

SBI Life – Accident Benefit Rider (UIN: 111B041V01)
An Individual, Non-Linked, Health Insurance Pure Risk Rider

CUSTOMER INFORMATION SHEET / KNOW YOUR POLICY
SBI Life – Accident Benefit Rider

This document provides key information about your Rider. You are advised to go through your Rider Document.

Sr. No.	Title	Description (Please refer to applicable Policy Clause Number in next column)	Rider Clause Number
1	Name of the Insurance Rider/Policy	SBI Life – Accident Benefit Rider (UIN: 111B041V01)	Part A
2	Policy Number	_____	Part A of Base Policy
3	Type of Insurance/Rider	It is an Individual, Non-Linked, Health Insurance Pure Risk Rider	Part A
4	Rider Sum Assured	Individual Sum Assured: << Option A: Accidental Death Benefit (AD Benefit) Sum Assured:_____>> << Option B: Accidental Partial Permanent Disability Benefit (APPD Benefit) Sum Assured:_____>>	Part A of Base Policy
5	Rider Coverage (What the rider covers?)	<< Option A: Accidental Death Benefit (AD Benefit)>> << Option B: Accidental Partial Permanent Disability Benefit (APPD Benefit)>>	Part C (II)(1)(1.1 & 1.2)
6	Exclusions (What the Rider does not cover)	Exclusions for Accidental Death Benefit (AD Benefit): The AD Benefit shall not be paid in respect of deaths due to the consequences of or occurring during the events as specified below: <ul style="list-style-type: none"> • Infection: Death caused or contributed to by any infection, except infection caused by an external visible wound accidentally sustained. • Drug Abuse: The Life Assured 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 including the Injuries arising out of attempted suicide. • Criminal acts: The Life Assured's involvement in criminal and/or unlawful acts with criminal or unlawful intent. • War and Civil Commotion: War, invasion, hostilities, (whether war is declared or not), civil war, rebellion, revolution, act of foreign enemy, armed or unarmed truce, mutiny, rebellion, strikes or taking part in a riot or civil commotion. 	Part C (II)(14)

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	<ul style="list-style-type: none">• The Life Assured taking part in any naval, military or air force operation during peace time or during service in any police, paramilitary or any similar organization.• 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: Life Assured's participation in any flying activity, other than as a passenger in a commercially licensed aircraft.• Hazardous sports and pastimes: The Life Assured's engaging in or taking part in professional sport(s) or any hazardous pursuits, including but not limited to, diving or riding or any kind of race, underwater activities involving the use of breathing apparatus or not, martial arts, hunting, mountaineering, parachuting, or bungee-jumping. <p>Exclusions for Accidental Partial Permanent Disability Benefit (APPD Benefit): The APPD Benefit shall not be paid in respect of any disablement of the Life Assured occurring directly or indirectly as a result of (any of the following):</p> <ul style="list-style-type: none">• Self-inflicted Injury: Intentional self-inflicted Injury including the Injuries arising out of attempted suicide• Drug Abuse: The Life Assured under the influence of alcohol or solvent abuse or use of drugs except under the direction of a registered Medical Practitioner.• War and Civil Commotion: War, invasion, hostilities, (whether war is declared or not), civil war, rebellion, revolution, act of foreign enemy, armed or unarmed truce, mutiny, rebellion, strikes or taking part in a riot or civil commotion.•• The Life Assured taking part in any naval, military or air force operation during peace time or during service in any police, paramilitary or any similar organization• Aviation: Life Assured's participation in any flying activity, other than as a passenger in a commercially licensed aircraft.• Criminal acts: The Life Assured's involvement in criminal and/or unlawful acts with criminal or unlawful intent.• Any Injury incurred before the Date of Commencement of the Rider.• Hazardous sports and pastimes: The Life Assured engaging in or taking part in professional sport(s) or any hazardous pursuits, including but not limited to, diving or riding or any kind of race, underwater activities involving the use of breathing apparatus or not, martial arts, hunting, mountaineering, parachuting or bungee-jumping.	Part C (II)(15)
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		<ul style="list-style-type: none">Nuclear Contamination: the radio-active, explosive or hazardous nature of nuclear fuel materials or property contaminated by nuclear fuel materials or accident arising from such nature.																																							
7	Waiting period <ul style="list-style-type: none">Time period during which specified diseases/treatments are not covered.It is counted from the beginning of the policy coverage	No waiting period applicable for this Rider.																																							
8	Financial limits of coverage <ul style="list-style-type: none">i. Sub-limit (It is a pre-defined limit and the insurance company will not pay any amount in excess of this limit)ii. Co-payment (It is a specified amount /percentage of the admissible claim amount to be paid by policyholder/insured)iii. Deductible (It is a specified:<ul style="list-style-type: none">- up to which an insurance company will not pay any claim, and- which will be deducted from total claim	<p>For Accidental Death Benefit (AD Benefit), no sub-limit, co-payment or deductible applicable.</p> <p>For Accidental Partial Permanent Disability Benefit (APPD Benefit), no co-payment or deductible applicable. However, following sub-limits shall apply basis the Bodily Injury.</p> <table><tr><th>Bodily Injuries</th><th>% of Rider Sum Assured payable</th></tr><tr><td>Total and Permanent loss of:</td><td></td></tr><tr><td><ul style="list-style-type: none">Hearing in both ears</td><td>75%</td></tr><tr><td><ul style="list-style-type: none">Hearing in one ear</td><td>30%</td></tr><tr><td><ul style="list-style-type: none">Sight in one eye except perception of light</td><td>50%</td></tr><tr><td><ul style="list-style-type: none">Loss of one eye</td><td>50%</td></tr><tr><td><ul style="list-style-type: none">Loss of speech</td><td>50%</td></tr><tr><td>Total loss by physical severance:</td><td></td></tr><tr><td><ul style="list-style-type: none">Thumb and four fingers of one hand</td><td>50%</td></tr><tr><td><ul style="list-style-type: none">Four fingers of one hand</td><td>40%</td></tr><tr><td><ul style="list-style-type: none">Thumb (both phalanxes)</td><td>25%</td></tr><tr><td><ul style="list-style-type: none">Thumb (one phalanx)</td><td>10%</td></tr><tr><td><ul style="list-style-type: none">Index finger (three phalanxes)</td><td>15%</td></tr><tr><td><ul style="list-style-type: none">Index finger (two phalanxes)</td><td>8%</td></tr><tr><td><ul style="list-style-type: none">Index finger (one phalanx)</td><td>4%</td></tr><tr><td><ul style="list-style-type: none">Amputation of one hand at or above the wrist</td><td>50%</td></tr><tr><td><ul style="list-style-type: none">Amputation of one foot at or above the ankle</td><td>50%</td></tr><tr><td><ul style="list-style-type: none">Middle finger (three phalanxes)</td><td>10%</td></tr><tr><td><ul style="list-style-type: none">Middle finger (two phalanxes)</td><td>4%</td></tr></table>	Bodily Injuries	% of Rider Sum Assured payable	Total and Permanent loss of:		<ul style="list-style-type: none">Hearing in both ears	75%	<ul style="list-style-type: none">Hearing in one ear	30%	<ul style="list-style-type: none">Sight in one eye except perception of light	50%	<ul style="list-style-type: none">Loss of one eye	50%	<ul style="list-style-type: none">Loss of speech	50%	Total loss by physical severance:		<ul style="list-style-type: none">Thumb and four fingers of one hand	50%	<ul style="list-style-type: none">Four fingers of one hand	40%	<ul style="list-style-type: none">Thumb (both phalanxes)	25%	<ul style="list-style-type: none">Thumb (one phalanx)	10%	<ul style="list-style-type: none">Index finger (three phalanxes)	15%	<ul style="list-style-type: none">Index finger (two phalanxes)	8%	<ul style="list-style-type: none">Index finger (one phalanx)	4%	<ul style="list-style-type: none">Amputation of one hand at or above the wrist	50%	<ul style="list-style-type: none">Amputation of one foot at or above the ankle	50%	<ul style="list-style-type: none">Middle finger (three phalanxes)	10%	<ul style="list-style-type: none">Middle finger (two phalanxes)	4%	Part B (4)
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	amount (if claim amount is more than the specified amount) iv. Any other limit (as applicable)	<ul style="list-style-type: none"> • Middle finger (one phalanx) 2% • Ring finger (three phalanxes) 8% • Ring finger (two phalanxes) 4% • Ring finger (one phalanx) 2% • Little finger (three phalanxes) 6% • Little finger (two phalanxes) 3% • Little finger (one phalanx) 2% • All toes of one foot 17% • Great toe (two phalanxes) 5% • Great toe (one phalanx) 2% • Any one toe 3% 	
9	Claims / Claims Procedure	<ul style="list-style-type: none"> • It is a condition precedent to Our liability under this Rider that on the occurrence of an event giving rise to a claim under this Rider, the Claimant shall give Us a written notification of the claim at earliest possible time. This written notification shall specify at least the policy number, and provide details in relation to the cause and date of death/disability. • For details, please refer the Claims section of the Rider document. • Based on the information and documentation provided to Us in respect of the claim, We may call for any other documents or information, if found necessary by Us in support of the claim. 	Part C (III)
10	Policy Servicing	<p>Details of Our officials: Your local SBI Life service branch: <<SBI Life branch address>></p> <p>Our Helpline/Call Centre Number:</p> <ul style="list-style-type: none"> • Toll free customer service helpline 18002679090 (Customer Service Timings: 24x7) • Helpline for NRI Customers: +91-022 6928 9090 (Customer Service Timings: 24x7) <p>E-mail us at info@sbilife.co.in, or visit us at www.sbilife.co.in.</p>	Welcome Letter of Base Policy
11	Grievance/Complaints	<p>If You have any query, complaint or grievance, You may approach any of Our office.</p> <p>You can also call us on Our toll-free number: 1800 267 9090 and Helpline for NRI Customers: +91-022 6928 9090 (24 X 7) and these timings are subject to change)</p> <p>You can also send an email to Us on info@sbilife.co.in</p> <p>If You are not satisfied with Our decision or have not received any response within 15 business days, You may write to Us at: Head – Client Relationship,</p>	Part C (V)

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		<p>SBI Life Insurance Company Limited 7th Level (D Wing) & 8th Level, Seawoods Grand Central, Tower 2, Plot No. R-1, Sector 40, Seawoods, Nerul Node, Navi Mumbai - 400 706 Dist. Thane, Maharashtra Telephone No.: +91 - 22 – 6645 6785 E-mail Id: hcr@sbilife.co.in</p> <p>In case the complaint is not fully attended by Us within 15 days of lodging the complaint through our Grievance Redressal Mechanism; you may escalate the complaint to IRDAI through the Bima Bharosa Portal (IRDAI) website: https://bimabharosa.irdai.gov.in/ or contact IRDAI Grievance Call Centre on toll-free number : 155255 / 1800 4254 732</p> <p>Insurance Ombudsman address is available on the website of IRDAI, http://www.irdai.gov.in and in our website http://www.sbilife.co.in.</p>	
12	Things to remember	<p>Grace Period: As per the Base Policy</p> <p>Free Look Cancellation: 30 days</p> <p>Rider Renewal: Your rider's renewal premium shall be payable along with the renewal premium for base Policy.</p>	<p>Part C (II)(6)</p> <p>Part C(IV)(1)</p>
13	Your Obligations	<p>Please provide correct, complete and accurate information in the proposal form for this Rider and disclose fully all pre-existing disease/s or condition/s of the Life Assured before buying this Rider.</p> <p>Note: Non-disclosure or misrepresentation may affect the claim settlement.</p>	

Declaration by the Policyholder:

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

Place:

Date:

(Signature of the Policyholder)

Note:

- i. Product related documents including the customer information sheet are available on Our website www.sbilife.co.in

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- ii. In case of any conflict, the terms & conditions mentioned in the Base Policy Document/Rider Document shall prevail.

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