

SBI Life Insurance Company Limited

SBI Life – Group Rider – Accidental Total Permanent Disability (UIN:111B009V02)

This document lists the benefits, conditions and exclusions applicable to the rider that can be attached to the product SBI Life – Sampoon Suraksha (UIN: 111N040V04). Please read the same in conjunction with the base product sales brochure.

SBI Life - Group Rider – Accidental Total Permanent Disability (UIN:111B009V02)

Eligibility Criteria

- Entry Age*: Minimum - 18 years; Maximum - 64 years.
- Maximum Maturity/ Cover Age*: Max 65 years.
*Age as on last birthday
- Rider term: 1 year
- Minimum Rider Sum Assured: Rs 1,000
- Maximum Rider Sum Assured:
 - For Employer-Employee groups - On a single life the Minimum of
 - Base policy Death Benefit Sum Assured and
 - Rs. 50,00,000
 - For Other groups - On a single life the Minimum of
 - Base policy Death Benefit Sum Assured and
 - Rs. 25,00,000
- Premium Payment Option: The premiums can be paid in annual, half-yearly, quarterly or monthly modes however, it would be same as policy premium payment option of the base policy. The premiums for various modes as percentage of annual premium are given below:

Premium Payment Mode	% of Annual Premium
Half Yearly	52.0 %
Quarterly	26.5 %
Monthly	8.9 %

Benefit

- Event: On the life assured being totally and permanently disabled due to accidental bodily injury as defined below. The Benefit is payable if the life insured is totally, permanently and irreversibly disabled without any interruption for at least 180 consecutive days due to accident and is payable in lump sum.
- Benefit Payable: SBI Life- Group Rider - Accidental Total Permanent Disability Sum Assured

Definition

- The insured member would be regarded as “Totally and Permanently Disabled” only if, as a result of accidental bodily injury, the member becomes incapacitated to earn an income from any work, occupation or profession for the rest of one’s life. Or, has suffered loss by physical separation (or total permanent loss of use) of both hands, and both feet, or both eyes, and a combination of any two.
- The above disability must have lasted, without interruption, for at least 180 consecutive days and must be deemed permanent by an appropriate medical practitioner appointed by the Company. An accident is a sudden, unforeseen and involuntary event, caused by outward, violent and visible means

Terms and Conditions

- i. The employee should be actively at work meaning that he is performing in the usual way, the regular duties of his work and is not working contrary to medical advice received. However, absentees from work for reasons other than sickness, injury, disability, medical / maternity leave will be considered 'actively at work'.
- ii. Employee should not have remained on medical leave / leave of absence on health grounds for a continuous period of 15 days or more in the last 6 months. This condition would apply for new schemes and schemes transferred from another insurance Company.
- iii. The above conditions (i) and (ii) are not applicable for renewal schemes and may be waived at the discretion of SBI Life for schemes transferred from other insurance company. Such a waiver will be based on risk assessment carried out at the time of renewal.
- iv. Temporary Absence: Cover may be extended to scheme members who are temporarily absent from their employment provided the member is on the company's payroll and the employment contract is not terminated by either party. It would be allowed where:
 - Period of temporary absence is limited to less than 180 days
 - Temporary absence cover should apply to all scheme members

Special Conditions

- This rider benefit is payable during the tenure of Policy to an active Member of the insured group in the event the Member becomes incapacitated to earn an income from any work, occupation or profession for the rest of one's life.
- Disability must be caused solely by external, violent, unforeseeable and visible means, occurring independently of any other causes and within ninety (90) days of such trauma, proved to the satisfaction of the insurer.
- The permanence of the disability will only be established 180 days following the date of the event causing the disability.
- Following a claim on this Rider, all covers affected on the life of Member will cease after the waiting period of 180 days is completed, as the person is no longer a Member of the group. No further increase in sum assured will be allowed in respect of such Member under any circumstances on any of the coverage.

Exclusions

Deaths due to the consequences of or occurring during the events as specified below are not covered

- Infection : Death or Disability caused or contributed to by any infection, except infection caused by an external visible wound accidentally sustained
- Drug Abuse: Member under the influence of Alcohol or solvent abuse or use of drugs except under the direction of a registered medical practitioner
- Self-inflicted Injury: Intentional self- Inflicted injury.
- Criminal acts: Member involvement in Criminal and/or unlawful acts.
- War and Civil Commotion: War, invasion, hostilities, (whether war is declared or not), civil war, rebellion, revolution or taking part in a riot or civil commotion.
- Nuclear Contamination: The radioactive, explosive or hazardous nature of nuclear fuel materials or property contaminated by nuclear fuel materials or accident arising from such nature.
- Aviation: Member participation in any flying activity, other than as a passenger in a commercially licensed aircraft.
- Hazardous sports and pastimes: Taking part or practicing for any hazardous hobby, pursuit or any race not previously declared and accepted by the Company.
- Physical Infirmary: Body or mental infirmity or any disease.

Revival

If premium is not paid within the grace period, the policy will lapse and can be revived within two years from the date of lapse of Master Policy. The rider cover can be revived in conjunction with the base cover only.

Prohibition of Rebates:

Section 41 of Insurance Act 1938 as amended from time to time:

- (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 liable for a penalty which may extend to ten lakh rupees.

Non-Disclosure:

Section 45 of Insurance Act, 1938 as amended from time to time states:

No policy of life insurance shall be called into question on any ground whatsoever after the expiry of three years from the date of policy. A policy of life insurance may be called into question at anytime within three years from the date of policy, on the ground of fraud or on the ground that any statement of or suppression of a fact material to the expectancy of the life of the insured was incorrectly made in the proposal or other document on the basis of which the policy was issued or revived or rider issued. The insurer shall have to communicate in writing to the insured or legal representatives or nominees or assignees of the insured, the grounds and materials on which such decision is based.

No insurer shall repudiate a life insurance policy on the ground of fraud if the insured can prove that the mis-statement or suppression of material fact was true to the best of his knowledge and belief or that there was no deliberate intention to suppress the fact or that such mis-statement or suppression are within the knowledge of the insurer. In case of fraud, the onus of disproving lies upon the beneficiaries, in case the policyholder is not alive.

In case of repudiation of the policy on the ground of misstatement or suppression of a material fact and not on the grounds of fraud, the premiums collected on the policy till the date of repudiation shall be paid.

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.

For complete details of the section and the definition of 'date of policy', please refer Section 45 of the Insurance Act, 1938.

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