## IN THE NATIONAL CONSUMER DISPUTES REDRESSAL COMMISSION NEW DELHI

RESERVED ON: 11.07.2025 PRONOUNCED ON: 11.08.2025

## FIRST APPEAL NO. 722 OF 2021

(From the order dated 26.03.2021 in CC No. 63/2018 of the State Consumer Disputes Redressal Commission, Rajasthan)

Chhoti Devi (Deceased)

Through LRs

- a) Santosh D/o Late Chhoti Devi
- b) Pushpa Devi D/o Late Chhoti Devi
- c) Sunil Soni Grand son of Late Chhoti Devi
- d) Monika Grand daughter of Late Chhoti Devi

Add: Chhoti Devi W/o Late Sh. Kikhmi Chand R/o Prithvi Raj Thada
Merta City, District Nagaur

(Amended Memo of Parties not filed)

.... Appellants

### **Versus**

- 1. Bharti AXA Life Insurance Co. Ltd. Through Managing Director and CEO Having its registered office at Unit No. 601 & 602, 6<sup>th</sup> Floor, Raheja Titanium, Off Western Express Highway, Goregaon (East) Mumbai-400063
- 2. In-charge, Customer Care
  Bharti AXA Life Insurance Co. Ltd.,
  Office at:
  Unit No. 601 & 602, 6<sup>th</sup> Floor,
  Raheja Titanium,
  Off Western Express
  Highway, Goregaon (East)
  Mumbai-400063
- 3. Branch Manager,
  Bharti AXA Life Insurance Co. Ltd.,
  Having office at:
  1st Floor, Yadav Complex
  Mkarwadi Road,
  Behind Bikaner Misthan Bhandar,
  Vaishali Nagar, Ajmer (Raj.)

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4. Smt. Kiran, Advisor Code 165045
Bharti AXA Life Insurance Co. Ltd.

1<sup>st</sup> Floor, Yadav Complex,
Mkarwadi Road,
Behind Bikaner Misthan Bhandar,
Vaishali Nagar, Ajmer (Raj.)

(R-4 deleted vide order dated 11.07.2025)

..... Respondents

#### **BEFORE:**

# HON'BLE DR. INDER JIT SINGH, PRESIDING MEMBER HON'BLE JUSTICE DR. SUDHIR KUMAR JAIN, MEMBER

For the Appellant

: Mr. Ankit Acharya, Advocate

Ms. Ritu Chaudhary, Advocate

For the Respondents

: Mr. Aakash Vashishta, Advocate for R-1 to 3 (VC)

None- R-4

#### **ORDER**

### DR. INDER JIT SINGH, PRESIDING MEMBER

- 1. The present First Appeal (FA) has been filed by the Appellants against Respondents as detailed above, under section 19 of Consumer Protection Act 1986, against the order dated 26.03.2021 of the State Consumer Disputes Redressal Commission, Rajasthan (hereinafter referred to as the 'State Commission'), in Consumer Complaint (CC) No. 63/2018 inter alia praying for setting aside the order dated 26.03.2021 passed by the State Commission and allowing the Consumer Complaint No. 63/2018.
- 2. While the Appellant Chhoti Devi was Complainant before the State Commission, the Respondents herein were Opposite Parties in the said CC/63/2018 before the State Commission. Notice was issued to the Respondents on 19.07.2022. Since Smt. Chhoti Devi has expired, she has been represented through her LRs as detailed above. Counsel for the Appellants has not filed the amended memo of parties despite directions, hence, the address against the LRs is taken from the Memo of Parties filed

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along with the Appeal before this Commission. However, the names of LRs have been taken from the application of the Appellant filed for bringing on record the LRs of Late Smt. Chhoti Devi.

3. Brief facts of the case, as emerged from the First Appeal, Order of the State Commission and other case records are that: -

Mr. Padam Soni (deceased)/son of Smt. Chhoti Devi, during his life time, took insurance policy through advisor/Respondent-4 of the OP/Insurance Company for sum insured of Rs.25,00,000/- for the period from 28.12.2015 to 28.12.2035 for a term of 20 years by paying premium of Rs.10,900/-. Mr Padam Soni/insured died on 17.01.2017 by heart attack. Smt. Chhoti Devi mother of deceased Padam Soni filed claim before the Insurance Company. Vide letter dated 08.06.2017, the insurance company repudiated the claim. Hence, Smt. Chhoti Devi mother of the insured Padam Soni filed complaint before the State Commission.

- 4. Vide Order dated 26.03.2021, the State Commission has dismissed the Complaint filed by the Appellant herein.
- 5. Appellant(s) have challenged the Order dated 26.03.2021 of the State Commission mainly on following grounds:
  - (i) The State Commission passed the order without considering the facts in totality and in ignorance of the law laid down by the Hon'ble Supreme Court and this Commission.
  - (ii) The State Commission failed to appreciate that it is the case of the Appellant(s) that the insured answered all the questions as were asked by the Agent/Respondent-4 while filling the proposal form. The insured did not conceal any material fact. The State Commission erred by

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ignoring this fact while passing the impugned order, rather took a lopsided view and held that there was a concealment of material fact.

- (iii) The State Commission failed to appreciate that the proposal form was filled in by the Agent because it was in English and was filled digitally. Since the insured did not have the knowledge of English, he answered all the questions which were asked to him by the Agent in vernaculars. The Agent did not file any reply to these facts as raised in the Complaint by the Complainant. The said fact remains uncontroverted and as per the settled law, the same shall be presumed to be admitted.
- (iv) The state Commission committed error by ignoring the fact that the death claim was repudiated on a faulty premise. The Insurance Company, in its repudiation letter dated 08.06.2017 has stated that the insured answered "No" to the question about existing policy/previous policy. But perusal of the proposal form shall make it clear that the insured answered 'No' to the question at 4(ii) **Details of declined/postponed proposals**—Has any insurance company declined or postponed your proposal or given you're a substandard rating? The insured answered 'No' to this particular question but Insurance Company has wrongly stated in its repudiation letter that the insured answered 'No' for the question about existence of any previous or existing policy. The State Commission ignored this relevant fact while passing the impugned order.
- (v) The State Commission committed error of law while passing the impugned order. It is a trite position of law that a fact is believed to be concealed fact, if it is in the exclusive knowledge of the insured. In the instance case, the Insurance Company itself issued three Insurance Policies to the insured, out of which two were proposed on the same day, i.e. on 08.12.2015. The fact of existing policies was very much

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known to the Insurance Company and it had issued three policies to the deceased insured. The insurance company repudiated the death claim on the ground of concealment of fact. The insurance company was aware of this material fact. It is a settled proposition of law that the concealment, if any made, must be with a fraudulent intent. Moreover, the burden of proving lies on the Insurance Company to show that there lies a fraudulent intent on the part of a person making disclosures. The Insurance Company failed to discharge its burden of proving to show that the insured fraudulently concealed fact of existing policies.

- (vi)The State Commission committed error by taking contradicting views in different cases with similar question of law and fact. The State Commission allowed the claim of the claimant vide its order dated 31.10.2018 in Smt. Rangu Devi vs PNB Metlife India Insurance Co. Ltd. Consumer Complaint No. 131/2017, but dismissed the complaint on the similar question of the present Complainant.
- 6. Heard counsels of both sides. Contentions/pleas of the parties, on various issues raised in the FA, based on their FA/Reply and Oral Arguments advanced during the hearing, are summed up below.
- 6.1. Learned Counsel for Appellant contended that they have not given any false answer "No" to the question "details of existing/ proposed insurance" as stated in the repudiation letter. The relevant paragraph seeking details of existing/ proposed insurance has been left blank in the proposal form. Counsel for the Appellant (s) further contended that leaving the columns blank is not the same thing as giving a false reply. Counsel for the Appellant(s) further contended that had this information been material, the Insurance Company, before issuing the policy, ought to have insisted on getting such information filed in the proposal form.

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- 6.2. On the other hand counsel for the Respondents/Insurance Company contended that no cause of action arises to the complainant to sue the OP for deficiency of service. The complainant did not declare the facts correctly and truthfully. The claim has rightly been repudiated since the policy in question was obtained on the basis of mis-statement. The insured intentionally had mis-stated about previous policies obtained from other insurance companies. The policy in question was outcome of fraud. The complainant is guilty of suppression vari and suggestion false. The Complainant was having the knowledge ab-initio that the life assured had various insurance policies from various insurance companies. The complainant has not only concealed the material facts but also twisted and distorted the same to suit his convenience and to mislead the Court. In support of their contentions, the Respondents have relied upon the following judgments:
- a) Grasim Industries Ltd. Vs. Agarwal Steel [2009] SC 1656.
- b) Suraj Mal Ram Niwas Oil Mills (P) Ltd. Vs. United India Insurance Co. Ltd. (2010) 10 SCC 567.
- c) Reliance Life Insurance Co. Ltd. Vs. Madhavacharya (RP No. 211 of 2009)
- d) PC Chacko and Anr. Vs. Chairman Life Insurance Corporation of India and Others (2008) 1 SCC 321.
- e) Ravneet Singh Bagga v. KLM Royal Dutch Airlines (2000) 1 SCC 66.
- 7. We have carefully gone through the orders of the State Commission, other relevant records and rival contentions of the parties. The claim has been repudiated by the Respondent/Insurance Company vide letter dated 08.06.2017, primarily on account of wrong declaration with respect to details of existing/proposed insurance. It is the case of the Respondent/Insurance Company that the life insured had applied for Life Insurance Policies from other Insurance Companies but in the proposal form against the question details of existing/proposed insurance 'No' reply was given. Extract of the said repudiation letter is reproduced below:

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- SMIS SERVICE to 66677
  We will be in social within 24
  hours to address your query
- service@bhartleacalite.com

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ANNEX-A-7

Claim Repudiation Letter

08/06/2017

Mrs. Choti Devi Prathiv Rej Ke Thada, Merte, Negeur, Rajasthan – 341510 Contact Number - 8104427974

Subject

Life Insured: Late Mr. Padam Soni

Policy Nos: 501-3795728, 501-3797559, 501-42124213

Dear Mrs. Choti Dovi,

This is with reference to the death claim intimation received under policy nos. 901-3795723, 561-3797559, 501-4212426 ("Policies") on the life of 6.c. Pedam Suni ("Life Insurance") forwarded by you to Sharil AXA Life Insurance Company Limited ("the Company") on 18/04/2017.

The above mentioned Policy was tissued to the Life Insured on the basis of the proposals for insurance dated 08/12/2015.108/12/2015 6. 21/03/2016 respectively. In the sald proposal, the Life Insured had rapided in negative to question numbered 4 (8). For your reference we are reproducing below the aforesald question and the reply thereto given the proposal for insurance:

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(ii) Details of existing/proposed insurance......No

We wish to inform you that as per information procured by us at daims stage, the Life insured had applied for life insurance policies from other insurance companies and was already insured for a huge sum option to applying with Bharil AA Life insurance. We therefore state that the aforesald reply to the question in the proposal for insurance has been found to be false.

We are therefore, satisfied that the company has been misted into issuing the policy by non disclosure of material facts the proposal for Insurance. In view of the above, it is non disclosure of material facts the proposal for Insurance. In view of the above, it is non-disclosure of material facts the proposal for Insurance in the Company obvious that the Life Insurance disclosured information and the Life which was very essential during the underwriting stage of the Policy. Also had the Life which was very essential during the underwriting stage of the Policy. Also had the Life which was very essential during the underwriting stage of the Policy. Also had the Life which was very essential during the underwriting stage of the Policy. Also had the Life which was very essential during the underwriting stage of the Policy. Also had the Life which was very essential during the underwriting stage of the Policy. Also had the Life which was very essential during the underwriting stage of the Policy. Also had the Life which was very essential during the underwriting stage of the Policy. Also had the Life which was very essential during the underwriting stage of the Policy. Also had the Life which was very essential during the underwriting stage of the Policy. Also had the Life which was very essential during the underwriting stage of the Policy. Also had the Life which was very essential during the underwriting stage of the Policy. Also had the Life which was very essential during the underwriting stage of the Policy.

The Company is therefore repudiating the claim for nondisclosure of material information at the time of proposal for insurance.

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- SMS SERVICE to 56677
  Whit will be in touch viction 74
  hours to address your query
- @ service@bharti-axaille.com

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www.bhartbasalife.com

if you are aggrieved by the decision of repudiation of the claim, you may send a written representation to the Company I for reconsideration, setting out the grounds for reconsideration of the decision at the following address:

Grievance Redressal Cell-Bharti AXA Life Insurance Co. Ltd 8th Floor, Times Square Building Near Sal Service, Western Express Highway Andheri (East) Mumbal 400069

In case you are diseatisfied with the resolution of your grievance, you may approach the insurance Ombudeman Office located nearest to you. The details of the Insurance Ombudeman Offices can be obtained from any nearby branch office of the Company or you can visit <a href="https://www.bhartl-axaiife.com">www.bhartl-axaiife.com</a>. For your ready reference please find the detail of the Insurance Ombudeman office located nearest to you.

Office of the Insurance Ombudsman, Jeevan Nidhi – II Eldg., Gr. Floor, Bhawani Singh Marg, Jalpur - 302 005.

For Clarifications, please feel free to contact our EASY ACCES.; helplines mentioned above. Alternatively, you may e-mail us at service@bharti-axalife com.

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Encl: Copy of proposal forms

(Document No. FACUOTAZAN)

The Copy.

8. During the hearing, the complainant contended that they have not given any false answer in the proposal form as claimed by the Insurance Company. The said column in the proposal form is seen left blank. Leaving of blank column does not amount to giving false answer. If it was such a

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material information, the Insurance Company ought to have insisted on filling of this information before issuing the Insurance Policy. The extract of relevant portion of proposal form containing the said question is reproduced below:

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- 9. On perusal of the relevant portion of the proposal form, reproduced above, we see merit in the contentions of the Appellant(s) herein and agree with their reasoning that leaving a column blank in the proposal form does not amount to giving the false answer and had this information being material, the Insurance Company ought to have insisted on getting these columns filled before issuing the policy. There appears to be no willful intention on the part of the deceased insured to conceal or suppress any material information by leaving this column blank. Moreover, it is seen that entire form is type filled, and in all probability, has been filled either by an official or agent of the Insurance Company, and not by the deceased insured himself. Hence, they ought to have filled all columns, including the questions on existing/proposed insurance rather than leaving these blank.
- 10. In Lakhmi Chand Vs. Reliance General Insurance (2016) 3 SCC 100, Hon'ble Supreme Court held that to avoid its liability, the Insurance Company must not only establish the defense that the policy has been breached, but must also show that the breach of the policy is so fundamental in nature that it brings the contract to an end. In Canara Bank Vs. United India Insurance Co. Ltd. & Ors. (2020) 3 SCC 455, Hon'ble Supreme Court held that "Insurance Policy must be read holistically so as to give effect to reasonable expectations of all the parties including the insured and the beneficiaries- it must be interpreted in a commercially sensible manner-coverage clauses to be read broadly, and ambiguity, if any, to be resolved in favour of insured-exclusions to be read narrowly".
- 11. In view of this, we are of the considered view that action of the insurance company in repudiating the claim is not justified. The State Commission committed an error in dismissing the complaint. Hence, the order of the State Commission cannot be sustained, and is hereby set aside. Complaint is allowed. The Respondent/Insurance Company is directed to pay the eligible amount/sum assured as per Policy within a maximum of 45 days

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from the date of this order along with interest @9% p.a. from the date of filing the complaint till the date of actual payment.

- 12. First Appeal No. 722 of 2021 stands disposed of accordingly.
- 13. The pending IAs in the case, if any, also stand disposed off.

	5u/-
	( DR. INDER JIT SINGH ) PRESIDING MEMBER
	Sd/-
( DR.	SUDHIR KUMAR JAIN, J. ) MEMBER

Jr/Court-3/AB