

Bharti AXA Life Saral Pension

A Single Premium Non-Linked Non-Participating Individual Immediate Annuity Plan

Sales Literature

We all make provisions for certain expenses throughout our lifetime and work hard to meet them. However, what happens if we go on to outlive our expectations and see our savings start drying up? Do we then lose our financial independence? How do we avoid a situation like that and ensure a regular and guaranteed income till the end of our life?

Immediate Annuities are a smart way to ensure guaranteed regular income even post retirement. Understanding the importance and value of financial independence, we at Bharti AXA Life offer you Bharti AXA Life Saral Pension, an immediate annuity plan to ensure that you live life at your own terms – even after your retirement. With its simple and easy-to-understand features and standardized options, this plan is the perfect immediate annuity plan for you.

Key Features:

- 1) **Guaranteed fixed income for whole life:** Pay once (purchase price[^]) and get guaranteed fixed income (annuity) for your entire life.
- 2) **Joint Life Option:** Extend the same benefit of guaranteed fixed income to your spouse. In case your spouse outlives you, he/she will receive the same annuity income for as long as he/she lives.
- 3) **Multiple Annuity Pay-out Frequencies:** Option to receive annuity income monthly, quarterly, half yearly or yearly to suit your need.
- 4) **Return of Purchase price[^]:** In case of death of the annuitant (or the last surviving annuitant in case of Joint life), 100% of the purchase price (excluding taxes) will be returned to the nominees or the legal heir of the annuitant.
- 5) **Single premium payment:** Pay premium only once to purchase the annuity, post which you start receiving the benefits.

[^]Purchase price is defined as the amount paid by the policyholder to secure the benefits under the policy. The term Purchase Price and the Premium are used interchangeably in this document. Purchase Price does not include any taxes which are payable separately.

Type of Annuity Options:

- 1) **Option 1 – Life Annuity with Return of 100% of Purchase price (ROP) –** Under this option, Annuity is paid for life of the annuitant. In addition, 100% Purchase Price[^] will be returned to the nominee / legal heirs on death of the annuitant.
- 2) **Option 2 – Joint Life Last Survivor Annuity with Return of 100% of Purchase Price (ROP) on death of the last survivor –** In this case, the annuity is first paid to the primary annuitant for life. After death of the primary annuitant, if the spouse is surviving, the spouse continues to receive same amount of annuity for life till his/her death. Subsequently, on death of the spouse, Purchase Price[^] shall be payable to nominee / legal heirs. However, if the spouse has pre-deceased the annuitant, then on the death of the annuitant, the Purchase price[^] shall be payable to the nominee / legal heir. Joint life policy is permitted only where a spousal relationship exists.

Annuity option once chosen cannot be altered.

Get your annuity in 4 simple steps

- 1) Choose your annuity amount that you wish you receive at regular intervals or choose the purchase price you are willing to pay for the annuity
- 2) Select your annuity Option (Single Life or Joint Life Annuity)
- 3) Choose the frequency at which you would like to receive your annuity income – Monthly, quarterly, half-yearly or yearly based on your needs
- 4) Provide your details (and your partner's details in case of joint life option) and pay the purchase price to complete your annuity purchase.

Product Benefits

- 1) **Death:** Upon death of the Annuitant, the Death Benefit will be payable immediately on death.

In case of single Life annuity: 100% of Purchase price[^] shall be payable to the nominee or legal heir on death of the annuitant and the annuity payments shall cease immediately.

In case of joint life annuity, after death of the primary annuitant: - If the spouse is surviving, the spouse continues to receive same amount of annuity for life till his/her death. Subsequently, on death of the spouse, 100% Purchase Price[^] shall be payable to nominee / legal heirs. However, if the spouse has pre-deceased the annuitant, then on the death of the annuitant, the Purchase price[^] shall be payable to the nominee /legal heirs.

Any loan outstanding shall be recovered from the claim proceeds under the policy.

- 2) **Survival Benefit:** Annuity is payable during the survival of the annuitant(s), as per the chosen mode of annuity payment. If there is any Loan outstanding under the policy, the annuity amount will be reduced by the amount of loan interest due under the policy. The loan interest will accrue as per the frequency of annuity payment under the policy and it will be due on the date of annuity.
- 3) **Maturity:** There is no Maturity Benefit under the product.
- 4) **Surrender on Diagnosis of Critical Illness:** The policy can be surrendered any time after six months from the date of commencement, if the annuitant or the spouse or any of the children of the annuitant is diagnosed as suffering from any of the critical illnesses specified in the Policy Document, based on the documents produced to the satisfaction of the medical examiner of the Insurer. The list of critical illnesses may be revised from time to time by the Authority as needed. On approval of surrender, 95% of the Purchase Price[^] shall be paid to the annuitant, subject to deduction of outstanding loan amount and loan interest, if any. On payment of surrender value, the policy stands terminated. On payment of surrender value, the policy stands terminated.

Any change in the surrender value calculation method shall be applicable only after prior approval of IRDAI.

- 5) **Loan:** Loan can be availed any time after six months from the date of commencement of the policy. Under joint life option, the loan can be availed by the primary annuitant and on death of the primary annuitant; it can be availed by the secondary annuitant.

Maximum amount of loan that can be granted under the policy shall be such that the effective annual interest amount payable on loan does not exceed 50% of the annual annuity amount payable under the policy.

The Policyholder shall assign the policy absolutely to, and be held by, the company as security for repayment of the loan and interest

The loan interest will be recovered from the annuity amount payable under the policy. The loan interest will accrue as per the frequency of annuity payment under the policy and it will be due on the date of annuity. The loan outstanding shall be recovered from the claim proceeds under the policy. However, the annuitant has the flexibility to repay the loan principal at any time during the currency of the annuity payments.

In case the Policy results in a claim before the repayment of the loan in full with interest, the Company shall be entitled to recover the outstanding loan and interest thereon from claims payable under the Policy. Any change in basis of determination of interest rate for policy loan can be adopted only after prior approval of the Authority.

Interest Rate on loan

The interest on loan shall be at 10-year G-Sec rate per annum as at 1st April of the relevant financial year, as published by M/s. FBIL, plus not more than 200 bps and shall be applicable for all loans granted during the period of twelve months, beginning 1st May of the relevant financial year. Any change in basis of determination of interest rate for policy loan can be adopted only after prior approval of the Authority. The current rate of interest for FY 24-25 chargeable on Policy loans is 9.18 p.a.

- 6) **Higher Purchase Price Incentive:** As the purchase price increases, a Purchase Price[^] incentive, as a percentage, gets added on the Annuity Rates as specified below, subject to the minimum annuity amount of Rs. 12000 per annum:

Single Life		
Purchase Price Band	Purchase Price Range	High Purchase Price Incentive
Band 1	Less than 2,00,000	NA
Band 2	2,00,000 – 4,99,999	0.00%
Band 3	5,00,000 - 9,99,999	7.00%
Band 4	10,00,000 - 24,99,999	9.50%
Band 5	25,00,000 and above	11.00%

Plan at a Glance

Parameter	Eligibility Criteria								
Min Age at Entry	40 years								
Maximum Age at Entry	80 years								
Minimum Annuity Amount	<table border="1"> <tr> <td>Monthly</td> <td>Rs. 1,000</td> </tr> <tr> <td>Quarterly</td> <td>Rs. 3,000</td> </tr> <tr> <td>Half-Yearly</td> <td>Rs. 6,000</td> </tr> <tr> <td>Yearly</td> <td>Rs. 12,000</td> </tr> </table>	Monthly	Rs. 1,000	Quarterly	Rs. 3,000	Half-Yearly	Rs. 6,000	Yearly	Rs. 12,000
Monthly	Rs. 1,000								
Quarterly	Rs. 3,000								
Half-Yearly	Rs. 6,000								
Yearly	Rs. 12,000								
Maximum Annuity Amount	No Limit								
Minimum & Maximum Purchase Price	As per Annuity Amount, Annuitant Age and mode of Annuity payment chosen.								

	Minimum Purchase Price: Annuity Option 1: Rs.2,33,554 Annuity Option 2: Rs.2,45,902
Policy Term	This is a whole life product
Premium Payment Term	Only one mode of premium payment permitted under the policy - Single Premium, which is also the Purchase Price
Modes of Annuity Payment	Monthly, Quarterly, Half-Yearly, Yearly
This Product is also available for sale through Online mode.	

Case study

Mohit is a 58 year old salaried employee nearing his retirement. He wants to ensure that he and his wife, Swati, are not a financial burden on their children. For his financial independence, Mohit wants ensure he gets regular monthly income for the rest of his life, even after retirement. He also wants to secure his wife in case he was to die before her. Mohit opts for Bharti AXA Life Saral Pension.

How does the plan work?

Mohit purchases Bharti AXA Life Saral Pension under the **Option 2 - Joint Life Last Survivor Annuity with Return of 100% of Purchase Price (ROP) on death of the last survivor**. He opts for a monthly annuity pay-out of Rs. 6,380.78 for which he has to pay a one-time purchase price of Rs. 15,00,000.

One month after payment of his Purchase price, he would start receiving monthly annuity of Rs. 6,380.78 till as long as he lives. After his death, his wife would continue receiving monthly annuity of Rs. 6,380.78 for as long as she lives. On her death, her nominees or legal heirs would receive 100% of the purchase price[^], i.e. Rs. 15,00,000 and the annuity would be terminated.

The above example is for offline illustration purpose only and prices stated are exclusive of tax.

Sample Purchase Price and Annuity Pay-outs (in Rs.)

Age	Purchase Price [^] /Single Premium	Annuity Pay-out			
		Annual	Semi-Annual	Quarterly	Monthly
45	800,000	42,782.88	20,963.61	10,267.89	3,422.63
50	800,000	43,056.80	21,097.83	10,333.63	3,444.54
55	800,000	43,322.16	21,227.86	10,397.32	3,465.77
60	800,000	43,570.40	21,349.50	10,456.90	3,485.63
65	800,000	43,792.96	21,458.55	10,510.31	3,503.44

70	800,000	43,964.16	21,542.44	10,551.40	3,517.13
75	800,000	43,981.28	21,550.83	10,555.51	3,518.50
80	800,000	43,981.28	21,550.83	10,555.51	3,518.50

The above purchase prices^/ Single Premiums are offline rates for Option 1 - Single life annuitant and are exclusive of applicable taxes or cess (if any).

How is my Purchase Price^ determined?

Purchase Price^ or Single Premium applicable to you will depend on your age at entry, plan variant and purchase price band chosen.

Premium Payment Mode:

As this is an Immediate Annuity product, there is only one mode of premium payment permitted under the policy - Single Premium, which is also the Purchase Price^ of the policy.

Annuity Payout Mode

There are four modes of annuity payouts. The modal factors for annuity payments are as furnished below:

Modes of Annuity Payment	Modal Factor
Monthly	0.08
Quarterly	0.24
Half-yearly	0.49
Yearly	1

Annuity will be payable in arrears at the end of chosen annuity payment frequency from the date of purchase of the plan. This means:

- For yearly mode the annuity pay-out will begin after one year from date of purchase.
- For half-yearly mode the annuity pay-out will begin after 6 months from date of purchase.
- For quarterly mode the annuity pay-out will begin after 3 months from date of purchase.
- For monthly mode the annuity pay-out will begin after one month from date of purchase.

Can I cancel/surrender my policy?

- 1) Surrender is only applicable in case of diagnosis of a critical illness (applicable illnesses specified in the Policy Document) for the annuitant or the spouse or any of the children of the annuitant any time after six months from the date of commencement of the policy, based on the documents produced to the satisfaction of the medical examiner of the Insurer. On approval of surrender, 95% of the Purchase Price^ shall be paid to the annuitant, subject to deduction of outstanding loan amount and loan interest, if any. On payment of surrender value, the policy stands terminated.

Are riders available with this policy?

No, no riders are available with this policy

Terms and conditions

Free-look option:

If Policyholder disagrees with any of the terms and conditions of the Policy, there is an option to return the original Policy along with a letter stating reason/s within 30 days of receipt of the Policy Document. The Policy will accordingly be cancelled and the policyholder shall be entitled to a refund of the Premium/Purchase Price* subject only to a deduction of stamp duty charges and annuity paid, if any.

The treatment of the policy shall be as follows:

- i) For standalone immediate annuity policies: the proceeds from cancellation shall be returned to the policyholder.
- ii) If this policy is purchased out of proceeds of a deferred pension plan of any other insurance company: The proceeds from cancellation will be transferred back to that insurance company.

All rights under this Policy shall stand extinguished immediately on cancellation of the Policy under the free look option.

If the Policy is opted through Insurance Repository (IR), the computation of the said Free Look Period will be as stated below: -

For existing e-Insurance Account: For the purpose of computation of commencement of free look period, the date of delivery of email confirming the credit of the insurance policy by IR.

For New e-Insurance Account: If an application for e-Insurance Account accompanies the proposal for insurance, the date of receipt of the 'welcome kit' from the IR with the credentials to log on to the e-Insurance Account (e IA) or the delivery date of the email confirming the grant of access to the eIA or the delivery date of the email confirming the credit of the Insurance policy by the IR to the eIA, whichever is later shall be reckoned for the purpose of computation of the free look period.

Suicide Claim Provisions

Annuity Option 1:

On death of the Annuitant due to suicide at any time, the annuity payment shall cease immediately. The Purchase Price[^] shall be payable to nominee(s) / legal heirs.

Annuity Option 2:

On first death due to suicide (of either of the covered lives) at any time: 100% of the annuity amount shall continue to be paid to the surviving annuitant as long as one of the Annuitants is alive.

On death of the last survivor due to suicide at any time: The annuity payments will cease immediately. The Purchase Price[^] shall be payable to the Nominee(s) / legal heirs.

Under both the options any outstanding loan and interest thereon shall be recovered from the claim proceeds under the policy.

Availability of Product via online mode

Product will be available for sale through online mode.

Assignment and Nomination

Assignment: Assignment shall be in accordance with the provisions of Section 38 of the Insurance Act 1938 as amended from time to time.

Nomination: Nomination shall be in accordance with the provisions of Section 39 of the Insurance Act 1938 as amended from time to time.

NPS

This product can be offered to subscribers of National Pension Scheme (NPS). Any change in offering of any option in future related to NPS or other related regulations shall be after prior approval of the Authority.

Definitions of Critical Illness

1. CANCER OF SPECIFIED SEVERITY

I. 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.

II. The following are excluded –

- i. All tumors which are histologically described as carcinoma in situ, benign, premalignant, borderline malignant, low malignant potential, neoplasm of unknown behavior, or non-invasive, including but not limited to: Carcinoma in situ of breasts, Cervical dysplasia CIN-1, CIN -2 and CIN-3.
- ii. Any non-melanoma skin carcinoma unless there is evidence of metastases to lymph nodes or beyond;
- iii. Malignant melanoma that has not caused invasion beyond the epidermis;
- iv. 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
- v. All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below;
- vi. Chronic lymphocytic leukaemia less than RAI stage 3
- vii. Non-invasive papillary cancer of the bladder histologically described as TaN0M0 or of a lesser classification,
- viii. 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;
- ix. All tumors in the presence of HIV infection.

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

I. 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:

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

II. The following are excluded:

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

3. OPEN CHEST CABG

I. 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 breast bone) 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.

II. The following are excluded:

- i. Angioplasty and/or any other intra-arterial procedures

4. OPEN HEART REPLACEMENT OR REPAIR OF HEART VALVES

I. 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.

5. 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:

- i. no response to external stimuli continuously for at least 96 hours;
- ii. life support measures are necessary to sustain life; and
- iii. 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.

6. KIDNEY FAILURE REQUIRING REGULAR DIALYSIS

I. 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.

7. STROKE RESULTING IN PERMANENT SYMPTOMS

I. 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.

II. The following are excluded:

- i. Transient ischemic attacks (TIA)
- ii. Traumatic injury of the brain
- iii. Vascular disease affecting only the eye or optic nerve or vestibular functions.

8. MAJOR ORGAN /BONE MARROW TRANSPLANT

I. 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.

II. The following are excluded:

- i. Other stem-cell transplants
- ii. Where only islets of langerhans are transplanted

9. PERMANENT PARALYSIS OF LIMBS

I. 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.

10. MOTOR NEURON DISEASE WITH PERMANENT SYMPTOMS

I. 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.

11. MULTIPLE SCLEROSIS WITH PERSISTING SYMPTOMS

I. The unequivocal diagnosis of Definite Multiple Sclerosis confirmed and evidenced by all of the following:

- i. investigations including typical MRI findings which unequivocally confirm the diagnosis to be multiple sclerosis and
- ii. 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 and HIV are excluded.

12. BENIGN BRAIN TUMOR

I. 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.

II. This brain tumor must result in at least one of the following and must be confirmed by the relevant medical specialist.

- i. Permanent Neurological deficit with persisting clinical symptoms for a continuous period of at least 90 consecutive days or
- ii. Undergone surgical resection or radiation therapy to treat the brain tumor.

III. 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.

13. BLINDNESS

I. Total, permanent and irreversible loss of all vision in both eyes as a result of illness or accident.

II. The Blindness is evidenced by:

- i. corrected visual acuity being 3/60 or less in both eyes or ;
- ii. the field of vision being less than 10 degrees in both eyes.

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

14. END STAGE LUNG FAILURE

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

- i. FEV1 test results consistently less than 1 litre measured on 3 occasions 3 months apart; and
- ii. Requiring continuous permanent supplementary oxygen therapy for hypoxemia; and
- iii. Arterial blood gas analysis with partial oxygen pressure of 55mmHg or less (PaO₂ < 55mmHg); and
- iv. Dyspnea at rest.

15. END STAGE LIVER FAILURE

I. Permanent and irreversible failure of liver function that has resulted in all three of the following:

Permanent jaundice; and Ascites; and Hepatic encephalopathy.

II. Liver failure secondary to drug or alcohol abuse is excluded.

16. LOSS OF SPEECH

I. 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.

II. All psychiatric related causes are excluded.

17. LOSS OF LIMBS

I. The physical separation of two or more limbs, at or above the wrist or ankle level limbs 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.

18. MAJOR HEAD TRAUMA

I. 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.

II. The Accidental Head injury must result in an inability to perform at least three (3) of the following Activities of Daily Living 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.

III. The Activities of Daily Living are:

- i. Washing: the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means;
- ii. Dressing: the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances;
- iii. Transferring: the ability to move from a bed to an upright chair or wheelchair and vice versa;
- iv. Mobility: the ability to move indoors from room to room on level surfaces;
- v. Toileting: the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
- vi. Feeding: the ability to feed oneself once food has been prepared and made available.

IV. The following are excluded:

- i. Spinal cord injury;

19. 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 Catheterization. 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:

- i. Class III: Marked limitation of physical activity. Comfortable at rest, but less than ordinary activity causes symptoms.
- ii. 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.

20. THIRD DEGREE BURNS

I. 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.

Grievance Redressal

1. Customer Service

You can seek clarification or assistance on the Policy from the following:

- The Advisor through whom the Policy was bought
- The Customer Service Representative of the Company at toll free no. 1800 102 4444
- WhatsApp us 'Hi' at 02248815768
- SMS "SERVICE" to 56677
- Email: service@bhartiata.com
- Mail to: Customer Service

Bharti AXA Life Insurance Company Ltd.

Spectrum tower, 3rd Floor,

Malad link road, Malad (west),

Mumbai 400064. Maharashtra

2. Grievance Redressal Procedure

Step 1: Inform us about your grievance

In case you have any grievance, you may approach our Grievance Redressal Cell at any of the below-mentioned helplines:

- Lodge your complaint online at www.bhartiata.com
- Call us at our toll free no. 1800 102 4444
- Email us at complaints.unit@bhartiata.com
- Write to us at:

Registered Office:

Bharti AXA Life Insurance Company Ltd.

Unit No. 1902, 19th Floor, Parinee Crescenzo

'G' Block, Bandra Kurla Complex, BKC Road,

Behind MCA Ground, Bandra East,

Mumbai -400051, Maharashtra

Grievance Redressal Cell

Bharti AXA Life Insurance Company Ltd.

Spectrum tower, 3rd Floor,

Malad link road, Malad (west),

Mumbai 400064. Maharashtra'

- Visit our nearest branch and meet our Grievance Officer who will assist you to redress your grievance/ lodge your complaint.

Step 2: Tell us if you are not satisfied

In case you are not satisfied with the decision provided or if you have not received any response post completion of 14 days, you may write to Head - Customer Service for resolution at the above mentioned address or email at: head.customerservice@bhartiata.com:

You are requested to inform us about your concern (if any) within 8 weeks of receipt of resolution as stated above, failing which it will be construed that the complaint is satisfactorily resolved.

If you are not satisfied with the response or do not receive a response from us within 14 days, you may approach the Grievance Cell of the Insurance Regulatory and Development Authority (IRDA of India) of India on the following contact details:

IRDA of India Grievance Call Centre (IGCC) TOLL FREE NO:155255 or 18004254732

Email ID: complaints@irda.gov.in

You can also register your complaint online at <https://bimabharosa.irdai.gov.in/>

Address for communication for complaints by paper:

General Manager

Insurance Regulatory and Development Authority of India(IRDAI)

Policyholder's protection & Grievance Redressal Department – Grievance Redressal Cell.

Sy.No.115/1, Financial District, Nanakramguda,

Gachibowli, Hyderabad – 500 032.

Step 3: If you are not satisfied with the resolution provided by the Company

Where the redressal provided by the Company is not satisfactory despite the escalation above, the customer may represent the case to the Ombudsman for Redressal of the grievance.

For preferring a complaint before the Insurance Ombudsman, you may prefer to Insurance Ombudsman Rule, 2017(as may be amended from time to time).

To locate the nearest Ombudsman office, please visit <https://www.cioins.co.in/Ombudsman> or you may also locate the list our website - <https://www.bhartiata.com>

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 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 prospectus or tables of 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."

SECTION 45 OF INSURANCE ACT 1938 as amended from time to time

Fraud or Misstatement or suppression of material fact, would be dealt with in accordance with provisions of Sec 45 of the Insurance Act 1938 as amended from time to time.

About Us

Bharti AXA Life Insurance Company Limited is a wholly owned subsidiary of Bharti Life Ventures Private Limited (Bharti Group Company), a business group in India with interests in telecom, agri business and retail.

As we further expand our presence across the country with more than 260 branches and partnerships with multiple distributors, we continue to provide a varied range of products and service offerings to cater to specific insurance and wealth management needs of customers. Whatever your plans in life, you can be confident that Bharti AXA Life will offer the right financial solutions to help you achieve them.

Disclaimers

- Life Insurance Coverage is available under this policy
- Bharti AXA Life Insurance is the name of the Company and Bharti AXA Life Saral Pension is only the name of the non-linked, non-participating individual Immediate Annuity Plan and does not in any way represent or indicate the quality of the policy or its future prospects.
- This product brochure is indicative of the terms, conditions, warranties and exceptions contained in the insurance policy bond.
- Tax benefits are as per extant Income Tax laws and subject to any amendments made thereto from time to time. Tax benefits are as per the Income Tax Act, 1961, and are subject to any amendments made thereto from time to time

Bharti AXA Life Insurance Company Limited,

IRDAI Registration No.: 130 dated 14/07/2006 [Life Insurance Business]

Registered Office: Unit No. 1902, 19th Floor, Parinee Crescenzo, 'G' Block, Bandra Kurla Complex, BKC Road, Behind MCA Ground, Bandra East, Mumbai -400051, Maharashtra

CIN - U66010MH2005PLC157108

UIN: 130N104V02



Website: www.bharti.axa.com

Toll Free no.: 1800 102 4444

ADVT No.: II-Sep-2024-5462

BEWARE OF SPURIOUS PHONE CALLS AND FICTITIOUS//FRAUDULENT OFFERS!

IRDAI is not involved in activities like selling insurance policies, announcing bonus or investment of premiums. Public receiving such phone calls are requested to lodge a police complaint.

Trade Logos  and  used in the document belongs to the Bharti Enterprises (Holdings) Private Ltd. and AXA SA respectively and are used by Bharti AXA Life under license.