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 (<i>Please refer to applicable Policy Clause Number in next column</i>) | Policy Clause Number |
|------------|--|--|----------------------------|
| 1. | Name of the Insurance Product and Unique Identification Number (UIN) | Axis Max Life Shiksha Plus Super UIN: 104L084V11 | Policy Preamble |
| 2. | Policy Number | <policy number=""></policy> | Policy Schedule |
| 3. | Type of Insurance Policy | Plan | Policy Preamble |
| 4. | Basic Policy details | Instalment Premium: <add modal="" premium=""></add> Mode of premium payment: <add modes=""></add> Sum Assured on Death: <add sa="">*</add> Sum Assured on Maturity: <applicable at="" fund="" maturity="" of="" the="" time="" value=""></applicable> Policy Term: <add policy="" term=""></add> Premium Payment Term: <add ppt=""></add> | Policy Schedule |
| 5. | Policy Coverage/benefits payable | Benefits payable on maturity: We will pay the applicable fund value on the date of maturity. | Clause 1.2 of Part C |
| | | Benefits payable on death: In case of death of the Life Insured during the Policy term, provided the Policy is in force, the following shall be payable to the claimant: a) Lump Sum Benefit: On the Life Insured's death, We will pay higher of the following as the Death Benefit: Sum Assured on Death; or 105% of the Regular Premiums received till the date of death of the Life Insured; or | Clause 1.1 of Part C |

- iii. 0.5 times the product of Policy Term and Annualised Premium)
- b) Family Income Benefit: On Life Insured's death, We will pay an amount equal to 10% (Ten percent) of Sum Assured on Death on each Policy Anniversary following with the date of death of the Life Insured and until the end of the Policy Term, provided:
 - We shall not be liable to pay more than 10 (Ten) such instalments with a minimum of three instalments of an amount equal to 10% of Sum Assured on Death.
 - ii. If the Life Insured dies during the Policy Term, where less than three Policy Anniversaries are remaining till the end of Policy Term on the date of death, any excess instalments required to meet the minimum requirement of payment of three instalments will be paid by Us on the Maturity Date in lump sum.
- c) **Funding of Premium:** On each Premium due date(s), after the death of the Life Insured, We will credit the Premium under the Policy to the Funds. The Fund Value will be payable on the Maturity Date.
- Survival Benefits excluding that payable on maturity:
- > No survival benefits are payable in the policy
- Surrender benefits:

be paid.

Surrender Benefits are classified into two categories:

a. Surrender within the Lock - in Period: If case of Surrender during within the Lock- in Period, the Fund Value will be credited into the Discontinuance Policy Fund after deducting applicable Discontinuance/Surrender Charge and the risk cover under the Policy and any applicable Riders, if any, will cease. On the expiry of the Lock- in Period, the value of Units in the Discontinuance Policy Fund shall

Clause 2 of Part D

| _ | , | , | |
|----|--------------------------------------|--|-------------------------|
| | | b. Surrender after completion of the Lock- in Period: If case of Surrender after the completion of the Lock- in Period, we will pay the applicable Fund Value prevailing on the date of receipt of a valid request for Surrender. | |
| | | Options to policyholders for availing benefits, if any, covered under the policy: | |
| | | ➤ Not Applicable | |
| | | Other benefits/options payable, specific to the policy, if any: | |
| | | ➤ Guaranteed Loyalty Additions: | Clause 1.4 of Part C |
| | | If the Premium Payment Term is between 15 to 20 and all due premiums have been paid, We will add 0.20% of the Fund Value to the Fund(s) by creation of additional Units at the end of every Policy Year starting from the 11 th (Eleventh) Policy Year as the Guaranteed Loyalty Additions. For each subsequent year, the Guaranteed Loyalty Additions shall increase by 0.02% of the Fund Value prevailing at the end of that Policy Year. The Guaranteed Loyalty Additions as mentioned above shall also be available in case of death of the Life Insured if Regular Premiums are funded by the Company. | |
| | | Lock-in period for Linked Insurance products: | Clause 25 of Part B |
| | | ➤ 5 years from Date of Commencement of Risk | |
| 6. | Options available (in case of Linked | | Clause 7.3 of Part D |
| | Insurance Products) | You are entitled for the Partial Withdrawal under the policy subject to the following: | |
| | | i. The minimum withdrawal amount should be at least INR 5,000. ii. No partial withdrawals are allowed in the first five Policy Years and thereafter a maximum of two partial withdrawals are allowed in a Policy Year, such that the summation of percentages of Fund Value withdrawn is not more than 50% of the Fund Value as on the date of the Partial Withdrawal(s) and subject to the Fund Value immediately after the Partial Withdrawal(s) being at least | |

- equal to one Annualised Premium or 25% (Twenty-Five percent) of Single Premium Payment Variant, as applicable.
- iii. The Sum Assured on Death shall be reduced by all Partial Withdrawals made with respect to the Fund Value from the base Premium during the 2 (Two) Policy Years immediately preceding the Life Insured's death.
- iv. No Partial Withdrawals are allowed during Discontinuance and Settlement period.

Top –up Provision:

Not Applicable

Switches:

Clause 7.2

- You may switch from one Fund to another by written of Part D request to us, provided:
- i. the amount to be switched is at least Rs. 5,000:
- ii. no charge shall be levied to process request for switching Units between different Funds.
- iii. Not more than 12 (Twelve) switches in any Policy Year.
- iv. Switching will not be allowed during the period of Discontinuance, but allowed during Settlement Period.

Settlement Option:

Clause 1.3

This option is available wherein maturity benefit may be of Part C received in instalments upon providing a written request to Us atleast 15 days before Maturity Date, specifying the proposed duration and frequency of payment. The period under the Settlement Option shall not exceed 5 (Five) years from the Maturity Date. During the period in which Settlement Option is in force, the Policy will continue with risk cover equal to 105% of the Total Premiums Paid and applicable Fund Management Charge, Switching charges and Mortality Charge on Death Benefit will be deducted. No Partial Withdrawals is allowed during this period.

Any other option:

Not Applicable

| 7 | Ontion ovellele /:- | Τ. | Tune of immediate appoints for exemple Life appoints with | |
|----|------------------------------------|----|---|-------------|
| 7. | | • | Type of immediate annuity, for example Life annuity with | |
| | case of Annuity | | Return of Purchase price etc. NA | |
| | product) | • | Proportion of annuity amount guaranteed for variable | |
| | | | pay-out option. NA | |
| | | _ | Any other option. NA | |
| 8. | Riders opted, if any | Su | mmary of coverage | Policy |
| | | | | Schedule |
| | | | Axis Max Life Critical Illness and Disability Secure Rider | |
| | | | (UIN: 104A034V02): Provides additional lump sum | |
| | | | benefit depending on the diagnosis of critical illnesses of | |
| | | | the Life Insured (major or minor critical illness, as | |
| | | | applicable). | |
| | | | | |
| | | | Axis Max Life Smart Ultra Protect Rider (UIN: | |
| | | | 104A049V02): This rider provides following rider benefit | |
| | | | variants: | |
| | | | a. Rider benefit variant 1 - Term Booster with | |
| | | | Accelerated Terminal Illness: provides additional | |
| | | | lump sum benefit in the case of death or diagnosis of | |
| | | | Terminal Illness of the Life Insured, whichever is | |
| | | | earlier. | |
| | | | b. Rider benefit variant 2 - Accidental Death Benefit: | |
| | | | provides additional lump sum benefit in the case of | |
| | | | death due of accident of the Life Insured. | |
| | | | c. Rider benefit variant 3 - Accidental Total and | |
| | | | Permanent Disability: provides additional lump sum | |
| | | | benefit in the case of occurrence of total and | |
| | | | permanent disability to the Life Insured due to | |
| | | | accident. | |
| | | | d. Rider benefit variant 4 – Payor Benefit: provides | |
| | | | funding of all future outstanding base premiums and | |
| | | | waiver of all the future premiums under all attached | |
| | | | riders in the case of death or diagnosis of Terminal | |
| 0 | Evoluciono /ovento | D. | Illness of the policyholder whichever is earlier. | Clause 5 of |
| 9. | Exclusions (events where insurance | DI | ef list of the applicable exclusions, if any: | Part F |
| | _ | | | raitr |
| | coverage is not | • | Suicide Exclusion | |
| | payable), if any. | | | |
| | | > | If the Life Insured commits suicide, whether sane or | |
| | | | insane, within 12 (Twelve) months from the Effective | |
| | | | Date or from the date of the latest revival of the Policy, | |
| | | | the benefits under the Policy shall immediately & | |
| | | | automatically cease. We will terminate the Policy by | |
| | | | paying only the Fund Value prevailing on the date of | |
| | | | intimation of death of the Life Insured. | |
| | | | | |

| | For exclusions under the Riders, please refer to the Rider's customer information sheet document. | |
|--|--|--|
| Waiting /lien Period, if any | Number of Days: NA | |
| Grace period | Number of Days: < 15/30 > | Clause 21 of Part B |
| Free Look Period | Number of days: 30 days from the date of receipt of the Policy | Clause 9 of Part D |
| Lapse, paid-up and revival of the Policy | Payment Term by the due date. If not paid, You may pay the same during the Grace Period. During the Grace Period the insurance cover will continue and all charges under the Policy will continue to apply. Lapse Period Not Applicable | |
| | Not Applicable Revival Period: You may request us in writing for revival and upon the receipt of all the Premiums due and other charges or late fee if any, during the Revival Period (three consecutive years from the date of first unpaid premium), we will | |
| Policy Loan, if applicable | Brief description You are not entitled to loans under the Policy. | Clause 3 of Part D |
| Claims/Claims Procedure | days and 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 | Part F |
| | Free Look Period Lapse, paid-up and revival of the Policy Policy Loan, if applicable Claims/Claims | Waiting /lien Period, if any Grace period Number of Days: < 15/30 > Free Look Period Number of days: 30 days from the date of receipt of the Policy Lapse, paid-up and revival of the Policy • Grace Period: > Premium is due and payable during the Premium Payment Term by the due date. If not paid, You may pay the same during the Grace Period. During the Grace Period the insurance cover will continue and all charges under the Policy will continue to apply. • Lapse Period > Not Applicable • Paid Up Period > Not Applicable • Revival Period: > You may request us in writing for revival and upon the receipt of all the Premiums due and other charges or late fee if any, during the Revival Period (three consecutive years from the date of first unpaid premium), we will revive the policy upon being satisfied and as per terms and conditions of the Policy. Policy Loan, applicable • Brief description > You are not entitled to loans under the Policy. Claims/Claims Procedure • Turn Around Time (TAT) for claims settlement: 30 days and 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 |

- Please note that all death claims will be payable to the nominee/legal heir of the Policyholder.
- 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.

• Helpline number

- ➤ 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 www.axismaxlife.com
 - Link for downloading claim form and list of documents required including bank account details:
 - https://www.maxlifeinsurance.com/downloads

Clause 9 of Part F

- We will require the following documents in case of claim under this Policy regarding the death of the Life Insured:
 - Claimant's statement in the prescribed form (death claim application form -form A);
 - original Policy document (if any);
 - In case of a Medical/Natural death of the Life Insured, the attending physician's statement (Form C) and the Medical records (admission notes, discharge/death summary, test reports, etc.) are required:
 - In case of an Accidental/Unnatural death of the Life Insured, a copy of the First Information Report (FIR)/ Police complaint, a copy of the Postmortem Report (PMR)/ Autopsy/Viscera Report and a copy of the

- Final Police Investigation report (FPIR)/Charge sheet is required;
- original/ attested copy of death certificate issued by the local/municipal authority (only in the case of death of the Life Insured);
- identity proofs (such as copy of Passport, PAN card, Voter identity card, Aadhar (UID) card, etc.) of the Claimants (bearing their photographs and signatures (only in case of death of the Life Insured);
- NEFT mandate form attested by bank authorities, along with a cancelled cheque or bank account passbook (only in the case of the death of the Life Insured);
- any other documents or information required by Us for assessing and approving the claim request;
- Employer certificate with complete leave records-Form E;
- ITR for last 3 years / GST certificate in case of Self employed;
- Other life / health insurance details with claim history details;
- Bank statement of last 2 years of the Life Insured;
- Body transfer certificate / Embassy documents / Postmortem report whichever applicable in case of death in foreign country;
- Complete Passport copy in case of death in foreign country;
- Medical booklet / CGHS card details in case of Defence and Central Government personnel; and
- Discharge Summary / Indoor Case papers in case death happened due to medical reasons in a hospital.
- We will require the following documents in case of claim under this Policy regarding the Maturity claim documents:
 - NEFT Form (if not provided earlier)
 - a cancelled cheque or copy of passbook with preprinted name and bank account number, for payout through NEFT (if not provided earlier or in case of any change in details provided earlier)
 - a self-attested photo ID proof

| 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: | |
| | | Axis Max Life Insurance Limited, Plot No. 90C, Udyog Vihar, Sector 18, Gurugram-122015, Haryana, India. Website - www.axismaxlife.com | |
| | | Link for downloading applicable forms and list of documents required including bank account details: | |
| | | https://www.maxlifeinsurance.com/downloads | |
| | | We will require the following documents in case of policy servicing under this Policy: | |
| | | Application in the prescribed form; original Policy document (if any); 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); NEFT mandate form attested by bank authorities, along with a cancelled cheque or bank account passbook; any other documents or information required by Us for assessing and approving the claim request; | |
| 17. | Grievances /Complaints | | Clause 1.2.1 of Part G |
| | | Link for registering the grievance with the insurer's portal | |
| | | https://www.maxlifeinsurance.com/customer- service/grievance-redressal | |
| | | Contact details of Ombudsman | |

| | | Refer Annexure A for the Ombudsman details | As per Annexure A |
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Declaration by the Policyholder

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

| Place: | (Signature of the Policyholder) |
|--------|---------------------------------|
| Date: | |

Note:

- i. For the product related documents including the Customer Information sheet please refer to the https://www.maxlifeinsurance.com/child-insurance-plans/shiksha-plus-super.
- ii. In case of any conflict, the terms and conditions mentioned in the Policy document shall prevail.
- iii. *Sum Assured on Death is subject to underwriting, for actual Sum Assured details, please refer to the Policy 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, 6th Floor, Jeevan Prakash Bldg, Tilak Marg, Relief Road, Ahmedabad-380 001. Tel.:- 079-25501201/02/05/06 Email: bimalokpal.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, 24th Main Road, JP Nagar, 1st Phase, Bengaluru – 560 078. Tel.: 080-26652049/26652048 Email: bimalokpal.bengaluru@cioins.co.in. (State of Karnataka)

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

BHUBANESHWAR - Office of the Insurance Ombudsman, 62, Forest Park, Bhubaneswar - 751 009. Tel.:- 0674-2596461/2596455 Email: bimalokpal.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 - 4646394/2706468 Email: bimalokpal.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, 4th Floor, 453, Anna Salai, Teynampet, Chennai-600 018. Tel.:- 044-24333668 / 24333678 Email: bimalokpal.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-110 002. Tel.:- 011 – 23237539 Email: bimalokpal.delhi@cioins.co.in (State of Delhi, 4 districts of Haryana viz, Gurugram, Faridabad, Sonepat and Bahadurgarh) **KOCHI-** Office of the Insurance Ombudsman, 10th Floor, Jeevan Prakash, LIC Building, Opp to Maharaja's College Ground, M.G. Road, Kochi 682011. Tel: 0484-2358759 Email: bimalokpal.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", 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati-781 001(ASSAM) Tel.:- 0361-2632204/2602205 Email: bimalokpal.guwahati@cioins.co.in (States of Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.)

HYDERABAD - Office of the Insurance Ombudsman, 6-2-46, 1st Floor, "Moin Court", Lane Opp. Saleem Function Palace, A.C. Guards, Lakdi-Ka-Pool, Hyderabad-500 004. Tel: 040-23312122 Email: bimalokpal.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/ 2740798 Email: bimalokpal.jaipur@cioins.co.in (State of Rajasthan)

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

LUCKNOW- Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-2, Nawal Kishore Road, Hazratganj, Lucknow-226 001. Tel.: 0522 - 4002082 / 3500613 Email: bimalokpal.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: bimalokpal.mumbai@cioins.co.in (State of Goa and Mumbai Metropolitan Region excluding areas of Navi Mumbai and Thane)

NOIDA - Office of the Insurance Ombudsman, 4th Floor, Bhagwan Sahai Palace, 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 - 800001 Tel No: 0612-2547068, Email id: bimalokpal.patna@cioins.co.in (State of Bihar, Jharkhand.)

PUNE - Office of the Insurance Ombudsman, 3rd Floor, Jeevan Darshan Bldg, C.T.S. Nos. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune — 411030. Tel.: 020-24471175 Email: bimalokpal.pune@cioins.co.in (State of Maharashtra including Navi Mumbai and Thane and excluding Mumbai Metropolitan Region.)