BAJAJ LIFE

LIFE GOALS. DONE.

Bajaj Life

New Waiver of Premium Rider

A Non-Linked, Non-Participating, Individual, Pure Risk Health Rider

Bajaj Life

New Waiver of Premium Rider

A Non-Linked, Non-Participating, Individual, Pure Risk Health Rider

About Bajaj Life Insurance (formerly known as Bajaj Allianz Life Insurance Company Limited)

Bajaj Life Insurance Limited one of India's leading private life insurers, is a subsidiary of Bajaj Finserv Limited. Built on the strong foundation of the Bajaj Group's legacy, it offers innovative life insurance solutions with a focus on enabling Life Goals for millions across the country.

Bajaj Life New Waiver of Premium Rider

Waiver of Premium Benefit is an essential component that strengthens the foundation of your insurance plan by preserving benefits when you're unable to pay premiums. This feature is beneficial as it provides financial security and peace of mind, ensuring that the policyholder and their family remain protected without the burden of ongoing premium payments during a difficult time. The WOP benefit acts as a safeguard against unforeseen circumstances, preventing policy lapse and securing long-term goals like children's education, retirement planning, or income replacement.

Introducing Bajaj Life New Waiver of Premium Rider, a non-linked, non-participating, individual pure risk health rider, that ensures the continuity of your coverage even in the face of financial hardship due to disability, critical illness or even death

Key Benefits

- **Comprehensive Protection:** against Death, Accidental Total Permanent Disability (ATPD) and Critical Illness (CI) as opted
- **Continued Policy Benefits:** The base policy remains active as if all premiums were paid—ensuring full maturity benefits, bonuses, and other coverages continue.
- **Tax Benefit** as per prevailing income tax laws.

How to avail the rider?

You will have the option to add the rider to your base policy at inception or any policy anniversary, subject to the Rider Policy Term, Rider Premium Paying Term being aligned to the base Policy Term, base Premium Paying Term, and subject to underwriting as per the prevailing Board Approved Underwriting Policy of the Company.

Let us understand the rider in detail

Rider Benefit: All the future premium under the base policy along with rider premiums, if any shall be waived off on earlier occurrence of either of events as defined in below rider options:

Option	WOP on earlier occurrence of	Applicability
Option - 1	ATPD or CI	LA and PH are same in base policy
Option - 2	Death or ATPD	LA and PH are different in base policy
Option - 3	Death or ATPD or CI	

- Life Assured under the Rider shall mean the Policyholder under the Base policy
- The Rider will also cover the underwriting extra premium, premium loading etc
- Waiver of premium on CI will be triggered on the first diagnosis or occurrence of any one of the 25 major critical illnesses (listed below) on the rider life assured during the rider term and subject survival period of 14 days from the date of confirmed diagnosis

Bajaj Life

New Waiver of Premium Rider

A Non-Linked, Non-Participating, Individual, Pure Risk Health Rider

Sr. No.	Name of major CI / Surgery	Sr. No.	Name of major CI / Surgery
1	Cancer of Specified Severity	14	Permanent Paralysis of Limbs
2	Myocardial Infarction (First Heart Attack - Of Specified Severity	15	Motor Neuron Disease with Permanent Symptoms
3	Open Chest CABG	16	Benign Brain Tumor
4	Open Heart Replacement or Repair of Heart Valves	17	Loss of Speech
5	Coma of Specified Severity	18	Loss of Limbs
6	Multiple Sclerosis with Persisting Symptoms	19	Major Head Trauma
7	Blindness	20	Primary (Idiopathic) Pulmonary Hypertension
8	Deafness	21	Third Degree Burns
9	End Stage Lung Failure	22	Parkinson's Disease
10	End Stage Liver Failure	23	Major Surgery of Aorta
11	Kidney Failure Requiring Regular Dialysis	24	Loss of Independent Existence (Cover up to Age 74)
12	Stroke Resulting in Permanent Symptoms	25	Fulminant Viral Hepatitis
13	Major Organ/Bone Marrow transplant		

Note:

- The waiver of premium benefit in case of Critical Illness shall be payable only on confirmation of the diagnosis by a registered Medical Practitioner appointed by the Company and is supported by acceptable clinical, radiological, histological and laboratory evidence.
- The company should be informed of the critical illness within 60 days of diagnosis of the Critical Illness. The claims filed beyond such a period will be considered if there is a valid reason for the delay.
- Rider premium will be collected additionally along with the base policy premium.
- GST and cess, if any, will be collected over and above the premium.

Eligibility Conditions

Parameter	Details
Minimum Entry Age	18 years
Maximum Entry Age	65 years
Maximum Age at Rider Maturity	80 years
Rider Premium Paying Term	As per base policy Available payment terms under this rider are – 1 to 30 years
Minimum Rider Term	1 Year
Maximum Rider Term	30 years, subject to that in base policy
Rider Sum Assured (Rs.)	The sum of all outstanding premiums of the policy The maximum is subject to the prevailing Board Approved Underwriting Policy of Company.
Premium payment frequency/ modal loading	As per base policy

All ages mentioned above are age as on last birthday.
The rider is available for sale through online mode also

Bajaj Life

New Waiver of Premium Rider

A Non-Linked, Non-Participating, Individual, Pure Risk Health Rider

Maturity Benefit

There is no maturity benefit available under this rider

Non Payment of Premium

If the premium for this rider is not paid before the end of the grace period, the rider cover lapses and no rider benefit or rider termination value will be payable.

Revival of the Plan

The rider cover can be revived within the revival period and subject to the conditions as allowed under the base policy. If the rider is not revived within the allowed revival period, the rider will be terminated immediately. The revival of the Rider Option may be on terms different from those applicable to the Rider Option before it lapsed, based on the prevailing Board approved underwriting policy of the Company.

Tax benefit

Tax benefit under the rider will be as per applicable tax laws as amended from time to time. You are requested to consult your tax consultant and obtain independent advice for eligibility and before claiming any benefit under the Rider Policy.

Termination

The Rider Benefit shall automatically terminate on the earlier occurrence of either of the following.

a) If premiums are discontinued for the rider option and/or under the base policy.
b) If the rider Life Assured opts out of this rider option.
c) On termination of the base Policy
d) On maturity of the base policy and/or rider.
e) On the occurrence of the contingent event.
f) On termination of the rider option or base policy by the insurer on grounds of misrepresentation, fraud or non-disclosure established in terms of section 45 of the Insurance Act, 1938, as amended from time to time.

Grace Period

The Grace Period will be as per the base policy.

Free Look Period

The Free look period will be as per the base policy.

Definitions

Critical Illness:

1. Major Surgery of Aorta

The actual undergoing of medically necessary major surgery for a disease of the aorta needing excision and surgical replacement of the diseased aorta with a graft. For the purpose of this definition aorta shall mean the thoracic and abdominal aorta but not its branches.
Traumatic injury of the aorta is excluded.
Surgery performed using only minimally invasive or intra-arterial techniques are excluded.

2. Fulminant Viral Hepatitis

A sub-massive to massive necrosis of the liver by the Hepatitis virus, leading precipitously to liver failure. This diagnosis must be supported by all of the following:

a. Rapid decreasing of liver size.
b. Necrosis involving entire lobules, leaving only a collapsed reticular framework.
c. Rapid deterioration of liver function tests.
d. Deepening jaundice; and
e. Hepatic encephalopathy.

Acute Hepatitis infection or carrier status alone does not meet the diagnostic criteria.

3. MYOCARDIAL INFARCTION (First Heart Attack of specific severity)

The first occurrence of heart attack or myocardial infarction, which means the death of a portion of the heart muscle as a result of inadequate blood supply to the relevant area.
The diagnosis for Myocardial Infarction should be evidenced by all of the following criteria:

- A history of typical clinical symptoms consistent with the diagnosis of acute myocardial infarction (For e.g., typical chest pain)
- New characteristic electrocardiogram changes
- Elevation of infarction specific enzymes, Troponins or other specific biochemical markers.

I. The following are excluded:
- Other acute Coronary Syndromes
- Any type of angina pectoris
- A rise in cardiac biomarkers or Troponin T or I in absence of overt ischemic heart disease OR following an intra-arterial cardiac procedure.

4. PRIMARY (IDIOPATHIC) PULMONARY HYPERTENSION

I. An unequivocal diagnosis of Primary (Idiopathic) Pulmonary Hypertension by a Cardiologist or specialist in respiratory medicine with evidence of right ventricular enlargement and the pulmonary artery pressure above 30 mm of Hg on Cardiac Cauterization. There must be permanent irreversible physical impairment to the degree of at least Class IV of the New York Heart Association Classification of cardiac impairment.
II. The NYHA Classification of Cardiac Impairment are as follows:
- Class III: Marked limitation of physical activity. Comfortable at rest, but less than ordinary activity causes symptoms.
- Class IV: Unable to engage in any physical activity without discomfort. Symptoms may be present even at rest.

III. Pulmonary hypertension associated with lung disease, chronic hypoventilation, pulmonary thromboembolic disease, drugs and toxins, diseases of the left side of the heart, congenital heart disease and any secondary cause are specifically excluded.

5. END STAGE LIVER FAILURE

Permanent and irreversible failure of liver function that has resulted in all three of the following:
- Permanent jaundice; and
- Ascites; and
- Hepatic encephalopathy.

Liver failure secondary to drug or alcohol abuse is excluded.

6. MULTIPLE SCLEROSIS WITH PERSISTING SYMPTOMS

I. The unequivocal diagnosis of Definite Multiple Sclerosis confirmed and evidenced by all of the following:
- Investigations including typical MRI findings which unequivocally confirm the diagnosis to be multiple sclerosis and
- There must be current clinical impairment of motor or sensory function, which must have persisted for a continuous period of at least 6 months.

II. Other causes of neurological damage such as SLE is excluded.

7. MOTOR NEURON DISEASE WITH PERMANENT SYMPTOMS

Motor neuron disease diagnosed by a specialist medical practitioner as spinal muscular atrophy, progressive bulbar palsy, amyotrophic lateral sclerosis or primary lateral sclerosis. There must be progressive degeneration of corticospinal tracts and anterior horn cells or bulbar efferent neurons. There must be current significant and permanent functional neurological impairment with objective evidence of motor dysfunction that has persisted for a continuous period of at least 3 months.

8. PERMANENT PARALYSIS OF LIMBS

Total and irreversible loss of use of two or more limbs as a result of injury or disease of the brain or spinal cord. A specialist medical practitioner must be of the opinion that the paralysis will be permanent with no hope of recovery and must be present for more than 3 months.

9. COMA OF SPECIFIED SEVERITY

I. A state of unconsciousness with no reaction or response to external stimuli or internal needs. This diagnosis must be supported by evidence of all of the following:
   • No response to external stimuli continuously for at least 96 hours;
   • Life support measures are necessary to sustain life; and
   • Permanent neurological deficit which must be assessed at least 30 days after the onset of the coma.

II. The condition has to be confirmed by a specialist medical practitioner. Coma resulting directly from alcohol or drug abuse is excluded.

10. PARKINSON'S DISEASE

The occurrence of Parkinson's Disease where there is an associated Neurological Deficit that results in permanent inability to perform independently at least three of the Activities of Daily Living#(defined below), for a continuous period of at least 3 months:
The following is excluded:
Parkinson's Disease accompanied with drug and/or alcohol abuse.

11. BENIGN BRAIN TUMOR

Benign brain tumor is defined as a life threatening, non-cancerous tumor in the brain, cranial nerves or meninges within the skull. The presence of the underlying tumor must be confirmed by imaging studies such as CT scan or MRI.

This brain tumor must result in at least one of the following and must be confirmed by the relevant medical specialist.
• Permanent Neurological deficit with persisting clinical symptoms for a continuous period of at least 90 consecutive days or
• Undergone surgical resection or radiation therapy to treat the brain tumor.

The following conditions are excluded:
• Cysts, Granulomas, malformations in the arteries or veins of the brain, hematomas, abscesses, pituitary tumors, tumors of skull bones and tumors of the spinal cord.

12. MAJOR HEAD TRAUMA

Accidental head injury resulting in permanent Neurological deficit to be assessed no sooner than 3 months from the date of the accident. This diagnosis must be supported by unequivocal findings on Magnetic Resonance Imaging, Computerized Tomography, or other reliable imaging techniques. The accident must be caused solely and directly by accidental, violent, external and visible means and independently of all other causes
The Accidental Head injury must result in an inability to perform at least three (3) of the following Activities of Daily Living#(defined below) either with or without the use of mechanical equipment, special devices or other aids and adaptations in use for disabled persons. For the purpose of this Benefit, the word "permanent" shall mean beyond the scope of recovery with current medical knowledge and technology.
The following are excluded:
• Spinal cord injury

13. KIDNEY FAILURE REQUIRING REGULAR DIALYSIS

End stage renal disease presenting as chronic irreversible failure of both kidneys to function, as a result of which either regular renal dialysis (haemodialysis or peritoneal dialysis) is instituted, or renal transplantation is carried out. Diagnosis has to be confirmed by a specialist medical practitioner.

14. BLINDNESS

Total, permanent and irreversible loss of all vision in both eyes as a result of illness or accident. The Blindness is evidenced by:

- Corrected visual acuity being 3/60 or less in both eyes or ;
- The field of vision being less than 10 degrees in both eyes.

The diagnosis of blindness must be confirmed and must not be correctable by aids or surgical procedure.

15. DEAFNESS

Total and irreversible loss of hearing in both ears as a result of illness or accident. This diagnosis must be supported by pure tone audiogram test and certified by an Ear, Nose and Throat (ENT) specialist. Total means "the loss of hearing to the extent that the loss is greater than 90 decibels across all frequencies of hearing" in both ears.

16. CANCER OF SPECIFIED SEVERITY

A malignant tumor characterized by the uncontrolled growth and spread of malignant cells with invasion and destruction of normal tissues. This diagnosis must be supported by histological evidence of malignancy. The term cancer includes leukemia, lymphoma and sarcoma.

The following are excluded –

- All tumors which are histologically described as carcinoma in situ, benign, pre-malignant, borderline malignant, low malignant potential, neoplasm of unknown behaviour, or non- invasive, including but not limited to: Carcinoma in situ of breasts, Cervical dysplasia CIN-1, CIN -2 and CIN-3.
- Any non-melanoma skin carcinoma unless there is evidence of metastases to lymph nodes or beyond;
- Malignant melanoma that has not caused invasion beyond the epidermis;
- All tumors of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least clinical TNM classification T2N0M0
- All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below;
- Chronic lymphocytic leukaemia less than RAI stage 3
- Non-invasive papillary cancer of the bladder histologically described as TaN0M0 or of a lesser classification,
- All Gastro-Intestinal Stromal Tumors histologically classified as T1N0M0 (TNM Classification) or below and with mitotic count of less than or equal to 5/50 HPFs;

17. THIRD DEGREE BURNS

There must be third-degree burns with scarring that cover at least 20% of the body's surface area. The diagnosis must confirm the total area involved using standardized, clinically accepted, body surface area charts covering 20% of the body surface area.

18. OPEN HEART REPLACEMENT OR REPAIR OF HEART VALVES

The actual undergoing of open-heart valve surgery is to replace or repair one or more heart valves, as a consequence of defects in, abnormalities of, or disease affected cardiac valve(s). The diagnosis of the valve abnormality must be supported by an echocardiography and the realization of surgery has to be confirmed by a specialist medical practitioner. Catheter based techniques including but not limited to, balloon valvotomy/valvuloplasty are excluded.

19. MAJOR ORGAN/BONE MARROW TRANSPLANT

The actual undergoing of a transplant of:

I. One of the following human organs: heart, lung, liver, kidney, pancreas, that resulted from irreversible end-stage failure of the relevant organ, or

II. Human bone marrow using haematopoietic stem cells.

The undergoing of a transplant has to be confirmed by a specialist medical practitioner.

The following are excluded:

I. Other stem-cell transplants.

II. Where only islets of langerhans are transplanted

20. OPEN CHEST CABG

The actual undergoing of heart surgery to correct blockage or narrowing in one or more coronary artery(s), by coronary artery bypass grafting done via a sternotomy (cutting through the breastbone) or minimally invasive keyhole coronary artery bypass procedures. The diagnosis must be supported by a coronary angiography and the realization of surgery has to be confirmed by a cardiologist.

The following are excluded:

Angioplasty and/or any other intra-arterial procedures

21. Loss of Limbs

The physical separation of two or more limbs, at or above the wrist or ankle level as a result of injury or disease. This will include medically necessary amputation necessitated by injury or disease. The separation has to be permanent without any chance of surgical correction. Loss of Limbs resulting directly or indirectly from self-inflicted injury, alcohol or drug abuse is excluded.

22. END STAGE LUNG FAILURE

End stage lung disease, causing chronic respiratory failure, as confirmed and evidenced by all of the following:

a. FEV1 test results consistently less than 1 litre measured on 3 occasions 3 months apart; and
b. Requiring continuous permanent supplementary oxygen therapy for hypoxemia; and
c. Arterial blood gas analysis with partial oxygen pressure of 55mmHg or less (PaO2 < 55mmHg); and
d. Dyspnoea at rest.

23. LOSS OF SPEECH

Total and irrecoverable loss of the ability to speak as a result of injury or disease to the vocal cords. The inability to speak must be established for a continuous period of 12 months. This diagnosis must be supported by medical evidence furnished by an Ear, Nose, throat (ENT) specialist.

24. STROKE Resulting in Permanent Symptoms

Any cerebrovascular incident producing permanent neurological sequelae. This includes infarction of brain tissue, thrombosis in an intracranial vessel, haemorrhage and embolisation from an extracranial source. Diagnosis has to be confirmed by a specialist medical practitioner and evidenced by typical clinical symptoms as well as typical findings in CT Scan or MRI of the brain. Evidence of permanent neurological deficit lasting for at least 3 months has to be produced.

The following are excluded:

a. Transient ischemic attacks (TIA)
b. Traumatic injury of the brain
c. Vascular disease affecting only the eye or optic nerve or vestibular functions.

25. Loss of Independent Existence (till age 74)

Confirmation by a Consultant Physician of the loss of independent existence due to illness or trauma, lasting for a minimum period of 6 months and resulting in a permanent inability to perform at least three of the Activities of Daily Living#(defined below), with no hope of recovery.

This condition must be confirmed by the company's approved doctor. Post age 74, this benefit cease to exist.

<u>Accidental Total Permanent Disability:</u>

Medical Practitioner:

- A medical practitioner is a person who holds a valid registration from the medical council of any state of India or Medical Council of India or Council for Indian Medicine and is thereby entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of his license. This would mean a practitioner treating the Life Insured must be holding a degree equivalent to MD or MS in the relevant field to certify the medical condition.
- The Medical practitioner should not be
  - the policyholder/insured person himself/herself;
  - or an authorised insurance intermediary (or related persons) involved with selling or servicing the insurance contract in question; or
  - employed by or under contractual engagement with the insurance company;
  - related to the policyholder/insured person by blood or marriage.
- 'Accident' shall mean a sudden, unforeseen and involuntary event caused by external, visible, and violent means.
- 'Accidental Total Permanent Disability' shall mean disability of the rider life insured as a result of bodily injury caused by an accident (a sudden unforeseen and involuntary event caused by external and visible means) and such injury shall within 180 days of its occurrence solely, directly and independently of any other cause, result in the rider life assureds disability which must be permanent and total and must result in at least one of the following:

  (a) Loss of both eyes; (b) Loss of both arms or both hands; (c) Loss of one arm and one leg; (d) Loss of one arm and one foot; (e) Loss of one hand and one foot; (f) Loss of one hand and one leg; (g) Loss of both legs; (h) Loss of both feet; (I) Removal of lower jaw

  - Loss of both eyes means total loss of vision in both eyes, certified by an ophthalmologist
  - If the disability is due to amputation/ dismemberment, loss of hand will mean amputation/ dismemberment above wrist, loss of arm will mean amputation/ dismemberment above elbow, loss of feet will mean amputation/ dismemberment above ankle and loss of leg will mean amputation/ dismemberment above knee
  - If the disability is not due to amputation/dismemberment, loss will mean loss of usage of both limbs and the limbs should have motor power grade 0/5, 1/5 or 2/5 only.

- The Accidental Permanent Total Disability has to be certified by a registered Medical Practitioner, appointed by the company. Claim intimation should be received in writing within 60 days of occurrence of the Accident, which is causing total disability of the rider life assured.
- The Disability Benefit is paid if and only if disability is detected as per above Disability Condition.

Exclusions

a) Suicide Clause

In all the Rider Options, in case of death of rider Life Assured due to suicide within 12 months from the date of commencement of risk under the rider or from the date of revival of the rider, as applicable, the nominee shall be entitled to 80% of the total rider premiums paid till the date of death or the termination value available as on the date of death whichever is higher, provided the rider is in force.

There are no other exclusions other than the suicide clause w.r.t. death.

b) Other Exclusions

i. The exclusions w.r.t. Critical Illness under the Rider are as below:

The critical illness benefit shall not be paid on any of the lives covered in case of the following conditions:

- If the diagnosis of such Critical Illness was made within 90 days of the start of coverage (i.e. during the waiting period).
- If the insured dies within the survival period as per definition from date of the diagnosis of the covered CI.
- Intentional self-inflicted injury, suicide or attempted suicide.
- For any medical conditions suffered by the life assured or any medical procedure undergone by the life assured, if that medical condition or that medical procedure was caused directly or indirectly by influence of drugs, alcohol, narcotics or psychotropic substances unless taken in accordance with the lawful directions and prescriptions of a registered medical practitioner.
- Engaging in or taking part in hazardous activities*, including but not limited to, diving or riding or any kind of race; martial arts; hunting; mountaineering; parachuting, bungee-jumping; under water activities involving the use of breathing apparatus or not.
- *Hazardous Activities mean any sport or pursuit or hobby, which is potentially dangerous to the Insured Member whether he is trained or not.
- Participation by the insured person in a criminal or unlawful act with criminal intent.
- For any medical condition or any medical procedure arising from 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.
- For any medical condition or any medical procedure arising either as a result of war, invasion, act of foreign enemy, hostilities (whether war be declared or not), armed or unarmed truce, civil war, mutiny, rebellion, revolution, insurrection, terrorism, military or usurped power, riot or civil commotion, strikes or participation in any naval, military or air force operation during peace time.
- For any medical condition or any medical procedure arising from participation by the insured person in any flying activity, except as a bona fide, fare paying passenger and aviation industry employee like pilot or cabin crew of a recognized airline on regular routes and on a scheduled timetable.
- Any External Congenital Anomaly which is not as a consequence of Genetic disorder.
- Failure to follow medical advice.

ii. The Accidental Permanent Total Disability will not be payable in the following situations:

- Disability as a result of the insured person committing any breach of law with criminal intent;
- Disability of insured person as a result of war, invasion, civil war, rebellion or riot;
- Disability as a consequence of the insured person being under the influence of alcohol or drugs other than drugs prescribed by and taken in accordance with the directions of a registered medical practitioner;
- Disability as a result of the insured person taking part in any naval, military or air force operation;
- Disability as a result of the insured person participating in or training for any dangerous or hazardous sport or competition or riding or driving in any form of race or competition;
- Disability of insured person as a result of aviation, gliding or any form of aerial flight other than as a fare paying passenger on a civilian airline plying on regular routes and according to a scheduled timetable;
- Disability of insured person as a result of attempted self-injury
- Disability of insured person as a result of poison, gas or fume (voluntary or involuntarily, accidentally or otherwise taken, administered, absorbed or inhaled).
- Failure to follow medical advice
- 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

Extra benefit/discounts available in the plan

For online sales and web aggregators, premium discount of 1% throughout the rider premium payment term.
For Staff members, premium discount of 3% throughout the rider premium payment term.

Grievance Redressal

Link for registering the grievance with the insurer's portal: Insurance company grievance portal - https://shorturl.at/HkC2M

In case you have any query or compliant/grievance, you may contact the Grievance Officer of any nearest Customer Care Centre at Branch Office of the Company during the Company's office hours (excluding public holidays) from Monday to Saturday : 9 am to 7 pm. Alternatively, you may communicate with the Company:

- By post at: Customer Care Desk,
- Bajaj Life Insurance Limited,
- Bajaj Insurance House, Airport Road, Yerawada, Pune - 411006
- By Phone at: Customer Care Number: 020-6712 1212
- By Email: customercare@bajajlife.com

In case the Policyholder are not satisfied with the resolution provided to him by the above office, or have not received any response within fourteen (14) days, or he has any suggestion in respect of this Policy or on the functioning of the office, he may contact the following official for resolution:
Grievance Redressal Officer,
Bajaj Life Insurance Limited
Bajaj Insurane House, Airport Road Yerawada, Pune, District – Pune, Maharashtra -411006
Customer Care Number: 020-6712 1212
Email ID: gro@bajajlife.com

If the Policyholder is not satisfied with the response or does not receive a response from the Company within fourteen (14) days, he may approach the IRDAI Grievance Call Centre (IGCC) on the following contact details:
By Phone: TOLL FREE NO: 155255, 1800-4254-732

- By Email: complaints@irdai.gov.in
- By post at: Policyholder's Protection & Grievance Redressal Department – Grievance Redressal Cell Insurance Regulatory and Development Authority of India
Sy. No. 115/1, Financial District, Nanakramguda, Gachibowli, Hyderabad – 500 032

The Policyholder can also register his complaint in the Bima Bharosa Shikayat Nivaran Kendra; https://bimabharosa.irdai.gov.in

In case the complaint is not resolved within 30 days or you are not satisfied with the decision/resolution of the Company, you may approach the Insurance Ombudsman. Contact details of Ombudsman: Find your nearest Ombudsman office at https://www.cioins.co.in/ombudsman

Statutory Information

Assignment: Section 38 of the Insurance Act, 1938

Assignment should be in accordance with provisions of sec 38 of the Insurance Act 1938 as amended from time to time.

Nomination: Section 39 of the Insurance Act, 1938

Nomination should be in accordance with provisions of sec 39 of the Insurance Act 1938 as amended from time to time.

Bajaj Life

New Waiver of Premium Rider

A Non-Linked, Non-Participating, Individual, Pure Risk Health Rider

Prohibition of Rebate: Section 41 of the Insurance Act, 1938, as amended from time to time

No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out 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.
Any person making default in complying with the provisions of this section shall be liable for a penalty that may extend up to ten lakh rupees.

Fraud & Misstatement: Section 45 of the Insurance Act, 1938

Fraud & Misstatement would be dealt with in accordance with provisions of Sec 45 of the Insurance Act 1938 as amended from time to time.

Applicability of Goods & Service Tax

Goods and Service Tax is charged based on type of Policy communication address of Policyholder. This may change subject to change in rate/state in address of the Policyholder as on date of adjustment.

Contact Details

Bajaj Life Insurance Limited, Bajaj Insurance House, Airport Road, Yerawada, Pune - 411 006.
IRDAI Reg No.: 116 | CIN: U66010PN2001PLC015959

For any queries please contact:

Sales: 022-6124 1800 | **Service: 020-6712 1212**

Mail us: customercare@bajajlife.com | **Visit us at: www.bajajlifeinsurance.com** | **UIN: 116B061V01**

Disclaimer:
This sales literature gives the salient features of the rider. The Policy document is the conclusive evident of contract and provides in details all the conditions & exclusions related to Bajaj Life New Waiver of Premium Rider.

For More Information: Kindly consult our "Insurance Consultant" or call us today on the Customer Care Numbers mentioned above. This brochure should be read in conjunction with the Benefit Illustration and Policy Documents. Please ask for the same along with the quotation.

The Logo of Bajaj Life Insurance Limited is provided on the basis of license given by Bajaj Finserv Limited to use its "Bajaj" Logo.

BEWARE OF SPURIOUS PHONE CALLS AND FICTITIOUS / FRAUDULENT OFFERS - IRDAI or its officials do not involve in activities like selling insurance policies, announcing bonus or investment of premiums. Public receiving such phone calls are requested to lodge a police complaint.

BJAZ-BR-EC-17269/25