

**CUSTOMER INFORMATION SHEET / KNOW YOUR POLICY**

This document provides key information about your policy. You are also advised to go through your Terms and Conditions and the Policy Schedule in the Policy Document.

SL. NO.	Title	Description in Simple Words (Please refer to applicable policy clause number in the next column)	Policy Clause Number
1	Name of the Insurance Product and Unique Identification Number (UIN)	Pramerica Life RockSolid Term Insurance(140N079V01)	Part A - Policy Schedule
2	Policy Number	As mentioned in Policy Schedule	Part A - Policy Schedule
3	Type of Insurance Policy	Pure Risk	-
4	Basic Policy details	<ul style="list-style-type: none"> • Instalment Premium - This is the amount of Premium paid per frequency i.e. Single/Annual/Semi Annual/Monthly as opted by you. • Mode of premium payment - This refers to the frequency of your premium payment (e.g. Single, Monthly, Semi Annual or Annual) • Sum Assured on death - This is the amount payable in case of death of life insured, which is same as the Sum Assured chosen under the plan. • Sum Assured on Maturity – There is no maturity benefit in this plan. • Premium payment Term – This is the period for which you are required to pay the premium to avail the full benefits of the policy • Policy Term - This is the period for which you will enjoy the policy benefits. 	Part A - Policy Schedule
5	Policy Coverage/benefits payable	• Benefits payable on maturity –There is no maturity benefit in this plan. This is a pure risk product.	Part C- Section One (C)
		• Benefits payable on death – This is the amount payable on death of the Life Assured which is the amount of Sum Assured chosen under the plan.	Part C- Section One (A)



		<ul style="list-style-type: none"> • Survival Benefits excluding that payable on maturity – Not Applicable 	Part C-Section One (B)
		<ul style="list-style-type: none"> • Surrender benefits – This is same as Policy Cancellation Value, it means an amount, if any, that becomes payable in case of cancellation in accordance with the terms and conditions of this policy and is less than the actual benefit amount. Its recommended to continue the policy to reap its full benefits and purpose. 	Part D-Section Three
		<ul style="list-style-type: none"> • Options to policyholders for availing benefits- The Death Benefit amount can be received by the beneficiary either as a) Lump sum b) Monthly Income c) Lump sum plus Monthly Income. 	Part D-Section Four (B)
		<ul style="list-style-type: none"> • Other benefits/options payable- Smart Exit-It provides flexibility to exit from the Policy before the end of the Policy term and receive the Total Premiums Paid, subject to certain conditions. • Lock-in period for Linked insurance policy - Not Applicable 	Part D-Section Four (A)
6	Options available (in case of Linked Insurance Products)	<ul style="list-style-type: none"> • Partial Withdrawal - Not Applicable • Top –up Provision - Not Applicable • Switches - Not Applicable • Settlement option - Not Applicable • Any other option - Not Applicable 	Not Applicable
7	Option available(in case of Annuity product)	<ul style="list-style-type: none"> • Type of immediate annuity- Not Applicable • Proportion of annuity amount guaranteed for variable pay-out option – Not Applicable • Any other option. - Not Applicable 	Not Applicable
8	Riders opted, if any	<p>Your product offers the following Riders to choose from and will be mentioned in your Policy Schedule if you have selected any of the available riders</p> <p>a) Pramerica Life Critical Illness Rider (UIN: 140B026V01)- It provides for financial compensation in the event life insured is diagnosed with any of the covered critical illnesses / conditions and surgeries</p> <p>b) Pramerica Life Accidental Death Benefit Rider (UIN: 140B029V01)- It provides a lump sum benefit to the nominee in case of unfortunate event of loss of life from an accident</p> <p>c) Pramerica Life Accidental Total and Permanent Disability Rider (UIN: 140B027V01)- It provides a lump sum benefit to the life insured in case of disability due to an accident</p>	Part A - Policy Schedule



		d) Pramerica Life Waiver of Premium (UIN: 140B028V01) - It allows the insurance policy to accrue the benefits even if one is unable to pay their future premiums due to the occurrence of any unforeseen events such as a Critical Illness, Accidental Total and Permanent Disability or Death.	
9	Exclusions (events where insurance coverage is not payable), if any.	At inception of the Policy - Suicide within 12 months from the date of commencement of risk Revival of the Policy - Suicide within 12 months from the date of revival For other exclusions, please refer to the Policy Document or Rider Policy Document if applicable.	Part F- Section One
10	Waiting /lien Period, if any	Not Applicable	Not Applicable
11	Grace period	This refers to an period beyond the original premium due date that is 15 days for monthly premium payment mode and 30 days for non-monthly modes to pay your due premium The policy status remains valid during the grace period.	Part C- Section Four
12	Free Look Period	If you disagree with any of the Terms & conditions of the Policy you have options to return your Policy within 30 days of date of receipt of the Policy Document and the Company shall give a complete refund of paid premium (less applicable deduction, if any)	Part D- Section Five
13	Lapse, paid-up and revival of the Policy	Lapse - If you discontinue the payment of premiums before your Policy has acquired a Surrender Value, your Policy will lapse at the end of the grace period and no benefits shall be paid under a lapsed policy. Paid Up - Not Applicable	Part C- Section Five
		Revival – If your Policy is in Lapsed state you can revive your Policy i.e. pay all the due unpaid premiums within five years from the date of first unpaid Premium to enjoy the full benefits under your policy.	Part D- Section One
14	Policy Loan, if applicable	Not Applicable	Not Applicable
15	Claims/Claims Procedure	Turn Around Time (TAT) for claims settlement and brief procedure <ul style="list-style-type: none"> Death Claim Settlement without Investigation from the date of intimation of claim -15 days Death Claim Settlement with Investigation from the date of intimation of claim -45 days 	Part F Section Four



		<p>Helpline/Call Centre number and Contact details of the insurer</p> <ul style="list-style-type: none"> For claim related queries in respect of any Insured member please contact our branch or call us on 1860 500 7070 or 011 4818 7070 (Local charges apply) or write to us on Email: contactus@pramericalife.in Link for downloading claim form and list of documents required including bank account details. <p>Link for downloading claim form: https://pramericalife.in/claims/claimforms</p> <p>List of Documents:</p> <p>Basic documentation if death is due to medical reasons or natural:</p> <ol style="list-style-type: none"> The Company's Death Claim Form duly completed Policy Document (not necessary in case of dematerialized policy document) Death Certificate Claimant's Identity proof, Address proof and banking details Discharge summary and all other past hospital records Completed Last Medical Attendant's Report <p>Additional documents if death is due to Un-natural cause</p> <ol style="list-style-type: none"> Copy of First Information Report and Final Police Investigation Report Copy of Post-Mortem Report 	
16	Policy Servicing	<p>Turn Around Time (TAT)</p> <p>Free Look Cancellation & Refund from the date of receipt of request: 7 days</p> <p>Policy Servicing (from the date of receipt of request for the service specified): 7 days</p> <ul style="list-style-type: none"> Change of Address (KYC Norms to be complied) Registration /Change of Nomination, Assignment. Alteration in ORIGINAL POLICY CONDITIONS (where applicable) Policy Loan Unit / Index Linked Insurance Policy Switch, Top-up, and other related Services Decision on Policy Revival after receipt of all requirements Surrender or partial withdrawal of Policy 	Part D



		<p>Helpline/Call Centre number and Contact details of the insurer</p> <ul style="list-style-type: none"> • If you wish to discuss any aspect of your Policy or if you have any query or complaint please contact us at 1860 500 7070 or 011 48187070 (local charges apply) or write to us at contactus@pramericalife.in • Link for downloading applicable forms and list of documents required including bank account details. <p>Link for applicable forms https://www.pramericalife.in/Downloads/ServiceForms</p> <ul style="list-style-type: none"> • List of Documents : As per the servicing form and the KYC proof. 	
17	Grievances /Complaints	<p>Grievance Redressal Officer, Pramerica Life Insurance Ltd., 4th Floor, Building No. 9 B, Cyber City, DLF City Phase III, Gurgaon– 122002 GRO Contact Number: 0124 – 4697069 Email – gro@pramericalife.in Office hours 9.30 am to 6.30 pm from Monday to Friday</p> <p>IRDAI- Grievance Redressal Cell: If after contacting the Company, the Policyholders query or concern is not resolved satisfactorily or within timelines the Grievance Redressal Cell of the IRDAI may be contacted. Bima Bharosa Toll Free number – 155255 or 1800-425-4732 Email Id- complaints@irdai.gov.in Website: https://bimabharosa.irdai.gov.in</p> <p>Complaints against Life Insurance Companies: Insurance Regulatory and Development Authority of India Policyholder's protection & Grievance Redressal Department (PPGR) Sy. No. 115/1 Financial District Nanakramguda, Gachibowli Hyderabad – 500032</p> <p>Insurance Ombudsman: The office of the Insurance Ombudsman has been established by the Government of India for</p>	Part G



		<p>the redressal of any grievance in respect of life insurance policies.</p> <p>Any person who has a grievance against an insurer, may himself or through his legal heirs, nominee or assignee, make a complaint in writing to the Insurance Ombudsman within whose territorial jurisdiction the branch or office of the insurer complained against or the residential address or place of residence of the complainant is located.</p> <p>The complaint shall be in writing, duly signed by the complainant or through his legal heirs, nominee or assignee and shall state clearly the name and address of the complainant, the name of the branch or office of the insurer against whom the complaint is made, the facts giving rise to the complaint, supported by documents, the nature and extent of the loss caused to the complainant and the relief sought from the Insurance Ombudsman.</p> <p>You may approach the Insurance Ombudsman if your grievance pertains to any of the following:</p> <ol style="list-style-type: none">Delay in settlement of claim beyond the time specified in the regulations, framed under the Insurance Regulatory and Development Authority of India Act, 1999Any partial or total repudiation of claimsDisputes over premium paid or payable in terms of insurance policyMisrepresentation of policy terms and conditionsLegal construction of insurance policies in so far as the dispute relates to claimPolicy servicing related grievances against insurers and their agents and intermediariesIssuance of Life insurance policy, which is not in conformity with the proposal form submitted by the proposerNon-issuance of insurance policy after receipt of premiumAny other matter resulting from the violation of provisions of the Insurance Act, 1938 or the regulations, circulars, guidelines or instructions issued by the IRDAI from time to time or the terms and conditions of the policy contract, in so far as they relate to issues mentioned at clauses (a) to (f)	
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You can also access the Customer Information sheet through this link:

<https://www.pramericalife.in/Downloads/Download>

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

Declaration by the Policyholder

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

Place:

(Signature of the Policyholder)

Date:

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