

Terms & Conditions Applicable for this Rider

The definitions, terms, conditions and exclusions of this Rider mentioned herein are to be read in conjunction with definitions, terms, conditions and exclusions mentioned in the policy terms & conditions of the base plan to which this rider is attached.

Part - B

DEFINITIONS

Terms defined under the Group Policy shall have the same meaning as ascribed to them in the Group Policy wherever they are used in this Rider. In addition, for the purposes of this Rider, the terms defined below shall have the following meaning ascribed to them whenever used in this Rider wording.

1. **Accident** means a sudden, unforeseen and involuntary event caused by external, visible and violent means.
2. **Bodily Injury** means injury must be evidenced by external signs such as contusion, bruise and wounds except in case of drowning and internal injury.
3. **Partial and Permanent Disability** refers to a disability which:
 - Is caused by Bodily Injury resulting from an Accident and
 - Occurs due to said Bodily Injury solely, directly, and independently of any other causes and
 - Occurs within 180 days of the occurrence of such accident and
 - Is defined as disablement resulting in any of the occurrences as mentioned in this document
4. **Policy/Group Policy** means the base Policy to which this **Rider** is attached with.
5. **Regular Rider Premium** means the regular payments to be made by **You**, to keep the **Rider** in force, in accordance with the frequency and manner of payment chosen by **You** and is the amount as specified in the **Group Policy Schedule**.
6. **Rider** means the insurance cover(s) added to a base product for additional premium or charge. The Group Policy Schedule will specify if any Riders are available and in force under the Group Policy.
7. **Rider Document** means this document, any endorsements issued by **Us**, Annexure and the Proposal Form.
8. **Rider Free Cover Limit** means insurance coverage provided by **Us** based on the risk characteristic of the group under all group/rider policies issued to a Group Policyholder upon satisfying **Our** eligibility criteria. It is the amount as stated in the **Group Policy Schedule**.
9. **Rider Sum Assured** means an absolute amount of benefit which is guaranteed to become payable on happening of insured contingency in accordance with the terms and conditions of the policy. .

Part - C

RIDER FEATURES, BENEFITS & PREMIUM PAYMENT CONDITIONS

1. Rider Features

PNB MetLife Group Accidental Permanent Partial Disability Plus is a non-linked, non-participating group, one year renewable, health insurance rider. This **Rider** offers the benefits listed below and is renewable annually along with the base Group Policy. The benefits will be payable subject to the terms and conditions stated herein.

2. Accidental Permanent Partial Disability Benefit

Upon the **Insured Member's** suffering Permanent and Partial Disability and/or Permanent Total Loss of use of limbs, sight, hearing and/or speech of the nature specified in the table below due to **Accident** occurring during the **Rider Term** and when this **Rider** is in-force, **We** will pay the percentages of the **Rider Sum Assured** (as specified in the table below) to the **Insured Member/Nominee** in addition to any benefits payable under the **Policy** subject to the terms and conditions below.

- (a) The **Accident** takes place on or after the person becomes covered as an **Insured Member** under this **Rider**.
- (b) Partial Disability or loss of use must be a result of an **Accident** and should be permanent in nature.
- (c) The permanence of the disability will only be established 180 days following the date of the disability except in the case of complete severance of hand at or above the wrist or foot at or above the ankle joint.

For loss of	% of SA payable
Both Hands	100%
Both Feet	100%
Sight of both eyes	100%
One hand and one foot	100%
One hand and sight of one eye	100%
One foot and sight of one eye	100%
Speech and hearing in both ears	100%
One hand	50%
One foot	50%
Sight of one eye	50%
Speech	50%
Hearing in both ears	50%
4 fingers and thumb on same hand	40%
4 fingers on same hand	35%
Thumb- both phalanges	25%
Hearing in one ear	25%

(d) Definitions of aforementioned benefits:

Loss of eyesight: Total and permanent and irreversible loss of eyesight (or, alternatively, total, permanent and irreversible blindness) in both eyes due to **Accident**. Blindness must be certified through an Ophthalmologists report.

Loss of speech: Total and permanent and irrecoverable loss of the ability to speak, due to **Accident**

Loss of hearing: Total and permanent and irreversible loss of hearing of all sounds in both ears due to **Accident**. Medical evidence in the form of audiometric and sound-threshold test must be provided.

Loss of Limb: Total and permanent loss or loss of use of one or both hands at or above the wrist due to **Accident**. Total and permanent loss or loss of use of one or both feet at or above the ankle joint due to **Accident**.

Exclusions:

Notwithstanding anything to the contrary stated herein, no Benefits under this Rider will be payable if the Accidental Permanent Partial Disability occurs from an Accident, due to any of the following:

- (a) **Drug Abuse: Insured Member** under the influence of Alcohol or solvent abuse or use of drugs except under the direction of a registered medical practitioner.
- (b) **Self-inflicted Injury:** Intentional self-inflicted injury.
- (c) **Criminal acts: Insured Member's:** Member involvement in criminal and/or unlawful acts with criminal and/or unlawful intent.
- (d) **War and Civil Commotion:** War, invasion, hostilities, (whether war is declared or not), civil war, rebellion, revolution, or taking part in a riot or civil commotion.
- (e) **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.
- (f) **Aviation: Insured Member** participation in any flying activity, other than as a passenger in a commercially licensed aircraft or was participating in a non-military flight for the purpose of descent from the aircraft while in flight.
- (g) **Hazardous sports and pastimes:** Taking part or practicing for any hazardous hobby pursuit or any race not previously declared to and accepted by Us, including, but not limited to the following:
 - a) All forms of racing (i.e. whether in a powered vehicle or not)
 - b) Trekking/rock climbing/mountaineering
 - c) River Rafting/kayaking/canoeing
 - d) Bungee Jumping
 - e) Skydiving, Scuba diving etc.
- (h) **Infection:** Loss caused or contributed to by any infection, except infection caused by an external visible wound accidentally sustained.
- (i) **Poison:** Taking or absorbing, accidentally or otherwise, any poison.
- (j) **Toxic Gases:** Inhaling any gas or fumes, accidentally or otherwise, except accidentally in the course of duty.

These exclusions apply in addition to the exclusions listed in the **Base Policy**, if any.

3. Commencement of Insurance Coverage for Insured Members

- 3.1. Coverage for an Eligible Member shall commence on the later of (i) Effective Date of Coverage or (ii) Date on which the person becomes an Eligible Member, provided the total Rider Sum Assured under all group policies with Us is less than or equal to Rider Free Cover Limit.
- 3.2. If the total Rider Sum Assured exceeds the Rider Free Cover Limit, insurance coverage up to the Rider Free Cover Limit shall commence on the later of (i) Effective Date of Coverage or (ii) Date on which the person becomes an Eligible Member
- 3.3. Coverage for amounts above Rider Free Cover Limit shall be subject to underwriting and coverage for such amount shall commence only from the date of written acceptance by Us.
- 3.4. If underwriting cannot be completed due to any reason within the time period specified by Us, or We decline/postpone coverage for the Sum Assured above the Free Cover Limit based on the results of the underwriting, the Sum Assured of such Insured Member shall be restricted to the Free Cover Limit.

4. Regular Rider Premium Payment Conditions

4.1. Premium rate

For **Insured Member(s)** with coverage above the **Free Cover Limit**, the final **Regular Rider Premium** rate(s) and **Regular Rider Premium** shall be determined after completion of the **Individual Underwriting** for the **Insured Member(s)**, and such final **Regular Rider Premium** rate shall be applicable only on the **Rider Sum Assured** above the **Free Cover Limit** as stated in the **Group Policy Schedule**.

4.2. Payment of Premium

Premiums for this Rider are payable periodically on the Premium Due Date stated in the Schedule. Grace period provisions as applicable for Group Policy shall be applicable for payment of Rider Premiums.

Part - D

RIDER SERVICING CONDITIONS

You are requested to refer to the Rider Servicing Conditions described below before making a request for Rider servicing to Us.

1. Free Look Period

- 1.1. **You** have a period of 30 days from the date of receipt of the **Rider Document**, whether received electronically or otherwise, to review the terms and conditions of this **Rider**. If **You** have any objections to the terms and conditions, **You** may cancel the **Rider** by giving written notice to **Us** stating its reasons for objection and **You** will be entitled to a refund of the **Regular Rider Premium** received subject to a deduction of expenses incurred on medical examination of the **Insured Members** (if any), proportionate risk premium for the period of the cover and the stamp duty charges. All rights under this **Rider** shall immediately stand extinguished at the cancellation of the **Rider**.
- 1.2. If the **Regular Rider Premium** is paid entirely by the **Insured Member** and the **Insured Member** disagrees with the terms and conditions of the **Rider**, he may cancel his coverage under the **Rider** by giving **Us** a written notice within 30 days of receiving confirmation of coverage, whether received electronically or otherwise, stating the reasons for objection and **We** shall refund the **Regular Rider Premium** received in respect of such **Insured Member** after deducting stamp duty charges, proportionate risk premium for the period of the cover and expenses towards medical examination, if any, for that **Insured Member**.

2. Rider Renewal

- 2.1. This **Rider** shall be renewed on mutually agreed terms, on every **Annual Renewal Date** along with the Group Policy. The renewal of the **Rider** is subject to acceptance of cover by the Company and upon payment of premiums at the rate and terms determined by the Company.

3. Loan

Loans are not available under this **Rider**.

Part - E.

Not Applicable

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Part - F

GENERAL TERMS & CONDITIONS

The following general terms and conditions are applicable to Your Rider.

1. Payment to Nominees

Nomination should be in accordance with provisions of Section 39 of the Insurance Act 1938 as amended from time to time.

2. Non-assignment of Benefits

The benefits under this Rider cannot be assigned.

3. Taxation

Any tax benefits under the **Rider** shall be in accordance with the prevailing laws relating to taxation in India and any amendments thereto from time to time. **We** reserve the right to deduct charge or recover taxes or applicable duties in accordance with applicable law from any payments received or made under or in relation to the **Rider**. Tax benefits are subject to change.

4. Governing laws and jurisdiction

The terms and conditions of the Rider shall be governed by and be interpreted in accordance with Indian law and all disputes and differences arising under or in relation to the Rider shall be subject to the sole and exclusive jurisdiction of the courts situated in Mumbai, India.

5. Claims Procedure

We will not be obliged to make any payment of the Accidental Permanent Partial Disability Benefit unless and until **We** have received all of the information and documentation **We** request, including but not limited to:

- (a) Claimant statement in format prescribed by **Us**, duly completed.
- (b) Leave records of the **Insured Member** (if applicable).
- (c) **Your** declaration and certificate that that the **Insured Member** was a member of **Your** group at the time of the death of **Insured Member**.
- (d) Certification of the details of the **Nominee** (if any).
- (e) Doctor's Certificate (From the family physician or treating doctor) preferably in the standardized PNB MetLife format.
- (f) Current and past medical records for diagnosis of ailment /Inpatient medical records/ First Consultation notes pertaining to treatment/ Discharge Summary if any.
- (g) Photo identity proof & Current address proof
- (h) PAN Card/ Form 60 of the life assured
- (i) Cancelled cheque / Copy of bank passbook
- (j) Any additional document(s) as required by **Us**.

You/claimant shall submit all the above documents within 45 days of the occurrence of the claim incidence. **We** shall consider submission of the above documents beyond 45 days but not later than 90 days from the occurrence of the claim incidence if there are valid reasons for such a delay on **Your/claimant** part.

Subject to **You/claimant** submitting all the documents as mentioned above within 45 days of the occurrence of the claim incidence or within the permitted extended timelines provided above, **We** shall pay the claim amount within 15/45 days from the date of receipt of the last of the documents as mentioned above, depending on the claims not warranting / warranting investigations, failing which **We** shall pay interest on the claim amount to **You/claimant** at the rate of 2% more than the prevailing bank rate for savings accounts prevalent at the beginning of the **Financial Year** in which the claim has been reviewed by **Us**.

6. Termination of the Rider

6.1. Coverage under this **Rider** for all **Insured Members** shall terminate on the occurrence of the earliest of the following:

(a) Expiration as a result of non-payment of **Regular Rider Premium** due within the grace period or non-payment of renewal premiums on the **Annual Renewal Date**.

(b) **Termination of the Rider by Master Policyholder:**

Master Policyholder may terminate this **Rider** by giving **Us** at least 30 days written notice. If the **Rider** is terminated by master policyholder, 100% of the unexpired **Regular Rider Premium** shall be refunded without interest, provided however in the event of such termination, the **Insured Member(s)** shall have the option to continue the risk cover on an individual basis till the expiry of the coverage.

(c) The **Insured Member's** death;

(d) The date the **Insured Member** ceases to be an **Eligible Member** or resigns / retires / voluntarily withdraws from the membership.

(e) Upon payment of the Rider benefit to the **Insured Member/Nominee**

Any termination of coverage of an **Insured Member** shall be without prejudice to any claim originating prior to the effective date of such termination. In case the **Insured Member** exits the **Rider** by way ceasing to be an **Eligible Member** or voluntarily withdraws from the membership, 100% of the unexpired **Regular Rider Premium** with respect to the **Insured Member** shall be refunded without interest.

7. **Fraud and Misstatement:** Fraud, and misstatement would be dealt with in accordance with provisions of Section 45 of the Insurance Act 1938 as amended from time to time.

8. Address for communication

All notices and communications with respect to this **Rider**, shall be sent to **Us** at following address :

PNB MetLife Group Accidental Permanent Partial Disability Plus (APPD Plus) (UIN :117B017V02)
Non-Linked, Non – Participating, One Year Renewable, Group, Pure Risk Rider

PNB MetLife India Insurance Company Limited,

1st Floor, Techniplex -1, Techniplex Complex, Off Veer Savarkar Flyover, Goregaon (West),

Mumbai – 400062.

Call us Toll-free at 1-800-425-6969,

Website: www.pnbmetlife.com,

Email: indiaservice@pnbmetlife.co.in or

You are requested to communicate any change in address, immediately, to enable **Us** to serve **You** promptly.

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Part - G

GRIEVANCE REDRESSAL MECHANISM & OMBUDSMAN DETAILS

Grievance Redressal Mechanism

In case you have any query or complaint or grievance, you may approach our office at the following address:

Level 1

For any complaint/grievance, approach any of our following touch points:

- Call 1800-425-69-69 (Toll free)
- Email at indiaservice@pnbmetlife.co.in
- Write to
**Customer Service Department,
1st Floor, Techniplex -1, Techniplex Complex, Off Veer Savarkar Flyover,
Goregaon (West), Mumbai – 400062.**
- Online through our website www.pnbmetlife.com
- Our nearest PNB MetLife branch across the country

Level 2:

In case you are not satisfied with the resolution provided by the above touch points, or have not received any response within 2 weeks, you may

- Write to our Grievance Redressal Officer at gro@pnbmetlife.co.in or
- Send a letter to

Grievance Redressal Officer

PNB MetLife India Insurance Co. Ltd,

Unit 302, 3rd Floor Tower 3

Worldmark, Maidawas Sector 65, Gurugram, Haryana - 122018

Please address your queries or complaints to our customer services department, on the address referred above, who are authorized to review your queries or complaints and address the same. Please note that only an officer duly authorized by PNB MetLife has the authority to resolve your queries or complaints. We shall in no way be responsible, or liable, or bound by, any replies or communications or undertakings, given by or received from, any financial advisor or any employee who was involved in selling you this Policy.

Level 3:

In case you are not satisfied with the decision from above offices or do not receive a response from us within 15 (fifteen) days, you may contact the the Bima Bharosa Shikayat Nivaran Kendra on the following contact details:.

- Online : You can register your complaint online at <http://www.igms.irda.gov.in> or refer IRDAI website for [more details](#)

- By Post : You can write or fax your complaints to

Consumer Affairs Department

Insurance Regulatory and Development Authority of India

Sy No. 115/1, Financial District,

Nanakramguda, Gachibowli, Hyderabad – 500032, Telangana

- By E-mail : E-mail ID: complaints@irda.gov.in
- By Phone : 1800 4254 732

In case You are not satisfied with the decision/resolution, You may approach the Insurance Ombudsman at the following link: <https://www.cioins.co.in/Ombudsman> or refer the Group Policy document , if Your grievance pertains to:

- Insurance claim that has been rejected or dispute of a claim on legal construction of the Policy;
- Delay in settlement of claim;
- Dispute with regard to premium; or
- Misrepresentation of terms and conditions of the Policy;
- Policy servicing related grievances against Us or Our agent/intermediary;
- Issuance of Policy in non-conformity with the proposal form;
- Non-issuance of Insurance policy after receipt of Premium or
- Any other matter resulting from the violation of provisions of the Insurance Act, 1938 as amended from time to time or the regulations, circulars, guidelines or instructions issued by the IRDAI from time to time or the terms and conditions of the policy contract, in so far as they relate to issues mentioned above.

1) The complaint should be made in writing duly signed by You, Nominee, Assignee or by Your legal heirs with full name, address and contact information of the complainant, the details of Our branch or office against whom the complaint is made, the facts giving rise to the complaint, supported by documents, the nature and extent of the loss caused to the complainant and the relief sought from the Insurance Ombudsman. As per Rule 14(3) of the Insurance Ombudsman Rules, 2017, the complaint to the insurance ombudsman can be made if the complainant makes a written representation to Us/Insurer and files the complaint, within one year

- after the order of the insurer rejecting the representation is received; or
- after receipt of decision of the insurer which is not to the satisfaction of the complainant;
- after expiry of a period of one month from the date of sending the written representation to the insurer if the insurer fails to furnish reply to the complainant .

2) The Ombudsman shall be empowered to condone the delay in such cases as he may consider necessary, after calling for objections of the insurer against the proposed condonation and after recording reasons for condoning the delay and in case the delay is condoned, the date of condonation of delay shall be deemed to be the date of filing of the complaint, for further proceedings under these rules.

3) No complaint before the Insurance Ombudsman shall be maintainable on the same subject matter on which proceedings are pending before or disposed of by any court or consumer forum or arbitrator.

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