

Policy Document – Reliance Nippon Life’s Super Endowment Plan

A non-linked, non-participating, non-variable, endowment plan

Policy Terms and Conditions and Privileges within referred to

This Policy is the evidence of the contract between Reliance Nippon Life Insurance Company Limited (‘the Company’) and the Policyholder referred to below.

Reliance Nippon Life Insurance Company Limited (hereinafter called “RNLIC”) agrees to pay the benefits, as stipulated in the Policy Schedule to the Policyholder on the basis of the statements, proposal, declarations and premium along with taxes as applicable from the Policyholder on the assurance that the Policyholder has agreed to all the Policy terms and conditions referred to in the Reliance Nippon Life’s Super Endowment Plan (UIN: 121N088V03) Policy Document. The Benefits shall be paid only when the same are payable as per the stipulations in the Policy Document. The Claimant/ Nominee needs to submit satisfactory proof of title and other applicable documents pertaining to the Policy at the RNLIC offices for claiming the benefit.

It is hereby further agreed that this Policy shall be subject to the terms, conditions and privileges in this Policy Document and that the Policy Schedule and every endorsement placed on this Policy by RNLIC shall be deemed to be a part of the Policy.

Policy Schedule – Reliance Nippon Life’s Super Endowment Plan

THIS SCHEDULE MUST BE READ WITH THE ACCOMPANYING POLICY DOCUMENT AND IS PART OF THE LIFE INSURANCE CONTRACT

Reliance Nippon Life Insurance Company Limited will pay or provide the benefits specified in the Policy Document in the events and circumstances described there-in but subject to the terms and conditions of this contract.

Personal Details				
Name of Policyholder: « » Address of Policyholder: « » Client ID of Policyholder: « » Date of Birth of Policyholder: « » Age at entry of Policyholder: « yrs » Age Admitted: «Y/N»		Name of Life Assured: « » Client ID of Life Assured: « » Date of Birth of Life Assured: « » Age at entry of Life Assured: « yrs » Age Admitted: «Y/N» Policy sourced by Distant Marketing: «Y/N»		
Contract Details				
Contract No : «Contract Number» Date of Commencement of Policy : « » Date of Commencement of Risk : « » Policy Maturity Date : « » Policy Term : « yrs »		Premium Paying term : « yrs » Premium Due On : « » Mode of Premium payment : « » Annualised Premium (incl. GST) : Rs. « » Total Installment Premium (incl. GST) : Rs « »		
Base Plan	Sum Assured (Rs)	Installment Premium (Rs)	Date of Maturity	Date of Last Premium Payment
« »	« »	« »	« »	« »
Rider/s	Rider Sum Assured (Rs.)	Installment premium (Rs.)	Date of Maturity	Date of Last Premium

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				Payment
«Rider Name»	« Rider SA»	« »	« »	« »
«Rider Name»	« Rider SA»	« »	« »	« »
«Rider Name»	« Rider SA»	« »	« »	« »

Benefits payable		
Death Benefit	Maximum of Base Sum Assured or 10 times of the Annualized Premiums	
Maturity Benefit	Benefit	
	Base Sum Assured	Amount in Rs. « »

Nominee Details (under Section 39 of the Insurance Act 1938) (If applicable)
Name:
Age: « yrs »
Relationship to the Life Assured:

Appointee Details (In case the Nominee is a minor)
Name:
Age: « yrs »

Special Provisions	
«FUP_Code1»	«FUP_Desc1»
«FUP_Code2»	«FUP_Desc2»
«FUP_Code3»	«FUP_Desc3»
	«Benefit_Number»

Agency/Broker Details: Agent/Broker Code: « Agent No » Agent/Broker Name :« Agent Name » Corporate Insurance Executive Name : (incase of Corporate Agent) Principal Officer Name : (incase of Broker) Agent/Broker's Address:«Agent Addr1» « Agent Addr2» « AgentAddr3» « Agent Addr4» « Agent Addr5» « Postcode» Phone No : « AGTelno » Mobile No : «Agent_Mobno» Email ID : « Agent_email »

Date of Policy Issuance:

Place:

Reliance Nippon Life Insurance Company

Limited

(Signature of Authorized Signatory)

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UIN for Reliance Nippon Life’s Super Endowment Plan: 121N088V03

On examination of the Policy, if you notice any mistake, please return the Policy to the Company immediately for correction.

Reliance Nippon Life Insurance Company Limited (Reg. No. 121)

Registered Office: H Block, 1st Floor, Dhirubhai Ambani Knowledge City, Navi Mumbai, Maharashtra - 400710, India

Corporate Office: Reliance Centre, Off Western Express Highway, Santacruz East, Mumbai - 400 055

Plan description

Reliance Nippon Life’s Super Endowment Plan is a non-participating, non-linked endowment plan where the premium payment term is half of the policy term. The Death Benefit is maximum of the Base Sum Assured or 10 times of the Annualized Premium and applicable till the end of the policy term. On maturity, an amount equivalent to the Base Sum Assured shall be payable at the end of the policy term.

Key Benefits

Death Benefit	In case of unfortunate demise of the Life Assured during the policy term provided the policy is in force as on the date of death, the nominee will receive maximum of Guaranteed Sum Assured, 10 times of the Annualized Premium or 105% of all the premiums paid, excluding the underwriting extra premiums as on date of death.
Maturity Benefit	Get Guaranteed Sum Assured at maturity of the policy, provided the policy is in force and all due premiums have been paid

Key product conditions

Policy term (Years)	Premium payment term (Years)
14	7
20	10

Key service features

Nomination	The Life Assured can make a nomination for the purpose of payment of benefits in the event of his death
Assignment	An assignment of the Policy may be made by an endorsement upon the Policy
Loans	Loans will be available under the policy up to 80% of the Surrender Value under the Base Plan
Riders	For the enhanced protection following riders can be purchased with this plan by paying the rider premiums 1. Reliance Nippon Life Accidental Death Benefit Rider: UIN:121B032V01) 2. Reliance Nippon Life Accidental Death and Disability Rider: (UIN:121B017V01)

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	3. Reliance Nippon Life Accidental Death and Disability Plus Rider: (UIN:121B 016V01)
Change in premium mode	The Policyholder may pay regular premiums in yearly, half yearly, quarterly and monthly modes and premium mode can be changed on any Policy Anniversary date during the Premium Payment Term
Premium payment	Premium payment can be made by cash, cheque, debit/credit card, ECS, online payment, demand draft, Salary Deduction Scheme (SDS) and direct debit
Customer service number	1800 300 08181 or 022-30338181
Grievance redressal mechanism	Policyholder can contact the Company by sending an email. at rnlife.customerservice@relianceada.com or by writing to us at our Registered Office address: Reliance Nippon Life Insurance Company Limited, H Block, 1st Floor, Dhirubhai Ambani Knowledge City, Navi Mumbai, Maharashtra - 400710, India

For detailed benefits, please refer to the Policy terms and conditions.

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Terms and conditions

1. Free look

In the event you disagree with any of the terms and conditions of the Policy, you may return the Policy to the Company within 15 days (applicable for all distribution channels, except for Distance Marketing* channel, which will have 30 days) of its receipt for cancellation, stating your objections, in which case you shall be entitled to a refund of the premiums paid, subject only to a deduction of the proportionate risk premium for the period on cover and the expenses incurred by the insurer on medical examination of the Life Assured and stamp duty charges.

*Distance Marketing includes every activity of solicitation (including lead generation) and sale of insurance products through the following modes:

- (i) Voice mode, which includes telephone-calling
- (ii) Short Messaging services (SMS)
- (iii) Electronic mode which includes e-mail, internet and interactive television (DTH)
- (iv) Physical mode which includes direct postal mail and newspaper & magazine inserts and
- (v) Solicitation through any means of communication other than in person

2. Definitions

“**Accidental Death**” means death due to accident, where accident is a sudden, unforeseen and involuntary event caused by external and visible means

“**Annualized Premium**” means the due premium contribution as calculated and applicable for a Policy Year. Annualized Premium excludes extra premium, if any

“**Base Plan/ Plan**” means Reliance Nippon Life’s Super Endowment Plan (UIN: 121N088V03)

“**Base Policy / Policy**” means this Reliance Nippon Life Super Endowment Policy, which is the evidence of the contract between Reliance Nippon Life Insurance Company Limited (‘the Company’) and the Policyholder.

“**Base Premium**” means the premiums that are paid towards the Policy and excludes the premiums paid towards the Riders and does not include any taxes and/or levies

“**Benefit Illustration**” means an Annexure along with the Policy Schedule that illustrates the premiums, guarantees, returns, benefits and values of the proposed policy. This Benefit Illustration complies with IRDAI Regulations and contains clear disclosure of both guaranteed and non-guaranteed benefits, if any, of the Policy.

“**Benefits**” means the Death Benefit, Maturity Benefit, Surrender Benefit or any other benefit, as the case may be, applicable in the terms and conditions of this Policy

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“**Claimant**” means either:

- a) the Policyholder in the event of a survival or maturity claim, OR
- b) the person who is entitled to receive the death benefits under the Plan. In the event of a death claim, the claimant is the nominee under the Policy. In the absence of the nominee, the claimant is the legal heir of the Life Assured. In instances where the Policyholder and Life Assured are different, the claimant is the Policyholder, if alive.

In the event of assignment under this Policy, the assignee would be entitled to the benefits under the policy, subject to Section 38 of Insurance Act, 1938.

“**Commencement Date**” means the commencement date of this policy as mentioned in the Policy Schedule and means the Policy start date

“**Company/Us/We/Our**” means Reliance Nippon Life Insurance Company Limited (RNLIC)

“**Date of Commencement of Risk**” means the date as mentioned in the Policy Schedule from which the insurance benefits start under the Policy or the date on which the risk commences under the riders, if opted for. The commencement of risk cover on the Life Assured shall depend on the age of the Life Assured on the commencement of the Policy.

“**Death Benefit**” means the amount payable to the claimant, on death of the Life Assured during the Policy term, as agreed at inception of the Policy contract, provided the Policy has not lapsed or terminated

“**Free look/Free look cancellation of the Policy**” means where the Policyholder disagrees to any of the Policy terms and conditions stipulated in the Policy Document, he/she may cancel the Policy by returning it to the company stating the reasons for his/her objections

“**Grace Period**” means the time granted by the Company from the due date for the payment of premium, without any penalty or late fee, during which time the Policy is considered to be in-force with the risk cover without any interruption as per the terms of the Policy

“**Lapse**” means a condition wherein the due premiums for the first Policy year have not been paid in full within the grace period for the Policy, thereby rendering the Policy unenforceable. No benefits will be payable when the Policy is in Lapse status

“**In-force status**” means a condition during the term of the Policy, wherein the Policyholder has paid all the due premiums under the Policy contract

“**Lapse**” means a condition wherein the due premiums for the first Policy year have not been paid in full within the grace period for the Policy, thereby rendering the Policy unenforceable. No benefits will be payable when the Policy is in Lapse status.

“**Life Assured**” means the person, named as such in the Policy Schedule, on whose life, the insurance cover is effected in the terms of this Policy

“**Maturity Benefit**” means the amount of benefit which is payable on maturity i.e. at the end of the Policy term, as stated at the inception of the Policy contract and specified in the Policy Schedule

“**Maturity Date**” means the date specified in the Policy Schedule on which the Maturity Benefit is paid to the Policyholder

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“**Nominee**” means the person or persons nominated under Section 39 of the Insurance Act 1938, by the Policyholder, to receive the admissible Benefits, in the event of death of the Life Assured

“**Non Participating**” means the Policy does not participate in the profits of the Company

“**Paid-up Benefit**” means the amount payable upon the occurrence of events, as specified under the Plan, when the Policy is in Paid-up status

“**Paid-up Sum Assured/Paid-up value**” means the reduced Sum Assured applicable to the Policy when the Policy is in Paid-up status, subject to the conditions mentioned in this Policy Document

“**Paid-up/Paid-up status**” means a condition during the term of the Policy, wherein the premiums have been paid in full for at least the first few consecutive years, as required under the Plan and the remaining due premiums have not been paid, rendering the Policy to continue at a reduced level of benefits, as specified under the Plan

“**Person to whom the Benefits are payable**” means the Policyholder, including Nominees or proving executors of administration or other legal representatives, as per the applicable Regulations

“**Policy Anniversary**” means the start date of every subsequent Policy Year

“**Policy Commencement Date**” means the start date of this Policy as mentioned in the Policy Schedule

“**Policy Document**” means this document, which is the evidence of the contract between Reliance Nippon Life Insurance Company Limited ('the Company') and the Policyholder

“**Policy Maturity Date**” means the date specified as such in the Policy Schedule

“**Policy Schedule/ Schedule**” means the attached Schedule, that provides your Policy Benefits, the terms of the contract and details about You and the Life Assured, along with all its annexes, issued by us for this Policy. The Schedule also includes any amendments to the attached Schedule which may be issued from time to time

“**Policy Year**” means a period of 12 consecutive months starting from the date of commencement of the Policy as stated in the Policy Schedule and ending on the day immediately preceding the following anniversary date and each subsequent period of 12 consecutive months thereafter

“**Policyholder/Policy owner/Proposer/You**” means the person specified as such in the Policy Schedule or such other person, who may become the holder of this Policy in respect of the terms and conditions of this contract or by virtue of operation of law. In the event the Proposer is different from the Life Assured, then the Proposer shall be the Policyholder.

“**Premium**” means the amount stipulated in the Policy Schedule and paid at regular intervals (yearly/half yearly/quarterly or monthly mode as shall be applicable) by the Policyholder as consideration for acceptance of risk and benefits specified as such in the Policy Document

“**Premium payment term**” means the period or the term of the Policy contract during which the Policyholder is required to pay the premiums with respect to the Policy, to the Company

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“**Prevailing rate of interest**” means the applicable rates of interest as declared by the Company from time to time that shall be charged to the Policyholder on specified transactions related to the Policy, as specified under the Plan. Upon any revisions in the interest rates, the Company shall communicate the same to the customers.

“**Regulation**” means the laws and regulations as in effect from time to time and applicable to this Policy, including without limitation, the regulations and directions issued by the Regulatory Authority from time to time

“**Regulatory Authority**” means the Insurance Regulatory and Development Authority of India(IRDAI) or such other authority or authorities, as may be designated under the applicable laws and regulations

“**Revival**” means payment of all due premiums that are in arrears to convert a Policy from “Lapse” or “Paid-up” status into “In-force” status

“**Rider**” means an optional cover available as an add-on benefit, which can be purchased by you along with the base Plan on payment of additional premium as applicable

“**Rider Benefits**” means the benefits payable on specified events applicable under the Riders as may be purchased by you

“**Rider Premium**” means the Premium paid towards the Riders and does not include any taxes and/or levies

“**Sum Assured/Base Sum Assured**” is the absolute amount of benefit as specified in the attached Policy Schedule

“**Surrender**” means the termination of the contract in its entirety at the instance of the Policyholder

“**Surrender Value**” means an amount, as specified under the Plan, that is payable upon complete withdrawal / termination of the entire Policy by the Policyholder

“**You**” / “**Your**” means the Policy Owner, Policyholder, Proposer, named in the Schedule or his or her legal heir or personal representative

3. Key Benefits

3.1. Maturity Benefit

On survival of the Life Assured up to the Policy maturity date, the Guaranteed Sum Assured will be payable provided the policy is in force and all due premiums have been paid.

3.2. Death Benefit

On death of the Life Assured during the policy term provided the policy is in force as on the date of death, the maximum of the following benefits will be payable to the Nominee/beneficiary:

- i. Guaranteed Sum Assured or
- ii. 10 times of the Annualized Premium or

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- iii. 105% of all the premiums paid, excluding the underwriting extra premiums as on date of death.

The policy terminates on payment of the Death Benefit.

4. Other Benefits and features

4.1. Rider Benefits

To safeguard yourself and your family members against certain unfortunate events, we offer the following riders with this plan on payment of rider premiums.

1. Reliance Nippon Life Accidental Death Benefit Rider (UIN: 121B032V01)
2. Reliance Nippon Life Accidental Death and Disability Rider (UIN: 121B017V01)
3. Reliance Nippon Life Accidental Death and Disability Plus Rider (UIN: 121B016V01)

Rider benefits can be selected on commencement of the policy or on any policy anniversary during the Premium Payment Term.

For more details on the rider benefits, features and exclusions, please refer to the rider terms and conditions carefully or contact your insurance advisors.

4.2. Surrender Benefit

The Surrender Value payable is higher of the Guaranteed Surrender Value (GSV) and Special Surrender Value (SSV), as given below.

The policy will acquire a Surrender Value provided the first annualized premium is paid in full. If the first annualised premium is paid in full and the policy is surrendered before the completion of three policy years, the applicable surrender value will be payable only after the completion of three policy years.

The applicable Surrender value will be payable after the completion of three policy years, even if the policy is eligible for surrender and the surrender request is received before completion of three policy years.

In such a scenario, in case of death before the completion of three policy years, the applicable Surrender Value will be paid.

- **Guaranteed Surrender Value (GSV):**

Guaranteed Surrender Value is equal to GSV factor multiplied by the total amount of base premiums paid, excluding extra premium paid, if any.

GSV Factor Table:

Policy year/Policy Term	14	20
1	15%	15%
2	30%	20%
3	30%	30%
4	50%	50%

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5	50%	50%
6	50%	50%
7	50%	50%
8	53%	52%
9	57%	54%
10	61%	57%
11	65%	59%
12	70%	61%
13	75%	64%
14	80%	67%
15	NA	69%
16	NA	72%
17	NA	75%
18	NA	78%
19	NA	82%
20	NA	85%

▪ **Special Surrender Value (SSV):**

The Special Surrender Value is an amount equal to the Surrender Value factor multiplied by the Paid-up Sum Assured.

The special surrender value will be applicable in the following manner:

- i. For PPT of less than 10 years: If all annualized premiums have been paid for at least first two consecutive years.
- ii. For PPT of 10 years or more: If all annualized premiums have been paid for at least first three consecutive years.

The company reserves the right to change the method of calculation of SSV and the basis from time to time depending on the economic environment, experience and other factors, subject to IRDAI approval. The current surrender value factors are given in **Annexure B** of the policy document.

Note: If the policy is surrendered, it cannot be reinstated. The policy will be terminated once it is surrendered.

5. Premium

5.1. Payment of premium

The Policyholder is required to pay regular premiums for the entire premium payment term as per the mode of premium specified in the Policy Schedule.

Premiums shall be deemed to have been paid only when received at the Company’s offices which are authorized by the Company to accept payment of Premiums. The official receipt issued by the Company is the only valid evidence of payment of Premiums.

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In case a valid claim arise under the Policy during the grace period but before payment of the due Premium, the Company will still admit the claim

Any unpaid premium for the Policy year will become due and payable immediately. In the event the said unpaid premium is not received by the Company, the Company will deduct the said unpaid premium, while settling such a claim.

5.2. Mode of payment of premium

The Policyholder may pay regular premiums either in yearly, half yearly, quarterly or monthly modes by cash, cheque, debit/credit card, ECS, online payment, demand draft, Salary Deduction Scheme (SDS) or direct debit. The Policyholder may request to change the mode and frequency of payment of regular premiums on any Policy Anniversary date during the premium payment term but not at other times. The Company, at its sole discretion, may agree to accept the payment of the Premium in any mode (annual / half-yearly / quarterly / monthly) as requested by Policyholder. The amended Schedule notifying the changed installment Premium shall be issued to the Policyholder.

If the monthly mode is chosen at the time of issuance, first two months premium will be collected at the time of issuance of the policy. In case the Policyholder has opted for Electronic Clearing System (ECS) mode for premium payment, the Policyholder shall have the option to withdraw from ECS mode atleast 15 days prior to the premium due date.

Quarterly and monthly modes of premium payment are allowed only if the premiums are paid electronically.

5.3. Rider premium

Rider premiums, if any, shall be collected over and above the regular premiums. Rider premium should be paid on the due date or within the grace period. The mode of rider premium payment shall be same as the mode of premium payment under the base Plan. The rider premium payment term will be either equal to or lower than the premium payment term of the base Plan.

5.4. Grace period for payment of premium

There is a grace period of 30 days from the due date for payment of regular premium. In case of monthly mode, the grace period is of 15 days.

5.5. High Sum Assured rebate

A rebate is applicable on the premium amount depending on the chosen Sum Assured. Rebates per Rs. 1,000 Sum Assured applicable on the premium paid by the Policyholder are as follows:

Sum Assured (Rs.)	Rebate (Rs.)
Less than 2,50,000	0
2,50,000 and above but less than 5,00,000	3
5,00,000 and above but less than 10,00,000	4
10,00,000 and above	5

5.6. Premium Discount

A discount on premium is allowed, if the premiums are paid annually and half-yearly as per the table below:

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Premium Mode	Discount
Yearly	2.5%
Half-yearly	1.25%
Quarterly	Nil
Monthly	Nil

5.7. Discontinuance of payment of premium

If the minimum due premiums under the policy are not paid in full, the policy will:

i. Lapse

If the first annualised premium is not paid in full then the policy lapses at the end of the grace period and the insurance cover will cease immediately. In such a scenario, no benefits will be paid if the policy is not revived within the revival period.

If at least the first annualised premium is paid in full and the first two years (for policies with premium paying term of less than 10 years), or first three years (for policies with premium paying term of 10 years and above), annualised premiums are not paid in full before the end of the grace period then the insurance cover will cease at the end of the grace period. In this case the policy will acquire a Surrender Value which will be payable only after the completion of three policy years or at the end of the revival period, whichever is later. For details on surrender value, please refer to the Surrender Benefit under Section 4.2 of this policy document. In such a scenario, no other benefits will be paid if the policy is not revived within the revival period.

A lapsed policy can be revived within the revival period (i.e. a period of 2 years from the due date of first unpaid premium). The revival is subject to the board approved underwriting policy.

If a lapsed policy is not revived within the revival period, the policy will be terminated. A terminated Policy cannot be reinstated.

ii. Paid-up

If the Policy has acquired special surrender value and no future premiums are paid, your policy acquires a Paid-up status and your Sum Assured will be reduced to paid-up Sum Assured. Kindly refer to the rider terms and conditions for treatment of riders.

The Sum Assured will be reduced to Paid-Up Sum Assured in the following manner:

Paid-Up Sum Assured= Sum Assured * (Number of premiums paid / total number of premiums payable)

The Benefits under the base plan will be reduced as given below:

Benefits	Payout
Death Benefits during the policy term	Maximum of: Guaranteed sum assured on maturity or 10 times of Annualised Premium * (number of premiums paid / total number of premiums payable)

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Maturity Benefits at the end of Policy term	Guaranteed sum assured on maturity * (number of premiums paid / total number of premiums payable)
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- The policy will be terminated once the Paid-up value is paid (i.e. on death or at maturity).
- A Paid-up policy can be revived during the revival period (i.e. a period of 2 years from the due date of the first unpaid premium but before the maturity date). The revival is subject to the Company’s underwriting policy.

5.8. Revival of a lapsed or Paid-up policy

A policy in a paid-up or lapsed condition can be revived within a period of two years from the due date of the first unpaid premium but before the maturity date by paying the arrears of premium(s) along with interest at the rate of 9% p.a. If the base Plan is revived, the rider benefits can be revived by paying the arrears of premiums under the riders with interest at the prevailing rate of interest. The revival of the policy, and riders, if any is subject to satisfactory medical and financial underwriting. The revival is subject to company’s Board approved underwriting policy, i.e. the Life Assured may have to undergo medical test, etc. The Company reserves the right to revise the applicable interest rate from time to time depending on the economic environment, experience and other factors.

6. General conditions

6.1. Goods and Services Tax and other taxes

The Goods and Services Tax (GST) will be levied on the Base Premium and Rider Premiums, if any. The level of this tax will be as per the rate of GST, declared by the Government from time to time. The GST on the Base Premium and Rider Premiums will be collected from the Policyholder along with the Base Premium and Rider Premiums respectively.

6.2. Charges levied by the government in future

In future, the Company may decide to pass on any additional charges levied by the government or any statutory authority, from time to time, to the Policyholder. Whenever the Company decides to pass on the additional charges to the Policyholder, the method of collection of these taxes shall be informed to them.

6.3. Employee staff discount

No commissions are payable on policies purchased by Reliance Nippon Life Insurance Company Limited staff and staff of other Anil Dhirubhai Ambani Group companies, where the discount of 3% applies on the premiums every year.

6.4. Loans

Loans will be available under the Policy to the Policyholder up to 80% of the Surrender Value under the base Plan after the Policy acquires a Surrender Value. The interest on loan is payable at the prevailing rate of interest. The current rate of interest on Policy loans is 9% p.a. In a paid-up Policy, if at any time during the term of the Policy, the sum of loan outstanding and interest on loan outstanding exceeds 95% of the Surrender Value; the Policy will be terminated by recovering the loan outstanding and interest on loan outstanding from the Surrender Value. The balance of Surrender Value under the base Plan will be paid to the Policyholder. Before payment of any benefit

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(death, maturity, surrender etc.) to the Policyholder under a Policy against which the loan is availed of, the loan outstanding and the interest on the loan outstanding will be recovered first and the balance, if any, will be paid to the Policyholder or claimant/s. The rate on interest payable on such loan shall be as prescribed by the insurer at the time of taking the loan

6.5. Claims

The Company will pay the Maturity Benefit to the Policyholder when it is satisfied of the identity of the Insured Person, Age of the Insured Person and all relevant provisions of the Policy have been met.

The Company will pay the Death Benefit to the Claimant when it is satisfied of the identity of the Insured Person, Age of the Insured Person, the Insured Person is dead and all relevant provisions of the Policy have been met.

In the event of assignment under this Policy, the assignee would be entitled to the benefits under the policy, subject to Section 38 of Insurance Act, 1938.

In case it is found that the age of the Insured Person as declared to us is incorrect, the Company shall adjust the Maturity Benefit or Death Benefit payable in proportion of:

- a. the amount of insurance premium that was actually paid in relation to that person (in the policy period in which he/she died) and
- b. the amount of insurance premium that should have been paid for that person (in that policy period) with regard to the rate of insurance premium applicable to his/her correct age.

In case the customer is ineligible for the policy based on the correct age, subject to Section 45 of the Insurance Act, 1938, the Company will pay the Surrender Value.

6.6. Requirements for maturity and death claims

In the event of a claim for Maturity Benefit or Death Benefit arising under this Policy, the person to whom the benefits are payable shall endeavor to intimate the Company in writing of the claim and provide the following documents to the Company preferably within 90 days of the claim arising. This is to enable the Company to process the claim in a speedy manner. The Company may accept/process the claim on merits of the case even beyond the period of 90 days, provided:

- i. the reasons for delay are due to unavoidable circumstances beyond the control of the Claimant and
- ii. the submission of documents in respect of the said delays is evidenced to the satisfaction of the Company

I. List of documents required in case of a Maturity Benefit claim:

- i. Original Policy Document
- ii. Discharge form

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- iii. KYC documents of the Policyholder as per the Anti Money Laundering (AML) Guidelines. (These include address proof & identity proof)
- iv. ECS Mandate form/ Cancelled cheque leaf/ Self-attested passbook copy of the claimant
- v. Aadhar and Pan/Form 16
- vi. Any other document, as may be which may be relevant, as may be required by the Company

II. List of documents required in the event of a claim for Death Benefit arising due to reasons other than accidents or unnatural deaths:

- i. Policy Document in original
- ii. Death certificate in original issued by the competent authority
- iii. Hospitalization documents (discharge summary along with all investigation reports) if the Life Assured has taken treatment for illness leading to his death
- iv. Claim Form (A) to be filled in by the claimant
- v. Claim Form (B) to be filled in by the last treating doctor
- vi. Claim Form (C) to be filled in by a third person (who is not a relative of the claimant)
- vii. Aadhar and Pan/Form 16
- viii. KYC documents of the claimant as per AML Guidelines (Address proof & identity proof)
- ix. ECS Mandate form/ Cancelled cheque leaf of the claimant, any other document as may be sought by the Company

III. In the event of a claim for Death Benefit arising out of accidents or unnatural deaths:

- i. Policy Document in original
- ii. Death certificate in original issued by the competent authority
- iii. Copies of the First Information Report and the Final Investigation Report thereof, duly attested by the concerned police officials
- iv. Copy of the post-mortem report duly attested by the concerned officials
- v. Claim Form (A) filled in by the claimant
- vi. Claim Form (B) filled in by the last treating doctor
- vii. Claim Form (C) to be filled in by a third person (who is not a relative of the claimant)

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- viii. Aadhar and Pan/Form 16
- ix. KYC documents of the claimant as per AML Guidelines (Address proof & identity proof)
- x. ECS Mandate form/Cancelled cheque leaf of the claimant and any other document as may be sought by the Company

Notwithstanding anything contained in the clauses mentioned above, depending upon the cause or nature of the claim, the Company reserves the right to call for other and/or additional documents or information, including documents/ information concerning the title of the person claiming the Benefits under this Policy to the satisfaction of the Company, for processing the claim. If the documents called for are not submitted or not given, then valid reasons for not providing the same in a letter should be submitted within the time mentioned in the letter.

6.7. Tax benefit

Premiums paid under the base Plan and attached riders are eligible for tax deduction subject to applicable tax laws and conditions. The benefits under this plan and riders are tax exempt subject to applicable tax laws and conditions. Income tax benefits shall be under the prevailing income tax laws and are subject to amendments and interpretation from time to time. The Policyholder is recommended to consult a tax advisor. Conditions apply.

6.8. Nomination

Nomination should be in accordance with provisions of 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 in annexure – C for reference].

6.9. Assignment

Assignment should be in accordance with provisions of 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 in annexure – D for reference]

Assignment will not be permitted if the policy is issued under Married Women’s Property Act, 1874.

6.10. Proof of age

The age of the Life Assured has been admitted on the basis of the declaration made by the Policyholder/ Life Assured in the Proposal and/or in any statement based on which this Policy has been issued. If the age of the Life Assured is found to be different from that declared, the Policy shall be cancelled immediately and the premiums received shall be refunded after deducting all the charges by the Company or the Company may adjust the premiums and/or the Benefits under this Policy and/or recover the applicable balance amounts, if any, as it deems fit. This Policy shall however become void from commencement, if the age of the Life Assured as at the Policy Commencement Date is found to be higher than the maximum or lower than the minimum entry age that was permissible under the plan of this Policy at the time of its issue. The Company shall cease to be liable for any Benefits under this Policy. In such a case, the Policy shall be cancelled immediately by paying the Surrender Value in accordance with Section 45 of the Insurance Act, 1938.

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6.11. Vesting on attaining majority

If the Policy has been issued on the life of a minor, the Policy will automatically vest in him on his attaining majority (eighteen years) and thereafter the Life Assured would be the Policyholder and the Company shall enter into all correspondence directly with him. Any assignment or nomination of the Policy contrary to this provision would be null and void against the Company.

6.12. Risk commencement on minor life

For Policies issued on minor life, the date of commencement of policy and date of commencement of risk shall be same.

6.13. Suicide

If the Life Insured, whether sane or insane, commits suicide within 12 months

- i. from the date of inception of the Policy, the nominee or beneficiary of the Policyholder shall be entitled to at least 80% of the premiums paid, provided the Policy is in force or
- ii. from the date of revival of the Policy, the nominee or beneficiary of the Policyholder shall be entitled to an amount which is higher of 80% of premiums paid till the date of death or the surrender value / Policy account value, as available on the date of death.

The Company will not pay any insured benefit in case of suicide.

6.14. Special provisions

Any special provisions subject to which this Policy has been entered into, whether endorsed in the Policy or in any separate instrument shall be deemed to be part of the Policy and shall have effect accordingly.

This product is approved by the Insurance Regulatory and Development Authority of India (IRDAI). The terms and conditions of this Policy is in accordance with the Insurance Act, 1938, Insurance Rules, 1939, IRDAI Regulations and other such relevant laws, rules, regulations, and guidelines, directives, circulars, clarifications including that of the Life Insurance Council of the Insurance Association of India constituted under the provisions of Sec 64-C of the Insurance Act, 1938, ,Governing Body of Insurance Council constituted under the Redressal of Public Grievances Rules, 1998, other such regulatory, statutory, administrative, judicial authority(s) and local customs, the terms of which shall be subject to change by virtue of any change/amendment(s) in such laws, rules, regulations, and guidelines, IRDAI, Life Insurance Council of the Insurance Association of India ,Governing Body of Insurance Council, other such regulatory, statutory, administrative, judicial authority(s) at all time.

6.15. Recovery of additional expenses incurred on account of acts of Policyholders

RNLIC also reserves the right to recover "cheque bounce charges", incurred by it from the Policyholders, on account of dishonour of cheque issued towards premium payment, by Policyholders. The Company may recover these additional costs by requisitioning additional payments from the Policyholders.

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RNLIC reserves the right to recover "electronic debit bounce charges", incurred by it from the Policyholders, on account of bounce of electronic debit towards premium payment, by Policyholders. The Company may recover these additional costs by requisitioning additional payments from the Policyholders.

6.16. Mode of payment of benefits

All Benefits under this Policy shall be payable in the manner and currency allowed / permitted under the Regulations. All amounts payable either to or by the company and shall be payable in Indian currency.

6.17. Valid discharge

Any discharge given by the person to whom the benefits are payable, or by any person authorized by the person to whom the benefits are payable, in writing, in respect of the Benefits payable under this Policy shall constitute a valid discharge to RNLIC in respect of such payment. The Company’s liability under the Policy shall be discharged by such payment and the Company shall not be required to see the application of the monies so paid.

6.18. Limitation of liability

The maximum liability of the Company under this Policy shall not, in any circumstances, exceed the aggregate amount of the relevant Benefits payable hereunder.

6.19. Incontestability

In the event of any inconsistency or conflict between the terms and conditions contained in the Policy Document and the terms and conditions contained in any other document such as marketing material or sales brochure, the terms and conditions contained in the Policy Document shall prevail over all other terms and conditions contained in various other documents.

6.20. Fraud, Misstatement of a Material Fact and Forfeiture

In issuing this Policy, the Company has relied on and may rely on the accuracy and completeness of the information provided by the Proposer /Life Assured and any other declarations or statements made or as may be made hereafter, by the Policyholder/Life Assured.

In the event of a fraud the policy shall be cancelled immediately and all the premiums paid till date shall be forfeited, subject to fraud being established as per Section 45 of the Insurance Act, 1938. In the event of a misstatement or suppression of a material fact, not amounting to fraud, by the insured, the policy shall be declared “Null and Void” from commencement and the Company shall cease to be liable for any Benefits under this Policy. In such a case, the Policy shall be cancelled immediately and premiums paid shall be refunded after deducting applicable charges, if any, subject to misstatement or suppression of fact being established, in accordance with Section 45 of the Insurance Act, 1938, as amended from time to time. (Please refer to the simplified version of the provisions of Section 45 as mentioned in Annexure E for reference).

6.21. Loss of Policy Document

If the Policy Document is lost or destroyed, then at the request of the Policyholder, the Company, if satisfied, that the Policy Document has been lost or destroyed, will issue a copy Policy Document duly endorsed to show that it is issued following the loss or destruction of the original Policy

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Document. The Company reserves the right to make such investigations into and call for such evidence of the loss or destruction of the Policy Document at the expense of the Policyholder as it considers necessary before issuing a copy of the Policy Document. The Company may charge a fee for the issuance of a copy of the Policy Document.

Upon the issuance of a copy Policy Document, the original Policy Document will cease to have any legal effect

It is hereby understood and agreed that the Policyholder will protect the Company and hold the Company harmless against any claims, costs, expenses, awards or judgments arising out of, or howsoever, connected with the original Policy Document or arising out of the issuance of a copy of the Policy Document.

6.22. Waiver

Failure or neglect by either party to enforce at anytime the provisions of this Policy shall not be construed or be deemed to be waiver of either party’s right herein nor in anyway affect the validity of the whole or any part of this Policy nor prejudice either party’s right to take subsequent action.

6.23. Governing laws and jurisdiction

This Policy shall be governed by and interpreted in accordance with the laws of India. All actions, suits and proceedings under this Policy shall be subject to the exclusive jurisdiction of the courts of law within whose territorial jurisdiction the registered office of the Company is situated.

6.24. Electronic transaction

The Policyholder shall adhere to and comply with all such terms and conditions as prescribed by RNLIC from time to time and hereby agree and confirm that all transactions effected by or through facilities for effecting remote transactions including the Internet, World Wide Web, electronic data interchange, call centers, tele service operations (whether voice, video, data or combination thereof) or by means of electronic, computer, automated machines network or through other means of telecommunication, established by or on behalf of RNLIC, for and in respect of the Policy or its terms, or RNLIC’s other products and services, shall constitute legally binding and valid transactions when done in adherence to and in compliance with RNLIC’s terms and conditions for such facilities, as may be prescribed from time to time.

6.25. Notice under the Policy

Any of the notices required to be issued in terms of this Policy may be issued, either by issuing individual notices to the Policyholder, including by electronic mail, SMS, telephonic conversation and/or facsimile, or by issuing a general notice, including by publishing such notices in the newspapers and/or on the Company’s website.

i. In case of the Proposer

As per the details specified by the Policyholder in the Proposal Form/Change of address intimation submitted by him/notices and instructions are sent through various modes such as electronic mail and/or facsimile, or by issuing a general notice, including by publishing such notices in newspapers and/or on RNLIC’s website. It is very important that you immediately inform us about any change in the address or the nominee particulars.

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ii. In case of the Company

To Reliance Nippon Life Customer Service

Address: Reliance Nippon Life Insurance Company Limited
H Block, 1st Floor, Dhirubhai Ambani Knowledge City
Navi Mumbai, Maharashtra 400710, India

Reliance Nippon Life representatives may be contacted on Customer Care number 1800 300 08181 (Toll free) or 30338181 (local call charges apply).

Email: rnlife.customerservice@relianceada.com

6.26. Entire Contract

This Policy comprises the terms and conditions set forth in this Policy document, Policy Schedule, and the endorsements, if any, made on or applicable to this Policy, which shall form an integral part and the entire contract, evidenced by this Policy. The liability of RNLIC is at all times subject to the terms and conditions of this Policy and the endorsements made from time to time.

The Provision of this policy cannot be changed or varied except by a policy endorsement signed by an officer of the Company authorized for the purpose. This Policy Document constitutes the complete contract of insurance. This Policy Document cannot be changed or varied by any one (including an insurance advisor) except by a Policy endorsement in writing signed by an officer of the Company authorized for this purpose.

This contract is entered into between Reliance Nippon Life Insurance Company Limited and the Policyholder named in the Schedule to this Policy and sets forth the terms and conditions governing this Policy. The Policy is issued on the basis of the Proposal and Declaration from the Proposer and on the express understanding that the said Proposal and Declaration and any statements made or referred to therein shall be part and parcel of this Policy.

6.27. Taxes, duties and levies and disclosure of information

- a) This Policy, and the Benefits and the surrender value payable under this Policy shall be subject to the Regulations, including taxation laws in effect from time to time. All taxes, duties, levies or imposts including without limitation any sale, use, value added, Goods and Services Tax (GST) or other taxes, as may be imposed now or in future by any authority (collectively “Taxes”) on the Premiums and other sums payable to RNLIC or RNLIC’s obligations under the Policy or the Benefits payable under the Policy or in any way relating to this Policy, shall be borne and paid by the Policyholder or the Person to whom Benefits payable, as the case may be. The Premium and other sums payable under or in relation to the Policy do not include the Taxes. If, however, the applicable law imposes such Taxes on RNLIC, then RNLIC shall have the right to recover the same from the Policyholder or the Person to whom Benefits payable. The Company may at its sole discretion raise a specific demand to pay the said direct / Indirect taxes or levies or may deduct the said direct / Indirect

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taxes or levies from Surrender, Death and /or Maturity Benefits payable to You and /or Your Claimant (s).

- b) The persons receiving the Benefits shall be solely liable for complying with all the applicable provisions of the Regulations, including taxation laws, and payment of all applicable Taxes. Except as otherwise required by law, RNLIC shall not be responsible for any Tax liability arising in relation to this Policy or the Benefits payable in terms of this Policy. In any case where RNLIC is obliged to account to the revenue authorities for any Taxes applicable to this Policy or the Benefits payable under this Policy, RNLIC shall be entitled to deduct such Taxes from any sum payable under this Policy, and deposit the amount so deducted with the appropriate governmental or regulatory authorities.
- c) In any case where RNLIC is obliged to disclose to the revenue or other regulatory authorities any information concerning the Policy, including information concerning the Premium and the Benefits under this Policy, RNLIC shall be entitled to disclose the required information to the appropriate governmental or regulatory authorities.
- d) It shall be the responsibility of the Policyholder to satisfy himself and ensure that the payment of the Additional Premium does not adversely affect his entitlement or claim for tax benefits, if any, available or admissible under this Policy.

6.28. Payment of taxes, stamp duties

The Company reserves the right to deduct all applicable taxes, duties and surcharges on premiums and benefits, as per the applicable rate imposed by the Government authorities from time to time.

6.29. Grievance redressal

Step 1: If you are dissatisfied with any of our services, please feel free to contact us –

Step 1.1: Contact centre: 30338181 (Local call charges apply) & 1800 300 08181(Toll free) or Email: rnlife.customerservice@relianceada.com **OR**

Step 1.2: Contact the Customer Service Executive at your nearest branch of the Company **OR**

Step 1.3: Write to

Reliance Nippon Life Customer Care
Reliance Nippon Life Insurance Company Limited
H Block, 1st Floor, Dhirubhai Ambani Knowledge City
Navi Mumbai, Maharashtra 400710. India

If your complaint is unresolved for more than 10 days,

Step 2: Please contact our Branch Manager, who is also the Local Grievance Redressal Officer at your nearest branch.

If you are unhappy with the solution offered,

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Step 3: Write to Head of Customer Care at rnlife.headcustomercare@relianceada.com or at the address mentioned above.

If you are still not happy with the solution offered,

Step 4: Write to our Grievance Redressal Officer, Head- Legal & Compliance at rnlife.gro@relianceada.com or at the address mentioned above.

If the issues remain unresolved; a further reference may be made to the Insurance Ombudsman in terms of Rule 12 & 13 of the Redressal of Public Grievance Rules, 1998.

6.30. Procedure for registering complaint with IRDAI Grievance Call Centre (IGCC)

If you are not satisfied with the response or do not receive a response from us within 15 days, you may approach the Grievance Cell of the Insurance Regulatory and Development Authority of India (IRDAI) on the following contact details:

IRDAI Grievance Call Centre (IGCC) TOLL FREE NO: 155255

Email ID: complaints@irda.gov.in

You can also register your complaint online at <http://www.igms.irda.gov.in/>

Address for communication for complaints by fax/paper:

Consumer Affairs Department

Insurance Regulatory and Development Authority

9th floor, United India Towers, Basheerbagh

Hyderabad – 500 029, Andhra Pradesh

Fax No: 91- 40 – 6678 9768

6.31. Procedure for filing complaint with the Insurance Ombudsman

While we expect to satisfactorily resolve your grievances, you may also at any time approach the Insurance Ombudsman. The Insurance Ombudsman may receive and consider any complaints under Rule 12 & 13 of the Redressal of Public Grievance Rules, 1998; which relates to any partial or total repudiation of claims by RNLIC, any dispute in regard to premium paid or payable in terms of the Policy, any dispute on the legal construction of the policies insofar as such disputes relates to claims; delay in settlement of claims and non-issue of any insurance document to customers after receipt of premium. On the above grounds, any person may himself or through his legal heirs make a complaint in writing to the Insurance Ombudsman within whose jurisdiction the RNLIC branch is located. The complaint shall be in writing duly signed by the complainant or through his legal heirs and shall state clearly the name and address of the complainant, the name of the branch, the fact giving rise to complaint supported by documents, if any, the nature and extent of the loss caused to the complainant and the relief sought from the Ombudsman.

However as per Provision of Rule 13(3) of the Redressal of Public Grievance Rules, 1998 the complaint to the Ombudsman can be made:

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- i. Only if the grievance has been rejected by the Grievance redressal machinery of the Insurer or complainant has not received any reply within 30 days from the date of complaint or the complainant is not satisfied with the reply given to him by the Company
- ii. The complaint has been filed within one year from the date of rejection by the Company
- iii. If it is not simultaneously under any litigation

The detailed list of the Ombudsmen is provided in Annexure A of this Policy Document.

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About Reliance Nippon Life Insurance

Reliance Nippon Life Insurance Company Limited (formerly known as Reliance Life Insurance Company Limited) is a licensed life insurance company registered with the Insurance Regulatory & Development Authority of India (IRDAI) Registration No. 121. Reliance Nippon Life Insurance Company Limited offers you products that fulfill your savings and protection needs. Our aim is to emerge as a transnational Life Insurer of global scale and standard.

Tax laws are subject to change, consulting a tax expert is advisable.

Reliance Nippon Life Insurance Company Limited (Reg. No. 121)

Registered Office: H Block, 1st Floor, Dhirubhai Ambani Knowledge City, Navi Mumbai, Maharashtra -400710, India

Corporate Office: Reliance Centre, Off Western Express Highway, Santacruz East, Mumbai - 400 055

TRADE LOGO

Trade logo displayed above belongs to Anil Dhirubhai Ambani Ventures Private Limited & Nippon Life Insurance Company and used by Reliance Nippon Life Insurance Company Limited under license.

For more information or any grievance,

1. Call us between 9am to 6pm, Monday to Saturday on Call Centre number - 30338181(Local call charges apply) or our Toll Free Number 1800 300 08181 or
2. Visit us at www.reliancenipponlife.com or
3. Email us at: rnlife.customerservice@relianceada.com.

UIN for Reliance Nippon Life’s Super Endowment Plan: 121N088V03

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Annexure A:Insurance Ombudsman

The detailed list of the Insurance Ombudsman is mentioned below for reference.

Address of Ombudsman:

Office of the Ombudsman	Contact Details	Areas of Jurisdiction
AHMEDABAD	Office of the Insurance Ombudsman 2 nd Floor, Ambica House, Nr. C.U.Shah College, Ashram Road, AHMEDABAD-380 014. Tel.:-079-27545441/27546139 Fax : 079-27546142Email: bimalokpal.ahmedabad@gbic.co.in	Gujarat, Dadra & Nagar Haveli, Daman and Diu.
BENGALURU	Office of the Insurance Ombudsman, 24 th Main Road, Jeevan Soudha Bldg. JP Nagar, 1 st Phase, Bengaluru – 560025. Tel No: 080-22222049/22222048 Email: bimalokpal.bengaluru @gbic.co.in	Karnataka.
BHOPAL	Office of the Insurance Ombudsman, 2 nd Floor, Janak Vihar Complex, 6, Malviya Nagar,Opp. Airtel, Near New Market, BHOPAL(M.P.)-462 003. Tel.:- 0755-2769201/9202 Fax : 0755-2769203 Email: bimalokpal.bhopal@gbic.co.in	Madhya Pradesh, Chattisgarh.
BHUBANESHWAR	Office of the Insurance Ombudsman , 62, Forest Park, BHUBANESHWAR-751 009. Tel.:- 0674-2596455/2596003 Fax : 0674-2596429 Email: bimalokpal.bhubaneswar@gbic.co.in	Orissa.
CHANDIGARH	Office of the Insurance Ombudsman, S.C.O. No.101-103,2nd Floor, Batra Building, Sector 17-D, CHANDIGARH-160 017.	Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir, Chandigarh.

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	<p>Tel.:- 0172-2706468/2705861</p> <p>Fax : 0172-2708274</p> <p>Email: bimalokpal.chandigarh@gbic.co.in</p>	
CHENNAI	<p>Office of the Insurance Ombudsman ,</p> <p>Fathima Akhtar Court, 4th Floor, 453 (old 312), Anna Salai, Teynampet,</p> <p><u>CHENNAI-600 018.</u></p> <p>Tel.:- 044-24333668 /24335284 Fax : 044-24333664</p> <p>Email: bimalokpal.chennai@gbic.co.in</p>	Tamil Nadu, Pondicherry Town and Karaikal (which are part of Pondicherry).
NEW DELHI	<p>Office of the Insurance Ombudsman ,</p> <p>2/2 A, Universal Insurance Bldg., Asaf Ali Road,</p> <p><u>NEW DELHI-110 002.</u></p> <p>Tel.:- 011-23237539/23232481</p> <p>Fax : 011-23230858</p> <p>Email: bimalokpal.delhi@gbic.co.in</p>	Delhi.
GUWAHATI	<p>Insurance Ombudsman,Office of the Insurance Ombudsman,</p> <p>“Jeevan Nivesh”, 5th Floor, Near Panbazar Overbridge, S.S. Road,</p> <p><u>GUWAHATI-781 001 (ASSAM).</u></p> <p>Tel.:- 0361-2132204/5 Fax : 0361-2732937</p> <p>Email: bimalokpal.guwahati@gbic.co.in</p>	Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.
HYDERABAD	<p>Office of the Insurance Ombudsman, 6-2-46, 1st Floor, Moin Court,</p> <p>A.C. Guards, Lakdi-Ka-Pool, <u>HYDERABAD-500 004.</u>Tel : 040-</p>	Andhra Pradesh, Telangana, Yanam and part of Territory of Pondicherry.

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	65504123/23312122 Fax:040-23376599 Email: bimalokpal.hyderabad@gbic.co.in	
JAIPUR	Office of the Insurance Ombudsman, Ground Floor, Jeevan Nidhi II, Bhawani Singh Road, Jaipur – 302005 Tel : 0141-2740363 Email: bimalokpal.jaipur@gbic.co.in	Rajasthan.
KOCHI	Office of the Insurance Ombudsman, 2nd Floor, CC 27/2603, Pulinat Bldg., Opp. Cochin Shipyard, M.G.Road, ERNAKULAM-682 015. Tel : 0484- 2358759/2359338 Fax : 0484-2359336 Email:bimalokpal.ernakulam@gbic.co.in	Kerala, Lakshadweep, Mahe-a part of Pondicherry.
KOLKATA	Office of the Insurance Ombudsman,Hindustan Building. Annexe, 4 th Floor, C.R. Avenue, KOLKATA-700 072. Tel : 033-22124339/22124340 Fax : 033- 22124341 Email: bimalokpal.kolkata@gbic.co.in	West Bengal, Bihar, Sikkim, Jharkhand, Andaman & Nicobar Islands.
LUCKNOW	Office of the Insurance Ombudsman, Jeevan Bhawan, Phase-2, 6 th Floor, Nawal Kishore Road, Hazaratganj, LUCKNOW-226 001. Tel : 0522 -2231331/2231330 Fax : 0522- 2231310 Email: bimalokpal.lucknow@gbic.co.in	Uttar Pradesh, Uttaranchal.
MUMBAI	Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S.V. Road, Santacruz(W), MUMBAI-400 054. Tel : 022-26106928/26106552 Fax : 022- 26106052 Email: bimalokpal.mumbai@gbic.co.in	Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane.

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PUNE	2 nd Floor, Jeevan Darshan, N.C. Kelkar Road, Narayanpet, <u>PUNE – 411030.</u> Tel: 020-32341320 Email: bimalokpal.pune@gbic.co.in	Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region.
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Annexure B: Special Surrender Value Factor

No. of Completed Policy Years/Policy Term	14 Years	20 Years
1	0%	0%
2	40%	0%
3	43%	27%
4	46%	29%
5	50%	32%
6	54%	34%
7	58%	37%
8	63%	40%
9	68%	43%
10	74%	46%
11	79%	50%
12	86%	54%
13	93%	58%
14	100%	63%
15	0%	68%
16	0%	74%
17	0%	79%
18	0%	86%
19	0%	93%
20	0%	100%

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Annexure C: Section 39, 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. The extant provisions in this regard are as follows:

1. 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.
2. 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.
3. Nomination can be made at any time before the maturity of the policy.
4. 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.
5. 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.
6. 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.
7. Fee to be paid to the insurer for registering change or cancellation of a nomination can be specified by the Authority through Regulations.
8. 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.
9. 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

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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 26.12.2014 the date when insurance law was amended.
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 a nomination is made in favour 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 all the subsections of section 39 of the Insurance Act, 1938 and only a simplified version prepared for general information. Policy Holders are advised to refer to Original Section 39 of the Insurance Act, 1938, as amended from time to time, for complete and accurate details.]

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Annexure D: 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. The extant provisions in this regard are as follows:

1. This policy may be transferred/assigned, wholly or in part, with or without consideration.
 2. 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.
 3. 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.
 4. The assignment must be signed by the transferor or assignor or duly authorized agent and attested by at least one witness.
 5. 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.
 6. Fee to be paid for assignment or transfer can be specified by the Authority through Regulations.
 7. 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.
 8. 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.
 9. 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

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- 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 26.12.2014, the date when insurance law was amended, shall not be affected by this section.

[Disclaimer: This is not a comprehensive list of all the subsection of Section 38 of the Insurance Act, 1938 and only a simplified version prepared for general information. Policy Holders are advised to refer to Original Section 38 of the Insurance Act, 1938, as amended from time to time, for complete and accurate details.]

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Annexure E: Section 45, 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 are as follows:

1. 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 policywhichever is later.
2. 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 policywhichever 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.

3. 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.
4. 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.
5. 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.
6. 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.

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7. 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. However, the payment will be as per IRDAI direction/Regulation/Circular from time to time.
8. 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.
9. 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 all the subsection of the Section 45 of the Insurance Act, 1938, only a simplified version prepared for general information. Policy Holders are advised to refer to Original Section 45 of the Insurance Act, 1938, as amended from time to time, for complete and accurate details.]