

## **Bajaj Life Secure Plus**

A Non-Participating, Non-Linked, Individual Health Plan

UIN:116N216V01

### **Bajaj Life Insurance Limited** **(Formerly known as Bajaj Allianz Life Insurance Company Limited)** **Bajaj Life Secure Plus**

**A Non-Participating, Non-Linked, Individual Health Plan**

#### **Part A**

Name of Policyholder \_\_\_\_\_

Address of Policyholder \_\_\_\_\_

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

As your Life Goals enablers, we thank you for giving us the opportunity to start this new journey, together.

With our Customer First philosophy guiding every aspect of our engagement with you, please be rest assured that we will take every step to ensure you, and your loved ones stay on track with your goals and get them DONE in a seamless and secure manner.

You now have the Policy Document in hand, which is a contract between you (the policyholder) and us (Bajaj Life Insurance Limited). Please go through it in detail to know all about the life insurance policy you have purchased for your Life Goal. The policy was issued based on the premium deposit and the information shared in the proposal form along with the other documents including declarations, Customer Information Statement (CIS), medical records and the key terms and conditions guiding this policy.

In case you feel this policy is not designed to meet your desired Life Goals, we offer a 30-day free look period from the date of receipt of this document. Please take this time to further review this policy, its features and the benefits it offers before returning it to us. A request received by us for cancellation of the Policy during Free Look Period shall be processed and the premium paid shall be refunded within 7 days of receipt of such request. The refund would be subject to deductions of taxes, the amount of premium that would be applicable for the period the cover under this policy is active, and other expenses such as stamp duty and medical examination costs, if any. In case you want to reach out to us, we are always available through our digital and physical service touch points. The details of them are provided in this document.

It's our endeavour to continuously enhance the experience we offer you during our new journey together.

We look forward to delivering on this promise at every step of the way, as we get yours and your family's Life Goals. DONE.

For Bajaj Life Insurance Limited

Authorised Signatory

Your Policy Servicing Branch Address:  
Bajaj Life Insurance Limited

Customer Care Number:

Company Website: <https://www.bajajlifeinsurance.com/>

Executed and Issued at the Registered Office of Bajaj Life Insurance Limited on [Date].  
Stamp Duty of Rs.[Stamp Duty Amount] paid by pay order vide Receipt No.[Full Receipt No.] dated [Receipt Date].

**Bajaj Life Secure Plus**

A Non-Participating, Non-Linked, Individual Health Plan

UIN:116N216V01

**Agency/ Intermediary Representative/Sales Representative Details:**

<b>Name</b>		<b>Code</b>	
<b>Address</b>			
<b>Phone Number</b>		<b>e-Mail Id</b>	

**Bajaj Life Secure Plus**

A Non-Participating, Non-Linked, Individual Health Plan

UIN:116N216V01

**SCHEDULE  
Policy Details**

Policy Number	
Product Name	Bajaj Life Secure Plus
Variant	
Product Unique Identification Number (UIN)	116N216V01
Date of Commencement	
Date of Maturity	
Policy Term	
Name of Policyholder	
Address of Policyholder	
Name of Life Assured	
Date of Birth of Life Assured	

**Details of the Premiums Payable**

Instalment Premium Details*		Premium Payment Details	
Premium		Premium Payment Period	
		Premium Payment Frequency	
Extra Premium	+	Due Date of Every Premium <sup>^</sup>	
Total Premium	=	Due Date of Last Premium	

\*Excluding GST. <sup>^</sup>A grace period of <15/30> days will be provided under this Policy for payment of premium.

**Details of Nominee**

Name	Relationship	Age	Share of Death Benefit	Appointee, if Any

**Details of Benefits**

Benefit	Sum Assured	
<Terminal Illness with Term Booster>	<Sum Assured>	<XXXXXXXXXX>
<Accidental Death Benefit>	<Sum Assured>	<XXXXXXXXXX>
<Accidental Total Permanent Disability>	<Sum Assured>	<XXXXXXXXXX>
<Critical Illness 10>	<Sum Assured>	<XXXXXXXXXX>
<Critical Illness 25>	<Sum Assured>	<XXXXXXXXXX>
<Critical Illness 60>	<Sum Assured>	<XXXXXXXXXX>
<Maturity Benefit>	<XXXXXXXXXX>	
Sum Assured will be the value above or 105% of the Premium Paid, whichever is higher.		

## Bajaj Life Secure Plus

A Non-Participating, Non-Linked, Individual Health Plan  
UIN:116N216V01

### PART B

#### Technical Terms used in your Policy and what they mean

- a. **"Accident"** means a sudden, unforeseen and involuntary incident which has been caused by external factors.
- b. **"Accidental Death"** is the death occurring due to an Accident. A detailed explanation of the same is provided in Annexure D to this Policy.
- c. **"Accidental Total Permanent Disability (ATPD)"** is the Permanent Total Disability caused by an Injury due to an Accident. A detailed explanation of ATPD is provided in Annexure E to this Policy.
- d. **"Act"** refers to the Insurance Act, 1938 and the rules, regulations, guidelines, and circulars issued thereunder.
- e. **"Authority/IRDAI"** shall mean the Insurance Regulatory and Development Authority of India.
- f. **"Base Policy"** shall mean the policy availed by the Life Assured to which this Policy is attached.
- g. **"Base Policy Premium"** for the purposes of this Policy, Base Policy Premium will include base premiums under the Base Policy including any extra underwriting base premium and Policy premium, if opted.
- h. **"Bodily Injury"** is where an injury is evidenced by external signs such as contusion, bruise and wound except in cases of drowning and internal injury
- i. **"Critical Illness"** shall mean one of the illnesses specified in Annexure G to this document.
- j. **"Grace Period"** shall mean the additional period provided for payment of premium after the due date. The Policy grace period shall be in line with the grace period of the Base Policy.
- k. **"Guaranteed Benefit"** is 105% of total Policy Premiums paid.
- l. **"Injury"** shall mean an injury which within 180 days of an Accident, which solely, directly and independently of any other cause results in a Disability.
- m. **"Lapse"** is the status of this Policy after non-payment of the premium during which no benefit is payable.
- n. **"Life Assured"** shall mean the Policy Life Assured as named in the Schedule. It is clarified that the Life Assured under this Policy shall be the Policyholder of the Base Policy.
- o. **"Medical Practitioner"** is a person who holds a valid registration from the medical council of any state or of India, or the Medical Council of India, or Counsel for Indian Medicine and is entitled to practice medicine in within the relevant medical council's jurisdiction and within the scope of the license granted. The practitioner treating the Life Assured should hold a degree equivalent to an MD or MS in the relevant field to certify the medical condition. The Medical Practitioner should not be (a) the Life Assured; (b) any intermediary that was involved in the solicitation of the Base Policy and this Policy; (e) employed by Us; or (f) related to the Life Assured.
- p. **"Permanent Total Disability"** is the permanent and complete (a) loss of both eyes; (b) loss of both arms or both hands; (c) loss of one arm and one leg; (d) loss of one arm and one foot; (e) loss of one hand and one foot; (f) loss of one hand and one leg; (g) loss of both legs; (h) loss of both feet; or (i) removal of the lower jaw.
- q. **"Terminal Illness"** shall mean one of the illnesses specified in Annexure F to this document.
- r. **"Us/We"** means Bajaj Life Insurance Company Limited.
- s. **"UIN"** is the Unique Identification Number allotted to this product by the Authority/IRDAI.
- t. **"Waiting Period"** shall mean a period of 90 days from the Date of Commencement of Policy for the Critical Illness Benefit.

### Part C

#### Things you must know about your Policy

1. The policy is a non-linked, non-participating, pure risk and return of premium, individual health plan. It covers, Terminal Illness, death, accidental total permanent disability and accidental death via two variants, as chosen when applying for the policy with us.
2. You may cancel it at any time and get

## Bajaj Life Secure Plus

A Non-Participating, Non-Linked, Individual Health Plan  
UIN:116N216V01

termination/surrender value, as applicable.

3. The Company reserves the right to cancel this Policy at any time on grounds of misrepresentation, fraud, non-disclosure or non-cooperation by Life Assured. In such cases, no benefit is payable.

### 4. Benefits

- a. Terminal Illness with Term Booster Benefit (TIB)  
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 as per Annexure F, 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.
- b. Accidental Death Benefit (ADB)  
On Accidental Death of the Life Assured as per Annexure D, the Sum Assured on ADB will be paid and all other covers under the Policy will terminate.
- c. Accidental Total Permanent Disability (ATPD) Benefit:  
On the Accidental Total Permanent Disability as per Annexure E, the Sum Assured on APTD will be paid. Once paid this cover will terminate and the rest of the covers will continue, if not already paid.
- d. Critical Illness Benefit  
On diagnosis of Critical Illness(es) as per Annexure G, 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.
- e. Policy Maturity Benefit  
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 (excluding premium for any covers under which claim has been raised or has been paid, any taxes, extra or additional premium that would have been applied as per the company's Board approved underwriting policy) shall be returned on the Date of Maturity.

### 5. Premium Payment

Policy Premiums are payable for the

Premium Payment Period at the frequency of the premiums provided in the Schedule Policy.

### 6. Non-Payment and Grace Period

For both variants, a grace period will be provided for payment of premium, if the due date on which the Premium is payable is missed. For Variant 1 – Shield, If Premiums are not paid before the end of the Grace Period, the Policy will Lapse and termination value will be as per the below sections.. For Variant 2, If at least one Policy Year's full premium has not been paid, then the Policy will Lapse and no benefits will be payable. However, if at least one Policy Year's full premium has been paid, then after completion of the first Policy Year, the Policy would have acquired surrender value. In this case, the Policy would not Lapse for non-payment of future premium and would be converted to a paid-up policy. Paid-up policies have a reduction in benefit in proportion to the premiums paid against all the premiums due. Waiver of Premium benefit will not be available to paid-up policies. Both Variants can be revived as per applicable terms and conditions.

## Part D

### Servicing of your Policy and Options Offered

### 7. Free Look Period

- a. Every policyholder, except for those Policy's with tenure of less than a year, shall be provided with a free look period of 30 days beginning from the date of receipt of Policy document, whether received electronically or otherwise, to review the terms and conditions of such policy.
- b. In the event a policyholder disagrees with any of the Policy terms or conditions, or otherwise and has not made any claim, he shall have the option to return the Policy document to the insurer for cancellation, stating the reasons for the same.
- c. Irrespective of the reasons mentioned, the policyholder shall be entitled to a refund of the Policy Premium paid, subject only to a deduction of a

## Bajaj Life Secure Plus

A Non-Participating, Non-Linked, Individual Health Plan  
UIN:116N216V01

proportionate Policy risk premium for the period of cover and the expenses, if any, incurred by the insurer on medical examination of the proposer and stamp duty charges.

- d. The request for cancellation of the Policy during free look period shall be processed and Policy Premium shall be refunded within 7 days of receipt of such request.

### 8. Revival

In case you were unable to pay towards the policy, and it lapses or becomes paid-up, here is a way to revive it. A Lapsed policy may be revived within 5 years from the date of non-payment of premium. Revival will require paying the arrears of premiums due under the policy along with interest on each premium at the rate equivalent of 10-year G-Sec rate plus 2%, rounded up to the higher interest rate (along with applicable Taxes). The revival interest rate will be benchmarked to the G-Sec based on the information from Financial Benchmark India Private Ltd (FBIL). The current applicable revival interest rate is 10% p.a. compounded half-yearly. The interest rate will be reviewed on an annual basis and any change in bases used for determination of applicable interest rate will be subject to prior approval of IRDAI. It may also require undergoing Medical Examinations, at the Policyholder's expense. After all parameters have been considered, the policy may either be:

- a. Revived with the same premium amount; or
- b. Revived with different premium amounts; or
- c. Refused revival and all amounts paid for the revival shall be refunded

This is entirely dependent on underwriting guidelines and the discretion of the Company. If the policy is revived, all benefits will be restored and any benefits payable during the lapsed period will be paid.

### 9. Option to take Benefits in Installments

The default mode of payment of the benefits in this Policy is lumpsum. However, on or before the commencement of the Policy,

the Policyholder may choose to have the Benefits paid in lumpsum, in instalments or a combination of both. If selected, the Benefits shall be paid in equal monthly instalments over 5 to 40 years as opted for by the Policyholder. You can opt to receive from 1% to 100% of the Benefits in instalments and we will offer a discount on the proportion of the premium equal to the years of instalment period you have chosen. For example, if you choose to take 50% of your Benefits in instalments for a period of 10 years, we will discount 50% of your premium by 10%. Your nominee can request discontinuation of the instalments and receive the amounts in a lumpsum but they will receive the remaining benefits due in instalments in one lump sum, discounted by the interest rate used to calculate the instalment amounts.

### 10. Option to Terminate or Surrender the Policy

- a. For Variant 1- If the Policy has its premium paying term same as the Policy term then, the policyholder can surrender the policy at any time during policy term but no termination value will be payable. However, if the premium paying term of the Policy is complete and all the premiums due under the Policy have been received, and the policy has not Matured, the Policy can be terminated and Termination Value will be payable. Termination Value will be calculated by multiplying the termination factor with the premiums paid. Termination factors are not guaranteed. Termination Value payable will be detailed on our website.. You can choose to surrender this Policy at any time during the policy term.
- b. For Variant 2 - During any time of the policy period after completing the first Policy Year, and if at least one full Policy Year's premium has been paid, if you wish to close this Policy, you may surrender it. If there is any surrender value payable, it would be higher of the Special Surrender Value (available only after completion of first Policy year and subject to maximum of the total amount of premium paid) and Guaranteed Surrender Value (available only if two full years' premiums have been paid).

## Bajaj Life Secure Plus

A Non-Participating, Non-Linked, Individual Health Plan  
UIN:116N216V01

The calculation used to arrive at the Surrender Value, and the Guaranteed Surrender Value and Special Surrender Value factors will be detailed on our website. We will comply with regulatory guidelines with respect to Special Surrender Value as may be issued by the Insurance Regulatory and Development Authority of India from time to time. On surrender, the Policy benefits will stop immediately, no further Policy premiums will be collected, and any Surrender Value will be paid to you.

### 11. Termination

Policy would terminate

- a. After payment of ADB
- b. On payment of all the Benefits as per the terms of the Policy
- c. On Surrender
- d. On Repudiation as per the provisions of Section 45 of the Insurance Act, 1938;
- e. End of Revival period of a Lapsed Policy
- f. On Maturity

### 12. Health Management Services

If your Policy is active and all premiums are paid up-to-date, you will have the option to use Health Management Services such as medical second opinions, case management, or medical consultations from service providers registered with the Company. These services are designed to help you get the right diagnosis and appropriate care for an illness.

These services are available subject to:

- a. The chosen service being offered by the service provider at the time you request it.
- b. You having already obtained a first diagnosis and medical opinion from a qualified doctor.
- c. You providing all required medical records to the service provider.

It is agreed that:

- a. These services are optional, provided at no extra cost during the premium paying term. You may decide whether to use them and whether to follow the treatment suggested.
- b. The services are delivered directly by third party service providers, without

the Company's involvement.

- c. The Company is not responsible for any liability arising from these services.
- d. The Company may start, stop, or change the service providers at any time.
- e. If the Health Management Services feature is discontinued or changed, the Company will inform you and notify IRDAI.

### 13. Benefit Enhancer

If you purchase this product in combination with a product offered by us ("Companion Product"), you may be entitled to additional benefits in the form of a Benefit Enhancer. This benefit will be equivalent to the "Family Benefit" in the Companion Product purchased in combination, which may be either:

- a. Discounts on the Premium or increase in a benefit as per the terms and conditions in Non-Linked Non-Participating and Non-Linked Participating products; or
- b. Additional units allocated in Unit Linked products

In this case, this benefit will only accrue if all the due premiums under both the plans 'in combination' have been paid till date of the family benefit accruing as applicable.

This benefit will be limited to products purchased as part of a combination offering by us.

## PART E Not Applicable

## PART F General Terms and Conditions of your Policy

### 14. Exclusions

Exclusions are detailed in Annexure D and G to this Policy.

### 15. Nomination and Assignment

Nomination would be governed by the provisions of Section 39 of the Insurance Act, 1938, as amended from time to time and assignment under the Policy would be governed by the provisions of Section 38 of the Insurance Act, 1938, as amended from time to time.

## **Bajaj Life Secure Plus**

A Non-Participating, Non-Linked, Individual Health Plan  
UIN:116N216V01

### **16. Fraud and Misrepresentation**

The Policy has been issued based on the details, declarations and documents provided to us by you. However, if we receive or find any information, which result in suspicion of misstatements at any stage, subject to the provisions of law at the time being in force, then the Benefits will not be applicable under the Policy and the claim will be rejected. All such cases will be dealt with in accordance with Section 45 of the Insurance Act, 1938, a detailed write up of which is annexed to the Base Policy.

### **17. Claims and Claim Process**

We will continue to do all we can to ensure all claims we receive are honored on time, every time! As Life Goals enablers, it is the moment of truth for each of us in the Company. To help us make this a seamless process, kindly make a note of the following, and update the nominee as well. Benefits are only payable if an intimation, has been received by us along with

- a. Written Notice of Intimation
- b. Original Documentation as may be required.
- c. Medical Documents as may be requested by us
- d. Any other documents that may be requested on intimation of death of the Life Assured for investigations or otherwise by the Company.

### **18. Modification**

Any modifications to the Policy will be carried out by way of an endorsement letter, duly signed by our authorized signatory.

### **19. Governing Law and Currency**

The Policy will be governed by the provisions of Law at the time being in force in the Republic of India. Any amount payable to us or by us will be paid in Indian Rupees.

### **20. Taxes**

Any payment of taxes, including GST, as may be applicable, shall be borne by the Life Assured. Life Assured shall either pay himself or allow us to deduct the appropriate taxes as may be imposed by any law, order or circular at the time being in force, from any payable benefits, or Policy Premium received.

## **Part G**

### **Grievance Redressal Mechanism (How to reach us when you need us)**

#### **21. Grievance Redressal**

In case You have any query or complaint/ grievance, You may contact the Grievance Officer of any nearest Customer Care Center at Branch Office of the Company. Alternatively, You may communicate with the Company:

By post at: Customer Care Desk,  
Bajaj Life Insurance Limited.,  
Bajaj Insurance House, Airport Road,  
Yerawada, Pune - 411006  
By Phone at: 020- 6712 1212 By Email:  
customer-care@bajajlife.com

In case You are not satisfied with the resolution provided to You by the above office, or have not received any response within fourteen (14) days, or You have any suggestion in respect of this Policy or on the functioning of the office, You may contact the following official for resolution:

Grievance Redressal Officer,  
Bajaj Life Insurance Limited.  
Bajaj Insurance House, Airport Road  
Yerawada, Pune, District – Pune, Maharashtra  
-411006  
Customer Care No: 020-6712 1212  
Email ID: gro@bajajlife.com

If You are not satisfied with the response or do not receive a response from the Company within fourteen (14) days, You may approach the IRDAI Grievance Call Centre (IGCC) on the following contact details:

By Phone: TOLL FREE NO: 1800 4254 732  
By Email: complaints@irdai.gov.in  
By post at: policyholder's Protection  
& Grievance Redressal Department -  
Grievance Redressal Cell  
Insurance Regulatory and Development  
Authority of India  
Sy. No. 115/1, Financial District,  
Nanakramguda, Gachibowli, Hyderabad -  
500 032

You can also register your complaints in the Bima Bharosa Shikayat Nivaran Kendra;  
<https://bimabharosa.irdai.gov.in>

## Bajaj Life Secure Plus

A Non-Participating, Non-Linked, Individual Health Plan  
UIN:116N216V01

### 22. Ombudsman

- a) In case the complaint is not resolved within 30 days or you are not satisfied with the decision/resolution of the Company, you may approach the Insurance Ombudsman if your grievance value does not exceed Rs.50,00,000/- (Rupees Fifty Lakhs Only) and pertains to any of the following:
- i) Delay in settlement of claim
  - ii) Any partial or total repudiation of claims
  - iii) Disputes over premium paid or payable in terms of insurance Policy
  - iv) Misrepresentation of Policy terms and conditions
  - v) Legal construction of insurance policies in so far as the dispute relates to claim
  - vi) Policy servicing related grievances against insurers and their agents and intermediaries
  - vii) Issuance of Life insurance Policy, which is not in conformity with the Proposal Form submitted by the Proposer
  - viii) Non-issuance of insurance Policy after receipt of premium
- Any other matter resulting from the violation of provisions of the Insurance Act, 1938, as amended from time to time or the regulations, circulars, guidelines or instructions issued by the IRDAI from time to time or the terms and conditions of the Policy, in so far as they relate to issues mentioned at Sub-Section (i) to (vi) above.
- b) The address of the Insurance Ombudsman is provided in Address & Contact Details of Ombudsman Centers attached herewith. For the latest list of Insurance Ombudsman, please refer to the IRDAI website at <https://www.irdai.gov.in/>  
Please refer to the Ombudsman website at <http://www.ciains.co.in/ombudsman>
- c) The complaint should be made in writing and duly signed by the complainant or by his legal heirs Nominee or Assignee with full details of the complaint with supporting documents, name and address of the complainant, and the

name of the branch or office of the insurer against whom the complaint is made

- d) Also please note that as per provision 14(3) of the Insurance Ombudsman Rules, 2017, the complaint to the Ombudsman can be made
- i) Only if the grievance has been rejected by the grievance redressal mechanism of the Company or no reply is received within a period of one month from the date of receipt of the grievance by the insurer or the Complainant is not satisfied with the response of the insurer.
  - ii) The complaint should be filed within a period of one year from the date of receipt of order of rejection or decision by the Company or expiry of one month from the date of sending the written representation to insurer.
  - iii) The subject matter of complaint should not be such where proceedings are pending before or disposed of by any court or consumer forum or arbitrator.

THIS IS AN IMPORTANT DOCUMENT AND SHOULD BE PRESERVED SAFELY. PLEASE CHECK THE POLICY DOCUMENT UPON RECEIPT, AND IF ANY MISTAKE OR ERROR IS FOUND, THE SAME BE INFORMED IMMEDIATELY TO BAJAJ LIFE INSURANCE LIMITED.

## Bajaj Life Secure Plus

A Non-Participating, Non-Linked, Individual Health Plan

UIN:116N216V01

### Address & Contact Details of Ombudsmen Centres

In case you have any grievance, you may approach the Company Grievance Cell. In case you are not satisfied with the decision/resolution of the Company or if your complaint is not resolved/ not satisfied/not responded for 30 days, you may approach the Office of Insurance Ombudsman, in line with the details provided hereinabove in the Policy Document, at the addresses given below:

Sr. No	Office of the Ombudsman	Contact Details	Areas of Jurisdiction
1	AHMED-ABAD	Insurance Ombudsman, Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor, Tilak Marg, Relief Road, Ahmedabad – 380 001. Tel.: 079 - 25501201/02 Email: bimalokpal.ahmedabad@cioins.co.in	Gujarat, Dadra & Nagar Haveli, Daman and Diu.
2	BENGAL-URU	Insurance Ombudsman, Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No. 57-27-N-19, Ground Floor, 19/19, 24th Main Road, JP Nagar, 1st Phase, Bengaluru – 560 078. Tel.: 080 - 26652048 / 26652049 Email: bimalokpal.bengaluru@cioins.co.in	Karnataka.
3	BHOPAL	Insurance Ombudsman, Office of the Insurance Ombudsman, 1st floor, "Jeevan Shikha", 60-B, Hoshangabad Road, Opp. Gayatri Mandir, Arera Hills, Bhopal – 462 011. Tel.: 0755 - 2769201 / 2769202 / 2769203 Email:bimalokpal.bhopal@cioins.co.in	Madhya Pradesh & Chhattisgarh
4	BHU-BANESHWAR	Insurance Ombudsman, Office of the Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR-751 009. Tel.:- 0674-2596461 / 455 / 429/003 Email :bimalokpal.bhubaneswar@cioins.co.in	Odisha
5	CHANDI-GARH	Insurance Ombudsman, Office of the Insurance Ombudsman, Jeevan Deep Building SCO 20-27, Ground Floor Sector- 17 A, Chandigarh – 160 017. Tel.:- 0172-2706468 Email:bimalokpal.chandigarh@cioins.co.in	Punjab, Haryana (excluding Gurugram, Faridabad, Sonapat and Bahadurgarh), Himachal Pradesh, Union Territories of Jammu & Kashmir, Ladakh & Chandigarh
6	CHENNAI	Insurance Ombudsman, Office of the Insurance Ombudsman, Fathima Akhtar Court, 4th Floor, 453 , Anna Salai, Teynampet, CHENNAI-600 018. Tel.:- 044-24333668 /3678 Email bimalokpal.chennai@cioins.co.in	Tamil Nadu, Puducherry Town and Karaikal (which are part of Puducherry)
7	NEW DELHI	Insurance Ombudsman, Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Bldg., Asaf Ali Road, NEW DELHI-110 002. Tel.:- 011-46013992/23232481/23213504 Email:bimalokpal.delhi@cioins.co.in	Delhi & following Districts of Haryana - Gurugram, Faridabad, Sonapat & Bahadurgarh
8	GUWAHATI	Insurance Ombudsman, Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Near Panbazar Over bridge, S.S. Road, GUWAHATI-781 001 (ASSAM). Tel.:- 0361-2632204 / 2602205 / 2631307 Email:bimalokpal.guwahati@cioins.co.in	Assam , Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura
9	HYDER-ABAD	Insurance Ombudsman, Office of the Insurance Ombudsman, 6-2-46, 1st Floor, "Moin Court", Lane Opp. Saleem Function Palace, A.C. Guards, Lakdi-Ka-Pool, HYDERABAD-500 004. Tel : 040 -23312122 / 23376991 / 23376599 / 23328709 / 23325325 Email:bimalokpal.hyderabad@cioins.co.in	Andhra Pradesh, Telangana, Yanam and part of Union Territory of Puducherry
10	JAIPUR	Insurance Ombudsman, Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141 - 2740363 Email: bimalokpal.jaipur@cioins.co.in	Rajasthan

**Bajaj Life Secure Plus**

A Non-Participating, Non-Linked, Individual Health Plan

UIN:116N216V01

Sr. No	Office of the Ombudsman	Contact Details	Areas of Jurisdiction
11	KOCHI	Insurance Ombudsman, Office of the Insurance Ombudsman, 10th Floor, Jeevan Prakash, LIC Building, Opp to Maharaja's College Ground, M.G. Road, Kochi - 682 011. Tel : 0484-2358759 / 2359338 Email: bimalokpal.ernakulam@cioins.co.in	Kerala , Lakshadweep, Mahe – a part of UT of Puducherry
12	KOLKATA	Insurance Ombudsman Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 7th Floor, 4, C.R. Avenue, Kolkata – 700 072. Tel: 033- 22124339/(41) Email: bimalokpal.kolkata@cioins.co.in	West Bengal, Andaman & Nicobar Islands , Sikkim
13	LUCKNOW	Insurance Ombudsman, Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, LUCKNOW-226 001. Tel : 0522 - 4002082 / 3500613 Email: bimalokpal.lucknow@cioins.co.in	Districts of Uttar Pradesh : Laitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareilly, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajganj, Santkabir-nagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharath-nagar.
14	MUMBAI	Insurance Ombudsman, Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S.V. Road, Santacruz(W), MUMBAI-400 054. Tel: 022 - 69038800/27/29/31/32/33 1Email: bimalokpal.mumbai@cioins.co.in	Metropolitan Region excluding wards in Mumbai – i.e M/E, M/W, N , S and T covered under Office of Insurance Ombudsman Thane and areas of Navi Mumbai.
15	NOIDA	Office of the Insurance Ombudsman, Bhagwan Sahai Palace ,4th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddha Nagar, U.P-201301. Tel.: 0120-2514252/53 Email: bimalokpal.noida@cioins.co.in	State of Uttarakhand and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshahr, Etah, Kannauj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautam Buddha nagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur
16	PATNA	Office of the Insurance Ombudsman, 2nd Floor, Lalit Bhawan, Bailey Road, Patna 800 001. Tel.: 0612-2547068 Email: bimalokpal.patna@cioins.co.in	Bihar, Jharkhand
17	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 - 24471175 Email: bimalokpal.pune@cioins.co.in	State of Goa and State of Maharashtra excluding areas of Navi Mumbai, Thane district, Palghar District, Raigad district & Mumbai Metropolitan Region
18	THANE	Office of the Insurance Ombudsman, 2nd Floor, Jeevan Chintamani Building, Vasantrao Naik Mahamarg, Thane (West), Thane - 400604 Email: bimalokpal.thane@cioins.co.in	Area of Navi Mumbai, Thane District, Raigad District, Palghar District and wards of Mumbai, M/East, M/West, N, S and T."

## **Bajaj Life Secure Plus**

A Non-Participating, Non-Linked, Individual Health Plan  
UIN:116N216V01

### **Annexure AA**

#### **Section 38 of Insurance Act, 1938, as amended from time to time – Assignment and Transfer of Insurance Policies**

Assignment or transfer of a Policy should be in accordance with section 38 of the Insurance Act, 1938, as amended from time to time. The extant provisions in this regard are as follows:

1. This Policy may be transferred / assigned, wholly or in part, with or without consideration.
2. An assignment may be effected in a Policy by an endorsement upon the Policy itself or by a separate instrument under notice to the Company.
3. The instrument of assignment should indicate the fact of transfer or assignment and the reasons for the assignment or transfer, antecedents of the assignee and terms on which assignment is made.
4. The assignment must be signed by the transferor or assignor or duly authorized agent and attested by at least one witness.
5. The transfer of assignment shall not be operative as against the Company until a notice in writing of the transfer or assignment and either the said endorsement or instrument itself or copy thereof certified to be correct by both transferor and transferee or their duly authorized agents have been delivered to the Company.
6. Fee to be paid for assignment or transfer can be specified by the IRDAI through Regulations.
7. On receipt of notice with fee, the insurer should Grant a written acknowledgement of receipt of notice. Such notice shall be conclusive evidence against the Company of duly receiving the notice.
8. If the Company maintains one or more places of business, such notices shall be delivered only at the place where the Policy is being serviced.
9. The Company may accept or decline to act upon any transfer or assignment or endorsement, if it has sufficient reasons to believe that it is (a) not bona-fide or (b) not in the interest of the Policyholder / Life Assured or (c) not in public interest or (d) is for the purpose of trading of the Policy.
10. Before refusing to act upon endorsement, the Company should record the reasons in writing and communicate the same in writing to Policyholder within 30 days from the date of Policyholder giving a notice of transfer or assignment.
11. In case of refusal to act upon the endorsement by the Company, any person aggrieved by the refusal may prefer a claim to IRDAI within 30 days of receipt of the refusal letter from the Company.
12. The priority of claims of persons interested in the Policy would depend on the date on which the notices of assignment or transfer is delivered to the Company; where there are more than one instruments of transfer or assignment, the priority will depend on dates of delivery of such notices. Any dispute in this regard as to priority should be referred to IRDAI.
13. Every assignment or transfer shall be deemed to be absolute assignment or transfer and the assignee or transferee shall be deemed to be absolute assignee or transferee, except
  - a. where assignment or transfer is subject to terms and conditions of transfer or assignment OR
  - b. where the transfer or assignment is made upon condition that
    - i. the proceeds under the Policy shall become payable to Policyholder or Nominee(s) in the event of assignee or transferee dying before the Life Assured OR
    - ii. the Life Assured surviving the Policy TermSuch conditional assignee will not be entitled to obtain a loan on Policy or surrender the Policy. This provision will prevail notwithstanding any law or custom having force of law which is contrary to the above position.
14. In other cases, the Company shall, subject to terms and conditions of assignment, recognize the transferee or assignee named in the notice as the absolute transferee or assignee and such person
  - a. shall be subject to all liabilities and equities to which the transferor or assignor was subject to at the date of transfer or assignment and
  - b. may institute any proceedings in relation to the Policy
  - c. obtain loan under the Policy or surrender the Policy without obtaining the consent of the transferor or assignor or making him a party to the proceedings
15. Any rights and remedies of an assignee or transferee of the Policy under an assignment or transfer effected before commencement of The Insurance Laws (Amendment) Act, 2015 shall not be affected by this section.

***[Disclaimer: This is not a comprehensive list of amendments of Insurance Law (Amendment) Act, 2015 and only a simplified version prepared for general information. Policy Holders are advised to refer to Original Insurance Law (Amendment) Act, 2015 for complete and accurate details.]***

## **Bajaj Life Secure Plus**

A Non-Participating, Non-Linked, Individual Health Plan

UIN:116N216V01

### **Annexure BB**

#### **Section 39 of the Insurance Act, 1938, as amended from time to time – Nomination by Policyholder**

Nomination of a life insurance Policy is as below in accordance with section 39 of the Insurance Act, 1938, as amended from time to time. The extant provisions in this regard are as follows:

1. The Policyholder of a life insurance Policy on his own life may nominate a person or persons to whom money secured by the Policy shall be paid in the event of his death.
2. Where the Nominee is a Minor, the Policyholder may appoint any person to receive the money secured by the policy in the event of Policyholder's death during the Minority of the Nominee. The manner of appointment to be laid down by the Company.
3. Nomination can be made at any time before the maturity of the Policy.
4. Nomination may be incorporated in the text of the Policy itself or may be endorsed on the Policy communicated to the Company and can be registered by the Company in the records relating to the Policy.
5. Nomination can be cancelled or changed at any time before Policy matures, by an endorsement or a further endorsement or a will as the case may be.
6. A notice in writing of change or cancellation of Nomination must be delivered to the Company for the Company to be liable to such Nominee. Otherwise, Company will not be liable if a bona-fide payment is made to the person named in the text of the Policy or in the registered records of the Company.
7. Fee to be paid to the Company for registering change or cancellation of a Nomination can be specified by the IRDAI through Regulations.
8. On receipt of notice with fee, the Company should grant a written acknowledgement to the Policyholder of having registered a Nomination or cancellation or change thereof.
9. A transfer or assignment made in accordance with section 38 of Insurance Act, 1938, as amended from time to time, shall automatically cancel the Nomination except in case of assignment to the Company or other transferee or assignee for purpose of loan or against security or its reassignment after repayment. In such case, the Nomination will not get cancelled to the extent of Company's or transferee's or assignee's interest in the Policy. The Nomination will get revived on repayment of the loan.
10. The right of any creditor to be paid out of the proceeds of any Policy of life insurance shall not be affected by the Nomination.
11. In case of Nomination by Policyholder whose life is insured, if the Nominees die before the Policyholder, the proceeds are payable to Policyholder or his heirs or legal representatives or holder of succession certificate.
12. In case Nominee(s) survive the person whose life is insured, the amount secured by the Policy shall be paid to such survivor(s).
13. Where the Policyholder whose life is insured nominates his/her (a) parents or (b) spouse or (c) children or (d) spouse and children or (e) any of them, the Nominees are beneficially entitled to the amount payable by the Company to the Policyholder unless it is proved that Policyholder could not have conferred such beneficial title on the Nominee having regard to the nature of his title.
14. If Nominee(s) die after the Policyholder but before his share of the amount secured under the Policy is paid, the share of the expired Nominee(s) shall be payable to the heirs or legal representative of the Nominee(s) or holder of succession certificate of such Nominee(s).
15. The provisions of sub-section 7 and 8 (13 and 14 above) shall apply to all life insurance Policies maturing for payment after the commencement of The Insurance Laws (Amendment) Act, 2015 .
16. If Policyholder dies after maturity but the proceeds and benefit of the Policy has not been paid to him because of his death, his Nominee(s) shall be entitled to the proceeds and benefit of the Policy.
17. The provisions of section 39 of the Insurance Act, 1938, as amended from time to time, are not applicable to any life insurance Policy to which section 6 of Married Women's Property Act, 1874, applies or has at any time applied except where before or after The Insurance Laws (Amendment) Act, 2015, a Nomination is made in favour of spouse or children or spouse and children whether or not on the face of the Policy it is mentioned that it is made under section 39 of the Insurance Act, 1938, as amended from time to time. Where Nomination is intended to be made to spouse or children or spouse and children under section 6 of MWP Act, it should be specifically mentioned on the Policy. In such a case only, the provisions of section 39 of Insurance Act, 1938, as amended from time to time, will not apply.

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## **Bajaj Life Secure Plus**

A Non-Participating, Non-Linked, Individual Health Plan  
UIN:116N216V01

### **Annexure CC**

#### **Section 45 of the Insurance Act, 1938, as amended from time to time – Policy shall not be called in question on the ground of mis-statement after three years**

Provisions regarding Policy not being called into question in terms of section 45 of the Insurance Act, 1938, as amended from time to time are as follows:

1. No Policy of life insurance shall be called in question on any ground whatsoever after expiry of three (3) years from (a) the Policy Commencement Date or (b) the Date of Commencement of Risk or (c) the date of latest revival of the Policy or (d) the Date of Commencement of Rider; whichever is later.
2. On the ground of fraud, a Policy of life insurance may be called in question within three (3) years from (a) the Policy Commencement Date or (b) the Date of Commencement of Risk or (c) the date of latest revival of the Policy or (d) the Date of Commencement of Rider; whichever is later.  
For this, the Company should communicate in writing to the Company or legal representative or Nominee or assignees of Policyholder, as applicable, mentioning the ground and materials on which such decision is based.
3. Fraud means any of the following acts committed by Life Assured or Policyholder or by his agent, with the intent to deceive the Company or to induce the Company to issue the life insurance Policy:  
a. The suggestion, as a fact of that which is not true and which the Life Assured or Policyholder does not believe to be true, b. The active concealment of a fact by the Life Assured or Policyholder having knowledge or belief of the fact, c. Any other act fitted to deceive, and, d. Any such act or omission as the law specifically declares to be fraudulent.
4. Mere silence is not fraud unless, depending on circumstances of the case, it is the duty of the Life Assured or Policyholder or his agent keeping silence to speak, or silence is equivalent to speak.
5. No Insurer shall repudiate a life insurance Policy on the ground of Fraud, if the Life Assured or Policyholder / beneficiary can prove that the misstatement was true to the best of his knowledge and there was no deliberate intention to suppress the fact or that such misstatement of or suppression of material fact are within the knowledge of the insurer. Onus of disproving is upon the Policyholder, if alive, or beneficiaries.
6. Life insurance Policy can be called in question within three (3) years on the ground that any statement of or suppression of a fact material to expectancy of life of the Life Assured or Policyholder was incorrectly made in the Proposal Form or other documents, basis which Policy was issued or revived, or Rider issued. For this, the Company should communicate in writing to the Life Assured or Policyholder or legal representative or Nominee or assignees of Policyholder, as applicable, mentioning the ground and materials on which decision to repudiate the Policy of life insurance is based.
7. In case repudiation is on ground of misstatement and not on fraud, the premium(s) collected on Policy till the date of repudiation shall be paid to the Policyholder or legal representative or Nominee or assignees of Policyholder, within a period of 90 days from the date of repudiation.
8. Fact shall not be considered material unless it has a direct bearing on the risk undertaken by the Company. The onus is on Company to show that if the Company had been aware of the said fact, no life insurance Policy would have been issued to the Policyholder.
9. The Company can call 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 of age of Life Assured. So, this Section will not be applicable for questioning age or adjustment based on proof of age submitted subsequently.

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