

Kotak

SARAL PENSION

A SINGLE PREMIUM NON-LINKED NON-PARTICIPATING INDIVIDUAL IMMEDIATE - ANNUITY PLAN



Kotak Saral Pension

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

Retirement years are the golden years of life where you would wish to do things that you have only been planning till now or are deferring by giving them lesser priority. It's a phase where you would want to enjoy doing what you wish without worrying about finances.

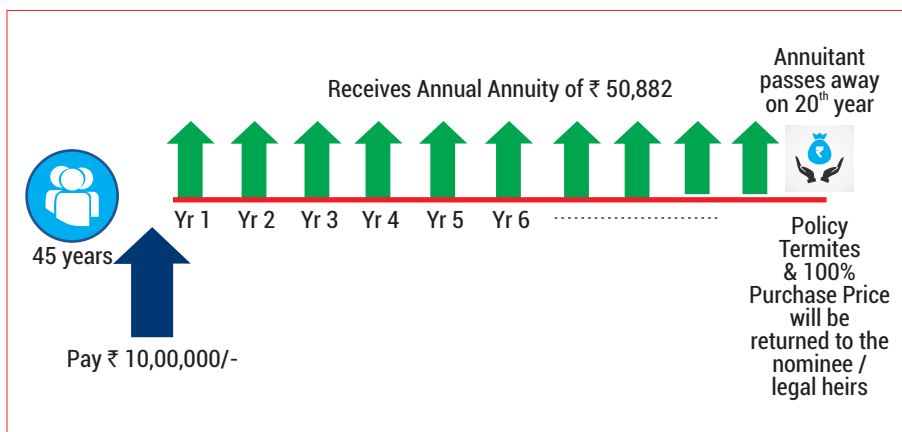
Start now, to ensure a peaceful retirement life by investing in "Kotak Saral Pension" – A single premium non-linked and non-participating individual immediate annuity plan that gives you the assurance of regular stream of income throughout your lifetime.

Key Advantages

- Invest in
 - Life Annuity with Return of 100% of Purchase price OR
 - Joint Life Last Survivor Annuity with Return of 100% of Purchase Price (ROP) on death of the last survivor
- Issued annuity rates are guaranteed for lifetime
- Option to Surrender your Policy on diagnosis of Critical Illnesses

How does Kotak Saral Pension work?

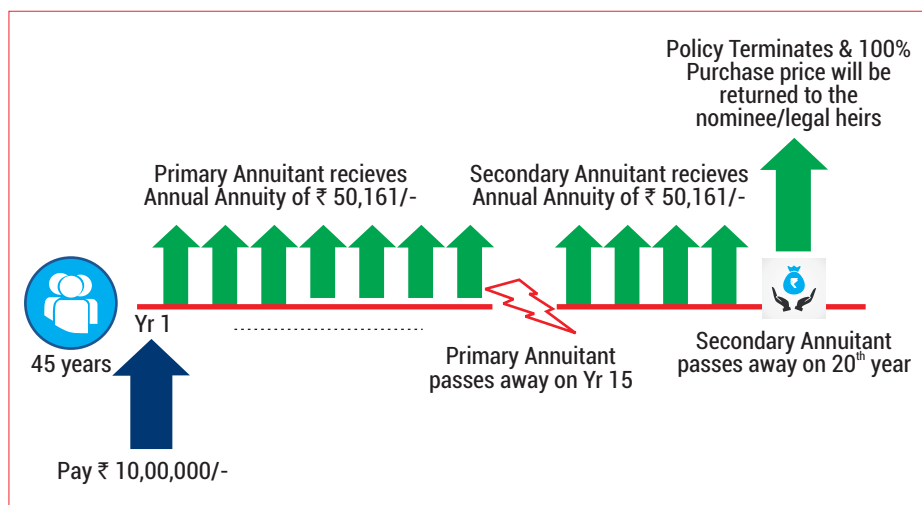
- **Single Life Option “Life Annuity with Return of 100% of Purchase”:**
 - With this option, annuity will be paid throughout the lifetime of the Annuitant, which will cease only on death of the Annuitant.
 - **For example**, a 45 year old, male, pays an Initial Purchase Price of ₹ 10,00,000 (exclusive of GST and Other Cess) and opts annuity frequency as “Annual”, will receive ₹ 50,882/- on a yearly basis throughout the life as illustrated below.



- **Joint Life Option “Joint Life Last Survivor Annuity with Return of 100% of Purchase Price (ROP) on death of the last survivor.”:**
 - With this option, annuity will be paid to the Annuitant (Primary Annuitant) throughout his/her lifetime and upon his / her death, 100% of the annuity will be paid to the Spouse throughout his/her lifetime. If the Spouse (Secondary Annuitant) pre-deceases the Annuitant, then on death of the Annuitant, the Purchase price (excluding Goods and Services Tax or other Statutory Levies, if any) shall be payable to the Nominee / Legal heirs.
 - For example, a 45 year old, male “Primary Annuitant”, pays an Initial Purchase Price of ₹ 10,00,000 (exclusive of GST & Other Cess), chooses

the Joint Life option with his spouse, aged 45 years, as "Secondary Annuitant" and annuity frequency as "Annual", will receive an annuity of ₹ 50,161/- per year

- On death of the Primary Annuitant during 15th policy year, the Secondary Annuitant will continue to receive the 100% annuity amount throughout her lifetime and the purchase price shall be paid to the nominee on death of the Secondary Annuitant as illustrated below:



Note:

- Annuity Rates will be determined based on the following details:
 - Age of the Annuitant(s)
 - Single Premium amount
 - Annuity Option chosen
 - Frequency of payout chosen (Monthly, Quarterly, Half-yearly, Yearly)
- Policies will be issued (subject to terms & conditions) with the applicable annuity rates on the issuance date
- On policy issuance the first annuity installment shall be paid one month / three months / six months / one year after the date of the issuance based on the frequency chosen i.e. Monthly, Quarterly, Half-yearly or Yearly respectively
- Issued annuity rates will be guaranteed for the annuitant's entire life and will not change with varying market conditions
- There is no Maturity benefit under this Policy

What are the Options available with this plan?

This Plan comes with two Annuity options to choose from depending on specific needs:

- **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.

- **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 annuitant for life. After death of the 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 heirs.

Other Benefits:

- **Enhanced Annuity Rates:** These Rates are applicable to : -
 - Existing Policyholders of Kotak Life who are utilizing the proceeds of their KLI pension policies for annuity and
 - Annuity policies sourced through Direct marketing /Online channel.

The annuity rates vary by purchase price band. The base annuity rates shall be increased by below given percentages. The purchase price bands are as specified below:

Bands	Purchase Price (₹)	Enhanced Annuity Rate
Band 1	Less than 200,000	Base Annuity Rate
Band 2	200,000 to less than 500,000	1.00%
Band 3	500,000 to less than 10,00,000	2.00%
Band 4	10,00,000 to less than 25,00,000	3.00%
Band 5	25,00,000 & above	4.00%

Example: The annuity rate applicable for Single Premium of ₹ 2,50,000 shall be determined as $250000 \times \text{Base Annuity Rate} \times (1+1\%)$

- **Critical Illness Covered:** Any time after 6 months from the date of commencement, if the annuitant/ primary annuitant /secondary annuitant, or the spouse or any of the children of the annuitant is diagnosed as suffering from

any of the critical illnesses as specified in the Terms and Conditions below, based on the documents produced to the satisfaction of the medical examiner of the Insurer s/he can surrender his policy. The list of covered critical illnesses may be revised from time to time based on prior approval of the Authority.

Who can buy this plan?

1. New customers : New Customers are customers who intend to purchase the annuity plan separately and not using the proceeds of any of the Kotak Life's Pension Plans .
2. Existing KLI Pension Plan policyholders who need to utilize the proceeds of the pension plan

Eligibility Conditions:

Annuitant Age	<ul style="list-style-type: none"> • Annuitant: Min: 40 yrs Max: 80 yrs • Spouse Min: 40 yrs Max: 80 yrs 	
Single Premium	Min: Any amount that ensures minimum monthly annuity of ₹ 1000 Max: No Limit	
Minimum Annuity	Monthly : ₹ 1,000 per month Quarterly : ₹ 3,000 per quarter Half-Yearly : ₹ 6,000 per half year Yearly : ₹ 12,000 per annum	
Annuity Modes	Yearly, Half-yearly, Quarterly, Monthly	
Annuity Installment (per frequency)	Mode	Purchase Price (₹)
	Yearly	100%
	Half-yearly	97% of Yearly Annuity x $\frac{1}{2}$
	Quarterly	96% of Yearly Annuity x $\frac{1}{4}$
	Monthly	95% of Yearly Annuity x $\frac{1}{12}$

Tax Benefits

You may avail of tax benefits under Income Tax Act, 1961 subject to conditions as specified in those sections. Benefit payments under annuity policy may be subject to taxes as per the prevailing tax laws on the date of payment and as per the Annuitant's / legal heir's taxable income slabs. Tax benefits are subject to change as per tax laws. You are advised to consult your Tax Advisor for details. Goods and Services Tax and Cess as applicable shall be levied over and above premium amount shown here as per applicable tax laws.

Terms & conditions:

- 1) **Annuitant(s):** Annuitant(s) being person(s) on whose life this policy has been taken and who become entitled to receive the annuity benefits
- 2) **Annuity rates** applicable as on the date of policy conversion will be provided to the customer, once issued the rates will be guaranteed for life. Please check for the latest rates at the time of purchase.
- 3) **Annuity Option and Frequency:** Once an annuity option has been selected, it cannot be changed after the policy is issued. The frequency of annuity payments can be changed and would be applicable only from next policy anniversary.

4) Proof of Existence:

Every 15 days prior to the policy anniversary, the annuitant (Spouse / surviving Annuitant if death of first annuitant has occurred under option 2) will have to submit valid Proof of existence in the Company specified format, or through Govt. site Jeevan Pramaan etc.. In case the proof of existence is not received by the Company within the stipulated time, the annuity payment shall cease. The annuity payment shall resume on receipt of the certificate of existence and all arrears will be settled immediately. In case of Joint Life Last Survivor Annuity with Return of 100% of Purchase Price on death of the last survivor, after the death of the Primary Annuitant, the Existence Certificate of the surviving Secondary Annuitant will be required.

5) Nomination & Assignment:

Nomination will be allowed under the plan as per Section 39 of the Insurance Act, 1938 as amended from time to time.

Assignment will be allowed in the plan as per the provisions of Section 38 of the Insurance Act, 1938 as amended from time to time.

- 6) Critical Illness : The policy can be surrendered any time after six months from the date of commencement,** if the annuitant/primary annuitant /secondary annuitant or the spouse or any of the children of the annuitant is diagnosed as suffering from any of the critical illnesses specified as below:

I. Cancer of Specified Severity

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

- The following are excluded –
 - All tumors which are histologically described as carcinoma in situ, benign, pre- malignant, borderline malignant, low malignant potential,

neoplasm of unknown behavior, or non-invasive, including but not limited to: Carcinoma in situ of breasts, Cervical dysplasia CIN-1, CIN -2 and CIN-3.

- Any non-melanoma skin carcinoma unless there is evidence of metastases to lymph nodes or beyond;
- Malignant melanoma that has not caused invasion beyond the epidermis;
- All tumors of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least clinical TNM classification T2N0M0
- All Thyroid cancers histologically classified as T1N0M0 (TNM Classification) or below;
- Chronic lymphocytic leukaemia less than Rai stage 3
- Non-invasive papillary cancer of the bladder histologically described as TaN0M0 or of a lesser classification,
- All Gastro-Intestinal Stromal Tumors histologically classified as T1N0M0 (TNM Classification) or below and with mitotic count of less than or equal to 5/50 HPFs;
- All tumors in the presence of HIV infection.

II. Myocardial Infarction

(First Heart Attack of specific severity)

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

- A history of typical clinical symptoms consistent with the diagnosis of acute myocardial infarction (For e.g. typical chest pain)
 - New characteristic electrocardiogram changes
 - Elevation of infarction specific enzymes, Troponins or other specific biochemical markers.
- The following are excluded:
- Other acute Coronary Syndromes
 - Any type of angina pectoris
 - A rise in cardiac biomarkers or Troponin T or I in absence of overt ischemic heart disease OR following an intra-arterial cardiac procedure.

III. Open Chest CABG

The actual undergoing of heart surgery to correct blockage or narrowing in one or more coronary artery(s), by coronary artery bypass grafting done via a sternotomy (cutting through the 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.

- The following are excluded:
 - Angioplasty and/or any other intra-arterial procedures

IV. Open Heart Replacement or Repair of Heart Valves

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

V. Coma of Specified Severity

A state of unconsciousness with no reaction or response to external stimuli or internal needs. This diagnosis must be supported by evidence of all of the following:

- no response to external stimuli continuously for at least 96 hours;
- life support measures are necessary to sustain life; and
- permanent neurological deficit which must be assessed at least 30 days after the onset of the coma.

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

VI. Kidney Failure Requiring Regular Dialysis

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

VII. Stroke Resulting in Permanent Symptoms

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

- The following are excluded:
 - Transient ischemic attacks (TIA)
 - Traumatic injury of the brain

- Vascular disease affecting only the eye or optic nerve or vestibular functions.

VIII. Major Organ/Bone Marrow Transplant

The actual undergoing of a transplant of:

- One of the following human organs: heart, lung, liver, kidney, pancreas, that resulted from irreversible end-stage failure of the relevant organ, or
- Human bone marrow using haematopoietic stem cells. The undergoing of a transplant has to be confirmed by a specialist medical practitioner.
- The following are excluded:
 - Other stem-cell transplants
 - Where only islets of langerhans are transplanted

IX. Permanent Paralysis of Limbs

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

X. Motor Neuron Disease with Permanent Symptoms

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

XI. Multiple Sclerosis with Persisting Symptoms

- A. The unequivocal diagnosis of Definite Multiple Sclerosis confirmed and evidenced by all of the following:
 - investigations including typical MRI findings which unequivocally confirm the diagnosis to be multiple sclerosis and
 - there must be current clinical impairment of motor or sensory function, which must have persisted for a continuous period of at least 6 months.
- B. Other causes of neurological damage such as SLE and HIV are excluded

XII. Benign Brain Tumor .

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

- a. Permanent Neurological deficit with persisting clinical symptoms for a continuous period of at least 90 consecutive days or
- b. Undergone surgical resection or radiation therapy to treat the brain tumor.
- The following conditions are excluded:
 - Cysts, Granulomas, malformations in the arteries or veins of the brain, hematomas, abscesses, pituitary tumors, tumors of skull bones and tumors of the spinal cord.

XIII. Blindness

- A. Total, permanent and irreversible loss of all vision in both eyes as a result of illness or accident.
- B. The Blindness is evidenced by:
 - a) corrected visual acuity being 3/60 or less in both eyes or ;
 - b) the field of vision being less than 10 degrees in both eyes.
 - c) The diagnosis of blindness must be confirmed and must not be correctable by aids or surgical procedure.

XIV. End Stage Lung Failure

- A. End stage lung disease, causing chronic respiratory failure, as confirmed and evidenced by all of the following:
 - FEV1 test results consistently less than 1 litre measured on 3 occasions 3 months apart; and
 - Requiring continuous permanent supplementary oxygen therapy for hypoxemia; and
 - Arterial blood gas analysis with partial oxygen pressure of 55mmHg or less ($\text{PaO}_2 < 55\text{mmHg}$); and
 - Dyspnea at rest.

XV. End Stage Liver Failure

- A. Permanent and irreversible failure of liver function that has resulted in all three of the following:
 - Permanent jaundice; and Ascites; and
 - Hepatic encephalopathy.
- B. Liver failure secondary to drug or alcohol abuse is excluded.

XVI. Loss of Speech

- A. 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.
- B. All psychiatric related causes are excluded.

XVII. Loss of Limbs

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.

XVIII. Major Head Trauma

- A. 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.
- B. 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.
- C. 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.
- The following are excluded:
 - Spinal cord injury;

XIX. Primary (Idiopathic) Pulmonary Hypertension

- A. 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.
- B. 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.

XX. Third Degree Burns

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

7) Loan :

- a. Loan can be availed any time after six months from the date of commencement of the policy.
- b. 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.
- c. 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.
- d. The interest on loan is on a simple interest basis and 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 200 bps and shall be applicable for all loans granted during the period of twelve months, beginning 1st May of the relevant financial year. The Company shall determine the rate of interest from time to time.
- e. The loan interest will be recovered from the annuity amount payable under the policy.
- f. 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.

- g. 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.

8) Free Look Period:

The policyholder is offered 15 days free look period for a policy sold through all channels (except for policies obtained through Distance Marketing* Mode and electronic policies which will have 30 Days) from the date of receipt of the policy wherein the policyholder may choose to return the policy within 15 days / 30 days of receipt if s/he is not agreeable with any of the terms and conditions of the plan. Should s/he choose to return the policy, s/he shall be entitled to a refund of the premium subject only to a deduction of stamp duty charges and annuity paid (if any). Any benefit already paid to you shall be recovered from the Free Look cancellation proceeds. A policy once returned shall not be revived, reinstated or restored at any point of time and a new proposal will have to be made for a new policy.

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.

Free-look option will not be available in case of existing customers, where it is compulsory to purchase annuity from Kotak life

*Distance Marketing includes every activity of solicitation (including lead generation) and sale of insurance products through the following modes: (i) Voice mode, which includes telephone calling (ii) Short Messaging service (SMS) (iii) Electronic mode which includes email, internet and interactive television (DTH) (iv) Physical mode which includes direct postal mail and newspaper & magazine inserts and (v) Solicitation through any means of communication other than in person

9) Availability:

This product is available for sale through Individual Agents, Corporate Agents, Brokers, Distance Marketing (including e-Insurance), Insurance Marketing Firm (IMF) and Web Aggregators, Point of Sales Persons (POSPs) and Common Public Service Center (CPSC) channels.

Distance Marketing includes Online Channel & Direct Marketing. Direct Marketing consists of selling through Tele Sales and Direct (Salaried) Sales Force.

Extract of Section 41 of the Insurance Act, 1938 as amended from time to time states:

- 1) No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer.
- 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:

Section 45 of the Insurance Act, 1938 as amended from time to time states that:

- (1) No policy of life insurance shall be called in question on any ground whatsoever after the expiry of three years from the date of the policy, i.e. from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy whichever is later.
- (2) A policy of life insurance may be called in question at any time within three years from the date of issuance of the policy or the date of commencement of risk or the date of revival of the policy or the date of the rider to the policy, whichever is later, on the ground of fraud.

Provided that the insurer shall have to communicate in writing to the insured or the legal representatives or nominees or assignees of the insured the grounds and materials on which such decisions are based.

About Us

Kotak Mahindra Life Insurance Company Ltd. is a 100% owned subsidiary of Kotak Mahindra Bank Ltd. (Kotak) which provides insurance products with high customer empathy. Its product suite leverages the combined prowess of protection and long term savings. Kotak Life Insurance is one of the growing insurance companies in India and has covered over several million lives.

For more information, please visit the company's website at www.kotaklife.com

Kotak Mahindra Group

Kotak Mahindra Group is one of India's leading banking and financial services organizations, offering a wide range of financial services that encompass every sphere of life. From commercial banking, to stock broking, mutual funds, life insurance and investment banking, the Group caters to the diverse financial needs of individuals and the corporate sector.

For more information, please visit the company's website at www.kotak.com

BEWARE OF SPURIOUS PHONE CALLS AND FICTITIOUS/FRAUDULENT OFFERS

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 *Hum hain... hamesha*

Kotak Saral Pension ; UIN No.: 107N124V01, Form No : N124, Ref. No.: KLI/21-22/E-PB/447

Kotak Mahindra Life Insurance Company Ltd: Regn. No.:107, CIN: U66030MH2000PLC128503; Regd. Office: 2nd Floor, Plot # C- 12, G- Block, BKC, Bandra (E), Mumbai – 400051; Website: www.kotaklife.com | WhatsApp: 9321003007 | Toll Free No:1800-209-8800

This is a single premium non-linked non-participating individual immediate annuity plan. The product brochure gives only the salient features of the plan. Please refer the policy document for specific details on all terms and conditions.

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