# CUSTOMER INFORMATION SHEET / KNOW YOUR POLICY Customer Information Sheet reference no. \_\_\_\_\_

This document provides key information about your policy. You are also advised to go through your policy document.

SI. no.	Title	Description in Simple Words (Please refer to applicable Certificate of Insurance Clause Number in next column)	Certificate of Insurance (COI) Clause Number
1.	Name of the Insurance Product and Unique Identification Number (UIN)	Axis Max Life Group Credit Life Secure Plan UIN- 104N072V04	COI Header
2.	COI Number	<coi number=""></coi>	COI Schedule
3.	Type of Insurance Policy	A Non-Linked Non-Participating Group Pure Risk Life Insurance Plan	COI Header
4.	Basic Policy details	<ul> <li>Instalment Premium: <not applicable=""></not></li> <li>Mode of Premium payment: Single Premium</li> <li>Sum Assured on Death: As per Schedule of Sum Assured mentioned in Certificate of Insurance</li> <li>Sum Assured on Maturity: Not Applicable</li> <li>Policy Term: <add policy="" term=""> in month/s</add></li> <li>Premium Payment Term: Single Premium</li> </ul>	COI Schedule
5.	Policy Coverage/benefits payable	<ul> <li>Benefits payable on Maturity:</li> <li>There is no Maturity Benefit under this Policy.</li> </ul>	Clause 4
		Benefits payable on Death:  If the policy is in force, then, upon death of the Insured Member during the period of coverage, We shall pay one of the following:  i. in case decreasing cover option has been chosen -	Clause 2
		The Sum Assured on Death as indicated in the Certificate of Insurance 'Schedule of Sum Assured on Death', irrespective of the actual loan outstanding on the date of death of such Member;  ii. in case level cover option has been chosen - The Sum Assured on Death as specified in the Certificate of Insurance.	

	Moratorium Option: Moratorium period option is available with decreasing cover option which may be chosen in multiples of 1 month with minimum of 1 month. The Sum Assured on Death is the initial amount of cover throughout the moratorium period. After the moratorium period, Sum Assured on Death will decrease during remainder of the coverage period.	Clause 2.1
	Survival Benefits excluding that payable on maturity:	Clause 4
	No survival benefits are payable under the Policy	
	Surrender Benefits:	Clause 3
	During the Period of Coverage, a Member may request for the surrender by making a written request, upon which We shall pay the surrender value to the Member based on the below formula:	
	Surrender Value = 70% of Premium paid * (Unexpired risk period in months at the date of Surrender^ / Total Period of Cover in months) * (Sum Assured on Death applicable at time of Surrender^^ / Sum Assured on Death at inception)	
	^Ignoring fraction of a month ^^As per Schedule of Sum Assured on Death in the certificate of insurance.	
	Upon receipt of a valid surrender request, the cover shall cease and upon payment of the surrender value, all benefits and rights under the Certificate of Insurance shall automatically cease and shall discharge Us from all of our liabilities in respect of the Member.	
	• Options to policyholders for availing benefits, if any, covered under the policy.	
	This is not applicable.	
	Other benefits/options payable, specific to the policy, if any:	
	This is not applicable.	
	Lock-in period for Linked Insurance products:	
	This is not applicable.	
6. Options available (in	Partial Withdrawal:	
case of Linked Insurance Products)	This is not applicable.	

		Top-up Provision:	
		This not applicable.	
		Switches:	
		> This is not applicable	
		Premium Redirection:	
		This is not applicable.	
		Settlement Option:	
		> This is not applicable.	
		Any other option	
		This is not applicable	
7	Ontion available (in	This is not applicable.	
7.	Option available (in		
	case of Annuity	with Return of Purchase price etc.	
	product)	> It is not applicable	
		Bronartian of annuity amount guaranteed for variable	
		<ul> <li>Proportion of annuity amount guaranteed for variable pay-out option.</li> </ul>	
		> Not Applicable	
		Not Applicable	
		Any other option	
		> Not Applicable	
		, recrippingable	
8.	Riders opted, if any	Summary of coverage	
		> Axis Max Life Group Critical Illness Secure (Accelerated	
		benefit) Rider (UIN: 104B032V03): This rider provides	
		benefit upon diagnosis of any of the critical illnesses	
		covered.	
	Eveluaios - / /	Duint lint of the number line black to the line of the number line of	
9.	. `	Brief list of the applicable exclusions, if any:	
	where insurance coverage is not	Suicide Exclusion	Clause 5
	payable), if any.	- Galoide Exclusion	
	, , , ,	If a Member commits suicide, within 12 (Twelve) months	
		from the Effective Date of Coverage/Date of	
		Commencement of Risk or Entry Date, as the case may	
		be, the cover will cease and no Death Benefit shall be	
		payable under the Policy in relation to such Member and in	
		such event, We will refund the Premium received by Us	
		Such event, we will return the Frenham received by US	

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		(inclusive of extra premiums and applicable taxes, cesses and levies (if any) in respect of such Member, without interest, after deducting the expenses incurred by Us for the grant of Insurance. However, the nominee or beneficiary of the Member (s) will be entitled to at least 80% of the Premium paid to Us till the date of death of the Member(s) or the Surrender Value available as on the date of death, whichever is higher, provided the Policy is in force. If Co-Borrower, survives the Borrower, the insurance for such Co-Borrower shall continue in accordance with the terms of this Policy.	
10.	Waiting /lien Period, if any	Number of Days Not Applicable	
11.	Grace period	Number of Days: Not Applicable	
12.	Free Look Period	Number of days: 30 days beginning from the date of receipt of the Certificate of Insurance	Clause 6
13.	Lapse, paid-up and revival of the Policy	Not Applicable	
14.	Policy Loan, if applicable	Not Applicable	
15.	Claims/Claims Procedure	<ul> <li>Turn Around Time (TAT) for claims settlement: 30 days after receipt of entire documents or completion of investigation, if any, whichever is later.</li> <li>Brief procedure         Notice of Claim – All cases of death must be notified immediately to us in writing. However, We may condone delay on merit for delayed claims where the reason for delay is proved to be for reasons beyond the control of the Claimant.     </li> <li>Claim forms as required by us must be completed and furnished to us, at the Claimant's expense, within 90 days after the date the insured event happens, unless specified otherwise. A list of primary claim documents listing the normally required documents is attached to the Policy. Submission of the listed documents, forms or other proof, however, shall not be construed as an admission of liabilities by the Company. We reserve the right to require any additional proof and documents in support of the claim.</li> <li>Helpline number</li> </ul>	

- ➤ 1860-120-5577 (Call charges apply) or 0124- 4219090
  - Contact Details of the Insurer:
- Axis Max Life Insurance Limited, Plot No. 90C, Udyog Vihar, Sector 18, Gurugram-122015, Haryana, India. Website - https://www.axismaxlife.com
  - Link for downloading claim form and list of documents required including bank account details:
- https://www.axismaxlife.com/downloads
- We will require the following documents in case of claim under this Policy regarding the death of the Life Insured:

### Documents for death claims

- i. Claimant's statement in the prescribed form;
- ii. original Certificate of Insurance;
- iii. original/ attested copy of death certificate issued by the local/municipal authority;
- iv. identity proof of the Member and the Nominee(s) bearing their photographs and signatures
- v. copy of bank passbook / cancelled cheque of the Claimant with name and account number printed

### Additional documents in case of death due to medical reason:-

- attending physician's statement and hospital treatment certificate (if any);
- ii. discharge summary / indoor case papers in case death happened due to medical reasons in a hospital;

## Additional documents in case of Accidental Death/Murder/Suicide cases and any unnatural death:-

- i. a copy of police complaint/ first information report
- ii. a copy of duly certified post mortem reportautopsy/viscera report and a copy of the final police investigation report /charge sheet

### Additional documents in case of death in foreign country:-

 body transfer certificate / embassy documents / postmortem report whichever applicable

		ii. Copy of passport
16.	Policy Servicing	Turn Around Time (TAT): up to 15 days
		Helpline number
		> 1860-120-5577 (Call charges apply) or 0124- 4219090
		Contact Details of the Insurer:
		<ul> <li>Axis Max Life Insurance Limited, Plot No. 90C, Udyog Vihar, Sector 18, Gurugram-122015, Haryana, India. Website - <a href="https://www.axismaxlife.com">https://www.axismaxlife.com</a></li> </ul>
		Link for downloading applicable forms and list of documents required including bank account details:
		https://www.axismaxlife.com/downloads
		We will require the following documents in case of policy servicing under this Policy regarding the death of the Life Insured:
		<ul> <li>Application in the prescribed form;</li> <li>original Policy document (if any);</li> <li>identity proofs (such as copy of Passport, PAN card, Voter identity card, Aadhar (UID) card, etc.) of the Policyholder or Life Insured (bearing their photographs and signatures);</li> <li>NEFT mandate form attested by bank authorities, along with a cancelled cheque or bank account passbook;</li> <li>any other documents or information required by Us for assessing and approving the claim request.</li> </ul>
17.	Grievances /Complaints	<ul> <li>Contact Details of Grievance Redressal Officer of the insurer:</li> <li>Grievance Redressal Officer, Axis Max Life Insurance Limited, Plot No. 90C, Udyog Vihar, Sector 18, Gurugram-122015, Haryana, India</li> </ul>
		Link for registering the grievance with the insurer's portal
		https://www.axismaxlife.com/customer-service/grievance-redressal
		Contact details of Ombudsman

	<ul> <li>Refer Annexure A for the Ombudsman details</li> </ul>	

### Declaration by the Member

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

Place:	(Signature of the Member)
Date:	

#### Note:

- i. For the product related documents including the Customer Information sheet please refer to the <a href="https://www.axismaxlife.com/group-insurance-plans/credit-life-secure">https://www.axismaxlife.com/group-insurance-plans/credit-life-secure</a>.
- ii. In case of any conflict between the terms contained in this document and COI, the terms and conditions mentioned in the COI shall prevail. However, in case of any conflict between the terms contained in the COI and policy contract, the terms and conditions mentioned in the policy contract shall prevail.
- iii. Sum Assured on Death is subject to underwriting, for actual Sum Assured details & updated UIN number (in case of modification) please refer to the Rider document.
- iv. In the event of any conflict or discrepancy between any translated version and the English language version of this CIS, the English language version of this CIS shall prevail.

### **Annexure A: List of Insurance Ombudsman**

**AHMEDABAD** - Office of the Insurance Ombudsman, 6<sup>th</sup> Floor, Jeevan Prakash Building, Tilak Marg, Relief Road, Ahmedabad- 380 001. Tel.:- 079-25501201/02 Email: oio.ahmedabad@cioins.co.in (State of Gujarat and Union Territories of Dadra & Nagar Haveli and Daman and Diu.)

**BENGALURU** - Office of the Insurance Ombudsman, Jeevan Soudha Bldg., PID No. 57-27-N-19, Ground Floor, 19/19, 24<sup>th</sup> Main Road, JP Nagar, 1st Phase, Bengaluru – 560078. Tel.: 080-26652048/26652049 Email: oio.bengaluru@cioins.co.in (State of Karnataka)

**BHOPAL**- Office of the Insurance Ombudsman, 1<sup>st</sup> Floor, Jeevan Shikha, 60-B, Hoshangabad Road, Opp. Gayatri Mandir, Arera Hills, Bhopal-462 011. Tel.:- 0755-2769201/2769202/2769203 Email: oio.bhopal@cioins.co.in (States of Madhya Pradesh and Chhattisgarh.)

**BHUBANESHWAR** - Office of the Insurance Ombudsman, 62, Forest Park, Bhubaneswar - 751009. Tel.:- 0674-2596461/2596455/2596429/2596003. Email: oio.bhubaneswar@cioins.co.in (State of Odisha.)

CHANDIGARH - Office of the Insurance Ombudsman, S.C.O. No. 20-27, Ground Floor, Jeevan Deep Building, Sector 17-A, Chandigarh-160017. Tel.:- 0172 - 2706468 Email: oio.chandigarh@cioins.co.in [States of Punjab, Haryana (excluding 4 districts viz, Gurugram, Faridabad, Sonepat and Bahadurgarh) Himachal Pradesh, Union Territories of Jammu & Kashmir, Ladakh and Chandigarh]

**CHENNAI**- Office of the Insurance Ombudsman, Fatima Akhtar Court, 4<sup>th</sup> Floor, 453, Anna Salai, Teynampet, Chennai-600 018. Tel.:- 044-24333668 / 24333678 Email: oio.chennai@cioins.co.in [State of Tamil Nadu and Union Territories - Puducherry Town and Karaikal (which are part of Union Territory of Puducherry).]

**DELHI-** Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi- 110002. Tel.:- 011– 46013992/ 23213504/ 23232481 Email: oio.delhi@cioins.co.in (State of Delhi, 4 districts of Haryana viz, Gurugram, Faridabad, Sonepat and Bahadurgarh)

**KOCHI-** Office of the Insurance Ombudsman, 10<sup>th</sup> Floor, Jeevan Prakash, LIC Building, Opp to Maharaja's College Ground, M.G. Road, Kochi 682011. Tel: 0484-2358759 Email: oio.ernakulam@cioins.co.in (State of Kerala and Union Territory of (a) Lakshadweep (b) Mahe a part of Union Territory of Puducherry.)

**GUWAHATI** - Office of the Insurance Ombudsman, "Jeevan Nivesh", 5<sup>th</sup> Floor, Near Pan Bazar, S.S. Road, Guwahati-781001 (ASSAM) Tel.:- 0361-2632204/ 2602205/ 2631307 Email: oio.guwahati@cioins.co.in (States of Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.)

**HYDERABAD** - Office of the Insurance Ombudsman, 6-2-46, 1<sup>st</sup> Floor, "Moin Court", Lane Opp. Hyundai Showroom, A.C. Guards, Lakdi-Ka-Pool, Hyderabad-500 004. Tel: 040-23312122/23376991 / 23376599 / 23328709 / 23325325 Email: oio.hyderabad@cioins.co.in (State of Andhra Pradesh, Telangana and Yanam and part of the Union Territory of Puducherry.)

**JAIPUR**- Office of the Insurance Ombudsman, Ground Floor, Jeevan Nidhi II Bldg, Bhawani Singh Marg, Jaipur – 302005 Tel: 0141-2740363 Email: oio.jaipur@cioins.co.in (State of Rajasthan)

**KOLKATA** - Office of the Insurance Ombudsman, Hindustan Building. Annexe, 7<sup>th</sup> Floor, 4, C.R. Avenue, Kolkata - 700 072. Tel: 033-22124339/22124341 Email: oio.kolkata@cioins.co.in (States of West Bengal, Sikkim, and Union Territories of Andaman and Nicobar Islands.)

**LUCKNOW-** Office of the Insurance Ombudsman, 6<sup>th</sup> Floor, Jeevan Bhawan, Phase-2, Nawal Kishore Road, Hazratganj, Lucknow- 226001. Tel.: 0522 - 4002082 / 3500613 Email: oio.lucknow@cioins.co.in (Following Districts of Uttar Pradesh: Lalitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhabdra, 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 400054. Tel : 022- 69038800/27/29/31/32/33 Email: oio.mumbai@cioins.co.in (List of wards under Mumbai Metropolitan Region excluding wards in Mumbai – i.e M/E, M/W, N, S and T covered under Office of Insurance Ombudsman Thane and areas of Navi Mumbai.)

**NOIDA** - Office of the Insurance Ombudsman, 4<sup>th</sup> Floor, Bhagwan Sahai Palace, Main Road, Naya Bans, Sector-15, Distt: Gautam Buddh Nagar, U.P. - 201301. Tel: 0120-2514252/2514253 Email: oio.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, 2<sup>nd</sup> floor, Lalit Bhawan, Bailey Road, Patna - 800001 Tel No: 0612-2547068, Email id: oio.patna@cioins.co.in(State of Bihar, Jharkhand.)

**PUNE** - Office of the Insurance Ombudsman, 3<sup>rd</sup> Floor, Jeevan Darshan Bldg, C.T.S. Nos. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune – 411030. Tel.: 020-24471175 Email: oio.pune@cioins.co.in (State of Goa and State of Maharashtra excluding areas of Navi Mumbai, Thane district, Palghar District, Raigad district & Mumbai Metropolitan Region.)

**THANE** - Office of the Insurance Ombudsman, 2nd Floor, Jeevan Chintamani Building, Vasantrao Naik Mahamarg, Thane (West), Thane – 400604 Email id: oio.thane@cioins.co.in (Area of Navi Mumbai, Thane District, Raigad District, Palghar District and wards of Mumbai, M/East, M/West, N, S and T".)