

## 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 in Simple Words <i>(Please refer to applicable Policy Clause Number in next column)</i>	Policy Clause Number
1.	Name of the Insurance Product and Unique Identification Number (UIN)	Max Life Flexi Wealth Advantage Plan UIN: 104L121V03	Policy Preamble
2.	Policy Number	<Policy Number>	Policy Schedule
3.	Type of Insurance Policy	A Unit Linked Non-Participating Individual Life Insurance Plan	Policy Preamble
4.	Basic Policy details	<ul style="list-style-type: none"> <li>• <b>Instalment Premium:</b> &lt;add modal Premium&gt;</li> <li>• <b>Mode of Premium payment:</b> &lt;add modes&gt;</li> <li>• <b>Sum Assured on Death:</b> &lt;add SA&gt; *</li> <li>• <b>Sum Assured on Maturity:</b> Applicable fund value at the time of Maturity</li> <li>• <b>Policy Term:</b> &lt;add Policy term&gt;</li> <li>• <b>Premium Payment Term:</b> &lt;add PPT&gt;</li> </ul>	Policy Schedule
5.	Policy Coverage/benefits payable	<ul style="list-style-type: none"> <li>• <b>Benefits payable on Maturity:</b> <ul style="list-style-type: none"> <li>➤ We will pay the applicable Fund Value on the Maturity Date.</li> </ul> </li> <li>• <b>Benefits payable on Death:</b> <ul style="list-style-type: none"> <li>➤ In case of death of the Life Insured during the Policy Term, provided the Policy is in force, We will pay the higher of the following as a Death Benefit:                             <ul style="list-style-type: none"> <li>a. <i>Sum Assured on Death (after deducting Partial Withdrawal, (except smart withdrawals)), made during the two years' period immediately preceding the death of the Life Insured); or</i></li> <li>b. <i>105 % of Total Premium Paid (after deducting Partial Withdrawal (except smart withdrawals) (if any), made during the two years' period</i></li> </ul> </li> </ul> </li> </ul>	<p>Clause 1.2 of Part C</p> <p>Clause 1.1 of Part C</p>

		<p><i>immediately preceding the death of the Life Insured); or</i></p> <p><i>c. Fund Value after adding all the charges (except for Fund Management Charge) recovered after the date of death of the Life Insured.</i></p> <ul style="list-style-type: none"> <li>➤ In case You have chosen Waiver of Premium benefit and the same is active as on the date of death of the Policyholder, then on the death of the Life Insured, the present value of the future Premiums (if any), shall be paid in addition to the Death Benefit.</li> </ul> <ul style="list-style-type: none"> <li>• <b>Survival Benefits excluding that payable on maturity:</b></li> </ul> <ul style="list-style-type: none"> <li>➤ No survival benefits are payable in the Policy.</li> </ul> <ul style="list-style-type: none"> <li>• <b>Surrender benefits:</b></li> </ul> <ul style="list-style-type: none"> <li>➤ Surrender Benefits are classified into two categories: <ul style="list-style-type: none"> <li>a. <i>Surrender within the Lock-in Period: In case of Surrender within the Lock- in Period, the Fund Value will be credited into the Discontinuance Policy Fund post deducting applicable Discontinuance/Surrender Charge and the applicable Fund Value shall be paid on the expiry of the said Lock-in Period. Upon Surrender, the risk cover under the Policy and applicable Riders (if any), will cease.</i></li> <li>b. <i>Surrender after completion of the Lock- in Period: In case of Surrender post completion of the Lock- in Period, the applicable Fund Value prevailing on the date of receipt of a valid request for Surrender shall be paid.</i></li> </ul> </li> </ul> <ul style="list-style-type: none"> <li>• <b>Options to policyholders for availing benefits, if any, covered under the policy.</b></li> </ul> <ul style="list-style-type: none"> <li>➤ <b>Waiver of Premium Benefit:</b> The Policyholder (provided he/she is not Life Insured) may choose the Waiver of Premium benefit on Date of Commencement of Risk. In the event the Policyholder chooses the Waiver of Premium benefit and the same is active as on the date of death of the</li> </ul>	<p>Clause 2 of Part D</p> <p>Clause 1.6 of Part C</p>
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		<p>Policyholder then, We will fund all future outstanding Premiums payable under the Policy as and when the same become due.</p> <ul style="list-style-type: none"> <li>• <b>Other benefits/options payable, specific to the policy, if any:</b> <ul style="list-style-type: none"> <li>➤ <b>Guaranteed Loyalty Additions:</b> Guaranteed Loyalty Additions are additional Units added to the Fund which shall be credited only if the Life Insured is alive and all due Premiums have been received by Us.</li> <li>➤ <b>Auto Debit Boosters:</b> At the end of the 5<sup>th</sup> Policy Year, if the Policy is in-force and all due Premiums have been received by Us through auto debit mode in the first five years (excluding the 1<sup>st</sup> Premium) then additional units under the Auto Debit Booster shall be added to the Fund Value against each Premium paid through auto debit mode.</li> </ul> </li> <li>• <b>Lock-in period for Linked Insurance products:</b> <ul style="list-style-type: none"> <li>➤ 5 years from Date of Commencement of Risk.</li> </ul> </li> </ul>	<p>Clause 1.4 of Part C</p> <p>Clause 1.5 of Part C</p> <p>Clause 30 of Part B</p>
6.	Options available ( <i>in case of Linked Insurance Products</i> )	<ul style="list-style-type: none"> <li>• <b>Partial Withdrawal:</b> <ul style="list-style-type: none"> <li>➤ You are entitled for the Partial Withdrawal under the Policy, subject to the following: <ul style="list-style-type: none"> <li>i. <i>The minimum withdrawal amount should be at least INR 5,000 and minimum age should be at least 18 years.</i></li> <li>ii. <i>12 Partial Withdrawal(s) may be made in a Policy Year such that the total Fund Value withdrawn is not more than 25% of the Fund Value as on the date of the Partial Withdrawal(s) and subject to the Fund Value immediately after the Partial Withdrawal(s) being at least equal to one Annualised Premium and 25% (Twenty-Five percent) in case of Single Premium Payment Variant, as applicable.</i></li> <li>iii. <i>The Sum Assured on Death shall be reduced by all Partial Withdrawals made with respect to the Fund Value from the base Premium during the 2 (Two) Policy Years immediately preceding the Life Insured's death.</i></li> </ul> </li> </ul> </li> </ul>	Clause 6 of Part D

		<p><i>iv. No Partial Withdrawals are allowed during Discontinuance and settlement period.</i></p> <ul style="list-style-type: none"> <li>• <b>Top-up Provision:</b> <ul style="list-style-type: none"> <li>➤ Additional premium or top-up premium are not accepted under the Policy.</li> </ul> </li> <li>• <b>Switches:</b> <ul style="list-style-type: none"> <li>➤ You may switch from one Fund to another by written request to us, provided the minimum amount to be Switched is at least INR 5,000. There is no limit on the maximum number of Switches during the Policy Term and the settlement period thereafter (if applicable). No Switches are allowed during the period of Discontinuance.</li> </ul> </li> <li>• <b>Premium Redirection:</b> <ul style="list-style-type: none"> <li>➤ You may redirect renewal Premium amongst available Funds by placing a written request, specifying the amount/ proportion of Premium to be paid into each Fund, before your Premium payment due date. There is no limit on the number of Premium Redirections.</li> </ul> </li> <li>• <b>Settlement Option:</b> <ul style="list-style-type: none"> <li>➤ This option is available wherein maturity benefit may be received in instalments upon providing a written request to Us, specifying the proposed duration and frequency of payment. The period under the Settlement Option shall not exceed 5 (Five) years from the Maturity Date. During the period in which Settlement Option is in force, the Policy will continue and applicable Fund Management Charge, Switching charges and Mortality Charge on Death Benefit will be deducted. No Partial Withdrawals or smart withdrawal are allowed during such period.</li> </ul> </li> <li>• <b>Any other option</b></li> </ul>	<p>Clause 5 of Part D</p> <p>Clause 4 of Part D</p> <p>Clause 11 of Part D</p>
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		<ul style="list-style-type: none"> <li>• <b>Smart Withdrawals:</b></li> <li>➤ If You have selected Whole Life Variant and all due Premiums have been paid, then, You may opt for smart withdrawal option, anytime during the Policy Term, to systematically withdraw from the Fund Value a pre-determined percentage of the Fund Value regularly; provided Life Insured should have completed 18 years of Age. You can opt for a maximum of 8% per annum of the available Fund Value as smart withdrawal. The smart withdrawal may be made only after completion of 10 Policy Years or at the end of Premium Payment Term, whichever is later. Sum Assured on Death under the Policy shall not be reduced due to smart withdrawals. In case the Policy has become a Paid-Up Policy, smart withdrawal shall cease.</li> </ul>	Clause 7 of Part D
7.	Option available (in case of Annuity product)	<ul style="list-style-type: none"> <li>• Type of immediate annuity, for example Life annuity with Return of Purchase price etc. NA</li> <li>• Proportion of annuity amount guaranteed for variable pay-out option. NA</li> <li>• Any other option. NA</li> </ul>	
8.	Riders opted, if any	<ul style="list-style-type: none"> <li>• <b>Summary of coverage</b></li> <li>➤ Max Life Critical Illness and Disability Secure Rider (UIN: 104A034V01): Provides additional lump sum benefit depending on the diagnosis of critical illnesses of the Life Insured (major or minor critical illness, as applicable).</li> <li>➤ Max Life Smart Ultra Protect Rider (UIN: 104A049V01): This Rider provides the following Rider Benefit variants: <ul style="list-style-type: none"> <li>a. Rider benefit variant 1 - Term Booster with Accelerated Terminal Illness: Provides additional lump sum benefit in the case of death or diagnosis of Terminal Illness of the Life Insured, whichever is earlier.</li> <li>b. Rider benefit variant 2 - Accidental Death Benefit: Provides additional lump sum benefit in the case of death due of accident of the Life Insured.</li> <li>c. Rider benefit variant 3 - Accidental Total and Permanent Disability: Provides additional lump sum benefit in the case of occurrence of total</li> </ul> </li> </ul>	Policy Schedule

		<p>and permanent disability to the Life Insured due to accident.</p> <p><b>d.</b> Rider benefit variant 4 - Payor Benefit: Provides funding of all future outstanding base premiums and waiver of all the future premiums under all attached Riders in the case of death or diagnosis of Terminal Illness of the Policyholder, whichever is earlier.</p>	
9.	Exclusions (events where insurance coverage is not payable), if any.	<p><b>Brief list of the applicable exclusions, if any:</b></p> <ul style="list-style-type: none"> <li>• <b>Suicide Exclusion</b> <ul style="list-style-type: none"> <li>➤ If the Life Insured commits suicide, whether sane or insane, within 12 (Twelve) months from the Date of Commencement of Risk or from the date of revival of the Policy, all risks and benefits under the Policy will immediately cease and no benefits will be payable. In such an event, We will terminate the Policy by paying only the Fund Value prevailing on the date of intimation of the Life Insured to Claimant.</li> </ul> </li> </ul> <p>For exclusions under the Riders, please refer to the Rider's customer information sheet document.</p>	Clause 6 of Part F
10.	Waiting /lien Period, if any	<b>Number of Days</b> NA	
11.	Grace period	<b>Number of Days:</b> < 15/30 >	Clause 5 of Part C
12.	Free Look Period	<b>Number of days:</b> 30 days from the date of receipt of the Policy	Clause 10 of Part D
13.	Lapse, paid-up and revival of the Policy	<ul style="list-style-type: none"> <li>• <b>Grace Period:</b> <ul style="list-style-type: none"> <li>➤ Premiums must be paid by the due date during the Premium Payment Term. If not paid, You may pay the same during the Grace Period. During the grace period, your insurance coverage will remain active, and all applicable charges will still apply.</li> </ul> </li> <li>• <b>Lapse Period</b> <ul style="list-style-type: none"> <li>➤ Not Applicable</li> </ul> </li> <li>• <b>Paid Up Period</b> <ul style="list-style-type: none"> <li>➤ Not Applicable</li> </ul> </li> </ul>	Clause 25 of Part B

		<ul style="list-style-type: none"> <li>• <b>Revival Period:</b> <ul style="list-style-type: none"> <li>➤ In case the Policy goes into discontinuous mode, You may request us in writing for Revival anytime within three consecutive years from the date of first unpaid premium. Upon receipt of all overdue Premiums and any applicable charges or late fees within the Revival Period, we will revive the Policy upon being satisfied as to the continued insurability of the Life Insured or Policyholder based on the information, documents and reports furnished by the Policyholder, in accordance with the Underwriting Policy.</li> </ul> </li> </ul>	Clause 57 and 58 of Part B
14.	Policy Loan, if applicable	<ul style="list-style-type: none"> <li>• <b>Brief description</b> <ul style="list-style-type: none"> <li>➤ No loans are granted under the Policy.</li> </ul> </li> </ul>	
15.	Claims/Claims Procedure	<ul style="list-style-type: none"> <li>• <b>Turn Around Time (TAT) for claims settlement: 30 days and brief procedure.</b> <p>Notice of Claim – All cases of death must be notified immediately to us in writing. However, We may condone delay on merit for delayed claims where the reason for delay is proved to be for reasons beyond the control of the Claimant.</p> <ul style="list-style-type: none"> <li>➤ Please note that all death claims will be payable to the nominee/legal heir of the Policyholder.</li> <li>➤ Claim forms as required by us must be completed and furnished to us, at the Claimant's expense, within 90 days after the date the insured event happens, unless specified otherwise. A list of primary claim documents listing the normally required documents is attached to the Policy. Submission of the listed documents, forms or other proof, however, shall not be construed as an admission of liabilities by the Company. We reserve the right to require any additional proof and documents in support of the claim.</li> </ul> </li> <li>• <b>Helpline number</b> <ul style="list-style-type: none"> <li>➤ 1860-120-5577 (Call charges apply) or 0124-4219090</li> </ul> </li> </ul>	Clause 3 of Part F

		<ul style="list-style-type: none"> <li>• <b>Contact Details of the Insurer:</b></li> <li>➤ Max Life Insurance Company Limited, Plot No. 90C, Udyog Vihar, Sector 18, Gurugram-122015, Haryana, India. Website - <a href="http://www.maxlifeinsurance.com">www.maxlifeinsurance.com</a></li> <li>• <b>Link for downloading claim form and list of documents required including bank account details:</b></li> <li>➤ <a href="https://www.maxlifeinsurance.com/downloads">https://www.maxlifeinsurance.com/downloads</a></li> <li>➤ We will require the following documents in case of claim under this Policy regarding the death of the Life Insured: <ul style="list-style-type: none"> <li>• claimant's statement in the prescribed form (death claim application form -form A);</li> <li>• original Policy document (if any);</li> <li>• In case of a medical/natural death of the Life Insured, the attending physician's statement (Form C) and the medical records (admission notes, discharge/death summary, test reports, etc.) are required;</li> <li>• In case of an accidental/unnatural death of the Life Insured, a copy of the first information report (FIR)/ police complaint, a copy of the postmortem report (PMR)/ Autopsy/Viscera Report and a copy of the final police investigation report (FPIR)/charge sheet is required;</li> <li>• original/ attested copy of death certificate issued by the local/municipal authority (only in the case of death of the Life Insured);</li> <li>• identity proofs (such as copy of Passport, PAN card, Voter identity card, Aadhar (UID) card, etc.) of the Claimants (bearing their photographs and signatures (only in case of death of the Life Insured));</li> <li>• NEFT mandate form attested by bank authorities, along with a cancelled cheque or bank account passbook (only in the case of the death of the Life Insured);</li> <li>• any other documents or information required by Us for assessing and approving the claim request;</li> </ul> </li> </ul>	<p>Clause 3 of Part F</p>
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		<ul style="list-style-type: none"> <li>• employer certificate with complete leave records- Form E;</li> <li>• ITR for last 3 years / GST certificate in case of Self employed;</li> <li>• Other life / health insurance details with claim history details;</li> <li>• bank statement of last 2 years of the Life Insured;</li> <li>• body transfer certificate / embassy documents / postmortem report whichever applicable in case of death in foreign country;</li> <li>• Complete Passport copy in case of death in foreign country;</li> <li>• medical booklet / CGHS card details in case of defence and central government personnel; and</li> <li>• discharge Summary / indoor Case papers in case death happened due to medical reasons in a hospital.</li> </ul> <p>➤ We will require the following documents in case of claim under this Policy regarding the death of the Policyholder for Waiver of Premium benefit:</p> <ul style="list-style-type: none"> <li>• original Policy document (if any);</li> <li>• In case of a medical/natural death, the attending physician's statement (Form C) and the medical records (admission notes, discharge/death summary, test reports, etc.) are required;</li> <li>• In case of an accidental/unnatural death, a copy of the first information report (FIR)/ police complaint, a copy of the postmortem Report (PMR)/ Autopsy/Viscera Report and a copy of the final police investigation report (FPIR)/Charge sheet is required;</li> <li>• original/ attested copy of death certificate issued by the local/municipal authority;</li> <li>• identity proofs (such as copy of Passport, PAN card, Voter identity card, Aadhar (UID) card, etc.) of the Claimants (bearing their photographs and signatures);</li> <li>• any other documents or information required by Us for assessing and approving the claim request;</li> </ul>	
16.	Policy Servicing	<ul style="list-style-type: none"> <li>• <b>Turn Around Time (TAT)</b> upto 15 days</li> </ul>	Clause 1.1 of Part G

		<ul style="list-style-type: none"> <li>• <b>Helpline number</b></li> <li>➤ 1860-120-5577 (Call charges apply) or 0124-4219090</li> <li>• <b>Contact Details of the Insurer:</b></li> <li>➤ Max Life Insurance Company Limited, Plot No. 90C, Udyog Vihar, Sector 18, Gurugram-122015, Haryana, India. Website - <a href="http://www.maxlifeinsurance.com">www.maxlifeinsurance.com</a></li> <li>• <b>Link for downloading applicable forms and list of documents required including bank account details:</b></li> <li>➤ <a href="https://www.maxlifeinsurance.com/downloads">https://www.maxlifeinsurance.com/downloads</a></li> <li>➤ We will require the following documents in case of policy servicing under this Policy regarding the death of the Life Insured: <ul style="list-style-type: none"> <li>• Application in the prescribed form;</li> <li>• original Policy document (if any);</li> <li>• identity proofs (such as copy of Passport, PAN card, Voter identity card, Aadhar (UID) card, etc.) of the Policyholder or Life Insured (bearing their photographs and signatures);</li> <li>• NEFT mandate form attested by bank authorities, along with a cancelled cheque or bank account passbook;</li> <li>• any other documents or information required by Us for assessing and approving the claim request;</li> </ul> </li> </ul>	<p>Clause 3 of Part F</p>
17.	Grievances /Complaints	<ul style="list-style-type: none"> <li>• <b>Contact Details of Grievance Redressal Officer of the insurer:</b></li> <li>➤ Grievance Redressal Officer, Max Life Insurance Company Limited, Plot No. 90C, Udyog Vihar, Sector 18, Gurugram-122015, Haryana, India</li> <li>• <b>Link for registering the grievance with the insurer's portal</b></li> <li>➤ <a href="https://www.maxlifeinsurance.com/customer-service/grievance-redressal">https://www.maxlifeinsurance.com/customer-service/grievance-redressal</a></li> </ul>	<p>Clause 1.2.1 of Part G</p> <p>As per Annexure A</p>

		<ul style="list-style-type: none"><li>• <b>Contact details of Ombudsman</b></li></ul> <p>➤ Refer Annexure A for the Ombudsman details</p>	
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Declaration by the Policyholder

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

Place: (Signature of the Policyholder)

Date:

**Note:**

- i. For the product related documents including the Customer Information sheet please refer to the <https://www.maxlifeinsurance.com/ulip-plans/flexi-wealth-Advantage-Plan> .
- ii. In case of any conflict, the terms and conditions mentioned in the Policy document shall prevail.
- iii. \*Sum Assured on Death is subject to underwriting, for actual Sum Assured details, please refer to the Policy document.
- iv. In the event of any conflict or discrepancy between any translated version and the English language version of this CIS, the English language version of this CIS shall prevail.

### **Annexure A: List of Insurance Ombudsman**

**AHMEDABAD** - Office of the Insurance Ombudsman, 6<sup>th</sup> Floor, Jeevan Prakash Bldg, Tilak Marg, Relief Road, Ahmedabad-380 001. Tel.:- 079-25501201/02/05/06 Email: [bimalokpal.ahmedabad@cioins.co.in](mailto:bimalokpal.ahmedabad@cioins.co.in). (State of Gujarat and Union Territories of Dadra & Nagar Haveli and Daman and Diu.)

**BENGALURU** - Office of the Insurance Ombudsman, Jeevan Soudha Bldg., PID No. 57-27-N-19, Ground Floor, 19/19, 24<sup>th</sup> Main Road, JP Nagar, 1st Phase, Bengaluru – 560 078. Tel.: 080-26652049/26652048 Email: [bimalokpal.bengaluru@cioins.co.in](mailto:bimalokpal.bengaluru@cioins.co.in). (State of Karnataka)

**BHOPAL**- Office of the Insurance Ombudsman, 1<sup>st</sup> Floor, Jeevan Shikha, 60-B, Hoshangabad Road, Opp. Gayatri Mandir, Bhopal-462 011. Tel.:- 0755-2769201/2769202 Email: [bimalokpal.bhopal@cioins.co.in](mailto:bimalokpal.bhopal@cioins.co.in) (States of Madhya Pradesh and Chhattisgarh.)

**BHUBANESHWAR** - Office of the Insurance Ombudsman, 62, Forest Park, Bhubaneswar - 751 009. Tel.:- 0674-2596461/2596455 Email: [bimalokpal.bhubaneswar@cioins.co.in](mailto:bimalokpal.bhubaneswar@cioins.co.in) (State of Odisha.)

**CHANDIGARH** - Office of the Insurance Ombudsman, S.C.O. No. 20-27, Ground Floor, Jeevan Deep Building, Sector 17-A, Chandigarh-160017. Tel.:- 0172 - 4646394/2706468 Email: [bimalokpal.chandigarh@cioins.co.in](mailto:bimalokpal.chandigarh@cioins.co.in) [States of Punjab, Haryana (excluding 4 districts viz, Gurugram, Faridabad, Sonapat and Bahadurgarh) Himachal Pradesh, Union Territories of Jammu & Kashmir, Ladakh and Chandigarh]

**CHENNAI**- Office of the Insurance Ombudsman, Fatima Akhtar Court, 4<sup>th</sup> Floor, 453, Anna Salai, Teynampet, Chennai-600 018. Tel.:- 044-24333668 / 24333678 Email: [bimalokpal.chennai@cioins.co.in](mailto:bimalokpal.chennai@cioins.co.in) [State of Tamil Nadu and Union Territories - Puducherry Town and Karaikal (which are part of Union Territory of Puducherry).]

**DELHI**- Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi-110 002. Tel.:- Tel.:- 011 – 23237539 Email: [bimalokpal.delhi@cioins.co.in](mailto:bimalokpal.delhi@cioins.co.in) (State of Delhi, 4 districts of Haryana viz, Gurugram, Faridabad, Sonapat and Bahadurgarh)

**KOCHI**- Office of the Insurance Ombudsman, 10<sup>th</sup> Floor, Jeevan Prakash, LIC Building, Opp to Maharaja's College Ground, M.G. Road, Kochi 682011. Tel : 0484-2358759 Email: [bimalokpal.ernakulam@cioins.co.in](mailto:bimalokpal.ernakulam@cioins.co.in) (State of Kerala and Union Territory of (a) Lakshadweep (b) Mahe-a part of Union Territory of Puducherry.)

**GUWAHATI** - Office of the Insurance Ombudsman, "Jeevan Nivesh", 5<sup>th</sup> Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati-781 001(ASSAM) Tel.:- 0361-2632204/2602205 Email: [bimalokpal.guwahati@cioins.co.in](mailto:bimalokpal.guwahati@cioins.co.in) (States of Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.)

**HYDERABAD** - Office of the Insurance Ombudsman, 6-2-46, 1<sup>st</sup> Floor, "Moin Court", Lane Opp. Saleem Function Palace, A.C. Guards, Lakdi-Ka-Pool, Hyderabad-500 004. Tel : 040-23312122 Email: [bimalokpal.hyderabad@cioins.co.in](mailto:bimalokpal.hyderabad@cioins.co.in) (State of Andhra Pradesh, Telangana and Yanam and part of the Union Territory of Puducherry.)

**JAIPUR**- Office of the Insurance Ombudsman, Ground Floor, Jeevan Nidhi II Bldg, Bhawani Singh Marg, Jaipur – 302005 Tel : 0141-2740363/ 2740798 Email: [bimalokpal.jaipur@cioins.co.in](mailto:bimalokpal.jaipur@cioins.co.in) (State of Rajasthan)

**KOLKATA** - Office of the Insurance Ombudsman, Hindustan Building. Annexe, 7<sup>th</sup> Floor, 4, C.R. Avenue, Kolkata-700 072. Tel : 033-22124339/22124341 Email: [bimalokpal.kolkata@cioins.co.in](mailto:bimalokpal.kolkata@cioins.co.in) (States of West Bengal, Sikkim, and Union Territories of Andaman and Nicobar Islands.)

**LUCKNOW**- Office of the Insurance Ombudsman, 6<sup>th</sup> Floor, Jeevan Bhawan, Phase-2, Nawal Kishore Road, Hazratganj, Lucknow-226 001. Tel.: 0522 - 4002082 / 3500613 Email: [bimalokpal.lucknow@cioins.co.in](mailto:bimalokpal.lucknow@cioins.co.in) (Following Districts of Uttar Pradesh: Lalitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar.)

**MUMBAI** - Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S.V. Road, Santacruz(W), Mumbai 400054. Tel : 022- 69038800/27/29/31/32/33 Email: [bimalokpal.mumbai@cioins.co.in](mailto:bimalokpal.mumbai@cioins.co.in) (State of Goa and Mumbai Metropolitan Region excluding areas of Navi Mumbai and Thane)

**NOIDA** - Office of the Insurance Ombudsman, 4<sup>th</sup> Floor, Bhagwan Sahai Palace, Main Road, Naya Bans, Sector-15, Distt: Gautam Buddh Nagar, U.P. - 201301. Tel: 0120-2514252/2514253 Email: [bimalokpal.noida@cioins.co.in](mailto:bimalokpal.noida@cioins.co.in) (State of Uttarakhand and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kannauj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautam Buddh nagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.)

**PATNA** - Office of the Insurance Ombudsman, 2<sup>nd</sup> floor, Lalit Bhawan, Bailey Road, Patna - 800001 Tel No: 0612-2547068, Email id : [bimalokpal.patna@cioins.co.in](mailto:bimalokpal.patna@cioins.co.in) (State of Bihar, Jharkhand.)

**PUNE** - Office of the Insurance Ombudsman, 3<sup>rd</sup> Floor, Jeevan Darshan Bldg, C.T.S. Nos. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune – 411030. Tel.: 020-24471175 Email: [bimalokpal.pune@cioins.co.in](mailto:bimalokpal.pune@cioins.co.in) (State of Maharashtra including Navi Mumbai and Thane and excluding Mumbai Metropolitan Region.)