

## Annexure – A

### CUSTOMER INFORMATION SHEET/KNOW YOUR POLICY

This document provides key information about your policy. You are also advised to go through your policy document.

SI No.	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy Clause Number
1	Name of Insurance Product/Policy	<b>CSC DOMESTIC TRAVEL INSURANCE POLICY</b>	--
2	Policy Number	<< >>	--
3	Type of Insurance Product/Policy	<ul style="list-style-type: none"> <li>• Indemnity: Where insured losses are covered up to the Sum Insured under the policy</li> <li>• Benefit: Where an Insurance Policy pays a fixed amount under the policy on the occurrence of a covered event.</li> <li>• Both Indemnity and Benefit: (where policy has elements of both the above)</li> </ul> This policy is available on individual basis.	--
4	Sum Insured (Basis) (Along with amount)	<ul style="list-style-type: none"> <li>• Floater Sum Insured-Where all members under the policy have a single sum insured limit which may be utilized by any or all members.</li> <li>• Individual Sum Insured -Where each member has a separate sum insured under the policy.</li> </ul> Sum Insured: Individual/ Family Floater  Platinum: 1L, 2L,3L, 4L, 5L (Trip duration- 1 to 91 days) Gold: 1L, 2L,3L, 4L, 5L (Trip duration- 1 to 91 days) Silver: 1L, 2L,3L, 4L, 5L (Trip duration- 1 to 91 days) Corporate: 1L, 2L,3L, 4L, 5L (Trip duration- 1 to 91 days)	--
5	Policy Coverage (What the policy covers?) (Policy Clause Number/s)	<b>Coverage's</b>	<b>D 1-15</b>
		<b>Medical Expenses</b> Costs incurred for medically necessary treatment on trip on during the period of insurance within defined territory and not exceeding covered SI, as per stated in the Schedule.	

DOMESTIC TRAVEL INSURANCE POLICY  
 UIN: UNITIDP18002V011718

**Medical Evacuation**

In the event of transfer of insured from hospital to nearest facility for medical services due to medical necessity/ advisable by treating medical professional.

**Dental Treatment**

In principle for only acute anesthetic or accidental treatment of a natural tooth or teeth up to the maximum limit shown in the Schedule.

**Repatriation of Mortal Remains**

In the event of death of the Insured Person due to illness/ injuries covered on the trip during the period of insurance, costs of transporting the mortal remains of the deceased back home or up to an equivalent amount for a local burial or cremation in the city or place where the death occurred up to the limit stipulated in the Schedule.

**Personal Accident**

If You meet with an Injury on a trip which leads to Your death or subsequent disablement, we will compensate You in the following way:

1. **Your Death:** If following an Injury that directly causes Your death within one year directly because of an accident, we will pay to Your legal heirs the Sum Insured mentioned in the Schedule.
2. **Your Permanent total / partial disablement:** If following an injury within a year of occurrence causes permanent impairment of your mental or physical capabilities, compensation will be done according to degree of disablement (mentioned in the schedule). It will be subjected to disablement must be confirmed and claimed for prior to the expiry of a further period of 3 months.

**Personal Liability**

Property Damage  
Medical Payments to Others

**Emergency Hotel Extension**

Compensation of cost for stay because of delay at any intermediate place during the trip (because of earthquake, medical emergency, cancellation or rescheduling of common carrier), other than origin or residing city.

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**Delay of checked – In baggage**

The insured person is liable to get the fixed allowance, mentioned in the policy in case of delay of checked in baggage beyond specific time duration.

**Burglary (Home Contents)**

We will pay You for any claim in respect of loss of or damage to contents of Your home in India (Located at the address mentioned in the Policy Schedule) caused by actual or attempted Burglary and/or Robbery during the Policy period. Our liability will be limited to the Sum Insured specified in the Schedule.

**Hospital Daily Cash Benefit**

In the event of You being hospitalized for a period of more than 48 hours and if We have accepted liability under the Medical Expenses cover, then We will pay You up to the maximum limit mentioned in the Schedule.

**Trip Delay**

We will reimburse Reasonable additional expenses for Trip Delay, subject to all other terms and conditions, if the aircraft in which You are booked to travel from India is delayed beyond 12 hours from the original scheduled departure time, up to the maximum limit shown in the Policy Schedule or the Schedule of Benefits.

**Missed Connection**

We will pay a fixed amount as mentioned in the Schedule to this Policy, in the event of missing a connecting flight or delay in the arrival of the aircraft on which the Insured is or would be travelling.

**Trip Cancellation & interruption**

We will indemnify You subject to the limits shown in the Schedule, for loss of personal accommodation or travel charges paid or contracted to be paid by You which are not recoverable from any other source, following the necessary & unavoidable cancellation of the trip prior to its commencement because of

1. Your death or sudden sickness requiring minimum two days hospitalisation.
2. Death of Your spouse or parent or child.
3. Serious injury or sudden sickness requiring minimum two days hospitalisation of Your wife or child who were booked to travel with You and who are also insured with Us.
4. In case of Insured Person being abducted

- We will pay this benefit up to Sum Insured as specified in the Schedule to this Policy for trips that have been interrupted due to reasons mentioned above.

**Financial emergency assistance**

We shall pay the Insured/Insured Person in the event of financial emergency arising due to theft, mugging, robbery, dacoity of the funds of the Insured, during the trip an amount specified in the Schedule to this Policy.

**Liability arising from loss of debit/ credit card**

We will indemnify the Insured against loss incurred due to any misuse or unauthorized transaction effected by reason of loss/theft of a Debit/Credit Card of the Insured during the trip.

**Missed Departure**

We will compensate the amount mentioned in the policy, in case of insured not able to reach the departure point of booked journey because of service failure of public transport, vehicle accident (in which you are travelling to reach destined point.)

**Hijack Distress Allowance**

In the event of air or sea common carrier in which You are travelling, being hijacked on the trip during the Period of Insurance for more than 12 hours. Payable is as specified in the schedule.

**Pre-Existing illness**

Payable as specified in the schedule in the emergency event of life saving immediate measure due to preexisting illness, on the prior approval of the TPA. We will be liable to pay for limited illness of preexisting illness mentioned in the policy.

**Compassionate visit**

We will pay as per specified in the policy, if the insured is hospitalized without adult member of the family for period exceeding the number of days (specified in the policy) and required assistance to bring back to original place.

**Family Assistance**

We will pay as compensation to a maximum of two dependent children of the Insured, not exceeding years of age, a sum specified in the Schedule to his Policy in case of death due to accidental injury of the spouse of the Insured whilst person is on a trip.

**Total Loss of Baggage Including Delay of Baggage**

We will compensate for the total loss of checked in baggage on a trip, as specified in the Schedule to this Policy.

**Pet Care**

Policy is payable as specified in the schedule towards the expenses for the fees of the Veterinary doctor in the event of the Insured's pet, (limited to Cat and Dog) needing veterinary treatment because of an injury which occurred whilst the Insured was on a trip.

**Bounced Booking of Airline & Hotel**

We shall reimburse the actual additional expenses by the Insured up to sum insured specified in the schedule for alternative travel arrangement (hotel, airline) in the event of the confirmed flight reservation for any part of the Trip bouncing at the sole instance of the airline or bouncing of the confirmed accommodation booking at place of stay being part of the Trip solely at the instance of the accommodation provider.

**Legal Expenses**

We will pay to Insured the sum as specified in the schedule to this policy for legal costs and expenses incurred towards claims for compensation arising on the death of the Insured or on the Insured contracting illness or injury during the trip.

**Catastrophe Expenses**

We will pay as compensation to Insured the sum as specified in the Schedule to this Policy towards the cost of travel expenses and providing other similar accommodation in the event of the accommodation booked for the Insured not being in living condition because of a fire, flood,

		<p>earthquake, storm, lighting, explosion, hurricane, or major outbreak of infectious disease.</p> <p><b>Fire Insurance for building &amp; contents</b> In the event of Property be destroyed or damaged by any of the perils specified in the policy, compensation will be given as specified sum insured given in the policy.</p> <p><b>Business Equipment Cover</b> We will pay up to the amount specified in the Schedule of the Policy for loss, theft or damage of an insured's computer equipment communication or other business equipment mentioned in the policy, payable for buying essential business equipment, emergency courier expense.</p> <p><b>Alternative Employee</b> We will be reimbursed to the Insured a sum as specified in the Schedule to this policy for the expenses towards arranging the transportation of an alternative travel arrangement in the event of the unexpected death or illness/disease of Insured or family member during the trip.</p>	
7	Exclusions (What the policy does not cover)	<p>1. For any claim relating to events occurring before the commencement of the cover.</p> <p>2) For any claim if You:</p> <p>a) Are travelling against the advice of a physician.</p> <p>b)</p> <p>c) Are receiving or on a waiting list for specified medical treatment declared in a physician's report or certificate or</p> <p>d) Have received terminal prognosis for a medical condition.</p> <p>e) Are taking part in a naval, military or air force operation.</p> <p>3) For any claim arising out of illnesses or accidents that the insured person has caused intentionally or by committing a crime or because of drunkenness or addiction (drugs, alcohol).</p> <p>4) For any claim arising out of any mutant derivative or variations thereof howsoever caused.</p> <p>5) For illness and accidents that are results of war and warlike occurrence or invasion, acts of foreign enemies, hostilities, civil war, rebellion, insurrection, military or usurped power, active participation in riots, confiscation or nationalization or requisition of or destruction of or damage to property by or under the order of any government or local authority.</p> <p>6) Beauty and/or cosmetic treatment and/or reconstructive plastic surgery in any form or manner.</p>	

		<p>7) For any claim arising from damage to any property or any loss or expense whatsoever resulting or arising from or any consequential loss directly or indirectly caused by or contributed to or arising from:</p> <p>a) Ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel or</p> <p>b) The radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.</p> <p>8) For any claim arising out of sporting risk in so far as they involve the training or participation in competitions of professional or semi-professional sportsmen or women (unless declared beforehand).</p>	
8	<p>Financial limits of coverage</p> <p>i. Sub-limit (It is a pre-defined limit, and the insurance company will not pay any amount in excess of this limit)</p> <p>ii. Co-payments (It is a specified amount/percentage of the admissible claim amount to be paid by policyholder/insured).</p> <p>iii. Deductible (It is a specified amount: - up to which an insurance company will not pay any claim, and - which will be deducted from total claim amount (if claim amount is more than the specified amount)</p> <p>iv. Any other limit (as applicable)</p>	<ol style="list-style-type: none"> <li>1. Sub – limit applicable for Permanent Partial disablement cover up to the percentage of the Sum Insured as specified in the policy schedule.</li> <li>2. Co – Payments – Nil</li> <li>3. Deductible - Various deductible as per plan are applicable.            Medical Expenses: Up to INR 5,000            Dental Treatment: Up to INR 5,000            Personal Liability: 5% of Actuals            Emergency hotel accommodation: Up to INR 4,000            Home Burglary insurance: Up to INR 25,000            Missed flight connection: Up to INR 2,000            Missed Departure: Up to INR 2,000 or 10% of actuals.            Preexisting illness: Up to INR 6,000            Total Loss of checked- In baggage- Up to INR 1,000            Pet Care- Up to INR 300            Bounce Booking of airline &amp; hotel: Up to INR 5,000            Legal expense: Up to INR 5,000            Catastrophe Expense: Up to INR 5,000            Business Equipment: Up to INR 5,000</li> </ol>	



9	Claims/Claims Procedures	<p>Provide the details/web link for following:</p> <p>i. Network Hospital details: Available on website: <a href="http://www.universalsompo.com">www.universalsompo.com</a>.</p> <p>ii. Helpline Number:</p> <p><b>Toll Free Numbers:</b> 1-800-224030 (For MTNL/BSNL Users) or 1-800-2004030, Senior Citizen: 1800-267-4030</p> <p>iii. Hospitals which are blacklisted or from where no claims will be accepted by insurer: Available on website: <a href="http://www.universalsompo.com">www.universalsompo.com</a>.</p> <p>iv. Downloading/getting claim form: Available on website: <a href="http://www.universalsompo.com">www.universalsompo.com</a>.</p>	--
10	Policy Servicing	<p><b>Universal Sompo General Insurance Co. Ltd.</b>  Unit No. 601 &amp; 602, 6th Floor, Reliable Tech Park, Cloud City Campus; Gut No-31, Mouje Elthan, Thane- Belapur Road, Airoli, Navi Mumbai- 400708.  <b>Toll Free Numbers:</b> 1-800-224030 (For MTNL/BSNL Users) or 1-800-2004030.  <b>E-mail Address:</b> <a href="mailto:contactus@universalsompo.com">contactus@universalsompo.com</a>.  <b>Note:</b> Please include Your Policy number for any communication with us.</p>	
11	Grievances/ Complaints	<p><b>Grievances:</b></p> <p>If You have a grievance about any matter relating to the Policy, or Our decision on any matter, or the claim, you can address Your grievance as follows:</p> <p><b><u>Step 1: Contact Us</u></b></p> <p><b>Write us at:</b>  <b>Customer Service Universal Sompo Insurance Co. Ltd Unit No. 601 &amp; 602, 6<sup>th</sup> Floor, Reliable Tech Park, Thane- Belapur Road, Airoli, Navi Mumbai, Maharashtra – 400708.</b></p> <p><b><u>E- mail Address-</u></b> <a href="mailto:contactus@universalsompo.com">contactus@universalsompo.com</a></p> <p><b>For more details:</b>  <b>Toll Free Numbers: 1800-22-4030 or 1800-200-4030</b>  <b>Senior Citizen toll free number: 1800-267- 4030</b></p>	Section F – 6



**Step 2: Grievance Cell**

If the resolution you received does not meet your expectations, you can directly write to our Grievance Id. After examining the matter, the final response would be conveyed within two weeks from the date of receipt of your complaint on this email id.

**Customer Service Universal Sampo General Insurance Co. Ltd.**

**Unit No. 601 & 602, 6<sup>th</sup> Floor, Reliable Tech Park, Thane- Belapur Road, Airoli, Navi Mumbai, Maharashtra – 400708**

**E- mail Address:** [grievance@universalsompo.com](mailto:grievance@universalsompo.com)

**For more details:** [www.universalsompo.com](http://www.universalsompo.com)

**Visit Branch Grievance Redressal Officer (GRO) -** Walk into any of our nearest branches and request to meet the GRO.

- We will acknowledge receipt of your concern Immediately
- Seek and obtain further details, if any, from the complainant (permitted only once) **Within one week**
- Within 2 weeks of receiving your grievance, we will respond to you with the best solution.
- We shall regard the complaint as closed incase on non-receipt of reply from the complainant Within 8 weeks from the date of registration of the grievance

**Step 3: Chief Grievance Redressal Officer**

In case, you are not satisfied with the decision/resolution of the above office or have not received any response within 15 working days, you may write or email to:

**Customer Service Universal Sampo General Insurance Co.Ltd.**

**Unit No. 601 & 602, 6<sup>th</sup> Floor, Reliable Tech Park, Thane- Belapur Road, Airoli, Navi Mumbai, Maharashtra – 400708**

**E- mail Address:** [gro@universalsompo.com](mailto:gro@universalsompo.com)

**For more details:** [www.universalsompo.com](http://www.universalsompo.com)

For updated details of grievance officer, kindly refer the link <https://www.universalsampo.com/resource-grievance-redressal>

**Step 4: Insurance Ombudsman**

**Bima Bharosa Portal link:**

**<https://bimabharosa.irdai.gov.in/>**

You can approach the Insurance Ombudsman depending on the nature of grievance and financial implication, if any.

Information about Insurance Ombudsmen, their jurisdiction and powers is available on the website of the Insurance Regulatory and Development Authority of India (IRDAI) at [www.irdai.gov.in](http://www.irdai.gov.in), or of the General Insurance Council at <https://www.gicouncil.in/>, the Consumer Education Website of the IRDAI at <http://www.policyholder.gov.in>, or from any of Our Offices.

The updated contact details of the Insurance Ombudsman offices can be referred by clicking on the Insurance ombudsman official site:

**<https://www.cioins.co.in/Ombudsman>.**

**Note:** Grievance may also be lodged at IRDAI-

**<https://bimabharosa.irdai.gov.in/>**

**Note:** Please refer the Contact details of the Insurance Ombudsman mentioned in Policy wordings under Annexure B section.

<p>12</p>	<p>Things to remember</p>	<p><b>1. Material change:</b> The Insured shall immediately notify the Company by fax and in writing of any material change in the risk, and cause at his own expense such additional precautions to be taken as circumstances may require to ensure safe operation of the Insured items or trade or business practices thereby containing the circumstances that may give rise to the claim, and the Company may adjust the scope of cover and / or premium if necessary, accordingly.</p> <p><b>2. Records to be maintained:</b> The Insured/Insured Person shall keep an accurate record containing all relevant particulars and shall allow the Company to inspect such record. The Insured/Insured Person shall within one month after the expiry of the Insurance Policy furnish such information as the Company may require.</p> <p><b>3. Policy renewal:</b> The policy shall ordinarily be renewable except on grounds of established fraud, non-disclosure or misrepresentation by the insured person, renewal of your policy shall not be denied, provided the policy is not withdrawn.</p> <p><b>4. Multiple Policy:</b> If two or more policies are taken by You during the period for which You are covered under this Policy from one or more insurers, the contribution clause shall not be applicable where the cover/benefit offered:</p> <ul style="list-style-type: none"> <li>• is fixed in nature i.e. Personal Accident Benefit, if available under the Policy,</li> <li>• does not have any relation to the treatment costs.</li> </ul> <p>I. We also agree that even if, you are covered under multiple policies providing Personal Accident cover, We shall make the claim payments independent of payments received under other similar policies in respect of the covered event.</p> <p>ii. We agree that even if two or more policies are taken by You during the time for which You are covered under this Policy from one or more insurers for indemnification of Your Hospitalization treatment costs, we shall not apply the Contribution clause and You shall have the following rights</p>	
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- You may choose to get the settlement of claim from Us as long as the claim is within the limits of and according to terms and conditions of the Policy.
- If the amount to be claimed exceeds the Sum Insured under a single Policy after consideration of the deductible and co-pay, you shall have the right to choose any insurers including Us by whom You wish Your claim to be settled. In such cases, we shall settle the claim with contribution clause
- Except for Personal Accident cover, in case if You have taken policies from Us and one or more insurers to cover the same hospitalization risk on indemnity basis, You shall only be indemnified the hospitalization costs in accordance with the terms and condition of the Policy.

**5. Incontestability and Duty of Disclosure:** The Policy shall be null and void and no benefit shall be payable in the event of untrue or incorrect statements, misrepresentation, mis-description or on non-disclosure in any material particular in the proposal form, personal statement, declaration and connected documents, or any material information having been withheld, or a claim being fraudulent or any fraudulent means or devices being used by the Insured/Insured Person or any one acting on his behalf to obtain any benefit under this Policy.

**6. Reasonable Care:** The Insured/Insured Person shall take all reasonable steps to safeguard the interests of the Insured/Insured Person against loss or damage that may give rise to a claim.

**7. Change in Sum Insured:** The Sum Insured under the Policy cannot be enhanced during its term. If you wish to enhance Your Sum Insured, you may cancel the current Policy held by You and purchase a new Policy with higher SI from Us.

**8. Contribution:** If at the time of the happening of any loss or damage covered by this Policy, there shall be existing any other insurance of any nature whatsoever covering the same, whether effected by the Insured or not, then the

		<p>Company shall not be liable to pay or contribute more than its rateables proportion of any loss or damage. However, this condition shall not be applicable for all the benefit-based covers under the Policy.</p> <p><b>9.Reasonable Precautions:</b> Insured shall take all reasonable precautions to prevent injury, illness, disease, and damage in order to minimize claims. Failure to do so will prejudice the claim under this Policy.</p> <p><b>10.Misdescription:</b> The Policy shall be void and all premiums paid by You to Us will be forfeited in the event of a misrepresentation or concealment of any material information.</p> <p><b>11. Free Look Period:</b></p> <p>(a) Single Trip Insurance – Free look period is not applicable.</p> <p>(b) Annual Multi Trip Insurance - You have a period of 30 days from the date of receipt of the Policy document, whether received electronically or otherwise, to review the terms and conditions of this Policy provided no trip has been commenced. If You have any objections to any of the terms and conditions, You have the option of cancelling the Policy stating the reasons for cancellation and You will be refunded the premium paid by You after adjusting the amounts spent on stamp duty charges and proportionate risk premium. You can cancel Your Policy only if You have not made any claims under the Policy. All Your rights under this Policy will immediately stand extinguished on the free look cancellation of the Policy. Free look provision is not applicable and available at the time of renewal of the Policy.</p>	
13	Your Obligations	<p>Please disclose in the proposal form all the diseases and conditions which you are aware at the time of buying the policy.</p> <p>Please disclose pre-existing disease/s or condition/s before buying a policy. Non-disclosure may affect the claim settlement.</p> <p>Disclosure of other material information during the policy period.</p> <p style="text-align: center;"><b>Universal Sampo General Insurance Co. Ltd.</b></p>	--

		<ul style="list-style-type: none"> <li>➤ Unit No. 601 &amp; 602, 6th Floor, Reliable Tech Park, Cloud City Campus; Gut No-31, , Thane- Belapur Road, Airoli, Navi Mumbai- 400708</li> <li>➤ Toll Free Numbers: 1-800-224030 (For MTNL/BSNL Users) or 1-800-2004030</li> <li>➤ E-mail Address: <a href="mailto:contactus@universalsompo.com">contactus@universalsompo.com</a></li> </ul>	
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Declaration by the Policy Holder

I have read the above and confirm having noted the details.

Place:

Date: \_\_\_\_\_

(Signature of the Policyholder)

- Note:
- i. Weblink to Access product related documents: [Universal Sampo | Resources Downloads](#)
  - ii. In case of any conflict, the terms & conditions mentioned in the policy document shall prevail.