



ENSURING SMILES FOREVER



Pure Term Life Insurance Plan
 UIN: 111N084V01



BEFORE YOU COMMIT YOUR HARD-EARNED MONEY →

- » Analyse your Insurance and Investment needs
- » Understand the product in detail
- » Know the tenure of Renewal Premium payments

Whether you work to live, or live to work, you rely on your salary / income to maintain your lifestyle. Your income pays for all essential financial commitments in life like rent, mortgage, utility bills etc. More importantly it also pays for your child's school fee, a long term loan or lifestyle choices you make for your family. An unforeseen event can take this security of regular income away in a second. Hence you require a solution that negates these risks and helps sustain the monthly requirements of your family.

Monthly payout under the policy would replace a portion of your income / salary on the unfortunate eventualities of death, disability or critical illness.

SBI Life - Smart IncomeShield Insurance* – A policy that gives you advantage against eventualities of death, disability or critical illness by providing you with an Income.

Replacement Benefit. Smart IncomeShield Insurance can meet your and your family's daily lifestyle finances.

*SBI Life - Smart IncomeShield Insurance will be referred to as Smart IncomeShield Insurance hereafter.

About Smart IncomeShield Insurance

Smart IncomeShield Insurance is a comprehensive non-participating term insurance Policy.

Key Highlights

- Establishes a solid foundation for a lifetime of financial security, ability to continue to maintain the life style for your family.
- Customize your policy with various plan options :
 - Basic Plan** - provides benefit as per benefit option chosen in an event of Death.
 - Advantage Plan** - provides benefit as per benefit option chosen in the event of Death or Critical illness or Total permanent disability, whichever occurs first.
- Wide variety of Monthly income benefits options to choose from which can meet your various financial obligations in an event of uncertain circumstances. We offer three Income benefit payout options on occurrence of an unfortunate circumstance.
 - Benefit Option I** : Regular monthly payouts for 5 years.
 - Benefit Option II** : Regular monthly payouts for 10 years.
 - Benefit Option III** : Regular monthly payouts for the outstanding policy term.
- Additional Lump sum payment of 12 times the monthly income immediately on claim.

Eligibility Conditions

Scheme Type	Basic Plan		Advantage Plan	
	Death Benefit			Death / Total Permanent Disability (TPD) due to Accident or Sickness / Critical Illness
Age* at Entry	Min: 18 years; Max: 65 years		Min: 18 years; Max: 60 years	
Age* at Maturity	70 years		65 years	
Policy Term	Min: 5 years Max: 25 years			
Payout Term	Benefit Option I : 5 years	Benefit Option II: 10 years	Benefit Option III: Outstanding Policy Term	
Monthly Income	Min: Rs 10,000 p.m. Max: No Limit		Min: Rs. 10,000 p.m. Max: Rs. 50,000 p.m.	
Premium Paying Term (PPT)	<ul style="list-style-type: none"> Regular premium (Same as policy term) Limited Premium payment term (LPPT) (Allowed only for Basic Plan with Benefit Option III & Advantage Plan with Benefit Option III) 			

*All the references to Age are - Age as on last birthday.

Sum Assured	12 x Monthly Income benefit amount x Payout term (This sum assured is a notional amount in the case of Benefit Option III as the actual amount payable would depend on the outstanding policy term at claim)
Premium Frequency	Yearly / Half-yearly / Quarterly / Monthly# The premiums for various modes as percentage of annual premium are given below: i) Monthly Premium- 8.9% of annual premium ii) Quarterly Premium- 26.5% of annual premium iii) Half-yearly Premium- 52.0% of annual premium
Large Benefit Discount	For monthly income benefit of Rs. 30,000 or more, 3% discount on the tabular premium.

Under Advantage plan, premium rates and product terms are initially guaranteed only for the first 5 years and these are reviewable every 5 years thereafter. The rates if reviewed would apply to existing customers 5 years after inception and every 5 years thereafter and to new customers.

#For monthly modes, 3 months premium to be paid in advance and renewal payment is allowed only through ECS, Credit card, Direct Debit and SI-EFT

Benefits Structure

	Basic Plan	Advantage Plan
Death Benefit	<ul style="list-style-type: none"> Monthly income as opted will be paid for the payout term as chosen, Additional benefit equal to 12 times the monthly income will be paid as lump sum immediately. 	<ul style="list-style-type: none"> Monthly income as opted will be paid for the payout term as chosen, Additional benefit equal to 12 times the monthly income will be paid as lump sum immediately.
Critical Illness or Total and Permanent Disability (TPD) Benefit	<ul style="list-style-type: none"> Not Applicable 	<ul style="list-style-type: none"> Monthly income as opted will be paid for the payout term as chosen, Additional benefit equal to 12 times the monthly income will be paid as lump sum immediately.
Maturity Benefits	No benefits payable.	
Surrender Benefit	No surrender Benefits are payable.	
Paid Up Value	<ul style="list-style-type: none"> Paid-ups are not allowed for Benefit Options I and II. Paid-up value payable under Benefit Option III (Basic Plan & Advantage plan). 	

General Provisions

Limited Premium Payment Term (LPPT)

- LPPT is offered only for Basic Plan with Benefit Option III and Advantage Plan with Benefit Option III mentioned above. The Premium payment term will be as follows:

Policy Term	5	6	7	8	9	10	11	12	13	14
PPT	3	4	4	5	6	6	7	8	8	9

Policy Term	15	16	17	18	19	20	21	22	23	24	25
PPT	10	10	11	12	12	13	14	14	15	16	16

Surrender Benefit

No Surrender benefits are payable.

Paid Up Value

- Paid ups are not allowed for Benefit Options I and II.
- Paid ups are allowed for Benefit Option III, benefit payable will be as follows:
 - Paid-up benefit is available at any point of time, provided at least two years' premiums are paid.
 - After Paid up, monthly income will reduce and it will be called as Paid up Monthly Income (PUMI). It will be equal to "Monthly Payout × (Total Premiums paid / Total Premiums payable)".
 - Correspondingly the lump sum benefit would also be reduced and would be equal to: 12 times the PUMI.



Grace Period and Revival Facility

We offer you 30 days grace period from the premium due date for yearly/half yearly/ quarterly premium and 15 days for monthly premium. The policy will remain in force during grace period and will lapse if no premium is paid. A lapsed policy may be revived within 3 years from the date of the first unpaid premium subject to satisfactory proof of insurability as required by the approved underwriting policy from time to time and on payment of all overdue premiums with interest.

- **Nomination & Assignment**

Provided the policyholder is the life assured, he / she may, at any time before the policy matures for payment, nominate a person or persons as per Sec 39 of the Insurance Act 1938, to receive the policy benefits in the event of his / her death. Nomination will be compulsory and the customer will be requested to nominate in the proposal form without fail.

Assignment is allowed. Assignee/s shall be a person/s to whom the policy is assigned by the policyholder in accordance with the provision of section (38) of the Insurance Act 1938 to transfer all the equities and liabilities to which policy holder was subject at the date of assignment. After assignment, assignee may institute any proceedings in relation to the policy without obtaining the consent of the policyholder or making him the party to such proceedings.

- **Waiting Period**

- There is a 90-day waiting period for CI and TPD (Sickness) benefit under Advantage benefit, applying at commencement of the policy and subsequent revival.
- Only one claim shall be entertained during the policy term which will be on Death or any one of the Critical illnesses stated or Total permanent disability, whichever occurs first. The coverage will be automatically terminated after acceptance of claim.

- **Large Benefit Discount**

For Monthly Income Benefit of Rs 30,000 or more, 3% discount will be given on tabular premium.

- **Free Look Period**

This product offers a 15 days free look period for policies sourced through any channel mode other than Distance Marketing and 30 days for policies sourced through Distance Marketing. In the unlikely event that policyholder is not satisfied with the terms and conditions of the policy, and wish to cancel the policy, he/she can do so by returning the policy to the company along with a letter requesting for cancellation, stating reasons for objection within 15 days for policies sourced through any channel mode other than Distance Marketing and 30 days for policies sourced through Distance Marketing of receipt of policy. Premium paid by policyholder will be refunded after deducting stamp duty, cost of medical expenses incurred in that connection. The proportionate risk premium for the period of cover will also be deducted.

- **Tax Benefits**

- U/s 80C of the Income Tax Act 1961 on your premiums.
- U/s 10(10D) of the Income Tax Act 1961 on your death proceeds under the policy.
- Tax benefits as per prevailing norms under the Income Tax Act, 1961. Tax laws are subject to change in future. Please consult your tax advisor for more details.

Critical Illnesses Covered

The following illnesses are covered:

• Cancer	• Coronary Artery Bypass Surgery	• Heart Attack
• Heart Valve Surgery	• Kidney Failure	• Major Burns
• Major Organ Transplant	• Paralysis	• Stroke
• Surgery of Aorta	• Coma	• Motor Neuron Disease
• Multiple Sclerosis		

The benefit will be payable on the occurrence of critical illness and this will be reckoned as the date of first diagnosis of the illness.

Definitions of above illnesses are as follows

1. Cancer

A malignant tumour characterised by the uncontrolled growth and spread of malignant cells and the invasion of tissue. The diagnosis must be histologically confirmed. The term cancer includes leukemia, but the following cancers are excluded:

- All tumours which are histologically described as pre-malignant, non-invasive or carcinoma in situ;
- All forms of lymphoma in the presence of any Human Immunodeficiency Virus;
- Kaposi's Sarcoma in the presence of any Human Immunodeficiency Virus;
- All skin cancers, other than invasive, malignant melanoma; and
- Early prostate cancer other than which is histologically described as T1 (including T1a and T1b) or another equivalent or lesser classification.

2. Coronary Artery Bypass Surgery

The undergoing of open heart surgery on the advice of a consultant cardiologist to correct narrowing or blockage of one or more coronary arteries with bypass grafts. Angiographic evidence to support the necessity of the surgery will be required. Balloon angioplasty, laser or catheter-based procedures are not covered.

3. Heart Attack

The first occurrence of heart attack or myocardial infarction which means death of heart muscle, due to inadequate blood supply, that has resulted in all of the following evidence of acute myocardial infarction:

- typical clinical symptoms (for example, characteristic chest pain);
- new characteristic electrocardiographic changes;
- the characteristic rise of cardiac enzymes or Troponins recorded at the following levels or higher;
 - Troponin T > 1.0 ng/ml
 - AccuTnl > 0.5 ng/ml or equivalent threshold with other Troponin I methods;
- the evidence must show a definite acute myocardial infarction.

The following are not covered :

- angina;
- other acute coronary syndromes, for example myocyte necrosis.

Diagnosis must be confirmed by a consultant cardiologist acceptable to the Company.

4. Heart Valve Surgery

The actual undergoing of open-heart surgery to replace or repair heart valve abnormalities. The diagnosis of heart valve abnormality must be evidenced by echocardiogram and supported by cardiac catheterization, if done, and the procedure must be considered medically necessary by a consultant cardiologist acceptable to the Company.

5. Kidney Failure

End-stage renal failure presenting as chronic irreversible failure of both kidneys to function, as a result of which either regular renal dialysis or renal transplant is undertaken. Evidence of end stage kidney disease must be provided and the medical necessity of the dialysis or transplantation must be confirmed by a consultant physician acceptable to the Company.

6. Major Burns

Third degree (full thickness of the skin) burns covering at least 20% of the surface of the life assured's body. The condition should be confirmed by a consultant physician acceptable to the Company.

7. Major Organ Transplant

The receipt of a transplant of:

- Human bone marrow using haematopoietic stem cells, preceded by total bone marrow ablation; or
- One of the following human organs: heart, lung, liver, kidney, pancreas, resulting from irreversible end-stage failure of the relevant organ. Other stem-cell transplants are excluded.

8. Paralysis

Complete and permanent loss of the use of two or more limbs, as a result of injury, or disease of the brain or spinal cord. To establish permanence, the paralysis must normally have persisted for at least 6 months from the date of trauma or illness

resulting in the life assured being unable to perform his /her usual occupation. The condition must be confirmed by a consultant neurologist acceptable to the Company.

9. Stroke

A cerebrovascular accident or incident producing neurological sequelae of a permanent nature, having lasted not less than six months. Infarction of brain tissue, hemorrhage and embolisation from an extra- cranial source are included. The diagnosis must be based on changes seen in a CT scan or MRI and certified by a neurologist acceptable to the Company.

Specifically excluded are cerebral symptoms due to transient ischaemic attacks, any reversible ischaemic neurological deficit, vertebrobasilar ischaemia, cerebral symptoms due to migraine, cerebral injury resulting from trauma or hypoxia and vascular disease affecting the eye or optic nerve or vestibular functions.

10. Surgery of Aorta

The actual undergoing of surgery (including key-hole type) for a disease or injury of the aorta needing excision and surgical replacement of the diseased part of the aorta with a graft. The term “aorta” means the thoracic and abdominal aorta but not its branches. Stent-grafting is not covered.



11. Coma

A state of unconsciousness with no reaction or response to external stimuli or internal needs.

This diagnosis must be supported by evidence of all of the following:

- No response to external stimuli continuously for at least 96 hours;
- Life support measures are necessary to sustain life; and
- Brain damage resulting in permanent neurological deficit which must be assessed at least 30 days after the onset of the coma. Confirmation by a neurologist acceptable to the Company must be present.

Coma resulting directly from self-inflicted injury, alcohol or drug abuse is excluded.

12. Motor Neurone Disease

Motor neurone disease characterised by progressive degeneration of corticospinal tracts and anterior horn cells or bulbar efferent neurons which include spinal muscular atrophy, progressive bulbar palsy, amyotrophic lateral sclerosis and primary lateral sclerosis. This diagnosis must be confirmed by a neurologist acceptable to the Company as progressive and resulting in permanent clinical impairment of motor functions.

The condition must result in the inability of the life assured to perform at least 3 of the 6 Activities of Daily Living (either with or without the use of mechanical equipment, special devices or other aids and adaptations in use for disabled persons) for a continuous period of at least 6 months.

The Activities of Daily Living are:

- **Washing:** the ability to wash in the bath or shower (including getting into and out of the bath or shower) or wash satisfactorily by other means;
- **Dressing:** the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances;
- **Transferring:** the ability to move from a bed to an upright chair or wheelchair and vice versa;
- **Mobility:** the ability to move indoors from room to room on level surfaces;
- **Toileting:** the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
- **Feeding:** the ability to feed oneself once food has been prepared and made available.

13. Multiple Sclerosis

The definite occurrence of multiple sclerosis. The diagnosis must be supported by all of the following:

- Investigations which unequivocally confirm the diagnosis to be multiple sclerosis;
- There must be current clinical impairment of motor or sensory function, which must have persisted for a continuous period of at least 6 months, and
- Well documented history of exacerbations and remissions of said symptoms or neurological deficits.

Other causes of neurological damage such as SLE and HIV are excluded.

Total Permanent Disability

- A person is considered to be “totally and permanently disabled” only if, the life assured has become totally and irreversibly disabled as a result of accidental bodily injury, sickness or disease. The life assured must be totally incapable of being employed or engaged in any work or any occupation whatsoever for remuneration or profit.
- Total Permanent Disability Benefit will be payable from the date of confirmation of the disability of such nature by a medical practitioner.
- The above disability must have lasted without interruption for at least six consecutive months and must be deemed permanent by an appropriate medical practitioner appointed by the company.

- The benefit becomes due if the life assured becomes totally and permanently disabled due to an accident or sickness and as a result, not able to earn income from any work, occupation or profession for the rest of his / her life.
- Total and permanent disability also includes the loss of both arms, and both legs, or one arm and one leg, or of both eyes. Loss of arms or legs means dismemberment by amputation of the entire hand or foot. Loss of eyes means entire and irrecoverable loss of sight.

How does the policy work?

- **Step 1** : Select plan, Basic or Advantage.
- **Step 2** : Select Benefit Option: I, II or III.
- **Step 3** : Select your Policy term.
- **Step 4** : Select your Monthly Income. You may refer the Illustration mentioned below to calculate the correct amount of Monthly Income required by you.
- **Step 5** : Sum Assured and Premium Payment Term will be calculated as per selections in above steps.
- **Step 6** : Premium payable will be calculated based on the options chosen, your age, gender, etc.



ILLUSTRATION

Mr. Jai is 35 years old healthy male, his monthly requirements are as mentioned below.

Monthly Requirements	Amount (₹)
Rent	18,000
Food	10,000
Children Education	6,000
Loan Repayments	-
Holidays	2,000
Car Expenses	-
Utilities	3,000
Credit Card Bills	-
Pension, Insurance premiums etc.	10,000
Others	1,000
Total	50,000



His total monthly requirements are Rs. 50,000. How can he safeguard his monthly requirements?

- He can safeguard his monthly requirements by purchasing Smart IncomeShield Insurance Policy.
- If he opts for Advantage plan, with monthly income of Rs. 50,000 for policy term of 20 years and payout term of 10 years. Monthly income of Rs. 50,000 is guaranteed for him & his family for 10 years from the date of acceptance of his claim. In addition to this, we will pay 12 times of his chosen monthly income benefit in lump sum immediately at claim. The claim event in the Advantage Plan is the earliest occurrence of death, critical illness or Total Permanent Disability. There is no maturity benefit under this product.
- For this financial security, Mr. Jai needs to pay Rs. 4,268 (exclusive of applicable taxes) monthly for the policy term, which is not even 10 % of his chosen monthly income payout. (The premium mentioned here is for illustrative purpose only).

Exclusions

No benefit will be payable in respect of any condition arising directly or indirectly from, through or in consequence of the following exclusions and restrictions :

- **Suicide Exclusion**

If the Life Assured, whether sane or insane, commits suicide within 12 months from the date of issue of this Policy or the date

of any revival/reinstatement of this Policy, the policy will become null and void. No benefit will be paid under such circumstances.

- **Exclusions for CI**

- i. Diseases in the presence of an HIV infection.
- ii. Diseases that have previously occurred in the life insured (i.e. the benefit is payable only if the disease is a first incidence, regardless of whether the earlier incidence occurred before the individual was covered or whether the insured was covered by the Company or another insurer).
- iii. Any disease occurring within 90 days (i.e. during the waiting period) of the start of coverage or from the last revival.
- iv. No payment will be made by the Company for any claim directly or indirectly caused by, based on, arising out of, or howsoever, to any Critical Illness for which care, treatment, or advice was recommended by or received from a Physician, or which first manifested itself or was contracted before the start of the Policy Period, or for which a claim has or could have been made under any earlier policy; Date of occurrence of critical illness will be reckoned for the above purpose and for the purpose of evaluating waiting period as the date of diagnosis of the illness/ condition. It will be the date on which the medical examiner first examines the life assured and certifies the diagnosis of any of the illness/ conditions.
- v. Any congenital condition.
- vi. Intentional self-inflicted injury, attempted suicide, while sane or insane.
- vii. Alcohol or Solvent abuse or taking of Drugs, narcotics or psychotropic substances unless taken in accordance with the lawful directions and prescription of a registered medical practitioner.
- viii. Failure to seek or follow medical advice.
- ix. War, invasion, act of foreign enemy, hostilities (whether war be declared or not), armed or unarmed truce, civil war, mutiny, rebellion, revolution, insurrection, military or usurped power, riot or civil commotion, strikes.
- x. Taking part in any naval, military or air force operation during peace time.
- xi. Participation by the insured person in any flying activity, except as a bona fide, fare paying passenger of a recognized airline on regular routes and on a scheduled timetable.
- xii. Participation by the insured person in a criminal or unlawful act with criminal or unlawful intent.
- xiii. Engaging in or taking part in professional sport(s) or any hazardous pursuits, including but not limited to, diving or riding or any kind of race; underwater activities involving the use of breathing apparatus or not; martial arts; hunting; mountaineering; parachuting; bungee jumping.
- xiv. 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.

- **Exclusions for TPD**

Exclusions: Disability arising from or due to the consequences of or occurring during the events as specified below is not covered.

- i. Intentional self-inflicted injury, attempted suicide, insanity or immorality or whilst the life assured is under the influence of intoxicating liquor, drug or narcotic substances.
- ii. Criminal acts: Life assured involvement in Criminal and/or unlawful acts.
- iii. 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.
- iv. 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.
- v. Aviation: Life assured participation in any flying activity, other than as a passenger in a commercially licensed aircraft.
- vi. Hazardous sports and pastimes: Taking part or practicing for any hazardous hobby, pursuit or any race not previously declared and accepted by the Company.
- vii. Drug Abuse: Life assured under the influence of Alcohol or solvent abuse or use of drug or narcotic substances except under the direction of a registered medical practitioner.
- viii. Disability arising directly or indirectly as a result of infection from, or treatment of, any HIV and/or AIDS.

Prohibition of Rebates : Section 41 of Insurance Act 1938 states

1. No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer.

Provided that acceptance by an insurance agent of commission in connection with a policy of life insurance taken out by himself on his own life shall not be deemed to be acceptance of a rebate of premium within the meaning of this sub section if at the time of such acceptance the insurance agent satisfies the prescribed conditions establishing that he is a bona fide insurance agent employed by the insurer.

2. Any person making default in complying with the provisions of this section shall be punishable with fine which may extend to five hundred rupees.

Non-Disclosure: Section 45 of Insurance Act, 1938 states

- 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 insured, or in any other document leading to the issue of the policy, was inaccurate or false, unless the insurer shows that such statements was on a material matter or suppressed facts which it was material to disclose and that it was fraudulently made by the policy-holder and that the policy holder 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 life insured was incorrectly stated in the proposal.

Contact us Today
Call Toll Free 1800 22 9090



SBI Life Insurance Co. Ltd. is a joint venture between State Bank of India and BNP Paribas Cardif.

www.sbilife.co.in | SMS - 'CELEBRATE' to 56161 | Email: info@sbilife.co.in

SBI Life Insurance Co. Ltd.

Registered and Corporate Office: Natraj, M.V. Road & Western Express Highway Junction,
Andheri (E), Mumbai - 400 069.

IRDA Regn. No. 111

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