

You get married. You have  
children. You get them  
married. You retire.

Isn't life full of certainties?



## Your IndiaFirst Life Insurance Plan

[www.indiafirstlife.com](http://www.indiafirstlife.com) • Call us on 1800 209 8700



PROMOTED BY



\*Tax exemptions are as per applicable tax laws from time to time.

**Disclaimer:** IndiaFirst Life Insurance Company Limited, IRDAI Regn No.143, CIN: U66010MH2008PLC183679, Address: 12th & 13th floor, North Tower, Building 4, Nesco IT Park, Nesco Centre, Western Express Highway, Goregaon (East), Mumbai - 400 063. Toll free No - 18002098700. Email id: [customer.first@indiafirstlife.com](mailto:customer.first@indiafirstlife.com), Website: [www.indiafirstlife.com](http://www.indiafirstlife.com). Fax No.: +912268570600. IndiaFirst Life Insurance Company Limited is only the name of the Life Insurance Company and IndiaFirst Anytime Plan (UIN 143N009V02) is only the name of the Life Insurance Product and does not in any way indicate the quality of the contract, its future prospects, or returns. For more details on risk factors and terms and conditions, please read the sales brochure carefully before concluding the sale. Trade logo displayed above belongs to our promoters M/s Bank of Baroda and is used by IndiaFirst Life Insurance Co. Ltd under License. Advt. Ref.No.: Any Time Policy Document/E/001.

### BEWARE OF SPURIOUS / FRAUD PHONE CALLS

- IRDAI is not involved in activities like selling of insurance policies, announcing bonus or investment of premiums. Public receiving such phone calls are requested to lodge a police complaint.

## PART A

### INDIAFIRST LIFE INSURANCE COMPANY LIMITED

**Regd. & Corporate Office:** 12th & 13th floor, North [C] Wing, Tower 4, Nesco IT Park, Nesco Center, Western Express Highway, Goregaon (East), Mumbai - 400 063.

To,  
xxxx  
Add 1,  
Add 2.  
Pin code - xxx xxx

DD/MM/YYYY

#### IndiaFirst AnyTime Plan- UIN: 143N009V02

Non-Linked, Non-Participating Pure Term Insurance Plan

Dear Customer,  
Congratulations!

You have taken a step towards insuring your 'Happy Family' and we are glad to be part of this journey with you.

Our products have been designed to be simple and easy to understand, providing true value for money.

We have provided you the relevant information about your policy in this policy document. This document is simple to understand. Please read it carefully to ensure that this is the right policy for your financial needs.

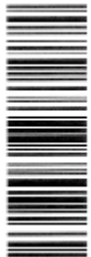
You can return your policy document if you disagree with any of the terms and conditions within the first 15 (fifteen) days of receipt of your Policy document. In case you have bought this Policy through distance marketing or electronic mode, then, you may return the Policy within 30 (thirty) days from the date of receipt of your Policy document.

You will need to send us the original Policy document and a written request stating your reasons for cancellation, post which we will cancel the policy and refund your Premium within 15 days of receipt of the request after deducting the pro rata risk Premium and rider premium, if any, stamp duty and medical cost, if any. In case of any communication in respect of the policy; You may contact Us at IndiaFirst Life Insurance Company Ltd, 12th & 13th Floor, North [C] Wing, Tower 4, NESCO IT Park, Nesco Center, Western Express Highway, Goregaon (East), Mumbai - 400063. You can also write to Us at [customer.first@indiafirstlife.com](mailto:customer.first@indiafirstlife.com) or contact us on 1800 209 8700.

Thank you once again for choosing IndiaFirst.

Yours truly,

**Authorised Signatory**



### Insurance Intermediary Details

|                    |  |
|--------------------|--|
| Name:              |  |
| Intermediary Code: |  |
| Telephone No.:     |  |
| Address:           |  |
| E-mail ID :        |  |

**IndiaFirst AnyTime Plan**  
Non-Linked, Non-Participating Pure Term Insurance Plan  
UIN [143N009V02]

The Policyholder and the Life Assured named in the Policy Schedule have submitted the Proposal Form together with a personal statement and paid the first instalment of Premium specified herein to the Company for grant of the benefits specified in the Policy Schedule. It is agreed by the Policyholder, the Life Assured and the Company that the Proposal Form and the personal statement together with any report or other documents shall form the basis for issuance of this Policy and that the grant of the benefits under this Policy is subject to due receipt of subsequent instalments of Premiums and due compliance with the terms and conditions contained in this document.

Subject to the terms and conditions of this Policy, the Company agrees that the benefits under this Policy shall become payable on the death of the Life Assured during the Policy Term or on occurrence of the covered event during the Policy Term, as the case may be.

It is further hereby declared that every endorsement issued on this Policy by the Company shall be deemed to be a part of this Policy.

Signed by and on behalf of  
IndiaFirst Life Insurance Company Limited

**Authorised Signatory**



## Annexure A Policy Schedule

### I. Policy Details

|                           |                                           |
|---------------------------|-------------------------------------------|
| Company Name:             | IndiaFirst Life Insurance Company Limited |
| Product Name:             | IndiaFirst Anytime Plan                   |
| UIN:                      | 143N009V02                                |
| Policy Number:            |                                           |
| Proposal Form No.:        |                                           |
| Policy Commencement Date: |                                           |
| Risk Commencement Date:   | DD/MM/YY                                  |
| Maturity Date:            |                                           |

### II. Policyholder and Life Assured Details

|                                     |                       |
|-------------------------------------|-----------------------|
| Policyholder's Name:                |                       |
| Date of Birth:                      | DD/MM/YY              |
| Relationship with the Life Assured: |                       |
| Policyholder's Address:             |                       |
| Telephone No./ Mobile No:           |                       |
| Email:                              |                       |
| Life Assured's Name:                |                       |
| Date of Birth:                      | DD/MM/YY              |
| Client ID:                          | Age (in years):       |
| Gender:                             | Age admitted: Yes/ No |
| Address of the Life Assured:        |                       |
| Telephone No./ Mobile No.:          |                       |
| Email:                              |                       |

### III. Nominee(s) (as per Section 39 of the Insurance Act, 1938 as amended from time to time)

| Nominee Name | Percentage Share | Age of Nominee | Relationship of Nominee | Appointee's Name* |
|--------------|------------------|----------------|-------------------------|-------------------|
|              |                  |                |                         |                   |
|              |                  |                |                         |                   |
|              |                  |                |                         |                   |
|              |                  |                |                         |                   |
|              |                  |                |                         |                   |

\*If any of the Nominees is a minor, then, the Appointee will be the person named as the Appointee in the Proposal Form and shall be entitled to receive the death benefit from us for and on behalf of the Nominee under this Policy.

IV. Premium and Benefit Details

|                                                      |                                                    |
|------------------------------------------------------|----------------------------------------------------|
| Sum Assured:                                         | Policy Term (in years):                            |
| Premium Paying Term (in years):                      | Premium Frequency: Regular Premium/Single Premium  |
| Premium Payment Mode:<br>Yearly/ Half Yearly/Monthly | Premium Due Dates:<br>DD MM YY                     |
| Due Date for Payment of Last Premium:<br>DD MM YY    | Annualized Premium (in INR):                       |
| Installment Premium (in INR):                        | Extra Premium, if any:                             |
| Applicable Taxes (in INR):                           | Total Premium (including Applicable Taxes) in INR: |

V. Special Conditions

|     |  |
|-----|--|
| NIL |  |
|-----|--|

The stamp duty of INR\_\_\_\_\_ (Rupees in words only) paid by pay order, vide receipt no.\_\_\_\_\_ dated \_\_\_\_\_, Government Notification Revenue and Forest Department No. Mudrank 2004/415/CR/690/M-1, dated 31.12.2004

Note: ON EXAMINATION OF THIS POLICY, if you notice any mistake, then, you may contact us for correction of the same.

The Premium payable under this Policy may differ on the basis of the Extra Premiums, if any, the Premium payment mode chosen by you and the applicable Modal Factor. Please read the terms and conditions of this Policy carefully to understand the terms referred to in this Policy Schedule.

## PART B

### Definitions

We have listed below a few words, terms and phrases which have been used in this Policy along with their meaning for your easy reference.

| Word                            | Meaning                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|---------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Age                             | Age of the Life Assured as at the last birthday on the Policy Commencement Date and on any subsequent Policy Anniversary                                                                                                                                                                                                                                                                                                                                                                               |
| Annexure                        | Any annexure, endorsement attached to this Policy as changed/ modified and issued by us from time to time                                                                                                                                                                                                                                                                                                                                                                                              |
| Annualized Premium              | An amount which is payable in a Policy Year, excluding the applicable taxes, cesses or levies, rider premiums, underwriting extra premiums and loadings for modal premiums and applicable taxes, cesses or levies, if any. The Annualized Premium payable under this Policy will be determined by us on the basis of the applicable premium table based on Age, Gender, Sum Assured, Policy Term and Premium Payment Term chosen when applying for the Policy.                                         |
| Appointee                       | The person appointed by you to receive the proceeds or the benefits under this Policy, if the Nominee is less than 18 (Eighteen) years of Age                                                                                                                                                                                                                                                                                                                                                          |
| Assignment                      | Assignment is the process through which Policyholder can assign the rights and benefits under the policy to any other person / entity by virtue of an assignment clause under section 38 of the Insurance Act, 1938 as amended from time to time.                                                                                                                                                                                                                                                      |
| Distance Marketing              | Distance Marketing includes every activity of solicitation (including lead generation) and sale of insurance products through the following modes: (i) Voice mode, which includes telephone-calling; (ii) Short Messaging service (SMS); (iii) Electronic mode which includes e-mail, internet and interactive television (DTH); (iv) Physical mode which includes direct postal mail and newspaper & magazine inserts; and, (v) Solicitation through any means of communication other than in person. |
| Extra Premium                   | An additional amount payable by you, which is determined by us in accordance with our Board approved underwriting policy. This is determined on the basis of information provided by you in the Proposal Form or on the basis of any other information submitted to us or through medical examination of the Life Assured.                                                                                                                                                                             |
| Free Look Period                | A period of 15 days (30 days if the policy is sourced through distance marketing or electronic mode) from the date of receipt of the Policy, during this period you can return the policy if you disagree to any of the terms and conditions of your policy.                                                                                                                                                                                                                                           |
| First Unpaid Premium (FUP) Date | Date from where the premium is due however not paid by the policyholder                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Grace Period                    | A period of one month but not less than 30 (Thirty) days from the due date for payment of Premium for yearly, half yearly and quarterly Premium payment mode and 15 (Fifteen) days for monthly Premium payment mode. During this period the policy will be considered to be in-force. with the risk cover without any interruption, as per terms and conditions of the policy.                                                                                                                         |
| Guaranteed Surrender Value      | The minimum amount payable by us on Surrender of this Policy.                                                                                                                                                                                                                                                                                                                                                                                                                                          |

| Word                     | Meaning                                                                                                                                                                                                                                                                                                                                                                                                |
|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Income Tax Act           | Income Tax Act, 1961 as amended from time to time                                                                                                                                                                                                                                                                                                                                                      |
| Insurance Act            | Insurance Act, 1938 as amended from time to time                                                                                                                                                                                                                                                                                                                                                       |
| Installment Premium      | An amount that you pay us during the Premium Paying Term at regular intervals for securing the benefits under this Policy. Your Premium is specified in the Policy Schedule.                                                                                                                                                                                                                           |
| Lapse                    | Non-payment of premium within the expiry of grace period and provided Policy is not acquired any Paid-Up value.                                                                                                                                                                                                                                                                                        |
| Life Assured             | The person on whose life this Policy has been issued by us                                                                                                                                                                                                                                                                                                                                             |
| Modal Factor             | A factor used by us for calculating the Premium payable by you under this Policy, if you have opted to pay the Premium through half yearly Premium payment mode or quarterly Premium payment mode or monthly Premium payment mode.                                                                                                                                                                     |
| Nominee                  | Nominee is the person nominated by the Life Assured under this Policy who is authorized to receive the claim benefit payable under this Policy and to give a valid discharge to the Company on settlement of the claim. This will be as per Section 39 of Insurance Act, 1938, as amendment from time to time                                                                                          |
| Policy                   | This IndiaFirst AnyTime Plan , which includes this Policy wording (as may be changed/ modified by us subject to receipt of prior approval of the Regulatory Authority, from time to time), the Proposal Form, Annexures, the Policy Schedule, any tables, information and documents which form a part of this Policy. This Policy includes the entire contract of insurance between you and us.        |
| Policy Anniversary       | The annual anniversary of the Risk Commencement Date                                                                                                                                                                                                                                                                                                                                                   |
| Policy Commencement Date | The date on which this Policy is issued by us                                                                                                                                                                                                                                                                                                                                                          |
| Policy Schedule          | The schedule attached to this Policy as Annexure A and if we have issued a revised Policy Schedule, then, such revised Policy Schedule                                                                                                                                                                                                                                                                 |
| Policy Term              | The period which starts on the Policy Commencement Date and ends on the Maturity Date                                                                                                                                                                                                                                                                                                                  |
| Policy Year              | A period of 12 (Twelve) consecutive months starting from the Policy Commencement Date and ending on the day immediately preceding its annual anniversary and each subsequent period of 12 (Twelve) consecutive months thereafter during the Policy Term.<br><br>Example: If the Policy Commencement Date is January 1, 2017, then, the first Policy Year will be January 1, 2017 to December 31, 2017. |
| Premium                  | An amount that you pay us during the Premium Paying Term at regular intervals or one time for securing the benefits under this Policy. This is specified in the Policy Schedule.                                                                                                                                                                                                                       |
| Premium Paying Term      | The period during which you need to pay your Premiums to us for securing the benefits under this Policy. Your Premium Paying Term is specified in the Policy Schedule.                                                                                                                                                                                                                                 |
| Proposal Form            | The application/ proposal form completed and submitted by you based on which we have issued this Policy to you.                                                                                                                                                                                                                                                                                        |
| Risk Commencement Date   | The date on which the insurance coverage starts under this Policy. This is specified in the Policy Schedule                                                                                                                                                                                                                                                                                            |

| Word                                    | Meaning                                                                                                                                                                                                                                                                                                                 |
|-----------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Regulatory Authority                    | The Insurance Regulatory and Development Authority of India (IRDAI) or such other authority or authorities, as may be designated/ appointed under the applicable laws and regulations as having the authority to oversee and regulate life insurance business in India                                                  |
| Revival                                 | Revival is the process of restoring the benefits under the Policy which are discontinued due to the nonpayment of premiums on due dates, with or without rider benefits if any, upon receipt of all the premiums due as per terms and conditions of the policy in accordance of the board Approved Underwriting Policy. |
| Revival Period                          | The period of 5 (Five) consecutive years from the date of FUP during which you can pay the due unpaid Premiums along with interest, if any to us and comply with the conditions specified in Part D, as the case may be, for reviving the Policy                                                                        |
| Surrender                               | Termination or cancellation of this Policy prior to the Maturity Date.                                                                                                                                                                                                                                                  |
| Surrender Value                         | The amount payable by us on Surrender of this Policy before the Maturity Date, which is higher of the Guaranteed Surrender Value or the Special Surrender Value                                                                                                                                                         |
| We or Us or Our or Insurer or Company   | IndiaFirst Life Insurance Company Limited                                                                                                                                                                                                                                                                               |
| You or Your or Policyholder or Proposer | The person named as the Policyholder in the Policy Schedule, who has taken this Policy from us and is the owner of the Policy at any point of time                                                                                                                                                                      |

## PART C

### 1. Benefits under the policy

#### 1.1 Death Benefit

In the unfortunate event of the life assured's demise during the term, the nominee will receive a lump sum amount equal to the Sum Assured

#### 1.2 Maturity benefit

There is no maturity or survival benefit payable under this Policy. This is a non-participating pure term insurance plan.

### 2. Rider benefits

There are no riders available under this plan.

### 3. Paid-Up benefits

There is no Paid-Up benefit payable under this plan.

### 4. Surrender Benefit

You may surrender your Policy during the Policy Term by submitting a written request to us.

If the Premium frequency chosen by you is Regular Premium and if you Surrender your policy during the policy Term, then, no Surrender Value will be payable to you.

If the Premium frequency chosen by you is Single Premium then, you are entitled to receive the Surrender Value after completion of two full policy year which will be calculated by us in the following manner:  $40\% \times \text{Premium Paid} \times (\text{Unexpired Policy Term}^* / \text{Total Policy Term})$ .

\*Unexpired Policy Term will be calculated as on date of surrender.

Please remember, you cannot revive your Policy once it is surrendered. Upon Surrender your Policy will terminate immediately.

### 5. Grace Period

You are provided a Grace Period of 15 days under monthly mode and one month but not less than 30 days for other premium payment modes, in case you miss your due premium on the due dates. During grace period, the benefits under this Policy remains unchanged.

## PART D

### 6. Premium Payment

Regular Premiums can be paid to us either by monthly/ half yearly/ yearly payment mode, as per the base plan. The Premiums should be paid on or before the due dates to avoid any lapsation. You are provided a Grace Period of 15 days under monthly mode and 30 days for other premium payment modes, in case you miss your due premium on the due dates.

### 7. Reviving your Lapsed Policy

You may revive the lapsed Policy within 5 years from the due date of first unpaid regular premium but before the Maturity Date by:

- submitting a written request for revival of the lapsed Policy;
- paying all unpaid due Premiums without any interest; and
- providing a declaration of good health and undergoing a medical examination at your own cost, if needed.

A lapsed Policy will only be revived along with all its benefits in accordance with our board approved underwriting policy. The Policy will terminate and you will not be entitled to receive any benefits, if the lapsed Policy is not revived till the expiry of the Revival Period.

### 8. Free Look Period

You can return your policy document if you disagree with any of the terms and conditions within the first 15 days for all channels except Distance Marketing or electronic mode where it is 30 days from receipt of your policy document. You are required to send us the original Policy document and a written request stating the reasons for cancellation, post which we will refund your Premium within 15 days of receipt of the request after deducting the pro rata risk Premium, pro rata rider risk premium, if any, stamp duty and charges for medical examination, if any.

### 9. Loan

No Loan available under this policy.

## PART E

### 10. Charges

This is a non-linked, non-participating pure term insurance plan. There are no charges applicable under this plan.

## PART F

### 11. Making a Claim

In order to process a claim under this Policy, we will need a written intimation about the claim, upon the death of the Life Assured during the Policy Term. This is the first step towards processing your claim. The written intimation should also be accompanied with all the required documents as mentioned below:

#### Death Claim:

- i. Proof of Age of the Life Assured, if the Age of the Life Assured has not been admitted by us.
- ii. Claimant's statement and claim intimation report.
- iii. Death certificate issued under section 12/17 of registration of Births and Deaths Act 1969 (only in case of death of the Life Assured).
- iv. Copies of First Information Report, post mortem report, duly attested by the police (only in case of unnatural death of the Life Assured including accidental death etc) or medico-legal certificate.
- v. Copy of Driving License of the Life Assured, in case the Life Assured was driving
- vi. Hospitalization documents including discharge summary, all investigation reports (only in case the Life Assured was treated for any illness related to the cause of death).
- vii. Original Policy document.
- viii. Self-attested copy of photo-identity proof and address of the Nominee(s)/Claimant (e.g. driving license, PAN card, passport, Voter ID card etc.)
- ix. Self-attested copy of bank pass book of Nominee(s)/Claimant along with cancelled cheque.
- x. Any other document or information that we may need for validating and processing the claim.

### 12. Suicide Exclusion

In case of death due to suicide within 12 months from the date of commencement of risk under the policy or from the date of revival of the policy, as applicable, the nominee or beneficiary of the policyholder shall be entitled to at least 80% of the total premiums paid till the date of death or the surrender value available as on the date of death whichever is higher, provided the policy is in force.

### 13. Nomination

**Nomination shall be governed as per section 39 of the Insurance Act, 1938 as amended from time to time.**

A Leaflet containing the provisions of Section 39 is enclosed as an Annexure for reference.

### 14. Assignment

**Assignment shall be governed as per section 38 of the Insurance Act, 1938 as amended from time to time.**

A Leaflet containing the provisions of Section 38 is enclosed as an Annexure for reference

### 15. Policy Ceases/ Ends/ Terminates

This Policy will cease immediately and automatically on the happening of the earliest of any of the following:

- i. on the date of payment of the claim benefit; or
- ii. on the date of intimation of rejection of claim by us; or
- iii. on the date of payment of Surrender Value; or
- iv. on the date of receipt of free look request in accordance with Part D; or
- v. on the expiry of the Revival Period provided we have not received the due unpaid regular Premiums from you till the expiry of such period

### 16. Change of Address

You are required to inform us in writing, about any change in your/ Nominee(s)'s address with address proof. This will ensure that our correspondence reaches you/ the Nominee(s) without any delay. We will not be liable on account of your failure to up-date your current address in our records or registering an address with us which is incorrect.

### 17. Disclosures

**Section 45 of Insurance Act, 1938 as amended from time to time:**

- 1) No policy of life insurance shall be called in question on any ground whatsoever after the expiry of three years from the date of the policy, i.e., from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later.
- 2) A policy of life insurance may be called in question at any time within three years from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later, on the ground of fraud: Provided that the insurer shall have to communicate in writing to the insured or the legal representatives or nominees or assignees of the insured the grounds and materials on which such decision is based.
- 3) Notwithstanding anything contained in sub-section (2), no insurer shall repudiate a life insurance policy on the ground of fraud if the insured can prove that the mis-statement of or suppression of a material fact was true to the best of his knowledge and belief or that there was no deliberate intention to suppress the fact or

that such mis-statement of or suppression of a material fact are within the knowledge of the insurer: Provided that in case of fraud, the onus of disproving lies upon the beneficiaries, in case the policyholder is not alive.

- 4) A policy of life insurance may be called in question at any time within three years from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later, on the ground that any statement of or suppression of a fact material to the expectancy of the life of the insured was incorrectly made in the proposal or other document on the basis of which the policy was issued or revived or rider issued: Provided that the insurer shall have to communicate in writing to the insured or the legal representatives or nominees or assignees of the insured the grounds and materials on which such decision to repudiate the policy of life insurance is based: Provided further that in case of repudiation of the policy on the ground of misstatement or suppression of a material fact, and not on the ground of fraud, the premiums collected on the policy till the date of repudiation shall be paid to the insured or the legal representatives or nominees or assignees of the insured within a period of ninety days from the date of such repudiation.
- 5) 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.

## 18. Right to Revise/ Delete/ Alter the Terms and Conditions of this Policy

We may revise, delete and/ or alter any of the terms and conditions of this Policy, by sending a prior written notice of 30 (Thirty) days, subject to receipt of prior approval of the Regulatory Authority.

## 19. Force Majeure

If due to any act of God or State, strike, lock out, legislation or restriction by any government or any other authority or any other circumstances which are beyond our control and restricts our performance under this Policy, this Policy will be wholly or partially suspended only for such period.

## 20. Governing Law and Jurisdiction

All claims, disputes or differences under this Policy will be governed by Indian laws and shall be subject to the jurisdiction of Indian Courts.

## 21. Turn Around Time for various servicing request and claims processing are as mentioned below:

| Policy Servicing TAT's                                   |          |
|----------------------------------------------------------|----------|
| Full Surrender                                           | 15 Days  |
| Freelook Cancellation                                    | 15 Days  |
| Request for Refund of Proposal Deposit                   | 15 days  |
| Refund of outstanding proposal deposit                   | 15 days  |
| Maturity/Survival/Death Claims                           |          |
| Processing of Maturity claim / penal interest not paid   | Due Date |
| Raising claim requirements after lodging the Death claim | 15 Days  |
| Death claim decision without investigation requirement   | 30 Days  |
| Death claim decision with Investigation requirement      | 120 Days |

## PART G

### 22. Grievance Redressal

You may contact us in case of any grievance at any of our branches or at Customer Care, IndiaFirst Life Insurance Company Ltd, 12th & 13th Floor, North [C] Wing, Tower 4, NESCO IT Park, Nesco Center, Western Express Highway, Goregaon (East), Mumbai - 400063, Contact No.: 1800 209 8700, Email id: customer.first@indiafirstlife.com.

- a. A written communication giving reasons of either redressing or rejecting the grievance will be sent to you within 15 (Fifteen) days from the date of receipt of the grievance. In case We don't receive a revert from You within 8 weeks from the date of Your receipt of Our response, We will treat the complaint as closed.
- b. However, if you are not satisfied with our resolution provided or have not received any response within 15 (Fifteen) days, then, you may approach our Grievance Officer at any of our branches or you may write to our Grievance Redressal Officer at [grievance.redressal@indiafirstlife.com](mailto:grievance.redressal@indiafirstlife.com).

An acknowledgment to all such grievances received will be sent within 3 (Three) working days of receipt of the grievance.

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

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

Email ID: [complaints@irda.gov.in](mailto: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,

Sy. No. 115/1, Financial District, Nanakramguda

Gachibowli, Hyderabad- 500032 Telangana

IRDAI TOLL FREE NO: 18004254732

### Insurance Ombudsman

In case you are dissatisfied with the decision/resolution of the Company, you may approach the Insurance Ombudsman located nearest to you (please refer to Annexure of List of Ombudsmen or visit our website [www.indiafirstlife.com](http://www.indiafirstlife.com)) if your grievance pertains to:

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

any other matter resulting from the violation of provisions of the Insurance Act, 1938 as amended from time to time or the regulations, circulars, guidelines or instructions issued by IRDAI from time to time or the terms and conditions of the policy contract, in so far as they relate to issues mentioned in clauses above.

The complaint should be made in writing and the same should be duly signed by the complainant or by his legal heir(s), nominee(s) or assignee with full details of the complaint and the contact information of the complainant.

As per provision 14 of the Insurance Ombudsman Rules, 2017, the complaint to the Ombudsman can be made by you or the complainant, within a period of 1 (One) year from the date of rejection of the grievance by Us or after receipt of decision which is not to your satisfaction or after expiry of one month from the date of sending representation to Us if We fail to furnish reply to You provided the same dispute is not already decided by or pending before or disposed of by any court or consumer forum or arbitrator.

## List of Ombudsmen

|                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Office of the Insurance Ombudsman - Ahmedabad<br/>Jeevan Prakash Building, 06th Floor, Tilak Marg,<br/>Relief Road, AHMEDABAD- 380001<br/>Tel. 079- 25501201/02/05/06<br/>Email: bimalokpal.ahmedabad@ecoi.co.in<br/>Area of Jurisdiction - Gujarat, Dadra &amp; Nagar<br/>Haveli, Daman and Diu</p>                                                               | <p>Office of the Insurance Ombudsman - Bhopal<br/>Janak Vihar Complex, 2nd Floor, 6,<br/>Malviya Nagar, Opp. Airtel Office, Near New<br/>Market, BHOPAL - 462 003.<br/>Tel.: 0755 - 2769201 / 2769202<br/>Fax: 0755 - 2769203<br/>Email: bimalokpal.bhopal@ecoi.co.in<br/>Area of Jurisdiction - Madhya Pradesh &amp;<br/>Chhattisgarh</p>                                                        |
| <p>Office of the Insurance Ombudsman -<br/>Bhubaneswar 62, Forest Park,<br/>BHUBNESHWAR - 751 009.<br/>Tel.: 0674 - 2596461 / 2596455<br/>Fax: 0674 - 2596429<br/>Email: bimalokpal.bhubaneswar@ecoi.co.in<br/>Area of Jurisdiction - Odisha</p>                                                                                                                      | <p>Office of the Insurance Ombudsman - Chandigarh<br/>S.C.O. No. 101, 102 &amp; 103, 2nd Floor,<br/>Batra Building, Sector 17 - D,<br/>CHANDIGARH - 160 017.<br/>Tel.: 0172 - 2706196 / 2706468<br/>Fax: 0172 - 2708274<br/>Email: bimalokpal.chandigarh@ecoi.co.in<br/>Area of Jurisdiction - Punjab, Haryana, Himachal<br/>Pradesh, Jammu &amp; Kashmir, Chandigarh</p>                         |
| <p>Office of the Insurance Ombudsman -<br/>Chennai Fatima Akhtar Court, 4th Floor, 453,<br/>Anna Salai, Teynampet, CHENNAI - 600 018.<br/>Tel.: 044 - 24333668 / 24335284<br/>Fax: 044 - 24333664<br/>Email: bimalokpal.chennai@ecoi.co.in<br/>Area of Jurisdiction - Tamil Nadu, -Pondicherry<br/>Town and Karaikal (which are part of Pondicherry)</p>              | <p>Office of the Insurance Ombudsman - New Delhi<br/>2/2 A, Universal Insurance Building, Asaf Ali Road,<br/>NEW DELHI - 110 002.<br/>Tel.: 011 - 23239633 / 23237532<br/>Fax: 011 - 23230858<br/>Email: bimalokpal.delhi@ecoi.co.in<br/>Area of Jurisdiction - Delhi</p>                                                                                                                         |
| <p>Office of the Insurance Ombudsman - Guwahati<br/>Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge,<br/>S.S. Road, GUWAHATI - 781001 (ASSAM).<br/>Tel.: 0361 - 2132204 / 2132205<br/>Fax: 0361 - 2732937<br/>Email: bimalokpal.guwahati@ecoi.co.in<br/>Area of Jurisdiction - Assam, Meghalaya, Manipur,<br/>Mizoram, Arunachal Pradesh, Nagaland and Tripura</p> | <p>Office of the Insurance Ombudsman - Hyderabad<br/>6-2-46, 1st floor, "Moin Court", Lane Opp. Saleem<br/>Function Palace, A. C. Guards, Lakdi-Ka-Pool,<br/>HYDERABAD - 500 004.<br/>Tel.: 040 - 65504123 / 23312122<br/>Fax: 040 - 23376599<br/>Email: bimalokpal.hyderabad@ecoi.co.in<br/>Area of Jurisdiction - Andhra Pradesh, Telangana,<br/>Yanam and part of Territory of Pondicherry</p> |
| <p>Office of the Insurance Ombudsman - Ernakulam<br/>2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard,<br/>M. G. Road, ERNAKULAM - 682 015.<br/>Tel.: 0484 - 2358759 / 2359338<br/>Fax: 0484 - 2359336<br/>Email: bimalokpal.ernakulam@ecoi.co.in<br/>Area of Jurisdiction - Kerala, Lakshadweep,<br/>Mahe - a part of Pondicherry</p>                                  | <p>Office of the Insurance Ombudsman - Kolkata<br/>Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue,<br/>KOLKATA - 700 072.<br/>Tel.: 033 - 22124339 / 22124340<br/>Fax : 033 - 22124341<br/>Email: bimalokpal.kolkata@ecoi.co.in<br/>Area of Jurisdiction - West Bengal, Sikkim,<br/>Andaman &amp; Nicobar Islands</p>                                                                          |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Office of the Insurance Ombudsman - Lucknow<br/>6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, LUCKNOW - 226 001.<br/>Tel.: 0522 - 2231330 / 2231331<br/>Fax: 0522 - 2231310<br/>Email: bimalokpal.lucknow@ecoi.co.in<br/>Area of Jurisdiction - Districts of Uttar Pradesh :<br/>Laitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareilly, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar</p> | <p>Office of the Insurance Ombudsman - Noida<br/>Bhagwan Sahai Palace, 4th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddh Nagar, UTTAR PRADESH (U.P.) - 201301.<br/>Tel.: 0120-2514250 / 2514252 / 2514253<br/>Email: bimalokpal.noida@ecoi.co.in<br/>Area of Jurisdiction - 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, Gautam Buddh Nagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur</p> |
| <p>Office of the Insurance Ombudsman - Jaipur<br/>Jeevan Nidhi - II Bldg., Gr. Floor, Bhawani Singh Marg, JAIPUR - 302 005.<br/>Tel.: 0141 - 2740363<br/>Email: bimalokpal.jaipur@ecoi.co.in<br/>Area of Jurisdiction - Rajasthan</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | <p>Office of the Insurance Ombudsman - Pune<br/>Jeevan Darshan Bldg., 3rd Floor, C.T.S. Nos. 195 to 198, N.C. Kelkar Road, Narayan Peth, PUNE - 411 030.<br/>Tel.: 020-41312555 Email: bimalokpal.pune@ecoi.co.in<br/>Area of Jurisdiction - Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region</p>                                                                                                                                                                                                                                                                                                                                                                |
| <p>Office of the Insurance Ombudsman - Bengaluru<br/>Jeevan Soudha Building, PID No. 57-27-N-19 Ground Floor, 19/19, 24th Main Road, JP Nagar, 1st Phase, BENGALURU - 560 078.<br/>Tel.: 080 - 26652048 / 26652049<br/>Email: bimalokpal.bengaluru@ecoi.co.in<br/>Area of Jurisdiction - Karnataka</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <p>Office of the Insurance Ombudsman - Mumbai<br/>3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), MUMBAI - 400 054.<br/>Tel.: 022 - 26106552 / 26106960<br/>Fax: 022 - 26106052<br/>Email: bimalokpal.mumbai@ecoi.co.in<br/>Area of Jurisdiction - Goa, Mumbai Metropolitan Region excluding Navi Mumbai &amp; Thane</p>                                                                                                                                                                                                                                                                                                                                                              |
| <p>Office of the Insurance Ombudsman - Patna<br/>1st Floor, Kalpana Arcade Building, Bazar Samiti Road, Bahadurpur, PATNA - 800006<br/>Tel No: 0612-2680952<br/>Email id : bimalokpal.patna@ecoi.co.in.<br/>Area of Jurisdiction - Bihar, Jharkhand</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |



Twins or  
a single child,  
parenthood  
is a certainty

Arranged or love,  
marriage  
is a certainty.



Because life is full  
of certainties.

**Customer Care**

☎ 1800-209-8700

✉ [customer.first@indiafirstlife.com](mailto:customer.first@indiafirstlife.com)



Voluntary or  
compulsory,  
retirement  
is a certainty.

Graduation or  
post-graduation,  
education  
is a certainty.

