



सत्यमेव जयते

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Government of Assam

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Second Party : UNION BANK OF INDIA
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This stamp paper forms part and parcel of the MoU executed between The Government of Assam and Union Bank of India on 1st day of January 2025.

यूनिऑन बैंक ऑफ इंडिया
FOR UNION BANK OF INDIA
क्षेत्रीय कार्यालय, गुवाहाटी
REGIONAL OFFICE, GUWAHATI

उप महाप्रबंधक
DEPUTY GENERAL MANAGER

Secretary to the Govt. of Assam
Finance Department
Dispur, Guwahati-78

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Memorandum of Understanding between the Government of Assam and Union Bank of India

This Memorandum of Understanding (hereinafter referred to as "MoU") is made and executed into on this 1st Day of January 2025 , at Guwahati.

- BETWEEN -

State Government of Assam represented by **Secretary to Government of Assam Finance Department**, having its Headquarters at Dispur, Guwahati at Ground Floor, F-Block, Janata Bhawan, Dispur, Guwahati, Assam-781006, (hereinafter called the "**Government of Assam**" or the "**First Party**" which expression shall unless the context otherwise requires, include its successors and permitted assigns of the **ONE PART**.

-AND-

Union Bank of India having its registered office at 239 Vidhan Bhawan Marg, Nariman Point, Mumbai 400021, Maharashtra (hereinafter called the "**Bank**" or the "**Second Party**" which expression shall unless the context otherwise requires, include its successors in business) through **Shri Abhinav Bhatt, Deputy General Manager, Union Bank of India, Regional Office, Housefed Complex, East End Building, 1st Floor, Near Dispur Last Gate, Guwahati-781006 Assam**, of the **OTHER PART**.

WHEREAS the Bank possessing technologically advanced infrastructural facilities has offered to provide banking services as detailed in the Memorandum of Understanding for the State Government of Assam serving regular or permanent employees maintaining their salary accounts with the Bank;

AND WHEREAS the First Party in its efforts to make available modern banking facilities to its regular or permanent employees has decided to accept the proposal submitted by the Bank.

The First Party and the Bank may be individually referred to as "Party" and collectively as "Parties".

NOW THEREFORE THIS MEMORANDUM OF UNDERSTANDING WITNESSETH AS UNDER:

1. Period

This MoU shall be operative with effect from the date of signing and shall be in force unless terminated or till the next MoU is signed, as mutually agreed by both the parties.

2. Salary Accounts

- a) The existing Account holders of the bank shall check whether their account is properly categorized, as "Union Super Salary Account" so that Salary Package benefits as contemplated under this MoU are linked to product code of Salary Package accounts in Bank's system. This can be done by referring to the "A/C Type" in the passbook, which can be checked at branches or via Passbook printing machines available at branches or ATM rooms or by any other arrangements.



- b) If the account of any employee is found not to have been categorized as "Union Super Salary Account", the employee concerned shall submit an application as provided under clause 4(a) and the Bank concerned shall make necessary correction and categorization.
- c) All new accounts being opened by the bank in the training academies or offices or centers of the First Party shall be opened as "Union Super Salary Account" on receipt of temporary numbers (for training) by training academies or centers and on receipt of employee or service numbers, the employees shall advise the Branch, where account is maintained for requisite amendments in the number by respective Branch.

3. Union Super Salary Account

The facilities under this MoU shall be provided under Union Super Salary Account of the Bank to serve regular or permanent employees. Benefits of Union Super Salary Account shall not be available in cases where salary being credited, however the accounts are not categorized as Union Super Salary Account. More details are included in clause 2(a) and clause 2(b) above. Detail Benefits offered under Union Super Salary Account are enclosed in Annexure III

4. Facilities to Salary Package Account holders

The Bank undertakes to provide the following facilities or services to the State Government of Assam serving regular or permanent employees drawing their salary through any of its branches.

- (a) Existing salary or SAVINGS accounts of regular or permanent employees of the First Party shall be converted to Union Super Salary Account subject to an application-cum-undertaking to be submitted by the respective account holder as per specimen attached in Annexure-I.
- (b) All other facilities being provided to Bank's normal customers as usual, subject to the standard policy of the Bank and prevailing regulatory guidelines from time to time.
- (c) Key highlights of Union Super Salary Account for serving employees of the State Government of Assam

Insurance facilities Offered

- (i) **Personal Accidental Insurance Cover:** Minimum ₹ 100 lakh in case of Accidental Death
(without POS condition)
- (ii) **Air Accidental Insurance Cover:**
Minimum ₹ 200 lakh as decided by the State Government with the Conditions of the Bank. (As annexed in Annexure III)(applicable to employees between the age of 18- 60 years)
- (iii) **Permanent Total Disability (PTD):** Up to ₹ 100 lakh
- (iv) **Permanent Partial Disability (PPD):** Up to ₹ 100 lakh
(Disability Sum Insured payable as per prevailing regulatory guidelines)



*The benefit of Personal Accident Insurance (Death/PTD/PPD) shall be continued to those employees even after superannuation and who opt to maintain their Pension accounts and where the Pension is credited regularly into the designated account with Union Bank of India. PAIS shall be extended to such pensioners up to 70 years of age.

(v) Group Term Life Insurance : Minimum ₹ 10 lakh (applicable to employees aged between 18- 60 years)

Over and above these insurance benefits without any costs to employees, Banks are free to offer other facilities, promoting employee welfare. (The detail Benefits are enclosed in Annexure III)

In case, the banks allow or offers higher amount of insurance coverage (exceeding the above limit) with intimation to the Finance Department, such higher amount shall be deemed to be the amount of insurance coverage under this MoU.

5. Health Insurance Cover

All regular or permanent employees of the State Government of Assam shall be eligible to avail benefits of Health Insurance at special discount premium and features as per the terms and conditions offered by the Bank, in consultation with Finance Department, Government of Assam. The premium amount shall be on annual basis and the same shall be borne by the employees. (The Detail Premium annexed in Annexure III)

6. Personal Accident Insurance (Death) {PAI} or Permanent Total Disability or Permanent Partial Disablement Cover or Air Accident Insurance (Death) {AAI}

- a) All Personal Accident Insurance (Death or Disability) claims of the State Government Salary package account holders shall be submitted by the claimant in the proper forms along with the relevant documents as prescribed by the Insurance Company with whom the bank has a tie-up; the tie-up is being subject to annual review and renewal. The details of the appointed insurance company will be provided to the Finance Department, Govt. of Assam on yearly basis. The Bank shall appoint a Nodal Officer with sufficient seniority to address all the grievances. This Nodal Officer, based in Regional Office, Guwahati will act as the primary liaison between the Assam State Government Establishments and the Bank. The Bank will share the information about each claim case to the Finance Department whether settled or rejected. The detailed reasons will also be shared in each case of rejection of claim case so that the Finance Department may know about these reasons and do the needful action. The Bank will also examine the reasons of rejection and if it is found that the reasons are not satisfied then it will resubmit the case to the insurance company with reasons of such dissatisfaction with insurance company The nodal officer will provide the information about the disposed claims (settled or rejected) to the concerned Bank branch of the district from where the claim case was received. The Bank branch of the district will share this information to that office from where the claim case was received or to the claimant directly.

The Home Branch of the deceased employees shall be a facilitator for prompt submission of all relevant claim documents in consultation with Nodal Office of the Bank to the Insurance Company with whom bank has a tie-up, expedition of the claim settlement



process and addressing any issues faced by the nominees or claimants of the deceased employees concerning claim settlement.

The Insurance Company, after receipt of claim papers from the claimant, shall initiate the process of claim settlement. All the correspondence related to claim shall be directly taken up between the Insurance Company and the claimant. All the settlement or disputes shall be between the claimant and the insurance company, and the Bank shall not be a party to such disputes arising out of claim settlement process and the decision of the insurance company on any of the claims. Claims shall be settled by the Insurance Company independently as per terms and conditions of the Insurance Policy. However, Bank shall monitor and assist in early settlement of all legitimate claims.

7. Group Term Life Insurance Cover

(a) Parties shall understand and agree that the personal data of the salary package account holders shall be shared by the Bank with the third-party companies or entities offering the special features or complimentary benefits related to the said Union Super Salary Accounts and also that such sharing shall be in accordance with the applicable laws like Digital Personal Data Protection Act, 2023.

(b) A list of all employees eligible for Group Term Life Insurance Cover under the Union Super Salary Account shall be provided directly by the Bank to the appointed insurance provider, based on applications collected for the conversion of normal accounts to salary accounts or for the creation of new accounts. The life insurance cover shall be applicable from the date of account addition with the appointed insurance provider, and not from the date of data provision by the Bank.

(c) All Group Term Life Insurance (Death) claims of the State Government salary package account holders shall be submitted by the claimant in the proper forms along with the relevant documents as prescribed by the Insurance Company with whom the bank has a tie-up.

(d) On receipt of the complete set of claim documents the insurance company shall settle the Term life insurance claims independently. All the settlement or disputes shall be between the claimant and the insurance company, and the Bank shall not be a party to any disputes arising out of claim settlement process or the decision of insurance company on any of the claims. The details of the appointed insurance company with whom the policy shall be placed shall be intimated to the Finance Department subsequently.

(e) The Home Branch of the deceased employees shall be a facilitator for prompt submission of all relevant claim documents to the Insurance Company with whom the bank has a tie-up, expedition of the claim settlement process and addressing any issues faced by the nominees or claimants of the deceased employees concerning claim settlement.

8. Dissemination

Upon execution of this Memorandum of Understanding by both the parties, the Government of Assam shall disseminate information regarding the Memorandum of Understanding to all employees of all ranks and staff through service letters, office memoranda, data networks, the internet, or any other available means of communication.



Furthermore, the Bank shall display pre-approved hoardings in their bank branches (wherever possible), outlining the benefits provided under this Memorandum of Understanding. The Bank shall also send email or SMS notifications to each employee on a monthly basis.

9. Termination

This Memorandum of Understanding may be terminated by either party by giving three months' notice of termination in writing to the other party. In the event of termination or expiry of the term of the Memorandum of Understanding, the disbursement of salaries to the individual account holders may be done through the same account, but without the special benefits as offered through this Memorandum of Understanding.

In the event of termination, any health insurance coverage availed by the employee, where the employee contributes the premium to the Bank, shall be maintained until the expiration of the policy term as per norms or guidelines prescribed by the Insurance Regulatory and Development Authority of India (IRDAI).

Notwithstanding the termination of this MoU, it shall not affect any valid claims arising out of Personal Accidental Insurance Cover, Air Accidental Insurance Cover, Permanent Total Disability, Permanent Partial Disability and Group Term Life Insurance cover provided under this MoU prior to the termination of the MoU. Such claims shall be dealt with in accordance with the norms or guidelines of the Bank and Insurance Regulatory and Development Authority of India (IRDAI) as well as the provisions prescribed in the Annexures of this MoU.

10. Complaint Redressal and Review Mechanism:

A Complaint Redressal Mechanism shall be established for the employees of the State Government of Assam. The Bank shall appoint a Nodal Officer with sufficient seniority, as mutually agreed upon with the Finance Department of the Government of Assam. This Nodal Officer, based in Guwahati, shall act as the primary liaison between the State Government of Assam Establishments and the Bank. The Nodal Officer shall be responsible for ensuring that any complaints or queries from State Government employees are promptly communicated to the relevant Circle or department within the Bank and monitored till resolution.

The Nodal Officer shall ensure that all complaints and queries are promptly communicated to the relevant circle or concerned department of the Bank within 7 working days of receipt, with an intimation to the complainant. Further, the Nodal Officer shall monitor each complaint till its resolution. To support effective complaint resolution, the Bank shall also provide an escalation matrix to be used if the Nodal Officer is unable to resolve an issue, thereby enabling employees to escalate complaints to higher levels as necessary.

In addition to the above, the Bank has a very well laid down comprehensive Customer Grievance Redressal Policy. This policy shall apply to all employees and outline the specific timeframes for redressal along with the various channels available for lodging complaints. The policy details shall be available on the Bank's website for public access. Holders of the Union Super Salary Accounts shall also have the option to utilize these grievance redressal channels for addressing their individual complaints or grievances.

If any dispute remains unresolved after following the above procedure, the matter may be referred to the Banking Ombudsman appointed by the Reserve Bank of India under



the Banking Ombudsman Scheme, provided that the issue falls within the purview of the scheme.

11. Procedure to submit the claim cases for life and accidental death (including disability)

(a) All types of claims, whether Term life insurance or personal accident death insurance (PADI) or permanent or partial disability or Card cover etc., shall be submitted by that office within the prescribed time limit as set by the IRDAI after obtaining the prescribed and duly completed claim form and other desired documents from the claimant where the deceased or injured employee was last posted or currently posted, to the concerned Bank Branch where the employee is maintaining the salary account or directly to the Insurance Company. A copy of such forwarding of proposal shall be given to the Nodal Officer (appointed by Government) of the district where the employee was last posted.

(b) The concerned bank branch or the Insurance Company shall examine the claim case and if it finds that any other document or documents and information are also desired then it shall inform about these requirements to the nodal officer of the district (appointed by Government) with copies to the department concerned as well as the claimant. The claimant may himself or through the nodal officer of the district shall provide the required documents etc. as early as possible to the concerned bank branch or the Insurance Company.

(c) All types of claims, whether life insurance or personal accident death insurance (PADI) or permanent or partial disability or Card cover, Health Insurance etc., shall be submitted by the claimant directly to the Insurance Company concerned with whom the bank has a Tie-Up arrangement or to the Home Branch. The Home Branch of the deceased employees shall be a facilitator for prompt submission of all relevant claim documents to the Insurance Company with whom the bank has a tie-up, expedition of the claim settlement process and addressing any issues faced by the nominees or claimants of the deceased employees concerning claim settlement.

(d) The Bank shall share the information about each claim case to the Finance Department whether settled or rejected once in a quarter. The detailed reasons shall also be shared in each case of rejection of claim case so that the Finance Department may know about these reasons and do the needful action. The Bank shall also examine the reasons of rejection and if it is found that the reasons are not justified, then it shall resubmit the case to the insurance company with reasons for re-consideration and the needful.

(e) On disposal of each of the claims (settled or rejected), the concerned bank branch from where the claim case was originated shall intimate the same to the claimant, the nodal officer appointed by the Government as well as to the parent department of the concerned employee.

(f) It is the responsibility of the bank to monitor, pursue and co-ordinate with the concerned insurers for ensuring early disposal of the claims.

12. Amendment

Any provisions of this Memorandum of Understanding may be amended or waived, only by an instrument agreed in writing and signed by both the parties.



Secretary to the Govt. of Assam,
Finance Department
Dispur, Guwahati-781

13. Notices

Each notice, demand, or any other communication to be given or made hereunder shall, except as otherwise provided herein, be given or made in writing and may be sent by one party to the other party by Registered post, hand or official e-mail to the address or such other address and email ID as one party may inform the other in writing.

(Such addresses or email addresses may be mentioned hereunder)

14. Employee Discretion in Bank Selection

Government of Assam shall not make any commitment or impose any requirement upon its employees to maintain their salary accounts with any specific bank. The decision of where to establish and maintain a salary account shall remain solely at the discretion of each individual employee, who may choose any scheduled commercial bank according to their preferences. The Government's involvement in this Memorandum of Understanding is limited to facilitating the availability of banking and associated facilities as outlined herein. Following the empanelment of banks, employees shall retain the freedom to either migrate to an empanelled bank of their choice or continue with their current salary account, without any interference from the Government of Assam.

15. Non-Exclusivity

This Memorandum of Understanding shall be expressly deemed a non-exclusive Memorandum of Understanding. Nothing in this Memorandum of Understanding shall restrict the Government of Assam, or any of its Departments, Agencies, or Organizations, from entering into similar Memorandum of Understandings with other banks for the provision of salary account services to its employees. This provision ensures that the Government retains the flexibility to offer its employees a choice of banking services, allowing them to benefit from competitive terms and offerings available in the market. The non-exclusive nature of this Memorandum of Understanding is intended to promote transparency, competition, and choice for the employees of the Government of Assam.

16. Miscellaneous

(a) The Term insurance/ Personal Accident Insurance/ PTD/TPD/ Air Accident Insurance cover shall be applicable after credit of one month salary of the employees and thereafter regular salary credit into the Account.

(b) In the event of non - credit of salary or similar remuneration for more than three months in the Union Super Salary Account of any employee, Bank has the discretion to convert such account to normal Saving Bank account and all benefit extended to the Salary Package account holders shall stand withdrawn, without any communication. After resumption of salary credits in the account employee may apply in Bank again for converting the concerned account into Union Super Salary Account:

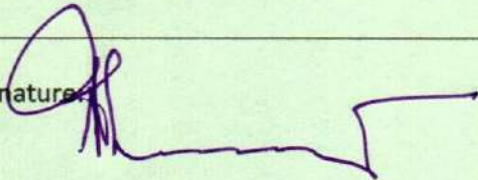

Provided that if non-credit of salary beyond 3 months has occurred due to reasons beyond the control of the employee concerned and the employer- employee relationship has not been ceased, benefits accrued under this MoU shall continue subject to a specific certification from the employer or administrative department through Finance Department and all benefits under the MoU shall resume after receiving certificate from the Finance Department


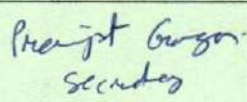
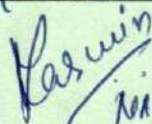
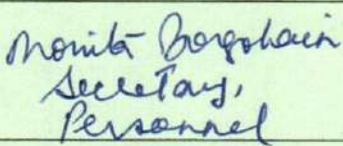


Secretary to the Govt. of Assam,
Finance Department
Dispur, Guwahati-781 006

- (c) Benefits of Salary Package Accounts are available only to Union Super Salary Account categorized accounts. The regular or permanent employees of Assam State Government to verify or ensure from their Passbook or Statement of account or Internet Banking that their account is categorized under applicable Union Super Salary Account as per their Gross salary.
- (d) As regards "Know Your Customer norms" as per RBI guidelines, PAN or Form-16 (mandatory) and one Officially Valid Documents (OVDs) shall be provided for opening of Bank accounts. These instructions shall be governed by directions issued by RBI or Bank from time to time. Along with PAN and OVD a certificate or letter issued or countersigned by the authorized signatory from the individual's office, certifying his identity and present address along with certified copy of salary slip or certificate shall be acceptable to the Bank.
- (e) This Memorandum of Understanding shall be binding upon both the parties and shall be governed by the Laws of India and shall be subject to the jurisdiction of the competent courts in Guwahati, Kamrup Metro only.

IN WITNESS WHEREOF the parties hereto have signed, sealed and delivered this Agreement on the day 1st January, year 2025 in presence of:

For the Second Party	For the First Party
Shri Abhinav Bhatt, Deputy General Manager, Union Bank of India	Laya Madduri, IAS Secretary to Government of Assam, Finance Department
Signature: 	Signature: 

Witness (Second Party)	Witness (First Party)
1. Signature:  BIBEKANANDA SARMA AGM	1. Signature:  Prajit Gogoi Secretary GAD
2. Signature:  NASIMA YASMIN Regional CASA & Leap Officer	2. Signature:  Monika Borgohain Secretary, Personnel



Secretary to the Govt. of Assam,
Finance Department
Dispur, Guwahati-78

Annexure-I

Application-cum-undertaking to be taken from all account holders, whether new or existing (converting SB accounts to Union Super Salary Account)

The Branch Manager

.....Branch

Dear Sir,

(1) REQUEST FOR CONVERSION OF SAVING BANK ACCOUNT TO UNION SUPER SALARY ACCOUNT

(2) UNDERTAKING FROM SALARY PACK ACCOUNT HOLDERS FOR CONVERSION SHARING OF PERSONAL DATA WITH THIRD PARTIES

1. I maintain a SB account with your branch and the account number is _____ / I intend to open a new salary package account/ convert my existing Savings/ Salary Account. I am presently employed as _____ with _____, my personal number is _____ and my Date of Birth is _____. My mobile number is _____. My present address is appended below which may please be incorporated in your records for which I am enclosing a certificate issued from the unit and request you to accept it for satisfying the KYC norms as prescribed by your bank, along with other KYC document(s) as prescribed by the RBI.
(strike out if not applicable, in case of existing customers)
2. In this connection, I request that my existing SB account numberbe converted into a Union Super Salary Account with all its special features.
(strike out if not applicable, in case of new customers)
3. I hereby consent to sharing my personal data (limited to essential fields only) with companies/entities offering complimentary benefits or special features related to the salary package account, strictly for the purpose of enabling access to such benefits or features. The Bank shall ensure that any data shared with these companies/entities shall not be further disseminated and shall be utilized solely for the specific, limited purpose for which it has been disclosed.

Address: _____

Yours faithfully,

Date :

Place :

Address :

Mobile :

Name :

(with Rank/ Designation)



Handwritten signature

Annexure-II

GENERAL TERMS AND CONDITIONS OF GROUP TERM LIFE INSURANCE (GTLI) (DEATH)

1. **Policy Number:** 706005709
2. **Name of Insurer:** Life Insurance Corporation of India
3. **Current Policy Period:** The policy period shall be yearly, starting from XX/XX/XXXX, and subject to renewal. It shall continue until superannuation or termination of service, whichever is earlier.
4. **Age Group:** Entry age shall be 18 years (subject to condition of maintaining salary package account with Union Bank of India) and Coverage Age shall be till completion of 60 years or superannuation whichever is earlier.
5. **All activities** of / at work are covered.
6. The account holders under Assam State Government salary package shall be covered under the policy on the basis of list of employees provided by the Assam State as mentioned under clause 7 of the Memorandum of Understanding.
7. 24 hours death risk cover under one-year term insurance plan covering all deaths including suicide is covered from day one subject to addition of the eligible account holder in policy list maintained with the insurance company. The data for which is to be supplied to the insurance company as per the terms of clause 7 of this Memorandum of Understanding.
8. No medical examination of individual Salary Package Account holder shall be undertaken as it shall be a group policy.
9. Details of nominee shall not be asked for at the time of joining.
10. Claimant / Beneficiary to be decided as under-
 - (a) In case of account opened in single name, the nominee recorded in Bank shall be beneficiary for the purpose of insurance claim. (Bank's role shall be limited only to certify the name of nominee as per Bank's records).
 - (b) In case, the account is opened as joint account, then the beneficiary shall be the surviving account holder(s) for the purpose of insurance claim even if a nominee is available in the account. (Bank's role shall be limited only to certify the names of surviving joint account holder(s) as per Bank records).
 - (c) In case, the account is opened as joint account, in event of death of all the account holders, the nominee in salary account in Bank's system, if available, shall be the beneficiary for the purpose of insurance claim.



Handwritten signature in blue ink.

(Bank's role shall be limited only to certify the names of nominee as per Bank records).

(d) In cases other than (a), (b) and (c) above, the nominee shall be the beneficiary in salary account holders service records with the employer, in whose favour terminal dues are paid by the employer, basis certificate issued by the employer to that effect.

(e) In cases other than (a), (b), (c) and (d) above, the claim shall be settled as per the procedure of the insurer. The identification of legal heirs and the authenticity of the claim shall be the responsibility of the Insurance Company.

11. Claimants or their representatives shall submit an intimation of the death of the Salary Package Account Holder to the Insurance Company concerned directly within 90 (ninety) days of the date of death of the Holder or to the Home Branch concerned within 60 days of the date of death of the Holder. It is the responsibility of the Bank to forward this intimation to the concerned Insurance Company within next 30 days of receipt. The Insurance Company shall entertain claims where intimation from claimant/branch is received by them by email/ fax/ letter within 90 (ninety) days of the death of the Salary Package Account Holder. The claim shall be settled within 15 days on receipt of required documents at the centralized point of the insurer. In case of unexplained delay of beyond 30 days, the insurer shall pay interest @2% above the prevailing Bank Rate from the date on claim, on the claim amount. All admissible claims where death happens within the Policy period are to be paid by the Insurance Company whether the Policy is subsequently renewed or not.



Secretary to the Govt. of Assam,
Finance Department
Disput. Guwahati-10

Annexure III

For the Permanent Employees of Govt. of Assam, under special Salary Package Union Super Salary Account under this MoU:

Scheme Code		Executive Salary Account	Premier Salary Account
Gross Salary (Average of last 3 months gross salary)		₹ 25,000/- to ₹ 74,999/- p.m.	₹ 75,000/- and above p.m.
FREE Personal Accident Insurance (PAI) (Available upto 60 years, however if pension is routed through the existing salary account PAI is available upto 70 years of age)	With account	₹ 100 Lakhs (Death + PPD & PTD)	
	With debit card*	₹ 5 Lakhs (by Bank Subject to Debit Card must be used for financial and non financial Transaction, 90days within the date of accident) ₹ 10 Lakhs (additional by NPCI for RuPay Select Debit Card, Subject to Debit Card must be used for financial and non financial Transaction, 30 days within the date of accident)	
FREE TERM INSURANCE (NORMAL DEATH)		₹ 10 Lakhs (Available up to 60 Years of age)	
FREE Air Accident Insurance with RuPay Select debit card (Subject to Debit Card must be used for financial and non financial Transaction, 90days within the date of accident and in case of Travelling through commercial Flight only)		₹200 Lakhs (Available up to 60 years) + 100 Lakh PAI+ 10 Lakh Term Life + 5 lakh by Bank for debit card (Subject to Debit Card must be used for financial and non financial Transaction, 90days within the date of accident) + 10 lakh by NPCI for debit card (Subject to Debit Card must be used for financial and non financial Transaction, 30 days within the date of accident)	₹200 Lakhs (Available up to 60 years) + 100 Lakh PAI+ 10 Lakh Term Life + 5 lakh by Bank for debit card (Subject to Debit Card must be used for financial and non financial Transaction, 90days within the date of accident) + 10 lakh by NPCI for debit card (Subject to Debit Card must be used for financial and non financial Transaction, 30 days within the date of accident)
Free Hospi-cash (Mediclaime) for IPD		₹ 30,000Per Annum (Rs.1000/ day for max 30 days of hospitalization) up to 60 years age	



[Handwritten signature]

Secretary to the Govt. of Assam,
Finance Department
Dispur, Guwahati-66

Quarterly Average Balance	NIL	
Type of Debit Card	RuPay Select Card	
Debit Card Charges	Issue charge – Free Annual Maintenance Charge - Free	
ATM Cash Withdrawal Limit	₹ 1,00,000 per day	
POS Limit	₹ 3,00,000 per day	
Free ATM card access at Union Bank of India ATM	Unlimited	
Free ATM card access at other Bank's ATM	Unlimited	
Personalized Cheque Book	60 leaves free per year	100 leaves free per year
Temporary Overdraft Facility	90% of 1-month net salary credited to account with maximum of ₹ 50,000/-	90% of 2-months net salary credited to account with maximum of ₹ 2,00,000/-
SMS Charges	Free	
Free Remittances from the Account	Five per months (Max. ₹ 50000/- p.m.) DD/NEFT	Unlimited Free DD/NEFT
RTGS	As per Applicable charges	Free
IMPS	Free	
Locker facility (Allotment subject to availability, Concession shall be extending manually at branches)	25% concession on 1st year rent.	50% concession on 1st year rent.
Processing fee for Home loan of Rs 25 lacs and above	100% concession	
Processing fee for Home loan below Rs 25 lacs	50% concession	
Processing fee for retail loan (other than Home loan) scheme	50% concession	
Rate of Interest on Home loan	0.05% p.a. concession in applicable ROI	
Rate of Interest on Vehicle loan	0.10% p.a. concession in applicable ROI	
Rate of Interest on Education loan more than Rs 7.50 lacs for study abroad / premier institution	0.10% p.a. concession in applicable ROI	
Rate of Interest on Mortgage loan	0.10% p.a. concession in applicable ROI	



Rate of Interest on Personal loan	0.10% p.a. concession in applicable ROI
Joint A/c Facility with spouse	Yes
Zero Balance account to family members (BSBDA)	Available for 3 family members (Spouse + 2 Children)
Account closure -within 14 days or after 12 months	Nil charges
Account closure -Between 15 days to 12 months	As per applicable charges.

*The concession in rate interest will not go below prevailing benchmark rate in case of any loan

* Notwithstanding to the termination of MoU, All the claims will be valid provided circumstances for claim of Personal Accident Insurance Cover, Air Accident Insurance Cover, Permanent Total Disability, Permanent Partial Disability and Group Term Life Insurance has happened prior to termination of the MoU. This terms and condition to be read with Termination clause mentioned earlier.

Additional Covers/Add on Covers under PAI :

a) Ambulance Charges	Transportation of Insured person to Hospital on accident are paid as per Actual expense subject to maximum of Rs 1000/-
b) Transportation Expenses	Transportation of insured person's dead body to the place of residence- Actual expense subject to maximum of Rs. 2,500/- whichever is less.
c) Children Education Bonus	5% of sum insured or actual expense subject to a maximum of Rs. 15000 whichever is less. Max 2 children (This is payable for each dependent child subject to maximum of 2 dependent school/College going children, however the upper cap of Rs. 15000 is applicable and this is the maximum which can be claimed by an account holder even in the case of 2 children).
d) Higher Education (Graduation) Cove	Education cover is extended for Graduation of children of age between 18 to 25 years of the insured person, pursuing fulltime Graduation course in a recognized college/university. 10% of PAI cover or Rs. 6 lakhs whichever is lower Max.2 children (however the upper cap of Rs. 10% of PAI cover or Rs.6 lakhs, whichever is lower is the maximum which can be claimed even if



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	there are 2 children), in case the insured person has died due to accident, as an additional benefit.
e)Transportation of Imported Medicine	expenses incurred as freight charges for importing medicines on producing invoice copy of freight expenses, subject to 5% of PAI cover or Rs.2 lakhs whichever is lower
f)Cost of Plastic Surgery (Burn):	If account holders die due to accident, tenable under terms & conditions of the policy, the insurance company will reimburse the actual cost of plastic surgery due to burn, incurred prior to death of insured person, subject to 5% of PAI cover or Rs. 2 lakhs whichever is lower
Air Ambulance	The expenses incurred for engaging an Air Ambulance for transporting the insured person to a fully equipped hospital anywhere in India for further treatment, will be paid by the Insurance Company, subject to 10% of PAI cover or Rs. 6 lakhs whichever is lower.
Family Transportation	Expenses incurred in transporting 2 immediate family members to the place of accident, subject to actual cost or Rs.20,000/- whichever is lower will be reimbursed.
Repatriate of mortal remains	Actual cost or Rs.20,000/- whichever is lower

Additional Covers/ ADD ON covers under Accident Insurance with Debit Card:

1	Children Education Bonus (with Debit Card)	5% of sum insured or actual expense subject to a maximum of Rs. 15000
2	Ambulance Charges (with Debit Card)	Actual expenses subject to a maximum of Rs. 1000/-
3	Transportation Expenses (with Debit Card)	Reimbursement of transportation of insured person's dead body to the place of residence are paid as per actual expenses subject to maximum of Rs. 2500/-.



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4	Girl Child (18-25 years) marriage cover with Debit Card	20% of PAI sum insured subject to maximum of Rs. 2,00,000 is payable to the Girl Child, subject to the insured person expired due to accident other than Road Accident.
---	---------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Eligibility criteria for lodging Accident insurance claim is as under:

- Death of cardholder due to accident.
- Debit card should be in active status.
- Debit card should have been used for financial or non-financial transaction before 90 days from the date of accident of the cardholder.
- Air Accident Cover (death) is applicable only if journey done by Commercial Flight.

Health Insurance:

Premium (Base Policy for Medical Expenses)

	1A	2A	2A+1C	2A+2C
SI	3,00,000	3,00,000	3,00,000	3,00,000
18-65 years	Rs.2,205	Rs.3,521	Rs.4,118	Rs.4,999

Premium (Top Up) Aggregate Deductible

	1A	2A	2A1C	2A2C
Deductible	3,00,0000	3,00,0000	3,00,0000	3,00,0000
SI	30,00,000	30,00,000	30,00,000	30,00,000
18-65 years	Rs.1,899	Rs.1,999	Rs.2,099	Rs.2,199



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Salient Features of Union Bank of India RuPay Select Debit Card (as provided by NPCI): *

Card features	RuPay Select Debit Card
Reward Points from M/s Loyalty Rewards	One point for every Rs.100/-POS/e-com transaction Value of each point is Rs.0.25
Gym	1 Complimentary 30 Days Free offline Gym Membership every quarter
Golf	1 Complimentary Golf session / round every quarter
Health check up	1 Complimentary premium health check-up package every quarter
SPA services	1 Complimentary SPA Session or Lakme Saloon coupon worth INR 1500 once in a quarter
Cab Services	1 Complimentary INR 100 Coupon once in a quarter.
RuPay lounge program	International Airport lounge: International lounge program provides access to cardholders three(3) times per calendar year at any of the 500+ participating international airport lounges. Domestic Airport Lounge: Domestic Airport lounge program for "RuPay Select" Debit Card provides access to cardholders three(3) times per calendar quarter, per card at any of the 50+ participating domestic airport lounge.
Exclusive merchant offers	Exclusive offers from selected partner merchants.

*Features provided by NPCI are subject to change which will be updated in the NPCI website. Please visit www.RuPay.co.in for latest offers and lounge facility details.



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Dispur, Guwahati-781 006

Annexure IV



UNITED INDIA INSURANCE COMPANY LIMITED

(Regd. & Head Office: United India House, 24, Whites Road, Chennai – 600 014)
Bancassurance Divisional Office No.: 8: Union Co-op. Insurance Bldg., 5th Floor,
Sir PM Road, Fort, Fort, Mumbai-400 001 (CIN: U93090TN1938GO1000108)

GROUP PERSONAL ACCIDENT CLAIM FORM

To be submitted for claiming Personal Accident Insurance (Death / PTD / PPD) of account holders of Union Bank of India within 30 days after date of Death / Accident. Please return the form duly completed within 30 days of the accident together with the relevant prescription, bills, receipts etc.

The issue of this form does not constitute admission of liability.

Policy No (A/c Union Bank of India)		Telephone No: 22821977/22821928 /22821827 Dir : 22831762 Fax:22821924 Email Id: 120200@uiic.co.in/ Correspondence Address: United India Insurance Co. Ltd., Bancassurance Divisional Office No.:8: Union Co-op. Insurance Bldg., 5 th Floor, Sir PM Road, Fort, Mumbai-400 001.
Policy Period	From To	
1	Name of CASA Account holder	
	Address in full of the CASA Account Holder	
2	Details of CASA Account Holder	
	a) Age of the Account Holder at the time of accident	
	b) Occupation	
	c) CASA Account No.	
	d) Type of Account (Savings A/c / Salary Savings A/c)	
	e) Details of Union Bank of India Branch where SB Account is maintained	Name: Branch Code: Address:



	f) Sum Insured Opted and Cover	
3	Details of Accident	
	a) Date of Death	
	b) Date of Accident	
	c) Time of Accident	
	d) Place of Accident	
	e) Details of Accident	
	f) Was the injured person under the influence of drugs or intoxicating liquor at the time of accident.	
4	Details of Medical Treatment	
	a) Give details of medical attention given and the name & Address of the Medical Attendant.	
	b) If the Medical Attendant name above is not the injured Person's usual Medical Attendant, give the Name and Address of his / her usual Medical Attendant	
	c) Has he/she or any other Medical treated the injured Person previously for any illness or injury?	
5	Details of Nominee in case of Death Claims	
	a) Name of Nominee / Joint Account holder in the SB account [If Available]	
	b) Relationship of Nominee/ Joint Account holder with Account Holder [If Available]	
	c) Full Address of the Nominee	



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	d) E Mail ID of Nominee (if available)	
	e) Mobile Number of Nominee	

Note: Please submit the following documents with translation in English if it is in regional language:

1. FIR
2. Panchanama
3. Postmortem report
4. Death Certificate
5. Any other documents pertaining to the claim

Note: Bank Statement of the Deceased Account holder from the Date of Opening of SB Account or Six months whichever is maximum period to be submitted duly certified by the Branch Manager

The foregoing details are true to the best of my / our knowledge and belief.

Signature of person Intimating Claim

Full Name of person Intimating Claim

Relationship with Deceased Account Holder

Contact details of person Intimating Claim

Landline No

Mobile No

Email ID

(Intimation may be advised through Email, Post, Telephone/ Fax)



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Dispur, Guwahati-781

Annexure V



UNITED INDIA INSURANCE COMPANY LIMITED

(Regd. & Head Office: United India House, 24, Whites Road, Chennai – 600 014)
Bancassurance Divisional Office No.: 8: Union Co-op. Insurance Bldg., 5th Floor,
Sir PM Road, Fort, Mumbai-400 001 (CIN: U93090TN1938GO1000108)

Email Id: 120200@uiic.co.in

NEFT FORM FOR PERSONAL ACCIDENT INSURANCE

(To be submitted by the claimant only)

Sir,

I/We furnish below details of my/our bank account to be used for effecting payments due to us by NEFT/RTGS

1.	Registration for NEFT/RTGS payments	
	Name of the Insured (Account Holder)	
	Category	Personal Accident Insurance Death / PTD / PPD claim / Accident Insurance claim UBI SB Account Holders
	Policy Number	
	Policy Period	
	Claim number, if any, provided (policyholders only)	
	Permanent Address	Address for Communication
2.	Bank Account Details for NEFT/RTGS	
	Name of account Holder/Claimant	
	Bank Name	
	Bank Branch Name	
	Bank Branch Address	
	MICR Code	
	Full Bank Account No. (for NEFT)	
	IFSC Code	

Please attach a copy of a cancelled cheque leaf or Photocopy of the first page of the Bank Pass Book containing the name of account holder, Bank account number, and IFSC code. Please verify the details with your bank before submitting.

I/We hereby declare that the given above are correct and express my/our willingness to receive credit of claim proceeds through the mode indicated above. Notwithstanding my/our choice of mode, United India Insurance Co. Ltd. reserves the right to issue a cheque/credit the account in the mode that may seem fit. I/We would not hold United Insurance Co. Ltd. responsible if the transaction is delayed or not effected at all or credited to an incorrect account for the reasons of incomplete/incorrect information.

Signature of the Applicant (Claimant)

Place:

Date:



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Annexure VI

Overdraft application form for Union Super Salary Account

To:

The Branch Manager,
Union Bank of India

_____ Branch

Dear Sir/Madam.

Union Super Salary Account (for South Central Railways) REQUEST FOR OVERDRAFT FACILITY

I am maintaining a Saving Bank account No _____ with your branch and my employee Number is _____. At my request, you have agreed to grant me an overdraft limit (facility) of Rs. _____ (Rupees _____ only) which is approximately as per the features of Union Super Salary Account. I am enclosing photocopies of my salary slips for your ready reference. I have represented to you that the said loan is required to meet my urgent personal/domestic expenses and not _____ for _____ speculative/real _____ estate _____ purposes.

In consideration of your granting me the above facility, I undertake to liquidate the outstanding in the facility with interest from my next salary (ies) within a period of six months from the date of sanction of the facility. I also undertake and agree to pay interest for the above facility, at the rate applicable to Clean Overdraft i.e. _____ % per annum above EBLR floating, currently _____ % p.a. with monthly rests. I also agree that the said rate of interest shall undergo change from time to time as applicable to on overdraft account.

I undertake to repay the facility with interest in such instalments as mentioned above and to facilitate such repayment, I hereby authorize you to deduct such amount as may be required from my above account. In case, my salary is not credited to the above account for any reason whatsoever, I undertake to pay the monthly instalment with interest on or before the due date.

Yours faithfully,

Name:

Mobile Number:

E-mail id:

Office Address:



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Annexure VII

Term Policy



Pension & Group Scheme Dept., Mumbai DO I
5th Floor, LIC Digital Building,
Bandra Kurla Complex, Mumbai - 400 051
Email Id- bo_g706@licindia.com

DEATH CLAIM INTIMATION – GROUP INSURANCE SCHEME / S

1. Full Name & Address of Master Policy Holder : Union Bank of India, Mumbai -400 021
2. Name of the scheme: Group Insurance Scheme for Union Bank of India Salary Account Holders
3. Master Policy No. GI: 706005709
4. Deceased Employee/Member Account Code No. _____
5. LIC ID _____
5. Name of the deceased Employee _____
6. Was the deceased member Account holder at the time of death : _____
7. Whether the deceased member under the scheme?: _____
If so, from since when?: _____
8. The Name of the nominee: _____
Nominee's address: _____
9. Cause of death (Please enclose original// Certified copy of death certificate): _____
10. Date of Death & Age: _____
11. Date of Birth : _____
12. Date of joining scheme: _____
13. Outstanding amount of loan (in case of lender borrower Scheme): _____
14. If the claim is being intimated after 6 months from the date of death, Please give reason for delay: _____

We hereby declare and confirm that the above information's are correct as per our records.

(Authorized Signature for & on behalf of Master Policy Holder)

Date: _____

Place: _____



[Signature]
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Dispur, Guwahati-781 006

Annexure VIII

Term Policy



Pension & Group Scheme Dept., Mumbai DO I
5th Floor, LIC Digital Building,
Bandra Kurla Complex, Mumbai - 400 051

Annexure -II

CLAIM FORM FOR GROUP INSURANCE SCHEME FOR UNION BANK OF INDIA SALARY ACCOUNT HOLDERS

M P H Policy No. : 706005709

PART A - To be Completed by the Nominee / Beneficiary

- 1) Name and Address of the Deceased Member _____
- 2) Name and Address of M P H : Union Bank of India, Mumbai -400 021
- 3) Date of Entry into the Scheme _____
- 4) Name of Nominee _____
- 5) Full Address of Nominee _____
- 6) Relationship with the Member _____
- 7) Date of Death of Member _____
- 8) Cause of Death of Member _____
- 9) Name and Address of the Bank _____
- 10) NEFT Mandate Attached:- Yes / No

I hereby declare that the answers to all the above questions are true and correct in every aspect.

Place : _____


Date: _____

Signature of Nominee / Beneficiary

Signature and seal of MPH

Please attach Identity proof and Cancelled Cheque




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Annexure IX

THE NATIONAL INSURANCE COMPANY LIMITED (Debit Card linked Accident insurance claim form)



Trusted Since 1906

Registered and Head Office: 3, Middleton Street, Kolkata – 700 071 Phone No – 033-22831705, Fax – 033-22831712
Email – website.administrator@nic.co.in


GROUPEPERSONALACCIDENTCLAIMINTIMATION/CLAIMFORMFORDEBIT/CREDITCARDHOLDER

Issuance of this format for intimation of a claim is not to be taken as an admission of liability.

Policy No. (A/c Union Bank of India)		Policy Period:
Insured	Union Bank of India	
Mailing address and email ids for communication.	The National Insurance Company Limited MCRO, 2nd floor, National Insurance Building, 14, Jamshedji Tata Road, Church Gate, Mumbai-400020 Email ids for correspondence :vishwaskhot@rathi.com dipakm.acherakar@nic.co.in pooja.tripathi@nic.co.in	

1	Type of Card	Debit/Credit	
2	Name of Debit/Credit Card holder		
3	Debit/Credit Card Number		
4	Sum Insured (Mentioned Amount)		
5	Category of Debit Card	Category of Debit Card RuPay Select / Visa Signature	Please Tick mark (wherever applicable)




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		Category of Debit Card <u>for Checked In Baggage</u> <u>Loss</u> (Rs. 15,000/- or actual whichever is lower) <u>OR</u> <u>Girl Child Cover</u> <u>(20% of PAI Sum Insured subject to</u> <u>maximum of</u> <u>5,00,000/-)</u> RuPay Select/Visa Signature	
		Category of Debit Card <u>For Air Accident Cover</u> RuPay Select / Visa Signature (Rs. 100 Lakhs)	
6	Account Number of Union Bank of India		
7	Account Type		
8	Address in full with Pin code number		
9	a) Date & Time of Accident		
	b) Date & Time of Death		
	c) Place of Accident		
	d) Brief description of Accident		
	e) FIR No. & Date		
10	Details of last transaction & date		



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11	Branch Details (where account is maintained)	Name:
		Branch Code:
		Branch Name:
		Address:
12	Details of Legal Heir/Nominee/Legal Representatives Details	
(A)	Name of Legal Heir/Nominee / Legal Representatives of Debit/Credit Card Holder	
(B)	Relationship of Legal Heir /Nominee / Legal Representatives with Debit/Credit Card Holder [If Available]	
(C)	Address of the Legal Heir/Nominee / Legal Representatives (if available)	
(F)	Email ID of Legal Heir/Nominee / Legal Representatives	
(G)	Contact Number of Legal Heir/Nominee / Legal Representatives	

I hereby confirm and declare that the information furnished above is true to the best of my knowledge and if at any stage it is found that any of the information furnished by me above is incorrect, the claim preferred above may be forfeited by the Insurance Company.

Above Information is verified by Union Bank of India Branch Head.

Signature of Legal Heir / Nominee / Legal Representatives

Name of Legal Heir / Nominee / Legal Representatives

Branch Head Seal

Union Bank of India

Date:

Place:

Branch:

Intimation may be advised through Email, Post, Telephone/Fax)



[Handwritten signature]

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List of Documents:

Claim Intimation to the Bank (By legal heir/nominees/Legal representative of the diseased – The same is mentioned in policy schedule)

- a. Claim form duly filled in and signed by Nominee/Legal Heir/Legal Representative and attested by bank official.
- b. Death certificate in original or copy of death certificate duly attested by bank officials or gazetted officer.
- c. Copy of First Information Report (FIR) / Police intimation/General Diary (Attested by bank officials) along with translated copy of FIR copy if it is in local language.
- d. Copy of post-mortem report and viscera report if it is conducted (Attested by bank officials). In case post-mortem not conducted, other supporting documents which confirms cause of death may be required.
- e. Statement of account duly attested by Bank officials. (i.e. Updated statement account / passbook copy for financial or non-financial transaction before 90 days from the date of accident / death of the card holder /supporting document for non-financial transaction for Debit Card Holders.) (Statement of Account only for Credit Card Holders)
- f. Discharge/death summary (in case insured was admitted to hospital for treatment).
- g. If the death occurs in the hospital a medical certificate will be submitted.
- h. Proof of payment for ambulance charges incurred if any for transportation of the insured to hospital following an accident.
- i. Proof of payment for transportation charges incurred if any to move insured's dead body to the place of residence (applicable for Debit Card Holders).
- j. Money receipt for payment of school/college fees of dependent child along with the birth certificate of the child (applicable for Debit Card Holders).
- k. In the event of missing person declared dead by the governing authority then in such a situation the claim should be settled by the insurance company on the basis of FIR, claim form and claim intimation.
- l. With regards to air accident, any documents substantiating the claim.
- m. KYC document of deceased person & Nominee/Legal heir/Legal Representative



Union Bank of India



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