

## CUSTOMER INFORMATION SHEET / KNOW YOUR POLICY

This document provides key information about your policy. You are also advised to go through your policy document.

SI No.	Title	Description	Policy clause number																		
1	Name of Insurance Product and Unique Identification Number (UIN)	IndusInd Nippon Life Nishchit Ace 121N180V01	Part A (Forwarding Letter)																		
2	Policy / Quotation number	Quotation number: << Quotation no.>> For policy number, please refer to the Policy Schedule.	Part A (Clause 1.2)																		
3	Type of Insurance Policy	Non-Linked other than pure risk and pension	Not Applicable																		
4	Basic Policy details	Instalment Premium (in Rs): <<1 <sup>st</sup> year Instalment Premium (with GST)>> Mode of premium payment: <<Mode>> Sum Assured on Death (in Rs): <<Sum Assured on Death>> Sum Assured on Maturity (in Rs): <<Sum Assured on Maturity>> Premium Payment Term (in Years): <<PPT>> Deferment Period (in Years): <<Deferment Period>> Income Period (in Years): <<Income Period>> Policy Term (in Years): <<Policy Term>> Annual Income amount on Start Date: « » Flexi Wallet at inception: <<Yes/No>> Policy Renewal Date: Refer to Policy Anniversary Date in Policy Schedule In case of any change to the proposed Base Sum Assured / Premium after submission of the proposal, the details as mentioned in the Policy Schedule would be applicable.	Part A (Clause 1.2)																		
5	Policy Coverage / Benefits Payable	<p><b>Death Benefit:</b> In case of the unfortunate death of the Life Assured during the policy term provided the Policy is In-force i.e. all due premiums have been paid, the following Benefits shall be payable to the Claimant(s) as a lumpsum:</p> <p>Higher of:</p> <ul style="list-style-type: none"> <li>• Sum Assured on Death; or</li> <li>• Death Benefit Factor as mentioned below multiplied by Total Premiums Paid as on the date of death of the Life Assured</li> </ul> <p>Death Benefit Factor:</p> <table border="1"> <thead> <tr> <th>PPT</th> <th>Annualized Premium &lt; 450000</th> <th>Annualized Premium &gt;= 450000</th> </tr> </thead> <tbody> <tr> <td>5</td> <td>105%</td> <td>105%</td> </tr> <tr> <td>6</td> <td>105%</td> <td>105%</td> </tr> <tr> <td>7</td> <td>150%</td> <td>150%</td> </tr> <tr> <td>8</td> <td>150%</td> <td>160%</td> </tr> <tr> <td>10</td> <td>150%</td> <td>165%</td> </tr> </tbody> </table>	PPT	Annualized Premium < 450000	Annualized Premium >= 450000	5	105%	105%	6	105%	105%	7	150%	150%	8	150%	160%	10	150%	165%	Part C (Clause 3.1.1)
PPT	Annualized Premium < 450000	Annualized Premium >= 450000																			
5	105%	105%																			
6	105%	105%																			
7	150%	150%																			
8	150%	160%																			
10	150%	165%																			

	<p>Where Sum Assured on Death is higher of 11 times Annualized Premium or Base Sum Assured.</p> <p>Apart from the above, the Claimant(s) also shall receive outstanding balance, if any, in the Flexi Wallet.</p> <p><b><u>Death Benefit for Minor Life:</u></b> If Age at entry of the Life Assured is greater than or equal to 8 years, the risk will commence immediately from the Date of Commencement of Policy. If Age at entry of the Life Assured is less than 8 years, the risk under the Policy will commence either from the last day of the second Policy Year or from the Policy Anniversary date falling immediately after attainment of 8 years of age, whichever is earlier. If the Age at entry of the Life Assured is less than 8 years and the death happens before the Date of Commencement of Risk, the Death Benefit shall be restricted to the Total Premiums Paid.</p> <p>The Policy will terminate on payment of the Death Benefit to the Claimant(s).</p> <p><b><u>Survival Benefit:</u></b> The Annual Income shall be payable on survival of the Life Assured at the end of every Policy Year during the Income Period, provided the Policy is In-force. The Annual Income shall increase at a simple rate of 20% every five years during the Income Period.</p> <p><b><u>Maturity Benefit:</u></b> On survival of the Life Assured till the end of the Policy Term, provided the Policy is In-force, Sum Assured on Maturity shall be payable along with the last instalment of Annual Income, plus outstanding balance, if any, in the Flexi Wallet.</p> <p>Where Sum Assured on Maturity is equal to the Base Sum Assured.</p> <p><b><u>Surrender Benefit:</u></b> The Surrender Value for the Policy is available after completion of first Policy Year provided one full year premium has been paid. The Surrender Value payable during the Policy Term is higher of [Guaranteed Surrender Value (GSV) and Special Surrender Value (SSV)], plus outstanding balance, if any, in Flexi Wallet.</p>	Part C (Clause 3.1.2)
6	<p><b>Options Available</b></p> <p><b><u>Flexi Wallet:</u></b> Policyholder has an option to accumulate the Annual Income in Flexi Wallet, instead of taking the same as a periodic payment during the Income Period. If this option is selected the Annual Income when due will be transferred to the Flexi Wallet. The amount in the Flexi Wallet will earn interest at prevailing interest rate provided herein and the same will be credited at the end of each month.</p> <p>This option can be opted-in and opted-out at any time during the Policy Term. At any time, Policyholder has an option to withdraw, completely or partially, the balance in the Flexi Wallet. The minimum withdrawal amount in case of partial withdrawal should be Rs. 10,000. In case the balance in the</p>	Part C (Clause 3.1.6.1)

		Flexi Wallet is not withdrawn completely, such outstanding balance will be paid to the Claimant in the event of death, surrender or maturity, whichever is earlier.	
7	Rider opted	<p>&lt;&lt;No rider opted under the policy&gt;&gt; if no rider opted</p> <p>&lt;&lt;</p> <p>The following riders have been opted</p> <ol style="list-style-type: none"> <li>1. &lt;&lt;Name of the rider&gt;&gt; - &lt;&lt;Base Sum Assured is Rs. _____&gt;&gt;</li> <li>2. &lt;&lt;Name of the rider&gt;&gt; - &lt;&lt;Base Sum Assured is Rs. _____&gt;&gt;</li> </ol> <p>&gt;&gt; If rider opted under the policy</p>	Part A (Clause 1.2)
8	Exclusions (events where insurance coverage is not payable), if any.	<p><b><u>Suicide Exclusion:</u></b></p> <p>In case of death due to suicide within 12 months from the Date of Commencement of Risk under the Policy or from the date of Revival of the Policy, as applicable, the Nominee or beneficiary of the Policyholder shall be entitled to 80% of the Total Premiums Paid till the date of death or the Surrender Value available as on the date of death whichever is higher, provided the policy is In-force with full or reduced benefits and the policy will terminate.</p>	Part F (Clause 6.3)
9	Waiting period	Not Applicable	Not Applicable
10	Grace Period	15 days for monthly premium paying frequency and 30 days for other frequencies.	Part C (Clause 3.1.5.5)
11	Free Look Period	30 days	Part D (Clause 4.1)
12	Lapse, paid-up and revival of the Policy	<p><b><u>Lapse:</u></b></p> <p>If any Premium remains unpaid after the expiry of the Grace Period and premiums have not been paid in full for first Policy Year, the Policy status will be altered to Lapse and the Death Benefit and Rider Benefit, if any, will cease immediately.</p> <p>No Benefits will be paid when the Policy is in Lapse status</p> <p><b><u>Paid-Up:</u></b></p> <p>If the Policy has acquired a Surrender Value and no future Premiums are paid, the Policy may continue as Reduced Paid-up Policy.</p> <p>Please refer the policy document for detailed information on Paid Up Benefits.</p> <p><b><u>Revival:</u></b></p> <p>A policy in Lapsed or Paid-up condition can be revived within the Revival Period of five years from the due date of first unpaid premium. The Base Plan along with rider benefits, if any can be revived by paying the arrears of premiums along with applicable interest. On revival, the Policy will be eligible for its complete Benefits as per the original contract; any due and unpaid benefit shall be paid immediately (without any interest) when the Policy is revived.</p> <p>If a Lapsed Policy is not revived within the Revival Period, then the Policy will be terminated at the end of the Revival Period.</p>	Part D (Clause 4.3.)  Part D (Clause 4.3)  Part D (Clause 4.5)
13	Policy Loan	Loan will be available under a policy for up to 70% of the applicable surrender value under the base plan provided Surrender Value is available. The interest on loans will be charged at prevailing rate of interest set by the company from	Part D (Clause 4.4)

		time to time. Please contact us to know the prevailing rate of interest on policy loan.	
14	Claims / Claims Procedure	<ul style="list-style-type: none"> <li>• Turn Around Time (TAT) for claims settlement –15 days from the date of receipt of request in case of claims not requiring investigation and 45 days from the date of receipt of request in case of claims requiring investigation.</li> <li>• Claim Procedure -           <p>To intimate a claim please submit the required documents at your nearest INLIC Branch office</p> <p>OR</p> <p>You can send the documents via courier to:</p> <p>The Claims Department IndusInd Nippon Life Insurance Company Limited (Formerly Reliance Nippon Life Insurance Company Limited) Office no. 701 &amp; 702, 7th floor Silver Metropolis, Off Western Express Highway Goregaon East, Mumbai – 400063</p> <p>OR</p> <p>You can email us the scanned copies of duly filled claims forms and other mandatory documents at <a href="mailto:claims@indusindnipponlife.com">claims@indusindnipponlife.com</a></p> <p>Helpline no: For any assistance on claim, call us on our Toll-Free helpline number 1800 102 3330 (Monday to Saturday, from 8:00 AM to 8:00 PM, excluding public holidays)</p> <li>• Link for downloading claim form and list of documents required: Click on <a href="https://www.indusindnipponlife.com/claims">https://www.indusindnipponlife.com/claims</a> to know the documents required and to download claim forms</li> </li></ul>	Part F (Clause 6.2)
15	Policy Servicing	<ul style="list-style-type: none"> <li>• Turn Around Time (TAT)– 7 days from request received date.</li> <li>• Contact Details:           <p>Call Us between 8am to 8pm, Monday to Saturday (except business holiday), on Our Toll-Free Call Centre Number 1800 102 1010 or</p> <p>Email Us at: <a href="mailto:customerservice@indusindnipponlife.com">customerservice@indusindnipponlife.com</a> or</p> <p>Chat with us on WhatsApp number (+91) 7208852700</p> </li> <li>• Link for downloading forms: Click on <a href="https://www.indusindnipponlife.com/downloads">https://www.indusindnipponlife.com/downloads</a> &gt; Select Policy Servicing Request forms</li> </ul>	Part G
16	Grievances / Complaints	<p>If You are dissatisfied with any of our services, please feel free to contact Us through any of the mode mentioned above under Policy Servicing.</p> <p>If your complaint is unresolved, you can escalate in the following manner:</p> <p>Step 1: contact Our Service Branch Manager, who is also the Local Grievance Redressal Officer at Your nearest branch.</p> <p>Step 2: Write to Head of Customer Care at <a href="mailto:headcustomercare@indusindnipponlife.com">headcustomercare@indusindnipponlife.com</a></p> <p>Step 3: Write to Our Grievance Redressal Officer at <a href="mailto:gro@indusindnipponlife.com">gro@indusindnipponlife.com</a></p> <p>Where the complaint is unresolved or the redressal is unsatisfactory, you may approach the Grievance Cell of the Insurance Regulatory and Development Authority of India (IRDAI) on the following contact details:</p>	Part G (Clause 7.3 & 7.4)

	<p>IRDAI Grievance Call Centre (IGCC) TOLL FREE NO: 155255  Bima Bharosa TOLL FREE NO: 1800 4254 732  Email ID: <a href="mailto:complaints@irdai.gov.in">complaints@irdai.gov.in</a>  You can also register Your complaint online at  <a href="https://bimabharosa.irdai.gov.in/">https://bimabharosa.irdai.gov.in/</a></p> <p>While we expect to satisfactorily resolve your grievances, you may also at any time approach the Insurance Ombudsman. For contact details, contact number and email of the relevant Ombudsman office, kindly refer the policy document or the website <a href="https://www.cioins.co.in/ombudsman">https://www.cioins.co.in/ombudsman</a> or our website <a href="https://www.indusindnipponlife.com/">https://www.indusindnipponlife.com/</a></p>	
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Declaration by the Policy Holder:

I have read the above and confirm having noted the details. I am aware that on request I can avail of the CIS in local language.

Place:

Date:

(Signature of the Policyholder)

Please Note:

In case of any conflict, the terms and conditions mentioned in the policy document shall prevail.

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