

**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.

<b>SL. NO.</b>	<b>Title</b>	<b>Description in Simple Words</b> (Please refer to applicable policy clause number in the next column)	<b>Policy Clause Number</b>
<b>1</b>	Name of the Insurance Product and Unique Identification Number (UIN)	Pramerica Life Invest Shield (140L093V01)	Part- A Policy Schedule
<b>2</b>	Policy Number	As mentioned in the policy schedule	Part- A Policy Schedule
<b>3</b>	Type of Insurance Policy	Linked	Part- A Policy Schedule
<b>4</b>	Basic Policy details	<ul style="list-style-type: none"> <li>• <b>Instalment Premium-</b> This is the amount of Premium paid per frequency i.e. Every year/half-year/month as opted by you.</li> <li>• <b>Mode of premium payment -</b> This refers to the frequency of your premium payment (e.g. Monthly, Quarterly, half yearly or Yearly)</li> <li>• <b>Sum Assured on Death-</b> is defined as Sum Assured, which is equal to Cover Multiple multiplied by Annualized Premium and is considered for the determination of Death Benefit.</li> <li>• <b>Sum Assured on Maturity –</b> Not Applicable</li> <li>• <b>Premium payment Term –</b> This is the period for which you are required to pay the premium to enjoy the full benefits of the policy.</li> <li>• <b>Policy Term-</b> This is the period during which you will enjoy the benefits promised under the policy</li> </ul>	Part- A Policy Schedule
<b>5</b>	Policy Coverage/benefits payable	<ul style="list-style-type: none"> <li>• <b>Benefits payable on maturity –</b> This is the amount payable to you at the end of the Policy Term which is the Fund Value including Top Up fund value (if any) of your policy at the time of maturity.</li> <li>• <b>Benefits payable on death –</b> Death Benefit shall be higher of</li> </ul>	Part C – Section One

		<ul style="list-style-type: none"> <li>• Sum Assured* including Top-Up Sum Assured, if any or</li> <li>• Fund Value, including Top-Up Fund Value, if any, or</li> <li>• 105% of total premiums paid including Top-Up premiums till date of death, if any.</li> </ul> <p>• <b>Survival Benefits excluding that payable on maturity</b> – Not Applicable</p>	
		<ul style="list-style-type: none"> <li>• <b>Surrender benefits</b> – This is the amount you will receive in case if you want to terminate your policy (contract) before its maturity date.</li> </ul>	Part D – Section Six
		<ul style="list-style-type: none"> <li>• <b>Options to policyholders for availing benefits- Settlement option</b> -This allows you to receive your maturity value spread over a period of five years.</li> </ul>	Part D – Section Five
		<ul style="list-style-type: none"> <li>• <b>Other benefits/options payable-</b> Get Persistency Boosters at specific intervals and Maturity Additions at the end of Policy Term to further enhance your fund value</li> <li>• <b>Return of Mortality &amp; Allocation Charges</b> from the beginning of 11<sup>th</sup> Policy Year.</li> </ul>	Part C – Section One
		<ul style="list-style-type: none"> <li>• <b>Lock-in period for Linked insurance policy-</b> This refer to a period of first 5 policy years where you cannot make any withdrawal out of the policy.</li> </ul>	Part C– Section Two
6	Options available (in case of Linked Insurance Products)	<ul style="list-style-type: none"> <li>• <b>Partial Withdrawal</b> – This allows you to take out a limited amount of money from your policy for your needs. Partial Withdrawals can be made only after completion of lock-in-period (i.e. 5 years).</li> </ul>	Part D – Section Two
		<ul style="list-style-type: none"> <li>• <b>Top –up Provision</b> - This is an additional amount that you may wish to pay in your policy apart from your regular committed premiums payable.</li> </ul>	Part C – Section Four
		<ul style="list-style-type: none"> <li>• <b>Switches</b> – This refers to moving your investments between available funds in your policy.</li> </ul>	Part D – Section Four
		<ul style="list-style-type: none"> <li>• <b>Settlement option</b> -This allows you to receive your maturity value spread over a period of five years.</li> </ul>	Part D – Section Five

		<ul style="list-style-type: none"> <li>• <b>Defined Portfolio Strategy-</b> This arrangement helps you invest your monies in your choice of funds available under the product.</li> </ul>	Part E – Section Three
		<ul style="list-style-type: none"> <li>• <b>Systematic Transfer Plan-</b>This arrangement helps you to move your monies from liquid fund to the funds of your choice during the period 12 months.</li> </ul>	Part E – Section Four
		<ul style="list-style-type: none"> <li>• <b>Life Stage Portfolio Strategy-</b> This investment Strategy automatically manages your investments distributed between Large Cap Advantage Fund and Debt Fund in varying proportions basis your age.</li> </ul>	Part E – Section Five
		<ul style="list-style-type: none"> <li>• <b>Premium Re-direction:</b> You have an option to redirect your premium into different funds and proportions as you like under Premium Redirection option</li> </ul>	Part E – Section One
7	Option available(in case of Annuity product)	<ul style="list-style-type: none"> <li>• <b>Type of immediate annuity-</b> Not Applicable</li> <li>• <b>Proportion of annuity amount guaranteed for variable pay-out option.</b> - Not Applicable</li> <li>• <b>Any other option.</b> - Not Applicable</li> </ul>	Not Applicable
8	Riders opted, if any	<ul style="list-style-type: none"> <li>• Unit Linked Critical illness Rider</li> <li>• Unit Linked Accidental total and permanent disability Rider</li> <li>• Unit Linked Accidental death benefit Rider</li> </ul>	Part- A Policy Schedule
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	Part C – Section One
10	Waiting /lien Period, if any	Not Applicable	Not Applicable
11	Grace period	This refers to additional period of 15 days for monthly premium payment mode or 30 days for premium payment mode other than monthly to make the payment of your due premium if in case you fail to make the payment timely.	Part C – Section Two
12	Free Look Period	If you disagree with the Terms & conditions of the Policy, you can return your policy within 30 days of date of receipt of the Policy Document with complete refund of non-allocated premiums plus fund value as on the date of cancellation (plus charges applied through cancellation of units) less Proportionate risk premium, medical expenses, if any and stamp duty.	Part D – Section Nine
13	Lapse, paid-up and revival of the Policy	<p><b>Lapse</b> - Not Applicable</p> <p><b>Paid Up</b> – After 5 years, if in case all due premiums are not received, then the Sum Assured under the</p>	Part C – Section Two

		policy shall be reduced proportionately. This might result in reduced death benefit.	
		<b>Revival</b> – This refers to payment of all due premiums within a period of 3 years from the last unpaid premium to enjoy the full benefits under your policy.	Part D – Section One
<b>14</b>	Policy Loan, if applicable	Not Applicable	Not Applicable
<b>15</b>	Claims/Claims Procedure	<p><b>Turn Around Time (TAT) for claims settlement and brief procedure</b></p> <ul style="list-style-type: none"> <li>• Death Claim Settlement without Investigation from the date of intimation of claim -15 days</li> <li>• Death Claim Settlement with Investigation from the date of intimation of claim -45 days</li> </ul> <p><b>Helpline/Call Centre number and Contact details of the insurer</b></p> <ul style="list-style-type: none"> <li>• For claim related queries in respect of any Insured member please contact our branch or call us on 1860 500 7070 (Local charges apply) or 011 4818 7070 or write to us on Email: <a href="mailto:contactus@pramericalife.in">contactus@pramericalife.in</a></li> <li>• Link for downloading claim form and list of documents required including bank account details.</li> </ul> <p>Link for downloading claim form:  <a href="https://pramericalife.in/claims#claim-forms">https://pramericalife.in/claims#claim-forms</a></p> <p>List of Documents:</p> <p><b>Basic documentation if death is due to medical reasons or natural:</b></p> <ol style="list-style-type: none"> <li>1. The Company’s Death Claim Form duly completed</li> <li>2. Policy Document (not necessary in case of dematerialized policy document)</li> <li>3. Death Certificate</li> <li>4. Claimant’s Identity proof, Address proof and banking details</li> <li>5. Discharge summary and all other past hospital records</li> <li>6. Completed Last Medical Attendant's Report</li> </ol> <p><b>Additional documents if death is due to Un-natural cause</b></p> <ol style="list-style-type: none"> <li>1. Copy of First Information Report and Final Police Investigation Report</li> <li>2. Copy of Post-Mortem Report</li> </ol>	Part F Section Two

16	Policy Servicing	<p><b>Turn Around Time (TAT)</b></p> <p>Free Look Cancellation &amp; Refund from the date of receipt of request:7 days</p> <p><b>Policy Servicing (from the date of receipt of request for the service specified):7 days</b></p> <ul style="list-style-type: none"> <li>• Change of Address (KYC Norms to be complied)</li> <li>• Registration /Change of Nomination, Assignment.</li> <li>• Alteration in ORIGINAL POLICY CONDITIONS (where applicable)</li> <li>• Policy Loan</li> <li>• Unit / Index Linked Insurance Policy Switch, Top-up, and other related Services</li> <li>• Decision on Policy Revival after receipt of all requirements</li> <li>• Surrender or partial withdrawal of Policy</li> </ul> <p><b>Helpline/Call Centre number and Contact details of the insurer</b></p> <ul style="list-style-type: none"> <li>• If you wish to discuss any aspect of your Policy or if you have any query or complaint please contact us at our toll free number 1860 500 7070 (local charges apply) or 011 48187070 or write to us at <a href="mailto:contactus@pramericalife.in">contactus@pramericalife.in</a></li> </ul> <p>• <b>Link for downloading applicable forms and list of documents required including bank account details.</b></p> <p>Link for applicable forms  <a href="https://www.pramericalife.in/Downloads">https://www.pramericalife.in/Downloads</a>  List of Documents : As per the servicing form and the KYC proof.</p>	
17	Grievances /Complaints	<p>Grievance Redressal Officer,  Pramerica Life Insurance Ltd.,  7th and 8th Floor, Tower 2, Capital Business Park,  Sector 48, Gurugram-122018  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</p>	Part G

		<p>timelines the Grievance Redressal Cell of the IRDAI may be contacted.                  Bima Bharosa Toll Free number – 155255 or 1800-425-4732                  Email Id- <a href="mailto:complaints@irdai.gov.in">complaints@irdai.gov.in</a>                  Website: <a href="https://bimabharosa.irdai.gov.in">https://bimabharosa.irdai.gov.in</a></p> <p>Complaints against Life Insurance Companies:                  Insurance Regulatory and Development Authority of India                  Policyholder's protection &amp; 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 the redressal of any grievance in respect of life insurance policies.                  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"> <li>a. Delay in settlement of claim beyond the time specified in the regulations, framed under the Insurance Regulatory and Development Authority Act, 1999</li> <li>b. Any partial or total repudiation of claims</li> </ol>	
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You can also access the Customer Information sheet through this link:  
<https://www.pramericalife.in/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: