CUSTOMER INFORMATION SHEET/KNOW YOUR POLICY

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

Sl No	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy Clause Number
1	Name of Insurance Product/Policy	ICICI Life Non-Linked Group Critical Illness Rider	
2	Member Identification Number	<Member Identification Number>	
3	Type of Insurance/ Policy	Benefit A Non-Participating, Non-Linked Health Group Pure Risk Renewable Rider	
4	Sum Insured (Basis) (Along with amount)	Sum Assured - <Sum Assured>	Rider Schedule
5	Policy Coverage (What the policy covers?) (Policy Clause Number/s)	a. Additional Critical Illness benefit options: Under this Benefit Option, upon confirmatory diagnosis of any of the covered Critical Illness during the Coverage Term, the Additional Critical Illness Sum Assured of the Member prevailing at the time of diagnosis will be paid to the Claimant, provided the Rider is in force. Upon payment of the Additional Critical Illness Sum Assured to the Claimant by the Company, the Rider shall terminate for the Member and the Base Sum Assured under the Base Member Policy remains unchanged. Claim payment will be made only if the member has survived for minimum of 30 days after the date of first diagnosis of Critical Illness. The packages offered under this Rider are as follows: • Basic – Covers 4 Critical Illnesses (CI)	Part C, Clause 1

		• Essential – Covers 7 Critical Illnesses (CI) • Classic – Covers 19 Critical Illnesses (CI) • Comprehensive – Covers 33 Critical Illnesses (CI) The package applicable to you is mentioned in the Rider schedule. For more details please refer to the policy document (Part C, Clause 1) under the section 'Specimen Policy Document' available on our website at https://www.icicilife.com/services/download-centre.html	
6	Exclusions (what the policy does not cover)	a. No claim shall be payable in respect of any Critical Illness that a Member is diagnosed with or for which care, treatment or advice was recommended by or received from a physician, or which first manifested itself or was contracted within 90 days from the Date of Commencement of Cover (i.e. during the Waiting Period). In the event of occurrence of any of the scenarios mentioned above, or in case of a claim, where it is established that the Member was diagnosed with any one of the covered Critical Illness during the Waiting Period for which a critical illness claim could have been made, 100% of the premiums will be refunded and the Member Rider policy will terminate. b. If the Member is covered under the Additional Critical Illness Benefit Option and dies within 30 days of the diagnosis of the covered Critical Illness i.e before the end of the Survival Period no claim will be payable However,100% of the premium will be refunded and the Member Rider policy will terminate.	Part C, Clause 2

		c. Pre-Existing Disease: Pre-existing Disease means any condition, ailment, injury or disease: i)That is/are diagnosed by a physician not more than 36 months prior to the date of commencement of this Rider issued by the insurer or ii)For which medical advice or treatment was recommended by, or received from, a physician not more than 36 months prior to the date of commencement of this Rider or its reinstatement. d. If the Critical Illness for which the claims is raised is due to any intentional self inflicted injury, suicide or attempted suicide. e. If any Critical Illness suffered by the Member was caused directly or indirectly by influence of drugs, alcohol, narcotics or psychotropic substances unless taken in accordance with the lawful directions and prescriptions of a registered medical practitioner. f. If the Critical Illness for which the claim is raised is due to engaging in or taking part in hazardous activities, including but not limited to, diving or riding or any kind of race; martial arts; hunting; mountaineering; parachuting; bungee jumping; underwater activities involving the use of breathing apparatus or not. g. If the Critical Illness for which the claim is raised is on account of the Member participating in any criminal or unlawful act h. For any Critical Illness arising out of nuclear contamination; the radioactive, explosive or hazardous nature of nuclear fuel materials or property contaminated by nuclear fuel materials or accident arising from such nature. i. For any Critical Illness arising either as a result of war, invasion, act of foreign enemy,	

		hostilities (whether war be declared or not), armed or unarmed truce, civil war, mutiny, rebellion, revolution, insurrection, terrorism, military or usurped power, riot or civil commotion, strikes or participation in any naval, military or air force operation during peace time. j. For any Critical Illness arising from participation by the Member in any flying activity, except as a bona fide, fare-paying passenger and aviation industry employee like pilot or cabin crew of a recognized airline on regular routes and on a scheduled timetable. k. Any Critical Illness which is due to an external congenital anomaly which is not as a consequence of a genetic disorder. l. Failure to seek medical advice or treatment by a medical practitioner leading to occurrence of the Critical Illness. Apart from these permanent exclusions, there are exclusions with respect to each Critical Illness which are listed in CI definitions. Please refer to the policy document (Part C, Clause 2) under the section 'Specimen Policy Document' available on our website at https://www.icicilife.com/services/download-centre.html for exclusions and conditions applicable	
7	Waiting period • Time period during which specified diseases/treatments are not covered • It is counted from the beginning of	1)A waiting period of 90 days commencing from the Date of Commencement of Cover will be applicable under Additional Critical Illness Benefit Option. 2)No claim shall be payable in respect of any Critical Illness that a Member is diagnosed with or for which care, treatment or advice was recommended by or received from a physician, or which first	Part C Clause 3

	the policy coverage	manifested itself or was contracted within the Waiting Period. In the event of occurrence of any of the scenarios mentioned above, or in case of a claim, where it is established that the Member was diagnosed with any one of the covered Critical Illness during the Waiting Period for which a critical illness claim could have been made, 100% of the premiums will be refunded and the Member Rider policy will terminate. Please refer to the policy document (Part C, Clause 3) under the section 'Specimen Policy Document' available on our website at https://www.icicilife.com/services/download-centre.html for Waiting Period	
8	Financial limits of coverage i. Sub-limit (It is a pre-defined limit and the insurance company will not pay any amount in excess of the limit) ii. Co- payment (It is a specified amount/percentage of the admissable claim amount to be paid by policyholder/insured) iii. Deductible (It is a specified amount: - Up to which an insurance company will not pay any claim, any - Which will be deducted from	Not Applicable	

	total claim amount (if claim amount is more than the specified amount) iv. Any other limit (as applicable)		
9	Claims/Claims Procedure	For any assistance on Claims or registering a claim, You can send us an email at grouplife@icicilife.com or alternatively You can also reach out to your Master Policyholder. For information on documents required to process claims, please refer to the policy document (Part F, Clause 6 under the section 'Specimen Policy Document' available on our website at https://www.icicilife.com/services/download-centre.html	Part F, Clause 6
10	Policy Servicing	For any clarification or assistance, You can send us an email at grouplife@icicilife.com or alternatively You can also reach out to your Master Policyholder.	Part G
11	Grievances/Complaints	i. Grievance Redressal Officer: If You do not receive any resolution from Us or if You are not satisfied with Our resolution, You may get in touch with Our designated grievance redressal officer (GRO) at gro@icicilife.com or 1800-2660. Address: ICICI Life Insurance Limited (formerly known as ICICI Prudential Life Insurance Company Limited.), Unit No. 901A, 901B, 1001A & 1002B, Prism Towers, Mindspace, Link Road, Goregaon (West), Mumbai- 400104. Maharashtra	Part G

		The concerns of senior citizens will be resolved on priority ensuring there is a speedy disposal of the grievances For more details please refer to the "Grievance Redressal" section on www.icicilife.com. i.Grievance Redressal Committee: If You do not receive any resolution or if You are not satisfied with the resolution provided by the GRO, You may escalate the matter to Our internal grievance redressal committee at the address mentioned below: ICICI Life Insurance Limited (formerly known as ICICI Prudential Life Insurance Company Limited.), Unit No. 901A, 901B, 1001A & 1002B, Prism Towers, Mindspace, Link Road, Goregaon (West), Mumbai- 400104. Maharashtra ii. Policyholders' Protection and Grievance Redressal Department: If you are not satisfied with the response or do not receive a response from us within 15 days, you may approach Policyholders' Protection and Grievance Redressal Department, the Grievance Cell of the Insurance Regulatory and Development Authority of India (IRDAI) on the following contact details: IRDAI Grievance Call Centre (BIMA BHAROSA SHIKAYAT NIVARAN KENDRA) 155255 (or) 1800 4254 732 Email ID: complaints@irdai.gov.in You can also register your complaint online at bimabharosa.irdai.gov.in	

		Address for communication for complaints by fax/paper: Policyholders' Protection and Grievance Redressal Department – Grievance Redressal Cell Insurance Regulatory and Development Authority of India Survey No. 115/1, Financial District, Nanakramguda, Gachibowli, Hyderabad, Telangana State – 500032 Ombudsman list: Please refer to the policy document (Part G) under the section under the 'Specimen Policy Document' available at https://www.icicilife.com/services/download-centre.html	
12	Things to remember	Free Look cancellation: You/ the Master Policyholder have an option to review the Rider following the receipt of the Certificate of Insurance/ Rider Document respectively. If you/ the Master Policyholder are not satisfied with the terms and conditions of the policy, please return the Certificate of Insurance / Rider Document to the Company, with reasons for cancellation within < 30 days> from the date you receive it. On cancellation of the Rider /Member's cover during the free look period, You/The Master Policyholder shall be entitled to an amount which shall be equal to premium paid subject to deduction of i. Stamp duty charges ii. Expenses incurred by the Company on medical examination, if any iii. Proportionate risk premium for the period of cover The Rider / Member's cover shall terminate on payment of this amount and all rights,	Part D, Clause 1 & Part C ,Clause 3,Clause 5

		benefits and interests will stand extinguished. The Rider can be terminated during the Free look period either on its own or along with its base policy. In case the Master Base policy/Member Base policy is cancelled within free-look period, the Rider will also be automatically cancelled. Policy renewal: The Master Policyholder has the option to modify the Policy Renewal Date. The applicable premium for the period up to the original Policy Renewal Date will be calculated on a prorata basis and will be refunded to the Master Policyholder. Premium applicable on the modified Policy Renewal Date will be calculated based on the latest data provided. In case there is a break in cover on account of any reason, Waiting Period will be applicable from the Date of Commencement of Cover post the break. The Master Policyholder can renew the Rider only with the renewal of the Master Base Policy to which the Rider is attached Migration and Portability: Not Applicable Change in Sum Insured: Sum Assured Reset Benefit: This benefit is applicable only if specifically chosen by the Master Policyholder. The Sum Assured for chosen benefit option for each Member can be increased or decreased by the Master Policyholder/ Member during the term of the Rider Policy, subject to underwriting, provided that the life cover for the Member is in force and the Sum Assured for chosen Benefit Option does not exceed the Member's Base Sum Assured. The increase or decrease of the Sum Assured of	

		the chosen benefit option shall be mutually agreed between the Company and the Master Policyholder and there is no deviation from agreed Benefit Option chosen at the inception of Master Rider tenure. If the Base Sum Assured for any member is decreased by the Master Policyholder/Member during the term of the Member Base policy, the Sum Assured of chosen benefit option would be reset to base sum assured, if necessary, such that it does not exceed the member base sum assured, subject to underwriting. The decrease of the Sum Assured of the chosen Benefit Option shall be mutually agreed between the Company and the Master Policyholder provided that there is no deviation from agreed Benefit Option chosen at the inception of Master Rider tenure. Moratorium Period: Not Applicable	
13	Your Obligations	Please disclose all pre-existing disease/s or condition/s before buying the policy. Non-disclosure may affect the claim settlement. Disclosure of other material information during the policy period. Material information includes: • Date of birth • Gender • Education • Annual Income • Occupation details • Nationality & country of residence • Question on criminal charges • Avocation/dangerous hobbies • Address & Pincode	

		• Details of existing & applied insurance policies with other companies & terms of acceptance • Personal details like habits, Height & weight • Health Questions	

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

Declaration by the Policy Holder.

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

Place:
Date: (Signature of the Policyholder)