UNDERWRITING WRITE-UP FOR NB DEPTS (UPDATED up to: 07.09.2019)

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E&OE:- In case of doubts refer latest CO circulars. If any suggestion / feedback , please send through email SUBRAMANYA@licindia.com

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How to use the CHARTS - Follow the steps below Sequentially

Step I - Categorise the Life as Earning Male / Female (cat. A(i), A(ii), A(iii), B(i), B(ii) /Student and decide the eligible cover. Step 2- Consider the Age proof submitted and apply respective restrictions for Non -Standard Age Proof. Step 3- Consider whether the proposed Plan & S.A.. can be considered under any of the Non Medical Scheme (NMG, NMS, NM(P), NM(S) to NRI'S, NM(single), NM(stand alone plans), etc.) <u>Illustration :-</u> Non-Medical (General) Scheme is allowed up to SUC of 8 lakhs for Age up to 35 years (NBD) for literate females. But if the female life under consideration falls under category A(iii) with NSAP "voters card", Maximum TRSA, is only 5 lakhs.

Similarly if the life is Female category B(i) aged less than 35 & with Plan 841 allowed is only 5 lakhs as **plan restriction** she cannot get the NMG limit to full extent.

N.M.S. Scheme is allowed up to SUC of 30 lakhs for Age up to 35 years (NBD). And if the female life under consideration falls under category A(i) **without email ID**, Maximum SUC under non medical allowed is 8 Lakhs only

UNDERWRITING CHARTS FOR NB DEPTS (UPDATED up to: 07.09.2019)					
STANDARD Age Proofs - with Codes		Non - STANDARD Age	Proofs- with Code	es	
 M- Municipal Certificate. B- Baptism Certificate. J- Domicile Certificate. K- Driving License (Valid) L- PAN Card. I- Identity Card issued by Defense Dept. F-S.R. Extract or Identity Card issued by Govt/Quasi Govt/Reputed commercial ,industrial institutions where DOB verified with std proof. B- Marriage Certificate issued by Roman Catholic. O- Horoscope maintained by family if satisfied by Manager (NB) P- Passport. U- Aadhar card along with declaration and with full DOB 	Card iage Certificate in case of M ce record extract where age s Declaration (F.N. 3261) ed Decln. (F. No. 5220). 3 n Card with date of Issue. 5 n Card with date of Issue. 5 n Card / Voter's Card with d cope ther Age Proof not classified r card along with declaratio	not verified. A- Self Decln. F.No) Z- Village Panchay late of Issue as Std. Age Proof.	yat Certificate		
RESTRICTIONS for NSAP> Applicable as per individual Plans. If year of birth only stated ,DOB is taken as 1 st of July AND If month of birth only stated then 15 th of that month. (Please refer to CO/U&R Cir.110 dated 19.2.14 & 138 dated 26.6.16, NB & R 150 /25.11.2016)	(ii) Max. term (iii) Max. age (iv) Max matu (v) No restrict (vi) Maximum excluding sing	ra min 1.50‰. n 25 yrs. entry 50 NBD , except Jeevan I urity age 65 NBD tion on SA under permissibl e m overall S.A allowed is 5 Lakh gle premium & stand alone SA allowed without any restriction	e plan <mark>Under (a)(h</mark> 15 only <u>Under 1 to 9a</u> under plan Rakshak 8	<u>s above,</u>	
 Scrutiny of Proposals. □ Check that new PPL form is used. correct fout of 300, 340, 360, Plan wise like Annuit 		NO-MEDICAL Star Plan 827 (Jeevan Rak (Please refer to		Iales, Females,	
 ULIP etc Check that all the columns are filled properly. Get details of reply regarding exact nature of duty and period of service & Employer Check reply to multiple proposals / revivals 		NO-MEDICAL Stand under Plans 843 (Aadhar Shila for Literate Females 843 & 844 are allowe <u>Other than Aadhar</u>	r Stambh for Males)	& 844 (Aadhar <u>R Cir. 164/21.04.2017)</u> XYC proof	
 Check full reply to PP details specially dec no. of policies in PP. and the status of PP if Check Personal history, if any 'Yes' is there 	f required.	AGE Group NBD (LBD for MINORS)	Max. Stand alo	ne SUC Lakhs	
should appear in ACR and F.M.R. Also call the related papers before forwarding the case.		8 to 45 Under 843 / 844	3 STD	3 NSAP	
□ Check age and cause of death if any in Fan	 Attestation on all cuttings and changes in PPL. Check age and cause of death if any in Family History 			2 NSAP	
 Self attestation on age proof and all other of Validity period of Proposal Form, FMR, D 		18 to 45 under Plan 827	2 STD	2 NSAP	
Special Reports		46 to 55 under Plan 827	2 STD	1.25 NSAP	

AGE	,	SUC in Lakhs	PLANS	CONDITIONS							
(NBD)	STD.	N.S.A.P	ALLOWED								
18-35	8	5	All plans <u>excluding</u> <u>Term Rider, PWB</u> plans like 822, 854,	1) SUC Limit is based on total Actual Sum Assured(ASA) of current proposal/s & policies completed / revived during last							
36-45	5	3	855 <u>, 827,843, 844,</u> 905 (standalone no	855 <u>, 827,843, 844,</u> 905 (standalone no	855 <u>, 827,843, 844,</u> 905 (standalone no	855 <u>, 827,843, 844,</u> 905 (standalone no	855 <u>, 827,843, 844,</u> 905 (standalone no	855 <u>, 827,843, 844,</u> 905 (standalone no	855 <u>, 827,843, 844,</u> 905 (standalone no	855 <u>, 827,843, 844,</u> 905 (standalone no	two years reckoning from the month of proposal, (<u>excluding</u> stand alone plans, 825 if std life) should be clubbed for under – writing requirements / decision.
46-50	3	2	medical plans)	 2) Female Category subject to their allowable overall limit. 3) Plan restrictions as in 827, 843, 844 4) SUC includes stand alone non medical Plan 841 if any 							
-			(Please refer to CO/NB&R Cir.1	46 / 23.11.2016 , 163 / 18.4.2017)							

NON-MEDICAL (GENERAL)(for Major Males & Females)

INSURANCE TO 'MAJOR STUDENTS' & NON-MEDICAL(Age 18 to 30 Years)

AGE	SUC in lakhs	PLANS ALLOWED	CONDITIONS (Applicable In General - as in page 6)
			1.E-mail ID mandatory otherwise Non Medical not allowed
18-30		905 allowed with 50 lakhs inclusive of separate	1 0 1 1
	IUCIK	cover up to Rs.15 lakhs allowed under CIR	3. Minimum qualification 10+2 or equivalent.

(Please refer for details CO Cir. Ref: 1993/4 dtd. 21.2.2005 & 2091/4 dtd. 6.11.2006 & U&R/104/2014 dtd. 10.3.2014, NB&R / 144 , 146 / 23.11.2016, 163 / 18.4.17)

NON - MEDICAL (SPECIAL)SCHEME FOR RESIDENT INDIANS & NRI's

AGE (NBD)	S.U.C Lakhs	PLANS ALLOWED	CONDITIONS Resident Indians (E-mail ID is mandatory if SUC > 8 Lakhs)	CONDITIONS For NRI & FNIO- <i>This is different from NMS applicable to</i> <i>Resident Indians (E-mail ID mandatory)</i>
18-35	30 &	All plans including Term rider, PWB, ex-	1.Standard Age Proof 2.Minimum 1 year service completed.	1. Allowed to NRIs Group V only. 2. NRI should be Employee of Govt or
	15 CIR	cluding plans like	3.Literate Male Major & Female Major	reputed commercial firms or should be a
		Anmol 822, Amar	with SSLC pass, employed in Govt / quasi	Professional Such as Doctor,
36-45	20 &	855, & stand alone no	undertakings of Central/State/Union Ter-	Engineer,CA Cost Accountant,
		medical plans 827,	ritory and PSU. If employed in Companies	Architect, Lawyer, Teacher, Insurance
	10 CIR	<u>843, 844, 905 &</u>	listed at BSE or NSE, Schools, Colleges, In-	Agent etc
	IU CIK	[10 lakhs under 846	stitutions, etc are should be submit stat-	3. NMS under Mail Order Business is
	10.0	for age group 18-35]	utory obligations like PF / TAN/ proof for	allowed only if the Agent visits the
46-50	10 & Separate CIR		maintaining of leave records for minimum	present country of NRI to complete the
	1 CID	allowed to Resident	period of 3 years. From employer.	formalities.
	2 CIR	Indians	4.Max.TRSA under CIR allowed is 15Lakhs	4. SUC calculation is as in NMG chart.

(Please refer for details CO Cir. Ref: , U&R 22 / 2008 dated 28.6.2008 & U&R/81/2012 dated 31.12.2012, NB&R / 146 / 23.11.2016)

Non Medical for PROFESSIONALS (Self Employed & Employed) OR Self Employed With INCOME Above 10Lakhs

AGE-NBD	S.U.C in lakhs	Plans Allowed	CONDITIONS (E-mail ID mandatory)
18-35	25 &	All plans including Term	1. Std. Age Proof only. & Age NBD as on date of proposal.
	15 CIR	rider, PWB, excluding plans like Anmol 822, Amar	2. Chartered Accountants, Cost Accountants, Engineers, Computer Consultants, Doctors, Lawyers, Architects, Management Consult-
36-45	15 &	855, & stand alone no med-	ants, Teachers(with B.Ed.),Postgraduates, LIC Agents <u>with min.5</u>
	10 CIR	ical plans 827, 843, 844 Allowed with Separate	<u>years standing</u> etc. Copies of ITRs with minimum Latest Income of Rs. 2,50,000/- per annum as Income Proof Along with PAN.
46-50	8 &	CIR limits Max. TRSA is 15 Lakhs	3. Self employed major Male & Female(literate). Copies of ITRs for 3 years with PAN & Latest ITR must having income above Rs
	2 CIR		10,00,000/-

(Please refer for details CO Cir. Ref: , U&R 18/2008 dated 28.6.2008 & U&R/81/2012 dated 31.12.2012, NB&R / 146/23.11.2016)

EXCLUSIVELY FOR 'SINGLE PREMIUM' PLANS(Please refer co cir, U&R/102/2013 dated 11.2.2014, NB&R 169/2017)

	NMS, NMG(O),&	NON-MEDICAL (GENERAL) TO	PLANS ALLOWED	CONDITIONS
	NMG(P) Major Students and NRIs to whom	OTHERS.	& Restrictions	1). SUC Limit based on total <u>Actual Sum</u> Assured (ASA) under all single premium
AGE (NBD)	STANDARD Age Proof	NSAP	1).All plans except Shikhar 837 & Utkarsh 846 where in Single Premium mode is	proposals taken under Non-Medical only in the last one full year on the basis of the date of commencement should be clubbed for u/w decision. ASA is as applicable to Individual Plans.
18-35	(a) 20 Lacs (Plan Bachat 816 separate) +(b) 15Lakhs (817 endowment & 818 Nidhi)	1. 50 Lakh (Each)	allowed under existing NMS & NMG scheme can be allowed. (ie. S.A. minus Single Premi 2) Allowed to NRIs residing under NMS without Reside	(ie. S.A. minus Single Premium)2) Allowed to NRIs residing in Group V eligible under NMS without Residence Extra up to age 50
36-50	10 Lakhs Each (a & b)	75,000 (Each)	2). Under Bachat 816 (separate) said additional limits allowed.	3) MHR limit should be on the basis of first year risk cover (death cover).
51-60	3 Lakhs (Each)	nil	3). Term assurance plans if any not allowed	4)Allowed to all Male and Female Categories all.5) Plans with ASA should be less than single premium paid per proposal are only allowed.

Mandatory MEDICAL & SPECIAL Reports required under LifePlans(Excluding 854,904 and Minors)

MMS=Chart1-NON MEDICAL Special Scheme FOR Resident INDIANS & NRI's. **NMP=**Chart1-Non Medical for PROFESSIONALS (Self Employed & Employed) OR Self Employed With 3 Years ITR & latest annualized INCOME Above 10 Lakhs <u>NMG=Chart II -NON-MEDICAL (GENERAL to Others)</u>

Lakhs 18 to 35 yrs 36 to 45 yrs 46 to 50 yrs 51 to 55 yrs 56 yrs to 60 60 yrs & above Up to 2 NMC NMC NMC PRR, ECG, FBS PMR, ECG, FBS Up to 2 NMSP NMSP NMSP FMR, FBS, RUA FMR, ECG, FBS, RUA, LIPID, HB% FMR, ECG, FBS, RUA, LIPID, HB% >2 - 3 NMG NMG MM for std A.P. FMR, FGS, FBS, RUA, LIPID, HB% FMR, ECG, FBS, RUA, LIPID, HB% RUA, LIPID, HB% <t< th=""><th>SUC in</th><th colspan="5">in Age at Entry (Last Birthday)</th><th></th></t<>	SUC in	in Age at Entry (Last Birthday)					
others NMSP NMSP NMSP NMSP RMR FMR FMR FMR Same as Others 22 - 3 NMG MG or std A.P. FMR for NSAP FMR, FGS, FSS, RUA, LIPID, H8% RUA, H8% RUA, LIPID, H8% RUA, H19%	Lakhs	18 to 35 yrs	36 to 45 yrs	46 to 50 yrs	51 to 55 yrs	56 yrs to 60	60 yrs & above
Up to 2 MMS/P NMS/P NMS/P FMR FMR FMR Same as Others >2 - 3 MG NMG NM for std A.P. FMR, FDS,RUA FMR,ECG,FBS, RUA,LIPID,HB% Same as Others >1015 NMS/P NMS/P FMR,FCG,RUA FMR FCG,RUA FMR,ECG,RUA FMR,ECG,SBT13, RUA,HBALC FMR,ECG,RUA FMR,ECG,SBT13, RUA,HBALC Same as Ot		NMG	NMG	NMG	FMR	FMR, ECG, FBS	FMR, ECG, FBS
>2 - 3 NMG NMG others PMR for NSAP FMR, FGS, RUA FMR, ECG, FBS, RUA, LIPID, HB% FMR, ECG, FBS, RUA, LIPID, HB% RUA, HB% RUA, HB% RUA, HB% RUA, HB% RUA, LIPID, HB% RUA, LIPID, HB% RUA, LIPID, HB% RUA, LIPID, HB% <t< td=""><td></td><td>NMS/P</td><td>NMS/P</td><td>NMS/P</td><td>FMR</td><td>FMR</td><td>Same as Others</td></t<>		NMS/P	NMS/P	NMS/P	FMR	FMR	Same as Others
>3 -5 NMG NM for std A.P. FNR for NSAP FMR FMR, ECG, FBS, RUA FMR, ECG, FBS, RUA, LIPID, HB% Same as Others 2-26 -25 NMS/P NMS FMR for NMP FMR, ECG, SB13, FMR for NMP FMR, ECG, RUA, SB13, HB% FMR, ECG, SB13, RUA, HB% Same as Others 2-26 -25 NMS/P FMR FMR, ECG, RUA, SB13, HB% SB13, RUA, SB13, HB% FMR, ECG, SB13, RUA, HBA1C, Haemogram Same as Others NMS/P FMR for NMP SB13, RUA, SB13, RUA, SB13, RUA, HBMS/E FMR, ECG, SB13, RUA, HBA1C, Haemogram, RUA, HBA1C, Haemogram, RUA, HBA1C, Haemogram, RUA, HBA1C, Haemogram, RUA, HBA1C, HAB1C, CTMT FMR, ECG, SB13, RUA, HBA1C, CTMT FMR,	>2 - 3	NMG	NMG		FMR,FBS,RUA		
others FUR for NSAP RUA RUA RUA, LIPID, HB% RUA, LIPID, HB% >S - 8 NM forsid A.P. FMR FMR, FMR, FMR, FMR, FMR, FGR, RUA FMR, ECG, FBS, RUA, LIPID, HB% RUA, HB%	>3 - 5	NMG	NM for std A.P.				EMB ECG EBS
>5 8 NM for std A.P. FMR for NSAP FMR FMR FMR, EG, FBS, RUA, LIPID, HB% FMR, ECG, FBS, RUA, LIPID, HB% Same as Others > 10-15 NMS/P NMS/P FMR for NMP FMR, ECG, SBT13, RUA, HB% FMR, ECG, SBT13, RUA, HB% Same as Others Same as Others > 20-25 NMS/P FMR FMR, ECG, RUA SBT13, HB% FMR, ECG, SBT13, RUA, HBA1C, TMT HBA1C, CTMT FMR, ECG, SBT13, RUA, HBA1C, TMT HBM3C, CTMT FMR, ECG, SBT13, RUA, HBA1C, CTMT FMR, ECG, SBT13, RUA, HBA1C, TMT HBM3C, CTMT FMR, ECG, SBT13, RUA, HBA1C, CTMT FMR, ECG, SBT13, RUA, HBA1C, TMT		TUNO					1 1 - 1
>8-15 FMR FMR FMR, ECG, RUA FMR, ECG, SBT13, RUA, HB%, RUA, HBA(C, CTMT, RUA, HBA(C, CTMT, RUA, HBA(C, CTMT, RUA, HBA(C, CTMT, RUA, HBM, CC, SBT13, RUA, RUA, HBA(C, CTMT, RUA, HBA(C, RUA, HBA(C, RUA, HBA(C, RUA, HBA(C, SBT13, RUA, RUA, HBA(C, CTMT, RUA, HBA(C, CTMT, RUA, HBA(C, CTMT, RUA, HBA(C, CTMT, RUA, HBA(C, RUA, HBA(C, RUA, HBA(C, RUA, HBA(C, CTMT, RUA,			FMR	FMR,FBS,RUA			
>2 - 8 NMS/P NMS/P FMR FMR, ECG, FBS, RUA LIPID, HB% Same as Others >-8-10 NMS/P NMS/P NMS/P NMS/P FMR for NMP FMR, FCG, SBT13, RUA, HB% Same as Others >-10-15 NMS/P NMS/P NMS/P FMR, FOR, SML FMR, FCG, SBT13, RUA, HB% Same as Others >-10-20 NMS/P NMS/P FMR, FDS, RUA FMR, FCG, SBT13, RUA, HB% Same as Others >-15-20 NMS/P FMR for NMP FMR, FDS, RUA FMR, ECG, SBT13, RUA, HB% Same as Others NMS/P FMR FMR, FCG, RUA SBT13, HB% FMR, ECG, RUA, SBT13, HB% FMR, ECG, SBT13, RUA, HBA1C Same as Others >220-25 NMS/P FMR FMR, ECG, RUA SBT13, HB% FMR, ECG, SBT13, RUA, HBA1C Same as Others NMS/P FMR FMR, ECG, RUA SBT13, RUA FMR, ECG, SBT13, RUA, HBA1C Same as Others NMS/P FMR, ECG, RUA HB% FMR, ECG, SBT13, RUA, HBA1C FMR, ECG, SBT13, RUA, HBA1C Same as Others >20-50 FMR, ECG, RUA HB% FMR, ECG, SBT13, RUA, HBA1C, CTMT RUA, HBA1C, HBA1C, CTMT FMR, ECG, SBT1			FMR				
>8-10 MMS/P NMS/P NMS FMR FMR, ECG, FBS, RUA LIPID, HB% Same as Others NMS/P NMS/P NMS/P FMR, For NMP FMR, ECG, SBT13, RUA, HB% FMR, ECG, SBT13, RUA, HB% FMR, ECG, SBT13, RUA, HB% Same as Others NMS/P NMS/P FMR for NMP FMR, FDS, RUA LIPID FMR, ECG, SBT13, RUA, HB% FMR, ECG, SBT13, RUA, HB% Same as Others 20-25 NMS/P FMR FMR FMR, ECG, RUA SBT13, HB% FMR, ECG, SBT13, Same as Others Same as Others 225-30 NMS/P NMS FMR FMR, ECG, RUA SBT13, RUA FMR, ECG, SBT13, SBT13, RUA Same as Others 255-30 NMS/P NMS FMR FMR, ECG, RUA SBT13, RUA, HB% FMR, ECG, SBT13, SBT13, RUA, HB% FMR, ECG, SBT13, SBT13, RUA, HB% FMR, ECG, SBT13, FMR, ECG, SBT13		NMS/P	NMS/P	NMS/P			Same as Others
FMR for NMP FMR for NMP FMR,ECG,SBT13, RUA,HB% FMR,ECG,SBT13, RUA,HB% Same as Others RUA,HB% >15-20 NMS/P NMS FMR,FBS,RUA LIPID FMR,ECG,SBT13, RUA,HB% FMR,ECG,SBT13, RUA,HB% Same as Others RUA,HB% >20-25 NMS/P NMS FMR FMR,ECG,RUA SBT13, HB% FMR,ECG,RUA SBT13, HB% FMR,ECG,SBT13, RUA,HBA1C Same as Others >20-25 NMS/P NMS FMR FMR,ECG,RUA SBT13, HB% FMR,ECG,RUA SBT13, HB% FMR,ECG,SBT13, RUA,HBA1C Same as Others >22-30 NMS/P NMS FMR FMR,ECG,RUA SBT13, RUA FMR,ECG,RUA SBT13, HB% FMR,ECG,SBT13, RUA,HBA1C Same as Others >25-30 NMS/P NMS FMR,ST13, RUA,HB%, RUA,HB%, RUA,HB%, RUA,HB%, RUA,HB%, RUA,HB%, RUA,HB%, RUA,HB%, RUA,HBA1C FMR,ECG,SBT13, RUA,HBA1C FMR,ECG,SBT13, RUA,HBA1C FMR,ECG,SBT13, RUA,HBA1C,CTMT FMR,ECG,SBT13, RUA,HBA1C,CTMT FMR,ECG,SBT13, RUA,Haemogram, HBA1C,CTMT FMR,ECG,SBT13, RUA,HBA1C,CTMT FMR,ECG,SBT13, RUA,HBA1C,CTMT FMR,ECG,SBT13, RUA,HBA1C,CTMT FMR,ECG,SBT13, RUA,HBA1C,CTMT FMR,ECG,SBT13, RUA,HBA1C,CTMT RUA,HBA1C,CTMT RUA,Haemogram, RUA,Haemogram, RUA,Haemogram, RUA,HBA1C,CTMT RUA,HBA1C, RUA,HBA1C, RUA,HBA1C,CTMT RUA,HBA1C, RUA,HBA1C,CTMT RUA,HBA1C, RUA,HBA1C, RUA,HBA	>8- 10	NMS/P	NMS/P		FMR	FMR,ECG,FBS,	Same as Others
NMS/P LIPID RUA,HB% RUA,HB% RUA,HB% RUA,HB% >215-20 MMS/P NMS/P NMS FMR,FGS,RUA LIPID FMR,ECG,SBT13, RUA,HB% FMR,ECG,SBT13, RUA,HB% Same as Others >20-25 NMS/P FMR FMR FMR,ECG,RUA SBT13, HB% FMR,ECG,RUA, SBT13, HB% FMR,ECG,RUA, SBT13, HB% FMR,ECG,SBT13, RUA,HBA1C Same as Others >255-30 NMS/P NMS FMR FMR,ECG,RUA SBT13, RUA FMR,ECG,RUA SBT13, HB% FMR,ECG,SBT13, RUA,HBA1C FMR,ECG,SBT13, RUA,HBA1C Same as Others >15-30 FMR,LIPID, others FMR,SBT13, RUA, HB%, RUA, HB%, RUA, HB%, RUA, HB%, SBT13, RUA, HB% FMR,ECG,SBT13, RUA, HB%, SBT13, RUA, HB% FMR,ECG,SBT13, RUA,HBa1C, HB8%, CTMT FMR,ECG,SBT13, RUA,Haemogram, HBA1C,CTMT FMR,ECG,SBT13, RUA,Haemogram, HBA1C,CTMT FMR,ECG,SBT13, RUA,Haemogram, HBA1C,CTMT FMR,ECG,SBT13, RUA,Haemogram, HBA1C,CTMT Same as Others >30-50 FMR,ECG,RUA SBT13, RUA, HB%, HBA1C, CTMT FMR,ECG,SBT13, RUA,HBA1C, HBM1C,CTMT FMR,ECG,SBT13, RUA,HBA1C, RUA,HB							Come of theme
>15-20 NMS/P NMS FMR, FBS, RUA LIPID FMR, ECG, SBT13, RUA, HB% FMR, ECG, SBT13, RUA, HB% FMR, ECG, SBT13, RUA, HB% Same as Others >20-25 NMS/P NMS/P FMR FMR FMR, ECG, RUA SBT13, HB% FMR, ECG, RUA, SBT13, HB% FMR, ECG, SBT13, RUA, HBA1C Same as Others >22-25 NMS/P NMS FMR FMR FMR, ECG, RUA, SBT13, HB% FMR, ECG, RUA, SBT13, HB% FMR, ECG, SBT13, RUA, HBA1C Same as Others >25-30 Others FMR for NMP SBT13, RUA, HB% FMR, ECG, SBT13, SBT13, RUA, HB% FMR, ECG, SBT13, RUA, HBA1C FMR, ECG, SBT13, RUA, HBA1C Same as Others >30-50 FMR, ECG, RUA SBT13, HB% FMR, ECG, SBT13, SBT13, RUA, HB% FMR, ECG, SBT13, HBA1C, CTMT FMR, ECG, SBT13, HBA1C, CTMT FMR, ECG, SBT13, RUA, HBA1C, CTMT FMR, ECG, SBT13, RUA, HBA1C, CTMT FMR, ECG, SBT13, HBA1C, CTMT FMR, ECG, SBT13, HBA1C, CTMT FMR, ECG, SBT13, FMR, ECG, SBT13, RUA, HBA1C, CTMT FMR, ECG, SBT13, FMR, ECG, SBT13, RUA, HBA1C, CTMT Same as Others >30-50 FMR FMR, ECG, RUA SBT13, RUA, HBA1C, CTMT FMR, ECG, SBT13, RUA, HBA1C, CTMT FMR, ECG, SBT13, RUA, HBA1C, CTMT Same as Others NMS/P SBT13, RUA, HBA1C, CTMT FMR, ECG, SBT13, RUA, HBA1C, CTMT FMR, ECG, SBT13, RUA, HBA1C, CTMT FMR, ECG		ININIS/P	INIVIS/P				same as others
PMR for NMP Haemogram >20-25 MMS/P NMS/P FMR FMR,ECG,RUA SBT13, HB% FMR,ECG,RUA SBT13, HB% FMR,ECG,SBT13, RUA,HBA1C Same as Others >25-30 MMS/P NMS FMR FMR,ECG,RUA SBT13, RUA FMR,ECG,RUA SBT13, HB% FMR,ECG,SBT13, RUA,HBA1C Same as Others >15-30 FMR,LIPID, Nthers FMR,ECG,RUA RUA,HB%, FMR,ECG,SBT13, RUA,HB%, FMR,ECG,SBT13, RUA,HB%, FMR,ECG,SBT13, RUA,HB%, FMR,ECG,SBT13, RUA,HB%, FMR,ECG,SBT13, RUA,HB%, FMR,ECG,SBT13, RUA,HB%, FMR,ECG,SBT13, RUA,HB%, FMR,ECG,SBT13, RUA,HBMC,CTMT FMR,ECG,SBT13, HBA1C,CTMT FMR,ECG,SBT13, RUA,HBA1C, HBA1C,CTMT FMR,ECG,SBT13, HBA1C,CTMT FMR,ECG,SBT13, FMR,ECG,SBT13, FMR,ECG,SBT13, FMR,ECG,SBT13, FMR,ECG,SBT13, FMR,ECG,SBT13, SBT13,RUA, SBT13,RUA, SBT13,RUA, SBT13,RUA, SBT13,RUA, SBT13,RUA,	>15-20	NMS/P			FMR,FBS,RUA FMR,ECG,SBT13, FM		Same as Others
>20-25 NMS/PNMS/PFMRFMR, ECG,RUA, SBT13, HB%FMR,ECG,RUA, SBT13, HB%FMR,ECG,SBT13, RUA,HBA1C, HaemogramSame as Others>25-30 NMS/PNMSFMRFMR, ECG,RUA, SBT13, RUAFMR,ECG,RUA, SBT13, RUA, BST13, RUA, HB%FMR,ECG,RUA, SBT13, RUA, HB%FMR,ECG,SBT13, RUA,HBA1C, HaemogramFMR,ECG,SBT13, RUA,HBA1C, HBA1C, CTMTFMR,ECG,SBT13, RUA,HBA1C, HBA1C, CTMTFMR,ECG,SBT13, RUA,HBA1C, HBA1C, CTMTFMR,ECG,SBT13, RUA,HBM%, HBA1C, CTMTFMR,ECG,SBT13, RUA,HBM%, HBA1C, CTMTFMR,ECG,SBT13, RUA,HBA1C, RUA,HBA1C, HBA1C,CTMTFMR,ECG,SBT13, RUA,HBA1C, RUA,HBA1C, RUA,HBA1C,CTMTFMR,ECG,SBT13, RUA,HBA1C,CTMTFMR,ECG,SBT13, RUA,HBA1C,CTMTFMR,ECG,SBT13, RUA,HBA1C,CTMTFMR,ECG,SBT13, RUA,HBA1C,CTMTFMR,ECG,SBT13, RUA,HBA1C,CTMTFMR,ECG,SBT13, RUA,HBA1C,CTMTFMR,ECG,SBT13, RUA,HBA1C,CTMTFMR,ECG,SBT13, RUA,HBA1C,CTMTFMR,ECG,SBT13, RUA,HBA1C,CTMTFMR,ECG,SBT13, RUA,HBA1C,CTMTFMR,ECG,SBT13, RUA,HBA1C,CTMTFMR,ECG,SBT13, RUA,HBA1C,CTMTFMR,ECG,SBT13, RUA,HBA1C, RUA,HBA1C, RUA,HBA1C,CTMTFMR,ECG,SBT13, RUA,HBA1C, RUA,HBA1C, RUA,HBA1C,CTMTFMR,ECG,SBT13, RUA,HBA1C, RUA,HBA1	1113/1		FMR for NMP				
>25-30 NMS/PNMSFMR SBT13, RUAFMR, ECG, RUA SBT13, RUAFMR, ECG, RUA, SBT13, RUAFMR, ECG, RUA, SBT13, RUAFMR, ECG, SBT13, RUA, HBM, SBT13, RUA, HB%,FMR, ECG, RUA, SBT13, RUA, HB%,FMR, ECG, SBT13, RUA, HBM, RUA, HB%, HB%,FMR, ECG, SBT13, RUA, HBM, SBT13, RUA, HB%,FMR, ECG, SBT13, RUA, HBA1C HB%,FMR, ECG, SBT13, RUA, HBA1C HB%, HBA1C, CTMTFMR, ECG, SBT13, RUA, HBA1C, CTMT RUA, Haemogram, HBA1C, CTMTFMR, ECG, SBT13, RUA, HBA1C, CTMT HBA1C, CTMT RUA, Haemogram, RUA, HaAIC, RUA, HBA1C, CTMT RUA, Haemogram, RUA, HBA1C, CTMT RUA, Haemogram, RUA, HBA1C, CTMT RUA, HBA1C, CTMT Haemogram, Haemogram, Haemogram, Haemogram, Haemogram, Haemogram, CTMTFMR, ECG, SBT13, RUA, HBA1C, RUA, HBA1C, RUA, HBA1C, RUA, HBA1C, RUA, HBA1C, RUA, HBA1C, RUA, HBA1C, CTMT RUA, HBA1C, RUA,		NMS/P	FMR			FMR,ECG,SBT13, RUA,HBA1C	Same as Others
FMR for NMPHaemogramHaemogram>15-30FMR,LIPID, RUA, HB%, HIVFMR,SBT13, RUA, HB%, RUA, HB%, HIVFMR,ECG,SBT13, SBT13, RUA, HB%FMR,ECG,SBT13, RUA, Haemogram, HB%FMR,ECG,SBT13, RUA, Haemogram, HB%FMR,ECG,SBT13, RUA, Haemogram, HB%FMR,ECG,SBT13, RUA, Haemogram, HBA1C,CTMTFMR,ECG,SBT13, RUA, HBA1C,CTMT RUA, Haemogram, RUA, Haemogram, HBA1C,CTMTFMR,ECG,SBT13, HBA1C,CTMT HBA1C,CTMT HBA1C,CTMTFMR,ECG,SBT13, HBA1C,CTMT Haemogram, H						FMR,ECG,SBT13,	Same as Others
othersRUA, HB%, HIVRUA, HB%SBT13, RUA, HB%RUA, Haemogram, HB%RUA, Haemogram, HB%RUA, HBA1C Haemogram, HBA1C, CTMTRUA Haemogram, HBA1C, CTMTRUA, HBA1C, HBA1C, CTMTRUA, HBA1C, HBA1C, CTMTRUA, HBA1C, HBA1C, CTMTRUA, HBA1C, HBA1C, CTMTRUA, HBA1C, HBA1C, CTMTRUA, HBA1C, HBA1C, CTMTRUA, HBA1C, HAALC, CTMTRUA, HBA1C, Haemogram, CTMTRUA, HBA1C, RUA, HBA1C, <br< td=""><td></td><td>FMR for NMP</td><td></td><td>02120/11270</td><td>,</td><td></td><td></td></br<>		FMR for NMP		02120/11270	,		
HIVHB%Haemogram,HBA1C>30-50FMR,ECG,RUAFMR,ECG,FMR,ECG,SB-FMR,ECG,SB-FMR,ECG,SB113,FMR,ECG,SB13,FMR,ECG,SB13,HBA1C,CTMT>30-50FMRHB%, HBA1CT13, RUA, HB%,HBA1C,CTMTRUA,HaemogramRUA,HaemogramRUA,Haemogram>30-50FMRFMR,ECG,RUAFMR,ECG,RUAFMR,ECG,SB113,FMR,ECG,SB13,FMR,ECG,SB13,HBA1C,CTMT>30-50FMRFMR,ECG,RUAFMR,ECG,CSB13,FMR,ECG,SB13,FMR,ECG,SB13,SMTA are as OthersNMS/PFMR,ECG,FMR,ECG,C,FMR,ECG,SB13,FMR,ECG,SB13,FMR,ECG,SB13,FMR,ECG,SB13,>50-100FMR,ECG,FMR,ECG,FMR,ECG,FMR,ECG,SB13,FMR,ECG,SB13,FMR,ECG,SB13,othersRUA, SB13,SB13, RUA,SB13, RUA,RUA, HBA1C,CTMTHaemogram,Haemogram,Haemogram,+100-FMR,ECG,RUAFMR,ECG,FMR,ECG,RUAFMR,ECG,SB13,FMR,ECG,SB13,FMR,ECG,SB13,RUA, HBA1C,2500SB13,SB13, RUA,Haemogram,CTMTCTMTCTMTCTMT,Haemogram,+2500-SB13, HBA1C,HBA1C,CTMTHaemogram,CTMTCTMT, Haemo-Haemogram,Haemogram,+2500-FMR,ECG,RUASB13, HBA1C,SB13, HBA1C,RUA, HBA1C,RUA, HBA1C,RUA, HBA1C,RUA, HBA1C,>25500-FMR,ECG,RUASB13, HBA1C,SB13, HBA1C,Haemogram,Haemogram,Haemogram,Haemogram,>2500-FMR,ECG,RUASB13, HBA1C, <td< td=""><td></td><td></td><td></td><td></td><td></td><td></td><td></td></td<>							
othersSBT13,HB%SBT13,RUA, HB%,HBA1CT13,RUA, HB%, HBA1C,CTMTHBA1C,CTMT RUA,HaemogramHBA1C,CTMT RUA,HaemogramHBA1C,CTMT RUA,HaemogramHBA1C,CTMT RUA,HaemogramHBA1C,CTMT RUA,HaemogramHBA1C,CTMT RUA,HaemogramHBA1C,CTMT RUA,HaemogramHBA1C,CTMT RUA,HaemogramHBA1C,CTMT RUA,HaemogramHBA1C,CTMT RUA,HaemogramHBA1C,CTMT RUA,HaemogramHBA1C,CTMT RUA,HaemogramHBA1C,CTMT RUA,HaemogramHBA1C,CTMT RUA,HaemogramHBA1C,CTMT RUA,HaemogramHBA1C,CTMT RUA,HaemogramHBA1C,CTMT RUA,HaemogramHBA1C,CTMT RUA,HBA1C,HBA1C,	others		RUA, HB%		RUA,Haemogram		
HB%, HBA1CHBA1C, CTMTRUA, HaemogramRUA, HaemogramRUA, HaemogramRUA, Haemogram>30-50FMRFMR, ECG, RUAFMR, ECG, SBT13FMR, ECG, SBT13,FMR, ECG, SBT13,Same as OthersNMS/PSBT13, HB%RUA, HBA1C,HBA1C, CTMT,HBA1C, CTMT,HBA1C, CTMTRUA, HaemogramRUA, Haemogram>50-100FMR, ECG,FMR, ECG,FMR, ECG,FMR, ECG, SBT13,RUA, HBA1C,RUA, HBA1C,RUA, HBA1C,othersRUA, SBT13,SBT13, RUA,SBT13, RUA,SBT13, RUA,RUA, HBA1C,RUA, HBA1C,RUA, HBA1C,HaemogramHBA1C, CTMTHBA1C, CTMTHBA1C, CTMTHaemogram,Haemogram,Haemogram,Haemogram,>100-FMR, ECG, RUAFMR, ECG, SFMR, ECG, SBT13,FMR, ECG, SBT13,FMR, ECG, SBT13,FMR, ECG, SBT13,>100-SBT13,SBT13, RUA,SBT13, HBA1C,RUA, HBA1C,RUA, HBA1C,RUA, HBA1C,RUA, HBA1C,>100-SBT13,SBT13, RUA,SBT13, HBA1C,RUA, HBA1C,RUA, HBA1C,RUA, HBA1C,RUA, HBA1C,>100-SBT13,SBT13, RUA,SBT13, HBA1C,RUA, HBA1C,RUA, HBA1C,RUA, HBA1C,RUA, HBA1C,>100-FMR, ECG, RUAFMR, ECG, RUASBT13, HBA1C,RUA, HBA1C,RUA, HBA1C,RUA, HBA1C,>100-SBT13,SBT13, RUA,SBT13, HBA1C,RUA, HBA1C,RUA, HBA1C,RUA, HBA1C,>100-HBA1C, CTMTHBA1C, CTMTHaemogram,CTMTCTMTCTMT, ChestX-ray>2500 -							
>30-50 NMS/PFMRFMR,ECG,RUA SBT13, HB%FMR,ECG,SBT13 RUA, HBA1C, HB% CTMTFMR,ECG,SBT13, HBA1C,CTMT, RUA,HaemogramFMR,ECG,SBT13, HBA1C,CTMT, RUA,HaemogramFMR,ECG,SBT13, HBA1C,CTMT, RUA,HaemogramFMR,ECG,SBT13, HBA1C,CTMT, RUA,HaemogramSame as Others>50-100 othersFMR,ECG, RUA, SBT13, HaemogramFMR,ECG, SBT13, RUA, Haemogram, Haemogram, Haemogram, Haemogram, Haemogram, Haemogram, Haemogram, Haemogram, Haemogram, Haemogram, Haemogram, Haemogram, CTMTFMR,ECG,SBT13, RUA, HBA1C, CTMTFMR,ECG,SBT13, RUA, HBA1C, CTMTFMR,ECG,SBT13, RUA, HBA1C, CTMTFMR,ECG,SBT13, RUA, HBA1C, CTMTFMR,ECG,SBT13, RUA, HBA1C, CTMTFMR,ECG,SBT13, RUA, HBA1C, CTMTFMR,ECG,SBT13, RUA, HBA1C, CTMTFMR,ECG,SBT13, RUA, HBA1C, RUA, HBA1C, CTMTFMR,ECG,SBT13, RUA, HBA1C, RUA, HBA1C, CTMTFMR,ECG,SBT13, RUA, HBA1C, RUA, HBA1C, CTMTFMR,ECG,SBT13, RUA, HBA1C, CTMTFMR,ECG,SBT13, RUA, HBA1C, RUA, HBA1C, CTMTFMR,ECG,SBT13, RUA, HBA1C, RUA, HBA1C, CTMTFMR,ECG,SBT13, RUA, HBA1C, RUA,	others	SBT13,HB%			-	-	
S50-100 othersFMR,ECG, RUA, SBT13, HaemogramFMR,ECG, SBT13, RUA, HBA1C,CTMTFMR,ECG, SBT13, RUA, HBA1C,CTMTFMR,ECG,SBT13, RUA, HBA1C, RUA, HBA1C, RUA, HBA1C, Haemogram, CTMTFMR,ECG,SBT13, RUA, HBA1C, RUA, HBA1C, <br< td=""><td>>30-50</td><td>FMR</td><td></td><td></td><td></td><td></td><td></td></br<>	>30-50	FMR					
>50-100 othersFMR,ECG, RUA, SBT13, HaemogramFMR,ECG, SBT13, RUA, HBA1C,CTMTFMR,ECG,SBT13, RUA, SBT13, RUA, HBA1C,CTMTFMR,ECG,SBT13, RUA, HBA1C, Haemogram, Haemogram, CTMTFMR,ECG,SBT13, RUA, HBA1C, Haemogram, CTMTFMR,ECG,SBT13, RUA, HBA1C, Haemogram, CTMTFMR,ECG,SBT13, RUA, HBA1C, Haemogram, CTMTFMR,ECG,SBT13, RUA, HBA1C, Haemogram, CTMTFMR,ECG,SBT13, RUA, HBA1C, Haemogram, CTMTFMR,ECG,SBT13, RUA, HBA1C, RUA, HBA1C, <b< td=""><td>NMS/P</td><td></td><td>SBT13, HB%</td><td></td><td></td><td></td><td></td></b<>	NMS/P		SBT13, HB%				
othersRUA, SBT13, HaemogramSBT13, RUA, HBA1C,CTMT Haemogram,SBT13, RUA, HBA1C,CTMT Haemogram,RUA, HBA1C, HBA1C,CTMT Haemogram,RUA, HBA1C, Haemogram, CTMTRUA, HBA1C, CTMTRUA, HBA1C, Haemogram, CTMTRUA, HBA1C, CTMTRUA, HBA1C, Haemogram, CTMTRUA, HBA1C, CTMTRUA, HBA1C, Haemogram, CTMTRUA, HBA1C, CTMTRUA, HBA1C, Haemogram, CTMTRUA, HBA1C, CTMTRUA, HBA1C, RUA, HBA1C, CTMTRUA, HBA1C, Haemogram, CTMTRUA, HBA1C, CTMTRUA, HBA1C, Haemogram, CTMTRUA, HBA1C, CTMTRUA, HBA1C, Haemogram, Haemogram, Haemogram, Haemogram, Haemogram, CTMTRUA, HBA1C, RUA, HBA1C,	>50-100	EMP ECG					EMP ECG SBT13
HaemogramHBA1C,CTMT Haemogram,HBA1C,CTMT Haemogram,Haemogram, CTMTHaemogram, CTMTHaemogram, CTMTHaemogram, CTMTHaemogram, CTMTHaemogram, CTMTHaemogram, CTMTHaemogram, CTMTHaemogram, CTMTHaemogram, CTMTHaemogram, CTMTHaemogram, CTMTHaemogram, CTMTHaemogram, CTMTHaemogram, CTMTHaemogram, CTMTHaemogram, RUA, HBA1C, CTMT, Haemo- gram, ChestX-rayFMR,ECG,SBT13, RUA, HBA1C, RUA, HBA1C, RUA, HBA1C, CTMT, Haemo- gram, ChestX-rayFMR,ECG,SBT13, RUA, HBA1C, CTMT, Chest X-rayFMR,ECG,SBT13, FMR,ECG,SBT13, FMR,ECG,SBT13, FMR,ECG,SBT13, RUA, HBA1C, RUA, HBA1C, RUA, HBA1C, RUA, HBA1C, RUA, HBA1C, Haemogram, CTMTFMR,ECG,SBT13, RUA, HBA1C, RUA, HBA1C, RUA, HBA1C, RUA, HBA1C, RUA, HBA1C, Haemogram, CTMTHaemogram, RUA, HBA1C, RUA, HBA1C, <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>							
>100- 2500FMR,ECG,RUAFMR,ECG, SBT13, HBA1C, 					Haemogram,	Haemogram,	Haemogram,
2500 SBT13, SBT13, RUA, HBA1C, SBT13, RUA, HBA1C,CTMT SBT13, HBA1C, Haemogram, Haemogram, RUA, HBA1C, Haemogram, CTMT RUA, HBA1C, Haemogram, CTMT RUA, HBA1C, CTMT,Haemo- gram,ChestX-ray RUA, HBA1C, Haemogram, CTMT,Chest X-ray >2500 - S2500 - S07 FMR,ECG,RUA SBT13, HBA1C, Others FMR,ECG,RUA SBT13, HBA1C, CTMT FMR,ECG,RUA SBT13, HBA1C, CTMT FMR,ECG,SBT13, SBT13, HBA1C, CTMT FMR,ECG,SBT13, RUA, HBA1C, Haemogram, CTMT FMR,ECG,SBT13, RUA, HBA1C, RUA, HBA1C, Haemogram, CTMT FMR,ECG,SBT13, RUA, HBA1C, RUA, HBA1C, RUA, HBA1C, CTMT FMR,ECG,SBT13, RUA, HBA1C, Haemogram, CTMT FMR,ECG,SBT13, RUA, HBA1C, RUA, HBA1C, Haemogram, CTMT FMR,ECG,SBT13, RUA, HBA1C, RUA, HBA1C, Haemogram, CTMT FMR,ECG,SBT13, RUA, HBA1C, Haemogram, CTMT FMR,ECG,SBT13, RUA, HBA1C, CTMT FMR,ECG,SBT13, RUA, HBA1C, Haemogram, CTMT FMR,ECG,SBT13, RUA, HBA1C, Haemogram, C			. .	,		-	
othersHBA1C, HaemogramHBA1C,CTMT Haemogram, Haemogram,Haemogram, CTMTCTMT, Haemo- gram,ChestX-rayHaemogram, CTMT,Chest X-ray>2500 - \$2500 - \$58713,HBA1C, othersFMR,ECG,RUA \$8713,HBA1C, CTMTFMR,ECG,RUA \$8713,HBA1C, CTMTFMR,ECG,RUA \$8713,HBA1C, CTMTFMR,ECG,RUA \$8713,HBA1C, Haemogram, CTMTFMR,ECG,SB13, RUA,HBA1C, Haemogram, CTMTFMR,ECG,SB13, RUA,HBA1C, Haemogram, CTMTFMR,ECG,SB13, RUA,HBA1C, Haemogram, CTMTFMR,ECG,SB13, RUA,HBA1C, RUA,HBA1C, RUA,HBA1C, Haemogram, CTMTFMR,ECG,SB13, RUA,HBA1C, RUA,HBA1C, Haemogram, CTMTFMR,ECG,SB13, RUA,HBA1C, RUA,HBA1C, RUA,HBA1C, CTMTFMR,ECG,SB13, RUA,HBA1C, RUA,HBA1C, RUA,HBA1C, Haemogram, CTMTFMR,ECG,SB13, RUA,HBA1C, RUA,HBA1C, RUA,HBA1C, Haemogram, CTMTFMR,ECG,SB13, RUA,HBA1C, RUA,HBA1C, RUA,HBA1C, Haemogram, CTMTFMR,ECG,SB13, RUA,HBA1C, RUA,HBA1C, Haemogram, CTMTFMR,ECG,SB13, RUA,HBA1C, RUA,HBA1C, RUA,HBA1C, Haemogram, CTMTFMR,ECG,SB13, RUA,HBA1C, RUA,HBA1C, Haemogram, CTMTFMR,ECG,SB13, RUA,HBA1C, RUA,HBA1C, Haemogram, CTMTFMR,ECG,SB13, RUA,HBA1C, RUA,HBA1C, Haemogram, CTMTFMR,ECG,SB13, RUA,HBA1C, RUA,HBA1C, Haemogram, CTMTFMR,ECG,SB13, RUA,HBA1C, RUA,HBA1C, Haemogram, CTMTFMR,ECG,SB13, RUA,HBA1C, RUA,HBA1C, Haemogram, CTMTFMR,ECG,SB13, RUA,HBA1C, RUA,HBA1C, Haemogram, CTMTFMR,ECG,SB13, RUA,HBA1C, RUA,HBA1C, RUA,HBA1C, RUA,HBA1C, Haemogram, CTMTFMR,ECG,SB13, RUA,HBA1C, RUA,HBA1C, RUA,HBA1C,<							
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>2500 - FMR,ECG,RUA FMR,ECG,RUA FMR,ECG,RUA FMR,ECG,RUA FMR,ECG,SBT13, 3999 SBT13,HBA1C, SBT13,HBA1C, SBT13,HBA1C, SBT13,HBA1C, SBT13,HBA1C, RUA,HBA1C, RUA,HBA1C, RUA,HBA1C, RUA,HBA1C, RUA,HBA1C, Haemogram, CTMT CTMT CTMT CTMT CTMT CTMT CTMT CTMT CTMT Chest Xray CTMT Haemogram, Chest Xray CTMT T, Chest Xray 4000 & FMR, ECG, SBT-13, RUA, Haemogram, CTMT CTMT Chest Xray CTMT T, Chest Xray 4000 & FMR, ECG, SBT-13, RUA, Haemogram, CTMT Chest Xray In addition to reports for age group above Anti HCV, USG of Abdomen & Pelvis, Spot Urine micro Albumin, 18 to 55 - PSA test for Male lives others 2D Echo cardiogram with Doppler 18 to 55 - PSA test for Male lives		· · · · ·				, ,	
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4000 & above FMR, ECG, SBT-13, RUA, Haemogram, HBA1C, CTMT, Chest X-Ray, Anti HCV, USG of Abdomen &Pelvis, Spot Urine micro Albumin, 2D Echo cardiogram with Doppler In addition to reports for age group 18 to 55 – PSA test for Male lives	others						
above Anti HCV, USG of Abdomen &Pelvis, Spot Urine micro Albumin, 18 to 55 – PSA test for Male lives others 2D Echo cardiogram with Doppler	4000 &						
	above						
1 Urine Cotining Report is mandatory for Term Insurance SUC exceed 50 labbs including e-term (Rider 822 854 855) & non-smoker option under				9 11			

1. Urine Cotinine Report is mandatory for Term Insurance SUC exceed 50 lakhs including e-term (Rider, 822,854,855) & non smoker option under 854/855 for any SA. 2. If medical is compulsory under plan / Rider add FMR in place NMS /NMP /NMG. 3 If SUC is less than 25 lacs, fee for FMR is allowed for current sum proposed only. Further proposals up to SA 25 Lakhs can be considered without fresh FMR, if FMR is still valid and medical examiner's limit is sufficient up to the extent including new proposal. 4 TPA is mandatory if TPA is operational near branch area,& if (a) SUC ≥ 25Lacs. (b)SUC >10 lacs & Age 36 to 45 years. (c) SUC>8Lacs &Age>45years. (d)SUC>5Lacs & Age ≥60years, (e)Revival SAR>2Lacs & (f)Health plans 5. Preventive Health check up reports with reference range as special reports can be acceptable in case of NMS/NMP lives only. And no reimbursement is allowed to such reports. 6. (a)For age at entry up to 35 years & TRSA under CIR exceeds 5 Lakhs / (b)Age above 35 years & for any TRSA under CIR – Rest ECG & FBS are compulsory along with above Chart. 7. For plan 855 SA above 10 Crore separate reports are required (Please refer for details CO. Cir ref: NB & R/157/30.12.2016, NB&R/160/2.3.2017 172/5.10.17)

INSURANCE ON 'FEMALE - LIVES 'INSURANCE ON FEMALE LIVES						
	A(i) Filing ITR / Eligible under NMS	A(ii) Own income that can be ascertained	A(iii) Own income that cannot be ascertained	B(i) Housewives Graduate and Above	B(ii) Housewives Below Graduate	
Age proof	Standard	Standard	Any	Standard	Any	
Max. TRSA allowed /Min. Qualification	At par with Male Lives for one who eligible under <u>NMS (min.1year</u> <u>service & min.qualifi-</u> <u>cation 10th pass)</u>	50 Lakhs including term insurance 25 Lakhs & <u>50 lakhs</u> <u>under 905 including</u> <u>CIR up to 25 Lakhs</u> / 10 th Pass	15 Lakhs for 12 th Pass & above 10 Lakhs for less than 12 th (HSC) under life plans	100 Lakhs or up to Matching under life plans	60 Lakhs or up to Matching under life plans	
Plans allowed	At par with Male Lives.	All plans except 847 with <u>TR & with</u> <u>MHR Anx-I by BM</u>	All plans <u>excluding</u> <u>Term Insurance,</u> <u>CIR, PWB & 847</u>	All plans including Max.Term insurance of 50Lakhs (leveled SA)	All plans excluding Term Insurance, 847	
Income Proof Etc	ITR with supportive proofs like Salary or pension or investment or Lump sum proof /Rental agreement etc reflecting in bank cash flow. If no supportive proof TRSA restricted to 200 lakhs	PFQ/CA certificate / Salary or pension or investment or Lump sum proof/Rental agreement etc reflecting in bank account statements	ACR/MHR by Agent/DO	Husband's income proof for matching. LA should possess Passport / D.L / Credit card / PAN/ Medi- claim cover and proof of qualification are must be insisted if TRSA exceeds 60 Lakhs including Term Rider of 25 Lakhs	Husband's income proof for matching	
Other conditions	1. For self employed or with unearned income - Sp. MHR 3251 (A&B) by BM is required. If TASA exceeds 2 Crore MHR in letter form regarding social & economic status with exact source of income is required. 2. Funding from Husbands income for more than TRSA 50 Lakhs should be sent to ZO/CO.	 1.Without insisting min. qualification 100 Lakhs under Single premium can be allowed if any proof of lump sum income is available. 2.Sp.MHR Anx-I by DM club & above Agents/DO / ABMS/ BM 3.For TRSA exceeds 25 lakhs irrespective of plan should be referred to D.O. 	 Max. Age of Entry 60 Years Sp.MHR Anx-I by DM club & above Agents/ DO /ABMS/BM NSAP, restrictions applicable Standalone 25 lakhs allowed under 905 	 Max. Term insurance allowable is 50% of in force Term cover on husbands life. Insurance from LIC as well as private insurer can be considered for matching Standalone 25 lakhs allowed under 905 subject to husbands cover 	 NSAP, restrictions applicable Insurance from LIC as well as private insurer can be considered for matching Standalone 25 lakhs allowed under 905 subject to husbands cover 	

Special conditions for Housewives

1. MHR by DM club or above agent /CLIA/ DO/ABMS is to be insisted for SA above 5 Lakhs

- 2. If husband is un insurable, documentary proof of the same along with special MHR 3251 by BO In charge irrespective of SA cases to be referred to ZO
- 3. Income of husband should support insurance on TRSA of his own life as well as his wife and dependent children.
- 4. Under A(ii) if funding from husband's income for above 50 Lakhs of her own eligibility, cases may referred to ZO/ CO for consideration.
- 5. Insurance taken by husband from LIC as well as from any private insurer companies can be considered as matching insurance.(Pl. refer for details CO Circular ref: CO Circular NB & R 148 /24.11.2016, 149/25.11.2016, 161/03.03.2017)

INSURANCE TO 'PREGNANT WOMEN'-_--CONDITIONS :-

- * Proposals are to be submitted within 24 weeks (SIX MONTHS) of pregnancy.
- * Women falling under category A (i) only allowed, (Except plans 827, 844, 822, 855 & Term rider).
- * Proposal under **Medical only** including all Special Reports as per chart <u>except</u> Chest X-Ray &CTMT.
- * Reports like attending Gynecologist in F. No. 3341, Last check up, Sonography etc. if opined by DMR/ZMR.
- * Proposals from pregnant Ladies who had a normal full time confinement and normal delivery without any past history of abnormal delivery or abortion (miscarriage) due to septic will be accepted on same terms as for a women not pregnant.
- * Pure Term Assurance and other Plans having term insurance element will NOT be allowed. (ie Riders like-TRB, PWB)
- * Special MHR in F. No. 3251 in all case irrespective any of SA or SUC is required from Competent Authority.
- * No change in the Financial Underwriting guidelines as per Cir. Ref: 1994/4 dated 1.3.2005. (Please refer for details CO Cir. Ref: Actl. 2088/4 dated 30.10.2006, NB&R 155/ 15.12.2016)

MAJOR STUDENTS (Both Male & Female)

Male Children majorcertificate of just completed academic Students not aged above 30more than 25 lacs. Total death cover upto 20 lakhs under plans 837 & 846 allowed independently without insisting matching insurance. Declaration from LA and ProposerMHR by DM club & above Agents/ DO /CLIA/ BM / ABM (s) withunder plan 905 Sub/ to pa insurance. Risk plans at insurance adequate referred							
Male Children majorcertificate of just completed academic Students not aged above 30more than 25 lacs. Total death cover upto 20 lakhs under plans 837 & 846 allowed independently without insisting matching insurance. Declaration from LA and ProposerMHR by DM club & above Agents/ DO /CLIA/BM / ABM (s) withunder plan 905 Sub/ to pa insurance. Risk plans at insurance. Terred	ELIGIBILITY	QUALIFICATION	AGE PROOF	CONDITIONS	INCOME PROOF	MAX. S.A	
equal insurance. Term insurance not allowed recommendations.	Male Children major Students not aged above 30	certificate of just completed academic year./ Proof of study admission in	STD	more than 25 lacs. Total death cover upto 20 lakhs under plans 837 & 846 allowed independently without insisting matching insurance. Declaration from LA and Proposer regarding studentship. Siblings should have	MHR by DM club & above Agents/ DO /CLIA/ BM / ABM (s) with	Risk plans- 2 Crore & 50 lakhs under plan 905 Sub/ to parent's insurance. Risk plans above 2 Crore or matching insurance is not adequate referred to ZUS / CUS with MM / SDM's recommendations.	

1.Where loan has been raised from Bank for perusing professional studies (a) Matching insurance and insurance on siblings will not be insisted. (b)All plans including term insurance (leveled SA under Plan 854/855) are allowed. (c)Insurance is intended as a collateral security only. (d)Maximum Insurance allowed is in relation with loan amount.(e) Sp.MHR by ABMS or above is to be insisted. 2.For major children who are well qualified but who have not started earnings WITH above said requirements may be referred to CUS along with SDM / MM's sp.MHR.

(Please refer for details CO cir. Ref: , U&R/24/2008 dated 4.12.2008, U&R/84/2013 dated 8.3.2013, U&R/86/2013 dated 16.3.2013, NB&R 144/23.11.2016)

	INSURA	NCE ON 'MINOR	LIVES' (RISK	<u>PLANS), 832, & 834</u>
SUC	Age Up to 4 LBD	Age 5 to 9 LBD	Age 10 to 17 LBD	RESTRICTIONS
Up to 15,00,000	No medical, Latest School report if attending. Recent photograph.	No medical, only Height Weight in ACR required. & latest School going proof is required. Recent photograph.	No Medical, only Height Weight in ACR & latest School going proof is required. Recent photograph.	 Plans 814,816,817,820,821,827, 832, 834, 835 836 837 838, 841,843, 844, 845, 846, 848, 853 Standard Lives only. However under plan Navjeevan853 and aged 12-17 allowed up to EMR cl(II) on account of build only. Sub standard lives under other than above beyond Std rang of Build Chart should be sent to ZUS/CUS.
15,00,001 to 40,00,000	No medical, Immunization record, Latest School report if attending. Recent photograph.	No medical, only Height Weight in ACR& Latest School going proof is required. Recent photograph.	Juvenile FMR, & latest School going proof is required. Recent photograph.	 3) LA should have good physique. 4) Cl. 10(a) to be imposed. 5) No parent insurance is required for TRSA up to 10 lakhs , & TRSA up to 25 lakhs if PWB opted and allowed. Extended death cover of 20 lakhs under plans 837 & 846 is allowed without insisting matching. If
40,00,001 to 75,00,000	Juvenile FMR, Immunization record, Latest School report if attending. Recent photograph.	Juvenile FMR.& latest School going proof is required. Recent photograph.	Juvenile FMR, & latest School going proof is required. Recent photograph.	 matching insurance is not adequate , Sp.MHR with SDM/MM's recommendation to be referred to ZUS / CUS for individual consideration. 6) Family History-Parent Insurance & Socio-economic status should satisfactory. 7) TRSA above Rs. 2 Crore sent to CUS along with SDM/ MM's special Recommendations.
75,00,001 & Above	Juvenile FMR, Immunization record & copy of latest School cert. if attending. Recent photograph.	Juvenile FMR, Haemogram,RUA, S.Creatinine, Elisa for HIV, Hbs Ag & Recent photo, latest School going proof are required.	Juvenile FMR, Haemogram, SBT-13, RUA & Latest School going proof is required. Recent photograph.	 8) Recent photograph of child is must. 9) Child aged more than 5 years must be attend school /college & latest progress report is insisted upon. 10) Grand parents can propose without PWB, as per CO Actl. Cir. 1903/4 11) Legal guardian can be allowed on merit of the case (by ZO/CO). 12) Sibling should have equal insurance. 13) Thumb impression of the minors not required

(Pl. refer for details CO Circular ref: Actl/2090/4 dated 1.11.2006 and Actl/2104/4 dated 6.3.2007, U&R/84/2013 dated 8.3.2013, NB&R /144/23.11.2016 & 179/ 09.03.2018)

VALIDITY PERIOD OF VARIOUS REPORTS(Medical & Spl Reports)

SL	EVIDENCE OF HEALTH	STD LIVES	SUB-STD LIVES
1	Declaration of Good Health (DGH)	3 Months (All Categories)	3 Months for Male & Female lives
2	Full Medical Report (FMR) & Special Medical Reports	12 Months	6 Months
3	Proposal Form & HIV Test	6 Months	6 Months

No FMR for Subsequent Proposals is required Provided If Original FMR is valid as per rules, Sum Proposed for fresh proposal is up to 25 Lacs, & Doctor should have sufficient limit including SA for subsequent Proposal. (PI. refer CO Cir.ref: U&R /51/2010 dated 3.11.2010 and NB & R 160/ 02.03.2017)

UNDERWRITING OF LIC'S JEEVAN AROGYA (T.NO. 904) & Cancer Cover (905)

N M Special & NMP under Plan 904 NON-MEDICAL(Gen) to Others under Plan 904				905 Cancer Cover Plan <u>Onl</u> all Major lives (refer NB&R C	•		
AGE (NBD)	SUC	AGE (NBD)	SUC	Age Group>	20 – 65 (LBD)		
18-45	5 Lakhs	18-35	5 Lakhs	Lives>	Major students, Male lives, Female categories A(i),A(ii)	Female catg. A(iii),B(i),B(ii)	
46-50	4 Lakhs	36-50	2 Lakhs	Maximum cover> inclusive of all CIRs	50 Lakhs	25 Lakhs	

(1)S.A for MSB under plans 901,902 & 903 for 2 full years will be clubbed. (TRB S.A should not be added for SUC under Health)
(2). Age proof: Standard only allowed.
(3). Female all categories allowed
(4). Housewives (w/o Income) can be the P.I and allowed equal to Spouse's cover, but not exceeding Rs. 5 Lacs. Without spouse's cover maximum 2 lacs can be allowed.
(5). Pregnant Female can be offered cover up to 24 weeks with latest Gynecologist consultation & investigation reports.
(6). Widows (with no proof of income) can be considered as Principal insured up to Rs. 2 Lacs.
(7). Maximum Health Insurance to one life either as Principal Insured or as Beneficiary should not exceed Rs. 10 Lacs.
(8). Avocation risks are to be excluded (Exclusion clause).
(9). NRIs allowed residing in countries excluding countries falling under group I&II without any residence extra.(Benefits are payable only if the hospitalization and treatments are taken in India.
(10). KYC & AML norms are to be complied with.
(11). Financial Underwriting- Proof of Income not to be insisted.
(12). Passport size Photos, Physical measurements, Identification marks and other details of all lives are required.
(13). Refer U&R cir. no. 91 dt.14.11.2013 for Occupational and build extras.

S.U.C	SPECIAL Reports For Different AGE AT ENTRY (LBD) Under plan 904 only								
	UP to 35 Yrs	36 to 45 Yrs	46 to 50 Yrs	51 to 55 Yrs	>55 Yrs				
Up to 2 Lacs	NIL	NIL	NIL	FMR,FBS,RUA	FMR,FBS, RUA,ECG, S.Creatinine				
2,00,001 to 4,00,000	NIL	FMR,FBS, RUA	FMR,FBS,RUA	FMR,FBS, RUA,ECG, S. Creatinine	FMR,FBS,RUA,ECG, LFTs Lipidogram,S.Creatinine,HbSAg, Haemogram, HBA1C				
4,00,001 to 500,000	NIL	FMR,FBS, RUA,ECG, S. Creatinine	FMR,FBS, RUA,ECG, S.Creatinine	FMR,FBS,RUA,ECG, Lipidogram, S- Creatinine, LFTs, HbSAg, Haemogram, HBA1C	FMR,FBS,RUA,ECG, Lipidogram,S.Creatinine, LFTs, HbSAg, Haemogram, HBA1C, CTMT				
Above 5,00,000	FMR, FBS, RUA, ECG, S. Creatinine	FMR,FBS, RUA,ECG, S.Creatinine	FMR,FBS,RUA,ECG, CTMT Lipid, S.Creatinine, LFTs, HbSAg, Haemogram, HBA1C	FMR,FBS,RUA,Lipidogram, ECG,CTMT S.Creatinine, LFTs, HbSAg, Haemogram, HBA1C,	FMR,FBS,RUA,ECG, Lipidogram,S.Creatinine, LFTs, HbSAg, Haemogram, HBA1C CTMT				

KNOW YOUR CUSTOMERS (KYC) & (ANTI MONEY LAUNDERING)AML GUIDE LINES

AML ACT. 2002.	KNOW YOUR CUSTOMERS (KYC) NORMS.
Cash beyond Rs. 50,000/- per transaction OR Annualised premium 1 lac & above (NB) can be accepted Sub to production of PAN or Form No 60 or 61 of IT rules duly verified by Br-in-charge or Authorised person.	Aadhar CARD copy should be along with declaration for voluntary submission WHEN ANNUAL PREMIUM EXCEEDS Rs. 10,000 (including previous policies) * Proof of Identity * Proof of Residence & * Recent Photograph are MUST. WHEN ANNUAL PREMIUM IS Rs. 1,00,000 & ABOVE (including previous policies) Income Proofs WHEN ANNUAL PREMIUM IS Rs. 1,00,000 & ABOVE (including previous policies) Income Proofs WHEN ANNUAL PREMIUM IS Rs. 1,00,000 & ABOVE (including previous policies) Income Proofs When ANNUAL PREMIUM IS Rs. 1,00,000 & ABOVE (including previous policies) Income Proofs Ike :Std Income proofs:- IT Returns , F.No 16 A, Employer's Certificate, Audited Company A/cs, Audited Firm A/cs & partnership deed. Non-Std Income Proofs:- C.A Certificate, Agriculture Income Certificate, Agricultural – land details & Income Assessments from Tahasildar, Bank Cash-Flows statements, Pass Book with PAN etc are MUST. As per revised IRDA regulations, 2017 - within 15 days from date of U/W decision , where a proposal deposit is refundable to a prospect under any circumstances, the same should be refunded.

Pl. refer for details CO Cir. Mktg / ZD/18/2006 dated 1.8.2006, CO. Cir. Ref: U &R dated 11.12.2007: CO/F&A/cc/A-23A/EDA/2DB/925 dated 12.10.2009, CO/F&A/cc/A-23A/EDA/2DB/927/ dated 15.1.2010, IRDA cir. IRDA/F&I/CIR/AML231/10/2011/ dated 5.10.2011, CO/DEIA/2DB/ dated 17.10.2011)

UNDERWRITING NOTES FOR NB DEPTS (UP DATED as on :07.09.2019)LIC's Plans In Force

DI	Name of the Di	A stual O A	T		En tra A	Durani	Internal of the
Plan	Name of the Plan	Actual S.A	Туре	Min. S.A.	Entry Age	Premium	Introduction
814	New Endowment	Basic S.A.	With Profits	1,00,000	08 to 55	Non Single	03/01/14
815	New Jeevan Anand	1.25 times of B.S.A.	With Profits	1,00,000	18 to 50	Non Single	08/01/14
816	New Bima Bachat	S.A. Less Premium	Loyalty Addition	35000	15 to 66	SINGLE	07/01/14
817	Single Premium Endowment	S.A. Less Premium	With Profits	50000	90days to 65	SINGLE	01/01/14
818	New Jeevan Nidhi	Basic S.A.(Regular)	G.A.+ With Profits	1,00,000(R)	20 to 58(R)	Both	27/01/14
820	New Money Back 20 years	1.25 times of B.S.A.	with profits	1,00,000	13 to 50	Non Single	06/01/14
821	New Money Back 25 years	1.25 times of B.S.A.	with profits	1,00,000	13 to 45	Non Single	06/01/14
822	New Anmol Jeevan II	Basic S.A.	Term cover	6,00,000	18 to 55	Non Single	03/02/14
827	Jeevan Rakshak	Basic S.A.	Loyalty Addition	75000	08 to 55	Non Single	19/08/14
830	Limited Prm. Endowment	1.25 times of B.S.A.	With Profit	3,00,000	18 to 62	Non Single	09/12/14
832	New Children money back	Basic S.A.	With Profit	1,00,000	0 to 12	Non Single	04/03/15
833	Jeevan Lakshya	Basic S.A.	With Profit	1,00,000	18 to 50	Non Single	12/03/15
834	Jeevan Tarun	1.25 times of B.S.A.	With Profit	75000	90days to 12	Non Single	18/05/15
835	New Endowment Plus	Basic S.A.	ULIP	2,00,000	90days to 50	Non Single	19/08/15
836	Jeevan Labh	Basic S.A.	With Profit	2,00,000	08 to 59	Non Single	04/01/16
838	Jeevan Pragati	1.25 times of B.S.A.	With Profit	1,50,000	12 to 45	Non Single	03/02/16
842	P.M. V. V. Yoojana (NEW)	Nil	Annuity	1,50,000	Above 60	SINGLE	04/05/18
843	Aadhaar Stambh	Basic S.A	Loyalty Addition	75000	8 to 55	Non Single	24/04/17
844	Aadhaar Shila	Basic S.A	Loyalty Addition	75000	8 to 55	Non Single	24/04/17
845	JEEVAN UMANG	Basic S.A.	With Profit	2,00,000	90days to 55	Non Single	16/05/17
847	JEEVAN SHIROMANI	1.25 times of B.S.A.	GA+L.Addition	100,00,000	18 to 55	Non Single	19/12/17
848	BIMA SHREE	1.25 times of B.S.A.	GA+L.Addition	10,00,000	8 to 55	Non Single	16/03/18
850	JEEVAN SHANTHI	NIL	Annuity	1,50,000	30 to 85	SINGLE	12/09/18
854	TECH Term	1 / 1.25 / 1.50 / 1.75	Term cover	50,00,000	18 to 65	Both	01/09/19
855	JEEVAN AMAR	1 / 1.25 / 1.50 / 1.75	Term cover	25,00,000	18 to 65	Both	05/08/19
904	JEEVAN AROGYA	M.S.B.	Non-linked Health	1,000 (IDB)	90days to 75	Non Single	16/11/13
905	Cancer Cover	Basic S.A	Non-linked Health	10,00,000	20 to 65	Non Single	14/11/17
Rider	AB only & AB with PDB, EPDB	Rider S.A.	Rider	10000	18 to 70	Basic plan	02/01/14
Rider	Term Assurance Rider	Rider S.A.	Rider	1,00,000	18 to 60	Basic plan	03/11/14
Rider	Premium waiver Benefit	Total Prm-FP(basic)	Rider to 832, 834	-NA-	18 to 55	Basic plan	04/01/16
Rider	Critical Illness Benefit	B. S.A. Under plan	815,820,821,830etc	1,00,000	18 to 65	Basic plan	19/12/16
		•				•	

PROCESSING OF HIGH SUM ASSURED CASES

When SUC is more than Rs.50 lakhs, special MHR in 3251(A&B) to be submitted by authorized officials. 2) Previous Policy, if in lapsed condition within last 3 years, files to be sent with revival requirements. 3) Income proof like PFQ, IT returns etc. for 3 years and computation of income statement attested by life to be assured and MHR giving official. 4) Maximum allowable (total rated up insurance) is to be calculated by way of "age related factors". An increase in allowable SA to a maximum of 20% of the eligibility may be considered only if MHR (F.No.3251 A&B revised 2017) of MM/ SDM/ CM are sent along with proposal . 5) In case of NRI, Nationality, City and Country of residence to be mentioned. NRI Qr, Passport with immigration stamps are to be given. 6) Any serious illness/deformity though mentioned in proposal and also in medical reports must also be reflected in ACR/MHR.7) In known cases of diabetes / hypertension, Physician's Report both Parts must be sent along with proposals. 8) In case matching insurance is not sufficient under Minors / Housewives may be considered only if MHR (F.No.3251 A&B revised 2017) with recommendations. 9) In case total annualized premium payable exceeds income MHR by MM in letter format regarding affordable source of other income.

REQU	UIREMENTS F	OR NEW	INSURANCE a	s Applicable			
PERTICULARS	TYPES		REMAR	KS			
Proposal Form	300 (Revised)	Majors / Conventional/TRB/PWB with Minor LA					
(revised with up to	340 (Revised)	Minor lives with MEDICAL					
date instructions)	360 (Revised)	Minor lives Without Medical					
Rakshak/Stambh , Shila / Health / ULIP/ Navjeevan Akshay/ Shanthi/ P.M.V.V.Plan Wise separate forms 827/ 843/ 844 /853/ 904 / 905/ 835/ 828/ 189 /850/ 8 OWN LIFE / On Another Life							
Plan Addendum Declarations Plans like 834, 846, 847, 848 Plan Et Illustrations Plan wise							
	Benefit Illustrations	Plan wise					
ACR	ACR by agents	380 / 3251					
	Mail order	If Agent visits foreig	gn country of residence	annexure II			
		If Agent NOT visits	foreign country	annexure III			
MHR by CLIA/DO/ ABMS/ C./Sr./BM / MM	Agent's own life/ relative's lives/ known since < 3 months / recently known	Independent MHR -					
	High S.A. Cases	3251 Special -Part A	&B if SUC>50 Lakhs				
(SUC limits)	Female Cat A(ii & iii)	Anx.1- MHR (revise	ed-2017)				
	Deformity Cases	NB 56 (P.H.)					
AML / KYC U/W (without	Identity (>10000)			rtificate from Recognized public vith declaration for voluntary submission			
requirements	Residence (Total Annualised Prem.>10,000)	Telephone Bill/ Ration Card / Electricity Bill/ Bank Pass book/ Certificate from public servant/ Aadhar Card copy should be along with declaration for voluntary submission					
proposals <u>should</u> <u>not</u> be registered)	Std. Income proof (T A P >=100,000) & PAN	Salary certificate/ ITR /Audited accounts & Partner ship deed (std) /Form 16 / 26AS & PAN is compulsory if aggregating premium in a F.Y. Exceeds Rs 50,000					
	Non-std. Income proof (Total Annualised Prem.>=100,000) & PAN	Bank cash flow statement /CA'S certificate / Agricultural income certificate (non std.) PAN_IS A MUST when aggregating premium in a F.Y. Exceeds Rs 50,000					
Age proof	Standard	Municipal /School/College/Passport/Baptism – Certificate. Service Extract or ID Cards issued by Defense / GOVT/Quasi/Reputed Firms. Domicile certificate, PAN card / Valid D.L. (Higher age is to be admitted if multiple proofs)					
	NSAP with 3260	ESIS Card / Service Record without age verification, Voters card, Ration card, Certific by village panchayat, Self / Elders declaration 3261, 5096, / Any other (Higher age to be admitted if multiple proofs)					
Health U/W	Non medical	Age proof wise/ Age	wise/plan wise/ Female cat	wise limits			
	Medical	Mandatory Special H	Reports / Questionnaires / oth	her related health reports			
Financial U/W	P.F.Q.	Total Family Insurar	ace more than 25 up to 50 L	akhs(other than term insurance)			
(Income Proof)	I.T.R. / Salary Proof	Total family insuran	ce more than 50 Lakhs(other	than term insurance)			
Occupation U/W	Hazardous occupation	FORM NO. LIC03- Aviation/ Army /M		505/ 506/ 507 (General/ Marine/			
Residence U/W	Non Resident Indian Foreign Nationals	Passport with immig	ration seal; NRI-annex.4 ;(N	IRI annex2&3 if Mail Order), VISA;			
Qualification	Professionals	MBBS / BE / LLB /	CA etc Pass certificate				
Proofs	Female lives	X pass / XII pass / G	RADUATE where ever app	licable to consider A(ii /iii)B(i/ii),NMS			
Others	Addendum, Annexure, Qrs, Terms&Conditions Declarations	/consent for clauses		ACH / HUF, Splitting of policies s declarations for regular school grand parents.			

EXTRA PREMIUMS FOR SUB-STANDARD LIVES

<u>The extra premiums for EMR Classes</u>, wherever allowed, may be obtained as a multiple of the extra premium for EMR Class-I as given below :

LIFE PLANS- C.O. / N.B. & R/ Compendium MANUAL may be followed.

It may be noted that the rule regarding the minimum extra premium of Rs.1.50%0 sum assured is withdrawn. The extras have been reduced substantially. Hence, the prospective clients should come forward to make full disclosure of personal and family history. Now actual extra is to be charged in all cases by multiplying by the respective **factor** of the EMR class.

EMR	20-35	40-60	65-85	90-120	125-170	175-225	230-275	280-350	355-450	455-550
CLASS	I	П	ш	IV	V	VI	VII	VIII	IX	X
Factor	1	2	3	4	6	8	10	12	16	20

Rated up factor (for limited term / ASA) is applicable to standard extra like Residence, Occupation only, <u>not for Health Extras</u> HEALTH PLAN -

Under Health plan EMR Classes are allowed up to four (IV)only. (ie. HE+OE)

EMR	Up to 20	21-35	36-60	61-75	76-100
Class	Std	1	П	Ш	IV
Factor	NA	1	2	3	4

MHR LIMITS FOR VARIOUS AUTHORITIES

SL	AUTHORITY	MHR Limit	SL	AUTHORITY	MHR Limit		
1	Authorised/ Direct/ Career/ DSE with satisfying min. business for last 3 years	5 Lakhs	8	Development Officer / CLIA(Corporate Club)	150 Lakhs		
2	Distinguished/ B.M.'s Club	20 Lakhs	9	S.B.A.	300 Lakhs		
3	D.M.'s Club / Specified Person of Bank	40 Lakhs	10	BM(Sales)/ ABM(Sales)	400 Lakhs		
4	Z.M.'s Club/ F.S.E.	60 Lakhs	11	B.M/S.B.M/C.M.(In charge)	500 Lakhs		
5	RTD. LIC's Employee/ CLIA(D.M.'s club)	75 Lakhs	12	MANAGER (Sales)	Up to 10 Crores		
6	C.M.'s Club / CLIA(Z.M.'s Club)/ MDRT / Galaxy Club/ COT/ TOT	100 Lakhs	13	MARKETING MANAGER.	10 Crores & Above		
7	CLIA (C.M.'s Club)	125 Lakhs	14 For Plan 855 one step higher limit than above				

• MHR is necessary for all NM(Gen) cases Limits as shown above.

• MHR is generally not necessary for SUC up to 2 Lakhs (SSS cases).

- For SUC in excess of 50 Lakhs & any SUC under Plan 855 MHR should be in Form No. 3251 with Annexure A&B
- MHR in letter form is necessary under Plan 855 for TASA above 100 lakh by BM/SBM & by CM/MM/SDM if 500 lakh& above
- MHR by by Class I officer is a supplement to the MHR by Agent/ DO.
- MHR by DO / ABMS /BM is necessary (a) if Life to be assured is relative to agent (b) If agent knows LA very recently
- In case of on line proposals (825 & 853) with SUC above 1 coroe MHR by Marketing official of DM / Manager of such conventional channel / Manager(S) / MM of respective Units is required.

(Please refer co cir Actl/1865/4/203.2003, U&R/19/2008/1.7.2008, U&R/85/2013 DM,co cir 135 10/12/15, NB & R/152/05.12.2016) Differential Underwriting

Differential Underwriting is to take care of adverse claim experience of certain agents who show visible adverse early claim history. NB module to flash Watch listed Agents at Registration Stage. Rules for Differential Underwriting

- **1)** 100% implementation of KYC norms.
- 2) Non Medical (General) business disallowed.
- 3) Certificate of leave availed on medical grounds for last 5 years from Employer mandatory(NMS cases).
- 4) TPA compulsory for medical and special reports irrespective of SA.
- 5) Minimum 10% recheck up at Branch Offices compulsory.
- 6) MHR should be by official one step higher than specified authority.
- 7) Only standard age proof acceptable.
- 8) Hand delivery of policy document not allowed.

(Please refer CO / U&R circular / 17/ 28.06.2008)

NACH MATTERS

GUIDELINES TO FILL THE NACH FORMS (1) NACH Forms forward to Divisional office with in 2 or 3 days to avoid Expiry of TAT. (2) Tick to Appropriate Account – CC A/c and OD A/c s ARE NOT ALLOWED. (3) IFSC Code Number: Write IFSC code number and if it is not available write MICR number, ANY ONE of them is sufficient. (4) SIGNATURE: Only one SPECIMEN SIGNATURE as PER BANK is sufficient for Individual account. For JOINT A/C OBTAIN SIGNATURE OF JOINT A/C HOLDERS, For Firms Currents A/c Signature of Authorized Signatories along with Firms Rubber Stamp. (5) DATE: DATE of NACH form & FROM Date should be Date of Completion for NB cases and ECS Bank Data Capture Date/RFM Validation Date for PS cases. (6) NACH FORMS: use only forms printed by respective Division . Don't use Colour Xerox or Xerox copy and Other Divisions Preprinted forms. (7) FOR ALL THE CASES TICK TO CREATE BOX ONLY (NB and also PS). Doesn't use MODIFY or CANCEL box. (8) Account NO. : Write from LEFT side box (Beginning of the Box) and should be Core Banking Account number with minimum 9 Digits Maximum 16 Digits. (9) BANK NAME: Write Bank Name only. Bank Branch name is not required. (10) FREQUENCY: TICK to the Appropriate MODE, don't TICK to As and When Presented. (11) Correct Mobile Number of the Policy Holder is MUST, if email ID is available fill it otherwise leave it blank.

<u>GENERAL POINTS</u> -- 1. Use Black Ink Pen,Write in Capital letters. 2. Don't Fold, Staple, Pin, Soil & Fold the NACH forms.</u> 3. Don't Overwrite/Correction by White Fluid.

<u>TPA MATTERS</u>: - Branches are advised to utilise the services of TPA in coordination with TPA representative, and should follow the below mentioned instructions scrupulously.

1	Addendum to FMR to be filled by Medical examiner for cases examined without proposal form.
2	A separate sheet is to be insisted whenever computer generated special reports are submitted.
3	The officials of the TPA who are authorized to collect the proposal papers must carry their ID cards with them. They must collect the proposal papers after registration from the branch office daily. After the medical examination the TPA will hand over the papers directly in the branch office, without the interference of field force at any stage during the process.
4	The TPA must send a statement through e-mail daily to the BO & DO containing details of (a) Proposal no. (b) BO code (c) Date collection of proposal paper (d) No of calls made for fixing appointments (e) Date of calls (f) date of appointment (g) Date of conducting tests (h) Date of sending papers/reports to branch office.
5	The branches are expected to maintain a register for the proposals referred to TPA with details of Prop. No., LA name, SUC/SA, Special reports called for, Agents code, DO code, Confirmation given to D.O. on, CRA / Recovery details if any etc.
6	If such a proposal is comes for cancellation, for any reason, NB department of the branch office has to ensure that to recover all medical fees paid to TPA including service charges and service Tax. Hence Minimum of Rs 2000/- is to be collected as proposal deposit before issuing of mandate.
7	Mandates should be issued in prescribed format only with all fields duly filled and signed by authorized official
8	Proposal number / Reference number is a must for tracking the case referred to TPA.
9	Mandate should be issued after basic underwriting of proposal for applicable SUC, Special medical report charts (I or II), Age(LBD), Place of Examination, Selection of D.C.(TPA) And eligibility for cashless service etc

INSURANCE ON NON-RESIDENT Indian's (NRIs)

NRI is a Citizen of India temporarily residing in the country of present residence and holding a valid Passport issued by the Govt of India. NRI should not be a Green Card holder / Dual citizenship. He/she should not have applied for or planning to apply for green card in the near future. Foreign Nationals of Indian Origin are not to be treated as NRIs for the purpose of Insurance. <u>RECLASSIFICATION OF COUNTRIES:-</u> As per revised groups given in Annexure-A (see next page)

WHEN INSURANCE CAN BE GIVEN TO NRIs ?

ON VISIT TO INDIA:-Insurance cover is canvassed in India & all formalities completed during his/her stay in India. SUM ASSURED LIMIT:-

Restrictions as per Plan and Residence group(countries) will apply.

NON-MEDICAL SPECIAL :- Applicable to NRIs residing in the revised residence Group V. The same procedure as Indian lives with separate limits. (copy of passport called for)

MEDICAL:- Same procedure as Indian lives(copy of passport called for). HIV test is mandatory for HIV countries of groups III & IV.MAIL ORDER BUSINESS for Indian Citizen (MOB):-

Where all or some of the formalities completed in their present country of residence.

<u>SUM ASSURED LIMIT:-</u> Min. SA – Rs. 10 Lakhs & Max. SA – Rs. 3 Crore. But Term plan and term rider (Both inclusive) up to 25 Lakhs only. Plan Shiromani 847 is not allowed & plan Navjeevan 853 for Gr V only under MOB. <u>NON-MEDICAL SPECIAL:-</u> Allowed only if the Agent visits the present country of residence of NRI.

MEDICAL:- Proposal form must be witnessed (with seal) by one of the following after verifying Passport. (1st page of passport must be submitted along-with proposal papers)

- Designated official of the local Indian Embassy / Other Indian Diplomatic Representative /Notary Public or a Justice of Peace / Medical examiner / Banker
- In case of Students By the Dean/Principal of his/her college or the Medical Examiner.

SUM ASSUREDMEDICAL REPORT FROM10 - 24. 99 LakhsPost Graduate Doctor with 5 years standing25 Lakhs & AbovePost Graduate Doctor with 10 years standing

- <u>SPECIAL MEDICAL REPORTS:-</u> Same procedure as Indian lives(copy of passport produced)
- MHR by Agent for Mail Order Business as per Annexure-&QUESTIONNAIRE BY NRI in Annexure-4
- SPECIAL QUESTIONNAIRE OF NRI-by the Dean/Principal for Students, Employer for Employees in Annexure-3 (If the Agent does not visit the country of residence of NRI)
- Proposals from NRIs residing in certain Countries are to be underwritten by CO only.
- Residence Extra is to be charged in respect of III to IV Group of the Countries.(excluding 816,817,818-single)
- For R.E, & Mail Order under writing Authority is DO or above.

FOREIGN NATIONALS OF INDIAN ORIGIN & Oversea Citizen of India

- PLANS ALLOWED(Group I &II):-Single premium plans 816, 817, only allowed.
- <u>PLANS ALLOWED(Group III to IV):-</u> All plans <u>Excluding</u> Tab Nos term ins. Plans 822, 855, 854, 827, 843, 844, 847, 905, and pension plans189, 818,842, & Rider /Term Assurance . That means -<u>814,815,816,817,820,821, 830, 831,833,835, 836,837,838, 845, 848</u> are allowed.
- <u>PLANS ALLOWED(Group IV)</u>: Plans Allowed under(Group III,IV)& 832,834,848 are also allowed without PWB
- PLANS ALLOWED(Group V):- Same as Indians with TRB, PWB, AB riders, Plan 847 may be considered by CO.
- <u>PENSION PLANS NOT ALLOWED</u> But Jeevan Shanti immediate annuity (850) allowed to Overseas Citizens Of India only and to be underwritten by CO (NB&R)
- NON-MEDICAL SPECIAL:- Allowed as applicable to NRIs in the revised residence groups V.
- Juvenile lives and Housewives- Allowed as applicable to NRIs in the revised residence groups IV & V.
- HEALTH INSURANCE: Allowed Tab 904 as applicable to NRIs.
- <u>MAIL ORDER BUSINESS:-</u> Not allowed as per the existing practice. <u>Maximum Sum Assured:-</u> On par with NRIs (Please refer co cir. Actl/1923/4 dated 19.12.2003 and U&R/66/2012 dated 03.02.2012, NB&R /145/ 23.11.2016, NB&R / 177 / 15.2.18)

Service Tax exemption may be allowed to NRI / FNIO if requirements (I) Declaration as in Annexure I of CO/UR/cir.137, (II) Passport with valid VISA, (III) Proof of Residence like certificate from Indian Embassy or Rent/ ownership agreement, or Latest Utility Bills with residential address are to be submitted.

Same is withdrawn & are taxable under GST regime from 01.07.2017, as per CO / F&A / Taxation confirmation

GENERAL POINTS while underwriting NRIs & FNIO

- Juvenile Lives and Housewives allowed residing in revised groups IV & V countries only but Term insurance not allowed.
- HIV report is compulsory along with FMR for all proposals of residence groups Group III & IV HIV-Countries only. For minors TRSA up to 50 Lakhs may be considered with out HIV test.
- Residence rating mentioned under Residence Group III & IV Applicable to Class I occupations like Managerial, skilled, Desk jobs.&Class II occupations with restriction on maximum TRSA allowable.
- Proposals for high S.A(>50 lacs) will be considered only from persons employed in class I occupations.
- For class II occupations such as semi skilled, unskilled, high occupational risk, excessive traveling, Maximum TRSA permissible is 50 Lakhs. <u>Hence Plan 847 is not allowed.</u>
- Proposals from Class II occupation attracting health extra class III & above, And combined RE+OE (rated up) is more than Rs.3%0 are to be regretted
- Key man, Employer Employee, business cover are not allowed.
- Proposal from residents of LIBYA, SYRIA & Ukraine are to be postponed till further instructions.
- Residence Extra <u>should not be charged</u> for (1)Occasional visits to group I to IV Countries & stay in that country is less than 3 months. (2)Tab No. 816, 817, 818 to all groups with Single premium Mode only.

Total Residential extra chargeable = Standard extra rate >< Rated up factor(if limited term plans like 820, 821, 830,

833, 836, 841, 845, 846,847, 848, 853 plans)>< Actual S.A(1.25 times of Basic S.A in ‰ like plans 815, 820, 821, 830, 834, 838, 847, 848, 853)

Example 1: Non graduate-Office Attendant, Resident of Namibia, with plan Limited Endmt. $\frac{830-16-(9)}{100}$ for Basic S.A- 3Lakhs, **Total Residential Extra chargeable is = 2** ><1.50 ><(1.25 ><300) = <u>Rs 1,125.00 (Yly)</u>

Example 2: Graduate Office Manager, Resident of Namibia, with plan Endowment. 814-16 for Basic S.A-3 Lakhs, Total Residential Extra chargeable is = $2 > 300 = \frac{\text{Rs } 600.00}{\text{(Yly)}}$

Example 3; Non graduate-Drilling assistant in oil field, Resident of Namibia, with plan Limited Endmt. 830-16-(9) for Basic S.A-3Lakhs, Total(RE+OE) chargeable is =(2 +2)><1.50><(1.25><300) = Rs 2,250.00 (Yly) as (OE+RE) exceeds 3%0 hence REGRET_INSURANCE

ANNEXURE 'A'(REVISED RESIDENCE GROUPS)

1. RESIDENCE GROUP -I-18 COUNTRIES)

I. RESIDENCE OROC					
AFGHANISTAN	BURUNDI	CHAND	CHECHEN REPUBLIC	HAITI	IRAN
NORTH KOREA	PAKISTAN	SOMALIA	DEMOCRATIC REPUBLIC OF THE CONGO (ZAIRE)	LIBERIA	IRAQ
WESTERN SAHARA	PALESTINE	SUDAN	ISRAEL(WESTBANK,GAZA,JERUSALEM)	YEMEN	ZIMBABWE.

• Plans allowed without any residence extra are Tab No.816,817, & 818 with Single premium Mode only.

• Maximum policy term of 15 years. & Maximum Sum Assured of Rs. 10 Lacs.

• All <u>Immediate annuity</u> Pension Plans 189, 842, 850 without life cover without any residence extra - Allowed to NRIs(Indian citizen only) but not to FNIOs. But Overseas Citizens Of India to be underwritten by CO (NB&R) 2. RESIDENCE GROUP- II (39 COUNTRIES)

AZERBAIJAN	ARMENIA(Nagorno-Karabakh)	ANGOLA	BURKINA FASO	BANGLADESH (Rangapur, Jhan jali, Machangan j, Mymensi
CAMEROON	Central AFRICAN REPUBLIC	DJIBOUTI	IVORY COAST	ngh, Naogaon, Rohanpur, Rajshahi, Ishurdi, Khulana, Sylhet&Chittagong)
COLOMBIA	COTE D IVOIRE	ERITREA	KYRGYZSTAN	ECUADOR(Carchi, Sucumbios, Imbabura,Esmeraldas)
GUINEA	GUATEMALA	ETHIOPIA	MONTESERRAT	EQUITORIAL GUINEA(MALABO)
HONDURAS	GUINEA BISSAU	MALI	MOROCCO (other)	INDONESIA(Aceh,Papua, Cental sulawesi, maluku, Boarder with East Timor)
MADAGASCAR	NEPAL(South Terrai region, Birgank, Jankpura, Ranjeli)	NIUE	PAPUA NEW GUINEA	PERU(Ayachuco, Apurimac, Cusco, Junin, Huancavelica regions,EneApurimac River ValleyVRAE)
MYANMAR (Burma)	MOZAMBIQUE(Nampula, Manica, Sofala)	RWANDA	SIERRRA LEONE	PHILLIPINES(Mindanao, Sulu Archipelago, Zamboanga, Penensula)(other than Military,security,Mineral extractions,&Energy sector)
TAJIKISTAN	VENEZUELA(others)	Togo	UZBEKISTAN	RUSSIA(Chechniya, Dagestan, Ingushetia, Kabardino, Balkaria, Karachay, Cherkessia,7 north Ossetia)

• Plans allowed without any residence extra are Tab No.816, 817& 818 with Single premium Mode only

• Maximum policy term of 15 years. & Maximum Sum Assured of Rs. 25 Lacs.

All <u>Immediate annuity</u> Pension Plans 189, 842, 850 without life cover without any residence extra - Allowed to NRIs (Indian citizen only) but not to FNIOs. But Overseas Citizens Of India to be underwritten by CO (NB&R)
 3. RESIDENCE GROUP - III (7 COUNTRIES)

COMOROS EI SALVADOR(HIV)LEBANONNIGER (HIV)NIGERIA (HIV)NICARAGUA(HIV)TURKMENISTANUGANDA(HIV)NRIs and FNIOs will be allowed cover with residenceExtra of Rs. 3% for maximum rated up SA of Rs- 150Lakhs.

- Plans allowed <u>OTHER than 827, 832, 834, 843, 844, 847, 905& Pure term insurance Plans like 822, 854, 855,</u> <u>Term rider & CIR</u>, . How ever AB & DAB riders are allowed.
- All <u>Immediate annuity</u> Pension Plans 189, 842, 850 without life cover without any residence extra Allowed to NRIs(Indian citizen only) but not to FNIOs. But Overseas Citizens Of India to be underwritten by CO (NB&R)

4. RESIDENC	<u>RESIDENCE GROUT-IV (35 COUNTRIES)</u>								
ALBANIA	ALGERIA	ARMENIA(others	AZERBAIJAN(Baku only) BANGLADESH others B		BENIN(HIV)	BOTSWAN(HIV			
BOSNIA	CAMBODIA	COSTA RICA(HI	DOMINICAN REPUBLIC(HIV) CAPE VERDE(HIV)		EL Salvador	GABON(HIV)			
EGYPT	GEORGIA	KOSOVO	ECUADOR(others)(HIV) DOMINICA(HIV)		GHANA(HIV	GAMBIA(HIV)			
SAO TOME	KIRIBATI	INDONESIA			LESOTHO	GUYANA(HIV)			
&PRINCIPE	(HIV)	(Others)	(Standard occupations only) ((HIV)	MONGOLIA			
MOLDOVA	MADEIRA (HIV)	MALAWI(HIV)	MOROCCO(Casablanca, Fez, Tang Meknes, Rabat)	MONTENEG RO	MAURITANIA				
SAMOA	PANAMA	NEPAL(others)	MOZAMBIQUE(others)(HIV)	NAMIBIA(HIV)	TUNISIA	TIBET (China)			
KENYA- (other	rs)(HIV)	MACEDONIA	PARAGUAY(others &occupation ot	TANZANIA- others (HIV)	SWAZILAND (HIV)				
	oi Metro including 1, Eldoret (HIV)	g city , Mombasa, (with out RE)		TANZANIA-Daresalaam, Mwazana, Arusha,Dodoma-capital, Zanzibar city, Mbey (HIV) (with out RE)					
SURINAME (HIV)	SENEGAL- (HIV)	SOUTH AFRICA(HIV)	PERU(other than Lima, Ayachuco, A Huancavelica, regions, EneApurimac l	VANUATU (HIV)	ZAMBIA(HIV)				

(A) NRIs and FNIOs will be allowed, cover for maximum rated up SA of 250 Lakhs with Residence Extra of Rs. 2‰ -<u>Except R.E. need not to be charged under selected cities of KENYA & TANZANIA</u>. (B)Plans allowed <u>OTHER than 827</u>, 843, 844, 847, 905 & Pure term insurance Plans like 822, 854,855, Term rider & CIR. However AB & PWB riders are allowed. (C)All <u>Immediate annuity</u> Pension Plans 189, 842, 850 without life cover without any residence extra - Allowed to NRIs(Indian citizen only) but not to FNIOs. But Overseas Citizens Of India to be underwritten by CO (NB&R)

4. RESIDENCE GROUP - IV (53 COUNTRIES)

5. RESIDENCE GROUP – V (121 COUNTRIES)								
ANDORRA	ANGUILLA	ANTIGUA &	& BARBUDA	ARGENTINA	ARUBA	AUSTRIA	AUSTRALIA	BAHAMAS
BAHRAIN	BARBADOA	BELARUS	BELGIUM	BELIZE	BERMUDA	BHUTAN	BOLIVIA	BRAZIL
BRITISH VIR	GIN ISLANDS	BRUNEI	BULGARIA	CANADA	CANARY I	ISLANDS	CAYMA	N ISLANDS
CHILE	CHINA	CROATIA	CUBA	CURACAO	CYPRUS	СZЕСН	REPUBLIC	DENMARK
ESTONIA	FALKLAND I	SLANDS (UK)	FINLAND	FIJI	FRANCE	FRENC	H GUIANA	GUADELOUPE
GERMANY	GIBRALTAR	GREECE	GREENLAND	GRENADA	GUAM	FRENCH	POLYNESIA	HONG KONG
HUNGARY	ICELAND	IRELAND	ISRAEL-(TE	TEL AVIV & Other cities except West Bank,Gaza, Jerusalem) ITAI			ITALY	
JAPAN	JORDAN	KUWAIT	LAOS	LATVIA LEICHTENSTEIN LITHUANI		LITHUANIA	LUXEMBOURG	
MACAU (PAR	T OF CHINA)	MADAGASCA	AR(Capital only)	MALAYSIA	MALDIVES	MALTA MARSHALL ISLANDS		
MARTINIQU	JE (FRANCE)	MAURITIUS	MEXICO	MICRONESIA	MONACO	NAURA NETHERLAND ANTILLES		AND ANTILLES
NETHER LANDS	NEW CALEDONIA	NEW ZEALAND	NORWAY	PHILIPPINES other t	han	PARAGU	GUAY-MAJOR CITIES-(other than police & security duty	
PALAU	POLAND	PORTUGAL	OMAN	police,securit extraction,ene			PERU(Lin	1a)
QATAR	REUNION	(FRANCE)	ROMANIA	RUSSIA-MOJ	AR CITIES	SERBIA	San Marino	S KOREA
SINGAPORE	SLOVENIA	SPAIN	SEYCHELLES	SLOVAK REP-	SAUDI A	RABIA	SOLOM	ON ISLANDS
SRI LANK	ST.Kittis	and Nevis	St.LUCIA	ST .MARTIN(FRANCE & HOLLAND)		DLLAND)	SWEDEN	SWITZERLAND
ST VINC	ENT AND GREN	ADINES	TAIWAN	TRINIDAD & TOBAGO (TT)		(TT)	TURKEY	THAILAND
TONGA(NU	KUALOFA)	TURKS AN	ND CALCOS	TUVALU U.A.E		.A.E	U.K.	U.S.A.
US VIRGI	N ISLANDS	VENEZUEL	A CARACAS.	VIETNAM(HO chi minh city &.others) VATI			VATICAN	URUGUAY

5. RESIDENCE GROUP – V (121 COUNTRIES)

All plans including 854, Deferred annuity , Immediate annuity, Term Rider , AB , PWB riders are allowed <u>(excluding 905 & Critical Illness</u> Benefit Rider) without any residence extra in accordance with existing guidelines applicable to NRIs. Plan 847 allowed only for standard lives , ie-If not attracting any extra.

(Please refer co cir U&R/128/1.10.2015,NB&R /145/ 23.11.2016, 175/18.12.2017), 189 / 03.10.2018

FINANCIAL UNDERWRITING

AGE	Max. Insurance allowed income for la	d is Multiple of average ast 3 years is	1]These multiples are applicable to Male and Female category A(i) lives only.	
	less than Rs.10 Lakhs	Rs.10 Lakhs& above excluding Plan 855	2]Additional multiple of 10 Times of average annual income for age group 36-50 & 15 times up to age 35 are allowed under Plans 831, 837	
Up to 35 Years	25 Times	30 Times	3]Interpolated factors for a specific age may be applied to allow favorable max. SA and TASA of	
36 to 45 Years	20 Times	25 Times	policies with future premium liability.	
46 to 50 Years	15 Times	20 Times	4]Under 846 (Utkarsh)– Additional multiple 40 (age up to 35) 30 (age 34to 45), 25 (age 46 & 47),	
51 to 55 Years	15Times	15 Times	times of average annualized income is allowed. 5]Further 20% increase in SA can be considered	
56 & Above	10 Times	10 Times	on the basis of Special MHR by CM/MM/SDM 6]. Max. TRSA allowed under CIR is for Age group	
	Persons retired from service will be pension or 100 lakhs which ever is		18 to 45yrs>8 times of average annualised income Above 45yrs>5times of average annualised income	
Minor & Non- Earning Major Student up to Age 30 Years	Separate Multiples of 10 Times of Proposer's average annual income (Sub to max TRSA 200 lakhs applicable)	For availing 10 times more multiples, "Income for last 3 years is less than Rs.10 Lakhs" CHART is to be used	Proposals With TRSA more than 200 Lakhs may be referred to CUS along with Sp.MHR by MM/CM	

a)Wherein sum proposed is in excess of allowable multiples officers- in-charge (respective limits of FPSO) is to use their discretion and decide such cases on the basis of education, profile, socio economical, family & financial status. Such case need not be referred to higher office. b)Same multiples are applicable to NRI/ FNIO subject to maximum permissible TRSA under respective residence group. c) No financial U/W is applicable for plan 904 & 905

(Please ref; co cir U&R/47/2010 dated 18.03.2010, U&R/85/2013 dated 8.3.2013.NB&R 147/ 23.11.2016 ,162/09.03.2017, 174/13.11.17)

INSURANCE ON "PHYSICALLY HANDICAPPED" LIVES

CONDITIONS – 1. Life to be proposed should be a Major life and gainfully employed (with Income) 2. If life to be proposed is minor – No risk plans. 3. Special MHR(NB 56 PH) from DO/ABM(S)/BM

2. If life to be proposed is minor – No risk plans. 3. Special MHR(NB 56 PH) from DO/ABM(S)/BM .					
GROUP	RISK CLASIFICATION	Underwriting AUTHORITY	ADDITIONAL REQUIREMENT		
	With loss of ONE limb (including eye, ear)	<u>B.O</u>	Deformity Qr,		
Accident, non - progressive	With loss of one more than One Limb (including with loss of both eye, ears)	DO /ZUS CUS	Deformity Qr, Discharge Summary &CNS Qr		
II_ Cerebral Palsy	Can walk without aid, no history of epilepsy, no mental retardation	D.O	- do-		
	History of epilepsy, mental retardation, wheel chair dependent	CUS	- do-		
Ш POLIO	Slight to moderate paralysis, localized, little or no functional disability, moderate to severe paralysis, dependence on crutches/calipers for locomotion	D.O	- do-		
	Severe paralysis, complete dependence on wheel chair, any complications like Abnormal Renal functions, urinalysis or respiratory impairment	ZUS/CUS	- do-		
<u>IV</u> Muscular.	Muscular Dystrophy	CUS	- do-		
	With loss of one limb (including ear – non progressive)	<u>D.O</u>	Deformity Qr.		
Congenital – present since	With loss of one eye	<u>B.O</u>	Deformity Qr.		
Birth cause unknown	With loss of more than one limb (including ear/eye progressive/ non progressive with congenital blindness due to small pox, chicken pox but not due to any diseases , loss of both ears- Deaf & Dumb due to Otoscelerosis and Dwarf	DO /ZUS CUS	Deformity Qr, & CNS Qr + Full size Photograph		
<u>VI</u> Diseases	With loss of one or more limbs due to diseases like, Diabetes, Peripheral vascular diseases, Stroke, Paralysis,CVA (cerebrovascular accident) TIA (transient ischemic attack), Any known diagnosis / infections and Nervous disorders,	ZUS/CUS	Deformity Qr, other requirements depending of diseases.		

(Please refer for details CO Cir ref:Actl/2089/4 dated 31.10.2006 and revised DMR guidelines)

H.U.F. Policies

A Hindu Undivided Family, which is also known as Joint Hindu Family is governed by Hindu Law. The head of the family is called "Kartha" who is solely responsible for all the affairs of the family. The members of the family are called Co-parceners who acquire interest in the family by birth. Life insurance policy is taken by the Kartha on his life or on the life of co-parceners, where under premiums are financed by HUF funds.

- 1. Form 300 (Kartha) / 340(Other lives) with addendum to proposal(HUF)
- 2. Assignment / Nominations are not allowed. Only the Kartha of HUF can receive and give valid discharge to the policy money. But Kartha can execute an assignment but subject to a condition that such an act is for legal necessity or for "the benefit of H.U.F."
- 3. Policy schedule should contain against name of the life assured member HUF / Kartha HUF should be Added.
- 4. The Policy should also be marked "H.U.F. PROPERTY" in **bold letters by means of a rubber stamp at the** prominent place.
- 5. During the minority of the lives assured; the term 'Date Of Vesting' being only notional and being introduced to indicate only the date on which the risk on the life assured commences.
- 6. Appropriate policy should be issued subject to the essential modifications for HUF conditions/ provisions in the policy form.
- 7. Refer CRM -VIVIPIDIA for details Actl. Cir. no.1146/4 dated 2/5/1976, & no.1187/4 dated 4/1/1977.

Authority	В	ranch/SS	80	Divis	ional C	FFICE	Zonal OFFICE	Central OFFICE
For New Proposals	Non	Me	Medical		Medical		Medical	Medical
Up to Age at Entry 60 y	Medical	Std	Sub-Std	Medical	Std	Sub-Std	Std / Sub-std	Std / Sub-std
HGA	5	5	4	8	7	4	15	-
AAO	12	12	7	20	15	8	35	60
AO	20	20	10	20	25	15	50	80
BM /SBM/ M(ADM)	25	25	15	30	40	20	75	125
CM /BMC / Secy. DM /DM	30	30	20	30	50	30	100	225
SDM / DM I/c / RM (Actl)	-	-	-	30	60	40	150	300
ZM I/c /CHIEF/ E.D.	-	-	-	-	-	-	200	>300

'FINANCIAL POWERS' AT VARIOUS OFFICES - SUC in Lakhs.

(BO)_a}-By build up to Cl (III) EMR only. Other Health Extra branch should not underwrite. b}-Age above 61(ANB) Should be referred to (DO) for any SA. c}- Proposal with age at maturity above 60y with adverse Family History attracts EMR should be referred to DO. d}-For AO & above - Without life cover Annuity cash option full extent. e} -Health plan (904)up to EMR +75 ie Total extra morbidity (for Over weight+Occupation extra+Residence extra). f}-U/W powers shall not be delegated to ABM(S), BM(S), Manager(S). g}-Branch should not underwrite term Plans 822, 855 /Any SA if facultative reinsurance is required/special reports / medical questionnaires /Residence extra/ Mail order / FNIO & NRI with Occupational extra and are to be underwritten by DO / ZO / CO as per FPSO limit. (DO) Up to Cl(III) EMR-40 lakhs, For Cl "IV & V" EMR -25 lakhs, For Cl (VI) EMR-20 lakhs & Cl VII & above EMR - Refer to ZUS/CUS, Up to Cl(II) EMR under plan 855. All substandard lives under C. I. R. will be underwritten at ZUS. Health plan (904)up to EMR 100(HE+OE+RE) with ONE exclusion

(ZO) Up to Cl (III) EMR 150 lakhs, For Cl "IV & V" EMR-100 lakhs, For Cl VI EMR- 60 lacs & Cl (VII) & above EMR- 25 lacs. Health plan (904) up to EMR 100(HE+OE+RE) with TWO exclusion

(CO) Any SA if facultative reinsurance is required. (For HE up to CL two TRSA > 4Crore, HE CL(3&4) TRSA >3Crore, HE CL(5&above) TRSA >1.50Crore - if age 18 & above. For HExtra up to Rs 2%0 TRSA > 1.50Crore, HExtra above Rs 2%0 TRSA >60 Lakhs, for Minors

<u>SBA under E2E</u> can underwrite up to SUC - 5 lakhs (up to TRSA -15 lakhs) under Non medical/ Medical (without any Adverse) with STD Age Proof, at OR <u>Without any adverse(Personal, family, occupational)</u>

(Please refer CO cir U&R/107/2014/15.05.2014/NB&R 155 /15.12.2016, NB&R /200/2019)

Impairment	Minimum Waiting Period	Authority	Impairment	Minimum Waiting Period	Authority
Abortion, Hernia	After 6 Months & FMR found satisfactory (with remark as no recurrence for Hernia)	BO (Std-lives)	Tonsilitis, Normal delivery > 3 months	Can be accepted Without FMR	BO (Std-lives)
Loss of One limb including Eye, Ear, due to accident / by birth (non-progressive)	After 6 months followed by loss of limb. Deformity Qr. and FMR are found satisfactory	BO (Std-lives)	Fracture of limbs due to accident (If no deformity , no residual defect)	FMR found satisfactory with normal movements & grip	BO (Std-lives)
Appendicitis, Cataract, Circumcision, Hydrocele	After 3 Months & FMR found satisfactory	BO (Std-lives)	LSCS, Tubectomy	> 6 months & Can be accepted under NMG / NMS / NMP	BO (Std-lives)
Pneumonia, pneumonitis	6 months since full recovery & FMR found satisfactory	BO (Std-lives)	Tubectomy	3 Months since operation & within 6 months and FMR found satisfactory	BO (Std-lives)
Cleft Lip, Palate, Clubbed Fingers	Operation not required and if operated > 6 months - FMR found satisfactory	BO (Std-lives)	 Minimum waiting period of 3 months to be followed for any operation / surgery AND if anything adverse in FMR / if above medical condition / operations associated with complication 		DO
Anaemia severe	Until fully investigated	DO/ZUS	Scleritis	Until fully recovered	DO
Bell's Palsy, Epilepsy	3 months since onset of symptoms	DO	Hysterectomy / LSCS	6 months since operation	DO
Colitis Amoebic	3 months	DO	Orchitis	Till fully cured	DO
Gynaccomastia unknown	One year since diagnosis	DO	Hepatitis A&E	3 months since recovery	DO
Epididymitis	Postpone till fully cured	DO	Menorrhagia	Until investigated	DO
Encephalitis	3 months since last symptom	DO	Narcoleptic syndrome	6 months since onset of symptoms	DO
Gonorrhoea	Postpone till cured	DO	Osteoporosis	6 months since fracture	DO
Hepatic Abscess Meningitis	6 months since full recovery	DO	Mastoiditis (no residuals)	One year(since surgery)	DO

	Employer-Employee Scheme	Keyman / Partnership Insurance				
Plans allowed	Plans offered could be <u>all plans</u> <u>including term</u> insurance, ULIP, Annuity, Health plan also.	Plans offered should be <u>term insurance</u> only.				
Lives allowed	 * It is not necessary that all the insurable employees of the employer be covered under the scheme. * Employee, his/her spouse and minor children are allowed 	its directors/Partner who is a keyman				
	# Income proof of the L.A. as max. insurance is allowed as per his eligibility.# Under no circumstances company is making losses	 # If Key man having shareholding in the co. / key partner in a partnership firm – 5 times of avg net profits or 3 times of avg gross profits whichever is lower. 				
U/W Decision to be included	"This proposal has been accepted under Employer - Employee scheme for the benefit of the Employee subject to Applicable Tax rules. LIC does not take any responsibility for Tax Admissibility "	 # If Key man not having any shareholding / key employee of a proprietary or partnership firm-10 times of his avg annual salary. # Under no circumstances company is making losses 				
Requirements	Copy of the company/firm's resolution for taking the insurance cover on employees with list of employees and their beneficial holding in the company/firm.	Copy of Memorandum & Articles of Association Certified true copy of Board Resolution containing, S.A. desired, Plan & Term, Name & Signature of the person who is authorized to complete the proposal.				
Requirements	A letter from the company/firm in its letter head duly signed by the authorized person containing the following (a) The Object of taking insurance (b) Restriction the company/firm desires to impose on surrender/loans (c) Undertaking that the policy will be assigned to employee immediately on issue. (d) Declaration that this letter form the part of the proposal dated (In revised formate 10/2018)	 a) MHR in prescribed form by Manager Sales/ Marketing Manager. b) Qr. Form showing details of income & insurance by the Key man c)Consent for endorsement. d) Proposal form 340 				
Shareholding limit	L.A. not exceeding 50% and family shareholding not more than 70% .	L.A. not exceeding 75% and family shareholding not more than 90% .				
Common Requirements	not more than 70%. than 90%. (1).Income proof of firm for last 3 years with PAN if registered. (b.)Partnership deed for partnership firm.(c.) Authorization given to a partner or employee to transact business on its behalf along with identity proof of such person. (2).KYC of Company / Firm (a.) Registration certificate					

(Please refer CO cir U&R/120/2015/05.03.2015/NB&R 158 /08.02..2017)

Recoveries under canceled proposals / policies

Stages ->>>>>	BOC	Proposal	Completed but policy bond not printed	Completed & policy bond printed but not dispatched	Completed & policy bond dispatched	
Cheque dishonored . GST is applicable on	B.C.= (125+Bank	B.C+ 50+M.Fee	B.C+50+M.Fee	B.C+50 +M.Fee +75 +Policy Stamp	B.C+ 50+ M.Fee+ 75+ Policy Stamp	
CDA Charges including postal charge @ 18%	collection Charges)	(Medical+ Sp.reports)	Registration fee Rs 50/- per proposal for multiple			
Proposal Cancellation	NA	50+M.Fee	NA (Registration fee50/- & Medical fee need not recovered if fresh proposal on same life completed with utilising same reports)			
Postponed	NA	M.Fee	NA (M. fee can be	reimbursed if fresh proposal	completed after postponement period)	
Dropped/Declined	NA	M.Fee	NA NA NA			
Cooling off	NA (Medi		recovered if fresh proposal completed with deferent //term utilising same reports.)			

CO/Actl/1765/6.12.2001

Occupational Ratings – Life Plans

Exclusion Clause 86 is not applicable since 30.8.2016 (Circular CO. U&R/140) If a life to be assured does not want to pay occupational extra, his proposal can not be considered.

Whenever occupational extra is chargeable, DAB, PDB and EPDB will be allowed subject to imposing <u>Clause 85</u>. The wordings of Clause 85 are reproduced below for ready reference.

"Notwithstanding anything within-mentioned to the contrary, it is hereby declared and agreed that Double Accident Benefit including Extended Permanent Disability Benefit and Disability Benefit shall not be applicable if the death or disability of the life assured shall take place as a result of accident while the life assured is engaged in the hazardous occupation".

Occupation Type	Occupational deta	ils	O. E ‰ SA	
Amusement &	Horse racing jockeys (flat	racing)	Rs. 5.00	
Sports	Jockeys (hurdles), Riding	Rs. 5.00		
	Gentleman Riders, Trainer	rs of horses, Syces	Rs. 5.00	
	Movie Picture Production Cinema Stunt actors & co		Rs. 6.00	
	Polo Players and Instructo	rs	Rs. 2.00	
	Professional Athletes: Bic	ycle racers, Pugilists, Boxers, Wrestlers	Rs. 2.00	
	Theatres : Acrobats, trapez	ze and other aerialists	Rs. 6.00	
	Explorers		Refer to CUS	
Construction	Scaffolder / Steel erector (laborer)			
	Painter (Exterior)	Painter (Exterior)		
Civil Aviation	Commercial flying -Pilots holding 'B' licence & commercial pilot's licence and air crew Special features: High risk plans can be allowed with rated up extra or exclusion clause Disability benefit with Clause 61, DAB with Clause 85. Clause 11 – excluding	On Scheduled passenger airlines – for state owned, private airlines and international airlines	Standard	
		On licensed private or company owned planes used for business only, provided landing at the Govt. or public aerodromes only and maintenance service satisfactory	Rs. 6.00	
		Engaged in other non-scheduled commercial flying freight carrying service, non-scheduled passenger service, charter and sightseeing flying, photographic work and business type	Rs. 10.00	
		Engaged in Crop-dusting	Rs. 6.00	
		Flight Instructor	Rs. 10.00	
	war and aviation risks	Test Pilots	Rs. 10.00	
	Non-commercial flying	Pilots holding 'A' license, Private pilot's license, flying time <100Hr	Rs. 3.00	
		Pilots under Training for A license / private pilot's license (Reduction in extra may be considered after completion of training)	Rs. 10.00	
		Technical ground staff who are required to fly as ground technicians – Flying up to 75 hours in a year Flying over 75 hours in a year	Std Rs. 10.00	
Service aviation – Air Force	Rank up to and inclusiv Flight Lieutenants,Squa Wing Commanders & F	Rs. 6.00		

Rate of **O.E.** to be charged in respect of persons engaging in various *hazardous* occupations are as follows

	Pilot Trainees in (to be reduced t	n Air Force to Rs. 10 one year	after completio	n of training		Rs. 15.00	
	Technical Ground to fly in the course	Staff who are require	ed Flying less t	Flying less than 25 hrs in a year			
			Flying 25 to	Flying 25 to 75 hrs in a year			
			Others			Rs. 6.00	
	Paratroopers		I			Rs. 2.00	
	Persons who have regiments	undergone training a	s paratroopers but	not at present attache	ed to paratroop	Std	
	Glider Pilot Regin	nent Flying				Rs. 8.00	
	Air O. P. Unit Flyi	ing				Rs. 8.00	
Construction -	Air compressor	operator, Civil en	igineer, Enginee	ring geologist, Str	uctural engineer	Standard	
Tunneling	Dumper shovel dr	iver, Foreman (Abov	e ground), Mechar	ical shovel driver, W	inch driver	Rs. 2.00	
		ttor, Foreman (Bel polter, Timber mar		anhole maker, Pov	wer loader	Rs. 3.00	
	Borer, Driller, T	Rs. 4.00					
	Shot firer, Tunn	Rs. 5.00					
Climbing &	Hill climbing / tro	ekking / tramping/ a	bseiling/Artificia	l climbing walls (AC	CW climbing)	Std	
mountaineering	Mountaineering	Refer to CUS					
including Guides	Everest / K2						
Drivers	Public carriers (pa	Public carriers (passenger/goods) with national permit					
Manufacture	Acid – Lead burne	ers working in vats or	chambers			Rs. 3.00	
	Explosive & Am salvage and reco	nmunition – onditioning departm	nent employees			Rs. 2.00	
Marine Industry	Persons employed Other rank	in Submarines – incl	luding war risk, C	Commissioned Office	r	Rs. 8.00 Rs. 11.00	
	Persons employed in Submarines – Excluding war risk (Clause75) Commissioned Officer Other rank						
	Divers -where per	Rs. 4.00					
Merchant marine		on ships carrying oil				Rs. 2.00	
Motor cycle	Engine Capacity	Events per annum	Ratings	Engine Capacity	Events per annum	Ratings	
sport -Circuit	≤ 125 cc	1 to 12	Rs. 2.00	≥ 350 cc	1 to 6	Rs. 4.00	
racing Closed, restricted	150 4 200	13 to 30	Rs. 4.00		7.4.12	D. 0.00	
or national events	150 to 300 cc	1 to 6 7 to 12	Rs. 2.00 Rs. 4.00		7 to 12 13 to 20	Rs. 8.00	
				1		Rs. 10.00	
		13 to 20	Rs. 6.00		21 to 30	Rs. 15.00	
		21 to 30	Rs. 10.00				
		vents (Individual (CUS	
Mines		ting for more than), underground resc			ly Endowment &	Rs. 2.00	

Oil & Natural Gas	Oil and Natural Gas Industry -Drilling assistant, Fire fighter, Connecting mechanic, crane operator, Top-man, Rig man, Derrick men, Roughneck roustabout (not handling explosives)	Rs. 2.00
Sewers &	Laborer & Cleaner, inspector of underground Duties	Rs. 5.00
Sewage Disposals	Steeple Jack	Rs. 6.00
Aviation (private)	Includes private and club aviation; a large percentage of private pilots fly with an aviation club. Most of the private and club aviation is undertaken in single-engine monoplanes or helicopters, usually weighing below 2,300 kg (5,070lb). The majority of pilots will hold a private pilot's licence (PPL). The minimum qualification period for a PPL is 45 flying hours and most of the pilots take 2 years to qualify. Some pilots also have additional qualifications. Many private pilots fly a minimum number of hours to maintain their licence and in practice have been shown to give up the sport after around 150 hours of flying experience.	CUS
Aviation related sports	Aerobatic flying, Air racing, Auto gyros or gyro planes, Ballooning, Gliding, Hang-gliding, Micro lighting, Para gliding and par ascending, Parachuting, skydiving and sky surfing	CUS
Diving – sports	All forms of sports diving- Diving as a pastime, for enjoyment and pleasure, Depth record attempts, Caves and pot holes, Internal exploration of wrecks, Diving for treasure or on special expeditions	CUS
Motor cycle sport excluding Circuit racing	Circuit racing, Drag racing, Hill climbs, Off road racing (Grass track, Motocross, Ice racing, Sand racing, Trails riding, Quad biking), Record attempts, Speedway, Sprint events, Veteran and vintage events, Marshals	CUS
Motor sports	The main types of cars used in motor sports are: GT cars, Karting, Mud racing, Single seater, Sports cars, Sports racing cars, Saloon cars,	CUS
Power boat racing	Powerboat racing involves competition between craft usually powered by inboard or outboard internal combustion engines. Racing categories include: Offshore racing, Sports boat racing, Hydroplanes	CUS
Yachting	All types	CUS

Total Occupational extra chargeable = Standard extra rate >< Rated up factor(if limited term plans like 820,821,830,833,836,741,845,846,847,848,853,855plans)><Actual S.A(1.25 etc times Basic S.A in ‰ like plans 815,820,821,830,834,838,847,848,853,855)

If the combined Resident Extra(NRI group III &IV) +Occupational Extra (rated up for Plan) is more than Rs.3%0 Proposals are to be regretted. <u>And plan 847 not allowed to proponents attracting Occupation Extra.</u> AB rider not allowed under Plan 855 if Occupation / Aviation extra charged.

Example 1. Exterior painter with plan Limited Endowment 830-16-(9) for Basic S.A. 3 Lacs,

Total Occupational Extra chargeable is = 2 > (1..25 > (300) = Rs1125 (yearly).

Example 2. Exterior painter with plan Endowment 814-16 for Basic S.A. 3 Lacs,

Total Occupational Extra chargeable is = 2 >< 300 = Rs 600 (yearly).

The occupational questionnaires (Forms used) in respect of persons engaging in various hazardous occupations are General Occupational (LIC03-500), Army Personnel (501), Aviation (Armed Services) (502), Aviation (Civil) (503), Civil Gliding (504), Navy personnel (505), Diving (Armed Services and Commercial)(506), Merchant Marine (507). <u>Army and Navy Personnel:</u> Risk on the lives of army and navy personnel engaged in military operations in India and abroad is covered without charging extra premium. But if nature of duty is as like POLICE then DAB rate is 1. 50 times of applicable rate to others. However, lives of the following four categories will be entertained as per terms and conditions applicable to respective Occupation.

- i. Those who have an intention or liability to engage themselves in aviation, gliding.
- ii. Those who have undergone training as paratrooper or glider.
- iii. Those who have already been selected for being engaged in aviation or for being trained as paratrooper or glider.
- iv. Those who have already been engaged or are likely to be engaged or intend to or are liable to do any work in submarine, minesweeper or mine layer. (CO/Actl/121/17.12.2003)

<u>For Occupational ratings</u> under Health Plans refer CO.U&R Circular no.91/14.11.2013 - for EMR, Exclusions & regret (not as standard extra) & Critical Illness Benefit Rider is not allowed to proponents attracting Occupation & / or Avocation Extra. Refer CO circular NB&R/156/20.12.2016

CLAUSES	Applicable	RESTRICTIVE Description (CO/U&R/cir/140/30.8.16)
10(A)	Minor	Risk plans issued to minors
20	P.W.B.	Premium waiver benefit rider for on minor plans
22/22A/22B	S.S.S.	Premium through salary saving scheme.
31 / 32	C.E.I.S.	Corporation employees insurance with SSS / other mode.
46	D.A.B.	Restriction in sum assured on accident benefit.
53	With Extra	Decision is with acceptance of any extra premium.
55	Nomination	At proposal stage if there more than one nominee.
56	Appointee	If minor nominee, till becomes major appointee is required.
69	With Extra	Any extra premium for first few years from DOC
23 - 28, 34 - 38, 40, 59. 70 - 79	M W P	For policies under MWP with deferent Trusties.

REVISION IN PFQ / CA Certificate

INCOME PROOF REQUIRED For the purpose of financial underwriting TRSA=ASA of basic plan+Rider SA (TRB+CIR) of basic plan Under all Existing & Proposed plans	TRSA for all plans including Term plans, TRB up to 15Laks &CIR (Existing+Proposed)	TRSA under Term Plan, TRB &CIR (Existing+Proposed)
As per Proposal form and MHR wherein income declared is sufficient.	Up to 25 Lakhs.	15 Lakhs
Personal Financial Questionnaire (PFQ) in lieu of any other standard income proof. OR CA 's certificate showing last 3 years income with PAN	Above 25 up to 50 Lakhs.	Up to 25 Lakhs.
 *ITR /F-16/ F-16A/26AS for last 3 yrs. filed in the Country of residence duly attested by DM & above Club Agents/DO/ABM(s)/BM. OR * Salary Certificate from proposer's Employer OR *Copy of the Employment contract with bank account statement with latest 3 months salary credit. OR * ITR's with computation of income, Audited balance sheet and Profit & Loss A/c of the Firm for last 3 years if he is a Businessman. 	Above 50 Lakhs.	Above 25 Lakhs.

(Please refer for details CO Cir. Ref: NB&R 147/23.11.2016)

REBATE Under C.E.I.S.

1. C.E.I.S. Rebates will be allowed to confirmed Employees, spouse, and children aged below 25 years.

2. C.E.I.S. Rebates are allowed only if proposal for assurances submitted without marketing intermediaries.

3. C.E.I.S. Rebates is also made available to Employees LIC's subsidiaries like HFL, Mutual Fund etc.

Plans	Premium Paying Term	Rebate % of Tab. Prem.			
814,822, 830, 832, 833, 834,836,838, 841, 843, 844, 847, 848, <u>853& 855 (Regular)</u>	Up to 14	5			
814, 815, 820, 821, 822, 832, 833, 834,836,838, 841, 843, 844, 845, 847,848, <u>855 (Regular),</u> 904	15 and above	10			
189, 816, 817, 818, 853 & 855 (Single), 831, 837, 846. 850	single	2			
818(Regular)	All	2.75			
827	Up to 14	4			
827	15 and above	7.5			
825, 839, 840, 842	All	NIL			
905	All	7			
835	All	No Premium allocation charge			
DAB, TRB PWB Riders	Basic plan	As per Basic Plan			
Plan wise CO/PD circulars;					

Rules Related to Back dating & Interest

Cable/Plan of insurancePeriod for which dating back interest is to be charged.		Rate of simple interest per annum to be charged.	
814, 815, 820, 821, 827, 830, 832, 833, 834, 836, 838,841, 843, 844, 845, 847, 848	For the period in excess of 1month. If however the policy is back dated to lean month , viz April, May, July, & August, interest is to be charged for period in excess of 3months. And in excess of 14 days will be rounded to a month for calculation.	9.50% on each back dated	
816, 817, <u>818- single</u> <u>premium,</u> 826,831,837, 846, 853	For the exact period in days, ie from date of commencement of the policy to the date of payment of premium. No waiver of interest for dating back will be allowed.	installment of premium subject to minimum of Rs,5/- (Since Year 2014-15)	
818-regular mode	For the period in excess of 15 days interest will be charged for full month. No waiver of interest will be allowed if the policy is back dated to lean month.		
822,	Dating back allowed with in same financial year, but NO dating back interest shall be charged	NA	
189, 819, 854, 828, 829, 835, 842, 850, 855, 904, 905.	Dating back NOT allowed	NA	
TRB,CIR, PWB, AB,ADDB riders	Applicable as per basic plan		

(i) Dating back can be allowed only within the same financial year. However respective plan restriction if any is applicable. (ii) Period up to 14days to be ignored, and 15day or more to be rounded to a month.

(iii) For Rate of interest & further instructions would be issued by actuarial department, CO, as applicable time to time.

RE INSURANCE Revised/Enhanced Limits (applicable from 1st January, 2008)						
	Retention Limit(Rs.) Minimum amount of firs session (Rs.)		ount of first	Reinsurance NOT REQUIRED if total Sum At Risk is =< (Rs.)		
LIVES>	STD	Sub STD	STD	Sub STD	STD	Sub STD
Basic death benefit plus term rider-(Individual Assurance other than Term Assurance products)	60,00,000	30,00,000	5,00,000	5,00,000	65,00,000	35,00,000
Basic death benefit for Individual Term Assurances With and Without conversion option- Plan 43,52, 58,164 and One Year Renewable Term Assurance	50,00,000	30,00,000	5,00,000	5,00,000	55,00,000	35,00,000
Basic death benefit under Term Assurance plans 854 & 855	30,00,000	20,00,000	N/A	N/A	30,00,000	20,00,000
New Critical Illness Rider Benefit (CI)	5,00,000	5,00,000	N/A	N/A	5,00,000	5,00,000
Female critical illness benefit (FCI)	2,50,000	2,50,000	50,000	50,000	3,00,000	3,00,000
Congenital disability benefit	2,50,000	2,50,000	50,000	50,000	3,00,000	3,00,000

For AB Plus ADDB rider Retention Limit is 50 Lakhs (Both STD & SUB STD) w.e.f. 01.01.2017

NOTE :- 1. Health Plans- DCB of Rs.500/-, and 50 % of the amount above ; (cessions for other benefits will be proportionate to HCB) need not to be processed for reinsurance to create cession.

2. All Policies of a Life are to be processed at a time before submitting for Re insurance cession, to avoid creation of multiple customer IDs.

vears	Reinsurance Limits(If a policy is declined by the Corporation it can be sent to our reinsurers for	Standard or Sub-Std up to Class II	4 Crores SAR		
		Class III and IV	3 Crores SAR		
		Class V and above	1.5 Crores SAR		
	Other than Term policies Facultative Reinsurance Limits	Standard or EMR extra up to Rs.2 / thousand	2 Crores SAR		
		EMR extra above Rs.2 / thousand	60 lakhs SAR		
(COMPILED BY: SRI SUBRAMANYA HGA NB Divisional Office UDUPL - MOR 9448770445)					

E&OE:- In case of doubts refer latest CO circulars. If any suggestion / feedback , please send through email SUBRAMANYA@licindia.com