

## CUSTOMER INFORMATION SHEET / KNOW YOUR POLICY

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

We request you to kindly review the CIS and acknowledge the same through a link shared to you on your registered mobile number/Email ID/WhatsApp.

SI No	Title	Description	Policy Clause Number												
1	Name of Insurance Product/ Policy	Bajaj Life Secure Plus (116N216V01)	Policy Schedule												
2	Policy Number	<xxxxxxxx>	Policy Schedule												
3	Type of Insurance Product/ Policy	Benefit (Where an Insurance Policy pays a fixed amount under the policy on the occurrence of a covered event)	As per base policy												
4	Sum Insured (Basis) (Along with amount)	<table border="1" style="width: 100%;"> <thead> <tr> <th>Benefit Option</th> <th>Sum Assured (Rs.)</th> </tr> </thead> <tbody> <tr> <td>Terminal Illness with Term Booster (TI withTB)</td> <td>&lt;xxxxxxxx&gt;</td> </tr> <tr> <td>Accidental Death benefit (ADB)</td> <td>&lt;xxxxxxxx&gt;</td> </tr> <tr> <td>Accidental Total Permanent Disability (ATPD)</td> <td>&lt;xxxxxxxx&gt;</td> </tr> <tr> <td>Critical Illness (CI)</td> <td>&lt;xxxxxxxx&gt;</td> </tr> <tr> <td>Maturity Benefit (In case of variant 2: Shield with ROP)</td> <td>&lt;xxxxxxxx&gt;</td> </tr> </tbody> </table>	Benefit Option	Sum Assured (Rs.)	Terminal Illness with Term Booster (TI withTB)	<xxxxxxxx>	Accidental Death benefit (ADB)	<xxxxxxxx>	Accidental Total Permanent Disability (ATPD)	<xxxxxxxx>	Critical Illness (CI)	<xxxxxxxx>	Maturity Benefit (In case of variant 2: Shield with ROP)	<xxxxxxxx>	Policy Schedule
		Benefit Option	Sum Assured (Rs.)												
		Terminal Illness with Term Booster (TI withTB)	<xxxxxxxx>												
		Accidental Death benefit (ADB)	<xxxxxxxx>												
		Accidental Total Permanent Disability (ATPD)	<xxxxxxxx>												
		Critical Illness (CI)	<xxxxxxxx>												
Maturity Benefit (In case of variant 2: Shield with ROP)	<xxxxxxxx>														
5	Policy Coverage (What the policy covers) (Policy Clause Number/s)	<p>The rider has the following options to choose from:</p> <ol style="list-style-type: none"> <li><b>Terminal Illness with Term Booster (TI+TB):</b> On the diagnosis of Terminal Illness or on Death whichever is earlier, the Sum Assured on TI will be paid. On diagnosis of Terminal Illness no further premiums will be required to be paid for the Policy. Once paid this cover will terminate and the rest of the covers will continue, if not already paid.</li> <li><b>Accidental Death benefit (ADB):</b> On Accidental Death of the Life Assured, the Sum Assured on ADB will be paid and all other covers under the Policy will terminate</li> <li><b>Accidental Total Permanent Disability (ATPD):</b> On the Accidental Total Permanent Disability, the Sum Assured on APTD will be paid. Once paid this</li> </ol>	Part C – Section IV												

		<p>cover will terminate and the rest of the covers will continue, if not already paid.</p> <p>4. <b>Critical Illness (CI):</b> On diagnosis of Critical Illness(es), the Sum Assured on CI will be paid. Once paid this cover will terminate and the rest of the covers will continue, if not already paid.</p> <p><b>Maturity Benefit:</b> For Variant 1 Shield – No maturity benefit is payable under the Policy. For Variant 2 Shield with Return of Premium – All Premiums paid under the Policy shall be returned on the Date of Maturity.</p>	
6	Exclusions (what the policy does not cover)	<p>Accidental Death Benefit</p> <ul style="list-style-type: none"> <li>i) Death occurs as a result of the Life Assured committing any breach of law with criminal intent.</li> <li>ii) Death as a consequence of the Life Assured being under the influence of alcohol or drugs other than in accordance with the directions of a registered medical practitioner.</li> <li>iii) Death as a result of self-inflicted injuries.</li> <li>iv) Death occurs as a result of the Life Assured taking part in any naval, military or air force operation during peace time.</li> <li>v) Death occurs as a result of the Life Assured participating in or training for any dangerous or hazardous sport or competition or riding or driving in any form of race or competition.</li> <li>vi) Death occurs as a result of suicide.</li> <li>vii) Death occurs as a result of aviation, gliding or any form of aerial flight other than as a fare paying passenger of a recognised airline on regular routes and on a scheduled timetable.</li> <li>viii) Death occurs as a result of war, invasion, civil war, rebellion, riots.</li> <li>ix) Poison, gas or fumes (voluntary or involuntarily, accidentally or otherwise taken, administered, absorbed or inhaled).</li> <li>x) Service in the armed forces, or any police organization, of any country at war or service in any force of an international body.</li> <li>xi) Nuclear Contamination: the radioactive, explosive or hazardous nature of nuclear fuel materials or property contaminated by nuclear fuel materials or accident arising from such nature.</li> <li>xii) Death as a result of any disease or infection.</li> </ul> <p>Accidental Total Permanent Disability Benefit</p>	Part F – Section XIV, Annexure D & G

- i) Disability as a result of the Life Assured committing any breach of law with criminal intent.
- ii) Disability of Life Assured as a result of war, invasion, civil war, rebellion or riot.
- iii) Disability as a consequence of the Life Assured being under the influence of alcohol or drugs other than drugs prescribed by and taken in accordance with the directions of a registered medical practitioner.
- iv) Disability as a result of the Life Assured taking part in any naval, military or air force operation.
- v) Disability as a result of the Life Assured participating in or training for any dangerous or hazardous sport or competition or riding or driving in any form of race or competition.
- vi) Disability of Life Assured as a result of aviation, gliding or any form of aerial flight other than as a fare paying passenger on a civilian airline plying on regular routes and according to a scheduled timetable.
- vii) Disability of Life Assured as a result of attempted self-injury.
- viii) Any condition that is pre-existing at the time of inception of the policy. Pre-existing condition means any condition, ailment, injury or disease: -
  - a. That is/are diagnosed by a physician within 48 months prior to the Date of Commencement of Cover or latest revival, whichever is later, or
  - b. For which medical advice or treatment was recommended by, or received from, a physician within 48 months prior to the Date of Commencement of Cover or latest revival, whichever is later.
 This exclusion will not be applicable to conditions, ailments or injuries or related condition(s) which are underwritten and accepted by the insurer at inception or at reinstatement.
- ix) Poison, gas or fumes (voluntary or involuntarily, accidentally or otherwise taken, administered, absorbed or inhaled).
- x) Service in the armed forces, or any police organization, of any country at war or service in any force of an international body.
- xi) Nuclear Contamination: the radioactive, explosive or hazardous nature of nuclear fuel materials or property contaminated by nuclear fuel materials or accident arising from such nature.
- xii) Disability as a result of any disease or infection.

**Critical Illness**

The critical illness benefit shall not be paid on any of the lives covered in case of the following conditions:

		<ul style="list-style-type: none"> <li>a) If the diagnosis of such Critical Illness was made within 90 days of the start of coverage (i.e. during the waiting period).</li> <li>b) If the insured dies within the survival period as per definition from date of the diagnosis of the covered CI.</li> <li>c) Intentional self-inflicted injury, suicide or attempted suicide.</li> <li>d) For any medical conditions suffered by the life assured or any medical procedure undergone by the life assured, if that medical condition or that medical procedure was caused directly or indirectly by influence of drugs, alcohol, narcotics or psychotropic substances unless taken in accordance with the lawful directions and prescriptions of a registered medical practitioner.</li> <li>e) Engaging in or taking part in hazardous activities*, including but not limited to, diving or riding or any kind of race; martial arts; hunting; mountaineering; parachuting, bungee-jumping; under water activities involving the use of breathing apparatus or not.</li> <li>f) *Hazardous Activities mean any sport or pursuit or hobby, which is potentially dangerous to the Insured Member whether he is trained or not.</li> <li>g) Participation by the insured person in a criminal or unlawful act with criminal intent.</li> <li>h) For any medical condition or any medical procedure arising from nuclear contamination; the radioactive, explosive or hazardous nature of nuclear fuel materials or property contaminated by nuclear fuel materials or accident arising from such nature.</li> <li>i) For any medical condition or any medical procedure arising either as a result of war, invasion, act of foreign enemy, hostilities (whether war be declared or not), armed or unarmed truce, civil war, mutiny, rebellion, revolution, insurrection, terrorism, military or usurped power, riot or civil commotion, strikes or participation in any naval, military or air force operation during peace time.</li> <li>j) For any medical condition or any medical procedure arising from participation by the insured person in any flying activity, except as a bona fide, fare paying passenger and aviation industry employee like pilot or cabin crew of a recognized airline on regular routes and on a scheduled timetable.</li> <li>k) Any External Congenital Anomaly which is not as a consequence of Genetic disorder.</li> <li>l) Failure to follow medical advice.</li> </ul>	
7	Waiting Period	Not Applicable	Not Applicable

	<ul style="list-style-type: none"> <li>• Time period during which specified diseases / treatments are not covered</li> <li>• It is counted from the beginning of the policy coverage</li> </ul>		
8	<p>Financial limits of coverage</p> <p>i. Sub-limit (It is a pre-defined limit and the insurance company will not pay any amount in excess of this limit)</p> <p>ii. Co-payment (It is a specified amount/percentage of the admissible claim amount to be paid by policyholder/insured)</p> <p>iii. Deductible (It is a specified amount: - up to which an insurance company will not pay any claim, and - which will be deducted from total claim amount (if claim amount is more than the specified amount))</p> <p>iv. Any other limit (as applicable)</p>	<p>i) Sub limit – Not Applicable</p> <p>ii) Co-payment – Not Applicable</p> <p>iii) Deductible – Not Applicable</p> <p>iv) Any other limit (as applicable) – Not Applicable</p>	Not Applicable
9	<p>Claims/ Claims Procedure</p>	<p><b>Turn Around Time (TAT) for claims settlement and brief procedure:</b></p> <p>Link for Brief Procedure: <a href="https://www.bajajlifeinsurance.com/life-insurance-claim-assistance.html">https://www.bajajlifeinsurance.com/life-insurance-claim-assistance.html</a></p> <ul style="list-style-type: none"> <li>• Link for Turn Around Time (TAT) for claims settlement: <a href="https://www.bajajlifeinsurance.com/content/dam/bajalife-web/pdf/customer-services/services-tat.pdf">https://www.bajajlifeinsurance.com/content/dam/bajalife-web/pdf/customer-services/services-tat.pdf</a></li> </ul> <p><b>Helpline/Call Centre Numbers:</b> 020 6712 1212 ( Customer Care Number) Mail Us : <a href="mailto:customercare@bajajlife.com">customercare@bajajlife.com</a></p> <p><b>Contact details of the insurer:</b> Bajaj Life Insurance Limited (Formerly known as Bajaj Allianz Life Insurance Company Limited)</p>	Part F – Section XVII

		<p>Bajaj Insurance House, Airport Rd, Yerawada, Pune, Maharashtra 411006</p> <p><b>Link for downloading claim form and list of documents required including bank account details:</b>  <a href="https://www.bajajlifeinsurance.com/life-insurance-claim-assistance.html">https://www.bajajlifeinsurance.com/life-insurance-claim-assistance.html</a></p> <p>WhatsApp- 8806727272</p>	
10	Policy Servicing	<p><b>Turn Around Time (TAT):</b>  <a href="https://www.bajajlifeinsurance.com/content/dam/balic-web/pdf/customer-services/services-tat.pdf">https://www.bajajlifeinsurance.com/content/dam/balic-web/pdf/customer-services/services-tat.pdf</a></p> <p><b>Helpline/Call Centre number:</b> 020 6712 1212</p> <p><b>Contact details of the insurer:</b> In case you have any query, you may communicate with the Company:</p> <ol style="list-style-type: none"> <li>1. By post at: Customer Care Desk, Bajaj Life Insurance Limited, Bajaj Insurance House, 5th floor, Airport Road, Yerawada, Pune – 411006</li> <li>2. By Email: <a href="mailto:customercare@bajajlife.com">customercare@bajajlife.com</a></li> </ol> <p><b>Link for downloading applicable forms and list of documents required including bank account details:</b>  <a href="https://online.bajajlife.com/online/portal/logon/serviceRequest.do?user_name=WEBSITE&amp;p_flag=0">https://online.bajajlife.com/online/portal/logon/serviceRequest.do?user_name=WEBSITE&amp;p_flag=0</a></p>	Part G
11	Grievances/Complaints	<p><b>Contact details of Grievance Redressal Officer of the insurer:</b> Grievance Redressal Officer of the insurer - In case you do not receive a response within 14 days or if you are not satisfied with the resolution, you may approach Grievance Redressal Officer at <a href="mailto:gro@bajajlife.com">gro@bajajlife.com</a></p> <p><b>Link for registering the grievance with the insurer's portal:</b> Insurance company grievance portal -  <a href="https://webpartner2.bajajlife.com/GrvOnlineApi/indexOnlineGrv.jsp#_ga=2.7272630.541013491.1717475077-1601763320.1694668355&amp;_gac=1.52751388.1715749803.EAlalQobChMly_eqivKOhgMVdWsPAh0NFQrEE_AAYASAAEqJObPD_BwE">https://webpartner2.bajajlife.com/GrvOnlineApi/indexOnlineGrv.jsp#_ga=2.7272630.541013491.1717475077-1601763320.1694668355&amp;_gac=1.52751388.1715749803.EAlalQobChMly_eqivKOhgMVdWsPAh0NFQrEE_AAYASAAEqJObPD_BwE</a></p> <p><b>Contact details of Ombudsman:</b>  Find your nearest Ombudsman office at:  <a href="https://www.cioins.co.in/ombudsman">https://www.cioins.co.in/ombudsman</a></p>	Part G
12	Things to remember	<ul style="list-style-type: none"> <li>• Free look cancellation – 30 days</li> <li>• Policy Renewal – Not applicable</li> <li>• Migration and Portability – Not applicable</li> </ul>	Part D – Section VII

		<ul style="list-style-type: none"> <li>• Change in sum insured – Not applicable</li> <li>• Moratorium Period – Not applicable</li> </ul>	
13	Your obligations	Please disclose all pre-existing disease/s or condition/s before buying a rider. Non-disclosure may affect the claim settlement. Disclosure of material information while applying for the rider and changes during the rider period should be communicated to Bajaj Life Insurance customer care ID via registered email id of the customer.	Proposal form
Legal Disclaimer Note: In case of any conflict between the CIS and the policy document, the terms and conditions mentioned in the policy document shall prevail			

Declaration by the Policy Holder:

I have read the above and confirm having noted the details.

Place:

Date:

(Signature of Policyholder)

Web-link for the product where the product related documents including the Customer Information sheet are available:

<https://www.bajajlifeinsurance.com/riders-insurance-plans.html>