## **CUSTOMER INFORMATION SHEET/KNOW YOUR POLICY**

This document provides key information about your policy. You are also advised to go through your policy document. We request you to kindly review the CIS and acknowledge the same through a link shared to you on your registered mobile number/Email ID/WhatsApp.

SI. no.	Title	Description in Simple Words (Please refer to applicable Policy Clause Number in next column)	Policy Clause Number
1.	Name of the Insurance Product and Unique Identification Number (UIN)	Bajaj Allianz Life Diabetic Term Plan II Sub 8 HbA1c (UIN - 116N183V01)	Policy Schedule
2	Policy Number	<xxxxxx></xxxxxx>	
3.	Type of Insurance Policy	Pure Risk	Policy Schedule
4.	Basic Policy detail	<ul> <li>Instalment Premium for Year 1 (₹) - <xxxxx></xxxxx></li> <li>Instalment Premium Year 2 onwards (₹) - <xxxx></xxxx></li> <li>Mode of premium payment - <xxxxx></xxxxx></li> <li>Sum Assured on Death (₹) - <xxxx></xxxx></li> <li>Sum Assured on Maturity (₹) - <not applicable=""></not></li> <li>Premium payment Term (years) - <xxxxx></xxxxx></li> <li>Policy Term (years) - <xxxxx></xxxxx></li> </ul>	Policy Schedule
5.	Policy Coverage / benefits payable	<ul> <li>Benefits payable on maturity – Not applicable</li> <li>Benefits payable on Death – Sum Assured on Death shall be payable.</li> <li>Survival Benefits excluding that payable on maturity – Not applicable</li> <li>Surrender Value – No Surrender Value shall be available in the Policy</li> <li>Options to policyholders for availing benefits, if any, covered under the policy – Not applicable</li> <li>Other benefits/options payable, specific to the policy, if any – Not applicable</li> <li>Lock-in period for Linked Insurance product – Not applicable</li> </ul>	Part C – Section 4  Part D – Section 9
6.	Options available (in case of Linked Insurance Products)	Not applicable	Not applicable
7.	Option available (in case of Annuity product)	Not applicable	Not applicable

		If no riders are opted << Not Applicable>>						
		If riders are opted <<						
8.	Riders opted, if	Rider Name	UIN	Sum Assured		Policy Schedule		
	any	<rider name=""></rider>	<xx></xx>	<xx></xx>		Scriedule		
		For details on the rider, please refer the customer information sheet of the respective rider. >>						
	Exclusions (events where insurance coverage is not payable), if any.	Suicide Exclusion						
		In case of death of the Life Assured due to suicide, within twelve (12) months from the Date of Commencement of Risk						
		or the date of latest revival of the Policy, whichever is later,						
9.		then the Claimant shall be entitled to receive 80% of the Total				Part F –		
		Premiums Paid as on the date of death of the Life Assured,				Section 11		
		provided the Policy is in force						
		There are no other exclusions	s with respect	to Death Benef	it			
10	Waiting /lien	under the Policy.						
10.	Period, if any	Not applicable				Not applicable		
11.	Grace period	Thirty (30) days for premium payment frequencies other than monthly and fifteen (15) days for monthly frequency.				Part B – Section 1		
40	Free Look	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			Part D –			
12.	Period	Thirty (30) days				Section 5		
	Lapse, paid-up and revival of the Policy	Non-Payment of Premiums (Lapse and Paid-up):				Part D – Section 6		
		If premiums have not been paid before the expiry of the grace period, the policy will lapse and no benefit will be paid.				Section o		
13		period, the policy will lapse and no benefit will be paid.						
		Revival Period - Five (5) years from the due date of the first			rst	Part B –		
		unpaid premium				Section 1		
14.	Policy Loan, if applicable	Not applicable			Not applicable			
	Claims / Claims Procedure	Turn Around Time (TAT) fo procedure:	r claims settle	ement and brie	ef			
		Link for Brief Procedu						
		https://www.bajajallian assistance.html						
		• Link for Turn Around						
		https://www.bajajallianzlife.com/content/dam/balic/pdf/customer-services/services-tat.pdf						
15						Part F –		
15.		Helpline/Call Centre Numbers: Toll free no (24*7): 1800 2201 02				Section 22		
		Sr. Citizens Toll free no.: 1800 2269 70						
		Customer Care No: (022) 40 Board No.: (022) 66867575	881000					
		,	rar Bajai Allia	oz Lifo Incuranco				
		Contact details of the insurer: Bajaj Allianz Life Insurance Company Limited House, Ground Floor, Bajaj Allianz, Airport						
		Rd, Yerawada, Pune, Mahar						

		Link for downloading claim form and list of documents required including bank account details: <a href="https://www.bajajallianzlife.com/life-insurance-claim-assistance.html">https://www.bajajallianzlife.com/life-insurance-claim-assistance.html</a> WhatsApp- 8806727272  Turn Around Time (TAT): <a href="https://www.bajajallianzlife.com/content/dam/balic/pdf/cu">https://www.bajajallianzlife.com/content/dam/balic/pdf/cu</a>	
16.	Policy Servicing	<ul> <li>Stomer-services/services-tat.pdf</li> <li>Helpline/Call Centre number: 1800 209 7272</li> <li>Contact details of the insurer: In case you have any query, you may communicate with the Company:</li> <li>1. By post at: Customer Care Desk, Bajaj Allianz Life Insurance Company Ltd., Bajaj Allianz House, 5<sup>th</sup> floor, Airport Road, Yerawada, Pune – 411006</li> <li>2. By Email: customercare@bajajallianz.co.in</li> </ul>	Part G – Section 26
		3. Link for downloading applicable forms and list of documents required including bank account details: <a href="https://bajajallianzlifeonline.co.in/online/portal/logon/servic_eRequest.do?user_name=WEBSITE&amp;p_flag=0">https://bajajallianzlifeonline.co.in/online/portal/logon/servic_eRequest.do?user_name=WEBSITE&amp;p_flag=0</a>	
17.	Grievances /Complaints	Contact details of Grievance Redressal Officer of the insurer: Grievance Redressal Officer of the insurer - In case you do not receive a response within 15 days or if you are not satisfied with the resolution, you may approach Grievance Redressal Officer at gro@bajajallianz.co.in  Link for registering the grievance with the insurer's portal: Insurance company grievance portal - https://webpartner.bajajallianz.com/GrvOnlineApi/indexOnlineGrv.jsp#_ga=2.7272630.541013491.1717475077-1601763320.1694668355&_gac=1.52751388.1715749803.EAlalQobChMly_eqivKOhgMVdWsPAh0NFQrEEAAYASAAEgJObPD_BwE	Part G – Section 26 & 27
		Contact details of Ombudsman: Find your nearest Ombudsman office at <a href="http://www.cioins.co.in/ombudsman">http://www.cioins.co.in/ombudsman</a>	

## **Declaration by the Policyholder**

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

Place: (Signature of the Policyholder)

Date:

Web-link for the product where sample policy document can be downloaded: https://www.bajajallianzlife.com/term-insurance-plans/diabetic-term-insurance-plan.html

Disclaimer: In case of conflict in the content mentioned hereinabove, the terms and conditions mentioned in the policy document shall prevail.