

**POLICY SCHEDULE**

Policy Number :	
Plan Name : <b>Aviva Health Secure</b>	
UIN : 122N095V02	
<b>Policyholder</b>	<b>Insured</b>
Name :	Name :
Date of birth :	Date of birth :
Age :	Age :
Sex :	Sex :
Address :	Address :
Relationship with the Insured:	Whether Age admitted: (Yes/No)
<b>Insurance Details -</b>	
Sum Assured :	
Commencement Date :	

*Regular Premium :	Premium Frequency :
**Applicable Tax Amount :	
Total Amount :	
Policy Term :	
Premium Payment Term :	
Maturity Date :	
Date of last instalment of Regular Premium :	
***Maximum Sum Assured :	
Nature of Charge/Fee	Rate applicable at the Commencement Date
1) Reinstatement Fee This is a fee levied at the time of reinstatement of the Policy.	Rs.250/-

\*Premium rate is guaranteed for first five years of the policy and thereafter reviewable by the Company after every 5 policy years at the policy anniversary, subject to the prior approval by IRDA.

\*\*Applicable taxes will be charged and/ or deducted on/ from the premium at the prevailing rate. Tax laws are subject to change.

\*\*\* The combined critical illness Sum Assured for all the policies on the Life Assured should not exceed Rs. 5,000,000.

**Nomination Details** (Under section 39 of the Insurance Act 1938)

**Nominees**

Name:    Name:    Name:

Age:    Age:    Age:

Relationship: Relationship: Relationship:

**Appointee (in case of minority of the Nominee)**

Name:

**Beneficiaries in case of Insurance under the Married Women's Property Act, 1874**

Name:

Name:

Age:

Age:

Relationship:

Relationship:

**Any Special Conditions:**

**Endorsements, if any:**

All premiums and benefits under this Policy are payable in Indian Rupees.

This Schedule forms an integral part of the Policy Document and should be read in conjunction.

Our Address :

**Aviva Life Insurance Company India Ltd.,** Aviva Tower, Sector Road, Opp. Golf Course, DLF Phase V, Sector 43, Gurgaon -122 003 (Haryana)

Authorised Signatory:

Date:

- Place: New Delhi

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