



Policy Schedule

<b>Future Generali Wealth Protect Plan</b>			
<b>Individual, Non Participating Unit Linked Life Insurance Plan</b>			
UNDER THIS POLICY THE INVESTMENT RISK IN THE INVESTMENT PORTFOLIO IS BORNE BY THE POLICY HOLDER.			
THIS POLICY SCHEDULE IS PART OF THE POLICY OF ASSURANCE, AND IS SUBJECT TO AND HAS TO BE READ ALONG WITH THE ATTACHED POLICY DOCUMENT.			
POLICY NUMBER:			
LIFE ASSURED'S NAME:			
CUSTOMER ID:			
POLICYHOLDER'S NAME:			
ADDRESS:			
<b>DATE OF BIRTH:</b>	<b>AGE:</b>	<b>AGE ADMITTED (Y/N):</b>	
<b>APPLICATION DATE:</b>	<b>POLICY COMMENCEMENT DATE</b>	:	
<b>FREQUENCY:</b>	<b>RISK COMMENCEMENT DATE:</b>		
<b>NOMINEE NAME :</b>	<b>RELATIONSHIP:</b>	<b>Age of Nominee:</b>	<b>APPOINTEE(in case nominee mentioned is a minor):</b>

Fund Details

We will invest your basic premiums, net of charges in each of the funds in the proportions detailed in your application form unless you alter these later by giving written request to the company.

SCHEDULE OF BENEFITS AND PREMIUMS						
BENEFIT	PRODUCT CODE	SUM ASSURED (Rs.)	PREMIUM (Rs.)	POLICY TERM (years)	LAST PREMIUM DUE-DATE	MATURITY DATE
Future Generali Wealth Protect Plan	UIN					
	UIN					
<b>Total Installment Premium :</b>						
PREMIUM DUE DATES :						
<b>Special Provisions:</b>						



**Future Generali India Life Insurance Company Limited**

Registration No. 133

Only the riders mentioned above (if any) are applicable to this policy.  
Other rider information given in policy provisions do not apply.  
Applicable Taxes as applicable at current rate, is subject to Tax Laws and is subject to change

As per section 10 (10D) of the Income Tax Act, 1961; any sum received under a life insurance policy will only be exempt from tax provided the annual premium payable in any of the years during the term of the policy does not exceed 10% of the actual capital sum assured.

Authorized Signatory

Agent Name  
Agent Code  
Contact Details

Chief - Operations

Future Generali India Life Insurance Company Limited

The stamp duty of Rs. XX.00 (XXXXX) paid by Deface Number.XXXXX dated DD/MM/YYYY. Government Notification Revenue and Forest Department No. Mudrank 2004/4125/CR 690/M-1, Dt.31/12/2004.