

Sl No	Title	Description	Policy Clause Number
1	Name of Insurance Product/Policy	Bajaj Allianz Life Group New Terminal Illness Rider	Policy Schedule
2	Policy Number	<XXXXXXXX>	As per Base Policy
3	Type of Insurance Product/ Policy	Benefit	As per Base Policy
4	Sum Assured (Basis) (Along with amount)	<XXXXXXXX>	As per Base Policy
5	Policy Coverage (What the policy covers)	<p>On the occurrence of Terminal Illness on the life of the Member during the term of the base Policy, the Terminal Illness Rider Sum Assured will be payable.</p> <p>If the Terminal Illness Sum Assured is equal to Sum assured under the base Policy, then, the risk-cover for the Member, under the base Policy, including this Rider and any other Rider, will terminate after the Terminal Illness benefit is paid.</p> <p>If the Terminal Illness Sum Assured is less than the Sum Assured under the base Policy, then, the Rider cover will terminate but the other risk covers for the Member will continue</p>	Policy Wording-Section 3- Rider Benefit
6	Exclusions	None	Policy Wording Section 10 - Exclusions
7	Waiting Period	Not Applicable	Not Applicable
8	Financial limits of coverage i) Sub-limit ii) Co-payment iii) Deductible iv) Any other limit (as applicable)	Not Applicable	Not Applicable
9	Claims/Claims Procedure	For claims, member will have to submit the necessary documents to Company within the prescribed time limit	Policy Wording Section 12- Payment of Claim
10	Policy Servicing	In case you have any query or compliant/grievance, you may contact the Grievance Officer of	Policy Wording– Grievance

### Bajaj Allianz Life Insurance Company Limited

Regd. Office Address: Bajaj Allianz House, Airport Road, Yerawada, Pune – 411006 | Tel (+91 20)66026789 | Toll Free No. 1800 209 7272 | Email: [customercare@bajajallianz.co.in](mailto:customercare@bajajallianz.co.in) | Website: [www.bajajallianz.life.com](http://www.bajajallianz.life.com) | IRDAI Reg. No.: 116| BALIC CIN: U66010PN2001PLC015959

		<p>any nearest Customer Care Center at Branch Office of the Company during the Company's office hours from 9 am to 6 pm. Alternatively, you may communicate with the Company:</p> <p>By post at: Customer Care Desk, Bajaj Allianz Life Insurance Company Ltd., Bajaj Allianz House, Airport Road, Yerawada, Pune - 411006</p> <p>By Phone at: Toll Free No. 1800 209 7272  </p> <p>By Email: <a href="mailto:Customercare@bajajallianz.co.in">Customercare@bajajallianz.co.in</a></p>	Redressal is as per the base policy
11	Grievances/Complaints	<p>In case you are not satisfied with the resolution provided to you by the above office, or have not received any response within 10 days, or you have any suggestion in respect of this Policy or on the functioning of the office, you may contact the following official for resolution:</p> <p>Grievance Redressal Officer, Bajaj Allianz Life Insurance Company Ltd. Bajaj Allianz House, 5th floor, Airport Road Yerawada, Pune, District – Pune, Maharashtra -411006</p> <p>Tel. No: 1800- 209- 7272   Email ID: <a href="mailto:gro@bajajallianz.co.in">gro@bajajallianz.co.in</a></p> <p>If Policyholder is not satisfied with the response or does not receive a response from the Company within fifteen (15) days, he may approach the IRDAI Grievance Cell Centre (IGCC) on the following contact details:</p> <p>By Phone: TOLL FREE NO: 155255 By Email: <a href="mailto:complaints@irdai.gov.in">complaints@irdai.gov.in</a> By post at: Consumer Affairs Department Insurance Regulatory and Development Authority of India</p>	Policy Wording– Grievance Redressal is as per the base policy

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		Sy. No. 115/1, Financial District, Nanakramguda, Gachibowli, Hyderabad – 500 032. The Policyholder can also register his complaint online at <a href="http://www.igms.irdai.gov.in/">http://www.igms.irdai.gov.in/</a>	
12	Things to remember (free look cancellation, policy renewal, migration and portability, change in sum insured)	Free Look period of 15 days from the date of receipt of the policy shall be applicable at the inception. All these options are available subject to detailed terms & conditions as mentioned in the policy document	Policy Wording Section 7- Free Look Option
13	Your obligations	Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may result in claim not being paid.  Disclosure of other material information during the policy period  Insurer to specify the material information	Policy Schedule
<p><b>Legal Disclaimer Note:</b> The information must be read in conjunction with the product brochure and policy document. In case of any conflict between the CIS and the policy document, the terms and conditions mentioned in the policy document shall prevail.</p>			

Declaration by the Policy Holder:

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

Place:

Date:

(Signature of the Policy)

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