

SBI Life Insurance Company Limited

Regulated by IRDAI | Registration Number 111

Form

(COI No: < XXXXX>)

CUSTOMER INFORMATION SHEET / KNOW YOUR POLICY

This document provides key information about Your Certificate of Insurance You are also advised to go through Your Certificate of Insurance.

Sl. No.	Title	Description in Simple Words (Please refer to applicable Certificate of Insurance Clause Number in next column)	COI Clause Number
1.	Name of the Insurance Product and Unique Identification Number (UIN)	SBI Life – Group Micro Shield (UIN: 111N138V02)	COI Schedule
2.	COI Number	<< as allotted by system >>	COI Schedule
3.	Type of Insurance Policy	SBI Life - Group Micro Shield, is a Group, Non-Linked, Non-participating, Pure Risk, One Year Renewable Micro Life Insurance Product.	COI Schedule
4.	Policy Details	<ul style="list-style-type: none"> • Instalment Premium: << as allotted by system (excluding taxes) >> • Mode of Premium payment: << as allotted by system Yearly/Half-Yearly/Quarterly/Monthly >> • Sum Assured: << as allotted by system >> • Sum Assured on Maturity: Nil • Premium Payment Term << One Year Renewable Group Term Assurance (OYRGTA)>> • Policy Term << One Year Renewable Group Term Assurance (OYRGTA) >> 	COI Schedule
5.	Policy Coverage/Benefits Payable	<p>Death Benefit:</p> <p>i) In the unfortunate event of death of the Insured Member during the Cover Term and the cover under this Master Policy in respect to that Insured Member, is In-Force, the Death Benefit equal to the Sum Assured with respect to that Insured Member, will get paid out in lump sum and the cover of that Insured Member will cease.</p> <p>ii) If the Master Policyholder has opted for the Spouse Cover Benefit and the Master Policy Schedule specifies that the Spouse Cover Benefit is In-Force under the Master Policy and the Insured Member/Primary Insured dies during the Cover Term, We will pay the Death Benefit as specified above and the cover for the Insured Member (who is the spouse) will continue till the Cover End Date. If the Insured Member (who is the spouse) dies during the Cover Term, Death Benefit equal to the Sum Assured with respect to that</p>	15

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		<p>Insured Member (who is the spouse), will get paid out in lump sum and the cover of that Insured Member will cease.</p> <p>Maturity Benefit: No benefit is payable on the Cover End Date.</p> <p>Surrender Benefit: Not Applicable</p> <p>Other benefit/options payable, specific to the policy, if any: Spouse Cover Benefit is available under the Master Policy to the Insured Members if opted by the Master Policyholder and specified in the Master Policy Schedule.</p>	
6.	Exclusions (events where insurance coverage is not payable), if any.	<p>Suicide Claim Provision</p> <p>a) For employer-employee groups, the suicide exclusion is not applicable.</p> <p>b) For compulsory groups, where all Insured Members are covered, the suicide exclusion is not applicable.</p> <p>c) For other schemes: In case of death of the Insured Member due to suicide, within 12 months from the Cover Start Date of the Insured Member, We will not pay the Death Benefit and the Claimant shall be entitled to 80% of the total Premiums paid till the date of death, provided the Certificate of Insurance is In-Force.</p> <p>d) The total Premiums paid is total of all the Premiums paid for that Insured Member, excluding any extra Premium and taxes, if collected explicitly.</p>	16
7.	Grace Period	<p>Grace Period is available only during the Policy Term. A Grace Period of 30 days from the due date for payment of Premium will be provided for half yearly / quarterly Premium Payment Modes and Grace Period of 15 days from the due date for payment of Premium will be provided for monthly Premium Payment Mode to the Insured Members. The Insured Member's coverage will remain In-Force during the Grace Period.</p> <p>Grace Period will not be applicable for policies with yearly Premium Payment Mode.</p>	12
8.	Free Look Period	<p>In case, Insured Member does not agree with any terms and conditions of the Master Policy/Certificate of Insurance or otherwise, Insured Member has the option to cancel the Certificate of Insurance by sending a written request to the Company stating the reasons for objection within the Free Look Period of 30 days from the receipt of the Certificate of Insurance.</p> <p>Upon Insured Member's request and if no claim(s) has been made under the Certificate of Insurance, We shall refund the Premium paid for the Certificate of Insurance subject only to</p>	COI Schedule

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		<p>Telephone No. 022-6645 6000 Email: claims@sbilife.co.in</p> <ul style="list-style-type: none"> Link for downloading claim form and list of documents required including bank account details. https://www.sbilife.co.in/en/services/download-center/claim-forms <p>List of documents required-</p> <ul style="list-style-type: none"> Policy document/Certificate of Insurance Valid death certificate from municipal / local authorities KYC documents of the Claimant Valid bank account proof of the Claimant Claimant's statement and claim forms in prescribed formats Hospital records including discharge summary, etc, wherever applicable Any other documents including post-mortem report, first information report where applicable <p>Any other document which SBI Life may call, if found necessary in support of the claim</p>	
12.	Policy Servicing	<ul style="list-style-type: none"> Turn Around Time (TAT): https://www.sbilife.co.in/en/services->Download 'Turn Around Times' pdf Our Contact Details Toll free no.: 1800 267 9090 (Customer Service Timing:24X7). For any information/ clarification, please contact: Your local SBI Life service branch: <<SBI Life branch address>> Link for downloading applicable forms and list of documents required including bank account details. Various forms are available on SBI Life Website: https://www.sbilife.co.in/en/services/download-center/policy-servicing-forms 	26
13.	Grievances /Complaints	<ul style="list-style-type: none"> Contact details of Grievance Redressal Officer: SBI Life Insurance Company Limited Central Processing Centre 7th Level (D Wing) & 8th Level, Seawoods Grand Central, Tower 2, Plot No R-1, Sector - 40, Seawoods, Nerul Node, Navi Mumbai - 400706 Telephone No. 022-6645 6100 Email - hcr@sbilife.co.in Link for registering the grievance with Our portal: https://www.sbilife.co.in/en/grievances Contact details of Ombudsman: https://cioins.co.in/ombudsman 	24

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Declaration by the Insured Member

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

Place:

Date:

(Signature of the Insured Member)

Note:

- i. Product related documents including the Customer Information Sheet are available on Our website: www.sbilife.co.in
- ii. In case of any conflict, the terms and conditions mentioned in the Master Policy shall prevail.

SBI Life - Group Micro Shield (Micro Insurance Product) (UIN: 111N138V02)

A Group, Non-Linked, Non-Participating, Pure Risk, One Year Renewable Micro Life Insurance Product

Certificate of Insurance (COI)

<Membership form Bar Code >

<<Branch Code/ Branch Name>>

Primary Member Name : << Title/ First Name/ Middle Name/ Last Name >>

Address : << All lines of address >>

<<City>>

<<State>><<Pin-code>>

Contact Number : << Tel No. / Mobile No. >>

SAMPLE

Life Assured Details	Plan Details
<p>COI Issuance Date: <<DD-MM-YYYY>> Master Policyholder Name: <<>> SHG/ NGO/Institution Name : <<Not Applicable / Name >> Master Policy No.: <<>> Type of Group: << Employer-Employee group / Non Employer Employee group>> Scheme Characteristics: <<Voluntary/ Compulsory>> Membership Form No.: <> Member ID: <<>> Membership form Date: <<>> / <<DD-MM-YYYY>></p>	<p><u>Primary Insured Member Cover Details</u> Age: << >> years Gender: <<Male/ Female / Third Gender>> Sum Assured: << >>/-</p> <p>Insurance Cover Start Date: <<DD-MM-YYYY>> Insurance Cover End Date: <<DD-MM-YYYY>> Policy Term: Cover Term:</p> <p><u><<Spouse Cover Details</u> Name of Spouse Insured Member: << >> Age: << >> Gender: <<Male/ Female / Third Gender>> Sum Assured: << >>/-</p> <p>Insurance Cover Start Date: <<DD-MM-YYYY>> Insurance Cover End Date: <<DD-MM-YYYY>> Policy Term: Cover Term: >></p> <p>Nominee 1 Name: << >> Date of Birth of Nominee 1: <<DD-MM-YYYY>> Relationship of Nominee 1 to Life Assured :<<>> Percentage Share: << >></p> <p><<Nominee 2 Name: << >> Date of Birth of Nominee 2: <<DD-MM-YYYY>> Relationship of Nominee 2 to Life Assured: <<>> Percentage Share: << >></p> <p><<Nominee 3 Name: << >> Date of Birth of Nominee 3: <<DD-MM-YYYY>> Relationship of Nominee 3 to Life Assured :<<>> >> Percentage Share: << >></p> <p><<Nominee 4 Name: << >> Date of Birth of Nominee 4: <<DD-MM-YYYY>> Relationship of Nominee 4 to Life Assured :<<>> >>>> Percentage Share: << >></p> <p><<In case Nominee is a Minor: Name of Appointee: << >> Appointee Age: << >> Relationship of Appointee with Nominee:<<>>>></p> <p>Claim Payable to: << Master Policyholder to the extent of outstanding loan amount/Nominee>></p>

Free-Look Option:

The Free-Look Period applicable under this Certificate of Insurance is 30 days. Insured Member's request for cancellation of this Certificate of Insurance under the free look option must reach your nearest SBI Life Office within a period of 30 days.

In case the Insured Member does not agree with any terms and conditions of the Master Policy/Certificate of Insurance or otherwise, Insured Member has the option to cancel the Master Policy/Certificate of Insurance by sending a written request to Us stating the reasons for objection within the Free Look Period of 30 days from the date of the receipt of the Certificate of Insurance.

Upon Insured Member's request and if no claims have been made under the Master Policy/Certificate of Insurance, We shall refund the Premium paid, by Insured Member or Master Policyholder, after deducting proportionate risk Premium for the period of cover, the stamp duty paid and medical expenses, if any incurred by Us, on the medical examination of the Insured Member(s), irrespective of the reasons mentioned.

Insured Members' request for cancellation of this Certificate of Insurance must reach Insured Member's nearest SBI Life Office within a period of 30 days from the date of receipt of the Certificate of Insurance.

Premium Details	
Premium Payment Mode: << / Yearly / Half Yearly/Quarterly/ Monthly>> Premium Payment Term: << One Year Renewable Group Term Assurance (OYRGTA)>>	Premium Amount (excl. taxes) : Rs. <<>>/- Taxes (as applicable) : Rs. <<>>/- Total Amount Payable (incl. taxes): Rs. <<>>/-

Loan Details	
Whether Applicable? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Loan Account Number: Loan Category: <<Home Loan/Personal Loan/ Education Loan etc>>	Loan Amount: Rs. <<__>> Loan Term: <<____>> months

SBI Life Insurance Company Limited is pleased to acknowledge that <<Insured Member Name>>, a member of <<Master Policyholder>> has joined SBI Life – Group Micro Shield policy under which the Insured Members are provided life cover for the Sum Assured mentioned in this Certificate of Insurance above, subject to the terms and conditions contained in the Master Policy. A summary of the key features of the Master Policy are given overleaf. Please note that this is merely a summary of the key features of the product and that the insurance cover is strictly governed by the terms and conditions of the Master Policy issued to the Master Policyholder. In case of any conflict between the Master Policy and this Certificate of Insurance, the terms of Master Policy shall prevail.

We request Insured Member to read this Certificate of Insurance carefully. If the Insured Member find any errors, please return the Certificate of Insurance for effecting corrections.

Authorised Signatory
SBI Life Insurance Co. Ltd.

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KEY FEATURES OF YOUR LIFE INSURANCE COVER UNDER THE MASTER POLICY

1. **Insurance company** means SBI Life Insurance Company Limited.
2. **Claimant** means is the Master Policyholder, or the Insured Member, or the Nominee or the Assignee (if applicable) or their legal heirs or holders of a succession certificate (if the Insured Member, the Nominee(s) or the Assignee(s) (if applicable) are not alive at the time of claim), as the case may be and as specified in the Certificate of Insurance. In case the Claimant is not stated in the Certificate of Insurance or becomes invalid for any reason whatsoever, the Claimant will be the person(s) as certified by a court of competent jurisdiction.
3. **“Pure risk products”** means insurance products (without any savings element) where the payment of agreed amount is assured on the happening of death of Insured Member or on happening of Insured Member’s health related contingency within the term of the Master Policy.
4. **Master Policyholder** is an entity named as such in the Master Policy Schedule who has entered into a contract with Us for providing insurance cover to eligible members. MPH is also the group administrator to whom the Master Policy is issued.
5. **Primary Member** means a person of the constituent group which is undertaking similar activity or has been formed for commonality of purpose and is eligible for grant of benefits under the Master Policy.
6. **Insured Member** is the Member (including his/her spouse, if opted) who fulfills the eligibility criteria in the Master Policy and on whose life the insurance cover is granted under the Master Policy and the Company has issued the Certificate of Insurance. In case the Spouse Cover Benefit is opted by the Master Policyholder and specified in the Master Policy Schedule, then the person who is the member of the group to which the Master Policy has been issued (and not his/her spouse who also gets cover by the Master Policy) shall be considered as the Primary Insured Member.
7. **Cover Start Date:** is the Insurance Cover Start Date as mentioned in the Certificate of Insurance of a particular Insured Member
8. **Cover End Date :** The date as stated in the Certificate of Insurance on which the insurance cover on the life of the Insured Member ceases.

Sum Assured is the amount chosen at the Insurance Cover Start Date and as specified in the Certificate of Insurance. In case the Spouse Cover Benefit is opted by the Master Policyholder and specified in the Master Policy Schedule, then the Sum Assured for the Insured Member (who is the spouse) will also be stated in the Certificate of Insurance and will be less than or equal to the Sum Assured specified for the Primary Member.

9. **OYRGTA** is a One Year Renewable Group Term Assurance offered.
10. **Eligible entities** includes the following entities :(i) Reserve Bank of India (RBI) regulated scheduled commercial banks (including Cooperative Banks), (ii) non-banking financial companies (NBFCs) having certificate of registration from Reserve Bank of India, (iii) national housing board (NHB) regulated housing finance companies, (iv) national minority development finance corporation (NMDFC) and its state channelizing agencies, (v) small finance banks regulated by Reserve Bank of India, (iv) mutually aided cooperative societies formed and registered under the applicable State Act concerning such societies, (vii) microfinance companies registered under Section 8 of the Companies Act, 2013 or any other financial institution.
11. **Premium Payment Mode** is the frequency of Premium payment. If Premium amount received is in excess of the requisite Premium, the excess money will be refunded without any interest. The Premium should be paid in full always.

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In case, the Premium amount received by Us is less than the requisite amount, it will not be adjusted until the deficit Premium is received. We are not liable to pay any interest on the partial Premium paid. Insured Member will be liable to pay all applicable taxes as levied by the Government and or other Statutory Authorities from time to time.

In a scenario where the due Premium has been paid by the Insured Member to the Master Policyholder and an acknowledgement or receipt for the Premium is being received by the Insured Member, but the Premium has not been remitted by the Master Policyholder to the Insurance Company within the Grace Period. If a claim occurs subsequently, the same shall be honored, provided the claim is otherwise admissible and payable. However, this will be subject to submission of relevant documents by the Master Policyholder, proving that the due Premiums have been paid by the Insured Member to the Master Policyholder. The claim amount would be paid only after remittance of due Premium to Us.

12. **Grace Period** is the time granted by the Insurance Company from the Premium due date, without any penalty or late fee, during which time the Insured Member's cover under the Master Policy is considered to be in-force with the risk cover without any interruption, as per the terms & conditions of the Master Policy. Grace Period is available only during the Policy Term. A Grace Period of 30 days from the due date for payment of Premium will be provided for half yearly /quarterly Premium Payment Modes and Grace Period of 15 days from the due date for payment of Premium will be provided for monthly Premium Payment Mode to the Insured Member. The Insured Member coverage will remain In-Force during the Grace Period. Grace Period will not be applicable for policies with yearly Premium Payment Mode.
13. **Revival period** means the period of 3 months from the due date of first unpaid Premium.
14. **Taxes** are payable at the rate prevailing at the time of payment of Premium/s. Taxes include service tax/ cess/ GST and/ or any other statutory levy/ duty/ surcharge as notified by Central and/ or State Government from time to time.
15. **Policy Benefits** include the following:
 - I. **Death Benefit:** In the unfortunate event of death of the Insured Member during the cover term and the cover under the Master Policy in respect to that Insured Member is In-Force, the death benefit equal to the Sum Assured of the respective Insured Member, will get paid out in lump sum and the cover of that Insured Member will cease.

If the Master Policyholder has opted for the Spouse Cover Benefit and the Policy Schedule specifies that the Spouse Cover Benefit is In-Force under the Master Policy and the Insured Member/Primary Insured dies during the Cover Term, We will pay the Death Benefit as specified above and the cover for the Insured Member (who is the spouse) will continue till the Cover End Date. If the Insured Member (who is the spouse) dies during the Cover Term, Death Benefit equal to the Sum Assured with respect to that Insured Member (who is the spouse), will get paid out in lump sum and the cover of that Insured Member will cease.

On death of the primary Insured Member the cover for the spouse would continue till the end of the Master Policy duration for which the Premium has been collected. Further renewal would not be allowed in absence of the primary Insured Member.

The maximum benefit payable by the Company under all group micro insurance schemes, through a single application or multiple applications of same Insured Member shall not exceed Rs. 2,00,000 under any circumstance. In the event of there being more than one claim in respect of the same Insured Member, claims will be processed in the chronological order of receipt by the Company and claims only up to the aforementioned limit of Rs. 2,00,000 [Rupees two lakhs only] will be payable. All other claims will be declined and the

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Company shall refund the Premium paid subject only to a deduction of the expenses incurred by Us on medical examination of the Insured Member (if any) and stamp duty charges, without any interest to the Claimant.

- III. Maturity Benefit:** No maturity benefit is payable on the Cover End Date.
- IV. Surrender Benefit:** Not applicable for this Certificate of Insurance.
- V. Lapse:** Under yearly Premium Payment Mode: Lapse is not applicable.
Under other than yearly Premium Payment Mode: If Premium have not been paid within the Grace Period, the insurance cover under the Master Policy shall lapse. No benefit is payable in a lapsed cover.
- VI. Paid-up Value:** Paid-Up Value is not available under this Certificate of Insurance/ Master Policy.

16. Suicide Claim provisions:

- I. For employer-employee groups, the suicide exclusion is not applicable.
- II. For compulsory groups, where all Insured Members are covered, the suicide exclusion is not applicable.
- III. For others: In case of death of the Insured Member due to suicide, within 12 months from the Insurance Cover Start Date, the Claimant shall be entitled to 80% of the total Premiums paid till the date of death, provided the Certificate of Insurance is in-force.
- IV. The total Premiums paid is total of all the Premiums paid for that Insured Member, excluding any extra Premium and taxes, if collected explicitly.

17. Revival:

- I. Not applicable for yearly Premium Payment Mode.
- II. For other than yearly Premium Payment Mode: The Insured Member's cover under the Master Policy can be revived within 3 months from the due date of the first unpaid Premium and before the end of the Cover Term. The revival will be considered on receipt of written application from the Insured Member along with the proof of continued insurability of Insured Member and on payment of all overdue Premiums with interest. The revival will be effected subject to underwriting based on Company's Board approved underwriting policy. Revival will take effect only after the Company communicates its decision to the Insured Member.
- III. The interest will be charged at a rate declared by the Company from time to time. The Company's current policy is based on the nominal interest rate per annum and is 250 basis points greater than the benchmark yield of RBI repo rate as on 1st April of each of the financial year and it will be compounding on a half-yearly basis. The repo rate as on the 1st April 2024 is 6.50%. For Financial Year 2024-25, the revival interest rate applicable is 9.00% compounded half-yearly.
- IV. Any change in the basis for determining interest rate for revival shall be made subject to prior approval of the Authority as per applicable File & Use or Use & File procedure.

18. Termination of Certificate of Insurance:

The insurance cover under this Certificate of Insurance shall cease on the earliest of the following dates:

- I. on the expiry of the Policy Term
- II. on termination of Master Policy
- III. on date of death of the Insured Member
- IV. on expiry of the Cover Term in respect of Insured Members, for whatsoever reason
- V. the date of refund of amount on cancellation during Free-Look Period
- VI. on the expiry of the revival period, if the due Premium is not paid

19. Nomination:

Nomination shall be applicable as per Section 39 of the Insurance Act, 1938, as amended from time to time.

[A leaflet containing the simplified version of the provisions of Section 39 is enclosed as Annexure – I for reference.]

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20. Assignment:

Assignment shall be as per Section 38 of the Insurance Act, 1938, as amended from time to time.

[A leaflet containing the simplified version of the provisions of Section 38 is enclosed as Annexure – I (A) for reference.]

21. Mis-statement of Age:

If We find that the correct age of the Insured Member is different from that mentioned in the membership form, we will check Insured Member's eligibility for the insurance cover as on the Insurance Cover Start Date. If the age stated is incorrect and if the Insured Member are:

- I. Eligible,
 - a. If the correct age is found to be higher, then the difference in Premiums along with interest is payable.
 - b. If the difference in Premiums and applicable interest is not paid, We will refund the Premiums without interest and after deducting all applicable expenses like medical expenses, stamp duty, proportionate risk Premium along with applicable taxes, cesses and levies, etc., incurred by Us under the Certificate of Insurance.
 - c. If the correct age is found to be lower, We will refund the difference in Premiums.
- II. Not eligible,
 - a. We will terminate Insured Member's insurance cover under this Certificate of Insurance.
 - b. We will refund the Premiums without interest and after deducting all applicable expenses like medical expenses, stamp duty, proportionate risk Premium along with applicable taxes, cesses and levies, etc., incurred by Us under the Certificate of Insurance.

[A leaflet containing the simplified version of the provisions of Section 45 is enclosed as Annexure – II for reference.]

22. Loans: No loan will be granted by the company against this Certificate of Insurance.

23. Communication:

- I. Any notice, information or instruction to the Company must be in writing and delivered to the address intimated by the Company to the Master Policyholder which is currently: Group Operations Department, SBI Life Insurance Company Ltd, 7th Level (D Wing) & 8th Level, Seawoods Grand Central, Tower 2, Plot No. R-1, Sector 40, Seawoods, Nerul Node, Navi Mumbai - 400 706, Dist. Thane, Maharashtra. Phone : 022 - 6645 6000, E-mail: groupops@sbilife.co.in
The Company may change the address stated above and intimate the Master Policyholder of such change by suitable means. Any communication, information or instruction from the Company to the Master Policyholder shall be mailed to the address of the Master Policyholder provided or to the changed address as intimated to the Company in writing.
- II. It is important that the Insured Member should keep us informed about change in his/her communication address, if any.

24. Grievance Redressal Procedure:

- I. If Insured Member has any query, complaint or grievance, then the Insured Member may approach any of Our SBI Life Office.
- II. The Insured Member can also call Us on our toll-free number: 1800 267 9090 (Customer Service Timing: 24X7 and these timings are subject to change).
- III. Insured Member can also send an email to Us on info@sbilife.co.in
- IV. If Insured Member is not satisfied with Our decision of the above office, or has not received any response within 15 days, the Insured Member may contact the following official for resolution:

Head – Client Relationship,
SBI Life Insurance Company Limited
Central Processing Centre,
7th Level (D Wing) & 8th Level, Seawoods Grand Central,

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Tower 2, Plot No. R-1, Sector 40, Seawoods,
Nerul Node, Navi Mumbai - 400 706
Dist. Thane, Maharashtra
Telephone No: 022 – 6645 6785
Email Id: hcr@sbilife.co.in

- V. In case Insured Member is not satisfied with Our decision or have not received a response within 1 month from the date of filing the complaints with Us and the issue pertains to Rule 13 and 14(3) of Insurance Ombudsman Rules, 2017, Insured Member may approach the Insurance Ombudsman. The Insured Member can make the complaint to the Ombudsman as per provision 13 and 14(3) of the said rules. The relevant provisions have been mentioned in the section “Relevant Statutes”.
- VI. The address of the Insurance Ombudsman and the Insurance Ombudsman Rules, 2017, are, available on the website of IRDAI, <http://www.irdai.gov.in> and in our website <http://www.sbilife.co.in>. The address of the ombudsman at Mumbai is:
Office of the Insurance Ombudsman,
3rd Floor, Jeevan Seva Annexe,
S.V. Road, Santa Cruz (W),
Mumbai – 400 054.
Telephone No.: +91 – 22 – 69038821/23/24/25/26/27/28/29/30/31
E-mail: bimalokpal.mumbai@cioins.co.in
- VII. We have also enclosed a list of addresses of insurance ombudsmen in Annexure III for reference. If the Insured Member is not satisfied with the response or do not receive a response from Us within 15 days of lodging the complaint through Our Grievance Redressal Mechanism, the Insured Member may escalate the complaint to IRDAI through Bima Bharosa Portal (IRDAI): <https://bimabharosa.irdai.gov.in/> or contact IRDAI Grievance Call Centre on toll-free number: 155255 / 1800 4254 732 or alternatively Insured Member may send an email on complaints@irdai.gov.in
- VIII. The postal address of the IRDAI for communication for complaints by paper is as follows:
Policyholders’ Protection Grievance Redressal Department
Insurance Regulatory and Development Authority of India,
SY No 115/1, Financial district, Nanakramguda, Gachibowli,
Hyderabad – 500 032.

25. Issuance of Duplicate Certificate of Insurance

- If the Insured Member wishes to obtain a physical copy of the Insured Member’s Certificate of Insurance/Master Policy, then the Insured Member can send an application for the physical copy of the Certificate of Insurance/Master Policy.
- If the Insurance Member wish to obtain a second/duplicate physical copy of the Insured Member’s Certificate of Insurance/Master Policy, then the Insured Member can send an application for the second/duplicate physical copy along with the payment of printing charges of ₹100 plus stamp duty plus GST.

26. Policy Servicing

- I. We endeavor to ensure that You receive the best possible service in relation to Your Master Policy. If You wish to avail any services from Us or require any support or assistance in relation to the Master Policy, You may send a written request to Us at info@sbilife.co.in
- II. Turn Around Time (TAT) for various services can be downloaded from: <https://www.sbilife.co.in/en/services>

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- III. Various forms and list of documents required including bank account details are available on SBI Life Website: <https://www.sbilife.co.in/en/services/download-center/policy-servicing-forms>
- IV. You can also give feedback on the services provided by Us at info@sbilife.co.in

27. Claims Process:

- I. The Claimant should intimate a claim through the Master Policyholder in writing stating at least the Customer ID or SHG account number, the cause of death and the date of death to the nearest SBI Life Office or SBI Life Insurance Co. Ltd, Claims Department, 7th Level (D Wing) & 8th Level, Seawoods Grand Central, Tower 2, Plot No. R-1, Sector 40, Seawoods, Nerul Node, Navi Mumbai - 400 706, Dist. Thane, Maharashtra.
- II. We will require the following documents to process the claim:
 - Proof of insurance cover on the life of the deceased Member / COI
 - KYC documents of the Claimant
 - Claimant's statement and claim forms in prescribed formats.
 - Valid Death Certificate from municipal / local authorities.
 - Any other document which SBI Life calls at its discretion.
- III. Claim under the Master Policy/Certificate of Insurance should be filed with Us at the earliest possible time following the claim event. While We may condone any delays in intimation or submission of documents, excessive delays may impact the claim settlement process. However, We reserve the right to request additional information or documentation to verify the validity of the claim and ensure a fair and efficient settlement process.
- IV. We will pay the claim to the Claimant, if the nomination is valid.
- V. If the nomination is not valid, we will pay the legal heir.
- VI. Payment of Death Benefit/ claim amount
 - Upon the death of the Insured Member or any other claim arising under this Master Policy, We will make payment of Death Benefit/claim amount in accordance with the terms and conditions of this Master Policy and the conditions set out below:
 - Payment will be made by Us in the name of the Nominee(s) or the Assignee(s) or the Insured Member's legal heirs (as applicable) directly through electronic transfer to the Nominee's/Assignee's/legal heir's bank account except for the cases set out in clause below.
 - We shall pay the Death Benefit/claim amount to the extent applicable to the Master Policyholder if the following conditions are met:
 - The Master Policyholder is an Eligible Entity.
 - The Master Policy is issued to a non-employer-employee group.
 - The Insured Member has made a valid assignment [in the form specified by Us] to assign the proceeds payable for his/her cover under the Master Policy in the favour of the Master Policyholder and there is a valid assignment in the name of the Master Policyholder as on the date of the death of the Insured Member.
 - The assignment made in favour of the Master Policyholder will be considered for the Death Benefit/claim payment only to the extent of the outstanding loan amount as on the date of the death of the Insured Member/claim payment becoming due, as per the Loan Cover Schedule and the remainder of the Death Benefit/claim amount shall be paid to the Claimant(s) in accordance with the above clause.
 - The Claimant is well informed of the existence of the assignment in advance.

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- We have received confirmation from the Claimant on the outstanding loan amount as on the date of the death of the Insured Member and obtained the consent of the Claimant for the payment of such outstanding loan amount to the Master Policyholder.

28. Non-disclosure

- I. We have issued your insurance cover based on the statements/ responses in the membership form, personal statement, good health declaration and any other documents that are submitted to us.
- II. If we find that any of this information is inaccurate or false or the Insured Member withheld or suppressed any material information, or in case of fraud, we will have a right to repudiate all the claims under the Certificate of Insurance and / or cancel the Certificate of Insurance as applicable subject to the provisions of section 45 of the Insurance, 1938 as amended from time to time and no benefit under the Certificate of Insurance is payable.
[A leaflet containing the simplified version of the provisions of Section 45 is enclosed as Annexure II for reference.]

29. Discontinuance of the Master Policy:

The Master Policy Holder has the right to terminate the Master Policy at any given time by giving 3 months' notice. Under such circumstances, the insurance cover for group Insured Members who have paid all the due Premiums as on the date of termination, will continue till the duration for which Premiums have been received.

30. Section 45 of the Insurance Act, 1938, as amended from time to time:

[A leaflet containing the simplified version of the provisions of Section 45 is enclosed as Annexure II for reference.]

Annexure I

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 and as amended by Insurance Laws (Amendment) Act, 2015 dated 23.03.2015. The extant provisions in this regard are as follows:

01. The policyholder of a life insurance 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.
02. 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 insurer.
03. Nomination can be made at any time before the maturity of the policy.
04. Nomination may be incorporated in the text of the policy itself or may be endorsed on the policy communicated to the insurer and can be registered by the insurer in the records relating to the policy.
05. 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.
06. A notice in writing of Change or Cancellation of nomination must be delivered to the insurer for the insurer to be liable to such nominee. Otherwise, insurer will not be liable if a bonafide payment is made to the person named in the text of the policy or in the registered records of the insurer.
07. Fee to be paid to the insurer for registering change or cancellation of a nomination can be specified by the Authority through Regulations.
08. On receipt of notice with fee, the insurer should grant a written acknowledgement to the policyholder of having registered a nomination or cancellation or change thereof.
09. A transfer or assignment made in accordance with Section 38 shall automatically cancel the nomination except in case of assignment to the insurer 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 insurer'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
 - a. parents or
 - b. spouse or
 - c. children or
 - d. spouse and children
 - e. or any of them

the nominees are beneficially entitled to the amount payable by the insurer 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 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 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 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 Insurance Laws (Amendment) Act, 2015, a nomination is made in favor 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. 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 will not apply.

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

Annexure I (A)

A. Section 38 - 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 and as amended by Insurance Laws (Amendment) Act, 2015. The extant provisions in this regard are as follows:

01. This policy may be transferred/assigned, wholly or in part, with or without consideration.
02. An Assignment may be effected in a policy by an endorsement upon the policy itself or by a separate instrument under notice to the Insurer.
03. 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.
04. The assignment must be signed by the transferor or assignor or duly authorized agent and attested by at least one witness.
05. The transfer of assignment shall not be operative as against an insurer until a notice in writing of the transfer or assignment and either the said endorsement or instrument itself or copy there of certified to be correct by both transferor and transferee or their duly authorised agents have been delivered to the insurer.
06. Fee to be paid for assignment or transfer can be specified by the Authority through Regulations.
07. 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 insurer of duly receiving the notice.
08. If the insurer maintains one or more places of business, such notices shall be delivered only at the place where the policy is being serviced.
09. The insurer 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 bonafide or
 - b. not in the interest of the policyholder or
 - c. not in public interest or
 - d. is for the purpose of trading of the insurance policy.
10. Before refusing to act upon endorsement, the Insurer 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 Insurer, any person aggrieved by the refusal may prefer a claim to IRDAI within 30 days of receipt of the refusal letter from the Insurer.
12. The priority of claims of persons interested in an insurance policy would depend on the date on which the notices of assignment or transfer is delivered to the insurer; 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 Authority.
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 insured OR
 - ii. the insured surviving the term of the policy

Such 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 insurer 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 a life insurance 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 Laws (Amendment) Act,2015 and only a simplified version prepared for general information. Policyholders are advised to refer to Original Gazette Notification for complete and accurate details.]

Annexure II

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 and amended by Insurance Laws (Amendment) Act, 2015 dated 23.03.2015 are as follows:

01. No Policy of Life Insurance shall be called in question on any ground whatsoever after expiry of 3 yrs from
- a. the date of issuance of policy or
 - b. the date of commencement of risk or
 - c. the date of revival of policy or
 - d. the date of rider to the policy

whichever is later.

02. On the ground of fraud, a policy of Life Insurance may be called in question within 3 years from

- a. the date of issuance of policy or
- b. the date of commencement of risk or
- c. the date of revival of policy or
- d. the date of rider to the policy

whichever is later.

For this, the insurer should communicate in writing to the insured or legal representative or nominee or assignees of insured, as applicable, mentioning the ground and materials on which such decision is based.

03. Fraud means any of the following acts committed by insured or by his agent, with the intent to deceive the insurer or to induce the insurer to issue a life insurance policy:

- a. The suggestion, as a fact of that which is not true and which the insured does not believe to be true;
- b. The active concealment of a fact by the insured 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.

04. Mere silence is not fraud unless, depending on circumstances of the case, it is the duty of the insured or his agent keeping silence to speak or silence is in itself equivalent to speak.

05. No Insurer shall repudiate a life insurance Policy on the ground of Fraud, if the Insured / 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 mis-statement of or suppression of material fact are within the knowledge of the insurer. Onus of disproving is upon the policyholder, if alive, or beneficiaries.

06. Life insurance Policy can be called in question within 3 years on the ground that any statement of or suppression of a fact material to expectancy of life of the insured was incorrectly made in the proposal or other document basis which policy was issued or revived or rider issued. For this, the insurer should communicate in writing to the insured or legal representative or nominee or assignees of insured, as applicable, mentioning the ground and materials on which decision to repudiate the policy of life insurance is based.

07. In case repudiation is on ground of mis-statement and not on fraud, the premium collected on policy till the date of repudiation shall be paid to the insured or legal representative or nominee or assignees of insured, within a period of 90 days from the date of repudiation.

08. Fact shall not be considered material unless it has a direct bearing on the risk undertaken by the insurer. The onus is on insurer to show that if the insurer had been aware of the said fact, no life insurance policy would have been issued to the insured.

09. The insurer 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 insured. So, this Section will not be applicable for questioning age or adjustment based on proof of age submitted subsequently.

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

ANNEXURE- III

List of Ombudsman Centers with Address

Office of the Ombudsman	Contact Details	Jurisdiction of Office (Union Territory, District)
AHMEDABAD	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.
BENGALURU	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.
BHOPAL	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 Chattisgarh.
BHUBANESWAR	Office of the Insurance Ombudsman, 62, Forest park, Bhubaneswar – 751 009. Tel.: 0674 - 2596461 / 2596455 / 2596429 / 2596003 Email: bimalokpal.bhubaneswar@cioins.co.in	Odisha.
CHANDIGARH	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.
CHENNAI	Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018. Tel.: 044 - 24333668 / 24333678 Email: bimalokpal.chennai@cioins.co.in	Tamil Nadu, Pondichery Town and Karaikal (which are part of Puducherry).
DELHI	Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building,	Delhi & Following Districts of Haryana -

	Asaf Ali Road, New Delhi – 110 002. Tel.: 011 – 46013992 / 23213504 / 23232481 Email: bimalokpal.delhi@cioins.co.in	Gurugram, Faridabad, Sonapat & Bahadurgarh.
GUWAHATI	Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Pan Bazar, S.S. Road, Guwahati – 781001(ASSAM). Tel.: 0361 - 2632204 / 2602205 / 2631307 Email: bimalokpal.guwahati@cioins.co.in	Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.
HYDERABAD	Office of the Insurance Ombudsman, 6-2-46, 1st floor, "Moin Court", Lane Opp. Hyundai Showroom, A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004. Tel.: 040 - 23312122 Email: bimalokpal.hyderabad@cioins.co.in	Andhra Pradesh, Telangana, Yanam and part of Union Territory of Puducherry.
JAIPUR	Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141 – 2740363 Email: bimalokpal.jaipur@cioinsco.in	Rajasthan.
KOCHI	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 Email: bimalokpal.ernakulam@cioins.co.in	Kerala, Lakshadweep, Mahe-a part of Union Territory of Puducherry.
KOLKATA	Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 7 th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 / 22124341 Email: bimalokpal.kolkata@cioins.co.in	West Bengal, Sikkim, Andaman & Nicobar Islands.
LUCKNOW	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 :Lalitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur,Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur,

		Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar.
MUMBAI	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 Email: bimalokpal.mumbai@cioins.co.in	Goa, Mumbai Metropolitan Region (excluding Navi Mumbai & Thane).
NOIDA	Office of the Insurance Ombudsman, Bhagwan Sahai Palace 4th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddh Nagar, U.P.-201301. Tel.: 0120- 2514252 / 2514253 Email: bimalokpal.noida@cioins.co.in	State of Uttarakhand and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kannauj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautam Buddh Nagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.
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.
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	Maharashtra, Area of Navi Mumbai and Thane (excluding Mumbai Metropolitan Region).