

IN THIS POLICY, THE INVESTMENT RISK IN THE INVESTMENT PORTFOLIO IS BORNE BY THE POLICYHOLDER



PNB MetLife India Insurance Company Limited. (Insurance Regulatory and Development Authority Life Insurance Registration No. 117) Registered Office: 'Brigade Seshamahal', 5, Vani Vilas Road, Basavanagudi, Bangalore - 560 004, [www.pnbmetlife.co.in](http://www.pnbmetlife.co.in), Fax: +91-80-4150 6969

**Terms & Conditions – Met Easy Super Unit Linked Life Insurance Plan (Non Par) UIN 117L069V02**

**1. Basic Definitions**

The words or terms below that appear in this Policy in Initial Capitals and **bold** type will have the specific meaning given to them below. These defined words or terms will, where appropriate to the context, be read so that the singular includes the plural, and the masculine includes the feminine.

- 1.1. **Age** means age of the **Insured** as of his last birthday and is as shown in Section 1 of the **Schedule**.
- 1.2. **Annualized Premium** means one full year's **Regular Premium**.
- 1.3. **Application** means the proposal form and any other information given to **Us** to decide whether and on what terms to issue this **Policy**.
- 1.4. **Appointee** means the person **You** have named to receive payment under this **Policy** if the **Nominee** is a minor at the time payment becomes due under this **Policy**.
- 1.5. **Basic Sum Assured** means the amount of life insurance cover as chosen by **You** and is shown in Section 1 of the **Schedule**.
- 1.6. **Business Day** means a working day of **Our** Registered office.
- 1.7. **Cost of Insurance** means the cost per Rs 1000 of insurance cover as laid out in the "Table of Cost of Insurance Charges" enclosed.
- 1.8. **Cost of Rider Cover** means the cost per Rs 1000 of **Rider Cover**.
- 1.9. **Date of Commencement** means the date on which the risk under this **Policy** becomes effective and is as shown in Section 1 of the **Schedule**.
- 1.9.1.10. **Date of Discontinuance** means the date on which **We** receive intimation from **You** about the discontinuance or surrender of the **Policy** or on the expiry of the notice period provided for in Clause 3.2.1
- 1.40.1.11. **Date of Issue** means the date on which this **Policy** is issued after **We** have accepted the risk under the Application. The Date of Issue is shown in Section 1 of the **Schedule**.
- 1.44.1.12. **Date of Maturity** means the expiry date of this **Policy** as shown in Section 1 of the **Schedule**.
- 1.42.1.13. **Death Benefit** means the amount payable under this **Policy** in accordance with clause 2.1 on the death of the **Insured**.
- 1.43.1.14. **Discontinued Policy** means a **Policy**:
  - a) Which is not revived during the stipulated revival period specified in the **Policy** or
  - b) Which **You** have surrendered in accordance with this **Policy**.
- 1.15. **Discontinued Policy Fund** means a separately identifiable fund that constitutes of the fund value/policy account value of the policies issued by **Us** which are discontinued.
- 1.44.1.16. **Insured** means the person insured as named in Section 1 of the **Schedule**.
- 1.45.1.17. **Maturity Benefit** means the amount payable under this **Policy** in accordance with clause 2.2 on the **Date of Maturity**.
- 1.46.1.18. **Mortality Charge** means the charge towards providing life insurance cover and is as shown in Section 3 of the **Schedule**.
- 1.47.1.19. **Net Asset Value ("NAV")** of a **Unit Linked Fund** means the price of a unit in a **Unit Linked Fund** at which **We** would allocate or cancel **Units** in that **Unit Linked Fund** at each **Valuation Date**.
- 1.48.1.20. **Nominee** means the person named in the **Schedule** who is nominated by **You**, to receive the benefits under this **Policy** on the death of the **Insured**, before the **Date of Maturity**.
- 1.49.1.21. **Partial Withdrawal** means any part of the **Unit Account** that **You** encash in accordance with clause 2.3.

Formatted: Font: Not Bold

Formatted: Font: Not Bold

Formatted: Indent: Left: 2.16 cm, No bullets or numbering

Formatted: Font: Bold

Formatted: Font: Not Bold

IN THIS POLICY, THE INVESTMENT RISK IN THE INVESTMENT PORTFOLIO IS BORNE BY THE POLICYHOLDER

**1.20-1.22. Policy** means this document, any endorsements issued by **Us**, the **Schedule** and the **Application**.

**1.21-1.23. Policy Anniversary** means the date immediately following completion of the first **Policy Year** and the same date every year thereafter until the **Date of Maturity**

**1.22-1.24. Policy Charges** means the charges shown in Section 3 of the **Schedule**. **Policy Charges** are applicable and will be determined in the manner shown in Section 3 of the **Schedule** subject to the terms and conditions of the **Policy**.

**1.23-1.25. Policy Month** means the one month period between the **Date of Commencement** and every subsequent month thereafter until the **Date of Maturity**.

**1.24-1.26. Policy Term** means the period between the **Date of Commencement** and the **Date of Maturity**. The duration of the **Rider Cover**, if opted, is specified in Section 1 of the **Schedule** and it may cease prior to the **Date of Maturity**.

**1.25-1.27. Policy Year** refers to the one year period between the **Date of Commencement** and every subsequent year thereafter until the **Date of Maturity**.

**1.26-1.28. Premium Payment Term** means the period for which the premiums are payable and is as shown in the Section 1 of the **Schedule**.

**1.27-1.29. Regular Premium** refers to the amount which **You** must pay in accordance to the frequency as specified in the **Schedule** for the **Base Sum Assured** during the **Premium Payment Term** and is as shown in Section 1 of the **Schedule**.

**1.28-1.30. Regular Premium Fund Value** means the total number of **Units** in the **Regular Premium Unit Account** of this **Policy** multiplied by the **Net Asset Value** as at the **Relevant Date**.

**1.29-1.31. Regular Premium Unit Account** means Your **Unit Account** pertaining to the **Regular Premium**.

**1.30-1.32. Relevant Date** means :

**1.30-1.32.1. Our** date of receipt of **Your** written notice/request for switches, **Partial Withdrawal**, surrender or termination of the **Policy**, ~~or a free-look cancellation, Policy loan request and Policy loan repayment.~~

**1.30-2.1.32.2. Our** date of receipt of notice of the death of the **Insured** in the case of a **Death Benefit** claim.

**1.30-3.1.32.3. The Date of Maturity** in the case of a **Maturity Benefit** claim.

The rules in this regard are as follows:

- If the request is received before 15.00 hours on a **Business Day**, the corresponding **Valuation Date** is the same **Business Day**.
- If the request is received after 15.00 hours on a **Business Day**, the corresponding **Valuation Date** is the next **Business Day**.

**1.31-1.33. Rider** means the additional benefit as described therein which **You** have chosen over and above the **Base Sum Assured**

**1.32-1.34. Rider Cover** means the amount of coverage under the **Rider** chosen by **You** as shown in Section 1 of the **Schedule**

**1.33-1.35. Rider charges** means the amount that will be deducted from **Your Regular Premium Fund Value** over and above mortality charges

**1.34-1.36. Schedule** means the schedule **We** issue along with any annexure, unit statement, tables or endorsements attached to it from time to time

**1.35-1.37. Unit Linked Fund** means a separately identifiable investment-linked fund set up and managed by **Us** for the purpose of achieving the objectives of the fund. The **Unit Linked Funds** available under this **Policy** are mentioned in Section 2 of the **Schedule**

**1.36-1.38. Unit** means a notional and proportionate part of the **Regular Premium Unit Account** created upon the allocation of **Regular Premium**

**1.37-1.39. Unit Account** means the notional accounts that **We** administer in which **Your Units** pertaining to **Regular Premium** are allocated or redeemed.

**1.38-1.40. Valuation Date** means the date on which the assets to which a **Unit Linked Fund** is/are referenced, are valued and the date on which **NAV (s)** is/ are determined.

**1.39-1.41. We, Us or Our** means PNB\_MetLife India Insurance Company Limited.

**1.40-1.42. You or Your** means the Policyholder, as named in Section 1 of the **Schedule**

Formatted: Font: Not Bold

IN THIS POLICY, THE INVESTMENT RISK IN THE INVESTMENT PORTFOLIO IS BORNE BY THE POLICYHOLDER

## 2. Policy Benefits

Met Easy Super is the name of the product offered by us under this **Policy**. It is a non-participating unit linked life insurance plan, which matures on the **Date of Maturity**. **Your Policy** provides the following benefits:

### 2.1. Death Benefit

2.1.1. If the **Insured** dies before attaining Age 60 during the **Policy Term** and while the **Policy** is in force, then **We** will pay **You** or the **Nominee** the highest of:

- (a) The **Regular Premium Fund Value** as on the **Relevant Date**; or
- (b) The **Base Sum Assured**, less any and all **Partial Withdrawals** made from the **Regular Premium Unit Account** in the 24 months immediately preceding the **Insured's** death; or
- (c) 105% of the total **Regular Premiums** received under the **Policy**.

2.1.2. If the **Insured** dies after attaining Age 60 during the **Policy Term** and while the **Policy** is in force then

**We** will pay **You** or the **Nominee** the highest of:

- (a) The **Regular Premium Fund Value** as on the **Relevant Date**; or
- (b) The **Base Sum Assured** less the higher of:
  - (i) all **Partial Withdrawals** made from the **Regular Premium Unit Account** in the 24 months immediately preceding the **Insured's** death; or
  - (ii) all **Partial Withdrawals** made from the **Regular Premium Unit Account** after the **Insured** having attained the age of 60; or
- (c) 105% of the total Regular Premiums received under the **Policy**.

**Accidental Death Benefit Rider** (UIN: 117A011V01)

If **You** have opted for this **Rider** and the **Insured** dies due to an Accident as defined in the **Rider** terms and conditions, then **We** will pay the **Rider Cover** in addition to any payment due under the **Policy**.

### 2.2. Maturity Benefit

If the **Insured** is alive on the **Date of Maturity** and the **Policy** is in force, then **We** will pay **You** the **Regular Premium Fund Value** as on the **Relevant Date**. **You** have the following options to choose from for receiving the **Maturity Benefit**:

#### Settlement Option

**You** may exercise one of the following Settlement Options by giving **Us** written notice at least 90 days before the **Date of Maturity** specifying which of the options **You** wish to exercise along with any information or documentation that **We** request:

- (a) Receive the **Regular Premium Fund Value** as at the **Date of Maturity** in entirety.

IN THIS POLICY, THE INVESTMENT RISK IN THE INVESTMENT PORTFOLIO IS BORNE BY THE POLICYHOLDER

- (b) Receive the **Regular Premium Fund Value** as at the **Date of Maturity** in equal installments at the regular intervals specified by **You**, in **Your** notice setting out **Your** Settlement Option, for a period not exceeding 5 calendar years from the **Date of Maturity**.
- (c) Receive a specified portion of the **Regular Premium Fund Value** as at the **Date of Maturity** on the **Date of Maturity** and receive the remainder of the **Regular Premium Fund Value** in equal installments at the regular intervals specified by **You**, in **Your** notice setting out **Your** Settlement Option, for a period not exceeding 5 calendar years from the **Date of Maturity**.

The default Settlement Option in case of non-receipt of the aforesaid notice shall be option (a).

**You** understand and agree that if the Settlement Option (b) or (c) is exercised, then:

- (a) all investment risks in the investment portfolio shall continue to be borne by **You**;
- (b) the Settlement Option shall be administered in accordance with **Our** rules as applicable from time to time. Currently, the minimum amount for each installment is 5% of the **Total Regular Premium Fund Value** and the maximum payment frequency is monthly;
- (c) no **Partial Withdrawals** or fund switches shall be allowed after the **Date of Maturity** even if the Settlement Option is in force;
- (d) **You** may terminate the **Policy** at any time when the Settlement Option is in force and **We** will pay the balance of the **Regular Premium Fund Value** as on the date of termination;
- (e) Only the **Fund Management Charges** as specified in the **Schedule** shall be levied when the Settlement Option is in force;

If the **Insured** dies after the **Date of Maturity** but before the end of the term of the Settlement Option, only the balance of the **Regular Premium Fund Value** as on the **Relevant Date** shall be payable and the **Policy** shall immediately and automatically terminate.

### 2.3 Partial Withdrawals

After the completion of the first 5 **Policy Years** if the **Policy** is in force, all due **Regular Premium** has been received in full, **You** may make a **Partial Withdrawal** by giving **Us** a written request specifying the amount of the proposed **Partial Withdrawal** provided that:

2.3.1. The proposed **Partial Withdrawal** amount is not less than Rs.5, 000.

2.3.2. The **Regular Premium Fund Value** after any **Partial Withdrawal** should not be less than 120% of the **Annualized Premium**

2.3.3. All requests for a **Partial Withdrawal** will be subject to **Our** approval and based on the rules of the applicable **Unit Linked Funds**.

2.3.4. Only one (1) **Partial Withdrawal** in any **Policy Year** from the **Regular Premium Unit Account** will be free of charge. For any other **Partial Withdrawal** in that **Policy Year**, the Partial Withdrawal Charge specified in Section 3 of the **Schedule** shall be applicable.

2.3.5. All **Partial Withdrawals** will be affected by cancelling **Units** from the **Regular Premium Unit Account**.

Formatted: Font: Bold

### 3. Premium/Sum Assured Provisions

**You** are required to pay the premiums on the due dates during the **Premium Payment Term**.

#### 3.1. Regular Premium/Rider Premium (if opted for)

~~4.4.4.~~ **3.1.1** **You** must pay the amount of **Regular Premium** as shown in section 1 of the **Schedule** on or before its due date. **Regular Premiums** received before the due date shall be credited to **Your Policy** only on the due date. If **You** have

Formatted: Indent: Left: 1.27 cm, No bullets or numbering

**IN THIS POLICY, THE INVESTMENT RISK IN THE INVESTMENT PORTFOLIO IS BORNE BY THE POLICYHOLDER**

chosen a **Rider Cover**, then the charges towards the **Rider Cover** will be recovered by way of unit deduction. No additional premium is required to be paid towards **Rider Cover**.

~~1.1.2.3.1.2.~~ **Section 1** of the **Schedule** shows the **Premium Payment Term** chosen by **You**. All taxes cess, surcharge and other levies, whether existing now or introduced in the future, will be levied, as and when applicable, on the premiums or on any charges as applicable, to be paid by **You** or recovered by way of unit deduction.

~~1.1.3.~~ **You may change** the frequency of premium payment by giving **Us** written notice. The revised frequency shall only be applicable once **We** have approved the same by issuing an endorsement to the **Schedule** and from next monthly **Policy Anniversary**.

~~1.1.4.3.1.3~~ All amounts payable to **Us** or by **Us** shall be paid in Indian Rupees and will be payable or paid at **Our** Corporate Office, Registered Office, Regional Office or any other office.

**3.2. Premium Discontinuance & reinstatement**

~~3.2.1.~~ If the **Regular Premium** is not received by the expiry of the Grace Period, **We** will, within 15 (Fifteen) days of the expiry of the Grace Period, give a written notice to **You** to exercise one of the following options in writing within 30 (Thirty) days of the receipt of such notice ("**Notice Period**");

- a) Revive the **Policy** within 2 years from the **Date of Discontinuance** ("**Revival Period**");
- b) Complete withdrawal (i.e. surrender) of the **Policy** without any risk cover.

~~3.2.2.~~ If the complete withdrawal option is exercised by **You**, the provisions as mentioned in clause 3.3.2 relating to surrender of the **Policy** prior to expiry of the 5th Policy Year ("**Lock in Period**") will become applicable.

~~3.2.3.~~ If **You** do not exercise any of the above options during the **Notice Period**, **You** will be deemed to have completely withdrawn from the **Policy**, and the provisions as mentioned in clause 3.3.2 shall apply.

~~3.2.4.~~ During the period up to the Date of Discontinuance, the risk cover will continue and all Charges under the **Policy** will continue to apply.

~~3.2.5.~~ If **You** have either:

- i. Exercised the option to revive the **Policy** within the Revival Period; or
- ii. Exercised the option to completely withdraw from the **Policy**; or
- iii. Not paid the due **Regular Premium** by the expiry of the Notice Period and not exercised any of the options mentioned above.

then, on the Date of Discontinuance, **We** will credit the **Regular Premium Fund Value**, by creation of Units, into the **Discontinuance Policy Fund** after deducting applicable Discontinuance/Surrender Charges. The risk cover under the **Policy** will cease and no further Charges will be levied by **Us** other than the Fund Management Charge applicable on the **Discontinuance Policy Fund**.

~~3.2.6.~~ On the expiry of the Lock in Period, **We** will close the Unit Account and the value of Units in the **Discontinuance Policy Fund** as at that date shall be paid to **You**, unless **You** have exercised the option to revive the **Policy** within the Revival Period.

~~3.2.7.~~ If **You** have chosen in writing the option to revive the **Policy** within the Revival Period, **You** may exercise any of the following options in writing during the Revival Period:

~~(a)~~ Revive the **Policy**:

Revive the **Policy**, subject to the following conditions:

1. **You** give **Us** a written request to revive the **Policy**; and
2. **You/**Life Insured produce/s an evidence of insurability, at **Your/**his own cost, acceptable to **Us**, as per **Our** board approved underwriting policy; and
3. **You** pay **Us** all overdue **Regular Premium** in full.

Formatted: Font: (Default) Arial, 9 pt

Formatted: Font: (Default) Arial, 9 pt

Formatted

Formatted: List Paragraph, Outline numbered + Level: 3 + Numbering Style: 1, 2, 3, ... + Start at: 1 + Alignment: Left + Aligned at: 0 cm + Indent at: 1.27 cm

Formatted

Formatted

Formatted

Formatted: List Paragraph, Indent: Left: 0 cm, Hanging: 0.95 cm, Outline numbered + Level: 3 + Numbering Style: 1, 2, 3, ... + Start at: 1 + Alignment: Left + Aligned at: 0 cm + Indent at: 1.27 cm

Formatted: List Paragraph, Indent: Left: 0 cm, Hanging: 0.95 cm, Outline numbered + Level: 3 + Numbering Style: 1, 2, 3, ... + Start at: 1 + Alignment: Left + Aligned at: 0 cm + Indent at: 1.27 cm

Formatted

Formatted: List Paragraph, Outline numbered + Level: 3 + Numbering Style: 1, 2, 3, ... + Start at: 1 + Alignment: Left + Aligned at: 0 cm + Indent at: 1.27 cm

Formatted

Formatted: List Paragraph, Outline numbered + Level: 3 + Numbering Style: 1, 2, 3, ... + Start at: 1 + Alignment: Left + Aligned at: 0 cm + Indent at: 1.27 cm

Formatted

Formatted

Formatted

Formatted

Formatted

Formatted: Font: (Default) Arial, 9 pt, English (United)

Formatted: List Paragraph, Indent: Left: 0 cm, Hanging: 0.95 cm, Outline numbered + Level: 3 + Numbering Style: 1, 2, 3, ... + Start at: 1 + Alignment: Left + Aligned at: 0 cm + Indent at: 1.27 cm

Formatted

Formatted: Font: (Default) Arial, 9 pt

Formatted: List Paragraph, Indent: Left: 0 cm, Hanging: 0.95 cm, Outline numbered + Level: 3 + Numbering Style: 1, 2, 3, ... + Start at: 1 + Alignment: Left + Aligned at: 0 cm + Indent at: 1.27 cm

Formatted

Formatted

Formatted

Formatted

Formatted

Formatted

Formatted

IN THIS POLICY, THE INVESTMENT RISK IN THE INVESTMENT PORTFOLIO IS BORNE BY THE POLICYHOLDER

On revival, the insurance cover under the **Policy** as at the **Date of Discontinuance** will be restored; the funds against Your **Policy** in the **Discontinuance Policy** shall be credited back to the Funds chosen by You. Discontinuance/Surrender Charges deducted will also be added back to the **Unit Account**.

The amount of **Regular Premium** paid on revival, less any Premium Allocation Charges attributable to the **Regular Premium** paid on revival in accordance with the ratio in which the **Regular Premium** should be allocated in the **Funds** specified by **You** will be used to purchase **Units** at the Unit Price as on the date of revival.

An amount equal to the **Policy Administration Charge** falling due between the **Date of Discontinuance** and the date of revival will be levied on revival by cancelling **Units** in the **Unit Account** at their Unit Price.

(b) Complete Withdrawal from the **Policy** without any risk cover;

If **You** exercise the option of complete withdrawal, then, on the date of surrender, the following shall be applicable:

1. If the **Lock in Period** has not expired, the provisions relating to surrender of the **Policy** within the **Lock in Period** as per clause 3.3.2 shall be applicable.

2. If the **Lock in Period** has expired, the provisions relating to surrender of the **Policy** after the **Lock in Period** as per clause 3.3.1 shall be applicable.

(c) Deemed Option;

If **You** do not exercise any option during the **Revival Period**, then at the expiry of the later of the **Revival Period** or the **Lock in Period**, **You** will be deemed to have completely withdrawn from the **Policy** and the provisions of Clause 3.3 shall apply.

During the period up to the expiry of the **Revival Period** or the earlier exercise of any of the above options, the **Policy** will continue to be in discontinuance mode with no risk cover and no Charges shall be levied by **Us**, other than the **Fund Management Charge** applicable on the **Discontinuance Policy Fund**. If the **Insured** dies when the **Policy** is in discontinuance mode, **We** will pay the **Fund Value** as available in the **Discontinuance Policy Fund** on the date of death and any **Discontinuance Charges** deducted shall be added back to the said **Fund Value** if **You** have not exercised the complete withdrawal option.

During the period of discontinuance of the **Policy**, **You** shall not be allowed to exercise switches or partial withdrawals.

3.2.8. Discontinuance of Payment of **Regular Premium** after the **Lock in Period**

3.2.8.1. If the **Regular Premium** is not received in full by the expiry of the **Grace Period**, **We** will, within 15 (Fifteen) days of the expiry of the **Grace Period**, give a written notice to **You** to exercise one of the following options in writing within 30 (Thirty) days of the receipt of such notice ("Notice Period"):

a) Revive the **Policy** within the **Revival Period**;

b) Complete withdrawal (surrender) of the **Policy** without any risk cover;

If the complete withdrawal option is exercised by **You**, the provisions relating to surrender of the **Policy** after the **Lock in Period** as per Clause 3.3.1 will be applicable.

c) Convert the **Policy** into a **Paid-Up Policy**

If **You** choose the paid up option, the **Policy** will continue without any further premiums payable till the end of the **Policy Term** and all applicable Charges will continue to be levied. In this case, the **Basic Sum Assured** will be reduced by the proportion of total **Regular Premiums** received from **You** to the total **Regular Premiums** payable during the **Premium Payment Term**. This reduced **Sum Assured** is called the 'Paid up **Sum Assured**'.

The **Policy** once converted to a **Paid-Up Policy** cannot subsequently be revived during the **Policy Term**.

3.2.8.2. If **You** do not exercise any of the above options during the **Notice Period**, **You** will, by default, be deemed to have completely withdrawn from the **Policy** and the surrender provisions after the **Lock in Period** as per clause 3.3.1 will be applicable.

During the period up to the **Date of Discontinuance**, the risk cover will continue and all Charges under the **Policy** will continue to apply.

If **You** have chosen in writing the option to revive the **Policy** within the **Revival Period**, **You** may exercise any of the following options in writing during the **Revival Period**:

Formatted

Formatted

Formatted

Formatted

Formatted

Formatted

Formatted

Formatted

Formatted

Formatted

Formatted

Formatted: Font: (Default) Arial, 9 pt, Not Bold

Formatted: List Paragraph, Indent: Left: 0 cm, Hanging: 0.95 cm, Outline numbered + Level: 3 + Numbering Style: 1, 2, 3, ... + Start at: 1 + Alignment: Left + Aligned at: 0 cm + Indent at: 1.27 cm, Tab stops: Not at 1.27 cm

Formatted

Formatted: Font: (Default) Arial, 9 pt

Formatted: List Paragraph, Outline numbered + Level: 4 + Numbering Style: 1, 2, 3, ... + Start at: 1 + Alignment: Left + Aligned at: 0 cm + Indent at: 1.27 cm

Formatted

Formatted

Formatted

Formatted

Formatted

Formatted

Formatted: Font: (Default) Arial, 9 pt, Not Bold

Formatted

Formatted: List Paragraph, Outline numbered + Level: 4 + Numbering Style: 1, 2, 3, ... + Start at: 1 + Alignment: Left + Aligned at: 0 cm + Indent at: 1.27 cm

Formatted

Formatted

Formatted

IN THIS POLICY, THE INVESTMENT RISK IN THE INVESTMENT PORTFOLIO IS BORNE BY THE POLICYHOLDER

**(a) Revive the Policy:**

Revive the **Policy**, subject to the following conditions:

1. **You** give **Us** a written request to revive the **Policy**; and
2. **You/Insured** produce/s an evidence of insurability, at **Your**/his own cost, acceptable to **Us** as per **Our** board approved underwriting policy; and
3. **You** pay **Us** all overdue **Regular Premium** in full.

The amount of **Regular Premium** paid on revival, less any Premium Allocation Charges attributable to the **Regular Premium** paid on revival in accordance with the ratio in which the **Regular Premium** should be allocated in the **Funds** specified by **You** will be used to purchase **Units** at the Unit Price as on the date of revival.

If **You** do not exercise any option during the Revival Period, then at the expiry of the Revival Period, **You** will be deemed to have completely withdrawn from the **Policy** and the provisions of the surrender after the Lock in Period as per clause 3.3 shall be applicable.

During the period up to the expiry of the Revival Period or the earlier exercise of any of the above options, the **Policy** will continue with full risk cover and all applicable Charges will be levied during the Revival Period.

**(b) Complete Withdrawal from the Policy without any risk cover:**

If **You** exercise the option of complete withdrawal, then, on the date of surrender, the provisions relating to surrender of the **Policy** after the Lock in Period as per clause 3.3 shall be applicable.

**(c) Convert the Policy into a Paid-Up Policy:**

If **You** choose the option to convert the **Policy** to a Paid-Up **Policy**, the provisions of Clause 3.2.8.1(c) shall apply.

3.2.9. During the period when the **Policy** is discontinued, **You** shall not be permitted to exercise any of the options set out in Clause 4 unless specifically provided otherwise.

3.2.1 If **You** fail to pay the **Regular Premium** due on the due date, then **We** will allow a grace period of 30 days (15 days if the **Regular Premium** is due monthly). The **Policy** shall remain in force during the grace period and all applicable charges will continue to be deducted. In case the premiums are not received during the grace period and 30 days have elapsed from the time **You** received a notice from **Us** or **You** have provided a written intimation to the Company, seeking to discontinue the **Policy** / premium payment under the **Policy**, then the **Policy** moves to discontinued fund.

In the event **Your Policy** has moved to discontinued fund, **You** have an option to reinstate **Your Policy** within a period of two years from the date of discontinuance or before the expiry of a period of five years from the date of commencement of **Your Policy**, whichever is earlier.

If **You** choose to reinstate **Your Policy**, then **You** shall:

1. Give **Us** written notice to reinstate the **Policy**
2. Pay in full all the **Regular Premiums** that would have been payable from the date of default to the proposed date of reinstatement and any revival fee which is specified in Section 3 of the Schedule of **Your Policy** Document.
3. Give **Us** all information and documentation **We** request.

**You** understand and agree that:

- (-) It is **Our** sole and absolute discretion to reinstate the **Policy** and that there is no obligation on **Us** to reinstate the **Policy** even if **You** have given **Us** all documentation and **We** may restrict the terms upon which **We** may agree to reinstate the **Policy**.
- (-) The reinstatement of the **Policy** shall not take effect until **We** have approved the request and the same has been communicated to **You** in writing.

2.1.1 If **You** choose to terminate or surrender the **Policy** without risk cover, and 5 **Policy** Years have not yet been completed, the **Total Fund Value** after deduction of discontinuance charges specified in Section 3 of the Schedule of **Your Policy** Document, will be credited to a Discontinued **Policy** Fund managed by **Us**, and this amount will continue to remain in this fund (with deduction of Fund Management Charges of 0.50%) until the 5<sup>th</sup> **Policy** Anniversary upon which the **Total Fund Value** plus

Formatted ...

Formatted ...

Formatted ...

Formatted ...

Formatted ...

Formatted ...

Formatted ...

Formatted: Font: (Default) Arial, 9 pt

Formatted ...

Formatted: Font: (Default) Arial, 9 pt, Not Bold, No

Formatted ...

Formatted ...

Formatted: List Paragraph, Outline numbered + Level: 3 + Numbering Style: 1, 2, 3, ... + Start at: 1 + Alignment: Left + Aligned at: 0 cm + Indent at: 1.27 cm, Tab stops: Not at 1.27 cm

IN THIS POLICY, THE INVESTMENT RISK IN THE INVESTMENT PORTFOLIO IS BORNE BY THE POLICYHOLDER

interest rate which is at least equal to 4% p.a., during the period, the Policy was in discontinued fund, shall be payable to You by means of a cheque or demand draft, to be delivered to Your last known address or by any other electronic mode of payment. If the Insured dies before the 5<sup>th</sup> Policy Anniversary, the Total Fund Value as on the date the Policy was discontinued plus interest rate which is at least equal to 4% p.a. for the period the Policy was in discontinued Fund, will be payable.

3.3.2. The reinstatement of the Policy and the terms on which it is reinstated will be in Our sole and absolute discretion. We shall not reinstate the Policy, unless:

a. You have given written notice to Us of Your intention to reinstate at least 7 days before the end of the 2 year period from the date of discontinuance of Your Policy or expiry of the 5 year period for the Date Of Commencement whichever is earlier; and

b. You meet Board approved underwriting requirements, at the time of reinstatement and

b. You provide Us with all the information and documentation that We may seek for the purposes of reinstatement; and

b. You have paid all unpaid Regular Premium due between the date of default to the proposed date of reinstatement; and

b. You agree to the deduction of applicable Policy Charges and Premium Allocation Charges; and

b. You agree that any reinstatement to which We consent shall only be effective from the date of Our written endorsement of reinstatement.

2.2.3. In the event of reinstatement of Policy after the Policy has moved to the Discontinued Fund, all due and unpaid premiums shall be payable by the Policyholder. The Policy shall be revived subject to the Board approved underwriting Policy restoring the risk cover along with the investments made in the Unit Linked Funds as chosen by the Policyholder, out of the discontinued fund less the Policy administration charge and premium allocation charge as applicable during the discontinuance period. The discontinuance charges deducted at the time of discontinuance of the Policy shall be added back to the Unit Linked Funds

2.2.3. In the event of Policy discontinuance after expiry of lock-in period of 5 years, We will send a notice within a period of 15 days from the date of expiry of grace period to a discontinued Policyholder giving the following options:

2.2.3.0. Revive the Policy within a period of two years or

2.2.3.0. Complete withdrawal from the Policy without any risk cover

2.2.3.0. Convert the Policy into paid-up Policy, with the paid-up sum assured calculated by multiplying the sum assured by the total number of premiums paid to the original number of premiums payable as per the terms and conditions of the Policy

2.2.3. In case You choose the option to revive the Policy within a period of 2 years from the date of discontinuance of the premium, the Policy is deemed to be in force with risk cover as per the terms and conditions of the Policy.

2.2.3. If You do not exercise any option within 30 days from the date of receipt of the notice, the Policy will be treated as if You have opted for complete withdrawal from the Policy without any risk cover. The proceeds of the discontinued Policy will be payable to You immediately upon such discontinuance.

### 3.3. Policy Surrender

3.3.1. After the 5<sup>th</sup> Policy Anniversary, You may surrender the Policy at any time during the Policy Term and the Total Regular Premium Fund Value will be payable.

3.3.2. Before the completion of the first 5 Policy Years, You may surrender the Policy and the Total Regular Premium Fund Value after deduction of any Discontinuance Charges specified in Section 3 of the Schedule will be credited to a Discontinued Policy Fund managed by Us, and this amount will continue to remain in this fund (without the deduction of any charges) until the commencement of the 6<sup>th</sup> Policy Year upon which the Total the relevant Fund Value plus applicable interest computed at a minimum interest of 4%pa shall be payable

Formatted: Font: (Default) Arial, 9 pt

Formatted: Normal, No bullets or numbering

Formatted: Font: (Default) Arial, 9 pt

Formatted: Normal, No bullets or numbering

Formatted: Font: (Default) Arial, 9 pt, Bold

Formatted: Font: (Default) Arial, 9 pt

Formatted: Font: Bold

Formatted: Font: Not Bold



IN THIS POLICY, THE INVESTMENT RISK IN THE INVESTMENT PORTFOLIO IS BORNE BY THE POLICYHOLDER

3.3.3. In circumstances that We may determine as being exceptional, We may, with the prior approval of the IRDA, defer the termination/surrender of the Policy for a period not exceeding ~~30 days~~ six months from the date of receipt of request for termination/surrender of the Policy. Examples of such circumstances are:

Formatted: Font: Not Bold

3.3.3.

1. When one or more stock exchanges which provide a basis for valuation for a substantial portion of the assets of the fund are closed other than for ordinary holidays.

Formatted: Font: (Default) Arial, 9 pt, Font color: Black

2. When, as a result of political, economic, monetary or any circumstances that are out of Our control, the disposal of the assets of the Unit-Linked Fund are not reasonable or would not in Our view be reasonably practicable without being detrimental to the interests of the remaining Policyholders invested in the Unit-Linked Fund(s).

Formatted: Left, Indent: Left: 1.27 cm, Right: 0 cm, Line spacing: single, No bullets or numbering, Adjust space between Latin and Asian text, Adjust space between Asian text and numbers, Tab stops: Not at 2.89 cm

3. During periods of extreme market volatility, resulting in non-valuation of funds, during which termination of the Policy would, in Our opinion, be detrimental to the interests ~~interests~~ of the existing Policyholders invested in the Unit-Linked Fund.

Formatted: Indent: Left: 1.27 cm, No bullets or numbering

4. In case of natural calamities, strikes, war, civil unrest, riots and bandhs;

5. In the event of any circumstance of force majeure or disaster that affects Our normal functioning.

#### 3.4. Premium Redirection

All premiums paid will be allocated to the funds specified in the Schedule and allocated in the proportion also specified in the Schedule. You may change the premium allocation proportion once every Policy Year free of charge. Any subsequent changes in a Policy Year will attract the Miscellaneous Charge specified in Section 3 of the Schedule. Any change You make must comply with the applicable rules of the Unit Linked Funds, if any, and will only be processed if (a) the sum of the proportionate allocations is equal to one hundred percent (100%); and (b) the allocation proportion for any one fund is at least twenty percent (20%) of the premium. This facility is not available if the Auto Rebalancing option is in force.

#### 3.5. Increase/Decrease in premiums & Increase /Decrease In Sum Assured

You are not allowed to change the Regular Premiums or the Base Sum Assured under this Policy.

### 4. Fund Provisions

#### 4.1. Unit Allocation

The Regular Premium net of allocation charges will be allocated to the Unit Linked Funds specified in the Schedule provided that the minimum amount allocated to any Unit Linked Fund shall be 20% of the Regular Premium subject to applicable rules, if any, of that Unit Linked Fund.

The Regular Premium net of allocation charges will be used to buy Units in the chosen Unit Linked Funds by using the Net Asset Value calculated in accordance with in Section 4.4 below provided that:

- 4.1.1. If the Regular Premium is received by local cheque/DD (payable at par where the premium is received) before 15:00 hours on a Business Day, the Valuation Date will be the same Business Day.
- 4.1.2. If the Regular Premium is received by local cheque/DD (payable at par where the premium is received) after 15:00 hours on a Business Day, the Valuation Date will be the next Business Day.
- 4.1.3. If the Regular Premium is received by any other authorized mode, the Valuation Date will be the Business Day on which the payment is realized.
- 4.1.4. If no valuation is undertaken on a Business Day, then the Valuation Date will be the date when the next valuation is done. Regular Premium received prior to the due date will be allocated to the chosen Unit Linked Funds only on the due date.

IN THIS POLICY, THE INVESTMENT RISK IN THE INVESTMENT PORTFOLIO IS BORNE BY THE POLICYHOLDER

#### 4.2. Unit Allocations & Nominal Value

Unit allocations will be rounded up to four decimal places.

#### 4.3. Valuation of Funds

- 4.3.1. The assets to which the **Unit Linked Funds** are referenced will be valued daily and will be based on whether overall **Units** are to be purchased (Appropriation price) or sold (Expropriation price) in the **Unit Linked Funds** in order to meet the day to day transactions in that **Unit Linked Fund**.
- 4.3.2. **We** will determine the Appropriation price using the following methodology: (Market value of the assets held by the **Unit Linked Fund** plus expenses incurred in the purchase of assets plus the value of any current assets plus any accrued income net of Fund Management Charges as shown in Section 3 of the **Schedule** less the value of any current liabilities less provisions, if any)/number of outstanding units in the relevant **Unit Linked Fund**.
- 4.3.3. **We** will determine the Expropriation price of a **Unit Linked Fund** using the following methodology: (Market Value of the assets held by the **Unit Linked Fund** less the expenses incurred in the sale of such assets plus the value of any current assets plus any accrued income net of Fund Management Charges as shown in Section 3 of the **Schedule** less the value of any current liabilities, less provisions, if any)/number of outstanding in the relevant **Unit Linked Fund**.
- 4.3.4. **We** shall make all decisions about the selection and valuation of the assets to which a **Unit Linked Fund** is referenced subject to regulatory guidelines in the regard.
- 4.3.5. The **Unit Linked Fund** value will be calculated using the **Net Asset Value** on the corresponding **Valuation Date** falling on or immediately after the **Relevant Date**. If a request/notice is received:
- 4.3.5.1. Before 15:00 hours on a **Business Day**, the **Valuation Date** will be the same **Business Day**;
- 4.3.5.2. After 15:00 hours on a **Business Day**, the **Valuation Date** will be the next **Business Day**.
- 4.3.6. If no valuation is undertaken on a **Business Day**, then the **Valuation Date** will be the date when the next valuation is done.
- 4.3.7. **We** may change these rules by sending **You** 15 days prior written notice.

#### 4.4. Calculation of Net Asset Value

**We** will calculate the **Net Asset Value** in accordance with the following formula:

(Market value of investments held by the fund + value of Current Assets – value of Current Liabilities and Provisions, if any) / (Number of units existing on Valuation Date (before creation / redemption of units)

The **Net Asset Value** will be rounded up to four decimal places but there will be no difference between the prices at which **Units** are bought or sold on a particular day.

#### 4.5. Switches between Unit Linked Funds

If the **Policy** is in force **You** may give **Us** a written request to switch between the existing investments in **Unit Linked Funds** provided that:

IN THIS POLICY, THE INVESTMENT RISK IN THE INVESTMENT PORTFOLIO IS BORNE BY THE POLICYHOLDER

- 4.5.1.1. The proposed switch is in accordance with the rules applicable to the **Unit Linked Funds**;
- 4.5.1.2. The first 4 switches in any **Policy Year** will be free of any charges. All subsequent switches in that **Policy Year** will be subject to the applicable charges specified in Section 3 of the **Schedule**.
- 4.5.1.3. All request for switches made through **Our** online Policy Portal will be free of any charges.
- 4.5.1.4. the minimum amount for any proposed switch is Rs.5,000.
- 4.5.1.5. **We** shall not approve of the request switch if the Auto Rebalancing Option is in force under the **Policy**.

#### 4.6. Auto Rebalancing Option

- 4.6.1. In case **You** have chosen the Auto Rebalancing Option, **Your** investible premiums will be invested between Flexi Cap Fund and Protector II Fund in the proportions as chosen by **You** (allocation proportion to be minimum 20% in any of the above 2 funds and total of both the funds to be equal to 100%) .
- 4.6.2. Depending on the rebalancing trigger level chosen by **You** (10%/15%/20%/25% increase or decrease in the Base Fund Value) the proportion between Flexi Cap and Protector II will be readjusted accordingly.
- 4.6.3. **You** may change the proportion between Flexi Cap and Protector II once every **Policy Year** free of charge. Any subsequent change in proportion in the same **Policy Year** will be charged as per the miscellaneous charges mentioned in Section 3 of the **Schedule**.
- 4.6.4. **You** may opt out of this strategy once in a **Policy Year** and may opt into the self-managed option wherein **You** will be required to choose the Fund allocation proportion between various **Unit Linked Funds**.
- 4.6.5. This option will be deactivated in case of **Discontinued Policies**.
- 4.6.6. In case of renewal premiums, the Fund Value to be considered for rebalancing trigger will be the sum of the original **Regular Premium Fund Value** and the subsequent renewal premiums received after deducting Premium Allocation charges.
- 4.6.7. In case of **Partial Withdrawal**, the Fund Value to be considered for rebalancing trigger will be the Fund Value as reduced due to **Partial Withdrawals**.

#### 4.7 Systematic Transfer Option

- 4.7.1 In case **You** have chosen Systematic Transfer Option, the Fund Value in Protector II Fund will be transferred to Flexi Cap Fund automatically in a predefined proportion at the end of every **Policy Month**. The predefined proportion is as follows:

<b>Month1</b>	1/12 of the units available at the end of Month1
<b>Month2</b>	1/11 of the units available at the end of Month2
<b>Month5</b>	1/8 of the units available at the end of Month5

IN THIS POLICY, THE INVESTMENT RISK IN THE INVESTMENT PORTFOLIO IS BORNE BY THE POLICYHOLDER

-----	-----
<b>Month11</b>	1/2 of the units available at the end of Month11
<b>Month12</b>	Balance Units available at the end of the Month12

- 4.7.2 **You** may Opt into the Systematic Transfer Option any time during the **Policy Term** by giving atleast 30 days' notice before the next Policy Anniversary.
- 4.7.3 **You** may opt out of the Systematic Transfer Option any time during the **Policy Term** by giving atleast 30 days' notice before the next **Policy Anniversary**
- 4.7.4 In case **You** choose Systematic Transfer Option during the **Policy Term**, the option will be activated only from next **Policy Anniversary**.
- 4.7.5 Switching is not allowed to and from Protector II and Flexi Cap fund when Systematic Transfer Option is active
- 4.7.6 Auto Rebalancing is not allowed when Systematic Transfer Option is active
- 4.7.7 Systematic Transfer Option will remain active till such time all due **Premiums** are being paid regularly.

#### 4.8. Changes in existing Unit Linked Fund

- 4.8.1. **We** may at **Our** sole and absolute discretion establish a new **Unit Linked Fund** or close any of the existing **Unit Linked Funds** specified in Section 2 of the **Schedule** with the prior approval of the Insurance Regulatory and Development Authority
- 4.8.2. **We** will send **You** at least 4 weeks prior written notice of the **Unit Linked Fund** closure date. If **You** have not informed **Us** in writing at least 7 days before the closure date of another **Unit Linked Fund** to which the closing fund value is to be switched, then **We** will automatically switch the fund value to the **Unit Linked Fund** which offers the highest proportion of investment in Government Securities. **We** will not charge any switching fee for any such **Unit Linked Fund** closure

#### 4.9. Change to Term and Conditions

- 4.9.1. **We** may change these terms and conditions, the rules for the **Unit Linked Funds** and the benefits conferred by the **Policy** if there is a change in the law, legislation or taxation affecting **Us** or the **Unit Linked Funds** or the **Policy**, or if there is a change in circumstances which makes it impossible or impracticable for **Us** to follow these terms and conditions. Changes will be made with the prior approval of the Insurance Regulatory and Development Authority.
- 4.9.2. **We** will send **You** notice of any changes to the terms and conditions, rules for the **Unit Linked Funds** and benefits within four weeks from the date of effecting such changes. If **You** do not agree with the changes and do not give **Us** written notice of **Your** disagreement within four weeks of **Our** notice of the change, it will be deemed that **You** have accepted the change. If **We** receive notice of **Your** objection within 4 weeks of **Our** notice of the change, **You** may surrender the Policy and no surrender charges will be levied upon such surrender.

### 5. Ownership Provisions

#### 1.1. Nomination & Assignment

- 1.1.1. At any time before the **Date of Maturity** **You** may nominate a **Nominee** or change any existing nomination by giving **Us** prior written notice. No nomination or change in **Nominee** will be effective until **We** have made an endorsement to the **Schedule**.
- 1.1.2. If no nomination has been made or all **Nominees** die before payment becomes due under the **Policy**, then **We** shall make

**IN THIS POLICY, THE INVESTMENT RISK IN THE INVESTMENT PORTFOLIO IS BORNE BY THE POLICYHOLDER**

any payment due under the **Policy** to **You** or **Your** legal heirs or representatives which shall be a final and valid discharge of **Our** obligations under the **Policy**.

- 1.1.3. If the **Nominee** is a minor at the time payment becomes due under the **Policy**, then **We** shall make payment to the **Appointee** named in the **Schedule**.
- 1.1.4. **You** may assign this **Policy** by giving **Us** written notice. An assignment will be effective against **Us** only once **We** have received written notice of the assignment and a copy of the **Policy** document and **We** have made an endorsement to the **Schedule**.
- 1.1.5. In registering an assignment or nomination, **We** do not accept any responsibility or express any opinion as to its validity or legality.

**6. Termination of Policy**

The **Policy** will be terminated on the occurrence of the earliest of the following:

- a) The date of confirmation by **Us** of the termination of the **Policy** under Section 3.3; or
- b) **Date of Maturity**; or
- c) The Date of receipt of the intimation of death of the **Insured**; or
- d) the Date of surrender of the **Policy**; or
- e) If the **Regular Fund Value** becomes equal to 100% of the **Annualized Premium**, if the **Policy** has completed at least 5 **Policy Years**.

**7. General Provisions**

7.1. **Free Look Period:** You may cancel the **Policy** by giving **Us** a signed written notice within 15 days of receiving the **Policy** stating the reasons for **Your** objection and **We** will pay an amount equal to non-allocated premiums plus charges levied through cancellation of **Units** plus the **Total Regular Premium Fund Value** at the date of cancellation subject to deduction of stamp duty and proportionate risk premium for the period of cover.

7.2. **Taxation:** Any tax benefits under the **Policy** shall be in accordance with the prevailing laws relating to taxation in India and any amendments thereto from time to time. We reserve the right to deduct, charge or recover taxes or applicable duties (whether now applicable or which may be levied in the future) in accordance with applicable law from any payments received or made under or in relation to the **Policy**.

7.3. **Suicide:** If the **Insured** commits suicide whilst sane or insane within 1 year from the **Date of Issue** or the **Date of Commencement** or the date of the last reinstatement, whichever is later, **Our** liability to make any payment under this **Policy** shall be limited to the **Total Regular Premium Fund Value** as on the **Relevant Date** as on date of death. Any charge recovered subsequent to the date of death shall be paid-back to **Your** nominee or beneficiary along with the **Death benefit**.

7.4. **Currency & place of payment:** All amounts payable either to or by **Us** under the **Policy** will be paid in the currency shown in Section 1 of the **Schedule**. Such amounts will be paid by a negotiable bank draft or cheque drawn on a bank in the country in which the currency of this **Policy** is denominated.

7.5. **Disclosure:** This **Policy** has been issued based on **Your** representation that **You** have made full and accurate disclosures of all material facts and circumstances and that **You** have not misrepresented or suppressed any material facts or circumstances. If it comes to **Our** knowledge that **You** have misrepresented or suppressed any material facts and circumstances **We** shall reserve the right to take such action, as **We** deem appropriate including the cancellation of the **Policy** and forfeiture of the **Regular Premium** received. If **You** or anyone acting for **You** or at **Your** direction or with **Your** knowledge makes or advances

Formatted: Font: Not Bold

**IN THIS POLICY, THE INVESTMENT RISK IN THE INVESTMENT PORTFOLIO IS BORNE BY THE POLICYHOLDER**

any claim knowing it to be false, fraudulent or dishonest in any respect, then this **Policy** and any **Rider** will be void and any payments due to **You** or made by **You** will be forfeited.

**7.6. Proof of Age:** Subject to Section 45 of the Insurance Act 1938, if the actual age of the **Insured** differs from the **Age** stated in the **Application** then:

- 7.6.1. If the **Insured's** actual age is higher than **Age** stated in the **Application**, then the accumulated difference between the **Mortality Charges** applied and applicable to the actual age will be paid to **Us** from the **Date of Commencement** with interest at such rate and in such manner as **We** charge for the late payment of **Regular Premium**. The difference so paid will not be used to buy **Units**. If such difference and interest is not paid within 30 days of it being requested, **We** are hereby authorized to recover the same by the cancellation of **Units**.
- 7.6.2. If the **Insured's** actual age is lower than **Age** stated in the **Application**, the **Mortality Charges** shall be altered corresponding to the actual age from the **Date of Commencement** and **We** may, at **Our** discretion, refund without interest the accumulated difference between the corrected **Mortality Charges** and the original **Mortality Charges**.
- 7.6.3. If the **Insured's** actual age is such that it would have made him ineligible for this **Policy**, then **We** may at **Our** option cancel the **Policy** and refund the ~~Total Regular Premium~~ **Fund Value** after deduction of discontinuance charges specified in the **Schedule**.

**7.7. Claims Procedure**

7.7.1. It is a condition precedent to **Our** liability under this **Policy** that **We** have received all of the following information and documentation and any other information or documentation **We** request, including but not limited to:

- The original **Policy** document.
- **Our** claim forms duly completed.
- The official death certificate issued by a competent governmental authority.
- First Information Report, police inquest report and a post-mortem report if death is due to any unnatural cause.
- Proof of title to the **Policy** where applicable
- **Nominee/legal heir** identification and address proof.

7.7.2. **We** will not be obliged to make any payment of the **Maturity Benefit** unless and until **We** have received all of the information and documentation **We** request, including but not limited to

- The **Policy** document
- The discharge voucher as prescribed by **Us**

In the event of there being a delay in intimation of a claim to **Us**, due to reasons beyond **Your/Claimant's** control, **We** may condone such delay on merits."

**7.8. Loss of the Policy document:** If the **Policy** is lost or destroyed, **You** may make a written request for a duplicate **Policy** which **We** will issue duly endorsed to show that it is in place of the original document, provided that **We** receive the fee **We** prescribe for issuing the duplicate **Policy**. Upon the issue of a duplicate **Policy**, the original will cease to have any legal force or effect. **You** agree that **You** will indemnify and hold **Us** free and harmless from and against any claims or demands which may arise under or in relation to the original policy document.

**7.9. Policyholder's Rights:** To exercise **Your** rights or options, under this **Policy**, **You** should follow the procedures stated in this **Policy**. If **You** want to request a change in payment mode, change **Your Nominee**, change an address or exercise any other

**IN THIS POLICY, THE INVESTMENT RISK IN THE INVESTMENT PORTFOLIO IS BORNE BY THE POLICYHOLDER**

options under the **Policy**. **You** shall do so only using the forms prescribed for each purpose which are available with **Your** Financial Advisor or from **Our** local office.

**7.10.Travel, Residence and Occupation:** This **Policy** does not impose any restrictions as to travel, residence or occupation, except as otherwise provided in any special provisions to this **Policy** or notified by local governments for travel advisory risks.

**7.11.Governing Law &Jurisdiction:** The terms and conditions of the **Policy** shall be governed by and be interpreted in accordance with Indian law and all disputes or differences arising under or in relation to the **Policy** shall be subject to the sole and exclusive jurisdiction of the courts situated in Bangalore.

**7.12.Address for Communication:** All notices and communications in respect of this **Policy** shall be addressed to **Us** at the following address:

**PNB MetLife India Insurance Company Limited**  
**Registered Office, 'Brigade Seshmahal'**  
**5, Vani Vilas Road,**  
**Basavanagudi,**  
**Bangalore – 560 004.**

**7.13.Grievance Redressal Mechanism**

In case **You** have any complaint /grievance, **You** may approach any of our following touch points:



Call **1800-425-69-69** (Toll free) or **080-26502244** or Fax 080 41506969



Email us at [India\\_GrievanceCell@pnbmetlife.co.in](mailto:India_GrievanceCell@pnbmetlife.co.in)



write to "**Customer Service Department**", PNB MetLife India Insurance Co Ltd, Brigade Seshmahal,5, Vani Vilas Road, Basavangudi, Bangalore-560004, India



Visit our website [www.pnbmetlife.co.in](http://www.pnbmetlife.co.in)



Visit our nearest PNB MetLife branch across the country

In case **You** are not satisfied with the resolution provided by the above touch points,

- **You** can write to **Our Grievance Redressal Officer** at [GRO@pnbmetlife.co.in](mailto:GRO@pnbmetlife.co.in) or send a letter to the Registered Office " PNB MetLife India Insurance Co Ltd, Brigade Seshmahal,5, Vani Vilas Road, Basavangudi, Bangalore-560004, India"

Please address **Your** queries or complaints to the Customer Services Department, and **Your** grievances to the Grievance Redressal Officer, who are authorized to review **Your** queries or complaints or grievances and address the same. Please note that only an officer duly authorized by **Us** has the authority to resolve **Your** complaints and grievances. **We** shall in no way be responsible, or liable, or bound by, any replies or communications or undertakings, given by or received from, any financial advisor or any employee who was involved in selling **You** this **Policy**.

**7.14.**In case **You** are not satisfied with the decision of the above office, or have not received any response within 10 days, **You** may contact the following official of the Insurance Regulatory and Development Authority for resolution:

**Grievance cell (Complaint against Life insurer)**  
**Insurance Regulatory and Development Authority**

IN THIS POLICY, THE INVESTMENT RISK IN THE INVESTMENT PORTFOLIO IS BORNE BY THE POLICYHOLDER

Parishrama Bhawanam, 5-9-58/B, Basheerbagh, Hyderabad – 500 004.

Toll Free: 155255 E-mail: [lifecomplaints@irda.gov.in](mailto:lifecomplaints@irda.gov.in)

7.15. In case **You** are not satisfied with the decision/resolution of the Company, **You** may approach the Insurance Ombudsman at the address enclosed as Annexure A, if **Your** grievance pertains to:

- Insurance claim that has been rejected or dispute of a claim on legal construction of the **Policy**
- Delay in settlement of claim
- Dispute with regard to premium
- Non-receipt of **Your Policy** document

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

7.16. As per provision 13(3) of the Redress of Public Grievances Rules 1998, the complaint to the Ombudsman can be made:

- Only if the grievance has been rejected by the Grievance Redress Machinery of the Insurer
- Within a period of one year from the date of rejection by the insurer
- If it is not simultaneously under any litigation.

#### 7.17. Section 45 of the Insurance Act 1938

No policy of life insurance effected before the commencement of this Act shall after the expiry of two years from the date of commencement of this Act and no policy of life insurance effected after the coming into force of this Act shall after the expiry of two years from the date on which it was effected, be called in question by an insurer on the ground that a statement made in the proposal for insurance or in any report of a medical officer, or referee, or friend of the insured, or in any other document leading to the issue of the policy, was inaccurate or false, unless the insurer shows that the such statement was on material matter or suppressed facts which it was material to disclose and that it was fraudulently made by the policy owner and that the owner knew at the time of making it that the statement was false or that it suppressed facts which it was material to disclose Provided that 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.

#### 7.18. Compliance with Applicable Law

##### 7.18.1 Reporting of information:

Pursuant to any law, in force in India or any other country (including, but not limited to, US Foreign Account Tax Compliance Act ("FATCA")), applicable, whether directly or indirectly, to Us or Our affiliates/ group entities (collectively, "Laws"), or any agreement that We and/ or Our affiliates/ group entities may enter into with any governmental agency/ regulatory body/ organization in furtherance of any such Laws (collectively, "Agreement"); the Laws and the Agreements are collectively referred to as "Laws & Agreements"), We may be required to obtain certain information pertaining to You, and furnish, report, transfer or disclose the information obtained from You, or any other information that We and/ or Our affiliates/ group entities may possess pertaining to You including, but not limited to, information related to the policies held by You to such person, as may be required pursuant to the Laws & Agreement. Towards this end, You hereby agree that You shall furnish such further information pertaining to You, Your affairs and/ the policies owned or held by You with Us, as We, in Our sole discretion, may require or deem necessary to comply with any requirement imposed by the Laws & Agreements. Further, You hereby grant Your consent to Us, and further authorize Us, to furnish report, transfer or disclose all or any of the information (as above) to such person as is required pursuant to the Laws & Agreements, without there being the need of any further confirmation from or prior notice to You. It is hereby clarified that the consent granted herein shall, for all purposes, be deemed to be Your complete, final, valid and unequivocal consent. Without prejudice to the above consent granted by You, We shall also have the right to require You to provide Us with Your further written consent/ confirmation for furnishing, reporting, transferring or disclosing, in accordance with the Laws &

Formatted: Outline numbered + Level: 2 + Numbering Style: 1, 2, 3, ... + Start at: 1 + Alignment: Left + Aligned at: 0 cm + Indent at: 0.63 cm, Tab stops: 0.79 cm, Left + Not at 1.25 cm

Formatted: Indent: Left: 0 cm, Hanging: 0.79 cm, Outline numbered + Level: 3 + Numbering Style: 1, 2, 3, ... + Start at: 1 + Alignment: Left + Aligned at: 1.29 cm + Indent at: 2.56 cm

Formatted: Indent: First line: 0 cm



IN THIS POLICY, THE INVESTMENT RISK IN THE INVESTMENT PORTFOLIO IS BORNE BY THE POLICYHOLDER

Agreement, any of the information (as above), and upon receipt of a request from Us, You shall be obligated to forthwith provide Us with such consent/ confirmation, in writing, in such form as may be required by Us.

#### **7.18.2. Withholding**

We may be required to deduct or withhold any monies paid by You or owed by Us to You, and transfer, handover or remit such monies to such person as is required pursuant to the Laws & Agreements, including, but not limited to, FATCA. You hereby grant Your consent to Us, and further authorize Us, to deduct or withhold monies required to be deducted or withheld, and transfer, handover or remit such monies to such person as is required pursuant to the Laws & Agreements, without there being the need of any further confirmation from or prior notice to You and that the consent granted herein shall, for all purposes, be deemed Your complete, final, valid and unequivocal consent.

#### **7.1.8.3 Termination**

Notwithstanding anything to the contrary contained in this Policy, if You fail or refuse to forthwith provide or furnish to Us all the information or written consent/confirmation that is sought by Us, or if any law, in force in India or any other country, applicable to You, or to Us and/ or Our affiliates/ group entities, prohibits Us, from obtaining from You any information, as above, or, reporting, transferring or disclosing such information, as above (despite You having furnished your written consent, as specified above), or, deducting or withholding any monies paid by You or owed to You, as specified above, then, We reserve Our right, within Our sole discretion, to forthwith terminate the Policy.

Formatted: Indent: Left: 0 cm, Hanging: 0.79 cm, Outline numbered + Level: 3 + Numbering Style: 1, 2, 3, ... + Start at: 2 + Alignment: Left + Aligned at: 1.29 cm + Indent at: 2.56 cm

Formatted: Indent: First line: 0 cm

Formatted: Indent: Left: 0 cm, Hanging: 0.79 cm, Outline numbered + Level: 4 + Numbering Style: 1, 2, 3, ... + Start at: 3 + Alignment: Left + Aligned at: 1.3 cm + Indent at: 2.57 cm

Formatted: Indent: First line: 0 cm