

## PART B

### POLICY DEFINATION

The words and phrases defined below shall have the meanings assigned to them in this Policy unless the context otherwise requires. Words implying masculine include the feminine, and vice versa. Words in singular include the plural and vice versa.

**Age** means age on last birthday unless specifically otherwise provided.

**Annualized premium** means the amount specified in the Schedule.

**Charges** means the various charges as mentioned in Section E.

**Claimant** means the Nominee/ Appointee (if Nominee is a minor)/ Assignee; and where there is no assignment or nomination in existence, the legal heir/s of the Policyholder.

**Company/We/ Us/ Our** means Aegon Life Insurance Company Limited.

**Cut Off time** means the time of a day for the purpose of calculating the Unit price for creation or cancellation of Unit from the Investment Fund. Presently the cut-off time is 3.00 p.m., which could change in future subject to IRDAI approval.

**Date of Commencement of Policy** is the date on which the benefits under the Policy are affected as mentioned in the Policy Schedule.

**Date of Commencement of Risk** is the same of the Date of Commencement of the Policy.

**Date of Maturity** is the date of expiry of the Plan by efflux of the Policy Term and is mentioned in the Policy Schedule.

**Discontinuance means** the state of a Policy that could arise on account of surrender of the Policy or non-payment of the contractual premium due, before the expiry of the Extended Grace Period of the Policy. No Policy shall be treated as discontinued on non-payment of the said premium if, within the grace period, the premium has not been paid due to the death of the insured or upon the happening of any other contingency covered under the Policy.

**Due Date** means the dates on which the Plan Premium are due and payable by the Policyholder.

**Fund or Investment Fund** means a specific and segregated investment fund managed by the Company for the exclusive interest and benefits of all the Policyholders sharing the same Investment Fund option.

**Grace Period** is a period of 15 days for policies under monthly mode and 30 days for all other modes starting from the Due Date of Plan Premium and ending at the close of business hours on the 15th or 30th day, as may be applicable, from the Due Date. If the 15th or 30th day, as applicable, falls on a holiday then the next working day.

**IRDAI** means the Insurance Regulatory and Development Authority.

**Life Assured** is the person in relation to whom the Plan is granted by the Company.

**Lock-in Period** means a period of five consecutive years commencing from the Date of Commencement of Policy.

**Monthly Date** is the first day of each Policy Month.

**Policy/ Plan** means the contract of insurance entered into between the Policyholder and the Company as evidenced by this document which sets down the benefits available to the Policyholder and the terms and conditions for availing of such benefit/s.

**Policy Anniversary** is the date corresponding to the Date of Commencement of Policy occurring after the completion of every PolicyYear.

**Date of Commencement** of Policy is the date of commencement of the Plan and is mentioned in the Policy Schedule.

**Policy Term** means the period commencing on the Date of Commencement of Policy and ending on the Date of Maturity as mentioned in the Policy Schedule.

**Policy Year and Policy Month** are measured from the Date of Commencement of Policy and are period of twelve calendar months and one calendar month respectively.

**Premium Redirection** is the option available to the Policyholder to modify the allocation of the amount of future Plan Premiums into a different Investment Fund from the Investment Fund in effect at the time of exercising this option.

**Proceeds of Discontinuance Policy Fund** is the Discontinuance Value after addition of the entire income earned for the period of investment in the Discontinuance Policy Fund net of applicable fund management charges, subject to a minimum guarantee of the interest, at the rate prescribed by IRDAI from time to time.

**Proposal Form** is the application form submitted to the Company for purchasing this Policy.

**Redemption** means the encashing of Units at the prevailing Unit Price and involves cancellation of Units in transactions such as partial withdrawals, discontinuance, maturity or switches.

**Top-Up Fund Value** means the product of the total number of Units built up from the Top-Up Premiums and the Unit Price per Unit as may be applicable.

**Top-Up Premium** means an amount of premium that is paid by the policyholders at irregular intervals besides base regular premium payments specified in the contract.

**Top-Up Sum Assured** means the increase in Sum Assured due to Top-Up Premiums.

**Total Fund Value** = Base Fund Value plus Top-Up Fund Value

**Unit** is a portion or a part of the Investment Fund and is represented by one undivided share in the assets underlying that Fund.

**Valuation Date** is the date on which the assets of the Funds are valued as set out in Clause F.7

**You or Your** means the Policyholder named in the Policy Schedule.

# PART C

## PRODUCT DESCRIPTION

'Aegon Life iMaximize Insurance Plan' is the name of a unit linked insurance plan of the Company. This is a linked non participating plan. This Policy will participate in the investment performance of the Investment Fund(s) of the Company, selected by you. The Policy, however, does not in any way give any rights whatsoever to any share in the profits or surplus of the business of the Company.

All the payments under the Policy will be made in Indian rupees and will be subject to prevailing tax laws.

### C.1 Death Benefit

#### C.1.2 Benefit Option 1

In case of an unfortunate demise of the Life Assured, the Claimant will receive the higher of Sum Assured (including Top-Up Sum Assured) or Total Fund Value or 105% of all the premiums paid (including Top-Up premiums). The Policy Terminates thereafter. Partial withdrawals made during the period of two years before the date of death will be deducted from Sum Assured for the calculation of death benefit.

#### C.1.3 Benefit Option 2

In case of an unfortunate demise of the Life Assured during the term of the Policy, the Claimant receives the following benefit:

- a) Maximum of Sum Assured (including Top-Up Sum Assured) or 105% of all premiums paid (including Top-Up premiums) is immediately paid.
- b) All the future premiums will cease. Company will regularly fund into the Policy Holder's Unit fund an amount which is equivalent to the premium of the policy, for the benefits payment term. This Benefit is known as the Additional Savings Benefit (ASB).
- c) An amount equal to the Annualised premium is paid to the Claimant at the start of every Policy year following the date of death till the end of the Policy Term. This benefit is known as Income Benefit (IB).
- d) Total Fund Value as on the date of intimation of the death of the Life Assured will be reallocated to the Secure Fund. All future premiums as per the Premium Continuance Benefit will also be invested in the Secure Fund. At the end of the Policy Term, the Total Fund Value will be paid to the beneficiary.

The Claimant cannot exercise any of the Policy options/rights such as Partial Withdrawal, Top up Premium, Premium Redirection, Switch, or any other options /rights which were available to the Policyholder. Upon death of the Claimant after the death of the Life Assured, the Income Benefit and Premium Continuance Benefit will continue and the Total Fund Value at Maturity shall be paid out to the legal heir/s of the Policyholder.

- In case of death of the nominee whilst the Life Assured is alive, Policy will continue and the Policyholder can include another nominee at any time during the Policy Term.
- In case of death of the Policyholder, during the minority of the Life Assured, the legal heir/s of the Policyholder can keep the Policy in-force by continuing premium payments or may discontinue the Policy.

### C.2 Maturity Benefit

On maturity, You receive the Total Fund Value (including Top-Up Fund Value) as on the maturity date.

### C.3 Additional units

The Company may add units into the Policy account of the Policyholder at various times in the Policy Term to comply with the existing IRDAI regulations with respect to net yield on the Fund Value.

### C.4 Segregated Funds

A Segregated Fund is a specific and separate fund managed for the exclusive interest of all Policyholders sharing the same Segregated Fund. The Company holds legal and beneficial interests in the assets of each Segregated Fund and has sole discretion on the investment and the management of each Segregated Fund within the defined asset portfolio allocation. The three Segregated Funds currently offered under the product by the Company are as under:

Fund Name	Segregated Fund Identification Number (SFIN)	Objective	Risk Profile	Equities	Fixed Interest Securities	Money Market Instruments
Blue Chip Equity Fund	ULIF01511/02/14BLUECHIPEQ0138	The Fund objective is to provide long-term capital appreciation by investing in a diversified equity portfolio consisting of predominantly large cap companies with strong financials, quality management and market leadership.	High	80% – 100%	0%	0% – 20%
Secure Fund	ULIF00505/07/08SF0138	This fund will aim to generate income consistent with high levels of liquidity while protecting the capital. It will invest in a diversified portfolio of money market instruments & other short term fixed interest securities.	Low	0%	60% - 100%	0% – 40%
Debt Fund	ULIF00405/07/08DB0138	This fund will aim to generate attractive returns by investing in a diversified portfolio of government debt, corporate debt, money market instruments and other fixed income securities of varying maturities.	Medium	0%	60% - 100%	0% – 40%

### C.5 Top-Ups

A Top-Up premium is an amount of premium that is paid by the Policyholder at irregular intervals besides regular premium payments specified in the contract.

Top-Up premiums can be paid at any time except in the last five Policy years, subject to the following conditions:

- A Top-Up premium payment is not less than Rs.5,000. This minimum limit may change in future subject to clearance from the IRDAI.
- At any point of time during the Policy Term, the total Top-Up premiums paid shall not exceed the total regular premiums paid to date.

- No due regular premium is unpaid on the date of Top-Up premium payments.
- If a regular premium is due and Top-Up is received, such Top-Up premium will first be used to pay all due regular premiums. The remainder will be applied as a Top-Up.
- For units pertaining to Top-Ups, there will be a lock-in period of 5 years for partial withdrawal for each Top-Up. However this condition will not be applicable in case of discontinuance or death of Life Assured.
- Any Top-Up made will result into increase in Sum Assured as per the table below:

Minimum:

Age at making the Top-Up	Increase in Sum Assured
Up to 45 years	1.25 times the Top-Up amount
45 years and above	1.10 times the Top-Up amount

Maximum:

Age at making the Top-Up	Increase in Sum Assured
Up to 35 years	10 times the Top-Up amount
36 years to 44 years	1.25 times the Top-Up amount
45 years and above	1.10 times the Top-Up amount

Such increase in Sum Assured will be subject to Board approved underwriting guidelines. If the underwriting rejects the increase in the Sum Assured then the Top-Up amount will be returned to the Policyholder without any interest.

### C.6 Partial Withdrawals

Policy holder may make partial withdrawals, subject to the following conditions:

- No partial withdrawal is allowed during first five Policy years
- Total Fund Value including the Top-Up Fund Value will be taken into account for partial withdrawals. Partial withdrawals made shall be allowed first from the Top-Up Fund if any (as long as such Fund Value supports the partial withdrawal) and subsequently, the partial withdrawals may be allowed from the Fund Value built-up from the regular premium.
- Amount of any partial withdrawal will not be less than ₹5,000. Company may increase this limit in future with prior clearance from IRDAI.
- Maximum amount of partial withdrawal in any Policy year (including all partial withdrawals made during that Policy year) is 20% of the Fund Value at the beginning of that Policy year.
- All due regular Premiums of first five Policy years have been paid.
- Remaining fund after partial withdrawal is not less than two years' Annualised Premium.
- For units pertaining to Top-Ups, there will be a lock-in period of five years for partial withdrawal for each Top-Up.
- Partial withdrawals are not allowed if the age of the Life Assured is less than 18 years.
- Partial Withdrawal shall not result in termination of the Policy.

### C.7 Premium Redirections

You can use this facility to change the Premium proportions invested in various Segregated funds. The new Premium proportions will be applicable for all future Premiums paid, including Top-Ups.

### C.8 Policy Termination

The Policy will terminate on the earliest of the following:

- The Date on which Proceeds of Discontinuance Policy Fund are paid;
- At the end of the revival period, subject to the Policy not been revived and the Lock-in period being completed;
- The Policy will be foreclosed by paying Total Fund Value if the Total Fund Value falls to the level of an amount equal to one year's Annualized Premium or the Total Fund Value is inadequate for the deduction of the applicable Policy Charges. This foreclosure will not happen for premium paying policies;
- The Date on which Surrender Value is paid in the Policy;
- The Date of Maturity of the Policy;
- The Date of intimation of the death of the Life Assured for Benefit Option I

### C.9 Suicide Exclusion

In case of death of the Life Assured due to suicide within one year from the date of issue or date of revival, only Total Fund Value is payable and the Policy is terminated.

### C.10 Payment of Claim

We will require the following primary documents in support of a Death claim to enable processing of the claim intimation under the Policy. All benefits will be paid to the "claimant" as defined in section C.2 above.

- Certificate of the Doctor / Medical Officer certifying the cause of death;
- In case of unnatural death - Post Mortem Report, First Information Report (FIR), Inquest Report and the Final Investigation Report of the Police;
- Death Certificate issued by the local authority or the authority authorized to issue the same under the Registration of Births and Deaths Act, 1969; and
- Claimant's statement in prescribed form
- In case due to any unnatural or other circumstances which are beyond Claimant's control, if the Claimant is unable to supply any of the above documents, then We may waive requirement of such documents provided We are totally satisfied with the investigation carried out to assess validity of the claim.

We are entitled to ask for additional documents (including Policy document) or information for the processing of the claim. We may also seek professional/independent assistance for speedy disposal of the claim. You and/or the Nominee/legal heir shall have no objection for Us to obtain any details/information to form an opinion about the claim.

If due to any act of God or State, strike, lock out, legislation or restriction by any government or any other authority or any other circumstances which are beyond our control, which restricts performance of our obligations under this Plan, then, this Plan will be wholly or partially suspended during the continuance of such force majeure conditions. Once the force majeure conditions ceases to exist, then, we will resume our obligations under this Plan for such period during which the force majeure conditions existed.

## PART D

### D.1 Free Look Cancellation

If You are not satisfied with any of the Terms and Conditions of the Policy, You may return the Policy document to the Company for cancellation within 30 days from the date You received the Policy. Upon such cancellation, You will be paid back Fund Value, plus mortality charge deducted, plus Policy administration charge deducted, less stamp duty, less medical reports cost, less proportionate mortality charge.

### D.2 Discontinuance of Policy Premium

If the premium remains unpaid at the expiry of the grace period, the treatment of the Policy will depend on whether the premium is discontinued within the first 5 years (lock in period) of the Policy or not.

#### D.2.1 Discontinuance of Premium within first five years of the Policy

The Company will send You a notice immediately after the expiry of the grace period (not later than 15 days from that date of expiry of the grace period) and provide You with the following options:

- (a) Revive the Policy within a revival period of 2 years or
- (b) Complete withdrawal (surrender) from the Policy without any life cover.

If You do not respond to the notice sent by the Company within a period of 30 days or opt for option (b) then the Policy will be discontinued and the Discontinuance Value (Total Fund Value less Discontinuance Charge of the year in which first premium was discontinued) will be shifted to the “Discontinuance Policy Fund”. The returns of the Discontinuance Policy Fund after deduction of the fund management charges is guaranteed not to be less than rate of return stipulated by IRDAI. The proceeds of the Discontinuance Policy Fund will be paid after the expiry of the lock in period.

If You choose option (a), your Policy will be discontinued. However, you can apply for revival of the discontinued Policy within two years from the date of discontinuance. If the Policy is not revived within this period, the proceeds will be paid out at end of lock in period. In the instances where the revival period is not completed at the end of lock in period, You can opt to receive the proceeds either upon the completion of lock in period or upon completion of revival period. If, in such cases, You do not exercise any option, then the proceeds will be Paid Upon the completion of lock in period.

The Policy shall be deemed to be in force as per the Terms and Conditions of the Policy till the Policyholder exercises his option or till the expiry of 30 days of notice period, whichever is earlier.

Discontinuance Policy Fund (SFIN:ULIF01403/09/10DISCONPF0138)

The asset allocation applicable under the fund is as follows:

Asset Class Instruments	Equities	Government Securities	Money Market
Allocation Proportion	0%	60% - 100%	0% - 40%

This fund will invest in a diversified portfolio of government securities and money market instruments of short term maturities. The main objective will be to generate relatively less volatile investment income which is at least the guaranteed return of 4% p.a. or as prescribed by IRDAI in the prevailing regulation. Any excess income earned over and above the minimum guaranteed rate will also be apportioned to the Discontinuance Policy Fund.

#### D.2.2 Discontinuance of Premium after first five years of the Policy

The Company will send You a notice immediately after the expiry of the grace period (not later than 15 days from that date of expiry of the grace period) and provide You with the following options:

- a) revive the Policy within a revival period of 2 years, or
- b) completely withdraw (surrender) from the Policy, or
- c) Convert the Policy into Paid-Up Policy, with Paid-up Sum Assured

Paid-Up Sum Assured = (Sum Assured) × (total number of premiums paid) / (original number of premiums payable as per the Terms and Conditions of the Policy).

If option (c) is opted, the Sum Assured will be reduced as per the formula mentioned above. The Company will continue deduction of applicable Policy charges and keep the Policy in Paid Up status until the Fund Value does not fall below the amount equivalent to one year's Plan Premium. Policies with Benefit Option 2 will cease to offer Premium Continuance Benefit and Income Benefit when converted into Paid-Up. The death benefit in Paid Up status will be at least 105% of the premiums paid.

If You opt for option (a), the Policy will be treated as in-force during the revival period. You can apply for revival of the discontinued Policy within two years from the date of discontinuance. During the revival period, the Policy is deemed to be in force with risk cover as per Terms and Conditions of the Policy and the Policy charges shall continue to be deducted.

If You do not respond to the notice sent by the Company within 30 days or opts for option (b) then the Policy will be surrendered and the Policy proceeds shall be paid out to You.

#### D.2.2 Revival Provisions

You have the option to revive a discontinued Policy within two consecutive years from the date of discontinuance of the Policy, subject to our underwriting requirements. At the time of revival:

- All due premiums which have not been paid shall be payable without charging any interest.
- Revival of the Policy will be subject to satisfactory evidence of insurability of the Life Assured.
- The Company shall add back the discontinuance charges levied at the time of discontinuance of the Policy.
- The proceeds from the Discontinuance Policy Fund shall re-allocated to the Segregated funds chosen by You based on the prevailing unit prices.
- All benefits under the Policy will become payable to You as per the Terms and Conditions of the Policy from the effective date of revival.
- Policy administration charges as applicable during the discontinuance period shall be levied.



## PART E

### E.1 Premium Allocation Charge - Zero

### E.2 Fund Management Charge

This is a charge levied as a percentage of the value of assets and is appropriated by adjusting the Net Asset Value every day, when the unit linked funds are priced. The applicable service tax and education cess will also be deducted along with the charge.

Secure Fund	1.00% p.a.
Debt Fund	1.10% p.a.
Blue Chip Equity Fund	1.35% p.a.
Discontinuance Policy Fund	0.50% p.a.

### E.3 Policy Administration Charge

The charge is ₹100 per month levied from the Policy fund at the beginning of every Policy month by cancelling units. The applicable service tax and education cess will also be deducted by cancellation of units.

### E.4 Discontinuance charge

It will depend on the year in which the Policy has been discontinued. The applicable service tax and education cess will also be deducted.

Where the Policy is discontinued during the Policy year	Discontinuance Charges	
	Annualised Premium upto ₹25,000	Annualised Premium above ₹25,000
1	Lower of 20% (AP or FV) subject to maximum of ₹3,000	Lower of 6% (AP or FV) subject to maximum of ₹6,000
2	Lower of 15% (AP or FV) subject to maximum of ₹2,000	Lower of 4% (AP or FV) subject to maximum of ₹5,000
3	Lower of 10% (AP or FV) subject to maximum of ₹1,500	Lower of 3% (AP or FV) subject to maximum of ₹4,000
4	Lower of 5% (AP or FV) subject to maximum of ₹1,000	Lower of 2% (AP or FV) subject to maximum of ₹2,000
5 onwards	Nil	Nil

AP – Annualised premium

FV – Fund value

## E.5 Mortality Charge

Female mortality rates are slightly lower than males. The mortality charge is deducted by cancellation of units at the beginning of each month of your Policy. It will depend on your age and the Sum at Risk which is defined as:

Benefit Option	Sum at Risk
1	<ul style="list-style-type: none"> <li>Higher of [Sum Assured] or [105% of all premiums paid to date] in excess of Fund Value.</li> <li>For Top-Up, it is defined as Top-Up Sum Assured in excess of the Top Up Fund Value.</li> </ul> <p>For Paid-Up Policies, Sum Assured = Paid Up Sum Assured for the above definitions of Sum at Risk.</p>
2	<ul style="list-style-type: none"> <li>Higher of [Sum Assured] or [105% of all premiums paid to date].</li> <li>For Premium Continuance Benefit: Present value of all future outstanding premiums. Sum at Risk factors are given ahead.</li> <li>For Income Benefit: Present value of all future Income benefits. Sum at Risk factors are given ahead.</li> <li>For Top-Up, it is defined as Top-Up Sum Assured.</li> </ul> <p>For Paid-Up Policies, Sum Assured = Paid Up Sum Assured for the above definitions of Sum at Risk.</p>

Mortality charges are provided at the end of section E of this document. The applicable service tax and education cess will also be deducted by cancellation of units. Smokers/Substandard lives may be charged extra as per Board approved underwriting guidelines of the Company.

## E.6 Miscellaneous Charges

Facility	Number of Free Transactions	Charges (₹)
Switch	Four in a Policy year	Any extra switches will be charged 0.1% of amount switched per switch subject to a cap of ₹200
Premium Redirection	Two times in a Policy year	Any extra Premium Redirection will be charged ₹100
Partial Withdrawal	Four times in a Policy year	Any extra Partial Withdrawal will be charged ₹200 per withdrawal.

The Miscellaneous Charges given above can be increased by the Company upon approval from IRDAI but shall not exceed ₹500. The applicable service tax and education cess will also be charged.

Mortality Charge per annum per 1000 of Sum at Risk. Age refers to Attained Age of the Life Assured.

Age (last birthday)	Male	Female	Age (last birthday)	Male	Female
7	0.5836	0.58360	41	1.7933	1.40700
8	0.4732	0.58360	42	1.9642	1.51790
9	0.4075	0.58360	43	2.1621	1.64570
10	0.3798	0.58360	44	2.3914	1.79330
11	0.3830	0.47320	45	2.6558	1.96420
12	0.4104	0.40750	46	2.9590	2.16210
13	0.4546	0.37980	47	3.3027	2.39140
14	0.5084	0.38300	48	3.6864	2.65580
15	0.5659	0.41040	49	4.1077	2.95900
16	0.6226	0.45460	50	4.5625	3.30270
17	0.6748	0.50840	51	5.0459	3.68640
18	0.7208	0.56590	52	5.5532	4.10770
19	0.7593	0.62260	53	6.0804	4.56250
20	0.7901	0.67480	54	6.6253	5.04590
21	0.8142	0.72080	55	7.1883	5.55320
22	0.8326	0.75930	56	7.7733	6.08040
23	0.8461	0.79010	57	8.3862	6.62530
24	0.8564	0.81420	58	9.0355	7.18830
25	0.8652	0.83260	59	9.7311	7.77330
26	0.8737	0.84610	60	10.4843	8.38620
27	0.8838	0.85640	61	11.3070	9.03550
28	0.8969	0.86520	62	12.2108	9.73110
29	0.9139	0.87370	63	13.2068	10.48430
30	0.9358	0.88380	64	14.3058	11.30700
31	0.9636	0.89690	65	15.5181	12.21080
32	0.9986	0.91390	66	16.85360	13.20680
33	1.0417	0.93580	67	18.32230	14.30580
34	1.0935	0.96360	68	19.93430	15.51810
35	1.1550	0.99860	69	21.70000	16.85360
36	1.2270	1.04170	70	23.63090	18.32230
37	1.3105	1.09350			
38	1.4070	1.15500			
39	1.5179	1.22700			
40	1.6457	1.31050			

Sum at Risk factor Premium Continuance Benefit Charges (for both Male and Female)

Monthly Premium Continuance Benefit Charge = (Mortality Charge as per the table depending on Attained age / 12) x [Annualised Premium x (Sum at Risk factor – 0.5)]/ 1000

Additional Savings Benefit Sum at Risk factors						
Policy Year	Premium Payment Term (years)					
	5	7	10	15	20	25
1	4.55	6.08	8.11	10.90	13.09	14.80
2	3.72	5.33	7.46	10.39	12.69	14.49
3	2.86	4.55	6.79	9.86	12.27	14.16
4	1.95	3.72	6.08	9.31	11.84	13.82
5	1.00	2.86	5.33	8.72	11.38	13.46
6		1.95	4.55	8.11	10.90	13.09
7		1.00	3.72	7.46	10.39	12.69
8			2.86	6.79	9.86	12.27
9			1.95	6.08	9.31	11.84
10			1.00	5.33	8.72	11.38
11				4.55	8.11	10.90
12				3.72	7.46	10.39
13				2.86	6.79	9.86
14				1.95	6.08	9.31
15				1.00	5.33	8.72
16					4.55	8.11
17					3.72	7.46
18					2.86	6.79
19					1.95	6.08
20					1.00	5.33
21						4.55
22						3.72
23						2.86
24						1.95
25						1.00

Sum at Risk factor Income Benefit Charges (for both Male and Female)

Monthly Income Benefit Charge = (Mortality Charge as per the table depending on Attained age / 12) x [Annualised Premium x (Sum at Risk factor – 0.5)]/ 1000

Income Benefit Sum at Risk factors			
Policy Year	Policy Term (years)		
	15	20	25
1	10.90	13.09	14.80
2	10.39	12.69	14.49
3	9.86	12.27	14.16
4	9.31	11.84	13.82
5	8.72	11.38	13.46
6	8.11	10.90	13.09
7	7.46	10.39	12.69
8	6.79	9.86	12.27
9	6.08	9.31	11.84
10	5.33	8.72	11.38
11	4.55	8.11	10.90
12	3.72	7.46	10.39
13	2.86	6.79	9.86
14	1.95	6.08	9.31
15	1.00	5.33	8.72
16		4.55	8.11
17		3.72	7.46
18		2.86	6.79
19		1.95	6.08
20		1.00	5.33
21			4.55
22			3.72
23			2.86
24			1.95
25			1.00

# PART F

## F.1 Assignment & Nomination

### (i) Assignment (Allowed as per Section 38 of Insurance Act 1938)

The Policyholder may assign the benefits under the Policy in favour of any person. Policy holder is required to give a written notice to Us together with the endorsement or instrument duly attested or a copy thereof duly certified to be correct by You and the assignee.

### (ii) Nomination (Allowed as per Section 39 of Insurance Act 1938)

The Policyholder may at any time during the Policy Term appoint any person as Nominee for receiving the payment of the benefits under the Policy. Where the Nominee is a minor, the Policy holder is required to appoint a person who is not a minor (the "Appointee") to receive the benefits under the Policy. Nomination can be made by communicating the same in writing to Us. The Nominee can be changed by the Policy holder at any time during the term of the Policy and any such change will vacate any earlier nomination. Nomination will be cancelled upon registration of assignment.

Assignment or nomination will not be permitted where the Policy is issued under the Married Women's Property Act, 1874.

In the absence of a nomination or assignment, the Death Benefit will be paid to the Policy holder's legal heir subject to production of necessary documentation evidencing title to the benefits under the Policy.

We do not express any opinion on the validity or legality of the assignment or nomination. The Assignment and Nomination is effective against Us only upon registration by Us.

## F.2 Fraud or misrepresentation

In case of fraud or misrepresentation in the proposal of insurance or in the documents submitted by you in support of the proposal of insurance, we reserve the right to cancel the Policy by paying Surrender Value, subject to such concealment, non-disclosure, fraud or misrepresentation being established by Us in accordance with Section 45 of the Insurance Act, 1938.

## F.3 Misstatement of age or gender

The Premium and Charges payable under the Policy have been calculated on the basis of the age and / or gender of the Life Assured as declared in the Proposal Form. Without prejudice to the Company's other rights and remedies including those under the Insurance Act, 1938, if the age or gender of the Life Assured has been misstated or incorrectly mentioned, then the Company will re-calculate the Charges using the correct Age and gender. This may be done in any of the following manner:

- a) If the correct Age is higher than the Age declared in the Proposal Form, the Charges payable under the Policy shall be altered corresponding to the correct Age of the Life Assured from the

Date of Commencement of Policy and You shall pay to the Company, the difference between the Charges charged at such lower rate (more specifically mentioned in section E) and such re-calculated higher rate retrospectively from the Date of Commencement of Policy.

- b) If the correct age of the Life Assured is lower than the age declared in the Proposal Form, the Charges payable under the Policy shall be altered corresponding to the correct age of the Life Assured from the Date of Commencement of Policy and the Company may adjust the difference by adding Units corresponding to the difference between the Charges charged at such higher rate and the Charges chargeable at such re-calculated lower rate retrospectively from the Date of Commencement of Policy.
- c) If at the correct age, the Life Assured was not insurable under the Policy, then Company may terminate the Policy and refund the Total Fund value less all the applicable charges.

Notwithstanding the above the Company may terminate the Policy and refund the Fund Value less all the applicable Charges.

#### F.4 Electronic Transactions

You shall adhere to and comply with all such terms and conditions as We may prescribe from time to time. Any transactions carried out by or through any electronic facilities or means established by or on behalf of Us, in respect of the Policy, shall constitute legally binding and valid transactions on You.

#### F.5 Taxation

The tax benefits and Benefits payable under the Policy would be as per the prevailing provisions of the tax laws in India. We reserve the right to recover statutory levies including Service Tax (plus applicable education cess) by way of adjustment to the charges payable or make necessary recoveries from the benefits payable under the Policy.

#### F.6 Valuation of Segregated Fund

The Unit Price (NAV) of each fund shall be determined daily as per the regulations/guidelines issued by IRDAI from time to time (the 'Valuation Date'). As per the current guidelines issued by IRDAI, We will determine the Unit Price of each Fund daily as per the following formula:

[Market Value of investment held by the Fund + Value of current assets – Value of current liabilities and provisions, if any] Divided by [Number of units existing on the Valuation Date (before creation/Redemption of units)]

#### F.7 Segregated Fund Addition

The Company may from time to time create and add new Segregated Funds with different Charges with the approval of the IRDAI and consequently, new Segregated Funds may be made available to the policyholder. All provisions of the Policy will apply to such new Segregated Funds unless stated otherwise.

#### F.8 Segregated Fund Closure/ Modification

The Company reserves the right to close/ modify any Segregated Fund at any time by giving a three month written notice of its intention to close/ modify the Segregated Fund. From the date of such closure, the Company will cease to create or cancel Units in the said Segregated Fund ('Closing Segregated Fund'). Closure/ modification of a Segregated Fund will be on the happening of an event which in the sole opinion of the Company requires the said Segregated Fund to be closed/ modified and such closure/ modification of a Segregated Fund shall be subject to prior approval of IRDAI. In the event of a modification of a Segregated Fund the Company will inform the impacted Policyholders of the change and provide all other fund options in the event the Policyholder wishes to choose a different

## Segregated Fund.

In the event of a Segregated Fund closure, the Company will ensure a Segregated Fund with the same investment objective as the closed fund is available to the policyholders or a new fund with the same investment objective will be provided by the Company post approval from the IRDAI ('Replacement Segregated Fund' in either case). In case the 'Replacement Segregated Fund' is not available the default fund to be used in this case will be the Secure Fund. The Company will inform the Policyholder who have money in the Closing Segregated Fund of the Replacement Segregated Fund and all other fund options in the event the Policyholder wishes to choose a different investment strategy. Upon receiving policy holder's confirmation, units in the Closing Segregated Fund allocated to the Policy will be cancelled on the last Valuation Date of the Closing Segregated Fund. The Company will create Units in the Replacement Segregated Fund or other such fund as chosen by the Policy holder, with proceeds from the cancellation of the Units in the Closing Segregated Fund on the last Valuation Date of the Closing Segregated Fund. No switching charge will be applied in case of closure/modification of fund.

In the event of no response within the stipulated timeframe, the Company's default option will be to switch Policy funds from the Closing Segregated Fund to the default fund (which is the Secure Fund), and change Allocation Proportion in such a way that the percentage of allocation of premium to the Closing Segregated Fund is now allocated to the default fund.

### F.9 Switch amongst Segregated Funds

You can apply for Switch of funds from one Segregated Fund to another/ others through a Switch Application Form or the Switch Process as and when available and specified by the Company. The facility of Switch would be subject to the administrative rules of the Company, existing at the time of the Switch application. Switching of funds will be effected at the Unit Price declared on the date the Switch application is received and accepted by the Company before Cut-off time and on the next day's Unit Price declared if the application is received and accepted at the Company after the Cut-off time.



## PART G

### G.1 Notices

Any notice, direction or instruction given to Us under the Policy shall be in writing and delivered by hand, post, facsimile or from registered electronic mail to:

#### Customer Service Department

Aegon Life Insurance Company Limited, Building No. 3, Third floor, Unit No. 1, NESCO IT Park, Western Express Highway, Goregaon (E), Mumbai - 400 063.

Toll free number: 1800 209 9090

E-mail: [customer.care@aegonlife.com](mailto:customer.care@aegonlife.com) or such other address as may be informed by Us.

Any notice, direction or instruction to be given by Us under the Policy shall be in writing and delivered by hand, post, courier, facsimile or registered electronic mail at the updated address in the records of the Company.

You are requested to communicate any change in address immediately to enable us to serve you promptly.

### G.2 Applicable Law

This Policy is subject to the provisions of the laws of India.

### G.3 Currency and Payment

All payments to or by the Company will be in Indian rupees and shall be in accordance with the prevailing regulations and other relevant laws of India.

### G.4 Consumer Grievance Cell:

You may reach us for any complaints/ grievances in any of the following manner :

- a) By calling the Toll Free Number 1800 209 9090 between 9 a.m. to 7 p.m. Monday to Saturday (except National Holidays) or
- b) By writing an e-mail to [customer.care@aegonlife.com](mailto:customer.care@aegonlife.com) or
- c) By registering the grievance on the website of the Company at [www.aegonlife.com](http://www.aegonlife.com) or

In case of disagreement with the response of the Company or of no-response within 15 days, the grievance can be escalated to Grievance Redressal Officer by an e-mail to [grievance.manager@aegonlife.com](mailto:grievance.manager@aegonlife.com) or written letter at:

#### Grievance Redressal Officer

Aegon Life Insurance Company Limited, Building No. 3, Third floor, Unit No. 1, NESCO IT Park, Western Express Highway, Goregaon (E), Mumbai - 400 063.

## G.5 Insurance Ombudsman

In case You are not satisfied with the decision/resolution or have not received any reply to Your complaints/ grievances within a period of 15 days, You may approach the Insurance Ombudsman, if your complaint pertains to:

- (i) Any partial or total repudiation of claim;
- (ii) Premium paid or payable in terms of the Policy;
- (iii) Delay in settlement of claim;
- (iv) Non-issue of Policy document to customers after receipt of Installment premiums
- (v) Any claim related dispute on the legal construction of the policies in so far as such disputes relate to claims.

The addresses of the Insurance Ombudsmen are enclosed with this policy document. You are requested to visit the website of the Company for updated information on contact details of the Company and Insurance Ombudsmen.

XXXXXXXXXXXXXXXXXXXXX  
 XXXXXXXXXXXXXXXXXXXXX  
 XXXXXXXXXXXXXXXXXXXXX  
 XXXXXXXXXXXXXXXXXXXXX  
 XXXXXXXXXXXXXXXXXXXXX  
 XXXXXXXXXXXXXXXXXXXXX

## First Premium Receipt

Product Name	: Aegon Life iMaximize Insurance Plan (UIN: I38L030V03)
Branch	:
Date	:
Policy Number	:
Agent	:

Name of the Policyholder : <XXXXXXXXXXXX>

Premium amount Rs. (In Figures)	:
Total Premium amount Rs. (In Figures)	:
Total Premium amount Rs. (In Words)	:
Next Premium Due Date	:
Frequency Mode	:
Date of Commencement	:

Summery Unit Statement of Statement Generation Date: 00/00/0000				
Fund Name	Opening Balance as of 00/00/0000	Unit deduction since 00/00/0000	Unit added since 00/00/0000	Current Unit Balance as on 00/00/0000
Fund Name	0	0000	0000	0000
Blue Chip Equity Fund (SFIN:ULIF01511/02/14BLUECHIP EQ0138)	0	0000	0000	0000
Debt Fund (SFIN:ULIF00405/07/08 DB0138)	0	0000	0000	0000
Secure Fund (SFIN:ULIF00505/07/08 SF 0138)	0	0000	0000	0000

The revenue stamp of Re.1 (Re. One only) is paid via certificate no. Mudrank 2010/1413/PK361/MI dated 31-03-2011



### Authorized Signatory

Eligible for benefits as applicable under the prevailing Income Tax Aact, 1961 premium paid under the plan is eligible for Tax Benefits u/s 80 c<sup>#</sup>

\* Service tax applicable as per prevailing service tax law. Service tax registration number: AAGCA3203JST001 under category Life Insurance.

<sup>#</sup>Tax Benefit is subject to provisions of Income Tax Act

IRDAI Company Registration Number:138

# Complaints Redressal Procedure

- In case you have any query, complaint or grievance, you can get in touch with us at any of the following point of contact:
  - Call us on 1800 209 9090 anytime from 9 am to 7 pm, Monday to Saturday
  - Email us at [customer.care@aegonlife.com](mailto:customer.care@aegonlife.com)
  - You can also write to us at: Customer Service  
Aegon Life Insurance Company Limited, Building No. 3, Third Floor, Unit No. 1, Nesco IT Park, Western Express Highway, Goregaon (E), Mumbai – 400063
- In case you are not satisfied with the decision or response of the above office, or have not received any response within 10 days, you may escalate the complaint to our Grievance Manager. You can email at [grievance.manager@aegonlife.com](mailto:grievance.manager@aegonlife.com)

OR

Write at: Grievance Manager

Aegon Life Insurance Company Limited Building No. 3, Third Floor, Unit No. 1, Nesco IT Park, Western Express Highway, Goregaon (E), Mumbai – 400063

- In an unlikely event that you are not satisfied with the decision or resolution that we have offered, you may approach the Insurance Ombudsman, if your grievance pertains to:
  - Insurance claim that has been rejected or dispute of a claim on legal construction of the policy
  - Delay in settlement of claim
  - Dispute with regard to Premium
  - Non-Receipt of your Insurance Document

List and addresses of the Insurance Ombudsman is given at the end of this policy document for your ready reference. The updated list can also be accessed from our website [www.aegonlife.com](http://www.aegonlife.com)

- The complaint should be made in writing duly, signed by the complainant or by his legal heirs, with full details of the complaint and the contact information of complainant.
- As per provision 13(3) of the Redressal of Public Grievances Rules 1998, the complaint to the Ombudsman can be made in the following situations:
  - Only if the grievance has been rejected by the Grievance Redressal Machinery of the Insurer
  - Within a period of one year from the date of rejection by the insurer
  - If it is not simultaneously under any litigation

# Unit Statement

Statement Generation Date	: XXXXXXXXXXXXXXXX
Period From	: XXXXXXXXXXXXXXXX
Policy Number	: XXXXXXXXXXXXXXXX
Product Name	: AEGON Religare iMaximize InsurancePlan (UIN: I38L030V03)
Policyholder	: XXXXXXXXXXXXXXXX
Life Assured	: XXXXXXXXXXXXXXXX
Date of Commencement	: XXXXXXXXXXXXXXXX
Premium Amount - Rs. (in figures)	: XXXXXXXXXXXXXXXX

Summery Unit Statement of Statement Generation Date: 00/00/0000				
Fund Name	Opening Balance as of 00/00/0000	Unit deduction since 00/00/0000	Unit added since 00/00/0000	Current Unit Balance as on 00/00/0000
Blue Chip Equity Fund (SFIN:ULIF01511/02/14BLUECHIP EQ0138)	0	0000	0000	0000
Debt Fund (SFIN:ULIF00405/07/08 DB0138)	0	0000	0000	0000
Secure Fund (SFIN:ULIF00505/07/08 SF 0138)	0	0000	0000	0000

## Detailed Transaction

Date	Fund Name	Transaction Type	Amount (Rs..)	NAV	No. of Units
00/00/000	DEBT FUND IMAXIMIZE I SFIN:ULIF00405/07/08DB0138	INITIAL DEPOSIT	xxxx	xxxx	xxxx
00/00/000	SECURE FUND IMAXIMIZE I SFIN:ULIF00505/07/08SF0138	INITIAL DEPOSIT	xxxx	xxxx	xxxx
00/00/000	BLUE CHIP FUND IMAXIMIZE I SFIN:ULIF01511/02/14BLUECHIPPE0138	INITIAL DEPOSIT	xxxx	xxxx	xxxx
00/00/000	BLUE CHIP FUND IMAXIMIZE I SFIN:ULIF01511/02/14BLUECHIPPE0138	PREMIUM BY DEDUCTION	xxxx	xxxx	xxxx
00/00/000	SECURE FUND IMAXIMIZE I SFIN:ULIF00505/07/08SF0138	PREMIUM BY DEDUCTION	xxxx	xxxx	xxxx
00/00/000	DEBT FUND IMAXIMIZE I SFIN:ULIF00405/07/08DB0138	PREMIUM BY DEDUCTION	xxxx	xxxx	xxxx

## Annexure I

### A. Section 38 - Assignment and Transfer of Insurance Policies

Assignment or transfer of a life insurance policy is as below in accordance with Section 38 of the Insurance Act, 1938 as amended from time to time. The extant provisions in this regard are as follows:

01. This policy may be transferred/assigned, wholly or in part, with or without consideration.
02. An Assignment may be effected in a policy by an endorsement upon the policy itself or by a separate instrument under notice to the Insurer.
03. The instrument of assignment should indicate the fact of transfer or assignment and the reasons for the assignment or transfer, antecedents of the assignee and terms on which assignment is made.
04. The assignment must be signed by the transferor or assignor or duly authorized agent and attested by at least one witness.
05. The transfer of assignment shall not be operative as against an insurer until a notice in writing of the transfer or assignment and either the said endorsement or instrument itself or copy there of certified to be correct by both transferor and transferee or their duly authorised agents have been delivered to the insurer.
06. Fee to be paid for assignment or transfer can be specified by the Authority through Regulations.
07. On receipt of notice with fee, the insurer should Grant a written acknowledgement of receipt of notice. Such notice shall be conclusive evidence against the insurer of duly receiving the notice.
08. If the insurer maintains one or more places of business, such notices shall be delivered only at the place where the policy is being serviced.
09. The insurer may accept or decline to act upon any transfer or assignment or endorsement, if it has sufficient reasons to believe that it is
  - a. not bonafide or
  - b. not in the interest of the policyholder or
  - c. not in public interest or
  - d. is for the purpose of trading of the insurance policy.
10. Before refusing to act upon endorsement, the Insurer should record the reasons in writing and communicate the same in writing to Policyholder within 30 days from the date of policyholder giving a notice of transfer or assignment.

11. In case of refusal to act upon the endorsement by the Insurer, any person aggrieved by the refusal may prefer a claim to IRDAI within 30 days of receipt of the refusal letter from the Insurer.
12. The priority of claims of persons interested in an insurance policy would depend on the date on which the notices of assignment or transfer is delivered to the insurer; where there are more than one instruments of transfer or assignment, the priority will depend on dates of delivery of such notices. Any dispute in this regard as to priority should be referred to Authority.
13. Every assignment or transfer shall be deemed to be absolute assignment or transfer and the assignee or transferee shall be deemed to be absolute assignee or transferee, except
  - a. where assignment or transfer is subject to terms and conditions of transfer or assignment  
OR
  - b. where the transfer or assignment is made upon condition that
    - i. the proceeds under the policy shall become payable to policyholder or nominee(s) in the event of assignee or transferee dying before the insured OR
    - ii. the insured surviving the term of the policySuch conditional assignee will not be entitled to obtain a loan on policy or surrender the policy. This provision will prevail notwithstanding any law or custom having force of law which is contrary to the above position.
14. In other cases, the insurer shall, subject to terms and conditions of assignment, recognize the transferee or assignee named in the notice as the absolute transferee or assignee and such person
  - a. shall be subject to all liabilities and equities to which the transferor or assignor was subject to at the date of transfer or assignment and
  - b. may institute any proceedings in relation to the policy
  - c. obtain loan under the policy or surrender the policy without obtaining the consent of the transferor or assignor or making him a party to the proceedings
15. Any rights and remedies of an assignee or transferee of a life insurance policy under an assignment or transfer effected before commencement of the Insurance Laws (Amendment) Act, 2015 shall not be affected by this section.

**[ Disclaimer : This is not a comprehensive list as mentioned in Insurance Act, 1938 (as amended from time to time), but only a simplified version prepared for general information. Policy Holders are advised to refer to the Act for complete and accurate details]**

## Annexure 2

### B. Section 39 - Nomination

Nomination of a life insurance Policy is as below in accordance with Section 39 of the Insurance Act, 1938 as amended from time to time. The extant provisions in this regard are as follows:

01. The policyholder of a life insurance on his own life may nominate a person or persons to whom money secured by the policy shall be paid in the event of his death.
02. Where the nominee is a minor, the policyholder may appoint any person to receive the money secured by the policy in the event of policyholder's death during the minority of the nominee. The manner of appointment to be laid down by the insurer.
03. Nomination can be made at any time before the maturity of the policy.
04. Nomination may be incorporated in the text of the policy itself or may be endorsed on the policy communicated to the insurer and can be registered by the insurer in the records relating to the policy.
05. Nomination can be cancelled or changed at any time before policy matures, by an endorsement or a further endorsement or a will as the case may be.
06. A notice in writing of Change or Cancellation of nomination must be delivered to the insurer for the insurer to be liable to such nominee. Otherwise, insurer will not be liable if a bonafide payment is made to the person named in the text of the policy or in the registered records of the insurer.
07. Fee to be paid to the insurer for registering change or cancellation of a nomination can be specified by the Authority through Regulations.
08. On receipt of notice with fee, the insurer should grant a written acknowledgement to the policyholder of having registered a nomination or cancellation or change thereof.
09. A transfer or assignment made in accordance with Section 38 shall automatically cancel the nomination except in case of assignment to the insurer or other transferee or assignee for purpose of loan or against security or its reassignment after repayment. In such case, the nomination will not get cancelled to the extent of insurer's or transferee's or assignee's interest in the policy. The nomination will get revived on repayment of the loan.
10. The right of any creditor to be paid out of the proceeds of any policy of life insurance shall not be affected by the nomination.
11. In case of nomination by policyholder whose life is insured, if the nominees die before the policyholder, the proceeds are payable to policyholder or his heirs or legal representatives or holder of succession certificate.
12. In case nominee(s) survive the person whose life is insured, the amount secured by the policy shall be paid to such survivor(s).



13. Where the policyholder whose life is insured nominates his

- a. parents or
- b. spouse or
- c. children or
- d. spouse and children
- e. or any of them

the nominees are beneficially entitled to the amount payable by the insurer to the policyholder unless it is proved that policyholder could not have conferred such beneficial title on the nominee having regard to the nature of his title.

14. If nominee(s) die after the policyholder but before his share of the amount secured under the policy is paid, the share of the expired nominee(s) shall be payable to the heirs or legal representative of the nominee or holder of succession certificate of such nominee(s).
15. The provisions of sub-section 7 and 8 (13 and 14 above) shall apply to all life insurance policies maturing for payment after the amendment of Insurance Act, 1938 (i.e 26.12.2014).
16. If policyholder dies after maturity but the proceeds and benefit of the policy has not been paid to him because of his death, his nominee(s) shall be entitled to the proceeds and benefit of the policy.
17. The provisions of Section 39 are not applicable to any life insurance policy to which Section 6 of Married Women's Property Act, 1874 applies or has at any time applied except where before or after Insurance Act, 1938 (as amended from time to time), a nomination is made in favour of spouse or children or spouse and children whether or not on the face of the policy it is mentioned that it is made under Section 39. Where nomination is intended to be made to spouse or children or spouse and children under Section 6 of MWP Act, it should be specifically mentioned on the policy. In such a case only, the provisions of Section 39 will not apply.

**[ Disclaimer :This is not a comprehensive list as mentioned in Insurance Act 1938 (as amended from time to time), but only a simplified version prepared for general information. Policy Holders are advised to refer to the Act for complete and accurate details. ]**

## Annexure 3

### **C. Section 45 – Policy shall not be called in question on the ground of mis-statement after three years**

Provisions regarding policy not being called into question in terms of Section 45 of the Insurance Act, 1938, as amended from time to time are as follows:

01. No Policy of Life Insurance shall be called in question on any ground whatsoever after expiry of 3 yrs from
  - a. the date of issuance of policy or
  - b. the date of commencement of risk or
  - c. the date of revival of policy or
  - d. the date of rider to the policywhichever is later.
02. On the ground of fraud, a policy of Life Insurance may be called in question within 3 years from
  - a. the date of issuance of policy or
  - b. the date of commencement of risk or
  - c. the date of revival of policy or
  - d. the date of rider to the policywhichever is later.

For this, the insurer should communicate in writing to the insured or legal representative or nominee or assignees of insured, as applicable, mentioning the ground and materials on which such decision is based.

03. Fraud means any of the following acts committed by insured or by his agent, with the intent to deceive the insurer or to induce the insurer to issue a life insurance policy:
  - a. The suggestion, as a fact of that which is not true and which the insured does not believe to be true;
  - b. The active concealment of a fact by the insured having knowledge or belief of the fact;
  - c. Any other act fitted to deceive; and
  - d. Any such act or omission as the law specifically declares to be fraudulent.
04. Mere silence is not fraud unless, depending on circumstances of the case, it is the duty of the insured or his agent keeping silence to speak or silence is in itself equivalent to speak.
05. No Insurer shall repudiate a life insurance Policy on the ground of Fraud, if the Insured / beneficiary can prove that the misstatement was true to the best of his knowledge and there

was no deliberate intention to suppress the fact or that such mis-statement of or suppression of material fact are within the knowledge of the insurer. Onus of disproving is upon the policyholder, if alive, or beneficiaries.

06. Life insurance Policy can be called in question within 3 years on the ground that any statement of or suppression of a fact material to expectancy of life of the insured was incorrectly made in the proposal or other document basis which policy was issued or revived or rider issued. For this, the insurer should communicate in writing to the insured or legal representative or nominee or assignees of insured, as applicable, mentioning the ground and materials on which decision to repudiate the policy of life insurance is based.
07. In case repudiation is on ground of mis-statement and not on fraud, the premium collected on policy till the date of repudiation shall be paid to the insured or legal representative or nominee or assignees of insured, within a period of 90 days from the date of repudiation.
08. Fact shall not be considered material unless it has a direct bearing on the risk undertaken by the insurer. The onus is on insurer to show that if the insurer had been aware of the said fact, no life insurance policy would have been issued to the insured.
09. The insurer can call for proof of age at any time if he is entitled to do so and no policy shall be deemed to be called in question merely because the terms of the policy are adjusted on subsequent proof of age of life insured. So, this Section will not be applicable for questioning age or adjustment based on proof of age submitted subsequently.

**[ Disclaimer :This is not a comprehensive list as mentioned Insurance Act 1938 (as amended from time to time)but, only a simplified version prepared for general information. Policy Holders are advised to refer to the Act for complete and accurate details.]**

IRDAI Company Registration Number:138

Registered Office:Aegon Life Insurance  
Company Limited. Building No.3,Third Floor,  
Unit No.1, NESCO IT Park,Western Express  
Highway Goregaon (E), Mumbai - 400063.

Tel: +91 226118 0100,  
Fax: +91 2261180200/300,  
Corporate Identity No:  
U66010MH2007PLC169110.

☎ 1800 209 90 90 (Toll free, 9 am to 7 pm, Mon to Sat)  
☎ MENU to 9221-010101  
☎ customer.care@aegonlife.com  
🌐 www.aegonlife.com