

LOAN SHIELD RIDER

PROPOSAL FORM

It is agreed and understood that the Loan Shield Rider can only be bought along with the Base Plan and cannot be bought in isolation or as a separate product. Customer need to provide the following details shown below along with the details asked in proposal form of the Base Plan.

BENEFITS*:

Name of the Benefit	Covered Event (illness/injury)	Sum Insured	Other Conditions	Benefit options Available
EMI repayment to Loan Provider	1. Any kind of Hospitalization**, or 2. Specific Critical illnesses, or 3. Specific Vector Borne Diseases		Minimum no. of days of Hospitalization Required: __Days	Minimum no. of days of Hospitalization Required: between 0 - 45 days
Loan repayment to Loan Provider				

*Category-wise table will be furnished if there are several Categories selected for the Insurance Coverage.

**You can't choose Hospitalization cover for any specific disease.

Sr No.	Waiting Periods	Remarks
1	Pre-Existing Disease Waiting Period	
2	Initial Waiting Period for Hospitalization	
3	Critical Illness Waiting Period	
4	Critical Illness Survival Period	

Special Conditions (if any):

- 1.
- 2.

Declarations (if any):

- 1.
- 2.

Specific Critical Illnesses details (if applicable)

Coverage Category / Sum Insured Level / Insured Category etc	Critical Illness Group Opted:
Category A	
Category B	
Category C	

S.NO.	CRITICAL ILLNESS	GROUP			
		15 CI's	18 CI's	25 CI's	36 CI's
1	Cancer of Specified Severity	√	√	√	√
2	Kidney Failure Requiring Regular Dialysis	√	√	√	√
3	Multiple Sclerosis with Persisting Symptoms	√	√	√	√
4	Major Organ / Bone Marrow Transplant	√	√	√	√

S.NO.	CRITICAL ILLNESS	GROUP			
		15 CI's	18 CI's	25 CI's	36 CI's
5	Open Heart Replacement or Repair of Heart Valves	√	√	√	√
6	Open Chest CABG	√	√	√	√
7	Permanent Paralysis of Limbs	√	√	√	√
8	Myocardial Infarction (First Heart Attack – of Specific Severity)	√	√	√	√
9	Stroke Resulting in Permanent Symptoms	√	√	√	√
10	Benign Brain Tumor	√	√	√	√
11	Parkinson's Disease	√	√	√	√
12	Coma of Specified Severity	√	√	√	√
13	End Stage Liver Failure	√	√	√	√
14	Alzheimer's Disease	√	√	√	√
15	Aorta Graft Surgery	√	√	√	√
16	Major Burns	x	√	√	√
17	Loss of Hearing (Deafness)	x	√	√	√
18	Loss of Speech	x	√	√	√
19	Loss of Vision (Blindness)	x	x	√	√
20	Motor Neurone Disease with Permanent Symptoms	x	x	√	√
21	Loss of Limbs	x	x	√	√
22	Aplastic Anaemia	x	x	√	√
23	End Stage Lung Failure	x	x	√	√
24	Primary (Idiopathic) Pulmonary Hypertension	x	x	√	√
25	Bacterial Meningitis	x	x	√	√
26	Apallic Syndrome or Persistent Vegetative State (PVS)	x	x	x	√
27	Coronary Angioplasty (PTCA)[1]	x	x	x	√
28	Encephalitis	x	x	x	√
29	Fulminant Hepatitis	x	x	x	√
30	Chronic Relapsing Pancreatitis	x	x	x	√
31	Major Head Trauma	x	x	x	√
32	Medullary Cystic Disease	x	x	x	√
33	Muscular Dystrophy	x	x	x	√
34	Poliomyelitis	x	x	x	√
35	Systemic Lupus Erythematosus	x	x	x	√
36	Brain Surgery	x	x	x	√

Specific Vector Borne Disease details (if applicable)

S. NO.	SPECIFIC VECTOR BORNE DISEASE	Coverage Category A	Coverage Category B	Coverage Category C
1	Dengue			
2	Chikungunya			
3	Malaria			
4	Kala azar			
5	Japanese encephalitis			
6	Filariasis			
7	Zika			
8	Leishmaniasis			
9	Plague			
10	Typhus and louse-borne relapsing fever			
11	Schistosomiasis			
12	Kyasnur Forest disease			
13	Tick-borne encephalitis			