

**Shriram Life Insurance Company Limited**

**Plan Name: Shriram Life Pradhan Mantri Jeevan Jyoti Bima Yojana & UIN : 128G058V01 Annexure II**

A Group Non-Linked Non-Participating Life Insurance Plan

**PART A:**

Date: \_\_\_/\_\_\_/\_\_\_

**Agency Details**

Agency Category :

Agent Name :

Agent (cy) Code :

Agent Contact No :

Group Policy No. \_\_\_\_\_

Mr/Mrs/Ms. \_\_\_\_\_

Address:

**Landmark:**

**Mobile No.:**

Dear \_\_\_\_\_,

**Greetings from Shriram Life!!**


We are pleased to inform you that your proposal has been accepted and we thank you for preferring us as your life insurance partner. We also thank you for joining us on this journey to create prosperity.

If you require clarification on any point, please feel free to contact Shriram Life Insurance Company Limited. Plot no 31-32, Ramky Selenium, Financial district, Gachibowli, Hyderabad - 500031. Phone: 040-23009400. Kindly quote your Policy No. \_\_\_\_\_ in all correspondences.

We are enclosing herewith the first premium receipt, a copy of your proposal form and your Policy Bond. If you disagree with any of the terms and conditions, you are at liberty to return the policy stating the reasons for your objections within 15 days (30 days in case the business is sourced through distance marketing) of its receipt and we shall cancel the policy under the provisions of free-look cancellation as per the regulator's mandate.

We assure you the best of our services and look forward to the pleasure of partnering with you for many years to come.

Kind Regards,



(G. Vaidyanathan)

Vice president - Corporate Services

## Shriram Life Insurance Company Limited

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### WHEREAS

1. The Shriram Life Insurance Co. Ltd (here in after called 'SLIC ') has received a proposal from the Group Policyholder , as hereinafter defined , requesting to grant the benefits as hereinafter described and to effect the necessary Assurance thereof;
2. SLIC has received from the Group Policyholder, statements and particulars of the members as hereinafter defined;
3. The Group Policyholder have agreed to furnish such statements and particulars of the members as may in future be required by SLIC from time to time for effecting the assurances;
4. The Group Policyholder have also declared and agreed that the said proposal and the statements and particulars shall be the basis of the policy; and
5. The Group Policyholder have paid the premium of Rs.«Risk\_premium»/- in respect of «No\_of\_lives»members for a total Sum Assured Rs.«Total\_Cover» /-
6. "Consolidated Stamp Duty (Rs. «Stamp\_duty» Policy Insurance Stamps) has been paid to The Commissioner & Inspector General of Registration and Stamps, A.P., Hyderabad. Permission obtained Procs No «process\_No»dated «date»

### NOW THIS POLICY WITNESSETH AS FOLLOWS:

1. Subject to the payment of appropriate premiums specified herein and on submission of proof of the happening of the contingencies stated in respect of the members SLIC shall pay the benefits to the beneficiary- the Group Policyholder in accordance with the terms, provisions and conditions hereof.
2. All monies payable to or by SLIC hereunder shall be paid at the Head Office of SLIC at Hyderabad and the assurances effected hereunder shall be expressed in the Indian rupees. A Discharge or receipt of the Group Policyholder or on their behalf of any person duly Authorized in writing by the Group Policyholder shall be a good, valid and sufficient discharge to SLIC and in receipt of any payment to be made by SLIC hereunder.
3. Any amendment in the terms and conditions of this policy shall be given effect to the policy signed by an Authorized Officer of SLIC.
4. The provisions hereinafter contained shall form part of this policy as fully as if recited over the signature affixed hereto.

Dated at Hyderabad this «Dt\_adj»

Examined:



For and on behalf of

SHRIRAM LIFE INSURANCE COMPANY LTD.

**Shriram Life Insurance Company Limited**

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**POLICY SCHEDULE**

- Name and Address of the Master Policyholder:
- Employer/Trustees Name:
- Date of Proposal:
- Effective date of Policy/ Date of commencement of policy
- Annual Renewal Date:
- Mode of premium payment:
- Total Sum Assured:
- Life insurance cover (SA) per member : Rs. 200000 (fixed)
- Total no. of members at inception

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### PART B: Rules & rules of the scheme

#### 1. DEFINITIONS:

In these Rules, the following words and expressions shall unless repugnant to the context, have the following meanings:-

i) The Master Policyholder shall be '\_\_\_\_\_BANK, a Body Corporate constituted under the Banking Companies(A&TU) Act,1970. "BANK" shall mean '\_\_\_\_\_BANK.

ii) "THE COMPANY" shall mean the Shriram Life Insurance Company Limited.

iii) "THE SCHEME" shall mean 'PRADHAN MANTRI JEEVAN JYOTI BIMA YOJANA' for the Savings Bank Account Holders of 'BANK'.

iv) "THE RULES" shall mean the Rules of the Scheme as set out below and as amended from time to time.

v) "THE MEMBER" shall mean a Savings Bank Account Holder who has been admitted to benefits of

the Scheme and on whose life an assurance has been or is to be effected in accordance with these Rules.

vi) "EFFECTIVE DATE" shall mean 1st of June, 2015, the date from which the Scheme commences.

vii) "ANNUAL RENEWAL DATE" shall mean, in relation to the Scheme 1st of June 2016 and 1st of June in each subsequent year.

viii) "ENTRY DATE" shall mean 01/06/2015 in respect of members enrolled upto 31/05/2015 and the date of remittance of premium in respect of other members.

ix) "TERMINAL DATE" shall mean in respect of each Member the Annual Renewal Date following the date on which completes the age of 55 or the

member closes his account with the Bank or discontinuance of premium payment whichever is earlier.

x) "THE ASSURANCE" shall mean the particular Assurance to be effected on the life of the Member.

xi) "THE BENEFICIARY" shall mean the person or persons who has/have been appointed by the Member as Nominee and whose name or names have been entered in the Bank Records.

2. The "Bank" will act for and on behalf of the Members in all matters relating to the Scheme and every act done by agreement made with and notice given to the Company by the Bank shall be binding on the Members.

#### 3. ELIGIBILITY:-

(a) During Enrollment Period : The Savings Bank Account holders who are aged between 18 years completed and 50 years (completed) and who have given the consent to join the scheme.

After Enrollment period: The Savings Bank Account holders who are aged between 18 years completed and 50 years (completed) and who have given the consent to join the scheme along with self-declaration of good health.

(b) No member shall withdraw from the scheme while he is still an eligible member satisfying the conditions of eligibility described above, until a letter is received from him in writing by the Branch of the Bank he originally enrolled in as a member, expressing his intent to withdraw from the scheme. Such a withdrawal will be effective from the next renewal date.

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### 4. ADMISSION OF AGE:

Age as recorded by the Bank as per the Age Proof submitted by the Savings Bank Account holder.

### 5. EVIDENCE OF HEALTH:

Satisfactory evidence of health as required by the Company shall be furnished by every eligible member, at the time of his entry into the Scheme, after the 'Enrollment Period', as incorporated in the "Consent-cum-Declaration Form" for joining the scheme.

### 6. PREMIUM:

Premium to be deducted from member's SB Account. The premium is Rs.330/- irrespective of date of entry i.e. during enrollment period or after that date during the first year. Renewal premium is chargeable as per the rate decided from time to time on Annual Renewal dates.

### 7. ASSURANCE:

An assurance of Rs.2,00,000/- on death of the insured member is payable to the Nominee

### 8. BENEFITS ON DEATH PRIOR TO TERMINAL DATE :

Upon the death of the Member prior to Terminal Date, the sum assured under the Assurance shall be payable to the nominated Beneficiary, provided the assurance is kept in force by payment of premium for that member

### 9. TERMINATION OF ASSURANCE:

The Assurance on the life of a Member shall terminate on an Annual Renewal Date upon happening of any of the following events and no benefit will become payable there under:-

a. On attaining age 55 years (age neared birthday) on annual renewal date

b. Closure of account with the Bank or insufficiency of balance to keep the insurance in force

### 10. SUSPENSION OF RISK:

If the insurance cover is ceased due to any technical reasons such as insufficient balance for payment of premium on due date, the same can be reinstated after the grace period on receipt of premium and a satisfactory statement of good health.

### 11. RESTRAINT ON ANTICIPATION OR ENCUMBRANCE:

The benefits assured under the Scheme are strictly personal and cannot be assigned, charged or alienated in any way.

### 12. DISCONTINUANCE OR AMENDMENT OF THE SCHEME:

The "Bank" or "Company" reserves the right to discontinue the Scheme at any time or to amend the Rules thereof on any Annual Renewal Date subject to giving one month's notice. Any amendment to the Rules of the Scheme will be done based on mutual agreement between "Company" and "Bank".

### 13. JURISDICTION:

All Assurances issued under the Scheme shall be Indian Contracts. They will be subject to Indian Laws including the Indian Insurance Act, 1938 as amended, from time to time. All benefits under the Scheme arising out of death of any Member shall be payable in Indian Rupees.

### 14. MEMORANDUM OF UNDERSTANDING:

The Company may enter into a Memorandum of Understanding with the Bank incorporating all the Assurances affected under the scheme.

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### 16. APPOINTMENT OF BENEFICIARY:

Every Member shall nominate spouse, one or more of child/children, dependants to be the Beneficiary. Nomination shall be as per section 39 of Insurance Act, 1938 as amended from time to time. In case the Beneficiary is minor/s, appointee to receive the benefits is to be specified by the Member. The records relating to nomination will be maintained by the Bank in the Register of Members kept by them. In the event of death of the Member, the Benefits will be paid to the Beneficiary nominated by the Member.

### 17. SURRENDER VALUE/ MATURITY BENEFIT:

There will be no Surrender value or Maturity Value payable under the policy.

### 18. CLAIM SETTLEMENT:

On receipt of death intimation, the servicing bank branch shall send the Claim form (annexure 7)

Death Certificate, Discharge form (Annexure 8) and Certificate of Insurance from the nominated Beneficiary and shall send to the Designated Branch of the Bank for preferring the claim with servicing branch of SLIC. On admission of the claim, the claim amount will be paid to the bank account of the nominee with intimation to the designated branch of the Bank. In case of requirements or claim is not accepted, the same will be intimated to designated branch of the Bank

### 19. RATES OF PREMIUM AND CONDITIONS OF ASSURANCE:

The rate of premium and conditions of Assurance under which the Company is prepared to arrange the Scheme shall be subject to an agreement between the Bank and the Company. The conditions of acceptance of risks and rates of premium may be amended by the Company from time to time on any Annual Renewal Date subject to 3 months notice being given to the Bank.

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### PART F: Terms & Conditions

#### F1. Nomination:

The member may at any time during the membership of the scheme may appoint or change a nominee. The group policy holder will keep and update the records with the details of all such nominations. If the nominee is a minor, the member appoints an Appointee to receive and hold the balance death benefits until the nominee becomes a major.

The SLIC is not responsible in registering nominations made under this policy.

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

#### F2. Delay in claim intimation:

Please communicate to us about the claim without any delay. However if there is any delay in claim intimation due to reasons that are beyond the control of claimant then the claim would be considered.

#### F3. Fraud or misrepresentation:

In case of fraud or misrepresentation by the Group Policyholder in respect of any information or declaration, the policy monies payable shall be subject to the fraud or misrepresentation being established by Shriram Life Insurance Company Ltd in accordance with the section 45 of the Insurance Act 1938, as amended from time to time.

If any material information given by the member is found wrong or untrue averment on the basis of which the benefits or assurances have been affected on the life of any member, the particular assurances shall be cancelled by SLIC subject to section 45 of the Insurance Act 1938 as amended from time to time.

#### F4. General Conditions:

- (a). A member shall be admitted to the benefits of this policy with effect from this date of admission as a member of the Group or the effective date of policy whichever is later and the Group Policyholder shall advise the SLIC to this effect and furnish the relevant particulars of the member.

- (b). SLIC shall not be liable for any action taken in good faith upon any statements and particulars furnished by the Group Policyholder which shall be or shall be provided to have been erroneous. Such of the Group Policyholder's records in original as in the opinion of SLIC have a bearing on the benefits provided or the premiums payable hereunder shall be open for inspection by SLIC whenever required. The Group Policyholder shall at the request of SLIC produce the policy whenever required for the purpose of stamping, reference or inspection.
- (c). In any case where SLIC is liable to account to the revenue authorized for income tax or any other duties on the payment to be made under the policy, SLIC shall deduct appropriate amounts for the purpose from the respective payments and shall not be liable to the Group Policyholder for the sums so deducted.
- (d). All disputes which may arise in connection with this policy shall be submitted to the appropriate court or courts having jurisdiction over the city of Hyderabad.
- (e). For claiming the Benefits laid down under part 3 of the schedule the Group Policyholder will have to submit the death certificate in original of the member along with the claim form.

#### Important Sections of Insurance Act

#### F5. Extract from Section 41 of the Insurance Act, 1938 as amended from time to time:

No person shall allow, or offer to allow, either directly or indirectly as an inducement to any person to take out 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.

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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.

Any person making default in complying with the provisions of this section shall be punishable with fine, which may be extending to ten lakhs rupees.

### F6. Extract from section 45 of the Insurance Act, 1938 as amended from time to time:

(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.

(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 policy holder is not alive.

(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 misstatement 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.

(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.



## Shriram Life Insurance Company Limited

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### PART G: Complaints and Grievances

In case you have any Query, Complaint or Grievances

#### First Step:

You can also contact our Customer care on our Toll free no: 1800 3000 6116 & through email id: [customercare@shriramlife.in](mailto:customercare@shriramlife.in)

You may also approach our office at the following address:

#### Officer in charge

Group Insurance dept,  
**SHRIRAM LIFE INSURANCE CO LTD.**  
Plot no. 31-32, Ramky Selenium,  
Financial District, Gachi Bowli,  
Hyderabad,  
Andhra Pradesh-500032

#### Second Step

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:

#### Grievance Redressal Officer,

**1. Shriram Life Insurance Company Limited,**  
Regd Office: Plot no 31-32, Ramky Selenium  
Financial district, Gachibowli  
Hyderabad,  
Andhra Pradesh - 500032  
Contact No: 040-23009400  
Email Id: [grievance.redressal@shriramlife.in](mailto:grievance.redressal@shriramlife.in)

#### 2. At Bank Level:

- i. Branch In-charge / \_\_\_\_\_ (as specified by bank) of the Bank – at Branch level
- ii. The Regional Head / \_\_\_\_\_ (as specified by bank) of the Bank – at Regional Level
- iii. The D/G.M. / \_\_\_\_\_ (as specified by bank) of the Bank – at Head/Corporate Office

#### Third Step

In case you are not satisfied with the decision or resolution of the company, you may approach the Insurance Ombudsman at the address given overleaf, if your grievance pertains to:

- Insurance claim that has been rejected / dispute of a claim on legal construction of the Policy
- Delay in settlement of claim
- Dispute with regard to premium
- Non Receipt of your Insurance Document

The complaint should be made in writing duly signed by the complainant or by his legal heirs with full details of the complaint and contact information of the complainant. As per provision 13 (3) of the Redressal of Public Grievances Rules 1998, the complaint to the Ombudsman can be made:

- Only if the grievance has been rejected by the Grievance Redressal Mechanism of the Insurer
- Within a period of one year from the date of rejection by the Insurer.
- If it is not simultaneously under any litigation.

All communication in relation to this policy shall be addressed to:

**SHRIRAM LIFE INSURANCE CO LTD.**  
Plot no. 31-32, Ramky Selenium,  
Financial District  
Gachibowli, Hyderabad,  
Andhra Pradesh-500032

In case of any grievance under the policy, the address of the Insurance Ombudsman is as under:-

**Office of the Insurance Ombudsman**  
6-2-46, 1st Floor, Main Court Lane  
Opp. Saleem Function Palace, AC Guards  
Lakdi-ka-pool, HYDERABAD -500 004 .

Addresses and contact details of the Insurance Ombudsman along with its area of jurisdiction is mentioned in enclosed **Annexure**. The Policy Holder may approach the concerned Insurance Ombudsman.

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**List of Ombudsman**

Office of the Ombudsman	Contact Details	Areas of Jurisdiction
AHMEDABAD	Insurance Ombudsman Office of the Insurance Ombudsman 2 nd floor, Ambica House Nr. C.U.Shah College 5, Navyug Colony, Ashram Road, AHMEDABAD - 380 014 Tel.079- 27546150 Fax:079-27546142 E-mail: insombahd@rediffmail.com	Gujarat , UT of Dadra & Nagar Haveli, Daman and Diu
BHOPAL	Insurance Ombudsman Office of the Insurance Ombudsman Janak Vihar Complex, 2 nd floor Malviya Nagar, BHOPAL Tel. 0755-2769201/02 Fax:0755-2769203 E-mail: bimalokpalbhopal@airtelbroadband.in	Madhya Pradesh & Chhattisgarh
BHUBANESHWAR	Insurance Ombudsman Office of the Insurance Ombudsman 62,Forest Park BHUBANESHWAR - 751 009 Tel.0674-2596461(Direct) Secretary No.:0674-2596455 Tele Fax - 0674-2596429 E-mail: ioobbsr@dataone.in	Orissa
CHANDIGARH	Insurance Ombudsman Office of the Insurance Ombudsman S.C.O. No.101, 102 & 103 2 nd floor, Batra Building Sector 17-D ,CHANDIGARH - 160 017 Tel.: 0172-2706196 Fax: 0172-2708274 E-mail: ombchd@yahoo.co.in	Punjab , Haryana, Himachal Pradesh, Jammu & Kashmir , UT of Chandigarh
CHENNAI	Insurance Ombudsman Office of the Insurance Ombudsman Fatima Akhtar Court , 4 th floor, 453 (old 312) Anna Salai, Teynampet, CHENNAI - 600 018 Tel. 044-24333678 Fax: 044-24333664 E-mail: insombud@md4.vsnl.net.in	Tamil Nadu, UT- Pondicherry Town and Karaikal (which are part of UT of Pondicherry)
NEW DELHI	Insurance Ombudsman	Delhi & Rajashthan

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	Office of the Insurance Ombudsman 2/2 A, Universal Insurance Bldg. Asaf Ali Road NEW DELHI - 110 002 Tel. 011-23239611 Fax: 011-23230858 E-mail: iobdelraj@rediffmail.com	
GUWAHATI	Insurance Ombudsman Office of the Insurance Ombudsman Jeevan Nivesh, 5 th floor Nr. Panbazar Overbridge , S.S. Road GUWAHATI - 781 001 Tel. : 0361-2131307 Fax:0361-2732937 E-mail: omb_ghy@sify.com	Assam , Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura
HYDERABAD	Insurance Ombudsman Office of the Insurance Ombudsman 6-2-46 , 1 st floor, Moin Court Lane Opp. Saleem Function Palace, A.C.Guards, Lakdi-Ka-Pool HYDERABAD - 500 004 Tel. 040-23325325 Fax: 040-23376599 E-mail: hyd2_insombud@sancharnet.in	Andhra Pradesh, Karnataka and UT of Yanam - a part of the UT of Pondicherry
KOCHI	Insurance Ombudsman Office of the Insurance Ombudsman 2 ND Floor, CC 27/2603, Pulinat Building , Opp. Cochin Shipyard, M.G. Road , ERNAKULAM - 682 015 Tel: 0484-2358734 Fax:0484-2359336 E-mail: iokochi@asianetglobal.com	Kerala , UT of (a) Lakshadweep , (b) Mahe - a part of UT of Pondicherry
KOLKATA	Insurance Ombudsman Office of the Insurance Ombudsman North British Bldg. 29, N.S. Road , 3 rd floor, KOLKATA - 700 001 Tel.:033-22134869 Fax: 033-22134868 E-mail : iombkol@vsnl.net	West Bengal , Bihar , Jharkhand and UT of Andaman & Nicobar Islands , Sikkim
LUCKNOW	Insurance Ombudsman Office of the Insurance Ombudsman Jeevan Bhawan, Phase 2, 6 th floor, Nawal Kishore Rd. Hazratganj, LUCKNOW - 226 001 Tel.:0522-2201188 Fax: 0522-2231310	Uttar Pradesh and Uttaranchal

**Shriram Life Insurance Company Limited**

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	E-mail: ioblko@sancharnet.in	
MUMBAI	Insurance Ombudsman Office of the Insurance Ombudsman, Jeevan Seva Annexe, 3 rd floor, S.V.Road, Santacruz(W), MUMBAI - 400 054 PBX: 022-26106928 Fax: 022-26106052 E-mail: ombudsman@vsnl.net	Maharashtra , Goa

**Signature of the Appointed Actuary**

**Signature of the Authorized Legal officer**

**Company Seal:**