

SBI Life Insurance Company Limited

Regulated by IRDAI | Registration Number 111

(COI No: < XXXXX>)

CUSTOMER INFORMATION SHEET / KNOW YOUR POLICY

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

Sl. No.	Title	Description in Simple Words <i>(Please refer to applicable COI Clause Number in next column)</i>	COI Clause Number
1.	Name of the Insurance Product and Unique Identification Number (UIN)	SBI Life – RiNn Raksha (UIN:111N078V03)	Schedule of Benefit
2.	COI Number	COI No. << as allotted by system >>	Schedule of Benefit
3.	Type of Insurance Policy	SBI Life – RiNn Raksha is a Group, Non-Linked, Non-Participating, Pure Risk, Credit Life Insurance Product	Schedule of Benefit
4.	Basic Policy Details	<ul style="list-style-type: none"> Master Policyholder Name: << as allotted by system >> Scheme Type: << Compulsory / Voluntary >> Loan Category: << HL/EL/PL/VL >> Loan Account No. << as allotted by system >> Membership Form No. << as allotted by system >> Type of Borrower: << Individual / Co-Borrower >> Plan Option Chosen: << as allotted by system >> Type of Plan: <<Single Premium/ Level Premium>> Installment Premium: << as allotted by system >> Mode of Premium Payment: << Single / Limited >> Initial Sum Assured: << as allotted by system >> Loan Interest Rate: << >>% Sum Assured on Maturity: Nil Premium Payment Term: << as allotted by system >> Policy Term: << as allotted by system >> Month Insurance Cover Start Date: << dd/mm/yyyy>> Insurance Cover End Date: <<dd/mm/yyyy>> 	Schedule of Benefit

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5.	Policy Coverage / Benefits Payable	<p><u>Death Benefit:</u> In case of death of Insured Member during the Policy Term and provided cover under the Master Policy is In-force, We will pay the Death Benefit equal to the Sum Assured as per the Option chosen or in case no Option is chosen, We will pay Sum Assured as per the amortization schedule mentioned in the Certificate of Insurance</p> <p><u>Surrender Benefits:</u> The Certificate of Insurance will acquire Surrender Value only after completion of one year from the Insurance Cover Start Date provided at least one full policy year premium has been paid.</p> <p><u>Maturity/Survival Benefit:</u> There is no maturity/Survival benefit under this plan.</p>	COI Schedule
6.	Exclusions (events where insurance coverage is not payable), if any.	<p><u>Suicide Exclusion:</u> In case of death of Insured Member due to suicide within 12 months from the Insurance Cover Start Date or from the Date of Revival of the cover under the Master Policy, as applicable, We will not pay the Death Benefit and the Claimant shall be entitled to 80% of total premiums paid (net of extra premium and applicable taxes) till date of death without interest or Surrender Value, available as on the date of suicide, whichever is higher.</p>	17
7.	Grace Period	means the time granted by Us from the due date of payment of premium, without any penalty or late fee, during which time the cover under the Master Policy is considered to be In-force with the risk cover without any interruption, as per the terms & conditions of the Master Policy. The Grace Period for payment of the premium shall be 15 days, where the Insured Member pays the premium on a monthly basis and 30 days in all other cases. This is not applicable in single Premium policies.	COI Schedule
8.	Free Look Period	<p>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.</p> <p>Upon Insured Member's request and if no claims has been made under the Certificate of Insurance, We shall refund the Premium paid by Insured Member 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.</p> <p>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.</p> <p>In case Co-borrowers are covered, the life cover for all the Insured Members will be terminated simultaneously on the cancellation during the Free Look Period.</p>	20

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9.	Lapse, Paid-Up and Revival of the Policy	<p><u>Lapse</u> Is the status of the Insured Member's insurance cover when a due premium is not paid by the Insured Member before the end of the Grace Period. This is not applicable in single Premium policies.</p> <p><u>Paid-Up:</u> Paid - Up Sum Assured is payable in case the Certificate of Insurance acquires Paid-up Status. Paid-up Status is acquired at any point of time after one complete year from the Insurance Cover Start Date, provided at least first year's premiums are paid in full and no further premiums are paid and is not applicable for Single Premium policies.</p> <p><u>Revival:</u> If Premiums are not paid within the Grace Period and the Certificate of Insurance is not Surrendered, the insurance cover under Master Policy may be revived with or without rider for full benefits within five consecutive complete years from the date of the first unpaid premium on payment of all overdue premiums with interest.</p>	18
10.	Policy Loan, if applicable	No policy loan is available under this plan.	29
11.	Claims/Claims Procedure	<ul style="list-style-type: none"> • 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). • Helpline for NRI Customers: +91-022 6928 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 <p>List of documents required:</p> <ul style="list-style-type: none"> • Policy document/Certificate of Insurance • Valid death certificate from municipal / local authorities • KYC documents of the Claimant • Valid bank account proof of the Claimant • Claimant's statement and claim forms in prescribed formats • Hospital records including discharge summary, etc, wherever applicable 	35

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		<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> 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). Helpline for NRI Customers: +91-022 6928 9090 (Customer Service Timing: 24X7) For any information/ clarification, please contact: Your local SBI Life service branch: <<SBI Life branch address>> Link for downloading applicable forms and list of documents required including bank account details. Various forms are available on SBI Life Website: https://www.sbilife.co.in/en/services/download-center/policy-servicing-forms 	32
13.	Grievances / Complaints	<ul style="list-style-type: none"> 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: https://www.sbilife.co.in/en/grievances Contact details of Ombudsman: https://cioins.co.in/ombudsman 	33

Declaration by the Insured Member

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

Place:

Date:

(Signature of the Insured Member)

Note:

- Product related documents including the Customer Information sheet are available on our website www.sbilife.co.in
- In case of any conflict, the terms and conditions mentioned in the COI shall prevail.

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