## **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.

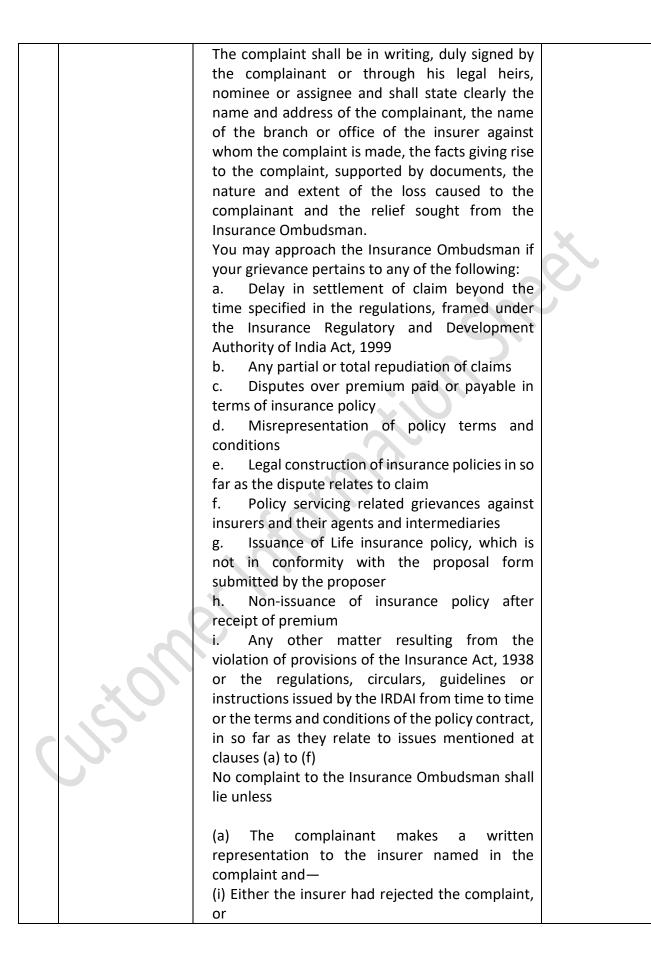
| SL.<br>NO. | Title  | <b>Description in Simple Words</b><br>(Please refer to applicable policy clause number in<br>the next column)   | Policy Clause<br>Number    |
|------------|--|---|----------------------------|
| 1          | Name of the<br>Insurance Product<br>and Unique<br>Identification<br>Number (UIN) | Pramerica Life Smart Income (140N044V05)  | Part A -Policy<br>Schedule |
| 2          | Policy Number  | As mentioned in Policy Schedule   | Part A -Policy<br>Schedule |
| 3          | Type of Insurance<br>Policy  | Non-Linked other than pure risk and pension   | -                          |
| 4          | Basic Policy<br>details  | <ul> <li>Instalment Premium: This is the amount of<br/>Premium paid per frequency i.e. Annual/Semi-<br/>Annual/Monthly as opted by you.</li> <li>Mode of premium payment: This refers to the<br/>frequency of your premium payment (e.g.<br/>Monthly, Semi - Annual or Yearly)</li> <li>Sum Assured on death: This is the amount<br/>highest of:<br/>Base sum assured or<br/>105% of premium paid till date of death<br/>Maturity sum assured = Annual<br/>Payouts(multiplied by) Lump sum factor<br/>And it's an important component of death benefit<br/>payable</li> <li>Sum Assured on Maturity: This is the amount<br/>given in the form of Annual payouts at the end of<br/>year where annual payout = Annualized premium<br/>(multiplied by) MBM as applicable and<br/>mentioned in the policy.</li> <li>Policy Term: This is the period during which you<br/>will enjoy the benefits promised under the policy</li> </ul> | Part A -Policy<br>Schedule |
| 5          | Policy<br>Coverage/benefits<br>payable   | • Benefits payable on maturity:<br>On survival of Life Insured till the Maturity Date,<br>the Company will pay Annual Payouts.<br>Annual Payouts = Annualized premium<br>(multiplied by) MBM as applicable in the policy.   | Part C- Section<br>One     |

|    |   | <ul> <li>Benefit payable on Death–</li> <li>The Death Sum Assured shall be higher of: <ul> <li>a) Base Sum Assured (OR)</li> <li>b) 105% of the Total Premiums paid till date of death (excluding underwriting extra, if any) (OR)</li> <li>c) Maturity Sum Assured</li> </ul> </li> </ul>                  |                         |
|----|---|---|-------------------------|
|    |   | Survival Benefits excluding that payable on   |                         |
|    |   | maturity – Not available  | X                       |
|    |   | <ul> <li>Surrender benefits – This is the amount you will<br/>receive in case if you want to terminate your<br/>policy (contract) before its Maturity Date and is<br/>less than the actual benefit amount. Its<br/>recommended to continue the policy to reap its<br/>full benefits and purpose.</li> </ul> | Part D- Section<br>Two  |
|    |   | Options to policyholders for availing benefits-   |                         |
|    |   | Not Applicable  |                         |
|    |   | <ul> <li>Other benefits/options payable- Not Applicable</li> <li>Lock-in period for Linked insurance policy- Not<br/>Applicable</li> </ul>  | Not Applicable          |
| 6  | Options available   | Partial Withdrawal - Not Applicable   |                         |
|    | (in case of Linked  | <ul> <li>Top –up Provision - Not Applicable</li> </ul>  |                         |
|    | Insurance   | Switches - Not Applicable   | Not Applicable          |
|    | Products)   | Settlement option - Not Applicable  |                         |
| 7  | Option  | • Any other option - Not Applicable   |                         |
| /  | available(in case<br>of Annuity<br>product)                                   | <ul> <li>Type of immediate annuity, for example Life<br/>annuity with Return of Purchase price etc Not<br/>Applicable</li> <li>Proportion of annuity amount guaranteed for<br/>variable pay-out option Not Applicable</li> <li>Any other option Not Applicable</li> </ul>                                   | Not Applicable          |
| 8  | Riders opted, if any  | Summary of coverage – Not Applicable  | Not Applicable          |
| 9  | Exclusions (events<br>where insurance<br>coverage is not<br>payable), if any. | At inception of the Policy - Suicide within 12<br>months from the date of commencement of risk<br>Revival of the Policy - Suicide within 12 months<br>from the date of revival. For other exclusion refer<br>to the policy document.  | Part F- Section<br>One  |
| 10 | Waiting /lien<br>Period, if any   | Number of days: Not Applicable  | Not Applicable          |
| 11 | Grace period  | This refers to additional period of 15 days for<br>monthly premium payment mode or 30 days for<br>premium payment mode for non monthly modes<br>to pay your due premium. The policy status remain<br>valid during grace period.   | Part C- Section<br>Four |

| 12       Free Look Period       If you disagree with any of the Terms & conditions of the Policy you have the option to return your Policy within 30 days of date of receipt of the Policy Document with complete refund of paid premium (less applicable deduction)       For         13       Lapse, paid-up and revival of the Policy Document with complete refund of paid premium 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- If the Policy has acquired a Surrender Value and no future premiums are paid, you may choose to continue your Policy on Reduced Paid-up basis. In that case, your policy benefits shall be proportionately reduced.       Part D-3         14       Policy Loan, if applicable       If your policy acquire a Surrender Value, you will be eligible for Policy Loan subject to maximum of 80% of surrender value       Part D-3         15       Claims/Claims       Turn Around Time (TAT) for claims settlement and brief procedure       Part Claim Settlement without Investigation from the date of intimation of claim -15 days       Part F S days         16       Death Claim Settlement with Investigation from the date of intimation or call us on 1860 500 7070 or 011 4818 7070 (Local charges apply) or write to us on Email: contactus@pramericalife.in       Part F S For         17       Link for downloading claim form: https://pramericalife.in/claims/claimforms       Link for downloading claim form: https://pramericalife.in/claims/claimforms  | oction     |
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| 13       Lapse, paid-up<br>and revival of the<br>Policy       Lapse, If you discontinue the payment of<br>premium (less applicable deduction)       Part<br>Section         13       Lapse, paid-up<br>and revival of the<br>Policy       Lapse - If you discontinue the payment of<br>premiums before your Policy has acquired a<br>Surrender Value, your Policy will lapse at the end<br>of the grace period and no benefits shall be paid<br>under a lapsed policy.       Part<br>Paid Up- If the Policy has acquired a Surrender<br>Value and no future premiums are paid, you may<br>choose to continue your Policy on Reduced Paid-up<br>basis. In that case, your policy benefits shall be<br>proportionately reduced.       Part<br>Section         14       Policy Loan, if<br>applicable       If your Policy Loan subject to maximum of<br>80% of surrender value       Part D-5<br>Turn Around Time (TAT) for claims settlement and<br>brief procedure       Part D-5<br>Turn Around Time (TAT) for claims settlement and<br>brief procedure       Part D-5<br>Turn Around Time (TAT) for claims settlement and<br>brief procedure       Part FS<br>For<br>Claims/Claims         15       Claims/Claims<br>Procedure       Turn Around Time (TAT) for claims settlement and<br>brief procedure       Part FS<br>days         16       Death Claim Settlement with Investigation<br>from the date of intimation<br>of claim -15 days       Part FS<br>days         17       For claim related queries in respect of any<br>Insured member please contact details<br>of the insurer       Part FS<br>For         18       For claim related queries in respect of any<br>Insured member please contact our branch<br>or call us on 1860 500 7070 or 0114818<br>7070 (Local charges apply) or write to us on<br>Email: contactus@pramericalife.in   |            |
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| 15       Claims/Claims<br>Procedure       Turn Around Time (TAT) for claims settlement and<br>brief procedure         •       Death Claim Settlement without<br>Investigation from the date of intimation<br>of claim -15 days         •       Death Claim Settlement with Investigation<br>from the date of intimation of claim -45<br>days         Helpline/Call Centre number and Contact details<br>of the insurer       •         •       For claim related queries in respect of any<br>Insured member please contact our branch<br>or call us on 1860 500 7070 or 011 4818<br>7070 (Local charges apply) or write to us on<br>Email: <u>contactus@pramericalife.in</u> Part F S<br>For         •       Link for downloading claim form and list of<br>documents required including bank account<br>details.       Link for downloading claim form:  |            |
| Procedure       brief procedure         • Death Claim Settlement without<br>Investigation from the date of intimation<br>of claim -15 days       • Death Claim Settlement with Investigation<br>from the date of intimation of claim -45<br>days         Helpline/Call Centre number and Contact details<br>of the insurer       • For claim related queries in respect of any<br>Insured member please contact our branch<br>or call us on 1860 500 7070 or 011 4818<br>7070 (Local charges apply) or write to us on<br>Email: contactus@pramericalife.in       Part F S<br>For         • Link for downloading claim form and list of<br>documents required including bank account<br>details.       Link for downloading claim form:   | 20         |
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| Email: <u>contactus@pramericalife.in</u> <ul> <li>Link for downloading claim form and list of documents required including bank account details.</li> <li>Link for downloading claim form:</li> </ul>  | <b>A</b> 1 |
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| documents required including bank account<br>details.<br>Link for downloading claim form:  |            |
| details.<br>Link for downloading claim form:   |            |
| Link for downloading claim form:   |            |
|  |            |
|  |            |
| List of Documents:   |            |
| Basic documentation if death is due to medical   |            |
| reasons or natural:  |            |

|    |                  | 1. The Company's Death Claim Form duly                              |        |
|----|------------------|---|--------|
|    |                  | completed   |        |
|    |                  | 2. Policy Document (not necessary in case of                        |        |
|    |                  | dematerialized policy document)                                     |        |
|    |                  | 3. Death Certificate  |        |
|    |                  | 4. Claimant's Identity proof, Address proof                         |        |
|    |                  | and banking details   |        |
|    |                  | 5. Discharge summary and all other past                             |        |
|    |                  | hospital records  |        |
|    |                  | 6. Completed Last Medical Attendant's Report                        |        |
|    |                  |   | X      |
|    |                  | Additional documents if death is due to Un-                         | $\sim$ |
|    |                  | natural cause   |        |
|    |                  | 1. Copy of First Information Report and Final                       |        |
|    |                  | Police Investigation Report   |        |
|    |                  | 2. Copy of Post-Mortem Report                                       |        |
|    |                  | 2. Copy of Post-Morteni Report                                      |        |
| 16 | Doliny Sonvising | Turn Around Time (TAT)  |        |
| 10 | Policy Servicing |   |        |
|    |                  | Free Look Cancellation & Refund from the date of                    |        |
|    |                  | receipt of request:7 days   |        |
|    |                  |   |        |
|    |                  | Policy Servicing (from the date of receipt of request               |        |
|    |                  | for the service specified):7 days                                   |        |
|    |                  | <ul> <li>Change of Address (KYC Norms to be complied)</li> </ul>    |        |
|    |                  | <ul> <li>Registration /Change of Nomination, Assignment.</li> </ul> |        |
|    |                  | <ul> <li>Alteration in ORIGINAL POLICY CONDITIONS (where</li> </ul> |        |
|    |                  | applicable)   |        |
|    |                  | Policy Loan   |        |
|    |                  | • Unit / Index Linked Insurance Policy Switch, Top-up,              |        |
|    |                  | and other related Services  |        |
|    |                  | Decision on Policy Revival after receipt of all                     |        |
|    |                  | requirements  | Part D |
|    |                  | <ul> <li>Surrender or partial withdrawal of Policy</li> </ul>       |        |
|    |                  | Helpline/Call Centre number and Contact details                     |        |
|    |                  | of the insurer  |        |
|    |                  | • 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 <u>contactus@pramericalife.in</u>                 |        |
|    |                  | en mile to do de <u>contactable pranterioantenn</u>                 |        |
|    |                  | <ul> <li>Link for downloading applicable forms and list</li> </ul>  |        |
|    |                  | of documents required including bank account                        |        |
|    |                  | details.  |        |
|    |                  |   |        |
|    |                  | Link for applicable forms   |        |
|    |                  | https://www.pramericalife.in/Downloads/ServiceForms                 |        |
| L  |                  |   |        |

|    |                           | <ul> <li>List of Documents : As per the servicing form and the<br/>KYC proof.</li> </ul>  |        |
|----|---------------------------|---|--------|
| 17 | Grievances<br>/Complaints | <ul> <li>List of Documents : As per the servicing form and the KYC proof.</li> <li>Grievance Redressal Officer,<br/>Pramerica Life Insurance Ltd.,<br/>4th Floor, Building No. 9 B, Cyber City,<br/>DLF City Phase III, Gurgaon–122002</li> <li>GRO Contact Number: 0124 – 4697069</li> <li>Email – gro@pramericalife.in</li> <li>Office hours 9.30 am to 6.30 pm from Monday to<br/>Friday</li> <li>IRDAI- Grievance Redressal Cell:<br/>If after contacting the Company, the Policyholders<br/>query or concern is not resolved satisfactorily or<br/>within</li> <li>timelines the Grievance Redressal Cell of the<br/>IRDAI may be contacted.</li> <li>Bima Bharosa Toll Free number – 155255 or 1800-<br/>425-4732</li> <li>Email Id- complaints@irdai.gov.in</li> <li>Website: https://bimabharosa.irdai.gov.in</li> <li>Complaints against Life Insurance Companies:<br/>Insurance Regulatory and Development Authority<br/>of India</li> <li>Policyholder's protection &amp; Grievance Redressal<br/>Department (PPGR)</li> <li>Sy. No. 115/1</li> <li>Financial District</li> <li>Nanakramguda, Gachibowlii</li> <li>Hyderabad – 500032</li> </ul> | Part G |
|    | JUSCON                    | Insurance Ombudsman:<br>The office of the Insurance Ombudsman has been<br>established by the Government of India for the<br>redressal of any grievance in respect of life<br>insurance policies.<br>Any person who has a grievance against an<br>insurer, may himself or through his legal heirs,<br>nominee or assignee, make a complaint in writing<br>to the Insurance Ombudsman within whose<br>territorial jurisdiction the branch or office of the<br>insurer complained against or the residential<br>address or place of residence of the complainant<br>is located.  |        |



| <ul> <li>(ii) The complainant had not received any reply within a period of one month after the insurer received his representation, or</li> <li>(iii) The complainant is not satisfied with the reply given to him by the insurer</li> <li>(b) The complaint is made within one year—</li> <li>(i) After the order of the insurer rejecting the representation is received, or</li> <li>(ii) After receipt of decision of the insurer which is not to the satisfaction of the complainant, or</li> <li>(iii) After expiry of a period of one month from the date of sending the written representation to the insurer if the insurer named fails to furnish reply to the complainant.</li> </ul> | Š |
|---|---|
| The address of the Insurance Ombudsman are<br>attached herewith and may also be obtained from<br>the following link on the internet. Link<br>https://www.cioins.co.in/ombudsman<br>Council for Insurance Ombudsmen:<br>(Monitoring Body for Offices of Insurance<br>Ombudsman)<br>3rd Floor, Jeevan Seva Annexe, S.V Road,  |   |
| Santacruz (West), Mumbai – 400054. Tel no: 022-<br>69038801/03/04/05/06/07/08/09.<br>Email id: inscoun@cioins.co.in<br>Website: www.cioins.co.in  |   |

You can also access the Customer Information sheet through this link: <u>https://www.pramericalife.in/Downloads/Download</u>

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: Date: (Signature of the Policyholder)