



PROUD INSURER
2016 INDIAN OLYMPIC TEAM



Edelweiss Tokio Life -
Payor Waiver Benefit Rider
(Non-Linked Rider)

Toll Free : 1800 2121212

Edelweiss Tokio Life - Payor Waiver Benefit Rider (Non-Linked Rider)

Plan Summary:

Entry Age (last birthday)	18 to 65 years
Maximum Maturity Age (last birthday)	70 years
Rider Term*	Equal to the premium paying term of the base plan subject to minimum rider term of 5 years. (Any Base Plan having limited pay and regular pay can avail this rider)
Premium Paying Term*	Equal to the premium paying term of the base plan
Minimum Premium	Rs. 3.40/-
Maximum Premium	Maximum premium will be restricted to 30% of the Base Plan premium
Frequency of payment	Same as Base Plan policy. Any premium rebate or modal factors will also be same as the Base Plan.
Minimum premium to be waived	Rs. 1000/-
Maximum premium to be waived	No limit, subject to Board approved Underwriting Policy.

* Rider term will be same as premium paying term of Base Plan, subject to maximum age at expiry of 70. If the entry age of the proposer plus Base Plan premium paying term is beyond age 70, the rider would be of term 70 less entry age. Rider can be attached on any policy anniversary. In such case the rider term would be equal to the remaining Base Plan policy premium paying term subject to minimum of 5 years.

* The term of the rider cannot be less than the premium paying term of the Base Plan. So this rider will be offered to those where sum of age at entry of the proposer and premium paying term of the Base Plan policy does not exceed 70 years of age.

If **Edelweiss Tokio Life** – Payor Waiver Benefit rider is selected then it will be applicable for the Base Plan. The benefit under this rider is payable only when the Base Plan is in-force.

If the Base Plan is not in-force then the rider cannot be kept in-force on a standalone basis. The rider premium will not be accepted if the same is not accompanied with the premium for the Base Plan.

Benefit payable

This rider is available with policies where life insured and the proposer of the base policy are different lives. This rider will be offered to the proposer for the following cases.

- Minor life is the life insured and parent/ grand-parent/ legal guardian is the proposer
- Spouse is the life insured
- HUF Karta is the proposer and any member of the HUF is the life insured

The customer can choose any one of the three benefit options given below at the time of opting for this rider as per his/her requirement. The proposer can choose only one of the three options and chosen option cannot be changed during the term of rider.

Option 1: On Death

✓ On Death

While the Base Plan and this rider is in-force, on the death of the policyholder all future premiums, that would have been payable under the Base Plan till the term of this rider, will be waived.

Option 2: On Critical Illness or Accidental Total and Permanent Disability

✓ On Accidental Total and Permanent disability*

While the Base Plan and this rider is in-force, in the event of confirmed diagnosis of total and permanent disability due to accident of policyholder, all future premiums, that would have been payable under the Base Plan till the term of this rider, will be waived.

✓ **On Critical Illness#**

While the Base Plan and this rider is in-force, in the event of the confirmed diagnosis of the proposer of the Base Plan suffering from any one of the below mentioned 12 insured critical illnesses conditions (subject to definitions), all future premiums, that would have been payable under the Base Plan till the term of this rider, will be waived.

Claim will be triggered only once on the first confirmed diagnosis of critical illness or accidental total and permanent disability during the rider term.

Option 3: On Death or Critical Illness or Accidental Total and Permanent Disability

✓ **On Death**

While the Base Plan and this rider is in-force, on the death of the policyholder, all future premiums, that would have been payable under the Base Plan till the term of this rider, will be waived.

✓ **On Accidental Total and Permanent disability***

While the Base Plan and this rider is in-force, in the event of confirmed diagnosis of total and permanent disability due to accident of policyholder, all future premiums that would have been payable under the Base Plan till the term of this rider, will be waived.

✓ **On Critical Illness#**

While the Base Plan and this rider is in-force, in the event of the confirmed diagnosis of the proposer of the Base Plan suffering from any one of the below mentioned 12 insured critical illnesses conditions (subject to definitions), all future premiums that would have been payable under the Base Plan till the term of this rider, will be waived.

Claim will be triggered only once on the first confirmed diagnosis of critical illness or accidental total and permanent disability or death of the policyholder of the Base Plan policy during the rider term.

The premium rates under Option 2 and Option 3 are guaranteed for the first five years and reviewable thereafter by the Company on every five years with the prior approval from the IRDA of India. The changes in premium rates will be applicable from the date of IRDAI approval.

* **Accidental Total and Permanent Disability**

Accidental Total and Permanent Disability is defined as disability caused by bodily injury, which causes permanent inability to perform any occupation or to engage in any activities for remuneration or profits. This disability should last for at least one hundred and eighty (180) days before being eligible for total and permanent disability benefits. Further the company reserves the right to call for medical examination as they may require fit in this regard. The premium during the 180 day waiting period needs to be paid by the policyholder. However once the policyholder is eligible for the claim, the company will reimburse the premiums paid by the policyholder during the 180 days.

Total and permanent disability also includes the loss of both arms, or both legs, or one arm and one leg, or of both eyes. Loss of arms means dismemberment by amputation from the wrist joint and loss of legs means dismemberment by amputation from the ankle joint. Loss of eyes means entire and irrecoverable loss of sight. In these circumstances waiting period of 180 days will not be applicable.

Critical Illness

This rider provides protection against 12 critical illnesses, namely:

1. Cancer of Specified Severity
2. Open Chest CABG
3. First Heart Attack - of Specified Severity
4. Open Heart Replacement OR Repair of Heart Valves
5. Kidney Failure Requiring Regular Dialysis
6. Major Burns
7. Major Organ / Bone Marrow Transplant
8. Permanent Paralysis of Limbs
9. Stroke Resulting in Permanent Symptoms
10. Surgery of aorta
11. Coma of Specified Severity
12. Total Blindness

Conditions for Critical Illness:

- The proposer should survive for 30 more days following the date of confirmed diagnosis.
The diagnosis is confirmed once it is established through medical tests or is certified by a medical practitioner, who is an independent medical practitioner
- Claim for critical illness will only be accepted if the illness has occurred after 90 days from the date of issue/ date of revival of the rider.
If the premium is due and paid before completion of 30 days (waiting period) from the date of confirmed diagnosis, such amount of premium paid will be refunded.

Non-forfeiture benefits

There is no surrender value, paid up value or loan available on this rider. On surrender of the Base Plan, no rider benefit will be paid. The rider benefit will cease immediately if the Base Plan is terminated, discontinued or made paid-up. The rider cover will also cease when a claim is paid.

Taxes

The Policyholder will be liable to pay all applicable taxes as levied by the Government from time to time. Rider premiums will attract service tax and cess, if any, as per the prevailing tax laws. Service tax and Cess, if any will be collected separately, over and above the premium.

Terms and conditions:

✓ Free look Period

This product offers a 15 day free look period. In the event the policyholder is not satisfied with the terms and conditions of the rider policy, and wish to cancel the rider policy, he/she can do so by returning the policy to the Company along with a letter requesting for cancellation within 15 days of receipt of policy. Premium paid by policyholder will be refunded after deducting proportionate risk premium for the period on cover, stamp duty and cost of medical expenses incurred in that connection.

As per IRDA circular no IRDA/ADMN/GDL/MISC/059/04/2011 dated 5th April 2011, free look period of 30 days will be offered for policies sold through Web and Tele-marketing channel under "direct marketing".

✓ Suicide claim provisions

If the life insured, whether sane or insane, commits suicide, within 12 months from the date of inception of the policy, then the policy shall be void and 80% of the premiums received (excluding extra mortality premium, if any) will be payable.

If the life insured, whether sane or insane, commits suicide, within 12 months from the date of revival/reinstatement, then the policy shall be void and an amount which is higher of 80% of premiums paid till date of death or the surrender value available as on the date of death will be payable.

✓ Exclusions

Rider will not be offered if any of the exclusions are identified at the time of accepting the risk.

Critical Illness exclusions:

- Diseases in the presence of an HIV infection;
- Any pre-existing or recurring disease which is diagnosed or which the proposer contracted prior to the issue date or the revival date of the rider policy, whichever is later;
- Any disease covered under Critical Illness occurring within 90 days of the start of coverage (i.e. during the waiting period);
- No payment will be made by the Company for any claim directly or indirectly caused by, based on, arising out of, or howsoever, to any Critical Illness for which care, treatment, or advice was recommended by or received from a Physician, or which first manifested itself or was contracted before the start of the Policy Period, or for which a claim has or could have been made under any earlier policy; Date of occurrence of critical illness will be reckoned for the above purpose and for the purpose of evaluating waiting/ survival period as the date of diagnosis of the illness/condition. It will be the date on which the medical examiner first examines the proposer and certifies the diagnosis of any of the illness/ conditions.
- Any congenital condition.
- Intentional self-inflicted injury, attempted suicide, while sane or insane.
- Alcohol or Solvent abuse or taking of Drugs, narcotics or psychotropic substances unless taken in accordance with the lawful directions and prescription of a registered medical practitioner.
- Failure to seek or follow medical advice.
- War, invasion, act of foreign enemy, hostilities (whether war be declared or not), armed or unarmed truce, civil war, mutiny, rebellion, revolution, insurrection, military or usurped power, riot or civil commotion, strikes.
- Taking part in any naval, military or air force operation during peace time.

- Participation by the Proposer in any flying activity, except as a bona fide, fare paying passenger, pilot or cabin crew of a recognized airline on regular routes and on a scheduled timetable.
- Participation by the policyholder in a criminal or unlawful act with criminal intent.
- Engaging in or taking part in professional sport(s) or any hazardous pursuits, including but not limited to, diving or riding or any kind of race; underwater activities involving the use of breathing apparatus or not; martial arts; hunting; mountaineering; parachuting; bungee-jumping.
- 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

Total & Permanent Disability exclusions:

The life insured will not be entitled to any benefits for any disability caused to proposer directly or indirectly due to or caused, occasioned, accelerated or aggravated by any of the following:

- Suicide or attempted suicide or self inflicted injury, whether the proposer is medically sane or insane.
- Failure to seek medical advice or treatment.
- War, terrorism, invasion, act of foreign enemy, hostilities, civil war, martial law, rebellion, revolution, insurrection, military or usurper power, riot or civil commotion. War means any war whether declared or not.
- Service in the armed forces, or any police organization, of any country at war or service in any force of an international body.
- Committing an assault, a criminal offence, an illegal activity or any breach of law, with criminal intent.
- Engaging in or taking part in professional sport(s) or any hazardous pursuits, including but not limited to, diving or riding or any kind of race; underwater activities involving the use of breathing apparatus or not; martial arts; hunting; mountaineering; parachuting; bungee jumping.
- Alcohol or Solvent abuse or taking of Drugs, narcotics or psychotropic substances unless taken in accordance with the lawful directions and prescription of a registered medical practitioner
- Participation by the proposer in any flying activity, except as a bona fide, fare paying passenger, pilot or cabin crew of a recognized airline on regular routes and on a scheduled timetable.
- Disability as a result of any disease or infection.

✓ **Grace period for non-forfeiture provisions**

Grace period is same as the Base Plan.

In case the rider premium is not paid (even if the Base Plan policy premium is paid), the rider policy will be terminated.

✓ **Revival or Reinstatement:**

The proposer may choose to discontinue the rider premium even though he is paying the premium pertaining to the underlying Base Plan to which the rider is attached. In such a case of rider premium discontinuance, the rider is not allowed to be revived in future.

However, in case the entire policy premium (the Base Plan and the rider) has been discontinued and the proposer wants to revive the same then he would be allowed to revive the policy within the revival period offered under the Base Plan. In such a case the Grace period, Revival and Lapse related terms and conditions will be as per the Base Plan to which this rider will be attached.

Rider premium will not be collected separately if the base policy is not in force.

Appendix : Critical Illness Definitions

i) Cancer of Specified Severity

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

The following cancers are excluded -

- Tumours showing the malignant changes of carcinoma in situ & tumours which are histologically described as premalignant or non invasive, including but not limited to:
 - Carcinoma in situ of breasts, Cervical dysplasia CIN-1, CIN -2 & CIN-3.
- Any skin cancer other than invasive malignant melanoma
- All tumours of the prostate unless histologically classified as having a Gleason score greater than 6 or having progressed to at least clinical TNM classification T2N0M0.....
- Papillary micro - carcinoma of the thyroid less than 1 cm in diameter
- Chronic lymphocytic leukaemia less than RAI stage 3
- Microcarcinoma of the bladder
- All tumours in the presence of HIV infection.

ii) Open Chest CABG

The actual undergoing of open chest surgery for the correction of one or more coronary arteries, which is/are narrowed or blocked, by coronary artery bypass graft (CABG). The diagnosis must be supported by a coronary angiography and the realization of surgery has to be confirmed by a specialist medical practitioner.

The following are excluded:

- i. Angioplasty and/or any other intra-arterial procedures
- ii. any key-hole or laser surgery.

iii) First Heart Attack - of Specified Severity

The first occurrence of 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 this will be evidenced by all of the following criteria:

- i. a history of typical clinical symptoms consistent with the diagnosis of Acute Myocardial Infarction (for e.g. typical chest pain)
- ii. new characteristic electrocardiogram changes
- iii. elevation of infarction specific enzymes, Troponins or other specific biochemical markers.

The following are excluded:

- i. Non-ST-segment elevation myocardial infarction (NSTEMI) with elevation of Troponin I or T
- ii. Other acute Coronary Syndromes
- iii. Any type of angina pectoris.

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) 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 (hemodialysis or peritoneal dialysis) is instituted or renal transplantation is carried out. Diagnosis has to be confirmed by a specialist medical practitioner.

vi) Major Burns

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

vii) Major Organ / Bone Marrow Transplant

The actual undergoing of a transplant of:

- i. One of the following human organs: heart, lung, liver, kidney, pancreas, that resulted from irreversible end-stage failure of the relevant organ, or
- ii. Human bone marrow using haematopoietic stem cells. The undergoing of a transplant has to be confirmed by a specialist medical practitioner.

The following are excluded:

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

viii) 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.

ix) 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:

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

x) Aorta Surgery

Undergoing of a laparotomy or thoracotomy to repair or correct an aneurysm, narrowing, obstruction or dissection of the aortic artery. For this definition, aorta means the thoracic and abdominal aorta but not its branches. Surgery performed using only minimally invasive or intraarterial techniques such as percutaneous endovascular aneurysm repair are excluded.

xi) 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:

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

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

xii) Total Blindness

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

The diagnosis must be clinically confirmed by an appropriate consultant. The blindness must not be correctable by aides or surgical procedures.

Appendix 2 : Other Definitions

Accident

An accident is a sudden, unforeseen and involuntary event caused by external and visible means.

Congenital Anomaly

Congenital Anomaly refers to a condition(s) which is present since birth, and which is abnormal with reference to form, structure or position.

- a. Internal Congenital Anomaly
Congenital anomaly which is not in the visible and accessible parts of the body.
- b. External Congenital Anomaly
Congenital anomaly which is in the visible and accessible parts of the body.

Day Care Centre

A day care centre means any institution established for day care treatment of Sickness and / or injuries or a medical set-up within a hospital and which has been registered with the local authorities, wherever applicable, and is under the supervision of a registered and qualified medical practitioner AND must comply with all minimum criteria as under:

- has qualified nursing staff under its employment
- has qualified medical practitioner (s) in charge
- has a fully equipped operation theatre of its own where surgical procedures are carried out
- maintains daily records of patients and will make these accessible to the Insurance company's authorized personnel.

Day Care Treatment

Day care treatment refers to medical treatment, and/or surgical procedure which is:

- i. undertaken under General or Local Anesthesia in a hospital/day care centre in less than 24 hours because of technological advancement, and
- ii. which would have otherwise required a hospitalization of more than 24 hours.

Treatment normally taken on an out-patient basis is not included in the scope of this definition.

Grace Period

Grace period means the specified period of time immediately following the premium due date during which a payment can be made to renew or continue a policy in force without loss of continuity benefits such as waiting periods and coverage of pre existing diseases. Coverage is not available for the period for which no premium is received.

Hospital

A hospital means any institution established for in- patient care and day care treatment of sickness and/ or injuries and which has been registered as a hospital with the local authorities, wherever applicable, and is under the supervision of a Registered and Qualified Medical Practitioner and must OR complies with all minimum criteria as under:

- has at least 10 inpatient beds, in those towns having a population of less than 10,00,000 and at least 15 inpatient beds in all other places;

- has qualified nursing staff under its employment round the clock;
- has qualified medical practitioner (s) in charge round the clock;
- has a fully equipped operation theatre of its own where surgical procedures are carried out
- maintains daily records of patients and makes these accessible to the Insurance company's authorized personnel.

Hospitalization

Means admission in a Hospital for a minimum period of 24 In patient Care consecutive hours except for specified procedures/ treatments, where such admission could be for a period of less than 24 consecutive hours.

Illness

Illness means a sickness or a disease or pathological condition leading to the impairment of normal physiological function which manifests itself during the Policy Period and requires medical treatment.

- Acute condition - Acute condition is a medical condition that can be cured by a treatment.
- Chronic condition - A chronic condition is defined as a disease, illness, or injury that has one or more of the following characteristics:
 - it needs ongoing or long-term monitoring through consultations, examinations, check-ups, and /or tests
 - it needs ongoing or long-term control or relief of symptoms
 - it requires your rehabilitation or for you to be specially trained to cope with it
 - it continues indefinitely
 - it comes back or is likely to come back.

Injury

Injury means accidental physical bodily harm excluding illness or disease solely and directly caused by external, violent and visible and evident means which is verified and certified by a Medical Practitioner.

Medical Advice

Any consultation or advice from a Medical Practitioner including the issue of any prescription or repeat prescription.

Medically Necessary

Medically necessary treatment is defined as any treatment, tests, medication, or stay in hospital or part of a stay in hospital which

- is required for the medical management of the illness or injury suffered by the insured;
- must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration, or intensity;
- must have been prescribed by a medical practitioner,
- must conform to the professional standards widely accepted in international medical practice or by the medical community in India.

Medical Practitioner

A Medical practitioner is a person who holds a valid registration from the medical council of any state or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of his license.

Pre-Existing Disease

Any condition, ailment or injury or related condition(s) for which you had signs or symptoms, and / or were diagnosed, and / or received medical advice / treatment within 48 months prior to the first policy issued by the insurer.

Qualified Nurse

Qualified nurse is a person who holds a valid registration from the Nursing Council of India or the Nursing Council of any state in India.

Surgery

Surgery or Surgical Procedure means manual and / or operative procedure (s) required for treatment of an illness or injury, correction of deformities and defects, diagnosis and cure of diseases, relief of suffering or prolongation of life, performed in a hospital or day care centre by a medical practitioner.

Doctor/ Certified Physician :

Means a person who holds a degree of a recognized medical institute and is registered by Medical Council of India or of the respective States of India, if so required and acting within the scope of the license of registration granted to him/her. The definition would include Physician, Specialist, Anaesthetist and Surgeon and specifically excludes doctors / practitioners in non-allopathic fields.

Approved Specialist:

A person qualifying as Doctor/Certified Physician and also holds either Post Graduate Diploma or Post Graduate degree in Specialist field being recognized by MCI or of the respective States of India, if so required and acting within the scope of the license of registration granted to him/her. The following are fields currently recognised by MCI.

Anesthesiology, Aviation Medicine, Anatomy, Biochemistry, Biophysics, Cardiology, Clinical Hematology, Clinical Pathology, Clinical Pharmacology, Community Medicine, Dermatology, Venerology and Leprosy, Endocrinology, Family Medicine, Forensic Medicine, General Medicine, Geriatrics, Immuno Haematology and Blood Transfusion, Immunology, Marine Medicine, Medical Gastroenterology, Medical Genetics, Medical Oncology, Microbiology, Neonatology, Nephrology, Neurology, Neuro radiology, Nuclear Medicine, Nutrition, Obstetrics & Gynecology, Occupational Health, Ophthalmology, Orthopedics, Oto-Rhino Laryngology, Pathology, Paediatrics, Pharmacology, Physical Medicine Rehabilitation, Physiology, Psychiatry, Public Health, Radiation Medicine, Radio diagnosis, Radiological Physics, Radio therapy, Rheumatology, Sports Medicine, Tropical Medicine & Health, Tuberculosis & Respiratory Medicine or Pulmonary Medicine and Virology.

Prohibition of Rebate: (SECTION 41 OF INSURANCE LAWS (AMENDMENT) ACT, 2015, AS AMENDED FROM TIME TO TIME) No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives 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 one such rebate as may be allowed in accordance with the published prospectus or tables of the Insurer. 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.

Non Disclosure Clause: (SECTION 45 OF INSURANCE LAWS (AMENDMENT) ACT, 2015, AS AMENDED FROM TIME TO TIME)

Fraud, Misrepresentation and Forfeiture would be dealt with in accordance with the provisions of Section 45 of The Insurance Laws (Amendment) Act, 2015

Edelweiss Tokio Life Insurance is a new generation Insurance company, set up with a start up capital of INR 550 Crores, thereby showing our commitment to building a long term sustainable business focused on a consumer centric approach.

The company is a joint venture between Edelweiss Financial Services, one of India's leading diversified financial services companies with business straddling across Credit, Capital Markets, Asset Management, Housing finance and Insurance and Tokio Marine Holdings Inc, one of the oldest and the biggest Insurance companies in Japan now with presence across 39 countries around the world.

As a part of the company's corporate philosophy of customer centricity, our products have been developed based on our understanding of Indian customers' diverse financial needs and help them through all their life stages.



Edelweiss Tokio Life Insurance Company Limited

Corporate Identity Number: U66010MH2009PLC197336

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BEWARE OF SPURIOUS PHONE CALLS AND FICTITIOUS/FRAUDULENT OFFERS

IRDAI clarifies to public that

- IRDAI or its officials do not involve in activities like sale of any kind of insurance or financial products nor invest premiums.
- IRDAI does not announce any bonus. Public receiving such phone calls are requested to lodge a police complaint along with details of phone call, number.