

## Some points to remember

**(This is for general guidance. This is not exhaustive.)**

- I. a) Maximum AB/E/DB permissible on a single life is Rs. 10.00 Lakhs only inclusive of all previous in force insurances. Except under T-111 & 128 [Where it is inbuilt] & Jeevan Sanchay Policies additional cover of Rs. 25 lacs is allowed
- b) AB/EDB is allowed to all male and female lives including students who have completed 18 years of age. This, however, will not be granted to certain categories of persons who are having hazardous occupation or are physically disable failing in Group A with more than 2 limbs affected and to those failing in Group B of physically handicapped persons.
- c) AB now can be granted to physically handicapped lives where only one or two limbs are affected and where the cause of handicap is accident or the deformity is congenital or due to polio in childhood. But EDB/PDB will not be granted to those who have lost more than one limb i. e. only AB will be granted.
- d) Maximum age at entry for granting accident benefit at the time of inception of the policy will be the same as maximum age at entry applicable to the plan under which the policy is taken. The maximum age upto, which this benefit is available. However, remains as age 70 years only.
- e) Policies issued under plan 91 automatically get cover of double accident benefit without paying any extra premium. This cover is now counted while deciding Maximum overall cover of Rs 25 lacs
- f) Double accident benefit is automatically granted to first Rs. 1,00,000 under one or more policies issued under plan 102 from the anniversary failing on or after the attainment of age 25 by the life assured without paying any additional premium and This amount will not be counted for the maximum overall benefit of Rs 25 lacs granted under other plans.
- g) Double accident benefit is now granted under plan 103 subject to overall restriction.
- II. a) Limit of the signatory for MHR and Underwriting Authority will be double the sum proposed, under Plans 43, 52, 58, 94, 88, 89, 104, 106, 107 and 108. For Plan 103 and 121 it will be 1.5 times. But for plan 105 and 133 it will be 3 times.
- b) Proposals under Plan 43, 52 and 58 will be underwritten at Divisional Office (NB/ACTL Department) only.
- c) All proposals with impairment, attracting 'Impairment Code No.' will be underwritten at Divisional Office (NB/ACTL Dptt.) only.
- III. a) For Plans 88, 89, 104, 105, 106, 107, 108 and 133 M.E.'s limit required is equal to basic sum proposed or by the Medical Examiner having maximum limit at that center though the same may be less than basic sum to be assured.
- b) Maximum maturity age under plans 88 and 89 is raised to 70-year age NBD and restriction on maximum sum assured is also withdrawn.

- c) Plan 89 will not be granted if the female has undergone two or more caesarean operations. In case of personal history of one cesarean, single extra premium of Rs. 2% is charged.
  - d) Maximum insurance of Rs. 50,000/- can be granted to self-earning females failing under female cat. III (i.e. Vegetable Vendors, Milk- maids. etc.) under Plan 89 inclusive of amount of insurances taken under other plans.
- IV. a) Clause No. 4(b) should not be imposed under all plans in respect of minor girls and unmarried females.
- b) Under Money Back Plans on the lives of minors it should be ensured that the L.A. attains majority before the first survival benefit becomes due.
  - c) Under Plan 27 on the lives of minors, definite conversion clause should be imposed where L.A. is not attaining majority at the end of 5 years from the date of commencement of the policy. In this case the minor life should be first cases.
  - d) Minor life to be assured under Plan 27 should be standard life only. No definite conversion is allowed to minor lives under Table 27, except in (c) above.
  - e) Under Plan 102 and 109 child aged 5 and above should be school- going. In such cases, only School Certificate is accepted as proof of age. Municipal Birth Certificate will, however, be accepted if both parents submit their declaration in the prescribed form that the child is attending the school.
- V. a) Where the age is admitted on the basis of sub-standard age-proof. Class I extra premium or Rs. 1.50% whichever is higher should be charged. However such extra premium is not to be charged under Plan 18.
- b) Whenever the propose / life assured holds previous insurance, reference to previous policy papers is necessary as per our rules in this behalf.
  - c) Generally no MHR is required where the sum proposed is Rs. 1.0 Lakh or less.
  - d) Sum assured under Plan 103 considered without Medical when the child of propose is aged less than a year is not to be counted for the limits under non-medical Scheme (NMS/NMG).
  - e) Plan 103 (Jeevan-Chhaya) is granted to males and females (Category I and II) without Med. Exam, if they have a child aged less than a year on the case of proposal. However, where the child's age exceeds one year, the proposal can be considered under Medical Scheme or under Medical Scheme or under non- medical special scheme subject to overall combined limit of Rs. 1,00,000 together with Plans - 88, 89, 104, 106, 107, 108, 121, 135. This plan is now allowed to bachelors.
- VI. Maximum sum assured that can be granted under plan 91 will be Rs. 500 lakhs less total of in force insurance with AB/EDB granted under other plans including earlier sum assured taken under Janarakha plan.

VII Evidence of Health for completion of proposals & some special points on Medical cases.

**1. Interval between Med. Exam. Requirements & data of completion.**

Within 3 Months

DGH for married ladies after one month from date of last Menstruation No. Requirement for male. Windows and unmarried ladies

3 to 6 months

D.G.H.

6 months to 1 year D.G.H. and F.M.R.

After 1 year

Fresh Proposal Form and F.M.R.

In Substandard life cases, where DGH is suggested FMR is required after 3 months

2. A Medical Report remains in force for 6 month for standard lives and 3 months for sub-standard lives.
3. Obtain consent for any charge before completion.

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### **MOST IMPORTANT TO NOTE**

- 1) Total insurance on the lives of each children should not exceed twice the parents insurance. And Premium outlay should be within 60% of family income for total family insurance.
- 2) All cases not falling within the scope of above rules 'Regarding Insurance on the lives of minor Boys and Girls' will be referred to Zonal / Central office for underwriting along with MHR by B.M.
- 3) For aged 18 to 25 years (For non-earning lives) maximum insurance allowed is 40 lacs. Sub to other restrictive conditions.
- 4) Whenever the P.W. Benefit is desired under plans where it is allowed it should be ensured -
  - a) that the proposal on F. No. 300 on the life of the propose is received.
  - b) Full Medical Report from authorized medical examiner is received at the cost of propose
  - c) Standard age proof in respect of propose is also received.
  - d) Propose if female should fall in category I of female lives.
  - e) Proposal's life is absolutely standard.
  - f) Sub-standard Minor life up to 18 yrs. Ibd. Should not be considered for Risk Plans. Offer CDA with Clause 76.
- 5) Withdrawal of Children's Plans Table Nos. 80, 81 and 92 vide C.O. Cir. Ref. Actl/ 1616/4 dtd. 20.10.97 w.e.f. 1.12.97.
- 6) If age of the minor is less than 10 years than Medical and special reports are not required.
- 7) Addendum to form no 340 giving full details of family Insurance including installment Premium and mode and family income is must in case of risk plan for SUC above 2 lacs and non-risk plan for SUC above 5 lac.

### IMPORTANT NOTE

1. Review Slips of the proposal forwarded to Divisional Office must be signed with stamp by HOD of the Branch with initials of scrutiny assistant.
2. Every Xerox paper submitted should be the propose and witnessed by the agent or Development Officer as it is a Part of the proposal. Signature on it is must.
3. Insurance on foreign national and even if of Indian origin residing outside or in India to be referred to D. O.
4. Extract of School certificate should be signed by agent, development officer and propose. If agent is 'Club Member' then only signature of development officer is not required.
5. Branch should call requirements as per chart and also as per underwriting manual only.
6. Use of whitener is not allowed at any stage in NB. If may affect the provisions of contract act.
7. If previous policy is accepted by DO / ZO / CO then all the further proposals are to be forwarded to divisional office with previous policy docket even through special reports are not required as per chart.
8. Where there are one or more early death and the maturity age exceeds 50 refer the cases to DO (Ignore only if the death is due to accident).

Relationship between Annual Income and Allowable Cover (duly rated up total sum assured).

Age Group	Maximum Cover allowable as Multiple of annual income
Up to 30 years	20 times
31 to 40 years	15 times
41 to 50 years	12 times
51 and over	10 times