

Registration No. 133

FUTURE GENERALI SARAL BIMA

(UIN 133N051V02)

Policy Preamble

Future Generali India Life Insurance Company Ltd (hereinafter called the Company), having received a proposal and declarations along with the required documents, statements, applicable medical evidences and other information leading to the issue of this Policy, which form the basis of the contract, and the first premium from the Policyholder and the Life Assured named in the Schedule, has contracted to provide the benefits under the Policy determined in accordance with the Policy Schedule and the Policy Provisions and any endorsement placed by the Company on the Policy.

The Company hereby agrees that, in consideration of the payment to it of the premium(s) specified in the Policy Schedule, it shall pay at its Head Office or any other office so notified to the person(s) entitled to thereto, the said benefits, on proof to the satisfaction of the Company of the benefits having become payable as set out in the Policy Schedule and of the title of the person(s) claiming payment.

It is hereby declared that this Policy of Assurance shall be subject to the Terms and Conditions as laid down in the Policy Provisions and the attached Policy Schedule and every endorsement placed on the Policy by the Company shall be deemed to be part of the Policy.

igned on behalf of the Company
or Future Generali India Life Insurance Company Ltd
Authorized Signature)
ate:

IMPORTANT: The Policyholder is requested to read this Policy. If any error or incorrect description is found, the Policy should be returned to the Company for correction.



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Policy Provisions

1. **DEFINITIONS**

In this Policy, "you", "your", or "yours" refers to the Policy owner or the *Policyholder*. "We", "us", "our, or "the Company" refers to Future Generali India Life Insurance Company Limited, or any of its successors.

The words 'he', 'him' and 'his' should read 'she', 'her' and 'hers' where appropriate.

"Age" at any time is age last birthday, that is, age in completed years at that time.

"Appointee" is the person to whom the proceeds/benefits secured under the Policy shall be paid if the nominee is a minor"

"Policy *Commencement Date*" is the start date of the Policy. This is shown in the Policy schedule.

"Endorsement" is a change agreed in writing by us in the schedule of the policy or in any of its terms.

"Guaranteed Surrender Value" refers to the minimum guaranteed amount of Surrender Value of the Policy payable to the policyholder on the surrender of the Policy.

"Indebtedness" means any unpaid Policy loans and accrued interest thereon, unpaid premiums, deductibles and any other amounts owed to the Company including all accrued interest on these.

A Policy will be "in force" if all due premiums under the Policy are paid.



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"Instalment Premium" is the amount of premium payable under the Policy at the desired frequency / mode of payment

"Life assured" is the person in relation to whom the Life/other insurance covers are granted under the Policy.

"Maturity Date" is the date on which the Policy benefits, if not previously invoked due to the contingencies covered (e.g. death), terminate on the expiry of the *Policy Term*, except where a benefit becomes payable on that date. This is also known as the policy expiry date.

"Nominee" shall mean the person or persons appointed by the *Policyholder* to receive the admissible benefits, in the event of death of the *life Assured* during the *Policy term*.

"Policy Anniversary" refers to the same date each year during the Policy term, as the Commencement date.

"Policy Term/ Term / Benefit Term" is the number of years from the Policy Commencement Date to the Policy Expiry Date.

"Policyholder" is the person who takes out the Policy, is the owner of the Policy and is referred to as the 'proposer' in the proposal form. The Policyholder need not necessarily be the same person as the *life assured*.

"Premium Paying Term", is the period for which regular premiums are payable under the policy.



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"Premium Due Date" are dates on which the instalment premiums fall due as stated in the Policy schedule under a regular premium policy.

"Proposal Form" is the form filled in by the policyholder in utmost good faith giving various particulars and will form the basis for providing the insurance cover under this Policy. It is also referred to as the *Application Form*.

"Regular Premium" is premium payable in instalments over the premium paying term.

"Revival Date" is the date on which a Policy which lapsed due to non-payment of premium is revived by payment of all premiums due as per our rules given in the Policy Provisions. The reference in this document is to the date of the last of such revivals at that time if more than one revival has taken place.

"Risk Commencement Date" is the date from which the benefits arising out of the contingencies (e.g. death) as stated in the Policy Schedule apply. This is shown in the Policy schedule.

"Schedule" means the Policy schedule issued by us for this Policy, together with any amendments to the schedule which may be issued from time to time.

"Sum Assured" is the benefit amount assured to be paid under a particular benefit on happening of the event on which the said benefit is payable.

"Surrender Value" means the amount payable to the *Policyholder* upon early and voluntary termination of the Policy by the *Policyholder*. Any *indebtedness* will be deducted from the *Surrender Value* of the Policy before its payment.



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"Vesting Date" is the Policy anniversary coinciding with or following the 18th birthday of the *life assured* if he was a minor at the *risk commencement date*.

2. INTRODUCTION

This document provides details of the terms & conditions of the Policy named in your Policy Schedule. This Policy is provided to you by the Future Generali India Life Insurance Company Ltd. Taken together with your Policy Schedule and any *endorsement/s* thereon, this document forms the terms of the contract between you and us. The information contained in the Proposal Form and in any other supplementary documents / questionnaires answered and signed by you, forms the basis of the contract.

2.1 Policy Benefits

The benefits provided by your Policy as regards the amounts payable by us and the events on the happening of which such amounts are payable, as well as the premiums payable by you and the duration for which such premiums are payable are as indicated on the Policy Schedule.

If premiums are not paid as shown in the policy schedule the non-forfeiture benefits would apply.

Other benefits mentioned below but not appearing in the policy schedule are not payable.

In terms of the policy document the benefits are payable to you or your Assigns or Nominees under Section 38 or 39 of the Insurance Act, 1938, as applicable or proving Executors or Administrators or other Legal Representatives who should take out representation to your Estate or limited to the moneys payable under this Policy from any Court of any State or Territory of the Union of India

The terms and conditions of any Endorsement attaching to and forming part of this policy supersede any conflicting provisions of the Policy/Schedule.



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I) The 'Basic Policy Benefit' consists of the following:

A. On Death;

If death of life assured occurs anytime during the policy term, and if the policy is in force at the time of death, the Death Sum Assured is payable where the Death Sum Assured is the highest of the following:

- Sum Assured
- 10 times annualized premium
- 105% of total premiums paid (excluding service tax, extra premiums and rider premiums, if any) till date of death

The policy will terminate on payment of the death benefit and nothing will be payable thereafter.

B. On Survival till Maturity Date:

On survival of the life assured to the maturity date, provided the policy is in-force, the sum assured under the policy is payable as maturity benefit.

2.2 Any *indebtedness* on the Policy at the time of payment of any benefit stated herein shall be deducted from the amount otherwise payable. Further, the terms and conditions of any *Endorsement* attaching to and forming part of this policy supersede any conflicting provisions of the Policy.

3. EXCLUSION

If the life assured commits suicide within one year from the policy commencement date, at least 80% of the premiums paid will be payable as death benefit, provided the policy is in force. If the life assured commits suicide within one year from the revival date of



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the policy, if revived, the higher of, 80% of the premiums paid till date of death or surrender value, will be payable as death benefit.

4. SPECIAL PROVISION WHERE LIFE ASSURED IS A MINOR

A. Vesting of the Policy

If the Policy is in force or otherwise has acquired *Surrender Value* on the *vesting date*, it shall vest on the *life assured* on that date. Upon such vesting, the Policy will be deemed to be a contract between Company and the *life assured* (also the *policyholder* henceforth) as the owner of the Policy. The erstwhile *Policyholder* or his Estate shall cease to have any right or interest therein.

B. Death of Policyholder while the life assured is a minor

If the policy has been taken by a person (the proposer/Policyholder) on the life of another person who is a minor(the life assured) and the Policyholder predeceases the life assured during the minority of the life assured, no immediate benefit will be payable. On the death of the Policyholder while the life assured is a minor, the policy may be continued by the appointment of a new Policyholder under the policy. If policy has acquired paid up value and new policyholder is not available and/or legal guardian is not interested to continue the policy, the policy can remain in paid up conditions and provisions applicable for paid up policies will apply. However where the Legal Representatives/Legal Guardian of the Policyholder wish to surrender the policy and have obtained necessary representation for the moneys under the policy from a Court of a State or Territory of the Union of India that the moneys will be utilized for carrying out day to day expenses /benefit of the minor, the policy proceeds will be paid as per the Non Forfeiture Provisions mentioned in Section 8and the policy will be terminated thereafter.



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If the policy has not acquired any paid up value, it will lapse in case new policyholder is not available and /or legal guardian is not interested to continue the policy.

5. PREMIUM

A. Payment of Premium

Instalment premiums are required to be paid on the *premium due dates* until such time as stipulated in the Policy Schedule.

The premiums shall be deemed to have been paid only when they have been received at the Company's head office or any other office authorized by it for that purpose.

B. Change in Premium Payment Frequency

You may change the frequency or mode of premium payments by a written request. Subject to our minimum premium requirements and the availability of the desired mode under this plan of assurance, mode can be changed at the premium rates applicable on the *risk commencement date*..

C. Deduction of Premium on claim

Provided the Policy benefit is in force and it becomes a claim due to death of the life assured, any balance of premiums due till the next *Policy anniversary*, shall be deducted from the claim proceeds payable under the Policy benefit.

D. Premium Cessation

In case of death during the policy term, premiums due on or after the next policy anniversary following the death of the life assured are not required to be paid.



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6. GRACE PERIOD

A grace period of 30 days from the premium due date will be allowed for payment of premiums in yearly, half yearly and quarterly mode and 15 days from the premium due date for payment of premiums in monthly mode. The policy will remain in force during the grace period. If any premium remains unpaid at the end of the grace period, the policy shall lapse. The policy benefit thereafter would have no further value except as provided under the non- forfeiture provisions.

7. REVIVAL

If a premium is in default beyond the Grace Period and provided that the Policy is not surrendered, the Policy may be revived, subject to such conditions as the Company at its discretion may decide. Such revival is possible within two years from the due date of the first premium in default but before the end of the premium paying term and within the lifetime of the *life assured*, and is subject to:

- (a) Your written application for revival;
- (b) Production of *life assured*'s health declaration and other evidence of insurability to our satisfaction:
- (c) Payment of all overdue premiums with interest; and
- (d) Repayment of any *indebtedness* at the time of revival.

Interest will be charged at a rate declared by us from time to time. The revival of a rider, if any, will take place only with the revival of the basic policy, and not in isolation.



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If the policy is lapsed before payment of premiums for the first three policy years and not revived during the revival period of two years, policy will be treated as a pure lapse policy and no policy benefits will be payable to the beneficiary.

8. NON-FORFEITURE PROVISIONS:

If premiums have been paid for at least three consecutive years from the policy commencement date and not paid thereafter, the following non-forfeiture provisions would apply.

A. Reduced Paid-Up Value

Any time after payment of 3 full years premium from *policy commencement date* you may choose to continue with this Policy, on expiry of the grace period for payment of premium, as a paid-up insurance for a reduced *Sum Assured*; the *Sum Assured* and Death Sum Assured being reduced in the proportion as the number of premiums actually paid shall bear to the total number of premiums payable as stipulated for in the Policy Schedule.

On death of the policyholder any time during the term of the policy, the reduced paid-up Death Sum Assured will be paid to the nominee and the policy will terminate. The reduced paid up Death Sum Assured will be calculated as

Death Sum Assured * (Number of Premiums Paid / Total number of premiums payable)

On survival of life assured till maturity, the reduced paid-up Sum Assured will be paid as survival benefit where the reduced paid up Sum Assured will be calculated as

Sum Assured * (Number of Premiums Paid / Total number of premiums payable).



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9. Surrender of Policy

Policy will acquire Surrender value after premiums have been paid for at least three full consecutive years. The *Surrender Value* is paid to you if you decide to surrender your Policy. Once the Policy is surrendered, all benefits under the Policy will immediately terminate and the Policy will not be eligible for *revival*. The amount payable to you on surrender of the Policy would, at all times be equal to the *Surrender Value* under the Policy.

The *Surrender Value* on a Policy will depend on the *term* of the Policy, the number of years for which premiums have been paid, the sum assured, the duration elapsed at the time of surrender and it shall be higher of the Special Surrender Value and the Guaranteed Surrender Value. The *Surrender terms* will be declared by the Company from time to time and will be based on past financial and demographic experience of the Company with regard to your Policy/group of similar Policies, as well as our assessment of such likely future experience.

The minimum *Surrender Value* (or Guaranteed surrender value) allowable under a policy is equal to 30% of premiums paid under the base policy (excluding any extra premium for occupation, non-standard age proof and non-standard lives) if the policy is surrendered in the 3rd year of the policy.

If the policy is surrendered anytime between the 4th year of the policy and 7th year of the policy the guaranteed surrender value will be set equal to 50% of premiums paid under the base policy (excluding any extra premium for occupation, non-standard age proof and non-standard lives)



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From the 8th year onwards, the guaranteed surrender value will be the percentages given in the table below, based on policy term and policy year of surrender, applied to the premiums paid under the base policy (excluding any extra premium for occupation, non-standard age proof and non-standard lives).

GSV Factors	Policy Term										
Policy Year of Surrender	10	11	12	13	14	15	16	17	18	19	20
8	81%	77%	73%	70%	67%	63%	60%	58%	55%	53%	50%
9	85%	82%	77%	74%	71%	67%	64%	61%	58%	56%	52%
10	90%	87%	82%	78%	75%	71%	68%	65%	62%	59%	55%
11		90%	87%	83%	79%	75%	72%	68%	65%	62%	58%
12			90%	88%	84%	79%	76%	72%	69%	66%	62%
13				90%	89%	84%	80%	77%	73%	70%	65%
14					90%	89%	85%	81%	77%	74%	69%
15						90%	90%	86%	82%	78%	73%
16							90%	90%	87%	83%	77%
17								90%	90%	88%	82%
18									90%	90%	86%
19										90%	90%
20											90%

Premium paid for riders will not be considered while determining the *Guaranteed Surrender Value*. Any *indebtedness* will be deducted from the *Guaranteed Surrender Value*.

Such *Guaranteed Surrender Value* on a policy is allowable after premiums have been paid for at least three full consecutive years from the commencement date of the policy.



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The *Special Surrender Value* will be based on an assessment of the asset share progression at different durations of the policy. This assessment would be based on the Company's past financial and demographic experience of the Policy / group of similar Policies and likely future experience and will be reviewed from time to time depending on changes in internal and external experience and likely future experience.

The policy shall terminate on surrender as full and final settlement under the policy

10. CLAIM PROCEDURES:

A. Notice of Claim:

The death of the life assured must be notified immediately to us in writing. Other claims must be notified in writing, preferably not later than 20 days after the date the insured event happens. However, the delayed request may be accepted, if the claimant proves to the satisfaction of the Company that he had sufficient cause for not filing the claim within the above said period. The condonation of delay shall be solely at the discretion of the Company.

B. Filing Proof of Claim:

C. Death Claim: Affirmative proof of death and any appropriate documents as required by us must be completed and furnished to us, within 90 days from the date the insured event happens, unless specified otherwise.

Without prejudice, the following documents may be necessary to establish the claim to the satisfaction of the Company

- Original Policy Document;
- Original Death Certificate;



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- Post Mortem Report / FIR, where applicable;
- Claim Forms duly filled in as required by the Company;
- Certificate from physician /Hospital last attended showing cause of death wherever applicable;
- Legal evidence of title of the claimant where no valid nomination or assignment under the Policy exists or in cases where the title is in dispute;
- Proof of age, if the age is not admitted earlier.

We may, however, call for additional documents, if found necessary, in support of the claim.

D. Payments during and at the end of the term: At the end of term, the *Life Assured/Nominee* (in case of death of life assured during the term) shall submit the discharge form along with original Policy document besides proof of age of life assured, if age is not admitted earlier.



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General Terms & Conditions

1. PREMIUM / BENEFIT CESSATION

In case of the basic contingent event happening during the Policy term, the benefit terminates after payment of the claim and further premiums are not required to be paid in respect of that benefit.

2. FORFEITURE IN CERTAIN EVENTS AND INCONTESTABILITY

In case any of the terms and conditions of the Policy document is contravened or it is found that any untrue or incorrect statement is contained in the proposal form or any declaration/s signed by you, or any material information is withheld, in such cases but subject to Section 45 of the Insurance Act 1938, this Policy shall be void and all claims to benefits under this Policy will cease and the surrender value under the policy will be paid immediately

Section 45 of the Insurance Act 1938 states that no Policy of life insurance, effected before the commencement of this Act shall after the expiry of two years from the date of commencement of this Act and no policy of life insurance effected after the coming into force of this Act shall after the expiry of two years from the date on which it was effected, shall be called in question by the Company on the ground that a statement made in the proposal for insurance or in any report of a medical officer, or referee, or friend of the insured (*Policyholder/life assured*), or any other document leading to the issue of the Policy, was inaccurate or false, unless the Company shows that such statement was on a material matter or suppressed facts which was material to disclose and that it was fraudulently made by the *Policyholder* and that the *Policyholder* knew at the time of making it that the statement was false or that it suppressed facts which it was material to disclose.



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Provided that nothing above shall prevent the Company from calling for proof of *age* at any time if it is entitled to do so, and no Policy shall be deemed to be called in question merely because the terms of the Policy are adjusted on subsequent proof that *age* of the *life assured* was incorrectly stated in the proposal.

3. Prohibition of rebates: Section 41 of the Insurance Act, 1938 is reproduced as under:

Section 41. (1) No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer:

Provided that acceptance by an insurance agent of commission in connection with a policy of life insurance taken out by himself on his own life shall not be deemed to be acceptance of a rebate of premium within the meaning of this sub-section if at the time of such acceptance the insurance agent satisfies the prescribed conditions establishing that he is a bona fide insurance agent employed by the insurer.

Section 41 (2) Any person making default in complying with the provisions of this section shall be punishable with fine which may extend to five hundred rupees.

4. STATEMENT OF AGE

This Policy is issued at the *age* shown on the Policy Schedule which is the *life assured*'s declared *age* as at last birthday at the *policy commencement date*. In the event the declared *age* is found to be different from the actual *age*, without prejudice to the Company's other rights and remedies including those under the Insurance Act, 1938, one of the following actions shall be taken:

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- a. If the actual *age* of the *life assured* is such as would have made the *life assured* uninsurable under the plan of insurance specified in the Policy document, the plan of insurance shall stand altered to such plan of insurance as can be generally offered by the Company for the actual *age* of the *life assured*, which will be subject to the terms and conditions as are applicable to that plan of insurance subject to your consent. If it is not possible to offer any other plan of insurance or if the plan offered is not acceptable to you, the Policy shall stand cancelled from the date of issue of the Policy and the premium paid shall be refunded subject to the deduction of the policy stamp duty costs and medical examination costs incurred by the Company on the Policy.
- b. If the actual *age* is higher than the declared *age* and higher premiums should have been charged, the benefits payable under this Policy shall be reduced to what the premiums paid would have purchased at the actual *age* of the *life assured*.
- c. If the actual *age* is lower than the declared *age* and lower premiums should have been charged, the Company will refund any excess premiums paid without interest.

5. THE POLICYHOLDER'S RIGHTS

You are the *Policyholder* and beneficiary of this Policy and its benefits as shown in the Policy Schedule, until changed. Only the *Policyholder* can, during the lifetime of the *life assured*, exercise all rights, privileges and options provided under this Policy subject to any *nominee*'s vested interest or assignee's rights, if any.



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6. NOMINATION / ASSIGNMENT

Nomination and assignment under this Policy can be made only if you are the *life assured* under this Policy. If you are not the *life assured*, nomination and assignment will not be allowed.

A. Nomination

If you are also the *life assured* under this Policy and no nomination has been made, you may, at any time before the Policy expiry date of the Policy, nominate a person or persons as per Section 39 of the Insurance Act, 1938, to receive the Policy benefits in the event of the death of the *life assured*. Where the *nominee* is a minor, you will need to also appoint a person, who is a major, as an appointee, to receive the Policy benefits while the *nominee* is a minor.

During the Term of the Policy, you may change the *nominee* / appointee by filling in a written notice to us. Such change is valid only if recorded by us during the lifetime of the *life assured* and endorsed on this Policy.

We will not recognize a nomination or a change in nomination on this Policy until we receive notice of the nomination or change in nomination in writing at our Servicing Office. We will not express any opinion on the validity or legality of the nomination. Nomination is to be made for the entire Policy benefit and not for individual benefits or any part thereof.

If no nomination has been made, or all *nominees* predecease the *life assured*, the benefits will be payable to your legal heirs or legal representatives. In case there are more than one *nominee* and one or more of the *nominees* die, the benefits will be paid to the surviving *nominees*/legal heirs.



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B. Assignment

As per Section 38 of the Insurance Act, 1938,the *Policyholder* (referred to as 'Assignor') can assign this Policy to a party (referred to as 'Assignee') by filling in a written notice at our servicing office along with the original Policy document. The assignment should either be endorsed upon the Policy itself or documented by a separate instrument signed in either case by the Assignor stating specifically the fact of assignment. We will not express any opinion on the validity or legality of the assignment. Only the entire Policy can be assigned and not individual benefits or any part thereof. Any assignment shall automatically cancel a nomination except any assignment in our favour.

7. LOAN PROVISIONS:

Loan is not available under this policy.

8. RESTRICTIONS ON TRAVEL, RESIDENCE AND OCCUPAITION

This Policy does not impose any restrictions as to travel, residence or occupation, except as otherwise provided in any special provisions of this Policy or by law.

9. FREE LOOK CANCELLATION

You have a period of 15 days (30 days if the policy is sold through Distance Marketing Mode) from the date of receipt of the Policy document to review the terms and conditions of the Policy. If you are not satisfied with or disagree with any of the terms and conditions, you have the option to Cancel/withdraw and return the Policy along with a letter (dated and signed) stating your intention to cancel the Policy and reasons for the objections/Cancellation, within this period. Cancellation of Policy and refund of premium



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is allowed under this provision, whereby the amount payable on such cancellation will be equal to the total premium paid less a proportionate cost of insurance for the period of cover and expenses towards Policy stamp duty and medical examination, if any.

Note: Distance Marketing means insurance solicitation/lead generation by way of telephone calling/ Short Messaging Service (SMS)/Other Electronic modes like e-mail, internet & Interactive Television (DTH)/Direct Mail/ newspaper & magazine inserts or any other means of communication other than in person.

10. APPLICABLE LAW

Your Policy is governed by and is subject to the Indian Law.

The parties shall be subject to the jurisdiction of the law courts situated within the Republic of India for all matters and disputes arising from or relating to or concerning the application, declaration and the provisions of the Policy.

11. SERVICE TAX ETC

Service Tax and other related taxes on premiums payable for the Basic Policy Benefit and Rider Benefits, if any, will be charged separately by the Company at the time of premium payment.



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12. COMPLAINT/GRIEVANCE:

In case of any grievance, the Policyholder may approach the following in the order given below:

a) In the event of any grievance the Policyholder may have under this Policy, a reference may be made to our office at the following address giving the nature and full particulars of the grievance:-

Grievance Redressal Department

Future Generali India Life Insurance Company Limited

Ground floor of Lodha i – Think techno campus, A wing – 1st floor, Pokhran Road -2, Off eastern express Highway,

Behind TCS Bldg

Thane (West)

Thane 400607

Email ID:care@futuregenerali.in

Website of the Company: www.futuregenerali.in

b) In case you are not satisfied with the decision of the above office, or have not received any response within 10 days, you may contact the following official for resolution of the grievance:-

Grievance Redressal Officer

Future Generali India Life Insurance Company Limited

Ground floor of Lodha i – Think techno campus,

A wing – 1st floor, Pokhran Road -2,

Off eastern express Highway,

Behind TCS Bldg

Thane (West)

Thane 400607

Contact No: 1800 102 2355 Email: gro@futuregenerali.in

c) In case you are not satisfied with the decision / resolution of the Company, you may approach the IRDA (Insurance Regulatory and Development Authority) through *Integrated Grievance Management System (IGMS*). IGMS provides a gateway for policyholders to register complaints with insurance companies first and if need be escalate them to the IRDA Grievance Cells.



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IRDA Grievance Call Centre (IGCC)

CALL CENTER: TOLL FREE NUMBER (155255) for voice calls

Email ID: complaints@irda.gov.in

REGISTER YOUR COMPLAIN ONLINE AT: http://www.igms.irda.gov.in/

Address for communication for complaints by paper/fax:

Consumer affairs Department,

Insurance Regulatory and Development Authority,

9th Floor, United Towers,

Basheer bagh,

Hyderabad -500 029

Fax 91 – 40 - 66789768

- **d)** In case you are not satisfied with the decision / resolution of the Company, you may approach the Insurance Ombudsman designated by Insurance Regulatory and Development Authority at the following addresses if your grievance pertains to:
 - Insurance claim that has been rejected or dispute of a claim on legal construction of the Policy
 - Delay in settlement of claim
 - Dispute with regard to payment of premium
 - Non-receipt of your Policy document

For Insurance Ombudsman:

- i) In case Our decision/resolution is not satisfactory, the Insurance Ombudsman Appointed under the provisions of Insurance Ombudsman Rules, 2017 may be approached if the grievance pertains to:
 - a. delay in settlement of claims, beyond the time specified in the regulations, framed under the Insurance Regulatory and Development Authority of India Act, 1999;
 - b. any partial or total repudiation of claims by the life insurer, General insurer or the health insurer:
 - c. disputes over premium paid or payable in terms of insurance policy;



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- d. misrepresentation of policy terms and conditions at any time in the policy document or policy contract;
- e. legal construction of insurance policies in so far as the dispute relates to claim;
- f. policy servicing related grievances against insurers and their agents and intermediaries;
- g. 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;
- h. 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 the IRDAI from time to time or the terms and conditions of the policy contract, in so far as they relate to issues mentioned at clauses (a) to (f)
- ii) Further, As per Rule 14(3) of the Insurance Ombudsman Rules 2017, the complaint to the Insurance Ombudsman can be made only if:
 - a. the complainant makes a written representation to the insurer named in the complaint and—
 - I. either the insurer had rejected the complaint; or
 - II. the complainant had not received any reply within a period of one month after the insurer received his representation; or
 - III. the complainant is not satisfied with the reply given to him by the insurer;
 - b. The complaint is made within one year—
 - I. after the order of the insurer rejecting the representation is received; or
 - II. after receipt of decision of the insurer which is not to the satisfaction of the complainant;



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III. after expiry of a period of one month from the date of sending the written representation to the insurer if the insurer fails to furnish reply to the complainant

The Insurance Ombudsman is an organization that addresses grievances that are not settled to Your satisfaction. The list of Insurance Ombudsmen offices is provided as Annexure I to this Policy. Further, the list of Insurance Ombudsmen offices is also available at the website below:

http://www.ecoi.co.in.

Address of Company for correspondence

Any notice, information or instruction to the Company must be in writing and delivered to the address intimated by the Company to the Policyholder which is currently:

Chief – Operations

Future Generali India Life Insurance Co. Ltd. Ground floor of Lodha i – Think techno campus A wing – 1st floor, Pokhran Road -2 Off eastern express Highway Behind TCS Bldg. Thane (West) Thane 400607

The Company may change the address stated above and intimate the Policyholder of such change by suitable means.

Any notice, information or instruction from the Company to the Policyholder shall be mailed to the address of the Policyholder stated in the Schedule of this policy or to the changed address as intimated to the Company in writing.



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Please communicate any change in Your address or any other communication details immediately, as it helps Us to reach to You faster. The correct address ensures that all our communications reach to you timely.

Words and expressions used in this policy but not defined herein shall, unless the context specifies otherwise, have the same meaning as defined in the Insurance Act 1938 and/or rules/regulations made there under as may be amended from time to time.

13. ELECTRONIC TRANSACTION:

You will adhere to and comply with all such terms and conditions as prescribed by the Company from time to time and hereby agree and confirm that all transactions effected by or through facilities for conduction of remote transactions including the Internet, World Wide Web, electronic data interchange, call centers, teleservice operations (whether voice, video, data or combination thereof) or by means of electronic, computer, automated machines network or through other means of telecommunication, established by or on behalf of the Company, for and in respect of the Policy or its terms, or the Company's other products and services, shall constitute legally binding and valid transactions when done in adherence to and in compliance with the Company's terms and conditions for such facilities, as may be prescribed from time to time.

14. CURRENCY OF PAYMENT

All amounts payable either to or by the insurer shall be in Indian Rupees.

15. LEGISLATIVE CHANGES

The Terms and Conditions including the premiums and benefits payable under this policy are subject to variation in accordance with the relevant Legislation and Regulations.

Service Tax and other related taxes as mentioned above shall be charged at the applicable tax rates and as per prevailing rules.



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ANNEXURE I LIST OF INSURANCE OMBUDSMEN

Elot Of IIV	JURISDICTION
CONTACT DETAILS	(Union Territory, District)
AHMEDABAD	(Official Territory, District)
Office of the Insurance Ombudsman,	
2nd floor, Ambica House,	
Near C.U. Shah College,	Cujarat
5, Navyug Colony, Ashram Road,	Gujarat,
Ahmedabad – 380 014.	Dadra & Nagar Haveli, Daman and Diu.
	Daman and Diu.
Tel.: 079 - 27546150 / 27546139 Fax: 079 - 27546142	
Email: bimalokpal.ahmedabad@ecoi.co.in	
BENGALURU	
Office of the Insurance Ombudsman,	
Jeevan Soudha Building,PID No. 57-27-N-	
Ground Floor, 19/19, 24th Main Road,	Karnataka.
JP Nagar, Ist Phase,	Namauna.
Bengaluru – 560 078.	
Tel.: 080 - 26652048 / 26652049	
Email: bimalokpal.bengaluru@ecoi.co.in	
BHOPAL	
Office of the Insurance Ombudsman,	
Janak Vihar Complex, 2nd Floor,	
6, Malviya Nagar, Opp. Airtel Office,	
Near New Market,	Madhya Pradesh
Bhopal - 462 003.	Chattisgarh.
Tel.: 0755 - 2769201 / 2769202	
Fax: 0755 - 2769203	
Email: bimalokpal.bhopal@ecoi.co.in	
BHUBANESHWAR	
Office of the Insurance Ombudsman,	
62, Forest park,	
Bhubneshwar – 751 009.	Ovices
Tel.: 0674 - 2596461 / 2596455	Orissa.
Fax: 0674 - 2596429	
Email:	
bimalokpal.bhubaneswar@ecoi.co.in	
CHANDIGARH	
Office of the Insurance Ombudsman,	
S.C.O. No. 101, 102 & 103, 2nd Floor,	
Batra Building, Sector 17 – D,	Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir and
Chandigarh – 160 017.	Union territory of Chandigarh.
Tel.: 0172 - 2706196 / 2706468	
Fax: 0172 - 2708274	
Email: bimalokpal.chandigarh@ecoi.co.in	



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CHENNAI	
Office of the Insurance Ombudsman,	
Fatima Akhtar Court, 4th Floor, 453,	T 21 1
Anna Salai, Teynampet,	Tamil Nadu,
CHENNAI - 600 018.	Pondicherry Town and
Tel.: 044 - 24333668 / 24335284	Karaikal (which are part of Pondicherry).
Fax: 044 - 24333664	
Email: bimalokpal.chennai@ecoi.co.in	
DELHI	
Office of the Insurance Ombudsman,	
2/2 A, Universal Insurance Building, Asaf	
Ali Road,	
New Delhi – 110 002.	Delhi.
Tel.: 011 - 23239633 / 23237532	
Fax: 011 - 23230858	
Email: bimalokpal.delhi@ecoi.co.in	
GUWAHATI	
Office of the Insurance Ombudsman,	Assam,
Jeevan Nivesh, 5th Floor,	Meghalaya,
Nr. Panbazar over bridge, S.S. Road,	Manipur,
Guwahati - 781001(ASSAM).	Mizoram,
Tel.: 0361 - 2132204 / 2132205	Arunachal Pradesh,
Fax: 0361 - 2732937	Nagaland and Tripura.
Email: bimalokpal.guwahati@ecoi.co.in	
HYDERABAD	
Office of the Insurance Ombudsman,	
6-2-46, 1st floor, "Moin Court",	
Lane Opp. Saleem Function Palace,	Andhra Pradesh,
A. C. Guards, Lakdi-Ka-Pool,	Telangana,
Hyderabad - 500 004.	Yanam and
Tel.: 040 - 65504123 / 23312122	part of Territory of Pondicherry.
Fax: 040 - 23376599	
Email: bimalokpal.hyderabad@ecoi.co.in	
JAIPUR	
Office of the Insurance Ombudsman,	
Jeevan Nidhi - II Bldg., Gr. Floor,	
Bhawani Singh Marg,	Rajasthan.
Jaipur - 302 005.	
Tel.: 0141 - 2740363	
Email: Bimalokpal.jaipur@ecoi.co.in	
ERNAKULAM	
Office of the Insurance Ombudsman,	
2nd Floor, Pulinat Bldg.,	State of Kerala and Union Territory of (a) Lakshadweep (b)
Opp. Cochin Shipyard, M. G. Road,	
Ernakulam - 682 015.	Mahe-a part of Union Territory of Pondicherry.
Tel.: 0484 - 2358759 / 2359338	
Fax: 0484 - 2359336	



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Email: bimalokpal.ernakulam@ecoi.co.in	
KOLKATA Office of the Insurance Ombudsman, 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	West Bengal, Sikkim, Andaman & Nicobar Islands.
LUCKNOW Office of the Insurance Ombudsman, 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	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.
MUMBAI Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 022 - 26106552 / 26106960 Fax: 022 - 26106052 Email: bimalokpal.mumbai@ecoi.co.in	Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane.
NOIDA Office of the Insurance Ombudsman, Bhagwan Sahai Palace 4th Floor, Main Road, Naya Bans, Sector 15, G.B. Nagar, Noida. Email: bimalokpal.noida@ecoi.co.in	State of Uttaranchal and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.
PATNA Office of the Insurance Ombudsman, 1st Floor,Kalpana Arcade Building, Bazar Samiti Road, Bahadurpur, Patna 800 006. Email: bimalokpal.patna@ecoi.co.in	Bihar, Jharkhand.



Registration No. 133

PUNE

Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 3rd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth,

Pune - 411 030. Tel.: 020 - 32341320

Email: bimalokpal.pune@ecoi.co.in

Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region.

