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 and Unique Identification Number (UIN)**	ICICI Pru iProtect Care UIN: <UIN ICICI Pru iProtect Care>	Policy schedule
2	**Application number/ Policy Number**	<Application Number>	Policy schedule
3	**Type of Insurance Policy**	A Non-Participating Non-Linked Life Individual Pure Risk Insurance Product	Policy schedule
4	**Basic Policy details**	Plan Variant: <Life/ Enhanced Protection> Sum Assured on Death (Insurance Cover Amount) (in ₹) : <Amount> Premium Instalment in first policy year (in ₹) : <Amount> Premium Instalment from second policy year onwards (in ₹): <Amount> Payment frequency: <Payment Frequency> You need to pay premiums for: <PPT> years Policy Term: <Policy Term> years // If Enhanced protection variant is opted print the following // The Sum Assured and Premium Instalment(s) mentioned above are applicable in the first five Policy Years after which the Premium corresponding to increased Sum Assured shall also become payable, subject to exercise of such increase and if applicable.	Policy schedule
5	**Policy Coverage/benefits payable**	Benefits payable on maturity- Not applicable Benefits payable on death- On death of the Life Assured during the policy term/ Extended Policy Term, provided all due premiums have been paid, the death benefit will be payable. Death benefit amount will be as per the plan variant chosen by the policyholder. For more information, refer to Part C, Clause 1	Part C -Clause 1,2 , 5, 9 Part D clause 4

		and 2 Benefit payable for Terminal Illness: In the event, the Life Assured is diagnosed with a Terminal Illness during the Policy Term, for a premium paying or fully paid In-force policy, an amount equal to the Death Benefit will be payable to the Claimant. Benefit payable on Terminal Illness is not applicable for policies sourced though POS personnel. In case the policyholder chooses to exercise the renewability option, the Terminal Illness Benefit will not be available during the extended policy term. For more information, refer Part C, clause 5. Policy Cancellation Benefits- On policy cancellation, Policy Cancellation Value equal to Unexpired risk premium value will be payable according to the premium payment term chosen. For more information related to policy cancellation, refer to Part D Clause 4 of policy document. Lock-in period for Linked Insurance products- Not applicable Survival Benefits excluding that payable on maturity-Not Applicable Under the Life variant, You can choose to further extend the term of the policy, subject to underwriting as per Board-approved Underwriting Policy (BAUP). This will not be available in case the policy is sourced through POS personnel. For more details refer Part C , Clause 9. Options to policyholders for availing benefits, if any, covered under the policy- Not applicable Other benefits/options payable, specific to the policy, if any- Not Applicable	
6	Options available (in case of Linked Insurance	Not Applicable	

	Products)		
7	**Option available (in case of Annuity product)**	Not Applicable	
8	**Riders opted, if any**	//If Rider is Opted, Name of Rider – Rider Option -	Rider schedule and Policy schedule
9	**Exclusions (events where insurance coverage is not payable), if any**	Suicide If the Life Assured, whether sane or insane, commits suicide within 12 months from the date of commencement of risk of this Policy, We will refund higher of 80% of the total premiums paid, if any till the date of death or policy cancellation value as available on the date of death, provided the policy is in force. For more information, refer to Part F, Clause 11 of policy document	Part F, Clause 11
10	**Waiting /lien Period, if any**	There is waiting period for policies sourced under POS. No waiting period for policies sourced other than POS For more information, please refer Part D, Clause 6. of policy document.	Part D, Clause 6
11	**Grace Period**	15 days-For monthly frequency of premium payment 30 days- For other frequencies of premium payment For more information, refer to Part C, Clause 11 of policy document	Part C, Clause 11
12	**Free Look Period**	30 days For more information, refer to Part D, Clause 1 of policy document	Part D -Clause 1
13	**Lapse, paid-up and revival of the Policy**	Lapse: If any premium instalment is not paid within the grace period, then the Policy shall lapse, and the cover will cease. If the Policy is not revived within the revival period, then the policy cancellation (computed as on date of premium discontinuance), if any, shall become payable on the earliest of the following events: • Event of death or diagnosis of Terminal	Part D-Clause 5, Clause 8

		Illness (if applicable), whichever happens first, of the Life Assured within revival period •End of the revival period, and •End of the Policy Term or End of the Extended Policy Term (if applicable). For more details on Lapse, refer to Part D, Clause 5 of policy document Revival: A Policy which has lapsed for nonpayment of premium within the grace period may be revived subject to underwriting and other conditions: The application for revival should be made within 5 years from the due date of the first unpaid premium and before the Date of Maturity/ Extended Date of Maturity (if applicable) of the Policy. Revival will be based on the prevailing Board approved underwriting policy. For more details on revival, refer to Part D, Clause 8 of policy document	
14	**Policy Loan, if applicable**	Not applicable	
15	**Claims/Claims Procedure**	Turn around Time – For TAT details for death claim refer to https://www.iciciprulife.com/contact-us/our-services-turn-around-times.html For any assistance on Claims, you can call Us on 18002660 (for calls within India) or +91 8069385555 (for calls outside India). You can also register a health or a death claim by sending us an email at claimsupport@iciciprulife.com The claim form can be downloaded from the following links: Digital Claim Form Link: https://buy.iciciprulife.com/buy/Claim-Intimation.htm?execution=e2s1 Physical Claim Form Link: https://www.iciciprulife.com/insurance-library/life-insurance-claims-related-faqs.html#linked_content For information on documents required to	Part F ,Clause 10

		process claims, please refer to the policy document (Part F, Clause 10) under the section 'Specimen Policy Document' available on our website at https://www.iciciprulife.com/services/download-centre.html	
16	**Policy Servicing**	Turn around Time – For TAT details for policy servicing - refer to https://www.iciciprulife.com/contact-us/our-services-turn-around-times.html For any clarification or assistance, You may contact Our advisor or call Our customer service representative (between 10.00 a.m. to 7.00 p.m., Monday to Saturday; excluding national holidays) on 18002660 or visit Our website: www.iciciprulife.com. Alternatively, You may communicate with Us at any of our branches or the customer service helpline number 18002660 or email at lifeline@iciciprulife.com. For updated contact details, We request You to regularly check Our website.	Part G ,Clause 1
17	**Grievances /Complaints**	1. You may write to GRO by visiting the grievance redressal page of our website: https://www.iciciprulife.com/services/grievance-redressal.html. Alternatively, you can contact the Grievance redressal officer at our branches or write to us at gro@iciciprulife.com 2. https://www.iciciprulife.com/services/grievance-redressal.html 3. Kindly refer the Insurance Ombudsman details under part G under the 'Specimen Policy Document' available at Download Centre | ICICI Prulife . This is subject to change from time to time Additionally, the contact details of Ombudsman can be accessed through https://www.cioins.co.in/Ombudsman	Part G

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

Declaration by the Policyholder

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

Place: (Signature of the Policyholder)

Date