HDFC Standard Life Insurance Company Limited

Corporate Office: 2nd Floor, 'A' Wing, Trade Star Building, Near Hotel Kohinoor Continental, Andheri-Kurla Road, Andheri (E), Mumbai – 400 059. Sar Utha Ke Jiyo

Regd. Office: Ramon House, H.T. Parekh Marg, 169, Backbay Reclamation, Churchgate, Mumbai - 400 020.

Policy No. R.

HDFC GRAMIN BIMA KALYAN YOJANA (UIN: to be given by iRDA)

Premium Receipt

HDFC Standard Life hereby acknowledges the receipt of a premium of Rs. < Premium>.

Policy Schedule and Provisions

Name of the Life Assured (Policy holder): _

Age at Entry_____ Age Admitted Yes/No

Date of Commencement __/__/ (dd/mm/yyyy) Date of Maturity __/__/ (dd/mm/yyyy) Premium: The premium of Rs. < *Premium* >, due on the date of commencement, has been received. There are no further premium/s due. This policy does not participate in profits.

Benefits on Maturity: On survival of the life assured to maturity of the plan which is 3 years after the inception date, we will pay Rs. *<Maturity Value>*.

Benefits in Death or Surrender:

On termination of your plan before maturity we will pay (in Rs.):

During Year	1	2	3
On Death	5000	5000	5000
On Surrender	<surrender value=""></surrender>	< Surrender Value >	< Surrender Value >

Surrender: If you wish to surrender this policy, a written request should be sent to the Branch address given below, enclosing this Policy document.

Death claims: All death claims should be made in writing to the Branch address given below, enclosing this Policy document and a death certificate issued by a competent authority.

Exclusions: No benefit will be paid if the death of the life assured is caused directly or indirectly by suicide within one year from the date of being covered under the policy.

Loans: We will not grant a loan against this policy.

Assignments: This policy cannot be assigned.

Nominations: Any notice of change in nomination must be notified in writing to the Branch address given below.

Signed at ____

on this_____ day of _____ 20 / _____

For HDFC Standard Life Insurance Company Limited

FC/SDM/BDM/ASM's Signature _____ FC/SDM/BDM/ASM's Name & Code _____

Authorized Signatory

This Signature and code is essential for the Policy to be valid and in force. This policy document has been printed in both English as well as Vernacular medium. However, the provisions as per the English version of this policy document will be overriding document above all others.

Taxation Benefits will be as per the laws prevailing from time to time.

Some benefits are guaranteed and some benefits are variable with returns based on the future performance of your life insurance company. If your policy offers guaranteed returns then these will be clearly marked "guaranteed" in the illustration table on this page.

If your policy offers variable returns then the illustration on this page will show two different rates of assumed investment returns. These assumed rates of return are not guaranteed and they are not upper or lower limits of what you might get back as the value of your policy is dependent on a number of factors including future investment performance.

All benefits provided by HDFC GRAMIN BIMA KALYAN YOJANA are guaranteed.

Address for all correspondence and queries



Grievance Procedure

To ensure effective redressal of Policyholder's grievances, the company has put in place a mechanism administered by the Grievance Redressal Officer who can be reached through the Branch Office, address of which is mentioned on the reverse of this Policy. Kindly note that in case you are not satisfied with the response from the Company, you can also approach the Insurance Ombudsman located in your region. (Insurance Ombudsman is currently located in the following 13 cities: Ahmedabad, Bhopal, Bhubaneshwar, Chandigarh, Chennai, New Delhi, Guwahati, Hyderabad, Ernakulam, Kochi, Kolkata, Lucknow and Mumbai). Detailed addresses and areas of jurisdiction of the Insurance Ombudsman are available on our website <u>www.hdfcinsurance.com</u> and can also be made available to the Policyholder on request.

Option to Withdraw

Please note that in case you are not satisfied with any provision under the policy, you have the option of returning the Policy to us stating your reasons therefore, within 15 days from the date of receipt of the Policy. On receipt of your letter along with the original Policy documents we shall arrange to refund the premium paid by you, subject to deduction of the proportionate risk premium for the period on cover and stamp duty charges. A policy once withdrawn shall not be revived, reinstated or restored at any point of time and a new proposal will have to be made for a new policy.

Maturity/Surrender/Death Claim Receipt

I, Polic	yholder/Noi	minee/1	Legal Repre	sentative of	the Life	Assur	ed do	hereby	acknowledge	receipt from
HDFC	Standard	Life	Insurance	Company	Limited	the	sum	of Rs		(Rupees
				only) in	n full and	final sa	atisfac	tion and	discharge of	all my claims
and dem	nands under	the po	olicy number	•	bein	ig matu	ired/su	irrendere	d/the claim ha	aving risen on
death of	the life As	sured _		and	which pol	icy is h	iereby	delivere	d to the said c	ompany to be
cancelle	d.									
Signatur	e/ thumb in	npressi	on of Claima	ant:		\leq				
Name in	Block Lett	ers:								
Address	:									
Place: _							Date:			

This declaration must be witnessed by an Advocate/Bank Manager/Block Development Officer/ Commissioner of Oaths/Notary/Doctor/Gazette Officer/Head Master of a High School/ Head Post Master or Departmental Sub-Post Master/Magistrate or President of a Village or Local Body.

Signature of Witness:			
Date:	_		
Name in Block Letters:		Designation:	
Address:			
Telephone number:			

If the Claimant signs in vernacular or affixes a thumb impression, the witness should also sign the following.

I certify that the contents of this form were explained to the Claimant in, _____ (language) and he/she has affixed his/her thumb impression after fully understanding the same.

Signature of Witness: