

Policy Document (Terms & Conditions)

Section1- Understanding this Policy

1.1 Owner of the Policy

The Owner of the Policy also known as the "Policyholder" is the individual who has purchased this Policy and may or may not be the Person Insured and also includes a person as provided under Section 2(2) of the Insurance Act, 1938.

1.2 Definitions

- ✓ "Age" is the age at last birthday in completed years.
- ✓ "Annualized Premium" refers to the Regular Premiums payable in a Policy Year, and is as set out in the Schedule.
- ✓ "Application" refers to the proposal form as defined under the Insurance Regulatory and Development Authority (Protection of Policyholders' Interest) Regulations 2002.
- ✓ "Basic Sum Assured" is the amount of Life Insurance cover which is 180 times the Guaranteed Monthly Regular Income chosen by you and is as specified in the Schedule.
- ✓ "Cash Surrender Value" is the amount, as calculated by the Company, that is payable to you upon surrender of the Policy.
- ✓ "Coverage Term" is the number of Policy Years for which the Policy continues, starting from the Date of Commencement of the Policy and concluding on the Maturity Date and is as specified in the Schedule.
- ✓ "Date of Commencement" is the Date, Month, and Year the Policy comes into effect and is as specified in the Schedule.
- ✓ "Guaranteed Monthly Regular Income" is the amount of benefit payable during the Payout Period and is as specified in the Schedule. This is the amount chosen by you at inception and is payable on every monthly Anniversary Date during the Payout Period, subject to the terms and conditions of this Policy.
- ✓ "Guaranteed Surrender Value" refers to the minimum guaranteed amount of Cash Value of the Policy payable in the event that the Policy is surrendered, provided that the Regular Premium of this Policy has been paid for at least three consecutive years. The Guaranteed Surrender Value, when allowable under the Policy, is at least equal to the percentage as set out in Section 4.5 of the total amount of Regular Premiums paid for the Basic Sum Assured excluding the Annualised Premium for the first Policy year and all extra premiums paid on account of adverse health condition or occupation of the Person Insured.
- ✓ "Insured Event" is the death of the Person Insured, subject to the exclusionary provisions mentioned under Section 6.7 of this Policy.
- ✓ "Maturity Date" is the date on which the coverage under this Policy concludes and is as shown in the Schedule.
- ✓ "Monthly Anniversary Date" is one month from the Date of Commencement of the Policy and every date falling one month thereafter, till the Maturity Date.
- ✓ "Nominee" is the person nominated by the Policyholder as per the Application Form or as may be subsequently intimated to the Company from time to time, to receive the benefits under this Policy in the event of death of the Person Insured, before the Maturity Date.
- ✓ "Payout Period" refers to the period commencing from the Monthly Anniversary Date that immediately succeeds the completion of the Premium Payment Term or the date of death of the Person Insured, whichever is earlier, and concluding on the date of settlement of the last Guaranteed Monthly Regular Income under the Policy, which shall be at the end of 15 years from the date of the first Guaranteed Monthly Regular Income payment.
- ✓ "Person Insured" is the person on whose death or survival (as applicable), the benefits as set out in the Schedule, subject to the terms and conditions of this Policy, will become payable. The name of the Person Insured is as appearing in the Schedule.
- ✓ "Policy" means and includes this document with all its pages; the Application submitted by you, the Schedule and any attached endorsements or supplements together with all addendums.

- ✓ "Policy Anniversary Date" is one year from the Date of Commencement of the Policy and every date falling one year thereafter, till the Date of Maturity.
- ✓ "Policy Year" is measured from the Date of Commencement of the Policy and is a period of twelve consecutive calendar months.
- ✓ "Premium Payment Term" is the number of Policy Years for which the Policyholder is required to pay the Annualised Premium and is as specified in the Schedule.
- ✓ "Regular Premium" is the regular payments to be made by you, to keep the Policy in force, in accordance with the frequency of payment chosen by you and is as specified in the Schedule.
- ✓ "Rider" is a supplementary benefit payable to the Policyholder on a specified event and is allowed as an add-on to the main benefit. The Rider available in this plan is the Accidental Death Benefit. Rider details are separately available in the Rider Policy.
- ✓ "Schedule" refers to the schedule issued by the Company to evidence the Insurance Cover and forms part of the Policy.
- ✓ "We", "us", "our" and "Company" refers to MetLife India Insurance Company Limited.
- ✓ "You" and "Your" refers to the Owner of the Policy.

1.3 The Contract

This means the Policy and any other document(s) called for by the Company and submitted by you to enable it to process your Application.

1.4 Coverage Term, Premium Payment Term & Payout Period

The following are the Coverage Term options available under this Policy and the corresponding Premium Payment Term and the Payout Period: -

Coverage Term	Premium Payment Term	Payout Period
20 years	5 years	15 years
25 years	10 years	15 years

The Coverage Term option chosen by you in your Application, is as set out in the Schedule, and cannot be altered at any time later.

Section 2

Policy Description

Met Monthly Income Plan is the name of the product of the Company. It is a traditional endowment life insurance plan and is participating in nature.

The Policy provides for participation in the distribution of surplus or profits that may be declared by the Company.

Section 3 – Policy Benefits

3.1 Death Benefits

Upon the death of the Person Insured and provided that the Policy is in full force and effect, the Company shall pay, subject to the Policy terms and conditions and prevailing laws, to the

Beneficiary (as set out in Section 6.3) or you (If the Person Insured is different from the Policy Owner) the following Death Benefit:

a) If the Death of the Person Insured occurs during the Premium Payment Term

- ❖ 25% of the Basic Sum Assured under the Policy plus all the Simple Reversionary Bonuses accrued till then will be paid immediately on death, provided that the claim has been admitted for payment by the Company. The Policy continues after the death of the Person Insured and the Guaranteed Monthly Regular Income chosen at inception will commence from the first Monthly Anniversary falling immediately after the date of the death and continue to be paid to the Nominee / Beneficiary for the next 15 years. At the end of 15 years from the date of the first Guaranteed Monthly Regular Income payment, the Policy ceases with payment of Terminal Bonus (as mentioned in Section 3.3 (ii)), if any. However the Policy shall not be eligible to participate in the Simple Reversionary Bonuses declared by the Company, after the date of death of the Person Insured.

b) If the Death of the Person Insured occurs during the Payout Period

- ❖ 25% of the Base Sum Assured under the Policy plus all the Simple Reversionary Bonuses accrued till then will be paid immediately on death, provided that the claim has been admitted for payment by the Company. The Policy continues after the death of the Person Insured and the balance of the Guaranteed Monthly Regular Income chosen at inception will continue to be paid to the nominee / beneficiary till maturity.
The maximum period of payment of the Guaranteed Monthly Regular Income is 15 years.

Note: In case of death of the Beneficiary / Nominee during these guaranteed monthly regular income payments period, the same will be made to the legal heir's of the Person Insured or the Policyholder (in the event that the Person Insured is different from the Policyholder).

3.2 Survival Benefits

Subject to the Policy being in force for full Sum Assured and upon the end of the Premium Payment Term, Guaranteed Monthly Regular Income as opted by you at inception will be payable on every Monthly Anniversary during the Payout Period. The Guaranteed Monthly Regular Income payments shall commence from the Monthly Anniversary Date that immediately succeeds the completion of the Premium Payment Term.

The Guaranteed Monthly Regular Income payments would cease upon payment of the Maturity Benefit. This survival benefit (Guaranteed Monthly Regular Income) will be proportionately reduced in case of Reduced Paid-Up policies as defined in Section 4.4

3.3 Bonus

The bonuses are not guaranteed and they are based on the actual experience of the Company. There are two types of bonuses

i) Simple Reversionary Bonus

Subject to the Policy being in force (other than as a Reduced Paid-up Insurance under Section 4.4 (1), you or the nominee (as applicable) will be eligible for Simple Reversionary Bonus. At the end of each financial year the Company may declare a rate of Simple Reversionary Bonus

expressed as a percentage of the Basic Sum Assured. Simple Reversionary bonus, once declared, shall vest in the Policy and will be credited on each Policy anniversary occurring immediately after the declaration of bonus provided all the premiums have been paid. The Simple Reversionary Bonus shall be paid along with either of the Death, Surrender or Maturity Benefit, whichever applicable

Simple Reversionary Bonus is declared by the Company starting from year 3 onwards based on the Company's experience and this is not guaranteed. The Simple Reversionary Bonus will not accrue for the death claim policies after settlement of death claim.

ii) Terminal Bonus

Depending on the experience of the Company, the Company may also declare a Terminal Bonus at the time of maturity of the Policy or at the time of the payment of the last Guaranteed Monthly Regular Income (applicable only in case of a death claim during the Premium Payment Term). The Terminal Bonus will be expressed as a percentage of the accrued Simple Reversionary Bonus. The Terminal Bonus is payable only on Maturity or at the time of payment of the last monthly Guaranteed Regular Income payment, as applicable, and the same is not guaranteed.

3.4 Maturity Benefits

Subject to the Policy being in force and upon the Person Insured surviving to the Maturity date, the Maturity Benefit payable shall be equal to the total of the Simple Reversionary Bonus and Terminal Bonus as provided in Section 3.3.

The Maturity Benefit is payable on the Maturity Date set out in the Schedule. All benefits payable under the Policy shall cease upon the payment of the Maturity Benefit.

3.5 Accidental Death Benefit Rider (UIN: 117C014V01)

In the unfortunate event of death due to an accident an optional additional Rider benefit is also payable as per the rider contract. This Rider benefit is available only in the event that the same has been opted for by the Policyholder in the Application and the necessary Rider premiums have been received by the Company.

Section 4 – Policy Premiums

4.1 The Regular Premiums are periodic premiums payable by the Policyholder on the respective due dates for payment in the frequency chosen (Monthly / Quarterly/ Half Yearly/ Yearly) and are as specified in the Schedule. Any statutory levies including Service Tax, which are applicable/imposed on the Regular Premium needs to be paid by you, in addition to the Regular Premium. MetLife reserves the right to charge and collect any other taxes and/or levies as may be imposed by applicable legislation, from time to time, without any prior intimation.

4.2 Grace Period

The Regular Premiums are payable on the due date for payment and in any case not later than the grace period of 30 days from the due date for Quarterly/Half yearly/Yearly frequencies and 15 days from the due date for monthly frequency, respectively. During the grace period, the Policy shall continue to be in force for the Insured Event.

If the Regular Premium is not paid within the grace period, the Policy shall lapse and have no further value except as may be provided under Section 4.4.

4.3 Reinstatement

When the Regular Premium is not paid within the grace period, the Policy shall lapse. You may, however, reinstate the Policy while the Person Insured is alive if you:

- ❖ Request in writing for reinstatement within three (3) years from the date of the Policy being lapsed.
- ❖ Provide satisfactory evidence of insurability to us and fill all such requirements which may be reasonably prescribed by us.
- ❖ Pay all due Regular Premiums till the date of reinstatement along with applicable charges (if any) and compound interest at the rate prescribed by the Company at the time of such reinstatement.
- ❖ On fulfilment of any other reinstatement requirement as specified by the Company from time to time.

4.4 Non-Forfeiture options upon Non-Payment of Regular Premiums

If all Regular Premiums have been paid for at least three (3) full Policy Years and any subsequent premium is not duly paid, you shall have the following options:

- i) Convert the Policy to a Reduced Paid up Insurance
If the Regular Premiums for at least three full years have been paid and no further due premiums are paid, then the Policy will be eligible for a non-forfeiture benefit. The non-forfeiture benefit will be a Reduced Paid Up Policy ("Reduced Paid-up Insurance"). The amount of the Reduced Paid-up Insurance shall be determined by multiplying the Basic Sum Assured with the ratio of the number of Regular Premiums paid to the total number of Regular Premiums payable during the Premium Payment Term. The Guaranteed Monthly Regular Income payments will then become the Reduced Paid Up Value divided by 180 and the same will be payable as Survival Benefit. In case of death of the Person Insured an additional payment of 25% of the Reduced Paid- Up Value will be paid together with the accrued Simple Reversionary Bonus. If the reduced monthly income is less than Rs. 1000, then the Survival Benefit will be paid on a yearly basis. The Reduced Paid-up Insurance is not eligible for any future Simple Reversionary Bonuses and Terminal Bonus.

Or

- ii) Surrender the Policy
If the Regular Premiums for at least three full years have been paid, the Policy acquires a Surrender Value as set out in Section 4.5. Instead of continuing with the Policy the same may be surrendered for its Surrender Value. Upon Payment of the Surrender Value, the Policy terminates and all other benefits payable by the Company under the Policy shall cease.

4.5 Surrender Value

The Policy acquires a Surrender Value provided:

- a) The Policy has been in full force for at least three years, and
- b) All Regular Premiums up to the third Policy Anniversary has been paid in full.

Guaranteed Surrender Value: Guaranteed Surrender Value is equal to 30% of the Regular Premiums paid excluding the first year Annualised Premium and any extra premiums paid on account of adverse health condition or occupation of the Person Insured, if any, less the Survival Benefits already paid.

The Guaranteed Surrender Value payable will be subject to any statutory or any other restrictions/requirements as may be applicable.

Cash Surrender Value: The Policy may acquire a Cash Surrender Value which shall, at no point of time, be lesser than the Guaranteed Surrender Value. The Cash Surrender Value will depend on the Paid- Up Value as defined in Section 4.4(i) suitably reduced by the Survival benefits already paid and the surrender value factor.

The Cash Surrender Value will be quoted only on receipt of a surrender request and the surrender value factor depends on the then prevailing market conditions and is not guaranteed. The Company can change the surrender value factors at any time during the term of the Policy, at its discretion.

Section 5 – Termination of the Policy

The Policy will be terminated on the earliest of the following:

- ❖ The Date on which the Policy is surrendered.
- ❖ At the expiry of three years from the date of lapsation, when the Policy has not been reinstated and provided the said Policy has not acquired any value under Section 4.4.
- ❖ On the Company's payment of the Maturity Benefit on the Maturity Date of the Policy or the payment of the last Guaranteed Monthly Regular Income payment (in case of a death claim during the Premium Payment Term).

Section 6 - General Provisions

6.1. Free Look Provision

You have a period of 15 days from the date of receipt of the Policy document to review the terms and conditions of this Policy. If you have any objections to any of the terms and conditions, you have the option to return the Policy stating the reasons for the objections and you shall be entitled to a refund of the Regular Premiums paid subject only to a deduction of a proportionate risk premium for the period of cover in addition to the expenses incurred on medical examination (if any) and the stamp charges.

All your rights under this Policy shall immediately stand extinguished at the cancellation of the Policy.

6.2. Policy Loan

Loan is not available under this Plan

6.3. Beneficiary

The Beneficiary/Beneficiaries is/are the person or persons that you may nominate (in accordance with Section 39 of the Insurance Act, 1938) or assign (in accordance with Section 38 of the Insurance Act, 1938), to receive the insurance proceeds upon death of the Person Insured.

In case of a nomination a "Contingent Beneficiary" can be named by you, to receive insurance proceeds in case the original Nominee is no longer alive. While the Person Insured is alive, you may change any Beneficiary or Contingent Beneficiary (other than in the event of an assignment in accordance with Section 38 of the Insurance Act, 1938).

Where the Nominee is a minor, you may appoint any person to receive the benefits payable during the minority of the Nominee. If there are more than one Beneficiary, and unless you

have chosen otherwise, upon death of the Person Insured, the benefits will become payable in equal shares to all the Beneficiaries.

Where the owner of the Policy is different from the Person Insured and no nomination has been made under the Policy, the Owner of the Policy shall be the Beneficiary and in the event of the death of the Policy owner, the Beneficiary/ Beneficiaries shall be the executors, administrators or other legal representatives of the Policy Owner.

6.4. Assignment

You may assign this Policy by written notice as per the provisions of Section 38 of the Insurance Act, 1938, and in such an event, the rights of the Person Insured and/or the Nominee(s) shall be subject to such an assignment in favour of the assignee.

6.5. Nomination

Where the Policyholder is also the Person Insured, the Policyholder may at any time before the Policy matures, nominate a person/(s) to receive the Policy Benefits in the event of the death of the Person Insured before maturity. Where the Owner of the Policy is different from the Person Insured, nomination of a beneficiary is not permissible as per Section 39 of the Insurance Act, 1938.

Where such Nominee is a minor, the Policyholder may also appoint any person who is a major (also referred to as "Appointee"), to so receive the Policy Benefits during the minority of the Nominee. The Company will not recognize a nomination or a change in nomination for the Policy, until it receives a written notice of the nomination or change in the nomination from the Policyholder at its office. The Company will not express any opinion on the validity or legality of the nomination. Policyholder can make a nomination only with regard to the entire Policy. If no Nominee is alive at the time of death of the Person Insured, the Policyholder's estate shall be deemed to be the Nominee.

6.6 Alterations

The Policyholder has the option to make the following alterations to the Policy:
The permitted alterations are: Change of Premium Payment frequency; Change of Nominee Details; and Change of Assignment Details.

Only a duly authorized officer of the Company has the power to make alterations in the Policy, as per your request. Neither the Company's Financial Advisor nor anyone other than a duly authorized officer of the Company has the power to waive any of the rights or requirements of the Policy.

6.7 Suicide Exclusion

In the event the Person Insured commits suicide, whether sane or insane at that time, within one year from the Date of Commencement of insurance cover or the date of issue of the Policy (as set out in the Schedule) or the date of the last reinstatement, whichever is later, the insurance cover shall be void and we shall not be liable to pay any of the benefits provided under the Policy, including but not limited to the Basic Sum Assured. However, the Regular Premiums paid shall be refunded without interest, less the expenses incurred on medical examination (if any) and stamp charges.

6.8 Proof of Age

The age of the Person Insured is based on the proof of age submitted and the premiums are calculated on the last birthday prior to the Date of Commencement of the risk under the

Policy. Should the actual age of the Person Insured differ from the age stated in the Application, we shall, without prejudice to our right to void or cancel the Policy or other statutory rights and/ or remedies be entitled to the following at any time during the Policy term:

- If the actual age proves to be higher than what is stated in the Application, the Basic Sum Assured would be adjusted to that which would have been purchased by the amount of premium paid, had the age been correctly stated; or
- If the actual age proves to be lower than what is stated in the Application, the premium paid in excess will be refunded to the Owner without interest or may be adjusted towards future premium. The Policy will continue to be in force as per the terms specified therein; or
- If the Person Insured's actual age is such that it would have made him/ her ineligible for the insurance cover stated in the Policy, the Company reserves the right at its sole discretion to take such action as may be deemed appropriate including cancellation of the Policy and forfeiture of Premium(s) received.

6.9 Travel, Residence and Occupation

This Policy does not impose any restrictions on residence or occupation except as otherwise provided by law.

There would be no restrictions on travel except to areas notified by local governments for "Travel Advisory" risks.

6.10 Disclosure

This Policy has been issued on your representations that you have made full and accurate disclosures of all material facts and circumstances and that you have not misrepresented or suppressed any material facts or circumstances. In the event it comes to our knowledge that you have misrepresented or suppressed any material facts and circumstances we shall reserve the right to take such action, as we deem appropriate including cancellation of the Policy and forfeiture of the Regular Premium(s) received.

6.11 Incontestability

In accordance with the provisions of Section 45 of the Insurance Act, 1938, "No Policy of life insurance effected before the commencement of this Act shall after the expiry of two years from the date of commencement of this Act and no Policy of life insurance effected after the coming into force of this Act shall after the expiry of two years from the date on which it was effected, be called in question by an insurer on the ground that a statement made in the proposal for insurance or in any report of a medical officer, or referee, or friend of the Person Insured, or in any other document leading to the issue of the Policy, was inaccurate or false, unless the insurer shows that such a statement was on material matter or suppressed facts which it was material to disclose and that it was fraudulently made by the Policy owner and that the owner knew at the time of making it that the statement was false or that it suppressed facts which it was material to disclose:

Provided that nothing in this section shall prevent the insurer from calling for proof of age at any time if he is entitled to do so, and no Policy shall be deemed to be called in question merely because the terms of the Policy are adjusted on subsequent proof that the age of the Person Insured was incorrectly stated in the proposal."

6.12 The Policyholder's Rights

To exercise your rights under this Policy, you should follow the procedures stated in this Policy. If you want to request a change of beneficiary, change an address or request any other action by us, you should do so only on the forms prescribed for each purpose. These forms are available with your Financial Advisor or from the Company's local office.

6.13 Loss of the Policy Document

If the Policy document is lost or destroyed, at your request and on fulfilment of prescribed conditions, the Company may issue a duplicate Policy document duly endorsed to show that it is issued following the loss or destruction of the original document. The Company has the right to charge a fee up to Rs. 1500 for the issue of a duplicate Policy document. Upon the issue of a duplicate Policy, the original document will cease to have any legal effect.

6.14 Governing Laws and Jurisdiction

The terms and conditions of the Policy shall be governed by and subject to the laws of Republic of India. All Premiums and Benefits are expressed and payable in Indian Rupees. The parties shall be subject to the jurisdiction of the law courts situated at Bangalore for all matters and disputes arising from relating to or concerning the application and declaration and the Policy.

6.15 Taxation

The Tax benefits on the Policy would be as per the prevailing provisions of the tax laws in India and are subject to changes made therein from time to time. If required by the relevant legislations prevailing from time to time, the Company will withhold taxes from the benefits payable under the Policy.

Taxes, including any cess, surcharge or other levies thereon, and any other statutory levies, as and when applicable, will be levied on the premiums paid/payable by you.

6.16 Claims Procedure

Death Claims

If the Person Insured dies while the Policy is in force for the full Sum Assured, we shall settle the death claim subject to the terms and conditions of the Policy contract and prevailing laws and submission of the following documents, provided all premiums fallen due till the date of death have been paid:

- Written intimation of death by the Beneficiary/ legal heir
- The original Policy document.
- The Claim forms as prescribed by us.
- Proof of the Age of the Person Insured.
- Official death certificate issued by a competent authority acceptable to the Company.
- FIR, Police inquest report and post-mortem report where the death is due to accident or unnatural cause.
- Proof of title to the Policy like succession certificate, legal heirship certificate (applicable in the absence of a nomination).
- Discharge voucher as prescribed by us.
- Any additional documents or forms as may be required by us.

The Company reserves the right to investigate any claim and has the right to obtain all documents relating to the circumstances of a claim before payment of benefits.

Maturity Claims

We shall settle the maturity claim on the Maturity Date, provided the Person Insured is alive on that date, has paid all the instalment premiums including interest, if any, till the date of maturity and submits the following requirements to us:

- The original Policy document

- The Claim forms as prescribed by us
- The discharge voucher as prescribed by us
- Any additional forms as may be required by us

We shall settle the maturity proceeds to the Person Insured (if same as the Policy owner) or the assignee, as the case may be.

6.17 Grievance Redressal Mechanism

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

MetLife India Insurance Company Ltd.,
'Brigade Seshamahal', 5 Vani Vilas Road, • Basvangudi • Bangalore – 560 004, India.
Toll Free Help line: 1-800-425-6969 (8am –8pm) • Phone: +91 80 2650 2244 • Fax
+91 80 2242 1970
Email: indiaservice@metlife.com • Web: www.metlife.co.in

Please address your queries or service complaints to the Customer Services Department, and your grievances to the Grievance Redressal Officer, who are authorized to review your queries or complaints or grievances, as applicable and address the same. Please note that only these employees have the authority to resolve your complaints and grievances. The Company 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.

2. In case you are not satisfied with the decision of the above office, or have not received any response within 10 days, you may contact the following official of Insurance Regulatory and Development Authority for resolution:

Grievance cell (Complaint against Life insurer)
Insurance Regulatory and Development Authority
Parishrama Bhawanam, 5-9-58/B, Basheerbagh, Hyderabad – 500 004.
Phone: +91-40- 6682 0964/6678 9768 (Ext –251)
E-mail: lifecomplaints@irda.gov.in

3. In case you are not satisfied with the decision/resolution of the Company, you may approach the Insurance Ombudsman at the address enclosed as Annexure A to this document, if your grievance pertains to:
 - An 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
 - Non-receipt of your insurance document
4. The complaint should be made in writing duly signed by the Policyholder or by his/her legal heirs with full details of the complaint and the contact information of complainant.
5. As per provision 13(3) of the Redress of Public Grievances Rules 1998, the complaint to the Ombudsman can be made:
 - Only if the grievance has been rejected by the Grievance Redress Machinery of the Insurer
 - Within a period of one year from the date of rejection by the insurer
 - If it is not simultaneously under any litigation.

6.18 Customer Service

The Policyholder can seek clarification or assistance on the Policy from the following:

- Company's Customer Service Representative through the toll free number: 1-800-425-6969 during business hours (9am – 6pm).
- Visit us at www.metlife.co.in
- Mail us at indiaservice@metlife.co.in
- The Policyholder can also write to us at
Customer Service Desk,
MetLife India Insurance Company Limited
Registered Office,
'Brigade Seshamahal'
5, Vani Vilas Road,
Basavanagudi,
Bangalore – 560 004.

7.0 Changes to Terms and Conditions:

The Company reserves the right to change these Terms and Conditions, the rules and the benefits conferred by the Policy if there is a change in the law, legislation or taxation affecting the Company or the Policy, or if there is a change in circumstances which makes it impossible or impracticable for the Company to follow these Terms and Conditions.

The Company will intimate the Person(s) Insured about any changes to the Terms and Conditions and/or to the benefits payable under this Policy, within four weeks from the date of effecting such changes.

If the Person(s) Insured does not agree to the change/s but does not intimate such disagreement to the Company within four weeks of the intimation by the Company of the change/s the Person Insured will be deemed to have accepted the change/s. Where however such disagreement to the change/s is intimated to the Company within the aforesaid period the Person Insured may terminate the policy. The Policy shall stand terminated with effect from the date or the last of the dates (if there are more than one change notified at one time but such changes are effective from different dates) on which the change/s come/ s into effect.