CUSTOMER INFORMATION SHEET / KNOW YOUR POLICY

This document provides key information about your policy. You are also advised to go through your policy document.

SI No.	Title	Description	Policy clause number
1	Name of Insurance Product / Policy	Reliance Nippon Life Indus CI Plus Rider UIN: 121A033V02	Part A of Base Policy Clause 1.2
2	Policy number	Quotation number: Same as Base Policy For policy number, please refer to the Policy Schedule of the Base Policy.	Part A of Base Policy Clause 1.2
3	Type of Insurance Product / Policy	Benefit (Where an Insurance Policy pays a fixed amount under the policy on the occurrence of a covered event)	Not Applicable
4	Sum Assured	< <rider assured="" sum="">></rider>	Part A of Base Policy Clause 1.2
5	Policy Coverage	Silver Variant: Subject to the Rider Policy being in force i.e. all due premiums have been paid, on diagnosis of any one of the 25 covered critical illnesses and fulfilment of conditions under covered critical illness definition, an amount equal to Rider Sum Assured shall be payable, subject to applicable Survival Period and Waiting Period. The Rider Policy would terminate upon payment of critical illness claim. Gold Variant: Subject to the Rider Policy being in force i.e. all due premiums have been paid, on diagnosis of any one of the 40 covered critical illnesses and fulfilment of conditions under covered critical illness definition, an amount equal to Rider Sum Assured shall be payable, subject to applicable Survival Period and Waiting Period. The Rider Policy would terminate upon payment of critical illness claim. Platinum Variant: Subject to the rider policy being in force i.e. all due premiums have been paid, on diagnosis of any one of the 64 covered critical illnesses and fulfilment of conditions under covered critical illness definition, the following benefit shall be payable, subject to applicable Survival Period and Waiting Period. • On diagnosis of a Minor Critical Illness: An amount equal to 25% of the Rider Sum Assured or INR 500,000, whichever is lower shall be payable. In addition, a maximum of three claims are payable for minor conditions during the Rider Policy Term, subject to applicable condition of Cooling-off Period. However, only one claim is payable for the same minor condition i.e for a minor condition no repeat claims are payable. • On diagnosis of a Major Critical Illness: An amount equal to Rider Sum Assured less minor critical illness claim already paid, if any shall be payable.	PART C (Clause 3.1.1)

The Rider Policy would terminate on payment of a major critical illness claim.

Below is the list of critical illnesses covered under the three variants of the rider:

List of Major Critical Illnesses						
Sr. No.	Silver Variant	Gold Variant	Platinum Variant			
1	Cancer of Specified Severity	Cancer of Specified Severity	Cancer of Specified Severity			
2	Myocardial Infarction (First Heart Attack of Specific Severity)	Myocardial Infarction (First Heart Attack of Specific Severity)	Myocardial Infarction (First Heart Attack of Specific Severity)			
3	Open Chest CABG	Open Chest CABG	Open Chest CABG			
4	Open Heart Replacement or Repair of Heart Valves	Open Heart Replacement or Repair of Heart Valves	Open Heart Replacement or Repair of Heart Valves			
5	Coma of Specified Severity	Coma of Specified Severity	Coma of Specified Severity			
6	Kidney Failure Requiring Regular Dialysis	Kidney Failure Requiring Regular Dialysis	Kidney Failure Requiring Regular Dialysis			
7	Stroke Resulting in Permanent Symptoms	Stroke Resulting in Permanent Symptoms	Stroke Resulting in Permanent Symptoms			
8	Major Organ /Bone Marrow Transplant	Major Organ /Bone Marrow Transplant	Major Organ /Bone Marrow Transplant			
9	Permanent Paralysis of Limbs	Permanent Paralysis of Limbs	Permanent Paralysis of Limbs			
10	Motor Neuron Disease with Permanent Symptoms	Motor Neuron Disease with Permanent Symptoms	Motor Neuron Disease with Permanent Symptoms			
11	Multiple Sclerosis with Persisting Symptoms	Multiple Sclerosis with Persisting Symptoms	Multiple Sclerosis with Persisting Symptoms			
12	Benign Brain Tumor	Benign Brain Tumor	Benign Brain Tumor			
13	Blindness	Blindness	Blindness			

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Progressive Supra Palsy Severe Rheuma Arthritis Severe Ulcerative Hemiplegia	Encephalitis	53
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56 Severe Rheuma Arthritis Severe Ulcerative Hemiplegia	Progressive Supranuclear	
56 Severe Ulcerative Hemiplegia	Palsy	55
57 58 Arthritis Severe Ulcerative Hemiplegia	Severe Rheumatoid	56
58 Hemiplegia	Arthritis	56
	Severe Ulcerative Colitis	57
	Hemiplegia	58
59 Pneumonecto	Pneumonectomy	59
	Tuberculosis Meningitis	60
List of Minor Critical Illnesses	of Minor Critical Illnesses	Li
61 NA NA Angioplasty	NA Angioplasty	61 NA
		62 NA
	NA Small Bowel Transplant	63 NA

	1					
					Brain Aneurysm Surgery	
		64	NA	NA	or Cerebral Shunt	
					Insertion	
		Cuminal	Daviad			
	Survival Period A Survival Period of 30 days is applicable from the date of Diagnosis of covered critical illness and fulfilment of conditions under covered critical illness definition, during which the Life Insured must survive before any critical illness benefit is payable. Claim payment will only be made with confirmatory Diagnosis of the conditions covered while the insured is alive i.e., a claim would not be admitted if the diagnosis is made post-mortem.					PART C (Clause 3.2)
		Death B	enefit			
		In case of Term, propagation paid, an	of an unfortunate rovided the Rider	Policy is in force i.e. a Return of Premium Pai	ured during the Rider Policy Il due premiums have been d (RoP) shall be payable and	PART C (Clause 3.1.2)
		On survi the Ride	r Policy is in force Return of Premiu	i.e. all due premiums	Rider Policy Term, provided have been paid, an amount payable and the Rider Policy	PART C (Clause 3.1.3)
				· · · · · · · · · · · · · · · · · · ·	al Rider Premium Paid less ubject to minimum zero.	
6	Exclusions				under this policy towards a	PART F (Clause
	ZXOIGSIOTIS					-
		3. 4.	Any Illness, sicking Illnesses under it Pre-existing Discontinuous the time of processes and Where, Pre-existor disease: a) That is/are of prior to the b) For which mor received the effective Any Critical Illnes addictive condition transmitted diseases excluding HIV / Drugs or substantaken as prescri	ness or disease other to this Policy; ease, unless Life Assur- posal or date of revive ecepted the same. sting Disease means a diagnosed by a physic effective date of the phedical advice or treat from, a physician not re- ection and consequences caused by or assured by or assured by or assured by or assured. Chlamydia, Pubic L AIDS. Inces or narcotics used bed by a registered Mess caused due to inter-	atment for Alcoholism or any sthereof. ociated with any sexually Warts, Syphilis, Gonorrhoea, ice and Trichomoniasis, but by the Insured Person unless	A comprehensive elist of definitions of each of the covered critical illness and the relevant exclusions are covered in Annexure 1

- 7. Any Critical Illness, caused by foreign invasion, act of foreign enemies, hostilities, warlike operations (whether war be declared or not or while performing duties in the armed forces of any country during war or at peace time), civil war, public defence, rebellion, revolution, insurrection, military or usurped power.
- 8. Any Critical Illness caused by ionizing radiation or contamination by radioactivity from any nuclear fuel (explosive or hazardous form) or from any nuclear waste from the combustion of nuclear fuel, nuclear, chemical or biological attack.
- 9. Congenital External Anomalies or any complications or conditions therefrom including any developmental conditions of the Insured.
- 10. Any Critical Illness caused by any treatment necessitated due to participation as a professional in hazardous or adventure sport, including but not limited to, para jumping, rock climbing, mountaineering, rafting, motor racing, horse racing or scuba diving, hand gliding, sky diving, deep sea diving.
- 11. Participation by the Insured Person in any flying activity, except as a bona fide, fare-paying passenger of a recognized airline on regular routes and on a scheduled timetable.
- 12. Any Critical Illness caused by Medical treatment traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalization) except ectopic pregnancy. Any Critical Illness due to miscarriages (unless due to an accident) and lawful medical termination of pregnancy during the policy period.
- 13. Any Critical Illness caused by any unproven treatment, service and supplies for or in connection with any treatment. Unproven treatments are treatments, procedures or supplies that lack significant medical documentation to support their effectiveness.
- 14. Any Critical Illness based on certification/diagnosis/treatment from persons not registered as Medical Practitioners, or from a Medical Practitioner who is practicing outside the discipline that he is licensed for.
- 15. Any Critical Illness caused due to any treatment, including surgical management, to change characteristics of the body to those of opposite sex.
- 16. Any Critical Illness caused due to cosmetic or plastic surgery or any treatment to change the appearance unless for reconstruction following an Accident, Burn(s), or Cancer or as part of medically necessary treatment to remove a direct and immediate health risk to the insured. For this to be considered a medical necessity, it must be certified by the attending Medical Practitioner.
- 17. Any Critical Illness caused due to surgical treatment of obesity that does not fulfil all the below conditions:
 - a) Surgery to be conducted is upon the advice of the Doctor
 - b) The Surgery / Procedure conducted should be supported by clinical protocols
 - c) The member has to be 18 years of age or older and
 - d) Body Mass Index (BMI);
 - 1) greater than or equal to 40 or
 - 2) greater than or equal to 35 in conjunction with any of the following severe co-morbidities following failure of less

invasive methods of weight loss: Obesity related cardiomyopathy ii. Coronary heart disease iii. Severe Sleep Apnea **Uncontrolled Type 2 Diabetes** iv. 18. Any Critical Illness caused due to treatments received in health hydros, nature cure clinics, spas or similar establishments or private beds registered as a nursing home attached to such establishments or where admission is arranged wholly or partly for domestic reasons. 19. Any Critical Illness directly arising from or consequent upon any Insured Person committing or attempting to commit a breach of law with criminal intent. 20. In the event of the death of the Insured Person within the stipulated survival period as set out above. 21. Any Critical Illness caused by treatment related to Birth Control, sterility and infertility. This includes: a) Any type of contraception, sterilization b) Assisted Reproductive services including artificial insemination and advanced reproductive technologies such as IVF, ZIFT, GIFT, c) Gestational Surrogacy d) Reversal of sterilization 22. Working in underground mines, tunnelling or involving electrical installations with high tension supply, or as race jockeys or circus personnel. 7 Waiting period **Waiting Period** PART C (Clause The below mentioned Waiting Period are applicable from the date of 3.3) commencement of rider risk and from the date of revival for every subsequent revival during the Rider Policy Term. Condition **Waiting Period** Major Critical Illness 90 days Minor Critical Illness 180 days In case the insured event happens during the Waiting Period, no benefit shall be payable. However, in such case, the Rider Policy will terminate and an amount equal to Return of Premium Paid (RoP) shall be payable without interest. No Waiting Period is applicable for critical illness claims arising solely due to an accident. Return of Premium Paid (RoP) is equal to Total Rider Premium Paid less minor critical illness claim already paid, if any, subject to minimum zero. **Cooling-off Period** PART C (Clause A Cooling-off Period of 180 days is applicable between the date of diagnosis 3.4) of two minor critical illnesses. No claim shall be payable during Cooling-off Period related to the minor critical illness conditions. There is no Cooling-off Period between minor and major claim.

of Coverage	For minor critical illness: 25% of Rider Sum Assured subject to maximum of	3.1.1)
	Rs. 5 lakhs	3.1.1)
Claims/Claims Procedure	 Turn Around Time (TAT) for claims settlement – 15 days from the date of receipt of request in case of claims not requiring investigation. 45 days from the date of receipt of request in case of claims requiring investigation. 	PART F (Clause 6.2)
	Claim Procedure - To intimate a claim please submit the required documents at your nearest RNLIC Branch office OR You can send the documents via courier to: The Claims Department Reliance Nippon Life Insurance Company Limited The Claims Department Office no. 701 & 702, 7th floor Silver Metropolis, Off Western Express Highway Goregaon East, Mumbai – 400063 OR You can email us the scanned copies of duly filled claims forms and other mandatory documents at rnlic.claims@relianceada.com Helpline no: For any assistance on claim, call us on our Toll-Free helpline number 1800 102 3330 (Monday to Saturday, from 8:00 AM to 8:00 PM, oveluding public helidays)	
	 Link for downloading claim form and list of documents required: Click on https://www.reliancenipponlife.com/claims to know the documents required and to download claim forms 	
Policy Servicing	 Turn Around Time (TAT)— 7 days from request received date Contact Details: Call Us between 8am to 8pm, Monday to Saturday (except business holiday), on Our Toll-Free Call Centre Number 1800 102 1010 or Email Us at: rnlife.customerservice@relianceada.com or Chat with us on WhatsApp number (+91) 7028852700 Link for downloading forms: 	Part G of the base product policy document
	Click on https://www.reliancenipponlife.com/downloads > Select Policy Servicing Request forms	
Grievances/ Complaints	If You are dissatisfied with any of our services, please feel free to contact Us through any of the mode mentioned above under Policy Servicing. If your complaint is unresolved, you can escalate in the following manner: Step 1: contact Our Service Branch Manager, who is also the Local Grievance Redressal Officer at Your nearest branch. Step 2: Write to Head of Customer Care at	PART G of the base product policy document
	Policy Servicing Grievances/	Procedure 15 days from the date of receipt of request in case of claims not requiring investigation. 45 days from the date of receipt of request in case of claims requiring investigation. • Claim Procedure - To intimate a claim please submit the required documents at your nearest RNLIC Branch office OR You can send the documents via courier to: The Claims Department Reliance Nippon Life Insurance Company Limited The Claims Department Office no. 701 & 702, 7th floor Silver Metropolis, Off Western Express Highway Goregaon East, Mumbai – 400063 OR You can email us the scanned copies of duly filled claims forms and other mandatory documents at milc.claims@relianceada.com Helpline no: For any assistance on claim, call us on our Toll-Free helpline number 1800 102 3330 (Monday to Saturday, from 8:00 AM to 8:00 PM, excluding public holidays) • Link for downloading claim form and list of documents required: Click on https://www.reliancenipponlife.com/claims to know the documents required and to download claim forms Policy Servicing • Turn Around Time (TAT) – 7 days from request received date • Contact Details: Call Us between 8am to 8pm, Monday to Saturday (except business holiday), on Our Toll-Free Call Centre Number 1800 102 1010 or Email Us at: rnlife.customerservice@relianceada.com or Chat with us on WhatsApp number (+91) 7028852700 • Link for downloading forms: Click on https://www.reliancenipponlife.com/downloads > Select Policy Servicing Request forms If you are dissatisfied with any of our services, please feel free to contact Us through any of the mode mentioned above under Policy Servicing. If your complaint is unresolved, you can escalate in the following manner: Step 1: contact Our Service Branch Manager, who is also the Local Grievance

		Step 3: Write to Our Grievance Redressal Officer at	
		rnlife.gro@relianceada.com	
		Where the complaint is unresolved or the redressal is unsatisfactory, you may approach the Grievance Cell of the Insurance Regulatory and Development Authority of India (IRDAI) on the following contact details: IRDAI Grievance Call Centre (IGCC) TOLL FREE NO: 155255 Bima Bharosa TOLL FREE NO: 1800 4254 732 Email ID: complaints@irdai.gov.in You can also register Your complaint online at https://bimabharosa.irdai.gov.in While we expect to satisfactorily resolve your grievances, you may also at any time approach the Insurance Ombudsman. For contact details, contact number and email of the relevant Ombudsman office, kindly refer the policy	
		document or the website https://www.cioins.co.in/ombudsman or our	
		website https://www.reliancenipponlife.com/	
12	Things to remember	• Free Look Cancellation You are provided with free look period of 30 days beginning from the date of receipt of Policy Document, whether received electronically or otherwise, to review the terms and conditions stipulated in the Policy Document. In the event You disagree to any of the Policy terms or conditions, or otherwise and have not made any claim, You shall have the option to return the Policy to the Company for cancellation, stating the reasons for the same. You are requested to take appropriate acknowledgement of Your request letter and return of Policy. Irrespective of the reasons mentioned, the Company shall refund the premium paid subject only to a deduction of a proportionate risk premium for the period of cover and the expenses incurred by the Company on Your medical examination, if any, and stamp duty charges. Please note that if the Policy is opted through Insurance Repository ('IR'), the computation of the said Free look Period will be from the date of the email informing Policy credit in IR. Any request received by the Company for Free look cancellation of the Policy shall be processed and premium refunded within 7 days of receipt of the request.	PART D (Clause 4.1)
		 Policy Renewal Not Applicable Migration & Portability 	
		Not Applicable	
		Change in Rider Sum Assured Not Applicable	
		Moratorium Period	
4.2	V 61.11	Not Applicable	
13	Your Obligations	 Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may affect the claim settlement. 	

	Additionally, please ensure you have disclosed any major health related issues, your occupation and income.	

Declaration by the Policy Holder:

I have read the above and confirm having noted the details. I am aware that on request I can avail of the CIS in local language.

<u>Place</u>:

<u>Date:</u> (Signature of the Policyholder)

Please Note:

In case of any conflict, the terms and conditions mentioned in the policy document shall prevail.