Insurance or the Master Policy shall be subject to the jurisdiction of the Courts of Mumbai.
- iii. For all the members, Premium rates are subject to change at annual renewal date.
- iv. If in respect of the Insured Member, the Date of Entry is later than the Date of commencement of the Master Policy or the Annual Renewal Date, proportionate Premiums shall be payable immediately and thereafter the insurance Coverage shall be effective.
- v. In the event the Insured Member ceases to be an Insured Member during the policy year for any reason other than due to death, the Company will refund to the Master Policyholder any premium paid in excess of the proportionate period for which the risk is covered.

9. Waiting Period

- i. Waiting period as mentioned in the then applicable master policy schedule shall be applicable. If applicable, the waiting period would be a maximum of 60 days.
- ii. Waiting period will commence on the date of joining the Insurance scheme.
- iii. If death of an insured member occurs during waiting period, the death benefit shall not be payable except when the death occurs due to an accident. However, 80% of the premium paid during the policy year would be refunded to the Master Policy Holder.

10. Free Look Provision

- i. On receipt of Policy document, the Master Policyholder will have an option to review the Terms and Conditions of the Policy. In case the Master Policyholder is not satisfied with Terms and Conditions as stated in the Policy, he has an option to return the original Policy document to the Company within 15 days of its receipt, with a letter requesting cancellation, stating reasons for the same.
- ii. On such cancellation of the Master/Member Policy, the Company will refund the premium after deducting a reasonable cost of insurance for the period already covered, expenses incurred towards medical examinations carried out and expenses towards stamp duty.
- iii. In case the Master Policyholder requests for cancellation of the Master Policy, no benefit shall be payable under the Master Policy.
- iv. Where the insured member is paying the premium, such free-look cancellation would be available at the member level.

11. Suicide clause:

- i. In case an insured member commits suicide, any one of the following shall apply as mentioned in the applicable policy schedule:
 - a. Suicide exclusion would not apply, meaning that on death as a result of suicide, claim would be paid. Or
 - b. Suicide exclusion would apply for deaths within 12 months from the date of commencement of the Master Policy or the date of commencement of risk in respect of any individual member, whichever is later. Or
 - c. Suicide exclusion would not apply for deaths within 12 months from the date of commencement of Master Policy but for new members joining after that date, suicide clause shall be applicable for 12 months from the date of enrolment of membership in this scheme or any similar scheme with the previous employer, or
 - d. Suicide exclusion would not apply for members existing at the date of commencement of this schedule. However, for new members joining subsequently, suicide exclusion would apply for deaths occurring within 12 months from the date of enrolment under this scheme of current employment.
- ii. In case the suicide clause is applicable, the sum assured shall not be payable and only 80% of the total premium paid (net of taxes & cess) till the date of death, in respect of that individual member during the current policy year would be refunded without interest to the Master Policy Holder, provided the member policy is in-force.

12. Mis-statement :

If we find that the insured member's correct age is different from that mentioned in the membership form/ member data, we will check the member's eligibility for the insurance cover as on the cover start date. If the age stated is incorrect and if the member is:

- i Eligible,
 - a. If the correct age is found to be higher, you and/ or the member will have to pay the difference in premiums along with interest based on company's prevalent norms, which may change from time to time.
 - b. If the difference in premium and the applicable interest is not paid, we will terminate the member's insurance cover and pay amount as per provisions of Section 45 of the Insurance Act, 1938; as amended from time to time.
 - c. If the correct age is found to be lower, we will refund the difference in premiums, without interest.
- ii. If the revised correct age of the insured member is such that he/she is not eligible for the insurance cover,
 - a. We will terminate the member's insurance cover.
 - b. We will pay amounts as per provisions of Section 45 of the Insurance Act, 1938; as amended from time to time.

13. Non-disclosure:

i. We have issued the COI (if applicable) based on member's statements in membership form, personal statement, medical reports and any other relevant documents. If we find that any of this information is inaccurate or false or the member has withheld any material information, or in case of fraud, we shall declare the member's insurance cover null and void but subject to section 45 of the Insurance Act, 1938; as amended from time to time.

14. Nomination

- i. The insured member may, when effecting the insurance cover or at any time before the cover term ends, nominate a person or persons, as per provisions of Section 39 of the Insurance Act, 1938; to whom the money secured by the insurance cover shall be paid in the event of the death of the life assured.
- ii. If the nominee is a minor, the insured member may appoint a person competent to contract, as an appointee in the manner laid down by us, to receive the money secured by the insurance cover in the event of death of the life assured during the minority of the nominee.
- iii. The insured member may cancel or change the existing nomination.
- iv. The nomination should be registered in our records to make it binding on us.
- v. For complete details about nomination, please refer to Section 39 of the Insurance Act, 1938; as amended from time to time.

15. Communications:

i. Any Communication, information or instruction to the SBI Life Insurance Company Ltd. must be in writing and delivered to the address intimated by the Company to the Master Policyholder which is currently: Group Claims Department, SBI Life Insurance Company Ltd, 7th Level (D Wing) & 8th Level, Seawoods Grand Central, Tower 2, Plot No. R-1, Sector 40, Seawoods, Nerul Node, Navi Mumbai - 400 706, Dist. Thane, Maharashtra. . The Company may change the address stated above and intimate the Master Policyholder of such change by suitable means. Any Communication, information or instruction from the Company to the Master Policyholder shall be mailed to the address of the Master Policyholder mentioned in Schedule I to this document or to the changed address as intimated to the Company in writing.

ii. It is important that you keep us informed of change in your communication address, if any.

16. Grievance redressal procedure

i. In case the Policy holder/member has any query or complaint/grievance, he/she may approach the Company's Address, as stated in the Certificate issued or the nearest SBI Life Office or call us on toll-free number 1800 267 9090 (between 9 AM and 9 PM).

ii. In case the Policyholder/member is not satisfied with the decision of the above office, or has not received any response within 10 days, he/she may contact the following official for resolution:

Head Client Relationship

SBI Life Insurance Company Limited,
7th Level (D Wing) & 8th Level, Seawoods Grand Central,
Tower 2, Plot No. R-1, Sector 40, Seawoods,
Nerul Node, Navi Mumbai - 400 706
Dist. Thane, Maharashtra
Telephone No: 022-6645 6785
Email Id: info@sbilife.co.in

iii. In case the Policyholder/member is not satisfied with the decision/resolution of the Company, he/she may approach the Insurance Ombudsman if such grievance pertains to:

- a. Insurance claim that has been rejected or dispute of a claim on legal construction of the Policy
- b. Delay in settlement of claim
- c. Dispute with regard to premium
- d. Non-receipt of insurance document

iv. The Central Government has established an office of the Insurance Ombudsman for redressal of grievance or complaint with respect to Life Insurance Policies. The addresses of the Insurance Ombudsman and the Insurance Ombudsman Rules, 2017 are available on the website of IRDAI, <http://www.irdai.gov.in> and in our website <http://www.sbilife.co.in>. The address of the ombudsman at Mumbai is:

Office of the Insurance Ombudsman
3rd Floor, Jeevan Seva Annexe,
S.V. Road, Santa Cruz (W),
Mumbai – 400 054.
Telephone No.: +91 – 22 – 2610 6552/ 26106960
Fax No. : +91 – 22 – 2610 6052
E-mail: bimalokpal.mumbai@ecoi.co.in

v. The complaint to the Ombudsman should be made in writing, duly signed by the complainant or by his legal heirs, with full details of the complaint and the contact information of complainant.

vi. 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:

IRDALI Grievance Call Centre (IGCC) TOLLFREE NO: 155255 / 1800 4254 732

Email ID: complaints@irda.gov.in

You can also register your complaint online at <http://igms.irda.gov.in>

Address for communication for complaints by fax/paper:

Consumer Affairs Department,
Insurance Regulatory and Development Authority of India,
SY No 115/1, Financial district, Nanakramguda, Gachibowli,
Hyderabad – 500032

17. Governing laws and jurisdiction

This is subject to prevailing Indian Laws. Any dispute that may arise in connection with this shall be subject to the jurisdiction of the competent Indian Courts.

18. 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 prospectus or tables of the insurer.

Provided that acceptance by an insurance agent of commission in connection with a policy of life insurance taken out by himself on his own life shall not be deemed to be acceptance of a rebate of premium within the meaning of this sub-section if at the time of such acceptance the insurance agent satisfies the prescribed conditions establishing that he is a bona fide insurance agent employed by 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

19. Non – Disclosures: Extract of Section 45 of Insurance Act, 1938, as amended from time to time:

No policy of life insurance shall be called in question on any ground whatsoever after the expiry of three years from the date of the policy. A policy of life insurance may be called in question at any time within three years from the date of the policy, on the ground of fraud or on the ground that any statement or suppression of a fact material to the expectancy of the life of the insured was incorrectly made in the proposal or other document on the basis of which the policy was issued or revived or rider issued. 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.

No insurer shall repudiate a life insurance policy on the ground of fraud if the insured can prove that the mis-statement or suppression of a material fact was true to the best of his knowledge and belief or that there was no deliberate intention to suppress the fact or that such mis-statement or suppression are within the knowledge of the insurer. In case of fraud, the onus of disproving lies upon the beneficiaries, in case the policyholder is not alive.

In case of repudiation of the policy on the ground of misstatement or suppression of a material fact, and not on the grounds of fraud, the premiums collected on the policy till the date of repudiation shall be paid.

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 are adjusted on subsequent proof that the age of the life insured was incorrectly stated in the proposal.

20. Rule 13 of Ombudsman Rules, 2017

1. The Ombudsman may receive and consider complaints or disputes relating to:

- a) delay in settlement of claims, beyond the time specified in the regulations, framed under the Insurance Regulatory and Development Authority of India Act, 1999;
- b) any partial or total repudiation of claims by the life insurer, General insurer or the health insurer;
- c) disputes over premium paid or payable in terms of insurance policy;
- d) misrepresentation of policy terms and conditions at any time in the policy document or policy contract;
- e) legal construction of insurance policies in so far as the dispute relates to claim;
- f) policy servicing related grievances against insurers and their agents and intermediaries;
- g) issuance of life insurance policy, general insurance policy including health insurance policy which is not in conformity with the proposal form submitted by the proposer;
- h) non-issuance of insurance policy after receipt of premium in life insurance and general insurance including health insurance; and
- i) 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 at clauses (a) to (f).

2. The Ombudsman shall act as counsellor and mediator relating to matters specified in sub-rule (1) provided there is written consent of the parties to the dispute.

3. The Ombudsman shall be precluded from handling any matter if he is an interested party or having conflict of interest.

4. The Central Government or as the case may be, the IRDAI may, at any time refer any complaint or dispute relating to insurance matters specified in sub-rule(1), to the Insurance Ombudsman and such complaint or dispute shall be entertained by the Insurance Ombudsman and be dealt with as if it is a complaint made under Rule 14.

21. Rule 14 of Ombudsman Rules, 2017

(1) Any person who has a grievance against an insurer, may himself or through his legal heirs, nominee or assignee, make a complaint in writing to the Insurance Ombudsman within whose territorial jurisdiction the branch or office of the insurer complained against or the residential address or place of residence of the complainant is located.

(2) The complaint shall be in writing, duly signed by the complainant or through his legal heirs, nominee or assignee and shall state clearly the name and address of the complainant, the name of the branch or office of the insurer against whom the complaint is made, the facts giving rise to complaint, supported by documents, the nature and extent of the loss caused to the complainant and the relief sought from the Insurance Ombudsman.

(3) No complaint to the Ombudsman shall lie unless –

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

(4) The Ombudsman shall be empowered to condone the delay in such cases as he may consider necessary, after calling for objections of the insurer against the proposed condonation and after recording reasons for condoning the delay and in case the delay is condoned, the date of condonation of delay shall be deemed to be the date of filing of the complaint, for further proceedings under these rules.

(5) No complaint before the Insurance Ombudsman shall be maintainable on the same subject matter on which proceedings are pending before or disposed of by any court or consumer forum or arbitrator.

22. Protection of Policyholders'Interest

The IRDAI (Protection of Policyholders' Interest) Regulation, 2017 is complimentary to any other regulations made by IRDAI, which, inter alia, provide for protection of the interest of the policyholders. The provisions of this regulation will be applicable and subject to the prevailing law, as amended from time to time.

SBI LIFE INSURANCE COMPANY LIMITED.

Regulated by IRDAI, Regn No:111

SBI Life - Sampoorn Suraksha (UIN No. 111N040V04) COI No : 18072505701111520006

Client Name SAJAN KUMARDated: 18/07/2025Add 1 S/O-RAJESH KUMAR GUPTA,WARD NO-04 PS BELSAND,VILL-BASAUL PO-BELSAND(M-

Add 2

City Sitamarhi Pincode 843316State Bihar

PREMIUM PAID CERTIFICATE
(Financial Year 2025-2026)

Master Policy Number : 72200029101Master Policy Holder Name : State Bank of IndiaMember ID : 18072505701111520006Certificate of Insurance Number : 18072505701111520006

This is to certify that the following premium payment(s) have been made for life cover under SBI Life - Sampoorn Suraksha (UIN:111N04V04) Master Policy.

Due For	Premium Adjustment	Payment Frequency	Premium Type	Basic Sum Assured	Premium Paid
18/07/2025	18/07/2025	Yearly	NB	₹ 500000	₹ 708.00

- Amount includes Applicable Taxes / Surcharge/ Cess (as applicable) thereon at prevailing rates and is subject to realization(applicable in case the payment has been made by Cheque/Demand Draft).
- Premium paid under this policy is eligible for tax benefit as per the provisions of sec 80C of Income Tax Act, 1961.
- Premium is subject to change depending on the statutory levies that may be imposed / altered by the Government from time to time.

GST Registration Number of Maharashtra : 27AAFCS2530P1Z1 Category of Service: Life Insurance Services HSN Code

As per GOI notification, Applicable Tax has been levied on your insurance policy @ 18% on premium or charges. (or as applicable) w.e.f. 01.07.2017. Please refer SBI Life website for details

*This is a system generated statement and does not require signature

SBI LIFE INSURANCE COMPANY LIMITED.

Registered & Corporate Office: Natraj, M.V. Road, & Western Express Highway Junction, Andheri(East), Mumbai - 400 069.

IRDAI Regn No:111. CIN:L99999MH2000PLC129113

Master Policy Holder:	State Bank of India	Bank Account No.:	35271039619
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CIF No	88727780570
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Name of the Life to be Assured :	SAJAN KUMAR
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Address for this policy will be the same as provided by me to State Bank of India for my Savings Bank Account cited above.

Gender:	Male	Date of Birth:	03/12/2001
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Email Id*:	sajan03122001@gmail.com	Mobile Number*	8890549826
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*These fields are optional however they are most helpful in ensuring that we are able to serve you better.

Nominee Name:	SHUBHAM KUMAR	Relationship with Life to be Assured:	Brother
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Nominee Date of Birth	05/04/2003
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Please note that Nominee should be 18 years of age or above

Sum Assured ₹ 500000 (in multiples of 1 Lakh)

Base Premium(excluding applicable tax): ₹ 600.00

Applicable tax amount: ₹ 108.00

Premium(including applicable tax): ₹ 708.00

Current Applicable Tax rate is of 18% on all premiums paid

Declaration & Medical Questionnaire

Medical Questionnaire

1. Height 162 Cm, Weight: 77 Kg

2. Are you suffering from or have been diagnosed with or ever treated/hospitalized anytime in the past for any of the following:

a) Heart related ailments, angina, or heart surgery?	No
b) Cancer or malignancy of any kind?	No
c) Brain stroke, paralysis?	No
d) Neurological disorder or mental illness?	No
e) Tuberculosis, any disease of the lung, kidney or liver?	No
f) HIV / AIDS infection?	No
g) Major organ transplant inclusive of the heart, lung liver or kidney?	No

4. Do you smoke more than 10 cigarettes a day?	No
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5. Has your proposal for life insurance, ever been declined, postponed, withdrawn or accepted at extra premium or reduced cover?	No
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• I would like to become a member of the SBI scheme - YONO Insta Life Secure which offers a life insurance cover by SBI Life Insurance Company Ltd. under the product SBI Life – Sampoorn Suraksha UIN: 111N040V04 and I have fully understood and agree to all the terms and conditions of this scheme and agree that the Master policyholder shall act as the Group Administrator

• I agree and understand that insurance cover will commence immediately on issuance of the COI (Certificate of Insurance) following the debit to the bank account number mentioned here in this membership form and is valid for a period of one year.

• I also declare that any changes in the information given above after submission of this would be conveyed to SBI Life through the master policy holder immediately.

• I agree and understand that total Basic Sum Assured under this scheme across all my SBI savings & current bank accounts will not exceed Rs 40 lakh for ages 18 to 35 years, Rs 30 lakh for ages 36 to 45 years, Rs 20 lakhs for ages 46 to 50 years and Rs 10 Lakh for ages 51 to 55 years. The maximum benefit payable by the Company under all the schemes, through a single application or multiple applications of same member shall not exceed Rs. 10 Lakh, 20 Lakh, 30 Lakh or 40 Lakh as the case may be. In the event of there being more than one claim (multiple covers), claims will be processed in the chronological order of receipt by the Insurance Company and claims only up to the aforementioned limit will be payable. All other claims will be declined and premiums paid under such policies (exclusive of applicable taxes) net of stamp duty will be refunded without interest to the nominee/ beneficiary or legal heir.

• I agree and understand that in case of death as a result of suicide in the first 12 months of cover, the Sum Assured will not be payable.

• I agree and understand that this is an annually renewable plan. The renewal premium will be calculated as per the premium rates and my revised age (age as on last birthday) as on the date of renewal

• I authorize State Bank of India ("SBI"), SBI Life Insurance Co. Ltd and authorised representatives/service providers to contact me via call / sms / email (over riding my NDNC registration) in relation to my life insurance application. I also hereby provide my consent to SBI to allow sharing information required by the SBI Life Insurance Company Ltd. to complete this application and its associated process.

I authorize my Savings Bank Account Number / Current Account

35271039619

to be debited for Rs. ₹708.00

(Rupees Seven Hundred Eight And paise Only)

for the issuance of insurance cover under the SBI scheme - YONO Insta Life Secure which offers a life insurance cover by SBI Life Insurance Company Ltd. under the product SBI Life – Sampoorn Suraksha UIN: 111N040V04

I also authorize State Bank of India to debit the applicable renewal premium (according to my revised age group and revised premium rates as on date of renewal) on the due date for continuation of insurance cover under the membership. I undertake to maintain sufficient balance in my account for debiting of renewal premium on the due dates. I understand that if the renewal premium is not debited to my account on the due date because of insufficient funds in the account, my insurance would lapse from that date. This mandate will be valid till the same is cancelled in writing or I attain 56 years of age, whichever is earlier. If I do not tick the same, I will be responsible for renewing the cover on my own.

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 prospectus 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 as amended from time to time;

No policy of life insurance shall be called in question on any ground whatsoever after the expiry of three years from the date of the policy. A policy of life insurance may be called in question at any time within three years from the date of the policy, on the ground of fraud or on the ground that any statement of or suppression of a fact material to the expectancy of the life of the insured was correctly made in the proposal or other document on the basis of which the policy was issued or revived or rider issued. 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.

No insurer shall repudiate a life insurance policy on the ground of fraud if the insured can prove that the mis-statement or suppression of a material fact was true to the best of his knowledge and belief or that there was no deliberate intention to suppress the fact or that such mis-statement or suppression are within the knowledge of the insurer. In case of fraud, the onus of disproving lies upon the beneficiaries, in case the policyholder is not alive.

In case of repudiation of the policy on the ground of mis-statement or suppression of a material fact, and not on the grounds of fraud, the premiums collected on the policy till the date of repudiation shall be paid.

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 are adjusted on subsequent proof that the age of the life insured was incorrectly stated in the proposal. For complete details of the section and the definition of 'date of policy', please refer Section 45 of the Insurance Act, 1938.

All product features under this plan have been chosen by the master policyholder in his capacity as the group administrator. Only features chosen by the Master Policyholder are available to you, based on eligibility. Please refer Scheme Details for complete information.

State Bank of India is a registered Corporate Agent of SBI Life Insurance Company Limited under the composite license number <CA003> issued by IRDAI. SBI as Corporate Agent is authorised to provide pre sales and post sales advice to the insured in respect of the insurance product opted by him. Insurance products are obligations only of the Insurance Company. They are not bank deposits or obligations of or guaranteed by SBI or any Government agency. All claims under the policy will be solely decided upon by the Insurance Company. SBI hold no warranty and do not make any representation about the insurance, the quality of claims processing and shall not be responsible for settlement of claims, recovery of claims, or clearing of claims, in any manner whatsoever. This message does not constitute the distribution of any information or the making of any offer or solicitation by anyone in any jurisdiction in which such distribution or offer is not authorized or to any person to whom it is unlawful to distribute such a document or make such an offer or solicitation. The purchase by a Bank's customer of any insurance product is purely voluntary and is not linked to availment of any other facility from the Bank. Trade logo displayed above belongs to State Bank of India and is used by SBI Life under license. Life Insurance Policies are underwritten by SBI Life Insurance Company Limited with its Registered and Corporate Office: Natraj, M V Road & Western Express Highway Junction, Andheri (East), Mumbai - 400 069