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Applicable taxes levied as per extant tax laws shall be deducted from the premium or from the allotted units as applicable.

Disclaimer: IndiaFirst Life Insurance Company Limited, IRDAI Regn No.143, CIN: U66010MH2008PLC183679, Address: 12th & 13th Floor, North [C] Wing, Tower 4, NESCO IT Park, Nesco Center, Western Express Highway, Goregaon (East), Mumbai - 400063.

www.indiafirstlife.com, SMS to 5667735 SMS Charges apply. Toll free No - 1800 209 8700. Trade logo displayed above belongs to our promoter M/s Bank of Baroda and is used by IndiaFirst Life Insurance Co. Ltd under License ". Purchase of any Insurance product by Bank's Customer is purely voluntary and is not linked to avilment of any other facility from the Bank.

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- IRDAI or its official do not involve in activities like selling 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 - 400063. IRDAI Regn No.143.
CIN: U66010MH2008PLC183679

To,
XXXX XXXX
Address 1,
Address 2.
Pin code - xxx xxx

DD/MM/YYYY

IndiaFirst Life Waiver of Premium Rider- UIN: 143B017V01

(Non Linked, Non-Participating Rider)

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 have a free look period of 30 days beginning from the date of receipt of the policy document, whether received electronically or otherwise, to review the terms and conditions of the policy and in case you disagree to any of those terms or conditions, you shall have the option to return the policy to us for cancellation, stating the reasons for your objection, then you shall be entitled to a refund of the premium paid subject only to a deduction of a proportionate risk premium for the period of cover and the expenses incurred by us on medical examination and stamp duty charges.

Such a request received by us for free look cancellation of the policy shall be processed and premium shall be refunded within 7 days of receipt of the request, subject to applicable deductions.

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 - 400 063. You can also write to Us at customer.first@indiafirstlife.com or contact us on 1800 209 8700.

Thank you once again for choosing IndiaFirst Life.

Yours truly,

Authorised Signatory



Insurance Intermediary Details

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

IndiaFirst Life Waiver of Premium Rider
(Non-Linked, Non-Participating Rider)
UIN [143B017V01]

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


IndiaFirstLife

Annexure A: Policy Schedule

I. Policy Details

Company Name:	IndiaFirst Life Insurance Company Limited
Rider Name:	IndiaFirst Life Waiver of Premium Rider
UIN:	143B017V01
Policy Number:	Proposal Number:
Policy Commencement Date:	DD MM YY
Maturity Date:	DD MM YY

II. Rider Details

Policy Term (in years):	Premium Paying Term (in years):
Premium Payment Mode: Yearly/ Half Yearly/Monthly	Premium Due Dates: DD MM YY
Due Date for Payment of Last Premium: DD MM YY	Annualized Premium (in INR):
Installment Premium (in INR):	Extra Premium; if any (in INR):
Applicable Taxes (in INR):	Total Premium (including Applicable Taxes) in INR:

III. Rider Life Assured Details

Name:	
Date of Birth:	DD MM YY
Gender:	
Address:	
Telephone No./ Mobile No:	

IV. Insurance Distributor Details

Name:	
License Number:	
Telephone No.:	
Address:	
E-mail ID :	

V. Special Conditions

NIL	
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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

1. 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 taxes, underwriting extra premiums and loadings for modal premiums.
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.
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 subject to your consent.
Free Look Period	A period of 30 days from the date of receipt of the Policy whether received electronically or otherwise, during this period you can return the policy if you disagree to any of the terms and conditions of your policy.
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.
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. The Premium payable under this Policy will be determined by us on the basis of the Premium payment mode chosen by you and the applicable Modal Factor. Your Premium is specified in the Policy Schedule.
Lapse	Lapse is the status of the Rider Policy when due premium is not paid within the grace period and the benefits under the Rider Policy will cease from the date of such unpaid premium.
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. The applicable Modal Factor for half yearly Premium Payment mode is 0.5119, for quarterly Premium payment mode is 0.2590 and for monthly Premium payment mode is 0.0870.
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
Policy	This IndiaFirst Life Waiver of Premium Rider 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.

Word	Meaning
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.
Premium	An amount that you pay us for securing the benefits under this Policy. This is specified in the Policy Schedule.
Premium Paying Term	The period as mentioned in the Policy Schedule during which you need to pay your Premiums to us for securing the benefits under this Policy.
Proposal Form	The application/ proposal form completed and submitted by you based on which we have issued this Policy to you.
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
Rider Life Assured	Rider Life Assured is the person on whose life this Policy has been issued by us. In case the policy holder is different from life assured in the base policy, then he/she will be the rider Life Assured.
Revival	Revival of a policy means restoration of the policy, which was discontinued due to the non-payment of premium, by the insurer with all the benefits mentioned in the policy document, with or without rider benefits if any, upon the receipt of all the premiums due and other charges or late fee if any, during the revival period, as per the terms and conditions of the policy, upon being satisfied as to the continued insurability of the insured or policyholder on the basis of the information, documents and reports furnished by the policyholder, in accordance with Board approved underwriting policy
Revival Period	The Revival period shall be same as the base policy to which the rider is attached during which you can pay the due unpaid premiums and comply with the conditions specified in Part D, as the case may be for reviving the Policy
We or Us or Our or Insurer or Company or IndiaFirst	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
Definitions of Accidental Total Permanent Disability given below, details of the benefit under ATPD is provided in Part C	
Accident	It is a sudden, unforeseen and involuntary event caused by external, visible and violent means.
Injury	It is accidental physical bodily harm excluding illness or disease solely and directly caused by external, violent, visible and evident means which is verified and certified by a Medical Practitioner
Accidental Total and Permanent Disability (ATPD)	ATPD means when the life assured is totally, continuously and permanently disabled and meets either of the two definitions below: ▪ Unable to Work: Disability as a result of injury or accident and is thereby rendered totally incapable of being engaged in any work or any occupation or employment for any compensation, remuneration or profit and he/she is unlikely to ever be able to do so. ▪ Physical Impairments: The life assured suffers an injury/accident due to which there is total and irrecoverable loss of: i. The use of two limbs; or ii. The sight of both eyes; or iii. The use of one limb and the sight of one eye; or iv. Loss by severance of two or more limbs at or above wrists or ankles; or v. The total and irrecoverable loss of sight of one eye and loss by severance of one limb at or above wrist or ankle. The disabilities as stated under “Unable to Work” and “Physical Impairments” must have lasted, without interruption, for at least 6 consecutive months and must, in the opinion of a medical practitioner, be deemed permanent. The benefit will commence upon the completion of this uninterrupted period of 6 months. However, for the disabilities mentioned in (iv) and (v), such 6 months period would not be applicable and the benefit will commence immediately Premium is continued to be paid till the time it is established that the accidental disability is permanent. Once the permanency of the disability is established, the premium paid, if any from the date of accident is refunded. along-with eligible disability benefit i.e waiver of premium.

Word	Meaning
Definitions of Critical Illness given below, details of the benefit under CI is provided in Part C	
Waiting Period	- Waiting period is applicable only for Waiver of Premium due to Critical Illness. - There will be a waiting period of 90 days from policy inception or from any subsequent reinstatement, whichever is later. - The waiting period for this benefit is defined as the period starting from policy inception or date of revival during which no critical illness benefits are payable.
Survival Period	- Survival period is applicable only for Waiver of Premium due to Critical Illness. - There will be a survival period of 30 days applicable between the diagnosis of a critical illness and eligibility for critical illness benefit payment.
Cancer of Specified Severity (malignant tumour)	Cancer of Specified Severity (malignant tumour) I. A malignant tumor characterized by the uncontrolled growth and spread of malignant cells with invasion and destruction of normal tissues. This diagnosis must be supported by histological evidence of malignancy. The term cancer includes leukemia, lymphoma and sarcoma. II. The following are excluded – i. All tumors which are histologically described as carcinoma in situ, benign, pre-malignant, borderline malignant, low malignant potential, neoplasm of unknown behavior, or non-invasive, including but not limited to: Carcinoma in situ of breasts, Cervical dysplasia CIN-1, CIN - 2 and CIN-3. ii. Any non-melanoma skin carcinoma unless there is evidence of metastases to lymph nodes or beyond; iii. Malignant melanoma that has not caused invasion beyond the epidermis; iv. All tumors of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least clinical TNM classification T2N0M0 v. All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below; vi. Chronic lymphocytic leukaemia less than RAI stage 3 vii. Non-invasive papillary cancer of the bladder histologically described as TaN0M0 or of a lesser classification, viii. All Gastro-Intestinal Stromal Tumors histologically classified as T1N0M0 (TNM Classification) or below and with mitotic count of less than or equal to 5/50 HPFs;
First Heart Attack of Specified Severity (Myocardial Infarction)	The first occurrence of heart attack or myocardial infarction, which means the death of a portion of the heart muscle as a result of inadequate blood supply to the relevant area. The diagnosis for Myocardial Infarction should be evidenced by all of the listed criteria: A history of typical clinical symptoms consistent with the diagnosis of acute myocardial infarction (For e.g. typical chest pain), New characteristic electrocardiogram changes and Elevation of infarction specific enzymes, Troponins or other specific biochemical markers Exclusion – - Other acute Coronary Syndromes - Any type of angina pectoris - A rise in cardiac biomarkers or Troponin T or I in absence of overt ischemic heart disease OR following an intra-arterial cardiac procedure
Open Chest CABG	The actual undergoing of heart surgery to correct blockage or narrowing in one or more coronary artery(s), by coronary artery bypass grafting done via a sternotomy (cutting through the breast bone) or minimally invasive keyhole coronary artery bypass procedures. The diagnosis must be supported by a coronary angiography and the realization of surgery has to be confirmed by a cardiologist Exclusion – Angioplasty and/or any other intra-arterial procedures
Open Heart Replacement or Repair of Heart Valves	The actual undergoing of open-heart valve surgery is to replace or repair one or more heart valves, as a consequence of defects in, abnormalities of, or disease affected cardiac valve(s). The diagnosis of the valve abnormality must be supported by an echocardiography and the realization of surgery has to be confirmed by a specialist medical practitioner. Exclusion – Catheter based techniques including but not limited to, balloon valvotomy/valvuloplasty

Word	Meaning
Coma of specified Severity	A state of unconsciousness with no reaction or response to external stimuli or internal needs. This diagnosis must be supported by evidence of - No response to external stimuli continuously for at least 96 hours; Life support measures are necessary to sustain life; and Permanent neurological deficit which must be assessed at least 30 days after the onset of the coma. The condition has to be confirmed by a specialist medical practitioner. Exclusion - Coma resulting from alcohol or drug abuse
Kidney Failure requiring regular dialysis	End stage renal disease presenting as chronic irreversible failure of both kidneys to function, as a result of which either regular renal dialysis (haemodialysis or peritoneal dialysis) is instituted or renal transplantation is carried out. Diagnosis has to be confirmed by a specialist medical practitioner.
Stroke resulting in Permanent Symptoms	Any cerebrovascular incident producing permanent neurological sequelae. This includes infarction of brain tissue, thrombosis in an intracranial vessel, haemorrhage and embolisation from an extracranial source. Diagnosis has to be confirmed by a specialist medical practitioner and evidenced by typical clinical symptoms as well as typical findings in CT Scan or MRI of the brain. Evidence of permanent neurological deficit lasting for at least 3 months has to be produced. Exclusion - - Transient ischemic attacks (TIA) - Traumatic injury of the brain - Vascular disease affecting only the eye or optic nerve or vestibular functions.
Major Organ or Bone Marrow Transplant (as recipient)	The actual undergoing of a transplant of: heart, lung, liver, kidney, pancreas, that resulted from irreversible end-stage failure of the relevant organ, or Human bone marrow using haematopoietic stem cells. The undergoing of a transplant has to be confirmed by a specialist medical practitioner. Exclusion - - Other stem-cell transplants - Where only Islets of Langerhans are transplanted
Motor Neurone Disease with Permanent Symptoms	Motor neuron disease diagnosed by a specialist medical practitioner as spinal muscular atrophy, progressive bulbar palsy, amyotrophic lateral sclerosis or primary lateral sclerosis. There must be progressive degeneration of corticospinal tracts and anterior horn cells or bulbar efferent neurons. There must be current significant and permanent functional neurological impairment with objective evidence of motor dysfunction that has persisted for a continuous period of at least 3 months.
Alzheimer's Disease	A definite diagnosis of Alzheimer's disease evidenced by all of the following: - Loss of intellectual capacity involving impairment of memory and executive functions (sequencing, organizing, abstracting, and planning), which results in a significant reduction in mental and social functioning - Personality change - Gradual onset and continuing decline of cognitive functions - No disturbance of consciousness - Typical neuropsychological and neuroimaging findings (e.g. CT scan) The disease must require constant supervision (24 hours daily) [before age 65]. The diagnosis and the need for supervision must be confirmed by a Consultant Neurologist. Exclusion - - Other forms of dementia due to brain or systemic disorders or psychiatric conditions - Coverage for this impairment will cease at age sixty-five (65) or on maturity date/expiry date, whichever is earlier.

PART C

2. Benefits under the policy

2.1 Rider benefit

i. Option 1 - Waiver of Premium on Death

Waiver of Premium on Death provides benefit of waving all future premiums due and payable under the Base Policy on Death of the rider Life Assured, subject to base policy and Rider being in force. The benefit will be applicable to rider Life Assured when rider Life Assured is the Proposer/Policyholder of the base policy and Policyholder/Proposer of the base policy is different than Life Assured under base policy.

ii. Option 2 -Waiver of Premium on Accidental Total Permanent Disability or Critical Illness

Waiver of premium on Accidental Total Permanent Disability or Critical Illness provides the benefit of waving all future premiums due and payable under the Base Policy on Total and permanent disability of the rider Life Assured or on the confirmed diagnosis of the rider Life Assured suffering from any one of the critical illnesses covered under the Rider or simultaneous happening of both the events, subject to base policy and Rider being in force.

iii. Option 3 -Waiver of Premium on Death or Accidental Total Permanent Disability or Critical Illness

Waiver of premium on Death or Accidental Total Permanent Disability or Critical Illness provides the benefit of waving all future premiums due and payable under the Base Policy on Death of the rider Life Assured or Total and permanent disability of the rider Life Assured or on the confirmed diagnosis of the rider Life Assured suffering from any one of the critical illnesses covered under the Rider, subject to Rider being in force.

This benefit will be applicable to rider Life Assured when rider Life Assured is the Proposer/Policyholder of the base policy and Policyholder/Proposer of the base policy is different than Life Assured under base policy

Policyholder can choose only one of the options among the above three options for cover available underlying the rider plan at inception of the rider policy as mentioned in policy schedule.

Note that definition of Accidental Total Permanent Disability and Critical Illness is provided in Part B above

2.2 Maturity benefit

There is no maturity benefit payable under this policy.

3. Premium Guarantee

- The premium rates for the Option 2 and Option 3 are guaranteed for Ten years only from the date of launch of the rider.
- The company reserves the right to carry out a general review of the experience at every 10 years from the date of the launch of the rider and change the premium as a result of such review only after approval from Insurance Regulatory and Development Authority of India. The reviewed premium rates would be applicable to both existing and new policies. The reviewed premium rates are applicable only after completion of 10 years of policy term under existing policy.

4. 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 policy will be considered to be in-force.

If the base policy lapses, then rider benefit will cease. If due rider premiums are not paid within the grace period, rider policy will be lapsed without acquiring any benefit after the expiry of the grace period.

PART D

5. Premium Payment

Regular Premiums can be paid to us either by monthly/ quarterly /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.

6. Reviving your Lapsed Policy

You may revive the lapsed Policy within revival period basis the base plan, from the due date of first unpaid regular premium but before the Maturity Date by:

- i. submitting a written request for revival of the lapsed Policy;
- ii. paying all unpaid due Premiums along without interest; and
- iii. 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 current interest charged for delay in premium payment is 9% p.a. which may be revised from time to time. 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.

7. Free Look Period

You have a free look period of 30 days from the date of receipt of the policy document whether received electronically or otherwise, to review the terms and conditions of the policy and in case you disagree to any of those terms or conditions, you shall have the option to return the policy to us for cancellation, stating the reasons for your objection, then you shall be entitled to a refund of the premium paid subject only to a deduction of a proportionate risk premium for the period of cover and the expenses incurred by us on medical examination of the life to be assured and stamp duty charges.

PART E

8. Charges

This is a non-linked rider. There are no charges applicable under this rider.

PART F

9. Making a Claim

In order to process a claim under this Policy, we will need a written intimation about the claim, upon happening of the event (Death, Total Permanent Disability or Critical Illness) 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:

For 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 duly filled and signed by claimant/nominee.
- 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 Medico Legal Certificate, First Information Report, Panchnama, Inquest report and post mortem report (Only if Death), duly attested by the police (only in case of Accident leading to unnatural death or Permanent Disability of the Life Assured).
- v. All Hospitalization documents including discharge summary, Admission Notes and all investigation reports (only in case the Life Assured was treated for any illness related to the cause of death).
- vi. Original Policy document.
- vii. A self attested copy of Pan Card of Nominee/Claimant. In case Nominee/Claimant does not have a pan card issued on his/her name then please submit duly filled and signed Form 60.
- 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

For Accidental Total Permanent Disability -

- 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 for Disability duly filled and signed by claimant/nominee
- iii. Attending Doctor's Certificate duly filled and signed in original.
- iv. Copy of Driving License of the Life Assured, in case the Life Assured was driving
- v. Disability Certificate issued by Attending Neuro physician/ Surgeon/Civil Surgeon etc, providing the detail of the Physical Severance and its Nature (Permanent/Temporary)
- vi. First Information Report, Panchnama and Inquest report, duly attested by the police.
- vii. All Hospitalization documents including discharge summary, Admission Notes and all investigation reports.
- viii. Self attested Copy of bank pass book of Policy Holder along with cancelled cheque.
- ix. Any other document or information that we may need for validating and processing the claim.

For Critical Illness Benefit -

- 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 for Critical Illness duly filled and signed by claimant/nominee
- iii. Attending Doctor's Certificate duly filled and signed in original.
- iv. First Information Report, Panchnama and Inquest report, duly attested by the police in case Life Assured suffers from Permanent Paralysis of Limbs / Loss of Limbs / Blindness due to accidental injuries.
- v. All Hospitalization documents including discharge summary, Admission Notes and all investigation reports
- vi. Investigation/Diagnostic reports leading to the Diagnosis of the ailment suffered, in case of critical illness
- vii. Self attested Copy of bank pass book of Policy Holder along with cancelled cheque.
- viii. Any other document or information that we may need for validating and processing the claim.

IndiaFirst reserves the right to subject the Life Insured for Medical examination at IndiaFirst empanelled medical centres in case of Accidental Total and Permanent Disability or Critical Illness claims, the cost of which would be borne by us.

10. 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.

11. Exclusions

A. Exclusions for Accidental Total and Permanent Disability

If any claim for Accidental Total and Permanent Disability or Accidental Death is caused directly or indirectly due to or arises from any of the following circumstances, the benefit will not be payable -

1. Intentional self-inflicted injury, suicide or attempted suicide, while sane or insane;
2. Insured person being under the influence of drugs, alcohol, narcotics or psychotropic substances unless taken in accordance with the lawful directions and prescription of a registered medical practitioner;
3. War, invasion, act of foreign enemy, hostilities (whether war be declared or not), armed or unarmed truce, civil war, mutiny, rebellion, terrorist act, revolution, insurrection, military or usurped power, riot or civil commotion, strikes;
4. Participation by the insured person in any flying activity, except as a bona fide, passenger in a commercially licensed aircraft;
5. Participation by the insured person in a criminal or unlawful act;
6. Any disability due to an Accident that occurred before the effective date of the cover
7. Any disability due to any kind of sickness, disease or congenital anomalies before and/or after the effective date of the cover;
8. Engaging in or taking part in professional sport(s) or any hazardous pursuits, including but not limited to, diving or riding or any kind of race; underwater activities involving the use of breathing apparatus or not; martial arts; hunting; mountaineering; parachuting; bungee-jumping;
9. Nuclear Contamination; the radio-active, explosive or hazardous nature of nuclear fuel materials or property contaminated by nuclear fuel materials or accident arising from such nature;

B. Exclusions for Critical Illness

The Life Assured will not be entitled to any benefits under this Rider, if a covered critical illness results directly or indirectly from or occurring during any one of the following:

1. If the insured dies within 30 days of the diagnosis of the covered Critical Illness.
2. For any medical condition or medical procedure resulting directly or indirectly from self-inflicted injuries, attempted suicide, while sane or insane;
3. For any medical conditions suffered by the life insured or any medical procedure undergone by the life insured, if that medical condition or that medical procedure was caused directly or indirectly by any congenital anomaly or defect;
4. For any medical conditions suffered by the life insured or any medical procedure undergone by the life insured, if that medical condition or that medical procedure was caused directly or indirectly by alcohol or drug abuse
5. Engaging in or taking part in *hazardous activities, including but not limited to, diving or riding or any kind of race; martial arts; hunting; mountaineering; parachuting; bungee-jumping; underwater activities involving the use of breathing apparatus or not;
*Hazardous Activities mean any sport or pursuit or hobby, which is potentially dangerous to the Insured Member whether he is trained or not
6. Participation by the insured person in a criminal or unlawful act with criminal intent.
7. For any medical condition or any medical procedure arising from nuclear contamination; the radioactive, explosive or hazardous nature of nuclear fuel materials or property contaminated by nuclear fuel materials or accident arising from such nature.
8. For any medical condition or any medical procedure arising either as a result of war, invasion, act of foreign enemy, hostilities (whether war be declared or not), armed or unarmed truce, civil war, mutiny, rebellion, revolution, insurrection, military or usurped power, riot or civil commotion, strikes or participation in any naval, military or air force operation during peace time.
9. For any medical condition or any medical procedure arising from participation by the insured person in any flying activity, except as a bona fide, fare-paying passenger and aviation industry employee like pilot or cabin crew of a recognized airline on regular routes and on a scheduled timetable.
10. Disease specific Exclusions as mentioned in the Definitions.

12. Nomination shall be governed as per section 39 of the Insurance Act, 1938;

Nomination of a life insurance Policy is as below in accordance with Section 39 of the Insurance Act, 1938 as amended by Insurance Laws (Amendment) Act, 2015 dated 23.03.2015. The extant provisions in this regard are as follows:

- 1) 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.
- 2) 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.
- 3) Nomination can be made at any time before the maturity of the policy.
- 4) 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.

- 5) 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.
- 6) 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.
- 7) Fee to be paid to the insurer for registering change or cancellation of a nomination can be specified by the Authority through Regulations.
- 8) 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.
- 9) 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 (i.e. 23.03.2015).
- 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 Insurance Laws (Amendment) Act, 2015, a nomination is made in favour of spouse or children or spouse and children whether or not on the face of the policy it is mentioned that it is made under Section 39. Where nomination is intended to be made to spouse or children or spouse and children under Section 6 of MWP Act, it should be specifically mentioned on the policy. In such a case only, the provisions of Section 39 will not apply.

[Disclaimer: This is not a comprehensive list of amendments of Insurance Laws (Amendment) Act, 2015 and only a simplified version prepared for general information. Policy Holders are advised to refer to Insurance Laws (Amendment) Act, 2015 dated 23.03.2015 for complete and accurate details.

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

Assignment or transfer of a policy should be in accordance with Section 38 of the Insurance Act, 1938 as amended by Insurance Laws (Amendment) Act, 2015 dated 23.03.2015. The extant provisions in this regard are as follows:

- 1) This policy may be transferred/assigned, wholly or in part, with or without consideration.
- 2) 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.
- 3) 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.
- 4) The assignment must be signed by the transferor or assignor or duly authorized agent and attested by at least one witness.
- 5) The transfer or assignment shall not be operative as against an insurer until a notice in writing of the transfer or assignment and either the said endorsement or instrument itself or copy thereof certified to be correct by both transferor and transferee or their duly authorized agents have been delivered to the insurer.
- 6) Fee to be paid for assignment or transfer can be specified by the Authority through Regulations.
- 7) 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.
- 8) 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.
- 9) 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 dated 23.03.2015 for complete and accurate details.]

14. Policy Ceases/ Ends/ Terminates

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

- On the date of receipt of free-look cancellation request
- On acceptance of claim under this rider
- On the date of intimation of repudiation of claim in accordance with the provisions of the rider (Only in case of death of the Policyholder)
- On the expiry of the Revival Period
- On the expiry of rider term
- On the maturity of the base policy or the date on which the base policy is surrendered or is terminated
- On the expiry of Premium Payment Term of the base policy
- On receipt of written request for cancellation of this rider, effective from the next Rider Premium due date
- On termination of this rider on grounds of misrepresentation, fraud or non-disclosure
- On policy anniversary on which the Policyholder attains the age of 70 years

15. 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.

16. Disclosures

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

Provisions regarding policy not being called into question in terms of Section 45 of the Insurance Act, 1938, as amended Insurance Laws (Amendment) Act, 2015 dated 23.03.2015 are as follows:

- 1) No Policy of Life Insurance shall be called in question on any ground whatsoever after expiry of 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.
- 2) 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.

- 3) 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.
- 4) 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.
- 5) 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.
- 6) 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.

7) 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.

8) 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.

9) 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 dated 23.03.2015 for complete and accurate details.]

17. 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.

18. 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.

19. 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.

20. 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

21. Issue of duplicate Policy Document

If the Policy Document is lost or destroyed, then, the Policyholder can submit to us the filled in 'Indemnity Bond for Loss of Policy Document' form, which is available on our website.

We will issue a duplicate Policy Document duly endorsed to show that it is being issued following the loss or destruction of the original Policy Document.

The Company will not charge any additional fee for the issuance of duplicate Policy Document. Currently, only Stamp Duty fee (as applicable for the applicable State/Union-Territory) is being charged.

Upon the issue duplicate Policy Document, the original Policy Document will cease to have any legal effect.

PART G

21. Policy Servicing and Grievance Redressal Mechanism

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/ complaint will be sent to you within 2 (Two) Weeks from the date of receipt of the grievance/ complaint. In case We don't receive a revert from You within 8 weeks from the date of registration of grievance, then 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 2 (Two) Weeks, then, you may email us at grievance.redressal@indiafirstlife.com or write to our 'Grievance Officer' at the above mentioned address.
- c. An acknowledgment to all grievances/ complaints received will be sent immediately on receipt of the complaint/grievance. If you are not satisfied with the response or do not receive a response from us within 2 weeks, 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@irdai.gov.in

You can also register your complaint online at <https://bimabharosa.irdai.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 the Annexure of List of Ombudsman or visit our website 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 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 heirs, nominee 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.

Disclaimers

Applicable taxes levied as per extant tax laws shall be deducted from the premium or from the allotted units as applicable.

IndiaFirst Life Insurance Company Limited, IRDAI Regn No.143, CIN: U66010MH2008PLC183679, Address: 12th & 13th Floor, North [C] Wing, Tower 4, NESCO IT Park, Nesco Center, Western Express Highway, Goregaon (East), Mumbai - 400063. www.indiafirstlife.com, SMS to 5667735 SMS Charges apply. Toll free No - 1800 209 8700. Trade logo displayed above belongs to our promoter M/s Bank of Baroda and is used by IndiaFirst Life Insurance Co. Ltd under License ". Purchase of any Insurance product by Bank's Customer is purely voluntary and is not linked to availment of any other facility from the Bank.

List of Ombudsmen

Office of the Insurance Ombudsman - Ahmedabad Jeevan Prakash Building , 06th Floor, Tilak Marg, Relief Road, AHMEDABAD- 380001 Tel. 079- 25501201/02/05/06 Email: bimalokpal.ahmedabad@ecoi.co.in Area of Jurisdiction - Gujarat, Dadra & Nagar Haveli, Daman and Diu	Office of the Insurance Ombudsman - Bhopal Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp. Airtel Office, Near New Market, BHOPAL – 462 003.Tel.: 0755 - 2769201 / 2769202 Fax: 0755 - 2769203 Email: bimalokpal.bhopal@ecoi.co.in Area of Jurisdiction - Madhya Pradesh & Chhattisgarh
Office of the Insurance Ombudsman - Bhubaneswar 62, Forest Park, BHUBNESHWAR – 751 009. Tel.: 0674 - 2596461 / 2596455 Fax: 0674 - 2596429 Email: bimalokpal.bhubaneswar@ecoi.co.in Area of Jurisdiction - Odisha	Office of the Insurance Ombudsman - Chandigarh S.C.O. No. 101, 102 & 103, 2nd Floor, Batra Building, Sector 17 – D, CHANDIGARH – 160 017. Tel.: 0172 - 2706196 / 2706468 Fax: 0172 - 2708274 Email: bimalokpal.chandigarh@ecoi.co.in Area of Jurisdiction - Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir, Chandigarh
Office of the Insurance Ombudsman - Chennai Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018. Tel.: 044 - 24333668 / 24335284 Fax: 044 - 24333664 Email: bimalokpal.chennai@ecoi.co.in Area of Jurisdiction - Tamil Nadu, –Pondicherry Town and Karaikal (which are part of Pondicherry)	Office of the Insurance Ombudsman – New Delhi 2/2 A, Universal Insurance Building, Asaf Ali Road, NEW DELHI – 110 002. Tel.: 011 - 23239633 / 23237532 Fax: 011 – 23230858 Email: bimalokpal.delhi@ecoi.co.in Area of Jurisdiction - Delhi
Office of the Insurance Ombudsman - Guwahati Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, GUWAHATI – 781001 (ASSAM). Tel.: 0361 - 2132204 / 2132205 Fax: 0361 – 2732937 Email: bimalokpal.guwahati@ecoi.co.in Area of Jurisdiction - Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura	Office of the Insurance Ombudsman - Hyderabad 6-2-46, 1st floor, "Moin Court", Lane Opp. Saleem Function Palace, A. C. Guards, Lakdi-Ka-Pool, HYDERABAD - 500 004. Tel.: 040 - 65504123 / 23312122 Fax: 040 – 23376599 Email: bimalokpal.hyderabad@ecoi.co.in Area of Jurisdiction - Andhra Pradesh, Telangana, Yanam and part of Territory of Pondicherry
Office of the Insurance Ombudsman - Ernakulam 2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard, M. G. Road, ERNAKULAM - 682 015. Tel.: 0484 - 2358759 / 2359338 Fax: 0484 – 2359336 Email: bimalokpal.ernakulam@ecoi.co.in Area of Jurisdiction - Kerala, Lakshadweep, Mahe – a part of Pondicherry	Office of the Insurance Ombudsman - Kolkata Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 / 22124340 Fax : 033 - 22124341 Email: bimalokpal.kolkata@ecoi.co.in Area of Jurisdiction - West Bengal, Sikkim, Andaman & Nicobar Islands
Office of the Insurance Ombudsman - Lucknow 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, LUCKNOW - 226 001. Tel.: 0522 - 2231330 / 2231331 Fax: 0522 – 2231310 Email: bimalokpal.lucknow@ecoi.co.in Area of Jurisdiction - Districts of Uttar Pradesh : Laitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, aizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, ultanpur, Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar	Office of the Insurance Ombudsman - Noida Bhagwan Sahai Palace, 4th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddha Nagar, UTTAR PRADESH (U.P.) - 201301. Tel.: 0120-2514250 / 2514252 / 2514253 Email: bimalokpal.noida@ecoi.co.in 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 Buddha Nagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur

Office of the Insurance Ombudsman - Jaipur Jeevan Nidhi - II Bldg., Gr. Floor, Bhawani Singh Marg, JAIPUR - 302 005. Tel.: 0141 - 2740363 Email: bBimalokpal.jaipur@gbic.co.in Area of Jurisdiction - Rajasthan	Office of the Insurance Ombudsman - Pune Jeevan Darshan Bldg., 3rd Floor, C.T.S. Nos. 195 to 198, N.C. Kelkar Road, Narayan Peth, PUNE - 411 030. Tel.: 020-41312555 Email: bimalokpal.pune@ecoi.co.in Area of Jurisdiction - Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region
Office of the Insurance Ombudsman - Bengaluru Jeevan Soudha Building, PID No. 57-27-N-19 Ground Floor, 19/19, 24th Main Road, JP Nagar, 1st Phase, BENGALURU - 560 078. Tel.: 080 - 26652048 / 26652049 Email: bimalokpal.bengaluru@ecoi.co.in Area of Jurisdiction - Karnataka	Office of the Insurance Ombudsman - Mumbai 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), MUMBAI - 400 054. Tel.: 022 - 26106552 / 26106960 Fax: 022 - 26106052 Email: bimalokpal.mumbai@ecoi.co.in Area of Jurisdiction - Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane
Office of the Insurance Ombudsman - Patna 1st Floor, Kalpana Arcade Building, Bazar Samiti Road, Bahadurpur, PATNA - 800006 Tel No: 0612-2680952 Email id : bimalokpal.patna@gbic.co.in. Area of Jurisdiction - Bihar, Jharkhand	



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