

BENEFIT ILLUSTRATION

[Date and Time of Illustration – 05 August 2020, 05:00 PM]

Name of the Prospect/Policyholder: Mr. Age & Gender: 38 Years, Male Name of the Life Assured: Mr. Age & Gender: 38 Years, Male Policy Term: 11 Years Premium Payment Term: 10 Years Amount of Installment Premium: ₹5,22,500 Mode of payment of premium: Annual Annual Income Amount: ₹4,73,800 Income Period, if applicable: 25 Years Mode of Income, if applicable: Annual	Proposal No: Name of the Product: Max Life Smart Wealth Plan Tag Line: A Non-Linked Non Participating Individual Life Insurance Savings Plan Unique Identification No: 104N116V02 GST Rate (Base Policy, First Year): 4.50% GST Rate (Base Policy, Subsequent Year): 2.25% GST Rate (Rider, First Year): NA GST Rate (Rider, Subsequent Year): NA Max Life State: Maharashtra Policyholder Residential State: Maharashtra
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This benefit illustration is intended to show year-wise premiums payable and benefits under the policy.

Policy Details			
Policy Option	Long Term Income	Sum Assured (in Rs.)	Not Applicable

Rider Details			
Accidental Death & Dismemberment (ADD) Rider Term	NA	Accidental Death & Dismemberment (ADD) Rider Sum Assured (in Rs.)	NA
Term Plus Rider Term	NA	Term Plus Rider Sum Assured (in Rs.)	NA
Waiver of Premium (WOP) Plus Rider Term	NA		

Premium Summary					
	Base Plan	Accidental Death & Dismemberment Rider	Term Plus Rider	Waiver of Premium Plus Rider	Total Installment Premium
Installment Premium without GST (in Rs.)	5,00,000	0	0	0	5,00,000
Installment Premium with first year GST (in Rs.)	5,22,500	0	0	0	5,22,500
Installment Premium with GST 2nd year onwards (in Rs.)	5,11,250	0	0	0	5,11,250

Policy Year	Single/ Annualized Premium	Total Annual Premium	Guaranteed					Non Guaranteed
			Income Benefit	Other Benefits, if any (Terminal Benefit)	Maturity Benefit	Death Benefit	Min Guaranteed Surrender Value	Special Surrender Value
1	5,00,000	5,00,000	-	-	-	55,00,000	-	-
2	5,00,000	5,00,000	-	-	-	55,00,000	3,00,000	3,30,000
3	5,00,000	5,00,000	-	-	-	55,00,000	5,25,000	5,77,500
4	5,00,000	5,00,000	-	-	-	55,00,000	10,00,000	11,00,000
5	5,00,000	5,00,000	-	-	-	55,00,000	12,50,000	14,35,500
6	5,00,000	5,00,000	-	-	-	55,00,000	15,00,000	18,94,800
7	5,00,000	5,00,000	-	-	-	55,00,000	17,50,000	24,31,450
8	5,00,000	5,00,000	-	-	-	57,43,600	25,33,200	30,56,800
9	5,00,000	5,00,000	-	-	-	67,43,250	34,50,150	37,82,700
10	5,00,000	5,00,000	-	-	-	78,22,500	45,00,000	46,23,500
11	-	-	-	-	-	84,48,500	45,00,000	50,86,000
12	-	-	4,73,800	-	-	-	-	-
13	-	-	4,73,800	-	-	-	-	-
14	-	-	4,73,800	-	-	-	-	-
15	-	-	4,73,800	-	-	-	-	-
16	-	-	4,73,800	-	-	-	-	-
17	-	-	4,73,800	-	-	-	-	-
18	-	-	4,73,800	-	-	-	-	-
19	-	-	4,73,800	-	-	-	-	-
20	-	-	4,73,800	-	-	-	-	-
21	-	-	4,73,800	-	-	-	-	-
22	-	-	4,73,800	-	-	-	-	-
23	-	-	4,73,800	-	-	-	-	-
24	-	-	4,73,800	-	-	-	-	-
25	-	-	4,73,800	-	-	-	-	-
26	-	-	4,73,800	-	-	-	-	-
27	-	-	4,73,800	-	-	-	-	-
28	-	-	4,73,800	-	-	-	-	-
29	-	-	4,73,800	-	-	-	-	-
30	-	-	4,73,800	-	-	-	-	-
31	-	-	4,73,800	-	-	-	-	-
32	-	-	4,73,800	-	-	-	-	-

Policy Year	Single/ Annualized Premium	Total Annual Premium	Guaranteed					Non Guaranteed
			Income Benefit	Other Benefits, if any (Terminal Benefit)	Maturity Benefit	Death Benefit	Min Guaranteed Surrender Value	Special Surrender Value
33	-	-	4,73,800	-	-	-	-	-
34	-	-	4,73,800	-	-	-	-	-
35	-	-	4,73,800	-	-	-	-	-
36	-	-	4,73,800	50,00,000	-	-	-	-

Notes:

- Annualized Premium excludes underwriting extra premium, frequency loadings on premiums, the premiums paid towards the riders, if any, and Goods and Service Tax.
- Total Annual Premium includes underwriting extra premium, frequency loadings on premiums, the premiums paid towards the riders, if any but excludes Goods and Service Tax.
- Refer Sales literature (Prospectus) for explanation of terms used in this illustration.

I, Kamalakar Kishanrao Ghuge (name), have explained the premiums, and benefits under the product fully to the prospect / policyholder.

Place: _____ Signature / Thumb Impression / Electronic Signature of
Date: 8/5/20 Agent/ Intermediary / Official

This system generated benefit illustration shall be treated as signed by me.

I, (name), having received the information with respect to the above, have understood the above statement before entering into the contract.

Date: 8/5/20 _____ Signature / Thumb Impression / Electronic Signature of
Prospect/ Policyholder