1. PART B

Tata AIA Life Insurance Good Kid is a Limited Premium Paying Non-Linked, Participating Anticipated Endowment Plan with inbuilt Waiver of Premium benefit in case of death of the parent. The Life Assured in this plan shall be the parent.

1.1. Basic definitions

"Annualised Premium" shall be the premium paid in a year with respect to the basic sum assured chosen by the policy holder, excluding the underwriting extra premiums and loading for modal premiums, if any

"Basic Sum Assured" is the guaranteed amount of the benefit that is payable on the death of the Life Assured under this Policy. Basic Sum Assured is shown in the Policy Schedule.

"Claimant" means the Policyholder or the Life Assured or the Nominee or the assignee or the legal heir of the Policyholder as the case may be.

"Date of Commencement of Policy" is the date when coverage under this Policy commences and is mentioned on the Policy Schedule.

"Life Assured" / "Life Insured" / "Insured" means the person whose life is insured under the Policy as shown on the Policy Schedule.

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

IRDA of India" means Insurance Regulatory and Development Authority of India.

"Maturity" of this Policy is shown on the Policy Schedule on which all benefits under the Policy shall cease to exist.

"Guaranteed Sum Assured on Maturity" refers to the absolute amount of benefit which is guaranteed to become payable on maturity of the policy, i.e. 55% of the Basic Sum Assured.

"Outstanding amount" means any unpaid policy loans including accrued interest, unpaid premiums, deductibles and any other amounts owed to the Company.

"Policy" means this contract of insurance.

"Policy Anniversary" refers to the same date each year as the Policy Date.

"Policy Date" as shown in the Policy Schedule is the date from which Policy Anniversaries, Policy Years, Policy Months and Premium Due Dates are determined.

- "Premium Payment Term" is the number of years that premium is payable for and is mentioned on the Policy Schedule.
- "Policy Term" is the maximum period in years for which the policy can remain in force and is mentioned on the Policy Schedule.
- "Revival Date" is the approval date of revival of the Policy.
- "Total Premiums Paid" means amount equal to the total premiums paid during the premium paying term of the policy. Such amount should be excluding underwriting extra premiums and loading for modal premiums, if any
- "We", "Us", "Our" or "Company" refers to Tata AIA Life Insurance Company Limited.
- "You" or "Your" means the Policyholder of this Policy as shown in the Policy Schedule.

2. PART C

2.1. Key Benefits

2.1.1. Maturity Benefit

Provided the policy is in force and all due premiums have been paid, on maturity (at the end of policy term), Guaranteed Sum Assured on Maturity plus vested Compound Reversionary Bonus plus Terminal Bonus (if any) shall be payable, after deduction of outstanding amount which are unpaid as on date of maturity.

Where,

Guaranteed Sum Assured on Maturity refers to the absolute amount of benefit which is guaranteed to become payable on maturity of the policy, i.e. 55% of the Basic Sum Assured.

2.1.2. Money Back Benefits

Provided the policy is in force, Money Back benefits shall be payable at end of the year, as a percentage of the Basic Sum Assured irrespective of the survival of the Life Assured.

The schedule of payments has been provided in the table below.

Benefits payable at end of the year	Money Back Benefits (as a Percentage of Basic Sum Assured)
(Policy Term minus 3) year	15%
(Policy Term minus 2) year	15%
(Policy Term minus 1) year	15%

2.1.3. Milestone Additions

Milestone Additions equal to 5% of basic Sum Assured per annum will accrue in each of the first 5 policy years starting from end of first policy year. Provided the policy is in force, the accrued Milestone Additions will be paid at end of the (Policy Term minus 4) years prior to maturity irrespective of the survival of the Insured. Total Accrued Milestone Additions payable will be 25% of Basic Sum Assured and this shall be payable 4 years prior to maturity irrespective of survival of the Insured.

2.1.4. Bonus

i. Compound Reversionary Bonus

This is a participating Policy and its share of divisible surplus will be determined annually by the Company and vested into the Policy as a Reversionary Bonus on each Policy Anniversary from the 1st Policy Anniversary, provided the Policy is in force and all due premiums have been paid. Compound Reversionary Bonus shall be declared as a percentage of the Basic Sum Assured and vested Compound Reversionary Bonus. Such vested Bonus once declared is guaranteed and shall be payable along with maturity or surrender, as the case may be.

ii. Terminal Bonus

Terminal Bonus may be declared as a percentage of Basic Sum Assured and is payable on surrender, provided at least 7 full annual premiums have been paid or on maturity.

Compound Reversionary Bonus and Terminal Bonus are not guaranteed.

2.1.5. Death Benefit

Upon death of the Life Assured during the term of the Policy, the Sum Assured on Death shall be payable. This Total amount will be subject to a minimum of 105% of Total Premiums Paid, as on date of death.

'Sum Assured on death' shall be highest of the following:

- i. 11 times Annualised Premium
- ii. Absolute amount assured to be paid on death*
- iii. Guaranteed Sum Assured on Maturity

*The absolute amount assured to be paid on death is Basic Sum Assured.

In addition, the inbuilt Waiver of Premium benefit shall trigger and all future outstanding premiums will be waived. The Policy shall remain in force and will continue to participate in the profits even after the death of the Insured. The payment of the accrued Milestone Additions and money back benefits shall also be made as scheduled.

If death occurs in the last four policy years, i.e. after the accrued Milestone Additions have been paid and/or the money back benefit has commenced, the death benefit shall not be reduced by the amount of benefit already paid.

"Guaranteed Sum Assured on Maturity" refers to the absolute amount of benefit which is guaranteed to become payable on maturity of the policy, i.e. 55% of the Basic Sum Assured.

In the event the policyholder has opted for Accidental Death and Dismemberment (Long Scale) (ADDL) Rider, an additional amount equivalent to Basic Sum Assured shall be payable, if the death of the Life Assured occurs due to an Accident.

2.2. Premium details

2.2.1. Plan change / Conversion option

Plan change/ Conversion is not allowed under this Policy

2.2.2. Payment

a. All premiums are payable on or before their due dates to us either at our issuing office or to our authorized Officer or Cashier.

- b. Collection of advance premium shall be allowed, if the premium is collected within the same financial year. However, where the premium due in a financial year is being paid in advance in immediately preceding financial year, such premium shall be accepted until a maximum period of three months in advance from the due date of the premium.
- c. The Premium so collected in advance shall only be adjusted on the due date of the premium.

2.2.3. Change of frequency of premium payment

You may change the frequency of premium payments by written request. Subject to our minimum premium requirements, premiums may be paid on annual, half-yearly or monthly mode at the premium rates applicable on the Issue Date.

2.2.4. Default

After payment of the first premium, failure to pay a subsequent premium on or before its due date will constitute a default in premium payment.

2.2.5. Grace period

A Grace Period of fifteen (15) days for monthly mode and thirty (30) days for all other modes, from the due date will be allowed for payment of each subsequent premium. The Policy will remain in force during this period. If any premium remains unpaid at the end of its Grace Period, the Policy shall lapse and have no further value except as may be provided under the Non-Forfeiture Provisions. If any death claim occurs during the grace period, the death claim shall be paid after deducting any due premium (without interest) of the policy, which are not paid as on date of death, will be deducted from the death claim payout.

2.2.6. Deduction of premium at claim

If a claim is payable under this Policy, any balance of the premiums due for the full policy year in which death occurs shall be deducted from the proceeds payable under the Policy.

2.3. Other benefits and features

Nominee(s)/ Assignee(s)/ Legal Heir(s)/legal representative as declared by a Court of competent jurisdiction will have no right to surrender the policy or apply for a policy loan or assign the policy against any loan. They will be entitled only to receive the benefits of the policy as per the schedule subject to term and condition of the policy contract.

2.3.1. Payment of benefits

The benefit under the Policy shall be payable to the Claimant who will be either the Policyholder, Life Assured, Nominee(s), Assignee(s), Legal Heir(s) or a legal representative as declared by a Court of competent jurisdiction. In case the nominee is minor the benefits will be paid to the appointee.

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

2.3.2. Modal Loading

The limited Premium can be paid either annually, half-yearly or monthly mode

Modal loading on premiums is as mentioned below:

Annual Premium Rate : Multiply Annual Premium Rate by 1 (i.e. No loading).

Half-yearly Premium Rate : Multiply Annual Premium Rate by 0.51 Monthly Premium Rate : Multiply Annual Premium Rate by 0.0883

3. PART D

3.1. Free look period

If you are not satisfied with the terms & conditions/features of the policy, you have the right to cancel the policy by providing a written notice to the Company and receive the refund of all premiums paid without interest after deducting proportionate risk premium for the period of cover, stamp duty and medical examination cost including Service Tax and Swachh Bharat Cess, which have been incurred for issuing the policy. Such notice must be signed by you and received directly by the Company within 15 days from the date of receipt of the policy document by you or person authorized by you. The said period of 15 days shall stand extended to 30 days, if the policy is sourced through distance marketing mode, which includes every activity of solicitation (lead generation) and sale of insurance products through voice mail, SMS, electronic mode, physical mode (like postal mail) or any other means of communication other than in person.

Distance Marketing will include sales through Direct Sales Force, Tele Calling and Tele Assisted Sales.

3.2. Revival

If a premium is in default beyond the Grace Period and subject to the Policy not having been surrendered, it may be revived, in accordance with prevailing underwriting guidelines duly approved by the Board within two years after the due date of the first unpaid premium and before maturity subject to: (i) Your written application for - revival; (ii) production of Life Assured's current health certificate and other evidence of insurability satisfactory to Us; (iii) payment of all overdue premiums with interest.

Any evidence of insurability requested at the time of revival will be based on the prevailing underwriting guidelines duly approved by the Board. The revival will be based on the Board approved underwriting policy.

Any revival shall only cover loss or Life Assured event which occurs after the Revival Date.

The applicable interest rate for revival is determined using the SBI deposit rate (for tenure '1 year to less than 2 years'), plus 2%.

3.3. Loan

Policyholder may apply for a policy loan for such an amount up to 65% of Surrender Value, provided that the policy acquires Surrender Value. The minimum loan amount under the policy is `2500. The Policy must be assigned to us. This assignment can be both, conditional or absolute & will be in accordance with Section 38 of the Insurance Act, 1938. We reserve the right to determine the loan amount to be granted.

The surrender value payable is higher of the Guaranteed Surrender Value or Special Surrender Value and shall be available after full premium for the first policy year has been paid as per Clause 4.5 under Part D.

3.4. Loan interest

- a. Daily interest shall accrue on policy loan at a rate which We shall determine.
- b. Interest shall be payable on each Policy Anniversary after the loan date and until the loan is repaid.
- c. Any unpaid interest shall be added to the principal loan and bear interest at the same rate. At anytime while this Policy is in force, you may repay the principal and accrued interest, or any part of the loan.
- d. When the loan with accrued interest exceeds the Surrender Value, the policy will become void. This is not applicable during the Premium Paying Term as mentioned on the Policy Schedule and Fully Paid up status. However, anytime during the term of the Policy, the policy will become void, if the Policy is in lapsed or Reduced Paid-up status.

Interest rate applicable to policy loan will be equal to the prevailing SBI (State Bank of India) domestic term deposit interest rate for tenure '1 year to less than 2 years + 2% and will be reviewed annually.

3.5. Non forfeiture provisions

When the full premium for the first policy year is not paid within the grace period, the policy shall lapse from the due date of unpaid premium and no benefits will be payable.

However, if full premium has been paid for the first policy year and then failed to pay the subsequent premium within the Grace Period, the Policy will be converted into a Reduced Paid-up Policy by default and without any notice to the policyholder.

If the base Plan is revived, the optional rider benefits can be revived by paying the arrears of premiums under the riders with interest.

3.5.1. Surrender Benefit

The Policy can be surrendered any time during the term of the policy, provided at least the first full year's premium has been paid. The surrender value payable is higher of Guaranteed Surrender Value or Special Surrender Value.

On the death of the Insured whilst the policy is in force and the inbuilt Waiver of Premium is triggered then the policy cannot be surrendered. Policy will continue to remain inforce with all benefits.

The minimum guaranteed surrender value shall be the sum of Guaranteed Surrender Value and the surrender value of any subsisting bonus, as applicable, already vested to the policy. It is defined as a percentage of the "Total Premiums Paid". The percentage payable, i.e. the Guaranteed Surrender Value Factor, varies according to the policy term and the policy year of surrender.

Where:

The Guaranteed Surrender Value will be calculated as follows:

Guaranteed Surrender Value =

GSV = [(Total premium paid * GSV factor for premium) + (Vested Compound Reversionary Bonus, if any + Accrued Milestone Additions^) * GSV factor for CRB & Accrued Milestone Additions] less Money back benefits already paid.

^ Not to be considered if policy is surrendered in the last four policy years prior to maturity.

Guaranteed Surrender Value factor will be as applicable at the time of Surrender and are as per table annexed as Annexure - 1 with this Contract.

The Guaranteed Surrender Value Factors vary according to the policy term and policy year of surrender.

Special Surrender Value (SSV)

The Special Surrender Value will be calculated for in-force policies as follows:

Special Surrender Value = Special Surrender Value Factor x [Basic Sum Assured x (No of premiums paid)/ (No of premiums payable, during the entire policy term) + Accrued Milestone Additions^ + Vested Compound Reversionary Bonuses, if any + Terminal Bonus, if any less Money back benefits already paid].

^ Not to be considered if policy is surrendered in the last four policy years prior to maturity.

The Special Surrender Value will be calculated for Reduced Paid-up policies as follows:

Special Surrender Value = Special Surrender Value Factor x [Reduced Paid-up Sum Assured+ Accrued Milestone Additions^ +Vested Compound Reversionary Bonuses, if any + Terminal Bonus, if any less Money back benefits already paid].

^ Not to be considered if policy is surrendered in the last four policy years prior to maturity.

Terminal Bonus may be declared as a percentage of Basic Sum Assured for in-force policies and as a percentage of Reduced Paid-up Sum assured for Reduced Paid-up policies and is payable on surrender, provided at least 7 full years' premiums have been paid.

Where, Reduced Paid-up Sum Assured= Basic Sum Assured x (t/n)

Where,

t= Number of premiums paid

n= Number of premiums payable under the plan

Special Surrender value factor will be as applicable at the time of Surrender and are as per table annexed as **Annexure** -1 with this Contract.

The Special Surrender Value Factors vary according to the policy term and policy year of surrender.

On the payment of the Surrender Value the policy will terminate and no further benefits shall be payable.

GSV factor for Total Premiums Paid and Vested CRB & Milestone Additions are guaranteed throughout the policy term.

Company has the right to review the basis for calculating SSV factors from time to time based on the experience and will be subject to prior approval of IRDA of India.

3.5.2. Reduced Paid-Up

If the full premium for the first policy year is not paid within the grace period, the policy will lapse from the due date of first unpaid premium and no benefits will be payable.

If the full premium for the first policy year has been paid, and subsequent premiums remain unpaid and the Policy has not been surrendered, the Policy will be converted into a Reduced Paid-up Policy by default. However, from the due date of First Unpaid Premium, but not later than 2 years from the due date of First Unpaid Premium; the policy can be revived by payment of full arrears of premiums together with interest.

Once the policy becomes Reduced Paid-up, the policy shall not be entitled to any further Compound Reversionary Bonus and Milestone Additions.

The Inbuilt Waiver of Premium Benefit and the optional Rider Benefit will discontinue immediately once the policy acquires a Reduced Paid-up status. However, on the death of the life assured after the policy has become Reduced paid-up, the policy shall not terminate but continue in the Reduced Paid-up status and will be eligible to receive the Reduced Paid-up benefits as detailed below.

Terminal Bonus may be declared as a percentage of the Reduced Paid-up Sum Assured and is payable on surrender, provided at least 7 full years' premiums have been paid or on maturity.

In case of Reduced paid up policies, the benefit shall be payable as under:

For the purpose of the benefits below, 'Reduced Paid-up Sum Assured shall be defined as follows:

Where, Reduced Paid-up Sum Assured= Basic Sum Assured x (t/n)

Where,

t= Number of premiums paid

n= Number of premiums payable for the entire term of the policy.

i. Death Benefit: On death of the Life Assured during the policy term,

On death of the life insured during the policy term, the Sum Assured on death x (No of premiums paid)/ (No of premiums payable, during the entire policy term) will be payable.

If death occurs in the last four policy years, i.e. after the accrued Milestone Additions have been paid and/or the money back benefit has commenced, the death benefit shall not be reduced by the amount of benefit already paid.

This total amount will be subject to a minimum of 105% of Total Premiums Paid, as on the date of death.

ii. Milestone Additions:

Once the policy becomes Reduced Paid-up, no further Milestone Additions shall accrue. The accrued Milestone Additions will be paid end of (Policy Term *minus* 4) years to maturity, irrespective of the survival of the Insured.

iii. Money Back Benefits:

Once the policy becomes Reduced Paid-up, the Money Back Benefits shall be payable at the end of the year, as a percentage of the Reduced Paid-up Sum Assured as per the schedule below.

Benefit payable at end of the year	Money Back Benefits (as a Percentage of Reduced Paid-up Sum Assured)
(Policy Term minus 3) years	15% of RPU SA
(Policy Term minus 2) years	15% of RPU SA
(Policy Term minus 1) years	15% of RPU SA

iv. Maturity Benefit:

(No of premiums paid)/ (No of premiums payable) x (Guaranteed Sum Assured on Maturity) + vested Compound Reversionary Bonus plus Terminal Bonus, if any shall be payable. The Terminal Bonus shall be computed on the Reduced Paid-up Sum Assured.

Note-

If the base Plan is revived, the optional rider benefits can be revived by paying the arrears of premiums under the riders with interest.

Provided the Policy has not been Surrendered, the Policy shall continue to be in Reduced Paid-up status unless revived within two years from the due date of first unpaid premium, by paying all due premiums together with interest as mentioned in Clause 4.2 ("Revival") of this Policy.

4. PART E

5. PART F

5.1. The Policy Contract

This Policy Contract is issued on the basis of the details provided by You in the Proposal Form and the Declaration signed by You, on receipt of the required premium amount and any attached endorsement given at the time of issuing this Policy. The Policy, proposal for it, the Policy Schedule and any attached endorsements constitute the entire contract. The terms and conditions of this Policy cannot be changed or waived except by endorsement duly signed by Our authorized officer.

Your Policy consists of the basic insurance plan and any endorsements which may be attached to it

5.2. Fraud, Misrepresentation and Forfeiture

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

The simplified version of the provisions of Section 45 is enclosed in annexure - (4) for reference.

5.3. Suicide

In case of death due to suicide by the Life Assured, whether sane or insane, within 12 months from the date of commencement which is same as date of inception of the policy, the nominee shall be entitled to "Total Premiums Paid", provided the Policy is in force. In case of death due to suicide by the Life Assured, whether sane or insane, within 12 months from the date of revival, the nominee shall be entitled to higher of "Total Premiums Paid" till date of death or the acquired surrender value as on the date of death, provided the Policy is in force.

5.4. Misstatement of age and gender

Subject to Section 45 of the Insurance Act, 1938 as amended from time to time.

This Policy is issued at the age and gender shown on the Policy Schedule Page which is the Life Assured's declared age at last birthday and declared gender in the proposal. If the age and/or gender is misstated and higher premium should have been charged, the benefit payable under this Policy shall be after deduction of such difference of premium along with interest thereon. In such cases, the policy shall be subject to re-underwriting and the Sum Assured shall be subject to Your eligibility as per Our Underwriting norms and the premium to be deducted shall be calculated proportionately on such Sum Assured payable. If the Life Assured's age/gender is misstated and lower premium should have been charged, the Company will refund any excess premiums paid without interest. If at the correct age/gender it is found that the Life Assured was not eligible to be covered under this Policy pursuant to our Underwriting rules, the Policy shall be void-ab-initio and the Company will refund the Total Premiums paid without interest after deducting all applicable charges like medical, Stamp duty, Proportionate Risk premium along with service tax, etc., incurred by the Company under the Policy.

5.5. Nomination

Nomination allowed as per provisions of Section 39 of the Insurance Act 1938 as amended from time to time. In this plan, nominee shall compulsorily be the child. In case of the death of the nominee (child) post issuance of the policy, Life Assured shall have an option to nominate another child or in case of no surviving child, any other legal heir.

The simplified version of the provisions of Section 39 is enclosed in annexure – (3) for reference.

5.6. Assignment

Assignment allowed as per - Section 38 of the Insurance Act 1938 as amended from time to time. The simplified version of the provisions of Section 38 is enclosed in annexure - (2) for reference.

5.7. Currency and place of payment

All amounts payable either to or by Us will be paid in the Indian currency. Such amounts will be paid by a negotiable bank draft or cheque drawn on a bank or NEFT (National Electronic Funds Transfer) or electronic clearing systems. All amounts due from Us will be payable from Our office.

5.8. Freedom from restrictions

Unless otherwise specified, this Policy is free from any restrictions upon the Life Assured as to travel, residence or occupation.

5.9. Loss of policy document

If the Policy Document is lost or destroyed, then at the request of the policyholder, the Company, will issue a duplicate Policy Document duly endorsed to show that it is issued following the loss or destruction of the original Policy Document. Duplicate policy will be issued after furnishing of Indemnity Bond and payment of charges for preparing duplicate policy and stamp fee by policy holder.

Upon the issue of the duplicate policy Document, the original Policy Document immediately and automatically ceases to have any validity. The Company will charge a fee of Rs. 250 along with the Service tax, for the issuance of a duplicate Policy Document. The Policyholder has to also submit an Indemnity Bond executed on appropriate Stamp paper along with a Policy Lost Declaration. These charges are subject to revision by the Company from time to time.

5.10. Taxes

Service tax and Swachh Bharat Cess are applicable as per governing laws and the same shall be borne by You. We may recover from You, any tax, levies, duties etc., (including service tax, Swachh Bharat Cess), as imposed by the government from time to time.

5.11. Change in Basic Sum Assured

Increase / Decrease in Basic Sum Assured is not allowed in this Policy.

5.12. Claims

Notice of Claim – All cases of death must be notified to us in writing within 90 days of occurrence of death. However, we may condone delay on merit for delayed claims where the reason for delay is proved to be for reasons beyond the control of the claimant.

Please note that all death claims will be payable to the nominee/legal heir of the Insured policy holder.

Filing Proof of Claim – Affirmative proof of loss and any appropriate forms as required by Us must be completed and furnished to Us, at the claimant's expenses, within 90 days from the date the Insured event happens, unless specified otherwise. A list of primary claim documents listing the normally required documents is attached to the Policy. Submission of the listed documents, forms or other proof, however, shall not be construed as an admission of liabilities by the Company.

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

Proof of Continuing Loss – In the case of disability or other losses as we deem appropriate, We will require, at reasonable intervals, proof of continuing disability or loss. If such proof is not submitted as required or such disability or loss ceases, claims for such disability or loss will not be considered.

5.13. Claims requirements

5.13.1. Death claims requirements

Type of Claim	Requirement
Death (all causes of death other than the Accidental Death)	 a) Claim Forms Application Form for Death Claim (Claimant's Statement) along with NEFT form Part II: Physician's Statement - to be filled by last attending physician
	b) Death Certificate issued by a local government body like Municipal Corporation / Village Panchayat
	c) Medical Records (Admission Notes, Discharge/Death Summary, Indoor Case Papers, Test Reports etc) ¹
	d) Original Policy document
	e) Claimant's Photo ID with age proof & relationship with the Life Assured along with Address proof of the claimant and Cancelled cheque with name and account number printed or cancelled cheque with copy of Bank Passbook / Bank Statement
	If no nomination - Proof of legal title to the claim proceeds (e.g. legal succession certificate)

	Additionally following document(s) are required at the time of claim payout, where nominee is the child of Life assured:
	 In case of Natural Child: Birth Certificate, where name of the parent (who is taking policy) is mentioned. In case of Adopted child: Adoption Certificate issued by competent Court / Authority.
If Death due to Accident (to be submitted in addition to the	f) Postmortem report (Autopsy report) & Chemical Viscera report - if performed
above)	g) All Police Papers – Panchnama, Inquest, First Information Report (FIR) and Final Investigation Report
	h) Newspaper cutting / Photographs of the accident - if available

NOTE:

- In case the claim warrants any additional requirement, the Company reserves the right to call for the same.
- Notification of claim & submission of the claim requirements does not mean admission of the claim liability by the Company.

5.13.2. Maturity claims requirements

- Discharge Voucher duly filled
- Original Policy Document (Indemnity required in case the original policy document is not available)
- Photo Identity proof and Address proof
- Copy of bank passbook/cancelled cheque along with duly filled NEFT form of the beneficiary

In case of exceptional circumstances/Force majeure events, the Company will consider making claim payment subject to its own internal investigation and submission of satisfactory proof that the required documents could not be produced during the time of claim by the Claimant.

5.13.3. Claims Intimation Process

Do you know about the claim intimation process?

Please inform the company within 90 days of the occurrence of death.

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

- a. Email Customercare@tataaia.com
- b. Toll free no 1-800-267-9966
- c. Walk into any of the Company branch office
- d. Write directly to us (our HO address)

5.14. Force majeure

If the performance by the Company of any of its obligations herein shall be in any way prevented or hindered in consequence of any act of God or State, Strike, Lock out, Legislation or restriction of any

Government or other authority or any other circumstances beyond the anticipation or control of the Company, the performance of this contract with prior approval of IRDA of India shall be wholly or partially suspended during the continuance of the Force Majeure event and the company will resume the contract terms and conditions when such event cease to exist.

6. PART G

Consumer information

6.1. Policyholder's servicing

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

- Contact your Tata AIA Life agent / distributor
 Call our helpline numbers 1-800-267-9966 (toll free) or at 1-860-266-9966 (local charges apply)
- E-mail at customercare@tataaia.com
- Visit the nearest the Tata AIA Life branch or CAMS Service Center
- Log on to Online Customer Portal by visiting www.tataaia.com

6.2. Grievance Redressal Procedure

1) Resolution of Grievances

Customers can register their grievances through multiple service avenues:

 Call our helpline numbers at 1-800-267-9966 (toll free) 1-860-266-9966 (local call charges apply)
Email us at life.complaints@tataaia.com
Login to online policy account on www.tataaia.com
SMS SERVICE to 58888 to receive a call back from our Customer Service Representative
Visit any of the nearest Tata AIA Life branches or CAMS Customer Service Center
Contact your Tata AIA Life agent or distributor
Call on the IRDA call center toll free number 155255 or email at complaints@irda.gov.in
Log on to IGMS website www.igms.irda.gov.in
Write to us on the following address:

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

- We shall acknowledge a customer's grievance within 3 business days by providing the customer with the name of the Grievance Redressal Executive who is responsible to handle the grievance.
- We shall provide the customer with an equitable resolution within 2 weeks of receipt of the grievance.
- In case customers wishes to contact us during the course of the assessment, they can contact us at any of the above mentioned touch points.
- All Tata AIA Life branches have a Grievance Redressal Officer who can be contacted for any support during the grievance redressal process.

2) Escalation Mechanism

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

- 1st level of Escalation: Sr. Manager- Customer Service
- 2nd level of Escalation: Head Customer Service
- 3rd level of Escalation: Grievance Redressal Officer (GRO)

For escalations, customers can email to **head.customerservice@tataaia.com** or write to – Tata AIA Life Insurance Company Limited, B-Wing, 9th Floor,

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

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

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

IRDAI Grievance Call Centre (IGCC) TOLL FREE NO:155255

Email ID: complaints@irda.gov.in

You can also register your complaint online at http://www.igms.irda.gov.in/ Address for communication for complaints by fax/paper: Consumer Affairs Department Insurance Regulatory and Development Authority of India 9th floor, United India Towers, Basheerbagh Hyderabad – 500 029, Andhra Pradesh Fax No: 91-40 - 6678 9768

3) Insurance Ombudsman:

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

- 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 insurance document

Please refer to our **website www.tataaia.com** for further details in this regard.

The list of Ombudsman address is attached as Annexure B

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

- Only if the grievance has been rejected by the Grievance Redressal 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

Annexure B

Annexure B										
NAMES O	NAMES OF OMBUDSMAN AND ADDRESSES OF OMBUDSMAN CENTRES									
	(As on 01-01-2015)									
Office of the	Office Details	Jurisdiction of Office								
Ombudsman		Union Territory, District								
AHMEDABAD	Office of the Insurance Ombudsman,	Gujarat, Dadra & Nagar Haveli, Daman								
	2nd floor, Ambica House,	and Diu.								
	Near C.U. Shah College,									
	5, Navyug Colony, Ashram Road,									
	Ahmedabad – 380 014.									
	Tel.: 079 - 27546150 / 27546139									
	Fax: 079 - 27546142									
	Email:									
DENCALUDII	bimalokpal.ahmedabad@gbic.co.in	IV a mare de la c								
BENGALURU	Office of the Insurance Ombudsman,	Karnataka.								
	Jeevan Soudha Building, PID No. 57- 27-N-19									
	Ground Floor, 19/19, 24th Main Road,									
	JP Nagar, Ist Phase,									
	Bengaluru – 560 078.									
	Tel.: 080 - 26652048 / 26652049									
	Email:									
	bimalokpal.bengaluru@gbic.co.in									
BHOPAL	Office of the Insurance Ombudsman,	Madhya Pradesh, Chhattisgarh.								
	Janak Vihar Complex, 2nd Floor,									
	6, Malviya Nagar, Opp. Airtel Office,									
	Near New Market,									
	Bhopal – 462 003.									
	Tel.: 0755 - 2769201 / 2769202									
	Fax: 0755 - 2769203									
DITTELLAND	Email: bimalokpal.bhopal@gbic.co.in									
BHUBANESHWAR	Office of the Insurance Ombudsman,	Orissa.								
	62, Forest park, Bhubneshwar – 751 009.									
	Tel.: 0674 - 2596461 /2596455 Fax: 0674 - 2596429									
	Fax. 0074 - 2390429 Email:									
	bimalokpal.bhubaneswar@gbic.co.in									
CHANDIGARH	Office of the Insurance Ombudsman,	Punjab, Haryana, Himachal Pradesh,								
CITATOTOTACI	S.C.O. No. 101, 102 & 103, 2nd Floor,	Jammu & Kashmir, Chandigarh								
	Batra Building, Sector 17 – D,	Januara & Rashini, Chandigani								
	Chandigarh – 160 017.									
	Tel.: 0172 - 2706196 / 2706468									
	Fax: 0172 - 2708274									
	Email:									
	bimalokpal.chandigarh@gbic.co.in									
CHENNAI	Office of the Insurance Ombudsman,	Tamil Nadu, Pondicherry Town and								
	Fatima Akhtar Court, 4th Floor, 453,	Karaikal (which are part of								
	Anna Salai, Teynampet,	Pondicherry).								
	CHENNAI – 600 018.									

	Tel.: 044 - 24333668 / 24335284	
	Fax: 044 - 24333664	
	Email: bimalokpal.chennai@gbic.co.in	
DELHI	Office of the Insurance Ombudsman,	Delhi.
DELHI		Deim.
	2/2 A, Universal Insurance Building,	
	Asaf Ali Road,	
	New Delhi – 110 002.	
	Tel.: 011 - 23239633 / 23237532	
	Fax: 011 - 23230858	
CLIVIALIATI	Email: bimalokpal.delhi@gbic.co.in	A M 1 1 M '
GUWAHATI	Office of the Insurance Ombudsman,	Assam, Meghalaya, Manipur,
	Jeevan Nivesh, 5th Floor,	Mizoram, Arunachal Pradesh and
	Nr. Panbazar over bridge, S.S. Road,	Tripura
	Guwahati – 781001(ASSAM).	
	Tel.: 0361 - 2132204 / 2132205	
	Fax: 0361 - 2732937	
	Email: bimalokpal.guwahati@gbic.co.in	
HYDERABAD	Office of the Insurance Ombudsman,	Andhra Pradesh, Telangana, Yanam
	6-2-46, 1st floor, "Moin Court",	and part of Territory of Pondicherry.
	Lane Opp. Saleem Function Palace,	
	A. C. Guards, Lakdi-Ka-Pool,	
	Hyderabad - 500 004.	
	Tel.: 040 - 65504123 / 23312122	
	Fax: 040 - 23376599	
	Email:	
	bimalokpal.hyderabad@gbic.co.in	
JAIPUR	Office of the Insurance Ombudsman,	Rajasthan.
	Jeevan Nidhi – II Bldg., Gr. Floor,	
	Bhawani Singh Marg,	
	Jaipur - 302 005.	
	Tel.: 0141 - 2740363	
	Email: Bimalokpal.jaipur@gbic.co.in	
ERNAKULAM	Office of the Insurance Ombudsman,	Kerala, Lakshadweep, Mahe-a part of
	2nd Floor, Pulinat Bldg.,	Pondicherry
	Opp. Cochin Shipyard, M. G. Road,	
	Ernakulam - 682 015.	
	Tel.: 0484 - 2358759 / 2359338	
	Fax: 0484 - 2359336	
	Email:	
	bimalokpal.ernakulam@gbic.co.in	
KOLKATA	Office of the Insurance Ombudsman,	West Bengal, Sikkim, Andaman &
	Hindustan Bldg. Annexe, 4th Floor,	Nicobar Islands
	4, C.R. Avenue,	
	KOLKATA - 700 072.	
	Tel.: 033 - 22124339 / 22124340	
	Tel.: 033 - 22124339 / 22124340	
LUCKNOW	Tel.: 033 - 22124339 / 22124340 Fax: 033 - 22124341	Districts of Uttar Pradesh : Laitpur,
LUCKNOW	Tel.: 033 - 22124339 / 22124340 Fax : 033 - 22124341 Email: bimalokpal.kolkata@gbic.co.in	Districts of Uttar Pradesh : Laitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot,

	Lucknow - 226 001. Tel.: 0522 - 2231330 / 2231331 Fax: 0522 - 2231310 Email: bimalokpal.lucknow@gbic.co.in	Allahabad, Mirzapur, Sonbhabdra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar
MUMBAI	Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 022 - 26106552 / 26106960 Fax: 022 - 26106052 Email: bimalokpal.mumbai@gbic.co.in	Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane.
NOIDA	Office of the Insurance Ombudsman, Bhagwan Sahai Palace 4th Floor, Main Road, Naya Bans, Sector 15, G.B. Nagar, Noida. Email: bimalokpal.noida@gbic.co.in	State of Uttaranchal and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.
PATNA	PATNA Office of the Insurance Ombudsman, 1st Floor, Kalpana Arcade Building, Bazar Samiti Road, Bahadurpur, Patna 800 006. Email: bimalokpal.patna@gbic.co.in	Bihar, Jharkhand.
PUNE	Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 3rd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune – 411 030. Tel.: 020 - 32341320 Email: bimalokpal.pune@gbic.co.in	Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region.

For further information or latest updated list of Ombudsman Office addresses, kindly visit the IRDA of India website http://www.policyholder.gov.in/ Ombudsman / List of Insurance Ombudsmen OR our website www.tataaia.com

Annexure 1-Surrender Value Factor

GSV factor for Total Premiums Paid:

Yr\Term	12	13	14	15	16	17	18	19	20	21	22	23	24	25
1	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%	15%
2	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%
3	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%	30%
4	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
5	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
6	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
7	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%	50%
8	58%	57%	56%	55%	54%	54%	54%	53%	53%	53%	53%	53%	52%	52%
9	66%	63%	61%	60%	59%	58%	57%	57%	56%	56%	55%	55%	55%	54%
10	74%	70%	67%	65%	63%	62%	61%	60%	59%	59%	58%	58%	57%	57%
11	82%	77%	73%	70%	68%	66%	65%	63%	62%	61%	61%	60%	59%	59%
12	90%	83%	79%	75%	72%	70%	68%	67%	65%	64%	63%	63%	62%	61%
13		90%	84%	80%	77%	74%	72%	70%	68%	67%	66%	65%	64%	63%
14			90%	85%	81%	78%	75%	73%	72%	70%	69%	68%	66%	66%
15				90%	86%	82%	79%	77%	75%	73%	71%	70%	69%	68%
16					90%	86%	83%	80%	78%	76%	74%	73%	71%	70%
17						90%	86%	83%	81%	79%	77%	75%	74%	72%
18							90%	87%	84%	81%	79%	78%	76%	74%
19								90%	87%	84%	82%	80%	78%	77%
20									90%	87%	85%	83%	81%	79%
21										90%	87%	85%	83%	81%
22											90%	88%	85%	83%
23												90%	88%	86%
24													90%	88%
25														90%

GSV factor for Vested CRB & Milestone Additions:

Yr\Term	12	13	14	15	16	17	18	19	20	21	22	23	24	25
1	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
2	20%	19%	18%	17%	16%	15%	14%	13%	12%	11%	10%	9%	8%	7%
3	21%	20%	19%	18%	17%	16%	15%	14%	13%	12%	11%	10%	9%	8%
4	22%	21%	20%	19%	18%	17%	16%	15%	14%	13%	12%	11%	10%	9%
5	23%	22%	21%	20%	19%	18%	17%	16%	15%	14%	13%	12%	11%	10%
6	24%	23%	22%	21%	20%	19%	18%	17%	16%	15%	14%	13%	12%	11%
7	25%	24%	23%	22%	21%	20%	19%	18%	17%	16%	15%	14%	13%	12%
8	26%	25%	24%	23%	22%	21%	20%	19%	18%	17%	16%	15%	14%	13%
9	27%	26%	25%	24%	23%	22%	21%	20%	19%	18%	17%	16%	15%	14%
10	28%	27%	26%	25%	24%	23%	22%	21%	20%	19%	18%	17%	16%	15%
11	29%	28%	27%	26%	25%	24%	23%	22%	21%	20%	19%	18%	17%	16%
12	30%	29%	28%	27%	26%	25%	24%	23%	22%	21%	20%	19%	18%	17%
13		30%	29%	28%	27%	26%	25%	24%	23%	22%	21%	20%	19%	18%
14			30%	29%	28%	27%	26%	25%	24%	23%	22%	21%	20%	19%
15				30%	29%	28%	27%	26%	25%	24%	23%	22%	21%	20%
16					30%	29%	28%	27%	26%	25%	24%	23%	22%	21%
17						30%	29%	28%	27%	26%	25%	24%	23%	22%
18							30%	29%	28%	27%	26%	25%	24%	23%
19								30%	29%	28%	27%	26%	25%	24%
20									30%	29%	28%	27%	26%	25%
21										30%	29%	28%	27%	26%
22											30%	29%	28%	27%
23												30%	29%	28%
24													30%	29%
25														30%

The Special Surrender Value Factors vary according to the policy term and policy year of surrender as under:

Yr\Term	12	13	14	15	16	17	18	19	20	21	22	23	24	25
1	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
2	56%	53%	50%	48%	45%	43%	40%	38%	36%	35%	33%	31%	30%	28%
3	60%	56%	53%	50%	48%	45%	43%	40%	38%	36%	35%	33%	31%	30%
4	63%	60%	56%	53%	50%	48%	45%	43%	41%	39%	37%	35%	33%	32%
5	67%	63%	60%	56%	53%	50%	48%	45%	43%	41%	39%	37%	35%	33%
6	71%	67%	63%	60%	56%	53%	51%	48%	45%	43%	41%	39%	37%	35%
7	75%	71%	67%	63%	60%	56%	53%	51%	48%	45%	43%	41%	39%	37%
8	79%	75%	71%	67%	63%	60%	57%	54%	51%	48%	46%	43%	41%	39%
9	84%	79%	75%	71%	67%	63%	60%	57%	54%	51%	48%	46%	44%	41%
10	89%	84%	79%	75%	71%	67%	63%	60%	57%	54%	51%	48%	46%	44%
11	94%	89%	84%	79%	75%	71%	67%	63%	60%	57%	54%	51%	49%	46%
12	100%	94%	89%	84%	79%	75%	71%	67%	63%	60%	57%	54%	51%	49%
13		100%	94%	89%	84%	79%	75%	71%	67%	63%	60%	57%	54%	51%
14			100%	94%	89%	84%	79%	75%	71%	67%	64%	60%	57%	54%
15				100%	94%	89%	84%	79%	75%	71%	67%	64%	60%	57%
16					100%	94%	89%	84%	79%	75%	71%	67%	64%	60%
17						100%	94%	89%	84%	79%	75%	71%	67%	64%
18							100%	94%	89%	84%	79%	75%	71%	67%
19								100%	94%	89%	84%	79%	75%	71%
20									100%	94%	89%	84%	80%	75%
21										100%	94%	89%	84%	80%
22											100%	94%	89%	84%
23												100%	94%	89%
24													100%	94%
25														100%

Annexure 2

Section 38 - Assignment and Transfer of Insurance Policies

Assignment or transfer of a policy should be in accordance with Section 38 of the Insurance Act, 1938 as amended from time to time by Insurance Laws (Amendment) Act, 2015. The extant provisions in this regard are as follows:

- 01. This policy may be transferred/assigned, wholly or in part, with or without consideration.
- 02. An Assignment may be effected in a policy by an endorsement upon the policy itself or by a separate instrument under notice to the Insurer.
- 03. The instrument of assignment should indicate the fact of transfer or assignment and the reasons for the assignment or transfer, antecedents of the assignee and terms on which assignment is made.
- 04. The assignment must be signed by the transferor or assignor or duly authorized agent and attested by at least one witness.
- 05. The transfer of assignment shall not be operative as against an insurer until a notice in writing of the transfer or assignment and either the said endorsement or instrument itself or copy there of certified to be correct by both transferor and transferee or their duly authorised agents have been delivered to the insurer.
- 06. Fee to be paid for assignment or transfer can be specified by the Authority through Regulations.
- 07. On receipt of notice with fee, the insurer should Grant a written acknowledgement of receipt of notice. Such notice shall be conclusive evidence against the insurer of duly receiving the notice.
- 08. If the insurer maintains one or more places of business, such notices shall be delivered only at the place where the policy is being serviced.
- 09. The insurer may accept or decline to act upon any transfer or assignment or endorsement, if it has sufficient reasons to believe that it is
- a, not bonafide or
- b. not in the interest of the policyholder or
- c. not in public interest or
- d. is for the purpose of trading of the insurance policy.
- 10. Before refusing to act upon endorsement, the Insurer should record the reasons in writing and communicate the same in writing to Policyholder within 30 days from the date of policyholder giving a notice of transfer or assignment.
- 11. In case of refusal to act upon the endorsement by the Insurer, any person aggrieved by the refusal may prefer a claim to IRDAI within 30 days of receipt of the refusal letter from the Insurer.

- 12. The priority of claims of persons interested in an insurance policy would depend on the date on which the notices of assignment or transfer is delivered to the insurer; where there are more than one instruments of transfer or assignment, the priority will depend on dates of delivery of such notices. Any dispute in this regard as to priority should be referred to Authority.
- 13. Every assignment or transfer shall be deemed to be absolute assignment or transfer and the assignee or transferee shall be deemed to be absolute assignee or transferee, except
- a. where assignment or transfer is subject to terms and conditions of transfer or assignment OR
- b. where the transfer or assignment is made upon condition that
- i. the proceeds under the policy shall become payable to policyholder or nominee(s) in the event of assignee or transferee dying before the insured OR
- ii. the insured surviving the term of the policy

Such conditional assignee will not be entitled to obtain a loan on policy or surrender the policy. This provision will prevail notwithstanding any law or custom having force of law which is contrary to the above position.

- 14. In other cases, the insurer shall, subject to terms and conditions of assignment, recognize the transferee or assignee named in the notice as the absolute transferee or assignee and such person
- a. shall be subject to all liabilities and equities to which the transferor or assignor was subject to at the date of transfer or assignment and
- b. may institute any proceedings in relation to the policy
- c. obtain loan under the policy or surrender the policy without obtaining the consent of the transferor or assignor or making him a party to the proceedings
- 15. Any rights and remedies of an assignee or transferee of a life insurance policy under an assignment or transfer effected before commencement of the Insurance Laws (Amendment) Act, 2015 shall not be affected by this section.

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

Annexure 3

Section 39 - Nomination by policyholder

Nomination of a life insurance Policy is as below in accordance with Section 39 of the Insurance Act, 1938 as amended from time to time by Insurance Laws (Amendment) Act, 2015. The extant provisions in this regard are as follows:

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

- a. parents or
- b. spouse or
- c. children or
- d. spouse and children
- e. or any of them

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

- 14. If nominee(s) die after the policyholder but before his share of the amount secured under the policy is paid, the share of the expired nominee(s) shall be payable to the heirs or legal representative of the nominee or holder of succession certificate of such nominee(s).
- 15. The provisions of sub-section 7 and 8 (13 and 14 above) shall apply to all life insurance policies maturing for payment after the commencement of Insurance Laws (Amendment) Act, 2015.
- 16. If policyholder dies after maturity but the proceeds and benefit of the policy has not been paid to him because of his death, his nominee(s) shall be entitled to the proceeds and benefit of the policy.
- 17. The provisions of Section 39 are not applicable to any life insurance policy to which Section 6 of Married Women's Property Act, 1874 applies or has at any time applied except where before or after Insurance Laws (Ordinance) 2014, a nomination is made in favour of spouse or children or spouse and children whether or not on the face of the policy it is mentioned that it is made under Section 39. Where nomination is intended to be made to spouse or children or spouse and children under Section 6 of MWP Act, it should be specifically mentioned on the policy. In such a case only, the provisions of Section 39 will not apply.

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

Annexure 4

Section 45 – Policy shall not be called in question on the ground of mis-statement after three years

Provisions regarding policy not being called into question in terms of Section 45 of the Insurance Act, 1938, as amended from time to time by Insurance Laws (Amendment) Law, 2015 are as follows:

- 01. No Policy of Life Insurance shall be called in question **on any ground whatsoever** after expiry of 3 yrs from
- a. the date of issuance of policy or
- b. the date of commencement of risk or
- c. the date of revival of policy or
- d. the date of rider to the policy

whichever is later.

- 02. On the ground of fraud, a policy of Life Insurance may be called in question within 3 years from
- a. the date of issuance of policy or
- b. the date of commencement of risk or
- c. the date of revival of policy or
- d. the date of rider to the policy

whichever is later.

For this, the insurer should communicate in writing to the insured or legal representative or nominee or assignees of insured, as applicable, mentioning the ground and materials on which such decision is based.

- 03. Fraud means any of the following acts committed by insured or by his agent, with the intent to deceive the insurer or to induce the insurer to issue a life insurance policy:
- a. The suggestion, as a fact of that which is not true and which the insured does not believe to be true;
- b. The active concealment of a fact by the insured having knowledge or belief of the fact;
- c. Any other act fitted to deceive; and
- d. Any such act or omission as the law specifically declares to be fraudulent.
- 04. Mere silence is not fraud unless, depending on circumstances of the case, it is the duty of the insured or his agent keeping silence to speak or silence is in itself equivalent to speak.
- 05. No Insurer shall repudiate a life insurance Policy on the ground of Fraud, if the Insured / beneficiary can prove that the misstatement was true to the best of his knowledge and there was no deliberate

intention to suppress the fact or that such mis-statement of or suppression of material fact are within the knowledge of the insurer. Onus of disproving is upon the policyholder, if alive, or beneficiaries.

- 06. Life insurance Policy can be called in question within 3 years on the ground that any statement of or suppression of a fact material to expectancy of life of the insured was incorrectly made in the proposal or other document basis which policy was issued or revived or rider issued. For this, the insurer should communicate in writing to the insured or legal representative or nominee or assignees of insured, as applicable, mentioning the ground and materials on which decision to repudiate the policy of life insurance is based.
- 07. In case repudiation is on ground of mis-statement and not on fraud, the premium collected on policy till the date of repudiation shall be paid to the insured or legal representative or nominee or assignees of insured, within a period of 90 days from the date of repudiation.
- 08. Fact shall not be considered material unless it has a direct bearing on the risk undertaken by the insurer. The onus is on insurer to show that if the insurer had been aware of the said fact, no life insurance policy would have been issued to the insured.
- 09. The insurer can call for proof of age at any time if he is entitled to do so and no policy shall be deemed to be called in question merely because the terms of the policy are adjusted on subsequent proof of age of life insured. So, this Section will not be applicable for questioning age or adjustment based on proof of age submitted subsequently.

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