

FUTURE GENERALI GROUP SUPERANNUATION PLAN

Group, Non-Linked, Participating, Savings, Pension Insurance Plan (UIN 133N043V03)

Future Generali India Life Insurance Company Ltd (which expression includes its assigns and successors, hereinafter called the 'Company') has received a proposal from the Proposer (also known as the Policyholder or Master Policyholder) named in the Schedule hereto, together with a statement and particulars of the Members, and has received the contribution amount as mentioned in the Schedule of the policy for grant of the benefits detailed in Part C of this policy.

The Policyholder has agreed to furnish such statements and particulars of Members as may be required by the Company from time to time and also has agreed to pay further contributions as provided in Part D of this policy as and when they fall due. The Company and the Policyholder have agreed that the proposal and the statements together with any report or other documents leading to the issue of this Policy, including but not limited to the Rules of the Superannuation Scheme, if any, (a certified copy of which has been filed by the Policyholder with the Company) shall form the basis of this contract.

It is agreed that in consideration of the contributions received, and subject to receipt of future contributions as herein stated, the Company will pay the appropriate benefits as herein stated in respect of the members and Beneficiaries (hereinafter defined), on proof to the complete satisfaction of the Company of the benefit having become payable, and provided that the Schedules, terms and conditions contained in this document are complied with.

The policy including the contributions and benefits under this policy will be subject to taxes, duties and other statutory levies as may be applicable from time to time, and such taxes, duties, levies etc. will be recovered, directly and completely from the Policyholder.

The provisions hereinafter contained viz. 'Definitions, conditions and privileges contained in part A to E and the Schedule' form part of this Policy. All the endorsements placed on this Policy shall also be deemed to be part of this Policy.

IN WITNESS WHEREOF, Future Generali India Life Insurance Company Ltd. has caused this Policy to be executed as on its Date of Issue to take effect on the Policy Effective Date.

In case the Policyholder disagree with any of the terms and conditions of the policy, then the

policy can be returned to the Company within 15 days of its receipt for cancellation, stating the objections. Future Generali will refund the policy account value after the deduction of the policy stamp charges and the cost of insurance cover for the period of cover up to the date of cancellation.

For your convenience, we are providing your sales / servicing agent details below:

Agent/Broker/Intermediary Name:

Code License No. Mobile Number Address

Email Id



Future Generali India Life Insurance Company Ltd

(Authorized Signature)

Date:_____



POLICY SCHEDULE FUTURE GENERALI GROUP SUPERANNUATION PLAN (Group, Non Linked, Participating, Savings, Pension Insurance Plan)

(UIN 133N043V03)

Master Policy No.:

Name of Policyholder:

Name of Superannuation scheme:

Type of Scheme: Defined Contribution / Defined Benefit

Type of Product: Group non linked participating Savings, Pension Insurance product

Names of trustees/

Authorised Signatories:

being the trustees of the XXX Superannuation scheme at the time this policy commenced

Name of Employer:

Date of Commencement/: Policy Effective Date

| Annual Renewal Date: | | _ and | annually thereafter |
|----------------------|--|-------|---------------------|
| | | | |

Initial Number of Members:

Contribution: Rs.

Due date/s of Contributions: On ______of ______ every year hereafter

Initial Contribution instalment(s) of Rs._____ each to be received further annually over next ____ years

Benefit & Scheme Rules:

It is hereby clarified that the liability of Superannuation lies with the Master Policyholder alone and the Company is merely managing the funds .In the event of any shortfall in the Policy Account the same shall be replenished by the Policyholder.

IMPORTANT: On the examination of the policy, if the Policyholder notices any mistake, the Policy Bond should be returned to the Company for correction

Signed for and on behalf of Future Generali India Life Insurance Company Limited at Mumbai this _____ day of _____

Authorised Signatory:



Part A – Definitions

"Bonus" is an earning which will be declared from the surplus of participating Group Superannuation Fund of the Company. Bonus will be declared at the end of every financial year. The declared bonus amount will be credited to the policy account. The amount once credited to the policy account will be guaranteed. Bonus declared shall be non-zero positive bonus.

"Date of Commencement"/"Policy Effective Date" is the start date of the policy as shown in the Schedule.

"Eligibility Conditions" are the conditions which entitle an employee of the employer to become a member of the scheme as per trust deed and rules of the scheme.

"Financial Year" is the year starting from the 1st of April of a year and ends on the next following 31st of March.

"IRDAI" means the Insurance Regulatory and Development Authority of India established under sub-section (1) of section 3 of the Insurance Regulatory and Development Authority Act, 1999.

"**Member**" is a person who has been admitted to membership of the Superannuation scheme and is entitled to benefits as per scheme rules.

"**Policy Account** " is an account of the policy maintained by the Company to which contributions received, bonus (if any) are credited, benefits paid are debited.

"**Policy Anniversary**" is the date falling exactly after 12 months from the commencement date of the policy and on the same day of every year thereafter.

"**Sum Assured**" means an absolute amount of benefit which is guaranteed to become payable on death of the member.

"Policy Term": This is a yearly renewable plan

"Superannuation Scheme" is the scheme whose particulars are given in the Schedule and which is constituted to provide Superannuation benefits to its members and beneficiaries.

"Surrender" means complete withdrawal/termination of the entire policy

"Surrender Value" means an amount, if any, that becomes payable in case of surrender in accordance with the terms and conditions of the policy

"Trust Deed and Rules" is the legal document between the Policyholder and the employer where the deed establishes, regulates or amends the trust and the rules which



form part of the trust deed specifying eligibility conditions, details of contributions and benefits etc in respect of members and beneficiaries of the scheme.

"Trustees" are the owners of this policy and whose particulars are given in the Schedule.



Part B – Member Participation and Termination

All members eligible as per the scheme rules will participate in the benefits under this policy. The policy holder shall provide such particulars of the members as the Company may require at the time of introduction of the scheme.

New members / Additions

The policy holder will intimate the particulars by 10th of the following month of the new entrants (additions) in to the scheme during a calendar month after the date of the commencement (as stated in the schedule) of this policy.

Members who cease employment / deletions

The policy holder will intimate the particulars by 10th of the following month of members who cease membership of the scheme (deletions) during a calendar month after the date of commencement (as stated in the schedule) of this policy.

The Policy holder will intimate the name, date of entry/exit and such other particulars in respect of additions and deletions as desired by the Company from time to time.

Member Record

The Policy holder will provide an updated membership record every year at the time of renewal of the scheme which will include the additions and deletions of members. In case of a defined contribution scheme , the Policyholder shall provide an updated record each time there is an addition to contribution in any member-level account.

Termination of Participation:

A member will cease to participate for the benefits under the policy on the earliest of

- a) the date on which the member ceases to be a member of the scheme
- b) the date on which the member ceases to satisfy eligibility conditions as per rules of the scheme
- c) the date on which the policy is surrendered
- d) the date of termination of this policy





Part C – General Provisions as to Benefits & Charges

Policy Account Value

The policy account value basically depicts the accrual to the policyholder.

The Company shall maintain a Policy Account of the policy to which will be credited

- all the contributions received from the trustees on the date when such contributions were received by the Company;
- amounts transferred in from a former Superannuation scheme with effect from the date such benefits were received by the Company; and
- annual bonus, if any.

Further, the Policy Account will be debited with:

- all benefits as defined in the scheme rules paid in respect of members as on the date when paid by the Company;
- taxes, duties or surcharges of whatever description levied by any statutory authority;
- interest or late fee, if any, payable on the benefits (not applicable for defined contribution schemes)
- Surrender penalty, if any

Annual bonus will be credited to the policy account

Separate member-level accounts shall be maintained under defined contribution schemes.

Investment of Policy Account

The Company will invest the amount in the policy/member account as per the provisions contained in the Income Tax Rules / IRDAI Regulations.

Participation in profits and Bonus

This policy does participate in the surplus earnings, if any, of participating group superannuation fund of the Company from the commencement date of the policy. It gets a share of the profits emerging from the company's participating group superannuation fund in the form of bonuses. The bonuses are declared as a percentage rate which will apply on the policy account value.

Bonus will be declared at the end of every financial year. The declared bonus amount will be credited to the policy account. The amount once credited will be guaranteed.

Annual and interim bonus declared shall non-zero positive bonus.

The company shall keep separate accounts of all receipts and payments in respect of each policy.



Assured Benefits:

Assured benefit is equal to non-zero positive rate of return on premium paid excluding applicable taxes, from date of payment to date of vesting.

Assured Benefit payable on exit shall be maintained by declaring annual and interim bonuses which shall be non-zero positive bonus.

• Defined Benefit Scheme:

In cases where defined benefits are subscribed to by the master policyholder, where the scheme does not maintain individual member accounts and only maintains a Pension fund, the assured benefit shall be applicable on the entire Pension fund available with the insurer. The assured benefit shall also be available on death of every member.

• Defined Contributions Scheme:

In cases where defined contributions are subscribed to by the master policyholder, where the scheme maintains individual member accounts, the assured benefit shall be applicable on each of such individual accounts.

Payment of Benefits

Unless otherwise directed in writing by the Policyholder, all benefits except surrender benefit will be calculated in accordance with the trust deed and rules of the Scheme. The surrender benefit will be equal to policy account value less surrender penalty as given in "Part C – Surrender Value" section of this policy bond

The Company's liability under this policy, at any time, will be limited to the amount lying in the policy/member account.

All benefits shall be paid to the Policyholder of the Superannuation scheme unless the Policyholder directs the Company to pay benefits directly to the member or the member's beneficiaries.

All the payments shall be made by the Company on the instructions of the Policyholder and the Company will not be liable for any wrong payments made.

All payments in respect of the benefits shall be paid by the Company from the policy/member account only. The liability of the Company, at all times, shall be limited to the extent of the funds available in the policy/member account. If the funds in the policy account are inadequate to pay the benefits to the members, the policyholder shall make an additional contribution as per the provisions of Part D of this policy.

For exits on account of death, retirement or any other exit allowed in accordance with the scheme rules as agreed at the inception of the contract with master policyholder, the insurer shall make payments from the Pension funds, subject to availability of such funds, as per the terms of the scheme rules applicable to the member who is exiting.

Except for exits as mentioned in the scheme rules, no other withdrawals shall be allowed.

Where the master policyholder maintains Pension funds with more than one insurer, the master policyholder shall have the option to choose any insurer to purchase available annuity.

Sum Assured (Risk cover)

There is no risk cover in this product. All benefits will be paid as per the scheme rules.

Variation in benefits under the policy

Any variation in the benefits under this policy shall be given effect to by endorsements or by suitable exchange of documents under the signature of a duly authorised officer of the Company.

Exclusion

Suicide Exclusion is not applicable. All benefit payments will be paid as per the scheme rules.

Information required for payment of benefits

The Company will pay benefits under this policy on receipt of:

- A notice where the benefit is payable as per the scheme rules in respect of a member due to his resignation, retirement, death, disability etc. This notice must be signed by the trustees themselves or the authorised persons whom the trustees have delegated this responsibility. This notice shall be a valid discharge for the payment made by the Company
- The notice will give particulars about the member (such as his name, membership number, date of birth, date of joining service, date of exit, cause of exit etc) for whom the benefit is payable, The policy holder making a claim shall also provide a calculation sheet computing the benefit payable in respect of the member
- Where the cause of exit is the death of a member covered under the scheme, a certified copy of the death certificate shall also be provided
- Proof of existence and identity of the member or beneficiary, as the case may be, as required by the Company
- Other information or requirements as the Company may find necessary to call for.

Benefit statements

Company will provide a benefit statement along with the benefit payments. Each benefit statement will provide details about the member and calculation of benefits payable in respect of such member. These statements are meant for the members/beneficiaries. The policy holder should check the details of member record and calculations of benefit from original records of the employer before the benefits are passed on to the member/ beneficiary.



Nomination of Beneficiary

Nomination will be allowed as per section 39 of the Insurance Act, 1938, as amended from time to time, for receipt of superannuation benefits in the event of the death of the member. Any nomination or change of nomination of the beneficiaries will be maintained by the Employer or Policyholder. In the event of death of the member, the Company will pay the superannuation benefits to the Employer or Policyholder. In case the superannuation benefits are to be paid directly to the member's beneficiary, the Employer or Policyholder should advise the Company in writing of this request alongwith the beneficiary details.

Please note the terms of Section 39 of the Insurance Act, 1938, as amended from time to time, which states as follows:

(1) The holder of a policy of life insurance on his own life, may, when effecting the policy or at any time before the policy matures for payment, nominate the person or persons to whom the money secured by the policy shall be paid in the event of his death:

Provided that, where any nominee is a minor, it shall be lawful for the policyholder to appoint any person in the manner laid down by the insurer, to receive the money secured by the policy in the event of his death during the minority of the nominee.

(2) Any such nomination in order to be effectual shall, unless it is incorporated in the text of the policy itself, be made by an endorsement on the policy communicated to the insurer and registered by him in the records relating to the policy and any such nomination may at any time before the policy matures for payment be cancelled or changed by an endorsement or a further endorsement or a will, as the case may be, but unless notice in writing of any such cancellation or change has been delivered to the insurer, the insurer shall not be liable for any payment under the policy made bona fide by him to a nominee mentioned in the text of the policy or registered in records of the insurer.

(3) The insurer shall furnish to the policyholder a written acknowledgment of having registered a nomination or a cancellation change thereof, and may charge a fee as may be specified by regulations for registering such cancellation or change.

(4) A transfer or assignment of a policy made in accordance with section 38 shall automatically cancel a nomination:

Provided that the assignment of a policy to the insurer who bears the risks on the policy at the time of the assignment, in consideration of a loan granted by that insurer on the security of the policy within its surrender value, or its re-assignment on repayment of the loan shall not cancel a nomination, but shall affect the rights of the nominee only to



the extent of the insurer's interest in the policy:

Provided further that the transfer or assignment of a policy, whether wholly or in part, in consideration of a loan advanced by the transferee or assignee to the policyholder, shall not cancel the nomination but shall affect the rights of the nominee only to the extent of the interest of the transferee or assignee, as the case may be, in the policy:

Provided also that the nomination, which has been automatically cancelled consequent upon the transfer or assignment. the same nomination shall stand automatically revived when the policy is reassigned by the assignee or retransferred by the transferee in favour of the policy-holder on repayment of loan other than on a security of policy to the insurer.

(5) Where the policy matures for payment during the lifetime of the person whose life is insured or where the nominee or, if there are more nominees than one, all the nominees die before the policy matures for payment, the amount secured by the policy shall be payable to the policy-holder or his heirs or legal representatives or the holder of a succession certificate, as the case may be.

(6) Where the nominee or if there are more nominees than one, a nominee or nominees survive the person whose life is insured, the amount secured by the policy shall be payable to such survivor or survivors.

(7) Subject to the other provisions of this section, where the holder of a policy of insurance on his own life nominates his parents, or his spouse or his children, or his spouse and children, or any of them, the nominee or nominees shall be beneficially entitled to the amount payable by the insurer to him or them under sub-section (6) unless it is proved that the holder of the policy, having regard to the nature of his title to the policy, could not have conferred any such beneficial title on the nominee.

(8) Subject as aforesaid, where the nominee, or if there are more nominees than one, a nominee or nominees, to whom sub-section (7) applies, die after the person whose life is insured but before the amount secured by the policy is paid, the amount secured by the policy, or so much of the amount secured by the policy as represents the share of the nominee or nominees so dying (as the case may be), shall be payable to the heirs or legal representatives of the nominee or nominees or the holder of a succession certificate, as the case may be, and they shall be beneficially entitled to such amount.

(9) Nothing in sub-sections (7) and (8) shall operate to destroy or impede the right of any creditor to be paid out of the proceeds of any policy of life insurance.

(10) The provisions of sub-sections (7) and (8) shall apply to all policies of life insurance maturing for payment

after the commencement of the Insurance Laws (Amendment) Act, 2015.

(11) Where a policy-holder dies after the maturity of the policy but the proceeds and benefit of his policy has not been made to him because of his death, in such a case, his nominee shall be entitled to the proceeds and benefit of his policy.

(12) The provisions of this section shall not apply to any policy of life insurance to which section 6 of the Married Women's Property Act, 1874, applies or has at any time applied:

Provided that where a nomination made whether before or after the commencement of the Insurance Laws (Amendment) Act, 2015, in favour of the wife of the person who has insured his life or of his wife and children or any of them is expressed, whether or not on the face of the policy, as being made under this section, the said section 6 shall be deemed not to apply or not to have applied to the policy.

Proof of age

The Company may require proof of age of the member before paying any benefits.

Surrender Value

The Master Policyholder can surrender the policy at any time by giving a written request. The surrender penalty will be equal to 0.05% of the total policy account value subject to a maximum of Rs 500,000/- if the policy is surrendered within third annual renewal of the policy. Hence, the surrender value will be equal to the policy account value *less* the surrender penalty, if any.

If the policy is surrendered after the third annual renewal, then there will be no surrender penalty.

Once the policy is surrendered and the surrender value is paid, the Company shall cease to be liable for any benefit payable under the policy. Once the policy is terminated, it cannot be reinstated.

Except for exits as mentioned in the scheme rules, no other withdrawals shall be permitted.

Market Value Adjustment (MVA)

No MVA shall be applied under this product.

Termination of Master Policy



The Policyholder should maintain a minimum balance of Rs 100,000/- in the policy account.

The company will send a notice to the Policyholder if the policy account value falls below Rs 100,000/-. The Policyholder can get a valuation done as per extant accounting standards governing the measurement of long term employee benefits to see if the scheme is underfunded or not.

If the scheme is not underfunded, the policy will continue as it is.

If the scheme is underfunded, then the company will give the Policyholder 30 day's period to pay additional contributions to address the underfunding of the scheme. If, the additional contributions are not received within the stated period, then, the company will terminate the policy and refund the entire amount available in the policy account to the Policyholder. Thereafter the Company shall cease to be liable for any benefit payable under the policy. Once policy is terminated, it cannot be reinstated.

Charges

- Premium Allocation Fee Nil
- Policy Administration Fee Nil
- Policy Account Management Fee Nil
- Partial Withdrawal Fee Nil (Not allowed under the policy except of exits as mentioned in the scheme rules)
- Surrender Penalty / Charge As stated above.
- Market Value Adjustment Nil

Variability of Charges

- Premium allocation fee, policy administration fee, policy account value management fee, MVA & partial withdrawal fee are nil and the same are guaranteed.
- The surrender penalty is guaranteed

Any change in amount or rate of charges as stated above will be subject to IRDAI approval.



Part D – General Provisions as to Contributions

Contributions as mentioned hereunder shall be made by the Policyholder to the Company.

The contribution with respect to this policy shall be made in accordance with the funding requirements as per the scheme rules. The trustee or employer or policyholder should confirm that such funding is required as per extant accounting standard governing the measurement of long term employee benefits.

Transferring Superannuation benefits from other Superannuation schemes

Where the scheme rules allow, members can transfer-in Superannuation amounts from a former Superannuation scheme of the members.



Application of contributions

All contributions received from the Policyholder by the Company shall be credited to the policy account maintained by the Company for this policy.

In case of a defined contribution scheme where separate member-level accounts are maintained, the contributions received shall be credited to the individual member accounts as directed by the Policyholder.

If the Policyholder fails to observe or comply with any of the terms and conditions of this policy, the Company may decline to accept further contributions thereafter and thereupon the Policyholder shall be deemed to have discontinued payment of premiums hereunder.



Part E – Other General Provisions

Policy Account Statement

The Company will provide the Policyholder with an annual transaction account as at the end of each financial year showing a summary of the financial transactions relating to the policy/member account.

In case of a defined contribution scheme where separate member-level accounts are maintained, the Company will provide each of the individual members with annual transaction account as at the end of each financial year showing a summary of the financial transactions relating to each of the individual member-level accounts.

The annual transaction account will include:

- opening balance at the beginning of the financial year;
- contributions (including Superannuation transfers, if any) received during the financial year
- benefits paid on death, disablement, resignation, retirement etc of the members during the financial year, wherever applicable
- bonus credited at the end of the financial year
- closing balance at the end of the financial year.

Payment of taxes

Where the Company is liable to deduct any tax, levy or any other duties on the benefits to be made under this policy pursuant to any directive from the Government or any competent authority, the Company shall deduct appropriate amounts for that purpose from the respective benefits and shall not be liable to the Policyholder and / or to the beneficiaries for the sums so deducted.

Authority to pay benefits

The Policyholder may authorise the Company to pay benefits directly to members, their beneficiaries (the later being to the person(s) to whom a benefit on death is to be paid) or an approved Superannuation scheme. Such authority must be provided in writing and until this authority is received, the Company will not pay any benefits to any other person(s) other than the Policyholder.

Misstatement

The Company solely relies upon any statements and particulars furnished by the Policyholder and disclaims any liability in addition to the scheme rules applicable under the policy, that it may be required to bear on account of any misstatement, error/omission or submission of erroneous data by the policyholder. The Company reserves the right to inspect or call for such records in original as in the opinion of the company may have a bearing on the contribution payable and/or benefits under the policy as per the scheme rules.

Free look provision



The Master Policyholder has a period of 15 days from the date of the receipt of the policy document to review the terms and conditions of the policy and where the Policyholder disagrees to any of the terms and conditions, he/she has the option to return the policy stating the reasons for his/her objection. The Company will refund the policy account value after the deduction of the policy stamp charges

Lapse/Termination

Please refer Part B – "Termination of Participation" and Part C – "Termination of Master Policy"

Revivals

Not applicable as this is a yearly renewable contract

Partial Withdrawal

Not allowed under the policy except for exits as mentioned in the scheme rules

Loans

No loans are available under this policy.

Assignment

This policy cannot be assigned. Further, the benefits payable hereunder are strictly personal and cannot be assigned, changed or alienated in any way by the members or the beneficiaries.

Endorsements

The terms and conditions of this policy cannot be waived or changed except by endorsement approved and signed by authorised officials of the Company.

The Company must be notified whenever there is any change of trustees and/or in the Trust Deed and Rules of the Superannuation scheme underlying this policy. The Company will not be liable for any error in calculating or paying benefits where such changes have not been provided by the Policyholder and endorsed by the Company under this policy.

Applicable legislation

This policy is subject to the legislation prevailing in India. 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.

Applicable currency

All amounts due under this policy are payable in Indian Currency at the Office of the Company situated at Mumbai, but the Company at its sole discretion may fix an alternative place of payment for the claim at any time before or after the claim arises.

Grievance / dispute reconciliation

(i) 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: care@futuregenerali.in

Website of the Company: life.futuregenerali.in

(ii) 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: 022 41514712 Toll Free No: 1800-102-2355 Email: <u>gro@futuregenerali.in</u>

Website of the Company: life.futuregenerali.in Contact No : 022-41514500

In case you have not received any response within 30 days from the date filing of complaints with us, you can approach Insurance Ombudsman as per the details specified in Annexure I

You may also reach out to Your nearest branch. You can locate Your nearest branch on Our website at https://life.futuregenerali.in/customer-service/branch-locator/

iii) In case you are not satisfied with the decision / resolution of the Company, you may approach the IRDAI (Insurance Regulatory and Development Authority of India) 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 IRDAI Grievance Cells.

IRDAI 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 of India,

Sy.No.115/1, Financial District, Nanakramguda, Gachibowli, Hyderabad – 500 032 Fax 91 – 40 – 66789768

For Insurance Ombudsman:

- 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;
 - 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;
 - (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 III 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 Toll Free Number: 1800 102 2355 Email: care@futuregenerali.in.

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.

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, as amended from time to time, and/or rules/regulations made there under as may be amended from time to time.

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

- (1) No policy of life insurance shall be called in question on any ground whatsoever after the expiry of three years from the date of the policy, i.e., from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later.
- (2) A policy of life insurance may be called in question at any time within three years from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later, on the ground of fraud:

Provided that the insurer shall have to communicate in writing to the insured or the legal representatives or nominees or assignees of the insured the grounds and materials on which such decision is based.

Explanation I. – For the purposes of this sub-section, the expression "fraud" means any of the following acts committed by the insured or by his agent, with 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 specially declares to be fraudulent.

Explanation II. – Mere silence as to facts likely to affect the assessment of the risk by the insurer is not fraud, unless the circumstances of the case are such that regard being had to them, it is the duty of the insured or his agent keeping silence, to speak, or unless his silence is, in itself, equivalent to speak.

(3) Notwithstanding anything contained in sub-section(2), no insurer shall repudiate a life insurance policy on the ground of fraud if the insured can prove that the mis-statement of or suppression of a material fact was true to the best of his knowledge and belief or that there was no deliberate intention to



suppress the fact or that such mis-statement of or suppression of a material fact are within the knowledge of the insurer:

Provided that in case of fraud, the onus of disproving lies upon the beneficiaries, in case the policyholder is not alive.

Explanation. - A person who solicits and negotiates a contract of insurance shall be deemed for the purpose of the formation of the contract, to be the agent of the insurer.

(4) A policy of life insurance may be called in question at any time within three years from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later, on the ground that any statement of or suppression of a fact material to the expectancy of the life of the insured was incorrectly made in the proposal or other document on the basis of which the policy was issued or revived or rider issued:

Provided that the insurer shall have to communicate in writing to the insured or the legal representatives or nominees or assignees of the insured the grounds and materials on which such decision to repudiate the policy of life insurance is based.

Provided further that in case of repudiation of the policy on the ground of mis-statement or suppression of a material fact, and not on the ground of fraud, the premiums collected on the policy till the date of repudiation shall be paid to the insured or the legal representatives or nominees or assignees of the insured within a period of ninety days from the date of such repudiation.

Explanation. – For the purposes of this sub-section, the misstatement of or suppression of fact shall not be considered material unless it has a direct bearing on the risk undertaken by the insurer, the onus is on the insurer to show that had the insurer been aware of the said fact no life insurance policy would have been issued to the insured.

(5) Nothing in this section shall prevent the insurer from calling for proof of age at any time if he is entitled to do so, and no policy shall be deemed to be called in question merely because the terms of the policy are adjusted on subsequent proof that the age of the life insured was incorrectly stated in the proposal.

Prohibition of rebates



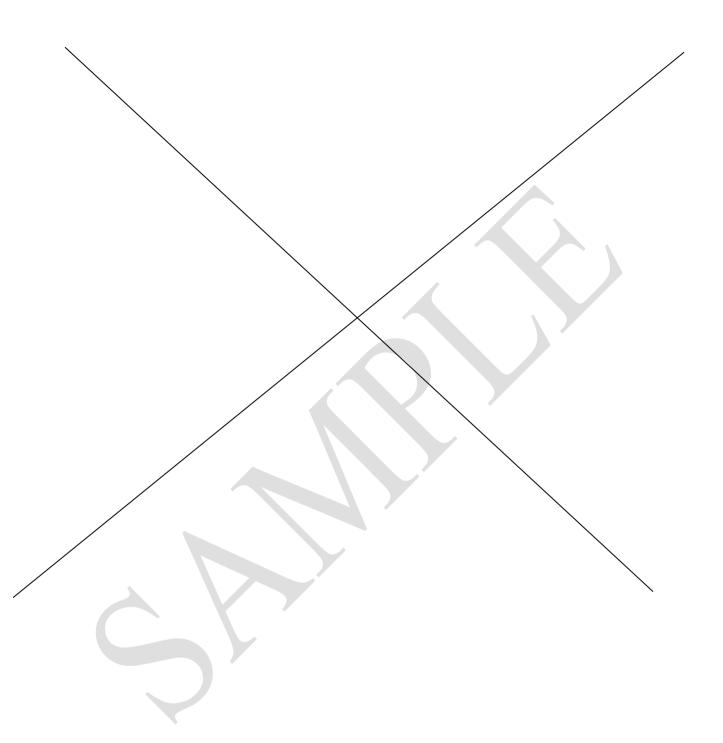
Section 41 of the Insurance Act 1938 as amended from time to time states:

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.

(2) Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakh rupees."







Future Generali India Life Insurance Company Limited

Registration No. 133

| LIST OF INSURANCE OMBUDSMEN | | | | |
|---|---|--|--|--|
| CONTACT DETAILS | JURISDICTION | | | |
| CONTACT DETAILS | (Union Territory, District) | | | |
| AHMEDABAD | | | | |
| Office of the Insurance Ombudsman, | | | | |
| 2nd floor, Ambica House, | | | | |
| Near C.U. Shah College, | Gujarat, | | | |
| 5, Navyug Colony, Ashram Road, | Dadra & Nagar Haveli, | | | |
| Ahmedabad - 380 014. | 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-19 | | | | |
| Ground Floor, 19/19, 24th Main Road, | Karnataka. | | | |
| JP Nagar, Ist Phase, | | | | |
| 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. | Orissa. | | | |
| Tel.: 0674 - 2596461 / 2596455 | | | | |
| 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 & | | | |
| Chandigarh – 160 017. | Kashmir and Union territory of Chandigarh. | | | |
| Tel.: 0172 - 2706196 / 2706468 | rashini una emor territory of charagani. | | | |
| Fax: 0172 - 2708274 | | | | |
| Email: bimalokpal.chandigarh@ecoi.co.in | | | | |
| CHENNAI | | | | |
| Office of the Insurance Ombudsman, | | | | |
| Fatima Akhtar Court, 4th Floor, 453, | | | | |
| Anna Salai, Teynampet, | Tamil Nadu, | | | |
| CHENNAI – 600 018. | Pondicherry Town and Karaikal (which are part of Pondicherry). | | | |
| Tel.: 044 - 24333668 / 24335284 | | | | |
| Fax: 044 - 24333664 | | | | |
| Email: bimalokpal.chennai@ecoi.co.in | | | | |
| Eman. Dimatokpar.chemilai@ecoi.co.m | | | | |

Annexure- II LIST OF INSURANCE OMBUDSMEN

Future Generali India Life Insurance Company Limited



Registration No. 133

| | 1 | | | |
|--|--|--|--|--|
| DELHI | | | | |
| Office of the Insurance Ombudsman, | | | | |
| 2/2 A, Universal Insurance Building, Asaf Ali | | | | |
| Road, | Delhi. | | | |
| New Delhi - 110 002. | | | | |
| 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, Nagaland and Tripura. | | | |
| Fax: 0361 - 2732937 | | | | |
| 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. | Rajastitali. | | | |
| 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) | | | |
| Opp. Cochin Shipyard, M. G. Road, | Lakshadweep (b) Mahe-a part of Union Territory | | | |
| Ernakulam - 682 015. | of Pondicherry. | | | |
| Tel.: 0484 - 2358759 / 2359338 | | | | |
| Fax: 0484 - 2359336 | | | | |
| Email: bimalokpal.ernakulam@ecoi.co.in | | | | |
| KOLKATA | | | | |
| Office of the Insurance Ombudsman, | | | | |
| Hindustan Bldg. Annexe, 4th Floor, 4, C.R. | West Bengal, | | | |
| Avenue, | Sikkim, | | | |
| KOLKATA - 700 072. | Andaman & Nicobar Islands. | | | |
| Tel.: 033 - 22124339 / 22124340 | | | | |
| Fax : 033 - 22124341 | | | | |
| Email: bimalokpal.kolkata@ecoi.co.in | | | | |



| 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. |
| 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. |