

PART B

Definitions

Words or phrases appearing in the Policy Document in initial capitals will have the meanings given to them below:

Where appropriate, any reference to the singular includes references to the plural, references to the male include references to the female and references to any statute include references to any subsequent changes to that statute.

In case of any conflict between the interpretations of any of the terms of this Policy Document, the Part C (Specific Terms and Conditions) shall override Part B (Definitions) of this Policy Document.

General Terms

Annual Renewal Date means the annual anniversary of the Policy Commencement Date and as specified in the Schedule.

Application Form means the proposal form and any other information given by the Master Policyholder to the Company before the inception of this Policy.

Appointee means the person named in the Membership Register who has been nominated by the Insured Member to receive payment, under this Policy if the Nominee is a minor.

Coverage Expiry Date means the date on which coverage for the Insured Member ends as specified in the Membership Register.

Certificate of Insurance means the certificate issued to each Insured Member to confirm his coverage under the Policy.

Coverage Sum Assured means the amount payable on death of the Insured Member specified in the Membership Register according to the terms and conditions of this Policy.

Effective Date of Coverage means the date on which insurance coverage in respect of an Insured Member commences, as specified in Membership Register and for a period of one Policy Year.

Eligible Member means a person who satisfies and continues to satisfy the eligibility criteria and who may apply to become an Insured Member.

Grace Period means a period of 30 days in case of half yearly mode and 15 days in case of monthly / quarterly mode, from the Premium Due Date within which Premiums can be paid without interest. No Grace Period shall be applicable in case of yearly mode.

Insured Member means an Eligible Member who is enrolled under the Policy and whose name has been recorded in the Membership Register after due approval from the Company.

IRDA means the Insurance Regulatory and Development Authority.

Master Policyholder means the person named in the Schedule who has concluded this Policy with the Company with respect to Insured Members.

Membership Register means the register maintained by the Master Policyholder containing details of each Insured Member, including but not limited to name, age, sex, designation, Coverage Sum Assured, Nominee (and Appointee if the Nominee is a minor) details, the Effective Date of Coverage and any special conditions applicable to the Insured Member.

Nominee means the person named in the Membership Register who has been nominated by the Insured Member to receive the benefits under this Policy.

Policy Commencement Date means the date when this policy is issued and is specified in the Schedule.

Policy or Policy Document means these Standard Terms & Conditions, the Application Form, the Schedule and Certificates of Insurance, as amended from time to time.

Policy Year means the 12 months period starting from the Policy Commencement Date and accordingly thereafter every subsequent Annual Renewal Date. Please note that the policy is re issued on similar terms and conditions as in original Policy Document with mutual consent in Master Policyholder and Company.

Premium means the amount payable by the Master Policyholder for the insurance coverage of the Insured Members as determined by the Company from time to time. The Schedule details the due dates for payment of Premium (**Premium Due Dates**) and how frequently the Premium is to be paid (**Premium Frequency**).

Schedule means the document attached to this Policy which provides a snapshot of the Policy and benefit details and any annexure attached to it from time to time and any endorsements the Company has made and, if more than one, then the latest in time.

PRAMERICA LIFE GROUP TERM PLAN (NON-LINKED)

PART C

Specific Terms and Conditions

Section One: Membership Provisions

An Eligible Member will become an Insured Member only when the Master Policyholder has entered the member's details into the Membership Register.

The Master Policyholder is responsible for maintaining the Membership Register and for ensuring that it is accurate. The Master Policyholder shall intimate the Company any change in the details of the Insured Members and addition/deletion in the Membership Register in any month, within first [7] days of the following calendar month. The Master Policyholder agrees to indemnify and hold the Company harmless from and against any and all losses, costs, expenses, actions or proceedings suffered by the Company in relation to any error or deficiency in or in respect of the Membership Register.

The Company may seek additional information and/or documentation in respect of any Insured Member at any time. If the information and/or documentation for such Insured Member is not received by the Company within [30] days of a request being sent to the Master Policyholder, the name of the Insured Member shall be deemed to have been removed from the Membership Register effective from the date of Our request of such information and/or documentation and the Certificate of Insurance issued shall no longer be valid.

An Insured Member's coverage under the Policy shall immediately and automatically terminate on the occurrence of the first of the following events:

- a) The Coverage Expiry Date
- b) The Insured Member ceases to fulfill any of the eligibility criteria
- c) The Insured Member's death.
- d) The date on which the Policy lapses.
- e) Written request by the Company or by the Master Policyholder on at least 30 days prior notice

Section Two: Payment of Premium

Premium is payable to the Company on the due dates as specified in the Schedule. If the Premium due is not received in full by end of Grace Period, the Policy shall automatically lapse without any value at the end of Grace Period.

If any Eligible Member becomes an Insured Member during the Policy Year, a pro-rata Premium is payable for that Eligible Member to provide coverage for the period from Effective Date of Coverage to next Premium Due Date. The Master Policyholder understands and agrees that the Coverage of an Insured Member shall not commence until the Company has received and realized the full Premium due in respect of such Insured Member.

If an Insured Member ceases to be an Insured Member during a Policy Year for any reason other than the Insured Member's death, the Company may refund pro rata the Premium received in respect of the Insured Member for that Policy Year.

Section Three: Benefit Payable on Death

Upon death of an Insured Member the Company will pay the following benefit to the Nominee / legal heirs. If an Insured Member's death occurs during the Grace Period, the death benefit will be entertained, only if the Premium due for the Policy has been paid by the Master Policyholder before the end of the Grace Period.

- a) If the Schedule specifies that the Coverage Sum Assured is payable as a lump sum, the Company will pay the Coverage Sum Assured.
- b) If the Schedule specifies that the Coverage Sum Assured is payable in installments, the Company will pay the Coverage Sum Assured in equal installments over the period specified in the Schedule. Each installment amount specified in the Schedule shall be payable at the frequency specified in the Schedule, commencing from the Insured Member's death.

The Nominee / legal heirs, as the case may be may opt to receive the future balance installments in lump sum. The Company shall, on receipt of a written request from the Nominee / legal heirs, pay the discounted value of the future balance installments as lump sum amount and no further benefits would be payable under the Policy.

The discounted value shall be calculated at a discount rate of 5% per annum or any such other rate as may be approved by IRDA.

The option as specified in clause (b) above shall be available only to the parents of the school children.

If death occurs due to suicide, whether sane or insane, within twelve months of the date of joining the scheme, then the Company's obligation under this Policy shall be to pay an amount equal to 80% of Premium paid in respect of the Insured Member.

Section Four: Renewal of the Policy

The Policy is an annual contract which expires on every Annual Renewal Date unless renewed. The Company reserves the right to accept/decline such renewal and to specify the terms and conditions and Premium payable on renewal.

The Master Policyholder shall provide the Company with updated Membership Register at least [30] days before the Annual Renewal Date. Based on the details provided, the Company will send written notice to the Master Policyholder of the Premium payable.

PART D

Policy Servicing

Section One: Revival

Revival is available up to 3 months from the date of first unpaid Premium but within the policy term of one year. There shall be no revival unless:

- a) The Master Policyholder gives the Company written request for revival and proposed date of Revival.
- b) The Company agrees to revive the Policy, for which purpose the Master Policyholder shall comply with any requests for information and documentation made by the Company.
- c) The Master Policyholder makes payment of all outstanding Premiums due from the last date of receipt of Premium to the proposed date of revival.

The revival of the Policy shall only be effective from the date on which the Company has issued a written endorsement confirming the revival of the Policy. The Master Policyholder understands and agrees that there is no obligation on the Company to revive the Policy or to revive it on the same terms and the revival is subject to the underwriting requirements of the Company as applicable from time to time.

Section Two: Free Look Period

The Master Policyholder / Insured Member will have a period of 15 days from the date of receipt of the Policy Document / Certificate of Insurance to review the terms and conditions of the Policy. If the Master Policyholder / Insured Member disagrees to any of those terms or conditions, he/she has an option to return the Policy stating the reasons for his/her objection. The Master Policyholder / Insured Member shall be entitled to a refund of the Premium paid subject to a deduction of a proportionate risk premium for the period of risk cover, any expenses incurred by the Company towards medical examination and the stamp duty charges.

Section Three: Surrender of Policy

No surrender value is payable under the Policy.

In case the Master Policyholder surrenders the Policy, an Insured Member can request the Company in writing to continue the coverage applicable to such Insured Member in accordance with the terms and conditions of the Policy.

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PART E

Charges - Nil

SAMPLE

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PART F

General Terms and Conditions

Section One: Termination of the Policy

The Premiums specified in the renewal notice must be paid on/before Annual Renewal date but within the policy term of one year failing which the policy will have deemed to lapse and no benefits will be payable.

The Company or the Master Policyholder has the right to terminate the Policy by giving a written notice of at least 30 days before the Annual Renewal Date. The coverage for all Insured Members shall immediately and automatically terminate from the end of such notice period.

Section Two: Death Claim Processing

In order for the Company to make any payment under the Policy that it is necessary that the Master Policyholder:

- a) Immediately notifies the Company of the Insured Member's death in writing, and in any event within 90 days of death. Company may condone the delay in filing a claim beyond 90 days where the claimant can establish that the delay was due to unforeseen circumstances and beyond the control of the claimant.
- b) Provides the Company with the opportunity of establishing to its satisfaction that a claim is payable.
- c) Provides all reasonable cooperation and any documentation and information to the Company, including but not limited to:
 - i. The claim form duly completed and countersigned by the authorized signatory of Master Policyholder.
 - ii. The Certificate of Insurance.
 - iii. Evidence of Insured Member's date of birth if the Company has not admitted the age of the Insured Member.
 - iv. The original or a legalized copy of the Insured Member's death certificate showing the circumstances, cause and the date of death.

The Company may, on a case to case basis and subject to exceptional circumstances, condone the submission of any of the above mentioned documents/ information while processing the claim.

Section Three: Assignment

The provisions of assignment will not be applicable to the Master Policyholder under Section 38 of the Insurance Act, 1938.

Section Four: Nomination

The nomination will be effected in accordance with Section 39 of the Insurance Act, 1938. The nominee details will be maintained separately in the register of members.

Section Five: Miscellaneous

a) Loss of the Policy Document

- i) If the Policy Document is lost or destroyed then the Company reserves the right to make such investigations

into and call for such evidence of the loss of the Policy Document, at the Master Policyholder's expense, as the Company considers necessary before issuing a duplicate Policy Document.

- ii) If the Company agrees to issue a duplicate Policy Document then:
 1. The Master Policyholder agrees to first pay the Company's fee for the issue of a duplicate, and
 2. The original Policy Document will cease to be of any legal effect and the Master Policyholder shall indemnify and keep the Company indemnified and hold the Company harmless from and against any costs, expenses, claims, awards or judgments arising out of or howsoever connected to the original Policy Document.
- iii) If the Certificate of Insurance is lost or destroyed, then the Company reserves the right to make such investigations and call for such evidence of the loss of the Certificate of Insurance as the Company considers necessary before issuing a duplicate Certificate of Insurance. The original Certificate of Insurance will cease to be of any legal effect after issuance of the duplicate Certificate of Insurance and the Insured Member shall indemnify and keep the Company indemnified and hold the Company harmless from and against any costs, expenses, claims, awards or judgments arising out of or howsoever connected to the original Certificate of Insurance.

b) Notices

- i. All notices meant for the Company whether under this Policy or otherwise must be in writing and delivered to the Company at the address as mentioned in Section Seven (i) below.
- ii. All notices meant for the Master Policyholder will be in writing and will be sent by the Company to the Master Policyholder's address shown in the Schedule.
- iii. The Company shall not be responsible for any consequences related to or arising out of non intimation of changes to the Master Policyholder's or Insured Member's address.

c) Fraud

If the Master Policyholder or the Insured Member or the Nominee or the Appointee or anyone acting at their direction or with their knowledge makes or advances any claim which is proved in accordance with Section 45 of the Insurance Act 1938 to be false, fraudulent, misleading or dishonest in any respect, then the Company shall be liable to pay only the Surrender Value and the coverage of such Insured Member shall immediately and automatically terminate.

d) Currency & Territorial Limits

All Single Premium and any amounts payable under the Policy are payable within India, and in the currency of the Policy as specified in the Schedule.

e) Taxes

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In respect of any payment made or to be made under this Policy, the Company shall deduct or charge taxes (including service tax) and other levies as applicable from time to time, at such rates as notified by the Government of India or a body authorised by the Government of India from time to time.

f) Governing Law & Jurisdiction

Any and all disputes or differences arising out of or in respect of this Policy shall be governed by and determined in accordance with Indian law and shall be subject to the jurisdiction of Indian Courts.

g) Entire Contract & Agent's Authority

The Policy Document comprises the entire contract between the Master Policyholder and the Company, and it cannot be changed or altered unless the Company approves of it in writing by endorsement on the Schedule and, where required, the approval of the IRDA has been obtained.

The insurance agent is authorised to arrange the completion and submission of the Master Policyholder's Application Form. No insurance agent is authorised to amend the Policy Document, or to accept any notice on the Company's behalf or to accept payments on the Company's behalf. If any money meant for the Company in any form is paid to an insurance agent then such payment is made at the Master Policyholder's

risk and the agent will be acting only as the Master Policyholder's representative.

h) Section 45 of the Insurance Act, 1938

No policy of life insurance effected before the commencement of this Act shall after the expiry of two years from the date of commencement of this Act and no policy of life insurance effected after the coming into force of this Act shall after the expiry of two years from the date on which it was effected, be called in question by an insurer on the ground that a statement made in the proposal for insurance or in any report of a medical officer, or referee, or friend of the insured, or in any other document leading to the issue of the policy, was inaccurate or false, unless the insurer shows that such statement was on a material matter or suppressed facts which it was material to disclose and that it was fraudulently made by the policy-holder and that the policyholder knew at the time of making it that the statement was false or that it suppressed facts which it was material to disclose:

Provided that nothing in this section shall prevent the insurer from calling 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 that the age of the Insured Member was incorrectly stated in the proposal.

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PART G

Other Details

Grievance Redressal

- I) In case of any clarification or query please contact your Company Salesperson.

- II) The Company may be contacted at:

Customer Service Help Line: 1800-102-7070 (Toll Free)
(9.00 am to 7.00 pm from Monday to Saturday)
Email : contactus@pramericalife.in
Website: www.pramericalife.in

Communication Address : Customer Service,
Pramerica Life Insurance Ltd., (Erstwhile DHFL
Pramerica Life Insurance Company Limited)
4th Floor, Building No. 9 B, Cyber City,
DLF City Phase III, Gurgaon- 122002
Office hours: 9.00 am to 6.00 pm from Monday to Friday

- III) Head-Grievance Redressal Officer :
If the response received from the Company is not satisfactory or no response is received within two weeks (Business Days) of contacting the Company, the matter may be escalated to:

Email- customerfirst@pramericalife.in

Head-Grievance Redressal Officer
Pramerica Life Insurance Ltd., (Erstwhile DHFL
Pramerica Life Insurance Company Limited)
4th Floor, Building No. 9 B, Cyber City,
DLF City Phase III, Gurgaon- 122002

- IV) IRDA- 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 IRDA may be contacted.

Call Center Toll Free number – 155255
Email Id- complaints@irda.gov.in

Complaints against Life Insurance Companies:
Insurance Regulatory and Development Authority
Consumer Affairs Department
United India Tower, 9th floor, 3-5-817/818,
Basheerbagh, Hyderabad – 500 029

- V) 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.

In case you are not satisfied with the decision/resolution of the Company, you may approach the Insurance Ombudsman if your grievance pertains to:

- I) Insurance claim that has been rejected or dispute of

- a claim on legal construction of the policy
II) Delay in settlement of claim
III) Dispute with regard to premium
IV) Non-receipt of your insurance document

The address of the Insurance Ombudsman are attached herewith as Annexure ___ and may also be obtained from the following link on the internet

Link

http://www.irda.gov.in/ADMINCMS/cms/NormalData_Laout.aspx?page=PageNo234&mid=7.2

The complaint should be made in writing duly signed by the complainant or by his legal heirs with full details of the complaint and the contact information of complainant.

As per provision 13(3) of the Redressal of Public Grievances Rules 1998, the complaint to the Ombudsman can be made only if the grievance has been rejected by the Grievance Redressal Machinery of the Insurer within a period of one year from the date of rejection by the insurer if it is not simultaneously under any litigation.

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Insurance Ombudsman List

Office of the Ombudsman	Contact Details	Office of the Ombudsman	Contact Details
Office: AHMEDABAD Areas of Jurisdiction: Gujarat , UT of Dadra & Nagar Haveli, Daman and Diu	Insurance Ombudsman, Office of the Insurance Ombudsman, 2nd Floor, Ambica House, Nr. C.U. Shah College, Ashram Road, AHMEDABAD-380 014. Tel.: 079-27546840 Fax : 079-27546142 Email ins.omb@rediffmail.com	Office: GUWAHATI Areas of Jurisdiction: Assam , Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura	Insurance Ombudsman, Office of the Insurance Ombudsman, "Jeevan Nivesh", 5 th Floor, Near Panbazar Overbridge, S.S. Road, GUWAHATI-781 001 (ASSAM). Tel.: 0361-2132204/5 Fax : 0361-2732937 Email ombudsmanghy@rediffmail.com
Office: BHOPAL Areas of Jurisdiction: Madhya Pradesh & Chhattisgarh	Insurance Ombudsman, Office of the Insurance Ombudsman, Janak Vihar Complex, 2 nd Floor, 6, Malviya Nagar, Opp. Airtel, Near New Market, BHOPAL(M.P.)-462 023. Tel.: 0755-2569201 Fax : 0755-2769203	Office: HYDERABAD Areas of Jurisdiction: Andhra Pradesh, Karnataka and UT of Yanam – a part of the UT of Pondicherry	Insurance Ombudsman, Office of the Insurance Ombudsman, 6-2-46, 1 st Floor, Moin Court, A.C. Guards, Lakdi-Ka-Pool, HYDERABAD-500 004. Tel : 040-65504123 Fax: 040-23376599 Email insombudhyd@gmail.com
Office: BHUBANESHWAR Areas of Jurisdiction: Orissa	Insurance Ombudsman, Office of the Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR-751 009. Tel.: 0674-2596455 Fax : 0674-2596429 Email ioobbsr@dataone.in	Office: KOCHI Areas of Jurisdiction: Kerala , UT of (a) Lakshadweep , (b) Mahe – a part of UT of Pondicherry	Insurance Ombudsman, Office of the Insurance Ombudsman, 2nd Floor, CC 27/2603, Pulinat Bldg., Opp. Cochin Shipyard, M.G. Road, ERNAKULAM-682 015. Tel : 0484-2358759 Fax : 0484-2359336 Email iokochi@asianetindia.com
Office: CHANDIGARH Areas of Jurisdiction: Punjab , Haryana, Himachal Pradesh, Jammu & Kashmir , UT of Chandigarh	Insurance Ombudsman, Office of the Insurance Ombudsman, S.C.O. No.101-103, 2nd Floor, Batra Building. Sector 17-D, CHANDIGARH-160 017. Tel.: 0172-2706468 Fax : 0172-2708274 Email ombchd@yahoo.co.in	Office: KOLKATA Areas of Jurisdiction: West Bengal , Bihar , Jharkhand and UT of Andaman & Nicobar Islands , Sikkim	Insurance Ombudsman, Office of the Insurance Ombudsman, 4th Floor, Hindustan Bldg. Annexe, 4, C.R.Avenue, Kolkatta – 700 072. Tel: 033 22124346/(40) Fax: 033 22124341 Email:iombsbpa@bsnl.in
Office: CHENNAI Areas of Jurisdiction: Tamil Nadu, UT– Pondicherry Town and Karaikal (which are part of UT of Pondicherry)	Insurance Ombudsman, Office of the Insurance Ombudsman, Fathima Akhtar Court, 4th Floor, 453 (old 312), Anna Salai, Teynampet, CHENNAI-600 018. Tel.: 044-24333668 /5284 Fax : 044-24333664 Email chennaiinsuranceombudsman@gmail. com	Office: LUCKNOW Areas of Jurisdiction: Uttar Pradesh and Uttaranchal	Insurance Ombudsman, Office of the Insurance Ombudsman, Jeevan Bhawan, Phase-2, 6 th Floor, Nawal Kishore Road, Hazaratganj, LUCKNOW-226 001. Tel : 0522 -2231331 Fax : 0522-2231310 Email insombudsman@rediffmail.com
Office: NEW DELHI Areas of Jurisdiction: Delhi & Rajasthan	Insurance Ombudsman, Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Bldg., Asaf Ali Road, NEW DELHI-110 002. Tel.: 011-23239633 Fax : 011-23230858 Email iobdelraj@rediffmail.com	Office: MUMBAI Areas of Jurisdiction: Maharashtra , Goa	Insurance Ombudsman, Office of the Insurance Ombudsman, S.V. Road, Santacruz(W), MUMBAI-400 054. Tel : 022-26106928 Fax : 022-26106052 Email ombudsmanmumbai@gmail.com