Regulated by IRDAI | Registration Number 111

Form (C	COI No: < XXXXX>)
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CUSTOMER INFORMATION SHEET / KNOW YOUR POLICY

This document provides key information about Your Certificate of Insurance. You are also advised to go through Your Certificate of Insurance.

Sl. No.	Title Description in Simple Words (Please refer to applicable Certificate of Insurance Clause Number in next column)				
1.	Name of the Insurance Product and Unique Identification Number (UIN)	SBI Life – Group Micro Shield – SP (UIN: 111N137V02)	COI Schedule		
2.	COI Number	<< as allotted by system >>	COI Schedule		
3.	Type of Insurance Policy	SBI Life - Group Micro Shield - SP, is a Group, Non-Linked, Non-Participating, Pure Risk, Micro Life Insurance Product.			
4.	Policy details	 Instalment Premium: << as allotted by system (excluding taxes)>> Mode of Premium payment: << Single Premium >> Sum Assured: << as allotted by system >> Sum Assured on Maturity: Nil Policy Term << 1 month to 120 months >> Premium Payment Term: NA 	COI Schedule		
5.	Policy Coverage/benefits payable	 Death Benefit 1.1. In the unfortunate event of death of the Insured Member or first death of any one of the Insured Members under a Joint Life cover, during the Cover Term, the Death Benefit will get paid out in lump sum and the cover of that Insured Member will cease. 1.2. The Death Benefit payable under the Master Policy: Level Cover: Sum Assured on Death equal to Sum Assured will be paid out and cover of the Insured Member will cease. Reducing Cover (only in case of non-employer employee group with lender-borrower relationship): Sum Assured on Death equal to the Sum Assured, reducing from the beginning of the 2nd policy month at Loan Interest Rate at the beginning of every policy month, as per the Loan Cover Schedule as specified in the Certificate of Insurance will be paid out and cover of the Insured Member will cease. In case of simultaneous death of both Insured Members in a Joint life cover, only one Death Benefit will be payable and the cover of both the Insured Members under the Policy will terminate. In case of Joint Life, post payout of Death Benefit 	Clause 15		

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		(on the first death) the cover for surviving Insured Member will terminate and no benefits are payable thereafter.	
		 1.3. The maximum benefit payable by the Company under all group micro insurance schemes, through a single application or multiple applications of same Insured Member shall not exceed Rs. 2,00,000 under any circumstance. In the event of there being more than one claim in respect of the same life Insured, claims will be processed in the chronological order of receipt by the Company and claims only up to the aforementioned limit of Rs. 2,00,000 [Rupees Two Lakhs only] will be payable. All other claims will be declined and Premiums paid subject only to a deduction of the expenses incurred by the insurer on medical examination of the Insured Member (if any) and stamp duty charges, without any interest to the Nominee/ beneficiary or legal heir. 1.4. In case the Insured Member dies after the submission of request for Surrender Value or dies after submission of request for cancellation of cover during Free Look Period, but before refund of Premium, the Claimant would be eligible for Death Benefit. The cover under the Policy for that Insured Member shall automatically stand cancelled on the date of death of the Insured Member. 2. Maturity Benefit 	
		We will not pay any benefit on the Cover End Date.3. Surrender Benefits: The Policy can be Surrendered any time during the Policy Term and We will pay Surrender Value in accordance with Clause 16(III) of the Certificate of Insurance.	
		4. Options to Insured Members for availing benefits, if any, covered under the Certificate of Insurance: The Master Policy provides for Level Cover and Reducing Cover. Reducing Cover is only applicable where the Master Policy is issued to non-employer employee group with lender-borrower relationship.	
6.	Exclusions (events where insurance coverage is not payable), if any.	 Suicide claim provision In case of death of the Insured Member due to suicide, within 12 months from the Cover Start Date, We will not pay the Death Benefit and the Claimant shall be entitled to 80% of the total Premium paid till the date of death in respect of the Insured Member, or the Surrender Value ,if any as on the date of death whichever is higher, provided the Insured Member's cover under the Certificate of Insurance is In-Force. The total Premium paid is total of the Premium paid for that Insured Member, excluding any extra Premium and taxes, if collected explicitly. 	Clause 16

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7.	Grace Period	Not applicable under this Certificate of Insurance.	Clause 19
8.	Free Look Period	In case, Insured Member does not agree with any terms and conditions of the Master Policy/Certificate of Insurance or otherwise, Insured Member has the option to cancel the Certificate of Insurance by sending a written request to the Company stating the reasons for objection within the Free Look Period of 30 days from the receipt of the Certificate of Insurance whether received electronically or otherwise. Upon Insured Member's request and if no claim(s) has been made under the Certificate of Insurance, We shall refund the Premium paid for the Certificate of Insurance subject only to deduction of the proportionate risk Premium for the period of the cover, stamp duty charges and medical expenses (if any), irrespective of the reasons mentioned. Insured Members' request for cancellation of this Certificate of Insurance must reach Your nearest SBI Life Office within a period of 30 days from the date of receipt of the Certificate of Insurance.	COI Schedule
9.	Lapse, Paid-Up and Revival of the Master Policy	Lapse Not applicable under this Certificate of Insurance/Master Policy. Paid-Up: Not applicable under this Certificate of Insurance/Master Policy. Revival: Not applicable under this Certificate of Insurance/Master Policy.	Clause 15 Clause 15 Clause 18
10.	Policy Loan, if any	No policy loan is available under this Certificate of Insurance.	Clause 24
11.	Claims/Claims Procedure	 Turn Around Time (TAT) for claims settlement and brief procedure: https://www.sbilife.co.in/en/services->Download 'Turn Around Times' pdf Toll free no.: 1800 267 9090 (Customer Service Timing:24X7). Our Contact Details: SBI Life Insurance Company Limited Central Processing Centre 7th Level (D Wing) & 8th Level, Seawoods Grand Central, Tower 2, Plot No R-1, Sector - 40, Seawoods, Nerul Node, Navi Mumbai - 400706 Telephone No. 022-6645 6000 Email: claims@sbilife.co.in Link for downloading claim form and list of documents required including bank account details. https://www.sbilife.co.in/en/services/download-center/claim-forms List of documents required- Policy document/Certificate of Insurance Valid death certificate from municipal / local authorities KYC documents of the Claimant Valid bank account proof of the Claimant 	Clause 29

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Form		(COI No: < XX)	(XX>)
		 Claimant's statement and claim forms in prescribed formats Hospital records including discharge summary, etc, wherever applicable Any other documents including post-mortem report, first information report where applicable Any other document which SBI Life may call, if found necessary in support of the claim 	
12	Policy Servicing	 Turn Around Time (TAT): https://www.sbilife.co.in/en/services->Download 'Turn Around Times' pdf Our Contact Details Toll free no.: 1800 267 9090 (Customer Service Timing:24X7). For any information/ clarification, please contact: Your local SBI Life service branch: <<sbi address="" branch="" life="">> Link for downloading applicable forms and list of documents required including bank account details.</sbi> Various forms are available on SBI Life Website: https://www.sbilife.co.in/en/services/download-center/policy-servicing-forms 	Clause 28
13	Grievances /Complaints	 Contact details of Grievance Redressal Officer: SBI Life Insurance Company Limited Central Processing Centre 7th Level (D Wing) & 8th Level, Seawoods Grand Central, Tower 2, Plot No R-1, Sector - 40, Seawoods, Nerul Node, Navi Mumbai - 400706 Telephone No. 022-6645 6100 Email - hcr@sbilife.co.in Link for registering the grievance with Our portal:	Clause 26

Declaration by the Insured Member

I have receiv	ed the above	and I have r	ead and confin	rm having no	ted the details.
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Place:
Date:

(Signature of the Insured Member)

Note:

- i. Product related documents including the Customer Information Sheet are available on Our website: www.sbilife.co.in
- ii. In case of any conflict, the terms and conditions mentioned in the Master Policy shall. prevail

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