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## Reliance Pay Five Plan

**In this policy, the investment risk in investment portfolio is borne by the policyholder.**

### **Policy Terms and Conditions and Privileges within referred to**

This Policy is the evidence of the contract between Reliance Life Insurance Company Limited ('the Company') and the policyholder referred to below.

Reliance Life Insurance Company Limited (hereinafter called "RLIC") 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 Pay Five Plan (UIN: 121L082V02) 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 RLIC offices for claiming the benefit.

It is hereby further declared 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 RLIC shall be deemed to be a part of the Policy.

### **Plan description**

Reliance Pay Five Plan is a unit linked, non participating, endowment insurance plan where the Policyholder pays premium only for five year for the chosen policy term. The premiums, net of premium allocation charges, are invested in the fund options chosen by the Policyholder. The units are allocated depending on the price of units for the fund. Top-up premiums are also allowed under the plan. On survival of the Life Assured to the end of the policy term provided the policy is in-force and all due premiums are paid, Fund Value under the Base Plan and Top-ups, if any, will be paid. On death of the Life Assured provided the policy is in force as on the date of death, Sum Assured plus Fund Value under the Base Plan and under Top-up, if any, will be paid as on the date of intimation of death. At any point of time, the minimum death benefit shall be 105% of the total premiums (including Top-ups) paid.

### **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/Death due to accident/Unnatural death"** means death due to accident, where accident is a sudden, unforeseen and involuntary event caused by external and visible means

**"Allocation"** means allotment of Units at the prevailing unit price under the Fund Option offered under this Policy, applicable in case of Premium payment.

**"Allocation Rate"** means allocation of units after deduction of Allocation Charge and applicable taxes and levies, if any.

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

**"Base Plan/ Plan"** means Reliance Pay Five Plan (UIN: 121L082V02)

**"Base Policy / Policy"** means this Reliance Pay Five Plan, which is the evidence of the contract between Reliance 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 IRDA 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

**"Business Day"** means any day on which the Company is open in Mumbai to the public for transacting business and on which banks are generally open in Mumbai to public for transacting business.

**"Charges"** means collectively the Allocation Charges, the Mortality Charges, the Policy Administration Charges, the Fund Management Charges, the Discontinuance/Surrender Charges, Miscellaneous Charges and any other charges that may be levied by the Company from time to time under this Policy

**"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 Life Insurance Company Limited (RLIC)

**"Cut-off time"** means the time prescribed by the IRDA on the relevant business day which is currently 3.00 PM. Any request received after the cut-off time shall be treated as if it is received on the next following business day.

**"Date of Commencement of risk"** means the date as mentioned in the Policy Schedule from which the insurance benefits start under the Policy or on which date the risk commences under the Riders, if available with the Base Plan & opted for. The commencement of risk cover on the Life Assured shall depend on the age of the Life Assured on 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

**"Discontinuance/Discontinue"** means the state of a policy that could arise on account of non payment of the contracted premium before 30 days from the date of receipt of revival notice. As per the guidelines by the regulatory authority, such revival notice will be sent to policyholders within a period of 15 days from the date of expiry of the grace period.

**"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

**"Fund Value"** shall mean the total value of units at that point of time in a segregated fund i.e. total number of units under a policy multiplied by the Net Asset Value (NAV) per unit of that fund.

**"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

**"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

**"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

**"Lock-in-period"** means the period of five consecutive years from the date of commencement of the policy, during which period the proceeds of the discontinued policies cannot be paid by the insurer to the Policyholder or to the Life Assured, as the case may be, except in the case of death or upon the happening of any other contingency covered under the 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 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

**"Net Asset Value"** means price per unit of the Segregated Fund

**"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

**"Number of Units"** is a number by which the Net Asset Value of a Fund is notionally divided for the purpose of calculating the benefits of unit-linked policies issued by 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 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

**"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.

**"Redeem/Redemption"** means to encash the units at the prevailing unit price offered by the company where the process involves cancellation of units. This is applicable in case of maturity, surrender, death etc. The proceeds will be paid out as per the applicable product terms and conditions.

**"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 (IRDA) 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 "Discontinue" status into "In force" status.

**"Segregated fund"** means the funds earmarked in respect of linked business as mentioned in this policy document

**"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.

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

**“Top-up/ Top-up premium”** means an additional amount(s) of premium paid, if any, over and above the contractual Base Premiums stipulated in the terms and conditions, at irregular intervals during the period of contract

**“Unit”** means a specific portion or part of the underlying segregated unit linked fund which is representative of the Policyholder's entitlement in a unit linked fund. It also represents one undivided share in the assets of the unit linked fund

**“Unit Account”** means the Policy Fund account

**“Unit Linked Fund”** is a pool of premiums, net of charges, paid by the policyholders and invested in a portfolio of assets to achieve the fund objectives. The price of each unit in a fund depends on the performance of the investments in that fund. The fund is managed by the Company

**“Unit Price”** means the Unit Value of the units of the Fund

**“Unit Value”** shall mean the value of the Units calculated in accordance with the following formula:

$$\text{Unit Value} = \frac{\text{Net Asset Value of the fund as on valuation date}}{\text{Total number of units existing in the fund as on valuation date}}$$

**“Unit Statement of Account”** means the statement referred to in Clause 10.5 below

**“You” / “Your”** mean 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 to the end of the policy term provided the policy is in force and all due premiums are paid, Fund Value under the Base Plan and Top-ups, if any, will be payable.

#### 3.2. Death Benefit

On death of the Life Assured, provided the policy is in force as on the date of death, the following benefits will be paid to the claimant

- Sum Assured under the Base Plan and Top-up, if any, plus
- Fund value under the Base Plan and the Top-up, if any

At any point of time, the minimum death benefit shall be 105% of the total premiums (including Top-ups) paid.

### 4. Other benefits and features:

#### 4.1. Surrender Benefit

**4.1.1. Surrender Value under the regular premium policy:** The Surrender Value under the policy will be the Fund Value less discontinuance charge, if any. Surrender Value is acquired immediately on payment of the Base Premium. However, the policy can be surrendered only after the completion of five policy anniversaries after deducting discontinuance charge, if any. Whenever full Surrender Value of Base Plan is paid, the Surrender Value of any attaching Top-ups will also be paid.

Once a policy is surrendered in full, it is terminated and cannot be reinstated.

**4.1.2. Surrender Value under Top-ups:** The Surrender Value under the Top-up will be the Fund Value. Surrender Value is acquired immediately on payment of the Top-up premium. However, Surrender Value of Top-up can be paid after the completion of five years from the date of payment of Top-up. There is no discontinuance charge on the Top-ups. The Surrender Value is therefore equal to the Fund Value under the Top-ups.

Whenever full Surrender Value of Base Plan is paid, the Surrender Value of any attaching Top-ups will also be paid.

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

#### 4.2. Partial Withdrawal

**4.2.1. Partial withdrawal from the Base Plan before maturity of the policy:** Partial withdrawals are available only after the completion of five policy anniversaries or on attainment of age 18 by the Life Assured whichever is later.

On every partial withdrawal under the Base Plan, there is a partial withdrawal charge of Rs.100 and the partial withdrawal value will be paid after deducting the partial withdrawal charge.

Partial withdrawal would be done from the Fund Value built up from the Top-up premium as long as such Fund Value supports the partial withdrawal and subsequently, the partial withdrawal will be allowed from the Fund Value built up from the Base Premiums.

In the event of death of the Life Assured before the 60th birthday, the Sum Assured would be deducted by all partial withdrawals made from the base policy fund during the 24 months prior to the date of death.

Or

In the event of the death of the Life Assured on or after 60th birthday, the Sum Assured would be deducted by all partial withdrawals made from the base policy fund during the 24 months before attaining 60th birthday and all withdrawals made from the base policy fund after attaining 60th birthday.

The minimum amount of partial withdrawal is Rs. 5,000 and the maximum partial withdrawal amount should not exceed 20% of the Fund Value at the time of withdrawal.

However, at any point of time during the policy term, the minimum fund balance after the partial withdrawal should be at least equal to 125% of the Annualised Premium.

**4.2.2. Partial Withdrawal Value under Top-ups:** The partial withdrawal value is payable only after the completion of five years from the date of payment of each Top-up or on attainment of age 18 by the Life Assured whichever is later.

On every partial withdrawal under the Top-up, there is a partial withdrawal charge of Rs.100 and the partial withdrawal value will be paid after deducting the partial withdrawal charge.

The maximum partial withdrawal amount under Top-up should not exceed 20% of the Fund Value at the time of withdrawal. However, at any point of time during the policy term, the minimum fund balance under Top-up after the partial withdrawal should be at least equal to 50% of the Top-up premiums paid.

Partial withdrawal should be done from the Fund Value built up from the Top-up premium as long as such Fund Value supports the partial withdrawal. Subsequently, any further partial withdrawal should be done from Fund Value built up from the Base Premiums.

#### 4.3. Options under the plan

**4.3.1. Switching:** The policyholder will have the flexibility to alter the allocation of his/her investments among the funds offered in order to suit his/her changing investment needs by easily switching between the funds. At any time during the policy term, the policyholder may instruct the Company, in writing, to switch some or all of the units from one unit linked fund to another. The company will give effect to this switch by cancelling units in the old fund and allocating units in the new fund. In respect of switching requisition received up to 3.00 p.m. by the company, the closing unit price of the day shall be applicable. In respect of switching requisition received after 3.00 p.m. by the company, the closing unit price of the next business day shall be applicable. The policyholder is entitled to fifty two free switches each policy year. Unused free switches cannot be carried forward to a following year.

**4.3.2. Top-ups:** Top-ups can be accepted only where the due Base Premiums are paid up to date. The minimum Top-up premium at any time is Rs.5,000. Payment of Top-ups would result in increase in Sum Assured by 125% of the Top-up premium paid, in case the age of the Life Assured at the time of payment of Top-up premium is less than 45 years and 110% of the Top-up premium paid, in case the age of the Life Assured at the time of payment of Top-up premium is greater than or equal to 45 years. However the Sum Assured under the Base Plan and Top-up across all policies with Reliance Life Insurance Company shall not exceed Rs. 5 lakh, if the age of the Life Assured at the time of payment of Top-up is less than 12 years. Top-up Premium is not allowed during the last five years of the policy term.

The total Top-up premiums at any point of time shall not exceed 100% of the total regular premium paid till that time.

**4.3.3. Premium Redirection:** The Policyholder can choose to redirect premiums in which case future premiums will be allocated to funds of policyholder's choice, without changing your existing fund allocation.

A policyholder may request to the Company in writing to redirect all the future premiums under a policy in an alternative proportion to the various unit funds available. Redirection will not affect the allocation of premium(s) paid prior to the request.

**4.3.4. Exchange Option:** This option is available for existing policyholders of Reliance Pay Five Plan after completion of five policy years from the date of commencement. Under this option, the policy holder can transfer policy benefits (surrender, maturity, etc) to another plan wherein exchange option is available. This option must be exercised at least 30 days before the receipt of benefit under the policy. The terms and conditions as specified in the opted policy document would apply to the policy holder opting for the 'Exchange Option'.

If a policyholder is opting for Reliance Pay Five Plan under exchange option, the allocation charge in year of exchange will be reduced. The reduced initial allocation charge applicable in the year of exchange is 4.25%.

Regular allocation charges would apply to the balance of the policy term.

If the exchange option is used to pay Top-ups in the Reliance Pay Five Plan, the allocation charge in the year exchange will be 1% of the Top-up amount.

**4.3.5. Settlement Option:** The policyholder has the option to take the maturity proceeds in periodic instalments within a maximum of 5 years from the date of maturity. The policyholder has to give a notice to the Company at least 30 days before the maturity date. The periodic instalment could be in any form including lump sum or infrequent withdrawals as requested by the policyholder. Policyholder has to choose the period of settlement at the time of submission of notice.

Partial withdrawal is not allowed during the settlement period. Complete withdrawal is allowed at any time during the settlement period. On complete withdrawal, entire Fund Value as on the date of withdrawal will be payable.

During the settlement period, there will be no life cover. The policy will participate in the performance of units. There will not be any deductions towards Mortality Charges and Policy Administration Charges.

The Fund Management Charge will be priced in the unit value.

In the event of death of the Life Assured during settlement period the Fund Value as on the date of intimation of death will be paid to the nominee.

During the settlement period, no insurance will be available to the policyholder.

During the settlement period, the investments made in the unit funds are subject to investment risks associated with capital markets and the NAV's of the units may go up or down based on the performance of the fund and the factors influencing the capital market.

The investment risk during the settlement period will be borne by the policyholder.

If settlement option is selected, then on maturity of the policy, the total fund balance would be automatically moved into Life Balanced Fund 1, the only fund option available during the settlement period.

**4.3.6. Systematic Transfer Plan:** Systematic Transfer Plan (STP) is available only for contributions to be invested in the Life Equity Fund 3.

This facility will allow policy holder to invest the portion of premium or Top-up meant for Life Equity Fund 3 initially into Life Money Market Fund 1 and then systematically transfer (i.e automatically switch) every week (not less than 1/4 part of the amount initially invested) into Life Equity Fund 3 option. On the date of realisation of the instalment premium cheque, units will be allocated in the Life Money Market Fund 1 for the portion of premium meant for Life Equity Fund 3. On each of the next four Systematic Transfer dates one-fourth of the STP units will be transferred to the Life Equity Fund 3 automatically. The STP dates will be 7th, 14th, 21st & 28th of every month.

The first time the policyholder effects STP on Base Premiums or on Top-up no charge will be levied. Subsequently, a fixed charge of Rs.100 will be levied each time the Systematic Transfer Plan Option is selected.

However, the selection or de-selection of STP can take place only on the policy anniversary.

There are no charges for cancellations of STP option. No further switches are allowed during STP period in respect of the fund amount under STP option. Once STP option is selected it can't be cancelled in respect of the amount already lying in the STP fund.

### 5. Premium

**5.1. Payment of premium:** Policyholder is required to pay premium only for five policy year. Only annual premiums are allowed under the plan as specified in the Policy Schedule.

Top-up premium/s are also allowed at any time subject to the 100% limit i.e. total top-up premiums at any point in time will not exceed 100% of the total premiums paid till that time. Top-up premium is not allowed during the last 5 years of the policy term.

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.

In case valid claim arises 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 would deduct the said unpaid premium, while settling such a claim.

**5.2. Mode of payment of premium:** The Policyholder can only pay premiums in yearly modes by cash, cheque, debit/credit card, ECS, online payment, demand draft, Salary Deduction Scheme (SDS) or direct debit.

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 at least 15 days prior to the premium due date.

**5.3. Rider premium:** Rider premiums, if any, shall be collected by cancellation of units. 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 Base Premiums. During the grace period the policy shall continue to remain in force along with all benefits under this policy.

**5.5. Discontinuance of payment of premium:** If the due premiums are not paid within the grace period, then the policy will be treated as per the IRDA (Linked Insurance Products) Regulation, 2013. As per the regulation, if the due premiums are not paid within the grace period, a revival notice will be sent to the policyholder within fifteen days from the date of expiry of the grace period. The policyholder shall be entitled to revive the policy or to withdraw completely from the policy without any insurance benefit and rider benefits (if any). The policyholder has to exercise any one of the options within 30 days from the date of receipt of the revival notice. During this period, the policy will be treated as in-force with insurance benefits but the rider benefits (if any) will cease immediately. The policy will participate in the performance of fund. Mortality charges and policy administration charges will be deducted from the Fund Value by cancellation of units. The Fund Management Charge will be priced in the unit value.

If the policyholder opts to revive the policy, the policy continues with all the benefits.

In case the policyholder chooses to withdraw the policy or does not exercise any option, the Fund Value under the base policy (including Top-ups) less applicable discontinuance charges will be switched to Discontinued Policy Fund. The insurance benefit and rider benefits ceases immediately. Fund Management Charge will be priced in the unit value. The income earned on the fund shall be apportioned to the Discontinued Policy Fund. The proceeds of the discontinued policies shall be payable only on completion of five policy anniversaries.

**5.6. Revival of the Policy:** If the due premiums are not paid within the grace period, a revival notice will be sent to the policyholder within fifteen days from the date of expiry of the grace period. The policyholder may revive a policy by the payment of the due premium/s at any time within a period of 30 days from the date of receipt of the revival notice but before the maturity date of the policy subject to satisfactory medical and financial underwriting. Policyholder can revive the discontinued policy within two years from the date of discontinuance but before expiry of the policy term by paying all the outstanding premiums to the company.

## 6. Investment and Fund details

**6.1. Investment fund options:** The policy offers total 5 fund options namely Life Equity Fund 3, Life Corporate Bond Fund 1, Life Money Market Fund 1, Life Pure Equity Fund 2 and Life Balanced Fund 1 on commencement of the policy. For policies where the premiums are discontinued, the Fund Value will be moved to Discontinued Policy Fund.

The "Life Balanced Fund 1" is available for settlement option.

The asset allocation, investment policy and Segregated Fund Identification Number are given below:

Fund Name	Investment Objectives	Asset Class	Asset Allocation Range (%)	Target (%)
Life Equity Fund 3 (SFIN:U-LIF04201/01/10-LEQUITYF03121)	Provide high real rate of return in the long term through high exposure to equity investments, while recognizing that there is significant probability of negative returns in the short term. The risk appetite is 'high'	Money market instruments	0 - 25	0
		Equities	75 - 100	100
Life Corporate Bond Fund 1 (SFIN:U-LIF02310/06/08L-CORBOND01121)	Provide returns that exceed the inflation rate, while taking some credit risk (through investments in corporate debt instruments) and maintaining a moderate probability of negative return in the short term. The risk appetite is 'low to moderate'	Money market instruments	0 - 25	0
		Corporate bonds/debentures and other debt instruments excluding money market instruments	75 - 100	100
Life Money Market Fund 1 (SFIN:ULIF02910/06/08L-MON-MRKT01121)	Maintain the capital value of all contributions (net of charges) and all interest additions, at all times. The risk appetite is 'low'	Money market instruments	100	100
Life Pure Equity Fund 2 (SFIN:U-LIF04601/01/10L-PUEQUITY02121)	The investment objective of the Pure Equity fund is to provide policyholders high real rate of return in the long term through high exposure to equity investments, while recognizing that there is significant probability of negative returns in the short term. The risk appetite is 'high'	Equities in sectors other than banks and non-banking financial companies, breweries, distilleries, alcohol based chemicals, cigarettes, tobacco, entertainment, leather, sugar and hatcheries	60 - 100	100
		Money market instruments	0 - 40	0
Life Balanced Fund 1 (SFIN:U-LIF00128/07/04L-BALANCE01121)	The investment objective of the fund is to provide investment returns that exceed the rate of inflation in the long term while maintaining a low probability of negative returns in the short term. The risk appetite is defined as 'low to moderate'	Debt Securities	60 - 100	80
		Equities	0 - 40	20
		Money market instruments	0 - 25	0

**Discontinued Policy Fund:** For the policies where the premiums are discontinued, the Fund Value will be moved to Discontinued Policy Fund. The proceeds of the discontinued policy fund shall be refunded only upon completion of the five policy anniversaries. The minimum guaranteed interest rate applicable to the Discontinued Policy Fund will be at an interest rate as declared by the Authority from time to time. Currently the minimum guaranteed interest rate under the Discontinued Policy Fund is 4% compounding annually.

Fund Name	Investment Objectives	Asset Class	Asset Allocation Range (%)	Target (%)
Discontinued Policy Fund (SFIN:ULIF05703/09/1ODIS-CPOLF01121)	The objective of the fund is to maintain capital value of the fund at all times and earn a minimum predetermined yield, at the rate determined by the regulator from time to time and maintain sufficient liquidity to meet the pay outs. The fund would be predominantly stay invested money market instruments. Risk appetite of the fund is defined as 'low'	Money Market Instruments	0 - 40	30
		Government Securities	60-100	70

Within a fund, if the target investment in one asset class is less than 100%, the remaining balance would be invested in the other asset classes mentioned under a fund.

Whilst every attempt would be made to attain target levels prescribed above, it may not be possible to maintain the prescribed 'target' at all times owing to market volatility, availability of market volumes and other related factors. The 'target' may be attained on a 'best effort' basis. However, the asset allocation will always fall within the asset allocation range mentioned in respect of each fund.

**6.2. Closing or Discontinuance of Fund Option:** The Company may, at its discretion, with the approval of the Regulatory Authority, close or discontinue any Fund Option on the happening of an event, which, in the opinion of the Company, requires the Fund Option to be closed or discontinued. In the event the Company decides to close or discontinue any Fund Option, the Company shall give at least three months prior written notice to Policyholder. In such an event, if the Policyholder does not switch the Units to another available Fund Options prior to the expiration of the aforesaid notice period, the Company may, at its discretion, at any time thereafter, switch the Units to another Fund Option/s available on offer under the plan. The Company's decision in selecting the Fund Option/s shall be final and binding. In such cases, the Company shall not levy any penalty or Switching Charges for such switch to another Fund Option/s.

**6.3. Creation of Units:** Where regular premiums and Top-up premiums are received and accepted at the Company's Office on a Business day, the number of Units to be created shall be computed using the NAV per unit (Unit Price) as determined on the Valuation Date.

**6.4. Computation of Net Asset Value (NAV):** The NAV will be computed as per IRDA (Linked Insurance Products) Regulations, 2013.

The NAV for a particular fund shall be computed as: Market Value of investment held by the fund plus the value of current assets less the value of current liabilities and provisions, if any. This gives the net asset value of the fund. Dividing by the number of units existing at the valuation date (before creation/redemption of units), gives the unit price of the fund under consideration.

In case the valuation day falls on a holiday/non business day, then the exercise will be done on the following working day.

For a very large transaction above a threshold level, in order to maintain equity and fairness with all unit holders, we may choose to apply special treatment for all transactions, which involve purchase or sale of underlying assets. The number of units allocated may reflect the expenditure incurred in the actual market transactions which occurred. The value of units obtained from encashment may be the actual value obtained as a consequence of the actual market transactions which occurred. Transactions may occur over a number days. The threshold level will vary from time to time, depending on, amongst other matters, the liquidity of the stock markets. Our current threshold for large transactions will be Rs.50,000,000 for a fund predominantly investing in Government securities and Rs.25,000,000 for a fund investing in highly liquid equities.

We reserve the right to value less frequently than daily in extreme circumstances, where the value of the assets may be too uncertain. In such circumstances we may defer the valuation of assets and the extent of deferral period will be as per the Authority's directions at that point of time until normality returns. Examples of such circumstances are:

- When one or more stock exchanges which provide a basis for valuation for a substantial portion of the assets of the fund are closed otherwise than for ordinary holidays
- When, as a result of political, economic, monetary or any circumstances out of our control, the disposal of the assets of the unit fund are not reasonable or would not reasonably be practicable without being detrimental to the interests of the remaining unit holders
- During periods of extreme volatility of markets during which surrenders and switches would, in our opinion, be detrimental to the interests of the existing unit holders of the fund
- In the case of natural calamities, strikes, war, civil unrest, riots and bandhs
- In the event of any force majeure or disaster that affects our normal functioning
- If so directed by the IRDA.

**6.5. Factors determining allocation:** Units are allocated under the policy depending on the amount of premium paid, the allocation rate and the prevailing NAV per unit (Unit Price).

**6.6. Allocation of Units:** The Company applies premiums to allocate units in one or more of the unit linked funds in the proportions which the policyholder specifies. The allotment of units to the policyholders will be done only after the receipt of premium proceeds as stated below;

In case of New Business, units shall only be allocated on the day the proposal is completed and results into a policy by the application of money towards premium.

In the case of renewal premiums, the premium will be adjusted on the due date, whether or not it has been received in advance. (This assumes that the full stipulated premium is received on the due date.) Renewal premiums received in advance will be kept in the deposit account and will not earn any returns until the renewal premium due date on which the same will be applied to the unit funds.

In respect of premiums received or funds switched up to 3.00 p.m. by the company along with a local cheque or a demand draft payable at par at the place where the premium is received, the closing NAV per unit (unit price) of the day on which the premium is received or funds switched, shall be applicable.

In respect of premiums received after 3.00 p.m. by the company along with a local cheque or a demand draft payable at par at the place where the premium is received, the closing NAV per unit (unit price) of the next business day shall be applicable.

In respect of premiums received with outstation cheques or demand drafts at the place where the premium is received, the closing NAV per unit (unit price) of the day on which cheques / demand

draft is realised shall be applicable.

**6.7. Redemptions:** In respect of valid applications received (e.g. surrender, maturity claim, switch out etc) up to 3.00 p.m. by the insurer, the same day's closing unit price shall be applicable. In case of a holiday or non-business day the closing unit price of the next business day shall be applicable. In respect of valid applications received (e.g. surrender, maturity claim, switch out etc) after 3.00 p.m. by the insurer, the closing unit price of the next business day shall be applicable.

The unit price for each segregated fund provided under this product shall be made available to the public in the print media on a daily basis. The unit price will also be displayed on the web portal of the company.

**6.8. Publication of NAVs:** The NAV per unit (unit price) for the funds under this policy are published on a daily basis in major newspapers. The NAVs are also published in the company's website www.reliance.com

**6.9. Cancellation of units:** To meet fees and charges, and to pay benefits, the Company will cancel units to meet the amount of the payments which are due.

The units will be cancelled at the prevailing NAV per unit (unit price).

The Fund Management Charges will be priced in the NAV per unit (unit price) of each Fund on a daily basis.

In the event that units are held in more than one Fund, the cancellation of units will be effected in the same proportion as the value of units held in each Fund. In case the Fund Value in any fund goes down to the extent that it is not sufficient to support the proportionate monthly charges, then the same shall be deducted from the Fund Value of the other funds.

**6.10. Unit Statement of Account:** The Company shall issue to the Policyholder, a Unit Statement of Account showing the details of Units held and particulars of credits and debits in respect of the Individual Policyholder's Fund Value Account on every Policy Anniversary as well as whenever a transaction in the nature of receipt of Premium, Partial Withdrawal or payment of Benefits, etc.

**6.11. The value of a policyholder's fund:** The value of your policy fund at any time is the total value of units at that point of time in a segregated fund i.e. total number of units under a policy multiplied by the Net Asset Value (NAV) per unit of that fund. If a policyholder holds units in more than one unit linked fund, then the value of the fund for that policyholder is the total value across all unit linked funds. Note that all Fund Values including Top-up funds are aggregated.

**6.12. Delisting encashment:** The Company may delay encashing units from a fund if it is necessary to do so in order to maintain fairness and equity between unit holders remaining in, and unit holders leaving a fund. Where this applies, we may delay encashing all or part of the funds for up to 30 days. If we delay the encashment, we will use the per unit price (NAV) that apply on the day on which the encashment actually takes place.

**6.13. Non-zero positive claw-back additions:** The Company will arrive at specific non-zero positive additions, if any, to be added to the unit fund, as applicable, at various durations of time to comply with the prevailing reduction in yield criteria.

At the time of Maturity, the Company will issue a certificate to Policyholder showing year-wise contributions, charges deducted, Fund Value and final payment made to the Policyholder taking into account partial withdrawals, if any. The Company will credit the unit fund with non-zero positive claw-back additions, if any, at maturity.

## 7. Charges

**7.1. Mortality Charge:** This charge will be deducted from the Fund Value under the Base Plan and Top-up premium/s. The mortality charges will vary depending on

- The amount of life insurance cover
- The attained age of Life Assured
- The occupation of the Life Assured
- The health of the Life Assured

The mortality charges will be deducted by cancellation of units at the prevailing NAV per unit (unit price) on a monthly basis at the beginning of each policy month using 1/12th of the mortality rates.

The standard mortality charges per annum under this policy per Rs.1000/- Sum Assured are as provided in Annexure B of this Policy Document. Mortality charge will be different for sub standard lives.

### 7.2. Premium Allocation charges

The Premium Allocation Charges are deducted as a percentage of the premiums.

The Premium Allocation Charges in respect of Regular Premium payment policies are stated below:

Policy Year	Allocation charge as % of the Annualised Premium
1 year	9.25%
2nd year to 5th year	6.50%

The Premium Allocation Charge on the Single Premiums will be 2% of the single premium and allocation charge under the Top-up will be 2% of the Top-up amount.

For the employees of Reliance Life Insurance Company Limited (including employees of any other Company of the Reliance Group), reduced allocation charges will apply as detailed below:

Policy Year	Reduced Allocation charge as % of the Annualised Premium
1 year	4.25%
2nd year to 5th year	4.50%

The reduced allocation charge under the Top-up will be 1% of Top-up.

If the person ceases to be an employee of Reliance Life Insurance Company Limited or any other company of the Reliance Group, the normal allocation charges will be applicable from that date.

**7.3. Fund Management Charge (FMC):** Fund Management Charges will be priced in the NAV per unit (unit price) of each Fund on a daily basis.

Fund Name	Annual Rate
Life Equity Fund 3 (SFIN:ULIF04201/01/10LEQUITYF03121)	1.35%
Life Pure Equity Fund 2 (SFIN:ULIF04601/01/10LPUEQUITY02121)	1.35%
Life Corporate Bond Fund 1 (SFIN:ULIF02310/06/08LCORBOND01121)	1.25%
Life Money Market Fund 1 (SFIN:ULIF02910/06/08LMONMRKT01121)	1.25%
Life Balanced Fund 1 (SFIN:ULIF00128/07/04LBALANCE01121)	1.25%
Discontinued Policy Fund (SFIN:ULIF05703/09/10DISCPOLF01121)	0.5%

**7.4. Policy Administration Charge:** After the premium payment term, policy administration charge of Rs.40 per month will be deducted.

The monthly Policy Administration Charge will be deducted by cancelling units at the prevailing

NAV per unit (unit price) in advance at the beginning of each month.

**7.5. Partial Withdrawal charge:** On every partial withdrawal, a Partial withdrawal charge of Rs. 100 will be deducted from the amount of fund withdrawn.

**7.6. Discontinuance Charge:** The Discontinuance Charge under the regular premium payment policy is as given below:

The policy year during which the policy is discontinued	Discontinuance charge
1	Lower of 6% of (Annualised Premium or Fund value), subject to a maximum of Rs.6,000
2	Lower of 4% of (Annualised Premium or Fund value), subject to a maximum of Rs.5,000
3	Lower of 3% of (Annualised Premium or Fund value), subject to a maximum of Rs.4,000
4	Lower of 2% of (Annualised Premium or Fund value), subject to a maximum of Rs.2,000
5 and above	Nil

There are no discontinuance charges under single premium and Top-up premiums.

**7.7. Service Tax charges:** The service tax charge are collected as below.

a. The Service tax will be levied on Premium Allocation charge, Fund Management Charge, Policy administration charge, Mortality charge, Switching charge, Rider charges, if any, Miscellaneous charges on STP option and discontinuance charge.

b. The level of this tax will be as per the rate of service tax, declared by the Government from time to time.

c. The above charges will be recovered by cancellation of units at the prevailing unit price (unit price).

d. The Service Tax Charge on Fund Management Charge will be priced in the NAV per unit (unit price) of each Fund on a daily basis.

e. The Service Tax charge on allocation charge will be deducted from the premium along with the allocation charge.

The above charges will be recovered by cancellation of units at the prevailing unit price.

**7.8. Switching charge:** There are 52 free switches during any policy year. Subsequent switches if any will have a fixed charge of Rs 100 per switch. Switching charge will be recovered by cancellation of units at the prevailing unit price. Unused free switches cannot be carried forward to a following year.

**7.9. Miscellaneous Charge:** The first Systematic Transfer Plan (STP) option for regular premium payment mode as well as Top-ups is not chargeable. A fixed charge of Rs.100 will be levied for every subsequent Systematic Transfer Plan Option selected by you. There are no charges for cancellations of STP option.

**7.10. Revision in Rate of Charges:** The Company reserves the right to change the Fund Management charge. However, the maximum FMC on any fund excluding Discontinued Policy Fund will be 1.35% p. a. and the maximum FMC on Discontinued Policy Fund will be 0.5% p. a.

The Policy Administration Charge is subject to revision at any time, but will not exceed Rs 80 per month.

The Partial Withdrawal charge, Switching Charge and the charge for selecting STP option is subject to revision at any time, but will not exceed Rs 500.

The Premium Allocation Charge, Mortality Charge and Discontinuance Charge are guaranteed for the term of the policy.

The revision in charges if any ( except the Service Tax Charge) will take place only after giving three months notice to the policyholders and after obtaining specific approval of the IRDA.

The Service Tax Charge will be revised as and when notified by the Government.

If the policyholder does not agree with the modified charges, they shall be allowed to withdraw the units in the plans at the then prevailing unit value after paying surrender charge if any and terminate the Policy.

## 8. General conditions

**8.1. Risk Factors:** This Policy is issued on the express understanding that the investments are subject to the following risks among others and the Policyholder has opted for this Policy with full knowledge of such risks.

i. Unit Linked Life Insurance products are different from the traditional insurance products and are subject to the following risk factors.

ii. The premium paid in unit linked insurance policies are subject to investment risks associated with capital markets and NAV per unit (unit price) may go up or down based on the performance of the fund and factors influencing the capital markets and the policyholder is responsible for his/her decisions.

iii. "Reliance Life Insurance Company Limited" is the name of the Company and "Reliance Life Insurance Classic Plan-II" is only the name of the policy and does not in any way indicate the quality of the policy, its future prospects or returns.

iv. The names of the Fund Option(s) do not in any manner indicate the quality of the Fund Option(s) or their future prospects or returns.

v. Investments in Units are subject to market and other risks. Investment risk in investment portfolio is borne by the Policyholder. There is no assurance that the objectives of the Fund Option(s) shall be achieved;

vi. NAV per unit (unit price) may fluctuate depending on factors and forces affecting the capital markets and the level of interest rates prevailing in the market;

vii. Past performance of the Fund Options is not indicative of future performance of any of those Funds.

viii. All Benefits payable under this Policy are subject to tax laws and other fiscal enactments in effect from time to time. The policyholder is recommended to consult his/her tax advisor.

The Company reserves the right to suspend the allocation, re-allocation, cancellation of Units under extraordinary circumstances such as extreme volatility of assets, extended suspension of trading on stock exchange, natural calamities, riots and other similar events or force majeure circumstances.

**8.2. Service tax and other taxes:** The level of this tax will be as per the rate of service tax, declared by the Government from time to time. The above charges will be recovered by cancellation of units at the prevailing unit price.

**8.3. 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.

**8.4. Employee staff discount:** No commissions are payable on policies purchased by Reliance Life Insurance Company Limited staff and staff of other Reliance Group companies, where the reduced allocation rates apply. However, if the person ceases to be an employee of Reliance Life Insurance Company Limited or any other company of the Reliance Group, the normal allocation rates will be applicable from the date the person ceases to be an employee of the Reliance Group company.

**8.5. Loans:** Loan facility is not available under this policy.

**8.6. 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:

- the amount of insurance premium that was actually paid in relation to that person (in the policy period in which he/she died) and
- 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.

**8.7. 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:

- the reasons for delay are due to unavoidable circumstances beyond the control of the Claimant and
- 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:**

- Original Policy Document
- Discharge form
- KYC documents of the Policyholder as per the Anti Money Laundering (AML) Guidelines. (These include address proof & identity proof)
- ECS Mandate form/ Cancelled cheque leaf/ Self-attested passbook copy of the claimant
- Any other document, 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:**

- Policy Document in original
- Death certificate in original issued by the competent authority
- Hospitalization documents (discharge summary along with all investigation reports) if the Life Assured has taken treatment for illness leading to his death
- Claim Form (A) to be filled in by the claimant
- Claim Form (B) to be filled in by the last treating doctor
- Claim Form (C) to be filled in by a third person (who is not a relative of the claimant)
- KYC documents of the claimant as per AML Guidelines (Address proof & identity proof)
- 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:**

- Policy Document in original
- Death certificate in original issued by the competent authority
- Copies of the First Information Report and the Final Investigation Report thereof, duly attested by the concerned police officials
- Copy of the post-mortem report duly attested by the concerned officials
- Claim Form (A) filled in by the claimant
- Claim Form (B) filled in by the last treating doctor
- Claim Form (C) to be filled in by a third person (who is not a relative of the claimant)
- KYC documents of the claimant as per AML Guidelines (Address proof & identity proof)
- 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 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.

**8.8. Tax benefit:** Premiums paid under the policy eligible for tax deduction subject to applicable tax laws and conditions. The benefits under this plan and riders, if any, 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 from time to time. The Policyholder is recommended to consult a tax advisor.

**8.9. Nomination (Section 39 of Insurance Act, 1938):** The Life Assured, where he is the Policyholder, may, at any time during the Policy term, make a nomination for the purpose of payment of Benefits in the event of his death. Where the Nominee is a minor, the Policyholder may also appoint a person to receive the money during the minority of the Nominee. Nomination may be made by an endorsement on the Policy and by communicating the same in writing to the Company. Any change of nomination, which may be effected before the termination of the Policy

shall also be communicated to the Company. In registering a nomination, the Company does not accept any responsibility or express any opinion as to its validity or legal effect.

**8.10. Assignment (Section 38 of Insurance Act, 1938):** An assignment of the Policy may be made by an endorsement upon the Policy itself or by a separate instrument signed in either case by the assignee or specifically stating the fact of assignment and duly attested. Only the Policyholder may make the first assignment. Such assignment shall be effective, as against the Company, from and upon the service of a written notice to the Company and the Company recording the assignment in its books. In case of assignment under this Policy, the assignee would not be entitled to increase the Death Benefit. In registering an assignment, the Company does not accept any responsibility or express any opinion as to its validity or legal effect.

**8.11. 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 by paying the Surrender Value 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.

**8.12. Events when Policy becomes null and void:** 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. Subject to the provisions of the applicable regulations including Section 45 of the Insurance Act, 1938, in the event any such information, declaration or statement is found to be false or incorrect or any material information is found to be withheld or misrepresented, the Policy shall become 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 by paying the Surrender Value.

**8.13. Suicide:** If the Life Assured, whether sane or insane, commits suicide within 12 months from the date of inception of this policy or from the date of any revival of the policy then the Company will limit the death benefit to the Fund Value, as available on the date of death and will not pay any insured benefit.

Any charges recovered subsequent to the date of death will be paid-back to nominee or beneficiary along with death benefit.

**8.14. 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 (IRDA). The terms and conditions of this policy is in accordance with the Insurance Act, 1938, Insurance Rules, 1939, IRDA 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, IRDA, 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.

**8.15. Recovery of additional expenses incurred on account of acts of Policyholders:** In the event RLIC incurs expenses towards physical visits to the Policyholder's residences for any service such as collection of premiums and so on, RLIC reserves the right to recover such expenses.

RLIC 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.

RLIC 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. For multiple such debit bounces the Company reserves the right to change the premium payment mode to yearly on policy anniversary.

**8.16. 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 shall be payable in India and in Indian currency.

**8.17. 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 RLIC 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.

**8.18. 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.

**8.19. 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.

**8.20. Fraud:** In case fraud or misrepresentation, the policy shall be cancelled immediately by paying the Surrender Value, subject to the fraud or misrepresentation being established by the insurer in accordance with Section 45 of the Insurance Act, 1938.

**8.21. 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 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.

**8.22. 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.

**8.23. 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.

**8.24. Electronic transaction:** The Policyholder shall adhere to and comply with all such terms and conditions as prescribed by RLIC 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 RLIC, for and in respect of the Policy or its terms, or RLIC's other products and services, shall constitute legally binding and valid transactions when done in adherence to and in compliance with RLIC's terms and conditions for such facilities, as may be prescribed from time to time.

**8.25. 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 RLIC's website.

ii. In case of the Company

To Reliance Life Customer Service

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

Reliance Life representatives may be contacted between 10am- 5pm, Monday to Friday on Customer Care number 1800 300 08181 (Toll free) or 30338181 (local call charges apply).

Email: [rlife.customerservice@relianceada.com](mailto:rlife.customerservice@relianceada.com)

**8.26. 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 RLIC 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 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.

**8.27. 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, service or other taxes, as may be imposed now or in future by any authority (collectively "Taxes") on the Premiums and other sums payable to RLIC or RLIC'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 RLIC, then RLIC 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 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, RLIC 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 RLIC is obliged to account to the revenue authorities for any Taxes applicable to this Policy or the Benefits payable under this Policy, RLIC 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 RLIC 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, RLIC 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.

**8.28. 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.

**8.29. Grievance redressal**

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

**Step 1.1:** 24 hours contact centre: 30338181 (Local call charges apply) & 1800 300 08181 (Toll free) or Email: [rlife.customerservice@relianceada.com](mailto:rlife.customerservice@relianceada.com) OR

**Step 1.2:** Contact the Customer Service Executive at your nearest branch (this is a link for branch location details) of the Company OR

Step 1.3: Write to

Reliance Life Customer Care

Reliance 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,

**Step 3:** Write to Head of Customer Care at [rlife.headcustomerservice@relianceada.com](mailto:rlife.headcustomerservice@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 [rlife.gro@relianceada.com](mailto:rlife.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.

**8.30. 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 RLIC, 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 RLIC 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:

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.

The Policyholder's attention is invited to Sections 41 and 45 of the Insurance Act, 1938, which are reproduced below for reference:

**8.31. Prohibition of rebate (Section 41 of the Insurance Act, 1938)**

1) No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the Policy, nor shall any person taking out or renewing or continuing a Policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer:

Provided that acceptance by an insurance agent of commission in connection with a Policy of life insurance taken out by himself on his own life shall not be deemed to be acceptance of a rebate of premium within the meaning of this sub-section if at the time of such acceptance the insurance agent satisfies the prescribed conditions establishing that he is a bona fide insurance agent employed by the insurer.

2) Any person making default in complying with the provisions of this section shall be punishable with fine which may extend to five hundred rupees.

**8.32. Policy not to be called in question on ground of mis-statement after two years (Section 45 of the Insurance Act, 1938)**

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

Provided that nothing in this section shall prevent the insurer from calling for proof of age at any time if he is entitled to do so, and no Policy shall be deemed to be called in question merely because the terms of the Policy are adjusted on subsequent proof that the age of the life insured was incorrectly stated in the proposal.

**About Reliance Life Insurance**

Reliance Life Insurance Company Limited is a licensed life insurance company registered with the Insurance Regulatory & Development Authority (IRDA) Registration No. 121. Reliance 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.**

**Insurance is the subject matter of the solicitation**

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

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

**Corporate Office:** 9th floor/ 10th floor, Building No. 2, R-Tech Park, Nirlon Compound, Next to Hub Mall, Behind Oracle Building, Goregaon (East), Mumbai - 400 063

For more information call us at our 24 x 7 Call Centre number - 30338181 (Local call charges apply) or our Toll Free Number 1800 300 08181 or email us at: [rlife.customerservice@relianceada.com](mailto:rlife.customerservice@relianceada.com)

Visit us at [www.relianceada.com](http://www.relianceada.com)

UIN for Reliance Pay Five Plan : 121L082V02

**Annexure A: Insurance Ombudsman**

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

Office of the Ombudsman	Contact Details	Areas of Jurisdiction
<b>AHMEDABAD</b>	Office of the Insurance Ombudsman, 2nd Floor, Ambica House, Near. C.U.Shah College, 5, Navyug Colony, Ashram Road, <b>AHMEDABAD – 380 014</b> . Tel. 079-27546840 Fax:079-27546142 E-mail: ins.omb@rediffmail.com	Gujarat , UT of Dadra & Nagar Haveli, Daman and Diu
<b>BHOPAL</b>	Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor, Malviya Nagar, <b>BHOPAL</b> Tel. 0755-2569201/02 Fax:0755-2769203 E-mail: bimalokpalbhopal@airtelmail.in	Madhya Pradesh & Chhattisgarh
<b>BHUBANESHWAR</b>	Office of the Insurance Ombudsman, 62, Forest Park, <b>BHUBANESHWAR – 751 009</b> Tel. 0674-2596455 Fax - 0674-2596429 E-mail: ioobbsr@dataone.in	Orissa
<b>CHANDIGARH</b>	Office of the Insurance Ombudsman, S.C.O. No.101, 102 & 103, 2nd Floor, Batra Building, Sector 17-D, <b>CHANDIGARH – 160 017</b> Tel.: 0172-2706468 Fax: 0172-2708274 E-mail: ombchd@yahoo.co.in	Punjab , Haryana, Himachal Pradesh, Jammu & Kashmir, UT of Chandigarh
<b>CHENNAI</b>	Office of the Insurance Ombudsman, Fatima Akhtar Court , 4th Floor, 453 (old 312) Anna Salai, Teynampet, <b>CHENNAI – 600 018</b> Tel. 044-24333668/5284 Fax: 044-24333664 Email:chennaiinsuranceombudsman@g-mail.com	Tamil Nadu, UT–Pondicherry Town and Karaikal (which are part of UT of Pondicherry)
<b>NEW DELHI</b>	Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Bldg. Asaf Ali Road, <b>NEW DELHI – 110 002</b> Tel. 011-23239633 Fax: 011-23230858 E-mail: iobdelraj@rediffmail.com	Delhi & Rajasthan
<b>GUWAHATI</b>	Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar Overbridge , S.S. Road, <b>GUWAHATI – 781 001</b> Tel. : 0361-2132204/5 Fax: 0361-2732937 E-mail: ombudsmanghy@rediffmail.com	Assam , Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura
<b>HYDERABAD</b>	Office of the Insurance Ombudsman, 6-2-46 , 1 st floor, Moin Court Lane, Opp. Saleem Function Palace, A.C.Guards, Lakdi-Ka-Pool, <b>HYDERABAD – 500 004</b> Tel. 040-65504123 Fax: 040-23376599 E-mail: insombudhyd@gmail.com	Andhra Pradesh, Karnataka and UT of Yanam – a part of the UT of Pondicherry
<b>KOCHI</b>	Office of the Insurance Ombudsman, 2nd Floor, CC 27/2603, Pulinat Building, Opp. Cochin Shipyard, M.G. Road, <b>ERNAKULAM – 682 015</b> Tel: 0484-2358759 Fax: 0484-2359336 E-mail: iokochi@asianetindia.com	Kerala , UT of (a) Lakshadweep , (b) Mahe – a part of UT of Pondicherry
<b>KOLKATA</b>	Office of the Insurance Ombudsman, 4th Floor, Hindusthan Bldg. Annexe, 4, C.R. Avenue, <b>KOLKATA -700 072</b> . Tel: 033 22124346/(40); Fax 033 22124341; Email: iombsbpa@bsnl.in	West Bengal, Bihar, Jharkhand and UT of Andaman & Nicobar Islands, Sikkim
<b>LUCKNOW</b>	Office of the Insurance Ombudsman, Jeevan Bhawan, Phase 2, 6th Floor, Nawal Kishore Road. Hazratganj, <b>LUCKNOW – 226 001</b> Tel.: 0522-2231331 Fax: 0522-2231310 E-mail: insombudsman@rediffmail.com	Uttar Pradesh and Uttaranchal
<b>MUMBAI</b>	Office of the Insurance Ombudsman, Jeevan Seva Annexe, 3rd Floor, S.V.Road, Santacruz (W), <b>MUMBAI – 400 054</b> Tel: 022-26106928; Fax: 022-26106052; E-mail: ombudsmanmumbai@gmail.com	Maharashtra , Goa

**Annexure B: Mortality Rates**

The Mortality Rates for Rs.1000 Sum Assured per annum are as follows:

Age last birthday	Mortality Rate	Age last birthday	Mortality Rate
7	0.48	45	3.93
8	0.48	46	4.35
9	0.47	47	4.84
10	0.50	48	5.38
11	0.59	49	5.98
12	0.71	50	6.64
13	0.82	51	7.36
14	0.89	52	8.14
15	0.96	53	8.97
16	1.02	54	9.87
17	1.08	55	10.83
18	1.13	56	11.84
19	1.18	57	12.79
20	1.22	58	13.79
21	1.26	59	15.01
22	1.29	60	16.48
23	1.32	61	18.18
24	1.35	62	20.11
25	1.37	63	22.28
26	1.38	64	24.68
27	1.40	65	26.60
28	1.40	66	29.00
29	1.40	67	32.66
30	1.40	68	36.72
31	1.42	69	41.20
32	1.47	70	46.15
33	1.53	71	51.61
34	1.62	72	57.62
35	1.72	73	64.23
36	1.85	74	71.48
37	1.99	75	79.43
38	2.15		
39	2.35		
40	2.58		
41	2.80		
42	3.01		
43	3.26		
44	3.57		

1. Monthly rates are 1/12th of the annual rates and there is no frequency loading
2. Mortality Rates will be different for sub standard lives.