Citizen's Charter of Ageas Federal Life Insurance Company Limited

The Declaration of Service Commitment to our Customers outline our pledge to sustain the highest standards of service and support in every interaction.

Preface

This Citizen's Charter outlines the rights, responsibilities and standards of service committed towards Ageas Federal Life Insurance (AFLI) customers. It enhances transparency, ensures customer satisfaction and fosters accountability. We empower our customers by providing easy access to our product information on our website.

The Citizen's Charter represents the commitment of AFLI towards standards, quality and time frame of service delivery, grievance redressal mechanisms, transparency and accountability in all aspects of our service delivery.

Our Service Standards

Standards for fairness in Dealing with customers:

We assure

- ✓ Provide life insurance products that cater to the diverse needs of customers
- ✓ Deliver services with transparency, efficiency, and fairness
- ✓ Educate and empower our customers about life insurance and financial planning
- ✓ Continuously improve and innovate to meet evolving customer expectations
- ✓ Strive to deal with our customers in an open and transparent manner
- ✓ Provide clear explanations for our decisions, in alignment with business principles and requirements
- ✓ Continuously expand our product line and services to offer a broader range of choices

Standard for Easy Access to information for customers:

We assure

- ✓ Educate customers and the public about the various options available in our products and services
- ✓ Service request forms are made available on our website.
- ✓ Access given to customers to reach out to the Organisation through different channels like help line, call centres, internet etc;

Standard for Redressal of Customer Grievance:

We assure

- ✓ Resolve customer grievances in a prompt and effective manner
- ✓ Provide opportunities to our customers to write to Grievance Redressal Office of the organization
- ✓ Register all grievances received and strive to dispose off the same within fourteen days of their receipt. In case of delay beyond his period, we will explain the reason for delay on request
- ✓ Provide information to the aggrieved customers about the availability of the external grievance redressal machinery in form of insurance ombudsman.

Standard for Claims handling

We assure

- ✓ Prompt and transparent claims process.
- ✓ Dedicated support team for claim inquiries.
- ✓ Simplified documentation process

Policy Service Standards

S. No	Service	Description of item of service	Regulatory Turnaround Time
1	New Business Proposal Processing	Processing of Insurance Proposal and seeking further requirements for consideration of the proposal	7 days
		Decision on proposal from the date of receipt of proposal or from the date of receipt of additional requirement whichever is later	
		Providing copy of the policy along with the proposal form	15 days
2	Post Policy Service Request	Post Policy Service Requests concerning mistakes/ corrections in the Policy document	7 days
3	Free-Look Cancellation	Free Look Cancellation & Refund from the date of receipt of request	
4	Policy Servicing (from the date of receipt of request for the service specified)	Change of Address (KYC Norms to be complied)	7 days
		Registration /Change of Nomination, Assignment.	
		Inclusion of new member in case of group policies	
		Alteration in Original Policy Conditions (where applicable)	
		Policy Loan	
		Unit / Index Linked Insurance Policy-Switch, Top-up, and other related Services.	
		Decision on Policy Revival after receipt of all requirements.	
		Issue of Premium Payment Certificates (PPC)	
		Issue of Duplicate Policy	
5	Death claims	Death claims settlements (not requiring investigations)	15 days
		Early death claims requiring investigations - decision & payment	45 days
6	Survival, Maturity, annuity payments	Settlement of Maturity Claims	On due date
		Settlement of Survival Benefits	
		Annuity payments/ Pension Payment	
		Surrender or partial withdrawal of Policy	7 days
7	Auto Action by the Insurer	Premium Due Intimation	One month before due date
		Policy payments information (Survival Benefits, Maturity Benefits, etc.)	
8	Complaints	Acknowledgement to complainant	Immediately
		Action on Complaint & Intimation of Decision to the complainant	14 days
		If complaint is NOT resolved by the insurer, communicate the details to the policyholder of options including referring the complainant to Insurance Ombudsman/Consumer court	14 days from original date of receipt of complaint*

***The policyholder may approach the Insurance Ombudsman if his/ her complaint is not resolved within 30 days or if the decision of the company is not acceptable to the policyholder.**