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

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IndiaFirstLife
PROMOTED BY
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Bank of Baroda

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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. Taxes are subject to change from time to time.

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 – 400 063. www.indiafirstlife.com, SMS <LIFE> to 5667735 SMS Charges apply. Toll free No – 1800 209 8700. The trade logo mentioned herein above belongs to IndiaFirst Life Insurance Co. Ltd.

BEWARE OF SPURIOUS AND FICTITIOUS/ FRAUDULENT PHONE CALLS!

- IRDAI or its officials is do not involved 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 – 400 063. IRDAI Regn No.143.
CIN: U66010MH2008PLC183679

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

DD/MM/YYYY

IndiaFirst Life Guaranteed Pension Plan – UIN: 143N066V05

Non-Linked, Non-Participating, Individual, Savings Deferred Annuity 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.

We have provided You the relevant information about Your Policy in this Policy Document. Please read it carefully to ensure that this is the right Policy for Your financial needs. Kindly also refer to the Customer Information (CIS) enclosed with this Policy document for key information regarding Your Policy

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 and conditions, You shall have the option to return the Policy to Us for cancellation, stating the reason for Your objection, , provided no claim has been made under the Policy. In such an event, irrespective of the reason for cancellation. You shall be entitled to a refund of premium paid subject only to a deduction of stamp duty under the Policy, proportionate risk premium for the period of cover and expenses incurred 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 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. IRDAI Regn No.143. CIN: U66010MH2008PLC183679. 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.

Yours truly,

Authorised Signatory

IndiaFirstLife

Insurance Intermediary/Agent Details

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

IndiaFirst Life Guaranteed Pension Plan
Non-Linked, Non-Participating, Individual, Savings Deferred Annuity Plan
UIN [143N066V05]

The Policyholder and the Annuitant 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 Annuitant 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 as per the annuity option chosen.

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

Policy Schedule

I. Personal Details of First Annuitant

Client ID	
Name of Annuitant	
Date of Birth of the Annuitant	
Age of Annuitant	
Relationship with Second Annuitant	
Gender	
Address of the annuitant	
Telephone No./ Mobile No.	

Personal Details of Second Annuitant (Joint Life); if any

Client ID	
Name of Annuitant	
Date of Birth of the Annuitant	
Age of Annuitant	
Gender	
Address of the annuitant	
Telephone No./ Mobile No.	

II. Policy Details

Company Name:	IndiaFirst Life Insurance Company Limited
Product Name:	IndiaFirst Life Guaranteed Pension Plan
UIN:	143N066V05
Policy Number:	
Proposal Form Number:	
Policy Commencement Date:	DD|MM|YY

III. Base Premium and Benefit Details

Annuity Option	
Type of Annuity	Deferred
Deferment Period	
Annuity Installment Amount	
Date of first Annuity installment	
Premium Paying Term	
Premium Paying Frequency	<<Yearly/Half-Yearly/Quarterly/Monthly (select only one)>>
Annuity Frequency	<<Yearly/Half-Yearly/Quarterly/Monthly (select only one)>>
Annualized Premium (in INR)	
Instalment Premium (in INR)	
Applicable Taxes (in INR)	
Total Premium (including Applicable Taxes) in INR:	

IndiaFirstLife

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

Nominee Name	Percentage Share	Age of Nominee	Gender of Nominee	Relationship of Nominee with Annuitant	Appointee's Name*

*If any of the Nominees is a Minor, then, the Appointee will be the person by the policy holder named as the Appointee and whose name is mentioned in the Policy Schedule and will be entitled to receive the death benefit from Us for and on behalf of the Nominee under this Policy.

Appointee's Name*	DOB	Age	Gender	Relationship with Nominee	Appointee's Address

V. Other Information

Source of Premium	<<Vesting / Surrender / Death proceeds of IndiaFirst Life Pension Policy / Vesting from NPS / Open Market Option / Others / Not Applicable>>
Primary NPS Subscriber	<< Primary NPS Subscriber>>
Other Details	<<Details entered like: 1. Plan name and Company name in case of Open Market Option / vested policies 2. NPS Category – Government Sector Subscribers / Citizens including Corporate Sector Subscribers / NPS Lite and Swavalamban Subscribers etc. 3. Not Applicable >>

VI. Insurance Intermediary Details

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

VII. 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	It is calculated based on Age at 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	Annualized premium shall be the premium amount payable in a year, excluding taxes, rider premiums, underwriting extra premiums and loadings for modal premiums
Annuitant	A person who is entitled to receive Annuity. The First Annuitant will be the primary person entitled to receive the payments, while the Second Annuitant will be entitled in the event of the death of the First Annuitant, if applicable. A Joint life annuity would be sold to all relationships wherein there is an insurable interest between the annuitants.
Annuity Installment	Payments to be made by us at specified intervals; purchased by premiums paid by the policyholder, as mentioned in Policy Schedule
Appointee	The person appointed by you to receive the benefits under this Policy, if the Nominee is less than 18 (Eighteen) years of Age.
Assignee	The person to whom the rights and benefits are transferred by virtue of an Assignment
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.
Basis Point	This refers to 1/100th of 1% or 0.01% or 0.0001 per annum.
Beneficiary/Claimant	The person entitled to receive the Policy benefits as per the terms and conditions of the policy and applicable laws, and includes the Policyholder, Nominee(s) (if valid nomination is effected), Assignee(s) or their heirs, legal representatives or holders of a succession certificates in case Nominee(s) or Assignee(s) is/are not alive at the time of claim
Customer Information Sheet	To ensure that policyholders are well-informed about their coverage, rights, and responsibilities, the Company has provided a detailed document known as the "Customer Information Sheet" along with this Policy Document.
Deferment Period	Period specified in the Policy Schedule, commencing from the Policy Commencement Date.
Free Look Period	A period of 30 (Thirty)days from the date of receipt of the Policy whether received electronically or otherwise.
First Unpaid Premium Date	Date from where the premium is due however not paid by the policyholder
Grace Period	A period of 30 days from the due date for payment of Premium (without any penalty or late fee) 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. In case of death / diagnosis of any covered Critical Illness during grace period as per the annuity option selected, only due premium before date of occurrence of death / diagnosis of any covered Critical Illness, will be deducted from the benefit amount.
Guaranteed Surrender Value	The minimum amount payable by us on Surrender of this Policy
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
Reduced Paid-Up Mode	Under this Policy, if We have received one full year premium after the completion of one full Policy year then, this Policy will not terminate but continue under Reduced Paid-Up Mode, in case further premiums are not paid.
Minor	Person below the legal age of majority or adulthood

Word	Meaning
Policy or Policy Document	This IndiaFirst Life Guaranteed Pension 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 Policy Commencement Date.
Policy Commencement Date	The date specified in the Policy Schedule on which the policy commences.
Policy Schedlue	The schedule attached to this Policy and if we have issued a revised Policy Schedule, then, such revised Policy Schedule.
Premium / Purchase Price	An amount that you pay us for securing the benefits under this Policy. This is specified in the Policy Schedule.
Premium Paying Term	The time period during which you need to pay your Premiums regularly to us for securing the benefits under this Policy. Your Premium Paying Term is specified in the Policy Schedule.
Proposal Form	The 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.
Revival	Revival of a Policy means restoration of the Lapsed Policy, which was discontinued due to the non-payment of premium, by Us 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 underwriting Policy.
Revival Period	The period of 5 (Five) consecutive complete years from the date of first unpaid premium during which you can pay the due unpaid Premiums with interest to us and comply with the conditions specified in Part D, as the case may be for reviving the Policy
Special Surrender Value	The Special Surrender Value will be used by us for determining the Surrender Value payable under this Policy upon Surrender of this Policy.
Surrender	Surrender means complete withdrawal or termination of the entire policy contract.
Surrender Value	Surrender value means an amount, if any, that becomes payable on Surrender of a Policy during its term, in accordance with the terms and conditions of the policy.
Total Premiums Paid	Total premiums paid means total of all the premiums paid under the base product, excluding any extra premium and taxes, if collected explicitly.
We or Us or Our or Insurer or Company	IndiaFirst Life Insurance Company Limited.
You or Your	The person who is entitled to receive the benefits of the policy (Annuitant).

Word	Meaning
Definitions of Critical Illness (CI) are given below. Details of benefits under CI are provided in Part C.	
1. CANCER OF SPECIFIED SEVERITY 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; ix. All tumors in the presence of HIV infection. **2. MYOCARDIAL INFARCTION** (First Heart Attack of specific severity) I. 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 following criteria: i. A history of typical clinical symptoms consistent with the diagnosis of acute myocardial infarction (For e.g. typical chest pain) ii. New characteristic electrocardiogram changes iii. Elevation of infarction specific enzymes, Troponins or other specific biochemical markers. II. The following are excluded: i. Other acute Coronary Syndromes ii. Any type of angina pectoris iii. A rise in cardiac biomarkers or Troponin T or I in absence of overt ischemic heart disease OR following an intra-arterial cardiac procedure **3. OPEN CHEST CABG** I. 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. II. The following are excluded: i. Angioplasty and/or any other intra-arterial procedures **4. OPEN HEART REPLACEMENT OR REPAIR OF HEART VALVES** I. 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. Catheter based techniques including but not limited to, balloon valvotomy/valvuloplasty are excluded. **5. COMA OF SPECIFIED SEVERITY** I. A state of unconsciousness with no reaction or response to external stimuli or internal needs. This diagnosis must be supported by evidence of all of the following: i. no response to external stimuli continuously for at least 96 hours; ii. life support measures are necessary to sustain life; and iii. permanent neurological deficit which must be assessed at least 30 days after the onset of the coma. II. The condition has to be confirmed by a specialist medical practitioner. Coma resulting directly from alcohol or drug abuse is excluded.	

6. KIDNEY FAILURE REQUIRING REGULAR DIALYSIS

I. 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.

7. STROKE RESULTING IN PERMANENT SYMPTOMS

I. 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.

II. The following are excluded: i. Transient ischemic attacks (TIA)

ii. Traumatic injury of the brain

iii. Vascular disease affecting only the eye or optic nerve or vestibular functions.

8. MAJOR ORGAN /BONE MARROW TRANSPLANT

I. The actual undergoing of a transplant of:

i. One of the following human organs: heart, lung, liver, kidney, pancreas, that resulted from irreversible end-stage failure of the relevant organ, or

ii. Human bone marrow using haematopoietic stem cells. The undergoing of a transplant has to be confirmed by a specialist medical practitioner.

II. The following are excluded:

i. Other stem-cell transplants

ii. Where only islets of langerhans are transplanted

9. PERMANENT PARALYSIS OF LIMBS

I. Total and irreversible loss of use of two or more limbs as a result of injury or disease of the brain or spinal cord. A specialist medical practitioner must be of the opinion that the paralysis will be permanent with no hope of recovery and must be present for more than 3 months.

10. MOTOR NEURON DISEASE WITH PERMANENT SYMPTOMS

I. 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.

11. MULTIPLE SCLEROSIS WITH PERSISTING SYMPTOMS

I. The unequivocal diagnosis of Definite Multiple Sclerosis confirmed and evidenced by all of the following:

i. investigations including typical MRI findings which unequivocally confirm the diagnosis to be multiple sclerosis and

ii. there must be current clinical impairment of motor or sensory function, which must have persisted for a continuous period of at least 6 months.

II. Other causes of neurological damage such as SLE and HIV are excluded.

12. BENIGN BRAIN TUMOR

I. Benign brain tumor is defined as a life threatening, non-cancerous tumor in the brain, cranial nerves or meninges within the skull. The presence of the underlying tumor must be confirmed by imaging studies such as CT scan or MRI.

II. This brain tumor must result in at least one of the following and must be confirmed by the relevant medical specialist.

i. Permanent Neurological deficit with persisting clinical symptoms for a continuous period of at least 90 consecutive days or

ii. Undergone surgical resection or radiation therapy to treat the brain tumor.

III. The following conditions are excluded:

Cysts, Granulomas, malformations in the arteries or veins of the brain, hematomas, abscesses, pituitary tumors, tumors of skull bones and tumors of the spinal cord.

13. BLINDNESS

I. Total, permanent and irreversible loss of all vision in both eyes as a result of illness or accident.

II. The Blindness is evidenced by:

i. corrected visual acuity being 3/60 or less in both eyes or ;

ii. the field of vision being less than 10 degrees in both eyes.

III. The diagnosis of blindness must be confirmed and must not be correctable by aids or surgical procedure.

14. END STAGE LUNG FAILURE
I. End stage lung disease, causing chronic respiratory failure, as confirmed and evidenced by all of the following:
i. FEV1 test results consistently less than 1 litre measured on 3 occasions 3 months apart; and
ii. Requiring continuous permanent supplementary oxygen therapy for hypoxemia; and
iii. Arterial blood gas analysis with partial oxygen pressure of 55mmHg or less (PaO_2 < 55mmHg); and
iv. Dyspnea at rest.
15. END STAGE LIVER FAILURE
I. Permanent and irreversible failure of liver function that has resulted in all three of the following:
Permanent jaundice; and
Ascites; and
Hepatic encephalopathy.
II. Liver failure secondary to drug or alcohol abuse is excluded.
16. LOSS OF SPEECH
I. Total and irrecoverable loss of the ability to speak as a result of injury or disease to the vocal cords. The inability to speak must be established for a continuous period of 12 months. This diagnosis must be supported by medical evidence furnished by an Ear, Nose, Throat (ENT) specialist.
17. LOSS OF LIMBS
The physical separation of two or more limbs, at or above the wrist or ankle level limbs as a result of injury or disease. This will include medically necessary amputation necessitated by injury or disease. The separation has to be permanent without any chance of surgical correction. Loss of Limbs resulting directly or indirectly from self-inflicted injury, alcohol or drug abuse is excluded.
18. MAJOR HEAD TRAUMA
I. Accidental head injury resulting in permanent Neurological deficit to be assessed no sooner than 3 months from the date of the accident. This diagnosis must be supported by unequivocal findings on Magnetic Resonance Imaging, Computerized Tomography, or other reliable imaging techniques. The accident must be caused solely and directly by accidental, violent, external and visible means and independently of all other causes.
II. The Accidental Head injury must result in an inability to perform at least three (3) of the following Activities of Daily Living either with or without the use of mechanical equipment, special devices or other aids and adaptations in use for disabled persons. For the purpose of this benefit, the word "permanent" shall mean beyond the scope of recovery with current medical knowledge and technology.
III. The Activities of Daily Living are:
i. Washing: the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means;
ii. Dressing: the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances;
iii. Transferring: the ability to move from a bed to an upright chair or wheelchair and vice versa;
iv. Mobility: the ability to move indoors from room to room on level surfaces;
v. Toileting: the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
vi. Feeding: the ability to feed oneself once food has been prepared and made available.
IV. The following are excluded:
i. Spinal cord injury;
19. PRIMARY (IDIOPATHIC) PULMONARY HYPERTENSION I. An unequivocal diagnosis of Primary (Idiopathic) Pulmonary Hypertension by a Cardiologist or specialist in respiratory medicine with evidence of right ventricular enlargement and the pulmonary artery pressure above 30 mm of Hg on Cardiac Cauterization. There must be permanent irreversible physical impairment to the degree of at least Class IV of the New York Heart Association Classification of cardiac impairment.
II. The NYHA Classification of Cardiac Impairment are as follows:
i. Class III: Marked limitation of physical activity. Comfortable at rest, but less than ordinary activity causes symptoms.
ii. Class IV: Unable to engage in any physical activity without discomfort. Symptoms may be present even at rest.
III. Pulmonary hypertension associated with lung disease, chronic hypoventilation, pulmonary thromboembolic disease, drugs and toxins, diseases of the left side of the heart, congenital heart disease and any secondary cause are specifically excluded.
20. THIRD DEGREE BURNS
There must be third-degree burns with scarring that cover at least 20% of the body's surface area. The diagnosis must confirm the total area involved using standardized, clinically accepted, body surface area charts covering 20% of the body surface area.

PART C

1. Benefits under the policy

We will pay the benefits as per the attached policy schedule to the Annuitant.

You need to -

- Produce satisfactory proof that the Annuitant is alive on an annual basis
- Submit an identity proof issued by Government of India.

Please Note:

- Annuity is payable in arrears immediately after the completion of premium paying term.
- Amount lower than the above minimum annuity instalment will only be offered where the proceeds are from the contract issued or administered by IndiaFirst Life where compulsory purchase of annuity is required and to the subscribers of the National Pension System regulated by the Pension Fund Regulatory and Development Authority (PFRDA).
- The minimum annuity payouts shall be in accordance with Insurance Regulatory and Development Authority of India (Insurance Products) Regulations, 2024
- The Purchase Price selected by the Annuitant should be such that minimum annuity installment criteria is fulfilled under any of the available annuity options available under this product from IndiaFirst Life, else the policy shall not be issued.

There are 5 annuity options available under this policy:

Annuity Option	Description	Single Life/ Joint Life
A	Life Annuity	Single Life / Joint Life
B	Life Increasing Annuity	Single Life
C	Life Annuity with Return of Purchase Price on Death	Single Life / Joint Life
D	Life Annuity with Return of Purchase Price on Death or on Critical Illness*	Single Life
E	Life Annuity with Return of Purchase Price on Death or in instalment on survival	Single Life

*Please note that definitions of Critical Illness (CI) are provided in Part B above. Benefit payable on diagnosis of any covered Critical Illness is an accelerated benefit and not an additional benefit.

1 (a). Survival Benefit

This plan provides a regular guaranteed annuity in arrears which will be payable throughout the life.

Annuity option A/ C/ D/ E - Annuity Installment Amount as per the annuity frequency chosen is payable after the completion of Premium Paying Term provided all due premiums have been paid and the Policy is in-force.

Under Annuity Option E in addition to above amount, a fixed sum of 20% of Total Premiums Paid shall be payable at the end of every 5th year starting from the completion of 20 years of annuity payouts, subject to a total additional payout of 100% of Total Premiums paid, post which this additional benefit is no longer available.

Annuity Option B - Annuity Installment Amount will increase every year by 5% per annum simple rate.

Where, Total Premiums Paid means total of all the premiums received, excluding any extra premium and taxes.

1 (b). Death Benefit

The death benefit during the deferment period will be 105% of all the premiums paid up to date of death.

A. Death during the deferment period/ premium paying term -

Provided all due premiums have been paid and policy is in-force:

- **Single Life** – 105% of Total Premiums Paid shall be payable and policy will terminate. Under Annuity Option D, on diagnosis of any of the covered Critical Illness under the policy before death of the Annuitant, 105% of Total Premiums Paid shall be payable and policy will terminate.
- **Joint Life** –
  - o On Death of First Annuitant – No death benefit payable. Policy will continue with full benefit on second life.
  - o On Death of Second Annuitant – 105% of total premiums paid shall be payable and policy will terminate.

B. Death after the deferment period/ premium paying term -

Provided all due premiums have been paid and policy is in-force:

- **Single Life -**

Annuity Option	Death Benefit
A	No death benefit shall be payable and Policy will terminate.
B	No death benefit shall be payable and Policy will terminate.
C	100% of the Total Premiums Paid will be payable and Policy will terminate.
D	100% of the Total Premiums Paid will be payable on death or diagnosis of any covered critical illness whichever is earlier and Policy will terminate.
E	100% of the Total Premiums Paid will be payable less sum total of additional amount paid (20% of Total Premiums Paid at the end of every 5th year starting from the completion of 20 years of annuity, subject to a total of 100% of Total Premiums Paid) till date of death and Policy will terminate.

- **Joint Life –**

Annuity Option	Death Benefit
A	**On Death of First Annuitant** – No death benefit payable. Policy will continue with full benefit on second life. **On Death of Second Annuitant** – No death benefit shall be payable and Policy will terminate.
B	Not Applicable
C	**On Death of First Annuitant** – No death benefit payable. Policy will continue with full benefit on second life. **On Death of Second Annuitant** – 100% of total premiums paid shall be payable to the nominee and policy will terminate
D	Not Applicable
E	Not Applicable

The benefit on death or critical illness shall be payable as described above. However, if the applicable surrender value exceeds the death benefit or critical illness benefit, the maximum of the two shall be payable.

2. Grace Period

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. In case of the Annuitant's death or on diagnosis of any covered Critical Illness, as per the annuity option chosen, during the Grace Period, We will pay the benefit after deducting the unpaid due premiums till date of death or date of diagnosis of any covered Critical Illness. During this period the Policy will be considered to be in-force.

Policy will lapse after the expiry of the Grace Period from the date of first unpaid premium, if less than one (1) full year premium has been paid and any subsequent premium not being duly paid. If the Policy lapses, all the benefits will cease after expiry of the Grace Period from the date of first unpaid premium.

3. Discount on Advance premium (Renewal)

Collection of renewal premium in advance shall be allowed within the same financial year for the premium due in that financial year. Provided, the premium due in one financial year may be collected in advance in earlier financial year for a maximum period of three months in advance of the due date of the premium. No discount will be offered if premium is paid within one month prior to premium due date. The discount rate applicable for the quarter will be calculated on 5-year G-Sec bond yield (rounded to nearest 5 bps) as at beginning of the quarter. The same discount rate will be applicable to all the advance premiums being paid by the policyholder during that quarter. Any change in the said methodology for the calculation of discount on advance premium is subject to IRDAI approval. The discount rate will be calculated from advance premium paid date to premium payment due date (in complete months).

PART D

4. Premium Payment

Premiums can be paid to Us either by monthly/ quarterly/ half yearly/ yearly payment mode, as selected by You in the Proposal Form. The Premiums should be paid on or before the due dates to avoid any lapsation.

a. You should not to pay the Premium through cash or bearer instrument to IndiaFirst Life insurance Advisors /Employees/ Insurance Agents. IndiaFirst Life Insurance Advisors/ Employees / Insurance Agents are not authorised to receive the Premium in cash or bearer instrument. Handing over cash or bearer instrument to any IndiaFirst Life Insurance Advisor / Employee/ Insurance Agents is solely at your own risk and the Company in no way be held responsible for any loss in this regard.

b. Insurance Premium cheques must be drawn only in favour of IndiaFirst Life Insurance Company Ltd. (Proposal No. for first Premium or Policy No. for renewal Premium should be written behind the cheque). Any Cheque payment made shall be deemed to be received by IndiaFirst Life Insurance only when the same has been received by any office of IndiaFirst Life Insurance and after an official receipt is issued by the Company.

5. Reduced Paid-Up benefit

Policy will acquire paid-up value after expiry of grace period from the date of first unpaid premium after completion of first policy year provided one full year premium has been paid, and subsequent due premiums have not been paid.

5(a). Survival Benefit

Paid-up Annuity amount shall be paid after the end of the premium paying term, as per the chosen frequency:

Where Paid-up Annuity = Original Annuity Amount * (Total number of premiums paid) / (Total number of premiums payable under the policy)

Under Plan Option E in addition to above amount, 20% of Total Premium Paid at the end of every 5th year starting from the completion of 20 years of annuity payouts, subject to a total of 100% of Total Premiums Paid, post which this additional benefit shall no longer be payable.

If the Paid-up Annuity amount calculated is less than the minimum modal Annuity amount under the product, the Surrender Value will be paid as a lump sum at the end of the revival period and the Policy will be terminated.

4(b). Death Benefit

A. Death during the deferment period/ premium paying term –

- Single Life – 105% of Total Premiums Paid shall be payable and policy will terminate. Under Annuity Option D, on diagnosis of any of the covered Critical Illness under the policy before death of the Annuitant, 105% of Total Premiums Paid shall be payable and policy will terminate.
- Joint Life –
  - o On Death of First Annuitant – No death benefit payable. Policy will continue with paid-up benefit on second life.
  - o On Death of Second Annuitant – 105% of total premiums paid shall be payable and policy will terminate.

B. Death after the deferment period/ premium paying term –

- Single Life –

Annuity Option	Death Benefit
A	No death benefit shall be payable and Policy will terminate.
B	No death benefit shall be payable and Policy will terminate.
C	100% of the Total Premiums Paid will be payable and Policy will terminate.
D	100% of the Total Premiums Paid will be payable on death or diagnosis of any covered critical illness whichever is earlier and Policy will terminate.
E	100% of the Total Premiums Paid will be payable less sum total of additional amount paid (20% of Total Premiums Paid at the end of every 5th year starting from the completion of 20 years of annuity, subject to a total of 100% of Total Premiums Paid) till date of death and Policy will terminate.

- Joint Life –

Annuity Option	Death Benefit
A	On Death of First Annuitant – No death benefit payable. Policy will continue with paid-up benefit on second life. On Death of Second Annuitant – No death benefit shall be payable and Policy will terminate.
B	Not Applicable
C	On Death of First Annuitant – No death benefit payable. Policy will continue with paid-up benefit on second life. On Death of Second Annuitant – 100% of total premiums paid shall be payable to the nominee and policy will terminate
D	Not Applicable
E	Not Applicable

The benefit on death or critical illness shall be payable as described above. However, if the applicable surrender value exceeds the death benefit or critical illness benefit, the maximum of the two shall be payable.

6. Surrender Benefit

You may Surrender this Policy during the Policy Term, by submitting a written request to Us any time after the Policy has acquired the Surrender Value. Please remember, You cannot revive Your Policy once it is Surrendered.

The amount payable on Surrender will be higher of Guaranteed Surrender Value (GSV) and Special Surrender Value (SSV).

Guaranteed Surrender Value (GSV)

The Policy shall acquire a Guaranteed Surrender Value on payment of premium for at least two consecutive years. GSV factors are dependent upon Policy year of Surrender and deferment term and will be calculated as follows.

GSV factor for premium * Total Premiums Paid

Please refer Annexure I for GSV factors. GSV shall not be available after the Deferment Period.

Special Surrender Value (SSV)

Special Surrender Value shall become payable after completion of first Policy year provided one full year premium has been received. It reflects the notional asset share, guaranteed maturity or survival benefits under the Policy.

SSV will be calculated as:

[Expected Present value of Paid-up Annuity Installment Amount payout

Plus

Expected Present value of paid – up death benefit or critical illness benefit (critical illness benefit is applicable only for plan option [D])

Plus

Expected Present value of paid – up survival benefit as stated above for Annuity Option E,

Where

Paid-up Annuity Installment Amount is

Original Annuity Installment Amount * (Total number of premiums paid) / (Total number of premiums payable under the Policy)

Paid-up death or critical illness benefit is:

Death benefit or critical illness benefit as defined above * (Total number of premiums paid) / (Total number of premiums payable under the Policy)

Paid-up survival benefit will be:

Survival benefit [A] for Plan Option [E] * (Total number of premiums paid) / (Total number of premiums payable under the Policy)

Basis for SSV calculation

The basis of calculation of SSV is as follows:

Interest Rate: 7.40% p.a.

It is derived using the following approach:

7.40% = 6.96% plus spread of 44 bps

where 6.96% is the average of annualized 10 year G-Sec rate at every month end during FY24-25.

The applicable SSV shall be reviewed annually based on the prevailing yield on 10 Year G-Sec and the underlying experience.

7. Reviving Your Lapsed Policy or Reduced Paid-Up Policy (Revival)

You may revive the lapsed Policy within the Revival Period of 5 years from the due date of first unpaid premium by:

i. paying all unpaid due Premiums with applicable interest
ii. providing a declaration of good health and undergoing a medical examination at Your own cost, if needed.

A lapsed or Reduced Paid-Up Policy will only be revived along with all its benefits in accordance with Our underwriting policy.

The basis used for the calculation of interest rate on Revival is 10-year G-Sec rate as at the end of last financial year plus the absolute margin of 300 Basis Points rounded up to the nearest 50 Basis Points. The derived interest rate will be applicable during the next financial year. Currently, the interest rate on Revival for financial year 2025-2026 is 10% p.a. (simple). The current interest rate of 10% p.a. is arrived by adding a margin of 300 Basis Points on 10-year G-Sec and rounded up to the nearest 50 Basis Points (10% ~ 6.69%+ 3.00%).

Any change on basis of determination of interest rate for Revival can be done as per the applicable regulations.

If the Policy is revived, then all benefits as per Policy Terms & Conditions will be restored as for an in-force Policy.

8. 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 and conditions, You shall have the option to return the Policy to Us for cancellation, stating the reason for Your objection, provided no claim has been made under the Policy. In such an event, irrespective of the reason for cancellation. You shall be entitled to a refund of premium paid subject only to a deduction of stamp duty under the Policy, proportionate risk premium for the period of cover and expenses incurred on medical examination of the proposer, if any.

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

- If this Policy is purchased out of proceeds of a deferred pension plan of any other insurance Company, the proceeds from cancellation will be transferred back to that insurance Company.
- If the Policy is purchased from the contract issued or administered by IndiaFirst Life where compulsory purchase of annuity is required and to the subscribers of the National Pension System regulated by the Pension Fund Regulatory and Development Authority (PFRDA), then proceeds from freelook will be transferred back to the respective account from where Purchase Price was received.

9. Loan

Policy Loan will be available during the Deferment Period subject to the following term and conditions.

- The loan amount will be subject to 80% of the Surrender Value.
- The loan tenure will be restricted to the outstanding Deferment Period.
- The minimum loan amount should be Rs. 25,000.
- For in-force and fully paid-up policies, if the outstanding loan along with interest exceeds 90% of the Surrender Value, Company will send a notice to the Policy holder to repay the loan partially or completely. If loan is not repaid subsequent to receipt of the notice, then We will adjust the outstanding loan along with interest before any payment of benefits. After recovering the outstanding loan along with interest, remaining benefit, if any, will be payable.
- A loan disbursement letter will be issued informing about the loan details including the applicable interest rate and relevant terms thereof.
- For other than in-force and fully paid-up policies, as and when the outstanding loan along with interest exceeds the Surrender Value for paid-up cases, Company will send a notice to the policyholder to repay the loan partially or completely. If loan is not repaid within a stipulated period, the Policy will be compulsorily Surrendered and the outstanding loan along with interest will be recovered from the Surrender proceeds or paid-up value.
- The basis used for the calculation of interest rate on loan is 10-year G-Sec rate as at the end of last financial year plus the absolute margin of 250 Basis Points rounded up to the nearest 50 Basis Points. The derived interest rate will be applicable in the succeeding financial year. Currently, the interest rate on loan for FY 2025-26 is 9.5% p.a. (simple). It is arrived at by adding a margin of 250 Basis Points on the effective annual 10-year G-Sec and rounding up to the nearest 50 Basis Points (9.5% ~ 6.69% + 2.50%).
- Any change in the methodology of calculating the loan interest rate shall be subject to prior approval from IRDAI.

PART E

10. Charges

This is a Non-Linked, Non-Participating, Individual, Savings Deferred Annuity Plan. There are no charges applicable under this policy.

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 Annuitant, wherever applicable. This is the first step towards processing your claim. The written intimation should also be accompanied with all the required documents as mentioned below

i. Claimant's statement and claim intimation Form completely filled and signed by Claimant /Nominee.
ii. Valid QR code Scannable Death certificate issued under section 12/17 of registration of Births and Deaths Act 1969 (only in case of death of the Annuitant).
iii. Original Policy document.
iv. Self-attested copy of photo-identity proof and address proof of the Nominee/Claimant and documents establishing the rights of Nominee/Claimant (e.g. driving license, PAN card, passport, Voter ID card etc.)
v. Self-attested copy of bank pass book of Nominee/ Claimant along with cancelled cheque with Printed Nominee name, Ac no and IFSC code available on the same.
vi. Any other document or information that We may need for validating and processing the claim.

Claims can be intimated through -

Courier – Intimation with supporting documents can be sent to claims department at head office by courier to the below address.

Claims Department, IndiaFirst Life Insurance Company Ltd, 12th Floor, North {C} wing, Tower 4, Nesco IT Park, Nesco Center, Western Express Highway, Goregaon (East), Mumbai – 400063

Email – Intimation with supporting documents can be sent to claims.support@indiafirstlife.com

Website - Visit IndiaFirst website for online claim intimation at https://www.indiafirstlife.com/claims/register-claim-online and follow few simple steps to complete the claim intimation.

WhatsApp – Say Hi on +91 22 6274 9898 and follow few simple steps to complete the claim intimation

12. Survival Certificate

a. Every year you are required to submit a Survival Certificate before the next annuity payment anniversary in the format provided by us.
b. In case the survival certificate is not received, the annuity payments shall cease. The annuity payment shall however resume on the receipt of the survival certificate and all the arrears will be settled without any interest.

13. Suicide Exclusion

Only applicable during the deferment period. In case of death of the Annuitant or the death of the Last Survivor in a joint life policy due to suicide within 12 months from the date of commencement of risk under the policy or from the date of latest revival of the Policy, whichever is later, the nominee or beneficiary of the Annuitant(s) shall be entitled to 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.

Suicide exclusion clause is not applicable during the Annuity payout period.

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

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 or any other Regulation as specified by the Authority. The extant provisions in this regard are as follows:

1. The policyholder of a life insurance on his own life shall may nominate a person or persons to whom money secured by the Policy shall be paid in the event of his death.

   Nomination is mandatory to facilitate payment of claim amount in case of death of life assured.
2. Where the Nominee is a Minor, the policyholder shall may appoint any person in the manner laid down by the Insurer 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 for any payment under the Policy made bonafide by the insured to the Nominee unless it is mentioned. is made to the person named in the text of the Policy or in the registered records of the insurer.
7. Fee for registering change in the nomination may require to be paid to the Insurer which shall not exceed Rs. 100 (Rs. One hundred only) or as may be specified by the Authority
8. for registering change or cancellation of a nomination can be specified by the Authority through Regulations.
9. 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.
10. 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.
11. 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.
12. 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.

13. In case Nominee(s) survive the person whose life is insured, the amount secured by the Policy shall be paid to such survivor(s).
14. 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.
15. 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).
16. 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).
17. 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.
18. 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 and any other applicable Regulation/Circulars issued by the Authority for complete and accurate details.

15. 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 and any other applicable Regulation/Circulars issued by the Authority 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 there of certified to be correct by both transferor and transferee or their duly authorised agents have been delivered to the insurer.
6. Fee for granting a written acknowledgement of the receipt of notice of Assignment or transfer Assignment may require to be paid to the Insurer which shall not exceed Rs. 100 (Rs. One hundred only) or as may be specified by the AuthorityFee 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.

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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. Fraud and Misstatement

The Company shall deal with fraud and misstatement in accordance with provisions of Section 45 of the Insurance Act, 1938, as amended from time to time, which provisions are reproduced below.

The Age of the Life Assured is derived basis the declaration in the Proposal Form. Due to misstatement of Age if You have paid less Premium(s) than what was payable for the correct Age, We will charge and You the difference in Premium since the Policy Commencement Date without interest or deduct the same from the policy benefit payable. If the date of birth of the Life Assured has been misstated resulting in higher Premium(s) paid by You than what was payable for the correct Age, We will refund the excess Premiums without any interest. If at the correct Age, the Life Assured was not insurable according to our requirements, We reserve the right to refund the Premiums paid till date post deduction of any relevant cost, expenses or charges as applicable and terminate the Policy in accordance with Section 45 of the Insurance Act, 1938, as amended from time to time.

18. Disclosures

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 yrs from

a. the date of issuance of policy or

b. the date of commencement of risk or

c. the date of revival of policy or

d. the date of rider to the policy whichever is later.

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.]

19. 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.

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	7 Days
Freelook Cancellation	7 Days
Request for Refund of Proposal Deposit	7 days
Refund of outstanding proposal deposit	7 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	15 Days
Death claim decision with Investigation requirement Closure of Investigation, from date of intimation.	45 Days
Settlement, from investigation closure	30 days

22. 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

23. Policy Servicing & Grievance Handling Mechanism

You may contact Us in case of any grievance or complaint 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 – 400 063, Contact No.: 1800 209 8700, Email id: customer.first@indiafirstlife.com. IRDAI Regn No. 143. CIN: U66010MH2008PLC183679.

An acknowledgment to all such grievances received will be sent immediately from the date of receipt of the grievance.

a. A written communication giving reasons of either redressing or rejecting the grievance will be sent to You within 14 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 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 14 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. If You are not satisfied with the resolution or have not received any response within 14 days then You can contact the insurance ombudsman. For the list of ombudsman office please refer Annexure B

c. Further, 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:

Policyholder Protection & Grievance Redressal Department (PPGR,

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 B List of Ombudsmen 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 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, as amended from time to time 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.

All grievances arising out of or in relation to claims/issues arising out this agreement shall only be raised via the grievance redressal mechanism available on the website of the Company and / or agreed in this Agreement. It is clarified that no grievances shall be entertained in case the same are addressed to the personal email ids of the CEO/board of directors of the Company. Rather any such unwarranted emails would be classified as spam and the Company may take appropriate legal actions against such acts of spamming

Disclaimers

Applicable taxes levied as per extant tax laws shall be deducted from the premium or from the allotted units as applicable. Taxes are subject to change from time to time.

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 - 400 063. www.indiafirstlife.com, SMS <LIFE> to 5667735 SMS Charges apply. Toll free No – 1800 209 8700. The trade logo mentioned herein above belongs to IndiaFirst Life Insurance Co. Ltd.

Annexure I – GSV Factors

GSV as % of Total Premiums Paid									
Year of Surrender / Premium Paying Term	2	3	4	5	6	7	8	9	10
1	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
2	90.00%	90.00%	30.00%	30.00%	30.00%	30.00%	30.00%	30.00%	30.00%
3		90.00%	90.00%	35.00%	35.00%	35.00%	35.00%	35.00%	35.00%
4			90.00%	90.00%	50.00%	50.00%	50.00%	50.00%	50.00%
5				90.00%	90.00%	50.00%	50.00%	50.00%	50.00%
6					90.00%	90.00%	50.00%	50.00%	50.00%
7						90.00%	90.00%	50.00%	50.00%
8							90.00%	90.00%	70.00%
9								90.00%	90.00%
10									90.00%

Annexure B - 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@cioins.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 Email: bimalokpal.bhopal@cioins.co.in Area of Jurisdiction - Madhya Pradesh & Chhattisgarh
Office of the Insurance Ombudsman - Bhubaneshwar 62, Forest Park, BHUBNESHWAR – 751 009. Tel.: 0674 - 2596461 /2596455 Email: bimalokpal.bhubaneswar@cioins.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 Email: bimalokpal.chandigarh@cioins.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 Email: bimalokpal.chennai@cioins.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 Email: bimalokpal.delhi@cioins.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 Email: bimalokpal.guwahati@cioins.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 Email: bimalokpal.hyderabad@cioins.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 Email: bimalokpal.ernakulam@cioins.co.in Area of Jurisdiciton - Kerala, Lakshadweep, Mahe – a part of Pondicherry	Office of the Insurance Ombudsman – Kolkata Hindustan Bldg. Annex, 4th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 / 22124340 Email: bimalokpal.kolkata@cioins.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 Email: bimalokpal.lucknow@cioins.co.in Area of Jurisdiction - Districts of Uttar Pradesh : Laitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhabdra, Fatehpur, Pratapgarh, Jaunpur, Varanasi,Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli,Sravasti, Gonda, Faizabad, Amethi,Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur,Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar	Office of the Insurance Ombudsman – Noida Bhagwan Sahai Palace, 4th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddh Nagar, UTTAR PRADESH (U.P.) - 201301. Tel.: 0120-2514250 / 2514252 / 2514253 Email: bimalokpal.noida@cioins.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 Buddh 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: bimalokpal.jaipur@cioins.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@cioins.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, Ist Phase, BENGALURU – 560 078. Tel.: 080 - 26652048 / 26652049 Email: bimalokpal.bengaluru@cioins.co.in Area of Jurisdiction – Karnataka	Office of the Insurance Ombudsman – Mumbai 3rd Floor, Jeevan Seva Annex, S. V. Road, Santacruz (W), MUMBAI - 400 054. Tel.: 022 - 26106552 / 26106960 Email: bimalokpal.mumbai@cioins.co.in Area of Jurisdiction – Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane
Office of the Insurance Ombudsman – Patna 2nd Floor, Lalit Bhawan, Bailey Road PATNA – 800001 Tel No: 0612-2547068 Email id : bimalokpal.patna@cioins.co.in. Area of Jurisdiction - Bihar, Jharkhand	

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