

# GROUP DOMESTIC TRAVEL INSURANCE

## POLICY WORDINGS

### A. SCHEDULE

### B. PREAMBLE

This Policy is a contract of insurance between You and Us which is subject to the receipt of premium as specified in the Schedule in full in respect of the Insured Persons and the terms, conditions and exclusions of this Policy. The group administrator's/Master Policyholder's role is that of only a facilitator in offering a group cover and facilitating insurance services including claims from a central point. This Policy is valid for the period as specified in the Schedule or the Certificate of Insurance.

### C. DEFINITIONS

#### STANDARD DEFINITIONS:

1. **Accident** An accident means sudden, unforeseen and involuntary event caused by external, visible and violent means.
2. **Act of Terrorism** - An act of terrorism means an act, including but not limited to the use of force or violence and / or the threat thereof, of any person or group(s) of persons whether acting alone or on behalf of or in connection with any organisation(s) or government(s), committed for political, religious, ideological or similar purpose including the intention to influence any government and/or to put the public, or any section of the public in fear.
3. **Age or Aged** means completed years as at the Commencement Date.
4. **Condition Precedent** means a policy term or condition upon which the Insurer's liability under the policy is conditional upon.
5. **Congenital Anomaly** means a condition which is present since birth, and which is abnormal with reference to form, structure or position.
  - i. Internal Congenital Anomaly Congenital anomaly which is not in the visible and accessible parts of the body.
  - ii. External Congenital Anomaly Congenital anomaly which is in the visible and accessible parts of the body.
7. **Day Care Treatment** means medical treatment, and/or surgical procedure which is:
  - i. undertaken under General or Local Anesthesia in a hospital/day care centre in less than 24 hrs because of technological advancement, and
  - ii. which would have otherwise required hospitalization of more than 24 hours treatment normally taken on an out-patient basis is not included in the scope of this definition.

**8. Deductible** means the Rupee amount or number of hours/ day specified in the Policy or in the Certificate of Insurance for which the Insurer will not be liable, and which will apply before the Benefits under this policy are payable.

**9. Dental Treatment** means a treatment related to teeth or structures supporting teeth including examinations, fillings (where appropriate), crowns, extractions and surgery.

**10. Disclosure to information** norm means the Policy shall be void and all premium paid thereon shall be forfeited to the Company in the event of misrepresentation, mis-description or non-disclosure of any material fact.

**11. Grace Period** means the specified period of time immediately following the premium due date during which a payment can be made to renew or continue a policy in force without loss of continuity benefits such as waiting periods and coverage of pre-existing diseases. Coverage is not available for the period for which no premium is received.

**12. Hospital** means any institution established for in-patient care and day care treatment illness and/or injuries and which has been registered as a hospital with the local authorities under Clinical Establishments (Registration and Regulation) Act 2010 or under enactments specified under the Schedule of Section 56(1) and the said act Or complies with all minimum criteria as under:

- i. has qualified nursing staff under its employment round the clock;
- ii. has at least 10 in-patient beds in towns having a population of less than 10,00,000 and at least 15 in-patient beds in all other places;
- iii. has qualified medical practitioner(s) in charge round the clock;
- iv. has a fully equipped operation theatre of its own where surgical procedures are carried out;
- v. maintains daily records of patients and makes these accessible to the insurance company's authorized personnel.

**13. Hospitalization** means admission in a Hospital for a minimum period of 24 consecutive 'In-patient Care' hours except for specified procedures/ treatments, where such admission could be for a period of less than 24 consecutive hours.

**14. Illness** means a sickness or a disease or pathological condition leading to the impairment of normal physiological function and requires medical treatment.

- i. Acute condition - Acute condition is a disease, illness or injury that is likely to respond quickly to treatment which aims to return the person to his or her state of health immediately before suffering the disease/ illness/ injury which leads to full recovery.
- ii. Chronic condition - A chronic condition is defined as a disease, illness, or injury that has one or more of the following characteristics:
  1. it needs ongoing or long-term monitoring through consultations, examinations, check- ups, and /or tests

2. it needs ongoing or long-term control or relief of symptoms
3. it requires rehabilitation for the patient or for the patient to be specially trained to cope with it
4. it continues indefinitely
5. it recurs or is likely to recur

15. **Injury** means accidental physical bodily harm excluding illness or disease solely and directly caused by external, violent, visible and evident means which is verified and certified by a Medical Practitioner.

16. **Inpatient** means treatment for which the insured person has to stay in a hospital for more than 24 hours for a covered event.

17. **Insured Person** means the person named in the Certificate of Insurance who is covered under this Policy.

18. **Medical Expenses** means those expenses that an Insured Person has necessarily and actually incurred for medical treatment on account of Illness or Accident on the advice of a Medical Practitioner, as long as these are no more than would have been payable if the Insured Person had not been insured and no more than other hospitals or doctors in the same locality would have charged for the same medical treatment.

19. **Medical Practitioner** means a person who holds a valid registration from the Medical Council of any State or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within its scope and jurisdiction of license.

20. **Medically necessary treatment** means any treatment, tests, medication, or stay in hospital or part of a stay in hospital which:

- i. is required for the medical management of the illness or injury suffered by the insured;
- ii. must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration, or intensity;
- iii. must have been prescribed by a medical practitioner;
- iv. must conform to the professional standards widely accepted in international medical practice or by the medical community in India.

17. **Notification of claim** means the process of intimating a claim to the insurer or TPA through any of the recognized modes of communication.

18. **OPD treatment** means the one in which the Insured visits a clinic / hospital or associated facility like a consultation room for diagnosis and treatment based on the advice of a Medical Practitioner. The Insured is not admitted as a day care or in-patient.

19. **Post-hospitalization Medical Expenses** means medical expenses incurred during predefined number of days immediately after the insured person is discharged from the hospital provided that:

- i. Such Medical Expenses are for the same condition for which the insured person's hospitalization was required, and

ii. The inpatient hospitalization claim for such hospitalization is admissible by the insurance company.

20. **Pre-Existing Disease** means any condition, ailment, injury or disease:

a. That is/are diagnosed by a physician within 48 months prior to the effective date of the policy issued by the insurer or

b. For which medical advice or treatment was recommended by, or received from, a physician within 48 months prior to the effective date of the policy or its reinstatement.

21. **Renewal** means the terms on which the contract of insurance can be renewed on mutual consent with a provision of Grace Period for treating the renewal continuous for the purpose of gaining credit for pre-existing diseases, time-bound exclusions and for all waiting periods.

22. **Subrogation** means the right of the insurer to assume the rights of the insured person to recover expenses paid out under the policy that may be recovered from any other source.

23. **Sum Insured** means the amount specified in the Certificate of Insurance against an In-built Benefit, Cover Benefit or set of In-built Benefits respectively that represents Our maximum, total and cumulative liability for any and all claims made in respect of that Insured Person under that In-built Benefit(s)/Cover Benefit during the Travel Period

#### SPECIFIC DEFINITIONS:

1. **Ambulance** means a road vehicle operated by a licensed / authorised service provider and equipped for the transport and paramedical treatment of a person requiring medical attention.

2. **Catastrophe** is an unexpected natural event, such as an earthquake, tsunami or flood which causes widespread loss, damage, or disruption in travel schedules.

3. **Certificate of Insurance** means the certificate issued to the Insured Person confirming the Insured Person's cover under the Policy.

4. **Common Carrier** means any public road, rail or water conveyance or scheduled public aircraft, which is operating under a valid license from the relevant authority for the transportation of passengers and cargo for hire. If the Certificate of Insurance specifies that Personal Vehicles will also be covered, then for the purposes of that Insured Person only, Common Carrier will also include automobiles owned or used by the Insured Person.

5. **Commencement Date** means the start date of the Policy as specified in the Schedule.

6. **Defense Costs** are reasonable costs necessarily incurred in defending the Insured Person against any civil proceeding initiated against him/her during the Travel Period.

7. **Event** means any official sporting occasion, music concert, exhibition, educational / cultural tour, cinema, theatre, theme park or military display, or a visit to any other tourist attraction where admission is only by way of tickets sold in advance.

8. **Grace Period** means the specified period of time immediately following the premium due date during which a payment can be made to renew or continue a policy in force without loss of continuity benefits such as

waiting periods and coverage of pre-existing diseases. Coverage is not available for the period for which no premium is received.

**9. Hazardous Activities** means any sport or activity, which is potentially dangerous to the Insured Person whether he is trained in such sport or activity or not. Such sport/activity includes stunt activities of any kind, adventure racing, base jumping, biathlon, big game hunting, black water rafting, BMX stunt/obstacle riding, bobsleighting/using skeletons, bouldering, boxing, canyoning, cavin/pot holing, cave tubing, rock climbing/trekking/mountaineering, cycle racing, cyclo cross, drag racing, endurance testing, hand gliding, harness racing, hell skiing, high diving (above 5 meters), hunting, ice hockey, ice speedway, jousting, judo, karate, kendo, lugging, risky manual labour, marathon running, martial arts, micro- lighting, modern pentathlon, motor cycle racing, motor rallying, parachuting, paragliding/parapenting, piloting aircraft, polo, power lifting, power boat racing, quad biking, river boarding, scuba diving, river bugging, rodeo, roller hockey, rugby, ski acrobatics, ski doo riding, ski jumping, ski racing, sky diving, small bore target shooting, speed trials/ time trials, triathlon, water ski jumping, weight lifting or wrestling any type and other activities of similar kind.

**10. Immediate Relative** means the Insured Person's spouse, children, siblings, parents or in-laws.

**11. Travel Period** means any journey undertaken, during the Insured Period:

- Which commences when the passenger boards the Common Carrier, including Private Vehicle for onward journey and terminates when he disembarks on return to Your usual Town of residence or the contracted date whichever earlier. or,
- Which lasts or is expected to last for 90 days or no of Days specifically defined in the Policy. The Journey also includes and covers Sojourn and/or Personal Deviation.

**12. IRDAI** means Insurance Regulatory and Development Authority of India.

**13. Loan** Loan means the sum of money lent at an interest or otherwise to the Insured Person by any bank/financial institution as identified by the Loan Account Number specified in the Schedule/ Certificate of Insurance or certified in writing and provided to Us by the bank/financial institution.

**14. Loss of Independent Living** means inability to perform one or more of the following activities of daily living:

- i. Washing: the ability to wash in the bath or shower (including getting into and out of the shower) or wash satisfactorily by other means and maintain an adequate level of cleanliness and personal hygiene; ii. Dressing: the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances;
- ii. Transferring: The ability to move from a lying position in a bed to a sitting position in an upright chair or wheel chair and vice versa;
- iii. Toileting: the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene;
- iv. Feeding: the ability to feed oneself, food from a plate or bowl to the mouth once food has been prepared and made available;
- v. Mobility: The ability to move indoors from room to room on level surfaces at the normal place of residence.

**15. Money** means cash, bank drafts, current coins, bank and currency notes, treasury notes, cheques, traveller's cheques, postal orders and current postage stamps not forming part of a collection.

**16. Nominee** means the person named in the Certificate of Insurance to receive the benefits due under the Policy on the death of the Insured Person.

**17. Policy** means the statements in the proposal form/personal statement, these terms and conditions, the Coverages (if any), endorsements (if any), annexures to the Policy, the Schedule (as amended from time to time), and the Certificates of Insurance issued to the Insured Persons.

**18. Policyholder** means the physical person(s) or the entity named in the Schedule who executed the Schedule and is (are) responsible for payment of premiums.

**19. Policy Period** the period between the Commencement Date and the Expiry Date of the Policy as specified in the Schedule

**20. Reasonable and Customary Charges** means the charges for services or supplies, which are the standard charges for the specific provider and consistent with the prevailing charges in the geographical area for identical or similar services, taking into account the nature of the illness / injury involved.

**21. Schedule** means the Policy Schedule attached to and forming part of the Policy.

**22. Spouse** means Your legal husband or wife, who is between the Ages of 18 and 70 years old, and is living in Your residence.

**23. Traveling Companion** means up to two (2) named person(s) who is/ are booked to accompany You on the Trip.

**24. Travel Period** means the period of time within the Coverage Period commencing from when the Insured Person leaves for the original departure point to commence the journey in the Common Carrier on which he/she is booked to travel as a passenger and ending when the Insured Person returns to the original departure point in case of return journey or destination in case of a one way journey, subject to the maximum period of time specified in the Certificate of Insurance. If the Certificate of Insurance specifies that the Policy will only apply to the period during which the Insured Person is travelling on the Common Carrier, then the Travel Period will be limited to commencing from when the Insured Person boards the Common Carrier and ending when the Insured Person alights from the Common Carrier.

**25. Trip** means any journey during the Insured Period which lasts or is expected to last for: 90 Days or less if covered under Single Trip Insurance; or 30 Days or less per Trip, if covered under Annual Multi Trip Insurance OR as specified in Schedule.

Annual Multi Trip means one or more Trips by the Insured Person during the Policy Period. Each such trip shall not exceed number of days as mentioned in the Schedule/Certificate of Insurance, per Trip. The Cover shall be deemed to be completed on the last Trip within Policy / Cover Period as a part of the Annual Multi Trip or Policy /Cover Period End Date whichever is earlier

**26. Valuables** means and includes photographic, audio, video, computer and any other electronic and electrical equipment, cellular phones, data, business goods, telecommunications and electrical equipment,

motor vehicles and any accessories, telescopes, lenses, binoculars, antiques, art, watches, jewelry and gems, furs and articles made of precious stones and metals.

**27. War** means whether declared or not, or any warlike activities, including use of military force by any sovereign nation to achieve economic, geographic, nationalistic, political, racial, religious or other ends.

**28. We, Us, Our** means Universal Sampo General Insurance

**29. You/Your** means the Group Policy holder / employer or legally constituted entity named in the Schedule who has concluded this Policy with Us.

## **D. COVERAGES**

**D.i. Base Coverage** : Opting any of 1 base cover under the Policy is Mandatory.

### **1. Accidental Death Benefit**

The Company will pay the Sum Insured, If an Insured Person suffers an Injury due to an Accident that occurs during the Travel Period and Injury solely and directly results in the Insured Person's death within 365 days from the date of the Accident.

If a claim is accepted under this Benefit in respect of an Insured Person and the amount due under this Benefit and claims already admitted under the Policy in respect of the Insured Person will cumulatively exceed the Sum Insured then Our maximum, total and cumulative liability under any and all such claims will be limited to the Sum Insured.

On the acceptance of a claim under this Benefit and payment being made under any applicable Coverage, all cover under this Policy shall immediately and automatically cease in respect of that Insured Person.

### **2. Permanent Total Disability**

The Company will pay the Sum Insured, If an Insured Person suffers an Injury due to an Accident that occurs during the Travel Period and Injury solely and directly results in the Insured Person's Permanent Total Disability within 365 days from the date of the Accident.

Provided,

If the Insured Person suffers Injuries resulting in more than one of the Permanent Total Disabilities specified in the table above, then Our maximum, total and cumulative liability under this Coverage shall be limited to the Sum Insured and PTD Sum Insured, if applicable;

- a. such Injury should result in at least one of the losses as shown in the Table of Losses
- b. for a claim, such injury has continued for a period of twelve (12) consecutive months and is total, and permanent at the end of this period.
- c. If a claim is accepted under this Coverage in respect of an Insured Person and the amount due under this Coverage and claims already admitted under the Policy in respect of the Insured Person

- will cumulatively exceed the Sum Insured then Our maximum, total and cumulative liability under any and all such claims will be limited to the Sum Insured;
- d. If We have admitted a claim for Permanent Total Disability in accordance with this Coverage, then We shall not be liable to make any payment under the Policy on the death of the Insured Person, if the Insured Person subsequently dies;
- e. On the acceptance of a claim under this Coverage, all cover under this Policy shall immediately and automatically cease in respect of that Insured Person after the payment of any other applicable Coverages.

<b>Table of Losses</b>
Total and irrecoverable loss of sight in both eyes
Loss by physical separation or total and permanent loss of use of both hands or both feet Loss by physical separation or total and permanent loss of use of one hand and one foot Total and irrecoverable loss of sight in one eye and loss of a Limb
Total and irrecoverable loss of hearing in both ears and loss of one Limb/ loss of sight in one eye
Total and irrecoverable loss of hearing in both ears and loss of speech
Total and irrecoverable loss of speech and loss of one Limb/ loss of sight in one eye
Permanent, total and absolute disability (not falling under any one the above) which results in the Insured Person being unable to engage in any employment or occupation or business for remuneration or profit, of any description whatsoever which results in Loss of Independent Living
Loss by physical separation or total and permanent loss of use of both hands or both feet Loss by physical separation or total and permanent loss of use of one hand and one foot Total and irrecoverable loss of sight in one eye and loss of a Limb
Total and irrecoverable loss of hearing in both ears and loss of one Limb/ loss of sight in one eye
Total and irrecoverable loss of hearing in both ears and loss of speech
Total and irrecoverable loss of speech and loss of one Limb/ loss of sight in one eye

### 3. Permanent Partial Disability

The Company will pay the Sum Insured up to the limit specified under below table, If an Insured Person suffers an Injury due to an Accident that occurs during the Travel Period and Injury solely and directly results in the Insured Person's disability within 365 days from the date of the Accident.

<b>Nature of Permanent Partial Disability</b>		<b>Percentage of the Sum Insured payable</b>
i.	Total and irrecoverable loss of sight in one eye	50%
ii.	Loss of one hand or one foot	50%
iii.	Loss of all toes - any one foot	10%
iv.	Loss of toe great - any one foot	5%
v.	Loss of toes other than great, if more than one toe lost, each	2%
vi.	Total and irrecoverable loss of hearing in both ears	50%
vii.	Total and irrecoverable loss of hearing in one ear	15%
viii.	Total and irrecoverable loss of speech	50%
ix.	Loss of four fingers and thumb of one hand	40%
x.	Loss of four fingers	35%



xi.	Loss of thumb- both phalanges	25%
xii.	Loss of thumb- one phalanx	10%
xiii.	Loss of index finger-three phalanges	10%
xiv.	Loss of index finger-two phalanges	8%
xv.	Loss of index finger-one phalanx	4%
xvi.	Loss of middle/ring/little finger-three phalanges	6%
xvii.	Loss of middle/ring/little finger-two phalanges	4%
xviii.	Loss of middle/ring/little finger-one phalanx	2%

Provided,

- a. such Injury should result in at least one of the losses as shown in the Table of Losses
- b. If the Insured Person suffers a loss that is not of the nature of Permanent Partial Disability specified in the table above, then the independent medical advisors will determine the degree of disability and the amount payable, if any;
- c. We will not make any payment under this Coverage if We have already paid or accepted any claims under the Policy in respect of the Insured Person and the total amount paid or payable under the claims is cumulatively greater than or equal to the Sum Insured for that Insured Person;
- d. If a claim is accepted under this Coverage in respect of an Insured Person and the amount due under this Coverage and claims already admitted under the Policy in respect of the Insured Person will cumulatively exceed the Sum Insured then Our maximum, total and cumulative liability under any and all such claims will be limited to the Sum Insured;
- e. On the acceptance of a claim under this Coverage, the Insured Person's insurance cover under this Policy shall continue, subject to the availability of the Sum Insured

#### **4. Personal Accident (Common Carrier)**

The Company will pay, if an Insured Person suffers an Injury due to an Accident that occurs during the Travel Period while the Insured Person is travelling as a ticketed passenger on a Common Carrier and that Injury solely and directly results in the Insured Person's death or permanent total disability within 365 days from the date of the Accident, we will pay the amount specified in the Certificate of Insurance.

The amount payable under this coverage shall be in addition to any other amounts payable under the Policy in respect of the Insured Person.

#### **5. Emergency Medical Expenses Reimbursement**

The company will reimburse the Medical expenses incurred incase Insured Person suffers an Illness / Injury during the Travel Period and that Illness solely and directly requires the Insured Person to be Hospitalized during the Travel Period, then We will reimburse the costs incurred on Medical Expenses up to limit specified in the Schedule/ Certificate of Insurance.

Provided,

- i. The Hospitalization is for Medically Necessary Treatment and is commenced and continued on the written advice of the treating Medical Practitioner;
- ii. We will reimburse only those Medical Expenses that are in excess of the Deductible for each period of Hospitalization
- iii. We will reimburse only those Medical Expenses that are Reasonable and Customary Charges;
- iv. We shall not be liable to make any payment in respect of Medical Expenses incurred on the treatment of any Pre-Existing Disease.

Exclusions Specific to this coverage: In addition to the General Exclusions listed in this Policy, this Coverage shall not cover any Medical Expenses related to:

1. Routine physicals or other examinations including but not restricted to laboratory diagnostic or X-ray examinations where there are no objective indications or impairment in normal health
2. Dental treatment, dentures or Dental / Oral Surgery, unless caused by Hospitalisation arising out of an Injury. Treatment related to gum disease or tooth disease or damage unless related to irreversible bone disease involving the jaw, which cannot be treated in any other way.
3. Elective, cosmetic, or plastic surgery, except because of an Injury caused by a covered Accident.
4. Expenses incurred in connection with weak, strained, or flat feet, corns, calluses, or toenails.
5. Treatment of acne.
6. Surgical treatment undertaken for correction of Deviated nasal septum, including sub mucous resection and/or other surgical correction thereof, except as the result of Accident.
7. Organ transplants that are considered experimental in nature.
8. Childcare including general medical examination and immunization.
9. Expenses which are not exclusively medical in nature.
10. Eyeglasses, contact lenses, hearing aids, and examination for the prescription or fitting thereof unless caused by Hospitalisation arising out of an Injury.
11. Treatment provided in a government Hospital or services for which no charge is normally made.
12. Expenses related to the treatment for correction of eye sight due to refractive error.
13. Treatment for Alopecia, loss of hairs, treatment for hair including hair transplant and Laser treatments.
14. Bone marrow transplant in blood disorders.
15. Stem cell implantation/Surgery, harvesting, storage or any kind of Treatment using stem cells.

## **6. Accidental Medical Expenses**

The company will reimburse up to the Sum Insured, If an Insured Person suffers an Injury during travel period due to an Accident which solely and directly requires the Insured Person to be Hospitalized or undergo Day Care Treatment.

Provided,

- a. The Hospitalization or Day Care Treatment is for Medically Necessary Treatment and is commenced and continued on the written advice of the treating Medical Practitioner;
- b. We will reimburse only those Medical Expenses that are in excess of the Deductible for each period of Hospitalization;
- c. We shall not be liable to make any payment in respect of Medical Expenses incurred on the treatment of any Illness or which relate to any Pre-Existing Disease.

Exclusions Specific to this coverage: In addition to the General Exclusions listed in this Policy this coverage shall not cover any Medical Expenses related to: -

1. Treatment of any Illness.
2. Routine physicals or other examinations including but not restricted to laboratory diagnostic or X-ray examinations where there are no objective indications or impairment in normal health
3. Dental treatment, dentures or Dental / Oral Surgery unless caused by Hospitalisation arising out of an Injury.
4. Elective, cosmetic, or plastic surgery, except as a result of an Injury caused by a covered Accident.
5. Expenses incurred in connection with weak, strained, or flat feet, corns, calluses, or toenails
6. Treatment of acne.
7. Organ transplants that are considered experimental in nature.
8. Childcare including general medical examination and immunization.
9. Loss caused, wholly or partly by infections (except pyogenic infections which shall occur through an Accidental cut or wound)
10. Expenses which are not exclusively medical in nature.
11. Eyeglasses, contact lenses, hearing aids, and examination for the prescription or fitting thereof unless caused by Hospitalisation arising out of an Injury.
12. Treatment provided in a government Hospital or services for which no charge is normally made.
13. Expenses related to the treatment for correction of eye sight due to refractive error.
14. Treatment for Alopecia, loss of hairs, treatment for hair including hair transplant and Laser treatments.
15. Bone marrow transplant in blood disorders.
16. Stem cell implantation/Surgery, harvesting, storage or any kind of Treatment using stem cells.

## **7. OPD Treatment**

The Company will reimburse Medical expenses incurred during the travel period by the Insured Person as an Outpatient Treatment for any of the treatments/tests/consultations up to the Sum Insured mentioned in the Schedule/ Certificate of Insurance.

Exclusions Specific to this coverage: In addition to the General Exclusions listed in this Policy, this Coverage shall not cover any Medical Expenses related to: -

1. Routine physicals or other examinations including but not restricted to laboratory diagnostic or X-ray examinations where there are no objective indications or impairment in normal health
2. Dental treatment, dentures or Dental / Oral Surgery. Treatment related to gum disease or tooth disease or damage unless related to irreversible bone disease involving the jaw, which cannot be treated in any other way.
3. Elective, cosmetic, or plastic surgery, except because of an Injury caused by a covered Accident.
4. Expenses incurred in connection with weak, strained, or flat feet, corns, calluses, or toenails.
5. Treatment of acne.
6. Surgical treatment undertaken for correction of Deviated nasal septum, including sub mucous resection and/or other surgical correction thereof, except as the result of Accident
7. Expenses which are not exclusively medical in nature.
8. Eyeglasses, contact lenses, hearing aids, and examination for the prescription or fitting thereof.
9. Treatment provided in a government Hospital or services for which no charge is normally made.
10. Treatment for Alopecia, loss of hairs, treatment for hair including hair transplant and Laser treatments.
11. Bone marrow transplant in blood disorders.

## 8. OPD Treatment (Accident Only)

The Company will reimburse medical expenses, If an Insured Person suffers an Injury due to an Accident that occurs during the Travel Period and that Injury solely and directly requires the Insured Person to undergo OPD Treatment for any of the treatments/tests/consultations up to the Sum Insured specified in the Schedule / Certificate of Insurance.

Exclusions Specific to this coverage: In addition to the General Exclusions listed in this Policy this coverage shall not cover any Medical Expenses related to: -

1. Treatment of any Illness.
2. Expenses which are not exclusively medical in nature.
3. Eyeglasses, contact lenses, hearing aids, and examination for the prescription or fitting thereof.
4. Treatment provided in a government Hospital or services for which no charge is normally made.

## 9. Hospital Daily Allowance

The Company will pay the Daily allowance amount as specified in the Schedule / Certificate of Insurance, If an Insured Person is hospitalized due to an illness or injury during the Travel Period. We will pay for each continuous and completed period of 24 hours of Hospitalisation.

Provided,

- a. Our liability to make payment under this Coverage shall be for the period of Hospitalization in excess of the Deductible days
- b. This Coverage shall not be payable in respect of the Insured Person for more than the maximum number of days specified in the Certificate of Insurance.
- c. We shall not be liable to make any payment under this Coverage in respect of any Hospitalization for treatment of any Illness or any Pre-Existing Disease.

Exclusions Specific to this coverage: In addition to the General Exclusions listed in this Policy, this Coverage shall not cover any Hospitalization for:

1. Routine physicals or other examinations including but not restricted to laboratory diagnostic or X-ray examinations where there are no objective indications or impairment in normal health
2. Dental treatment, dentures or Dental / Oral Surgery. Treatment related to gum disease or tooth disease or damage unless related to irreversible bone disease involving the jaw, which cannot be treated in any other way.
3. Elective, cosmetic, or plastic surgery, except because of an Injury caused by a covered Accident.
4. Any treatment in connection with weak, strained, or flat feet, corns, calluses, or toenails.
5. Treatment of acne.
6. Surgical treatment undertaken for correction of Deviated nasal septum, including sub mucous resection and/or other surgical correction thereof, except as the result of Accident.
7. Organ transplants that are considered experimental in nature.
8. Treatment for Alopecia, loss of hairs, treatment for hair including hair transplant and Laser treatments.
9. Bone marrow transplant in blood disorders.
10. Stem cell implantation/Surgery, harvesting, storage or any kind of Treatment using stem cells.

## 10. Trip Cancellation

The Company will reimburse Non-refundable Travel Tickets cost up to the Sum Insured specified in the Schedule / Certificate of Insurance in the event of cancellation of Insured Person's Trip prior to commencement of it due to;

1. Illness and / or Injury requiring Hospitalisation or death of Insured Person, Insured Person's Traveling Companion, Insured Person's Spouse and/or Parent and/or Child (ren), Insured Person's Traveling Companion's Spouse and/or Parent and/or Child (ren).
2. Occurrence of a Catastrophe.
3. Mass bandhs or widespread Strikes acknowledged / published by Public Authority, which the Insured Person could not reasonably avoid or plan ahead in time.
4. Cancellation caused by Government regulations or control.

Exclusions Specific to this coverage:

Any of the covered causes for Trip cancellation, which were known to Insured Person prior to the booking date of Insured Person's Trip or Policy issue date whichever is later.

## **11. Trip Delay**

The Company will pay the amount specified in the Schedule / Certificate of Insurance if an Insured person's trip is delayed due to Common carrier beyond the number of hours of Insured Persons scheduled departure or Scheduled arrival time during the travel period.

Provided;

- Insured Person provide written proofs from Common Carrier of the length of the delay, unless this proof is available to the Company directly from a reliable source in the Public domain.
- The delay is not due to the late arrival of the Insured Person & Deductible is applicable.
- The Company will not accept more than one claim under this benefit during the Trip, if mentioned in the Schedule.

## **12. Missed Common Carrier**

The Company will reimburse Non-refundable travel ticket costs or Fixed Benefit as specified in the Schedule / Certificate of Insurance, if Insured Person misses the Common Carrier through which Trip would have commenced due to;

1. Accident or Mechanical Breakdown of the Common Carrier as mentioned in Schedule / Certificate of Insurance which was being used by Insured Person immediately prior to Boarding point.
2. Mass bandhs or widespread Strikes enroute the Trip which is acknowledged / published by Public Authority, which the Insured Person could not reasonably avoid or plan in time.
3. Any cancellation of Common carrier as mentioned in Schedule / Certificate of Insurance caused by Government regulations or control
4. Occurrence of Catastrophe
5. Un-reasonable time gap between two different common carrier

Exclusions Specific to this coverage:

In addition to the General Exclusions listed in this Policy this Coverage shall not cover: -

1. Any facts or matters which led to delay or which was publicly announced in advance, which the Insured Person was aware or should have been aware.
2. Any deviation from originally scheduled route at the insistence of Insured Person

### **13. Loss of Baggage and Personal Effects**

The Company will reimburse for the cost of replacement of the baggage and its contents and/or Personal Effects for the loss of an entire piece of the baggage and/or Personal Effects due to circumstances beyond Insured Person's control at the planned destination. The baggage and its contents and/or Personal Effects must be owned by and accompanied by the Insured Person during Travel period.

Conditions:

1. The maximum amount to be reimbursed per bag and the maximum value per article contained in any bag will be as stated in the Schedule / Certificate of Insurance.
2. The Company may make payment or at its option reinstate or repair as it may elect in respect of articles not older than one year.
3. The Company may make payment or at its option reinstate or repair subject to due allowance of wear and tear and depreciation as mentioned in the Schedule/Certificate of Insurance in respect of articles more than one year old;
4. Loss or damage must occur (i) while the baggage or Personal Effect is/are in the care, custody and control of a Accommodation or a Common Carrier and proof of such loss must be obtained in writing from the Accommodation management or the Common Carrier management and such proof must be provided to the Company, or (ii) as the result of Theft of the baggage or personal effects from the Insured Person provided that such loss must be reported to the police having jurisdiction at the place of the loss no more than twenty-four (24) hours from the incident. Any Claim must be accompanied by written documentation from such police;
5. Insured Person must take every possible step to ensure that the baggage or personal effects are not left unattended.
6. Personal Effects: means clothes and other articles of personal nature likely to be worn, used or carried but excluding money, jewellery and valuables.

#### **Exclusions Specific to this coverage:**

1. Household effects, antiques, electronic equipment such as computers (including software and accessories), personal data assistants or handheld computers, cellular phones, digital video disc player, compact disc player, video camcorder, camera, eyeglasses or sunglasses, contact or corneal lenses, artificial teeth, bridges or prosthetic limbs, hearing aids, valuables, money, securities such as credit cards, debit cards, cheques, traveler cheques, membership cards, tickets or documents, business good or samples, data recorded on tapes, cards, discs or otherwise, musical instruments, perishables and consumables.
2. Loss to property which is insured under any other insurance Policy.
3. Loss arising due to the baggage being left unattended or forgotten by the Insured Person in a public Place.

4. Damage to the baggage or its contents including pilferage from the baggage or not amounting to permanent and total loss.
5. Any payment under this Benefit will be in excess of any amount paid or payable by the Accommodation, Common Carrier or any such agent/organization responsible for the loss or any other valid and collectible insurance

#### **14. Damage to Baggage**

The Company will reimburse the expenses incurred subject to deductible to repair the Damage occurred to Insured Persons baggage during the Travel period. We will reimburse only those losses that are Reasonable and Customary Charges.

##### **Exclusions Specific to this coverage:**

- Any damage which will be paid or refunded by the Common Carrier, hotel, agent or any other provider of travel and/or accommodation
- Any Damage not proven to happened within travel period
- Any payment under this Benefit will be in excess of any amount paid or payable by the Accommodation, Common Carrier or any such agent/organization responsible for the loss or any other valid and collectible insurance

#### **15. Evacuation (Medical & Catastrophe)**

We will reimburse the costs incurred for the air or surface transportation of the Insured Person during the Travel Period (and an attending Medical Practitioner if it is certified in writing as being medically necessary) including costs incurred for medical care during such transportation, in any of the following circumstances:

- a. The Insured Person needs to be evacuated due to a Catastrophe which has occurred in the place where the Insured Person is located during the Travel Period;
- b. The Insured Person needs to be transferred from the place of Accident to the nearest Hospital for medical treatment following an Accident during the Travel Period;
- c. The Insured Person needs to be transported from the Hospital where the Insured Person is being treated to the nearest Hospital if such medical treatment cannot be provided at the Hospital where the Insured Person is situated.
- d. Catastrophe necessitating immediate Evacuation in order to avoid risk of personal Injury or Illness.
- e. Officials in the country where the Insured Person is located recommend that certain categories of persons, which include the Insured Person, should leave that country.

provided:

- a. The treating Medical Practitioner certifies in writing that the transportation of the Insured Person was required for Medically Necessary Treatment to be rendered
- b. We have agreed to the reimbursement of such costs of transportation in writing in advance of the transportation;
- c. The Hospital to which the Insured Person is proposed to be transported is the nearest Hospital capable of providing the Medically Necessary Treatment required by the Insured Person;

- d. If the Insured Person is transported to a Hospital which is not the nearest Hospital capable of providing the Medically Necessary Treatment required by the Insured Person then Our liability under this Coverage shall be limited to the amount that would otherwise have been payable to transport the Insured Person to the nearest Hospital;
- e. We will reimburse only those expenses that are Reasonable and Customary Charges;
- f. We shall not accept more than one claim under this Coverage in respect of the Insured Person following from the same Accident.
- g. An Emergency Evacuation must be arranged and authorized in advance by the Assistance Company

## **16. Repatriation of Mortal Remains**

We will reimburse the expenses incurred for transportation of mortal remains from the place of death to the residence of the Insured Person up to limits mentioned in Schedule/ Certificate of Insurance.

Provided;

- a. The amount payable under this Coverage will be in addition to the amount payable under Accidental Death or any other applicable Coverages;
- b. The death of the Insured Person occurred in a location that is not the city/place of residence of the Insured Person.

Expenses include, but are not limited to, expenses for (a) embalming (b) cremation (c) coffin and (d) Transportation.

## **17. Emergency Hotel Requirement**

We will reimburse the costs up to the limit specified in the Schedule/ Certificate of Insurance towards the stay of the Insured Person in a hotel due to the Insured Person or any Immediate Relative travelling with the Insured Person suffering Injury in an Accident or Illness or Hospitalization during the Travel Period.

Provided:

- a. The Injury or Illness caused to the Insured Person or his/her Immediate Relative must be so disabling as to reasonably require an extension of the stay;
- b. We shall not accept more than one claim under this Benefit during the Coverage Period. We shall not be liable to reimburse any expenses under this Coverage for:
  - o Any facts or matters of which the Insured Person was aware or should have been aware might result in a claim being made under this Coverage;
  - o Any extension opted in furtherance of business or personal reasons

## **18. Checked in Baggage Delay**

The Company will pay a benefit amount if Insured Person's Checked-in Baggage is delayed or misdirected by Common Carrier for more than the number of consecutive hours as mentioned in the schedule/ Certificate of Insurance from the time Insured Person arrives at the destination stated on his ticket during Travel period. The Company will reimburse non-refundable cost of an entire piece of Checked-In Baggage and its contents, held in the care, custody, and control of the Common Carrier, due to Theft or misdirection by the Common Carrier or due to non- delivery at its destination during Journey whilst on Trip. Insured Person must be a ticketed passenger on the Common Carrier.



The maximum amount to be reimbursed per bag and the maximum value per article contained in any bag of the amount will be as stated in the Schedule / Certificate of Insurance.

All Claims must be verified by the Common Carrier who must certify the loss. Benefits for Checked-in Baggage will be in excess of any amount paid or payable by the Common Carrier responsible for the loss or any other valid and collectible insurance. If at the time of the occurrence of any loss there is other valid and collectible insurance in place, the Company will be liable only for the excess of the amount of loss, over the amount of such other insurance, and any applicable deductible.

In case of same event, Insured Person may Claim either under Coverage Delay of Checked-In Baggage or Loss of Checked-In Baggage and not both.

## **19. Hotel Cancellation**

The Company will reimburse Non-refundable Hotel cost up to the Sum Insured specified in the Schedule / Certificate of Insurance in the event of cancellation of Insured Person's Hotel booking prior to commencement of it due to;

1. Illness and / or Injury requiring Hospitalisation or death of Insured Person, Insured Person's Traveling Companion, Insured Person's Spouse and/or Parent and/or Child (ren), Insured Person's Traveling Companion's Spouse and/or Parent and/or Child (ren).
2. Occurrence of a Catastrophe.
3. Mass bandhs or widespread Strikes acknowledged / published by Public Authority, which the Insured Person could not reasonably avoid or plan ahead in time.
4. Cancellation caused by Government regulations or control.
5. Cancellation by Common Carrier which was scheduled for departure for such Trip.

### **D.ii. Optional Covers:**

#### **1. Compassionate Visit**

We will reimburse the amount incurred on tickets on a Common Carrier for an Immediate Relative of the Insured Person to travel to the place of Hospitalization of the Insured Person hospitalized due to Accident during the Coverage Period upto the limit specified in the Schedule / Certificate of Insurance.

Provided;

- a. The Insured Person is Hospitalized at a distance of at least 100 kilometres from his place of residence;
- b. We will reimburse only those expenses that are Reasonable and Customary Charges;
- c. We shall not accept more than one claim under this Coverage in respect of the Insured Person following from the same Accident.
- d. Prior approval from Insurance company is in place.

#### **2. Fire and Allied Perils (Home Building & Contents)**

In consideration of the Insured named in the Schedule/certificate of insurance hereto having paid to us, the full premium mentioned in the said schedule, we, (Subject to the Conditions and Exclusions contained herein or endorsed or otherwise expressed hereon) that if after payment of the premium the Property Insured described in the said Schedule / Certificate of Insurance or any part of such Property be

destroyed or damaged by any of the perils specified hereunder during the period of insurance named in the said schedule or of any subsequent period in respect of which the Insured shall have paid and the We shall have accepted the premium required for the renewal of the policy, We shall pay to the Insured the value of the Property at the time of the happening of its destruction or the amount of such damage or at its option reinstate or replace such property or any part thereof;

- a. Fire Excluding destruction or damage caused to the property Insured by
  - i. Its own fermentation, natural heating or spontaneous combustion.
  - ii. Its undergoing any heating or drying process.
  - iii. Burning of property Insured by order of any Public Authority.
- b. Lightning
- c. Explosion/Implosion Excluding loss, destruction of or damage
  - i. To boilers (other than domestic boilers), economizers or other vessels, machinery or apparatus (in which steam is generated) or their contents resulting from their own explosion/implosion,
  - ii. Caused by centrifugal forces.
- d. Aircraft Damage Loss, Destruction or damage caused by Aircraft, other aerial or space devices and articles dropped therefrom excluding those caused by pressure waves.
- e. Riot, Strike and Malicious Damage Loss of or visible physical damage or destruction by external violent means directly caused to the property Insured but excluding those caused by
  - i. Total or partial cessation of work or the retardation or interruption or cessation of any process or operations or omissions of any kind.
  - ii. Permanent or temporary dispossession resulting from confiscation, commandeering, requisition or destruction by order of the Government or any lawfully constituted Authority.
  - iii. Permanent or temporary dispossession of any building or plant or unit of machinery resulting from the unlawful occupation by any person of such building or plant or unit or machinery or prevention of access to the same.
  - iv. Burglary, housebreaking, theft, larceny or any such attempt or any omission of any kind of any person (whether or not such act is committed in the course of a disturbance of public peace) in any malicious act.
  - v. If the Company alleges that the loss/damage is not caused by any malicious act, the burden of proving the contrary shall be upon the Insured.

Notwithstanding any provision to the contrary within this insurance it is agreed that this insurance excludes loss, damage cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any act of terrorism regardless of any other cause or event contributing concurrently or in any other sequence to the loss. For the purpose of this endorsement an act of terrorism means an act, including but not limited to the use of force or violence and / or the threat thereof, of any person or group(s) of persons whether acting alone or on behalf of or in connection with any organization(s) or government(s), committed for political, religious, ideological or similar purpose including the intention to influence any government and/or to put the public, or any section of the public in fear. The warranty also excludes loss, damage, cost or expenses of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to action taken in respect of any act of terrorism. If we alleges that by reason of this exclusion, any loss, damage, cost or expenses is not covered by this insurance the

burden of proving the contrary shall be upon the Insured. In the event any portion of this endorsement is found to be invalid or unenforceable, the remainder shall remain in full force and effect.

f. Storm, Cyclone, Typhoon, Tempest, Hurricane, Tornado, Flood and Inundation Loss, destruction or damage directly caused by Storm, Cyclone, Typhoon, Tempest, Hurricane, Tornado, Flood or Inundation excluding those resulting from earthquake, Volcanic eruption or other convulsions of nature. (Wherever earthquake cover is given as an —add on coverll the words —excluding those resulting from earthquake ll shall stand deleted).

g. Impact Damage

Loss of or visible physical damage or destruction caused to the property Insured due to impact by any Rail/ Road vehicle or animal by direct contact not belonging to or owned by

- i. The Insured or any occupier of the premises or
- ii. Their employees while acting in the course of their employment

h. Subsidence and Landslide including Rock slide Loss, destruction or damage directly caused by Subsidence of part of the site on which the property stands or Land slide/ Rock slide excluding:

- i. The normal cracking, settlement or bedding down of new structures
- ii. The settlement or movement of made up ground
- iii. Coastal or river erosion
- iv. Defective design or workmanship or use of defective materials
- v. Demolition, construction, structural alterations or repair of any property of ground works or excavations.

i. Bursting and/or overflowing of Water Tanks, Apparatus and Pipes

j. Missile Testing operations

k. Leakage from Automatic Sprinkler Installations Excluding loss, destruction or damage caused by

- i. Repairs or alterations to the buildings or premises.
- ii. Repairs, Removal or Extension of the Sprinkler Installation.
- iii. Defects in construction known to the Insured.

l. Bush Fire Excluding loss destruction or damage caused by Forest Fire. provided that our liability shall in no case exceed in respect of each item the Sum expressed in the said Schedule to be Insured thereon or in the whole the total Sum Insured hereby or such other Sum or sums as may be substituted therefor by memorandum hereon or attached hereto signed by or on behalf of us.

m. Earthquake (Fire and Shock) Earthquake (Fire and Shock) Endorsement:

It is hereby agreed and declared that notwithstanding anything stated in the printed exclusions of this policy to the contrary, this Insurance is extended to cover loss or damage (including loss or damage by fire) to any of the property insured by this policy, occasioned by or through or in consequence of earthquake including flood or overflow of the sea, lakes, reservoirs, and rivers and/or landslide rockslide resulting therefrom. Provided always that all the conditions of this policy shall apply (except in so far as they may be hereby expressly varied) and that any reference therein to loss or damage by fire shall be deemed to apply also to loss or damage directly caused by any of the perils which this insurance extends to include by virtue of this endorsement.

General Exclusion of this Benefit:

- a. This Policy does not cover (not applicable to policies covering dwellings)

- i. The first 5% of each and every claim subject to a minimum of Rs.10,000 in respect of each and every loss arising out of –Act of God perils such as Lightning, STFI, Subsidence, Landslide and Rock slide covered under the policy
  - ii. The first Rs.10,000 for each and every loss arising out of other perils in respect of which the Insured is indemnified by this policy

The Excess shall apply per event per Insured.
- b. Loss, destruction or damage caused by war, invasion, act of foreign enemy hostilities or war like operations (whether war be declared or not), civil war, mutiny, civil commotion assuming the proportions of or amounting to a popular rising, military rising, rebellion, revolution, insurrection or military or usurped power.
- c. Loss, destruction or damage directly or indirectly caused to the property Insured by
  - i. Ionizing radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel
  - ii. The radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof
- d. Loss, destruction or damage caused to the Insured property by pollution or contamination excluding
  - i. Pollution or contamination which itself results from a peril hereby Insured against.
  - ii. Any peril hereby Insured against which itself results from pollution or contamination
- e. Loss, destruction or damage to bullion or unset precious stones, any curios or works of art for an amount exceeding Rs. 10000/-, manuscripts, plans, drawings, securities, obligations or documents of any kind, stamps, coins or paper Money, cheques, books of accounts or other business books, computer systems records, explosives unless otherwise expressly stated in the policy.
- f. Loss, destruction or damage to the stocks in Cold Storage premises caused by change of temperature.
- g. Loss, destruction or damage to any electrical machine, apparatus, fixture, or fitting arising from or occasioned by over-running, excessive pressure, short circuiting, arcing, self heating or leakage of electricity from whatever cause (lightning included) provided that this exclusion shall apply only to the particular electrical machine, apparatus, fixture or fitting so affected and not to other machines, apparatus, fixtures or fittings which may be destroyed or damaged by fire so set up.
- h. Expenses necessarily incurred on
  - i. Architects, Surveyors and Consulting Engineer's Fees and
  - ii. Debris Removal by the Insured following a loss, destruction or damage to the Property Insured by an Insured peril in excess of 3% and 1% of the claim amount respectively.
- i. Loss of earnings, loss by delay, loss of market or other consequential or indirect loss or damage of any kind or description whatsoever.

j. Loss or damage by spoilage resulting from the retardation or interruption or cessation of any process or operation caused by operation of any of the perils covered.

k. Loss by theft during or after the occurrence of any Insured peril except as provided under Riot, Strike, Malicious and Terrorism Damage cover.

l. Any Loss or damage occasioned by or through or in consequence directly or indirectly due to Volcanic eruption or other convulsions of nature

m. Loss or damage to property Insured if removed to any building or place other than in which it is herein stated to be Insured, except machinery and equipment temporarily removed for repairs, cleaning, renovation, or other similar purposes for a period not exceeding 60 days.

**General Conditions:**

1. This Policy shall be voidable in the event of mis-representation, mis-description or non-disclosure of any material particular.

2. All insurances under this policy shall cease on expiry of seven days from the date of fall or displacement of any building or part thereof or of the whole or any part of any range of buildings or of any structure of which such building forms part.

Provided such a fall or displacement is not caused by Insured perils, loss or damage by which is covered by this policy or would be covered if such building, range of buildings or structure were Insured under this policy. Notwithstanding the above, We, subject to an express notice being given as soon as possible but not later than seven days of any such fall or displacement may agree to continue the insurance subject to revised rates, terms and conditions as may be decided by it and confirmed in writing to this effect.

3. Under any of the following circumstances the insurance ceases to attach as regards the property affected unless the Insured, before the occurrence of any loss or damage, obtains our sanction signified by endorsement upon the policy by or on behalf of us:-

a. If the trade or manufacture carried on be altered, or if the nature of the occupation of or other circumstances affecting the building Insured or containing the Insured property be changed in such a way as to increase the risk of loss or damage by Insured Perils.

b. If the interest in the property passes from the Insured otherwise than by will or operation of law.

4. This insurance does not cover any loss or damage to property which, at the time of the happening of such loss or damage, is Insured by or would, but for the existence of this policy, be Insured by any marine policy or policies except in respect of any excess beyond the amount which would have been payable under the marine policy or policies had this insurance not been effected.

5. This insurance may be terminated at any time at the request of the Insured, in which case we will retain the premium at customary short period rate for the time the policy has been in force. This insurance may also at any time be terminated at our option, on 15 days' notice to that effect being given to the Insured, in which we shall be liable to repay on demand a rateable proportion of the premium for the unexpired term from the date of the cancellation.

6. (i) On the happening of any loss or damage the Insured shall forthwith give notice thereof to the us and shall within 15 days after the loss or damage, or such further time as we may in writing allow in that behalf, deliver to us

a. A claim in writing for the loss or damage containing as particular an account as may be reasonably practicable of all the several articles or items or property damaged or destroyed, and of the amount of the loss or damage thereto respectively, having regard to their value at the time of the loss or damage not including profit of any kind.

b. Particulars of all other insurances, if any

The Insured shall also at all times at his own expense produce, procure and give to us all such further particulars, plans, specification books, vouchers, invoices, duplicates or copies thereof, documents, investigation reports (internal/external), proofs and information with respect to the claim and the origin and cause of the loss and the circumstances under which the loss or damage occurred, and any matter touching the liability or the amount of our liability as may be reasonably required by or on our behalf together with a declaration on oath or in other legal form of the truth of the claim and of any matters connected therewith. No claim under this policy shall be payable unless the terms of this condition have been complied with (ii) In no case whatsoever shall we be liable for any loss or damage after the expiration of 12 months from the happening of the loss or damage unless the claim is the subject of pending action or arbitration; it being expressly agreed and declared that if we shall disclaim liability for any claim hereunder and such claim shall not within 12 calendar months from the date of the disclaimer have been made the subject matter of a suit in a court of law then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable hereunder.

7. On the happening of loss or damage to any of the property Insured by this policy, we may

a. Enter and take and keep possession of the building or premises where the loss or damage has happened.

b. Take possession of or require to be delivered to it any property of the Insured in the building or on the premises at the time of the loss or damage.

c. Keep possession of any such property and examine, sort, arrange, remove or otherwise deal with the same.

d. Sell any such property or dispose of the same for account of whom it may concern.

The powers conferred by this condition shall be exercisable by the us at any time until notice in writing is given by the Insured that he makes no claim under the policy, or if any claim is made, until such claim is finally determined or withdrawn, and we shall not by any act done in the exercise or purported exercise of its powers hereunder, incur any liability to the Insured or diminish its rights to rely upon any of the conditions of this policy in answer to any claim. If the Insured or any person on his behalf shall not comply with our requirements or shall hinder or obstruct us, in the exercise of its powers hereunder, all benefits under this policy shall be forfeited. The Insured shall not in any case be entitled to abandon any property to us whether taken possession of by us or not.

8. If the claim be in any respect fraudulent, or if any false declaration be made or used in support thereof or if any fraudulent means or devices are used by the Insured or any one acting on his behalf to obtain any benefit under the policy or if the loss or damage be occasioned by the willful act, or with the connivance of the Insured, all benefits under this policy shall be forfeited.

9. We at our option, reinstate or replace the property damaged or destroyed, or any part thereof, instead of paying the amount of the loss or damage, or join with any other Company or Insurer(s) in so doing, we shall not be bound to reinstate exactly or completely but only as circumstances permit and in reasonably sufficient manner, and in no case shall we be bound to expend more in reinstatement than it would have cost to reinstate such property as it was at the time of the occurrence of such loss or damage nor more than the Sum Insured by us thereon. If we so elect to reinstate or replace any property the Insured shall at his own expense furnish us with such plans, specifications, measurements, quantities and such other particulars as we may require, and no acts done, or caused to be done, by us with a view to reinstate or replace shall be deemed an election by us to reinstate or replace.

If in any case we shall be unable to reinstate or repair the property hereby Insured, because of any municipal or other regulations in force affecting the alignment of streets or the construction of buildings or otherwise, we shall, in every such case, only be liable to pay such Sum as would be

requisite to reinstate or repair such property if the same could lawfully be reinstated to its former condition.

10. If the property hereby Insured shall at the breaking out of any fire or at the commencement of any destruction of or damage to the property by any other peril hereby Insured against be collectively of greater value than the Sum Insured thereon, then the Insured shall be considered as being his own insurer for the difference and shall bear a rateable proportion of the loss accordingly. Every item, if more than one, of the policy shall be separately subject to this condition.

11. If at the time of any loss or damage happening to any property hereby Insured there be any other subsisting insurance or insurances, whether effected by the Insured or by any other person or persons covering the same property, we shall not be liable to pay or contribute more than its rateable proportion of such loss or damage.

The Insured shall at the expense of us do and concur in doing, and permit to be done, all such acts and things as may be necessary or reasonably required by us for the purpose of enforcing any rights and remedies or of obtaining relief or indemnity from other parties to which the we shall be or would become entitled or subrogated, upon its paying for or making good any loss or damage under this policy, whether such acts and things shall be or become necessary or required before or after his indemnification by us.

13. The parties to the contract may mutually agree and enter into a separate Arbitration Agreement to settle any and all disputes in relation to this policy.

Arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996.

(This clause does not apply to Group policies where premium is paid by members).

14. Every notice and other communication to us required by these conditions must be written or printed.

15. At all times during the period of insurance of this policy the insurance cover will be maintained to the full extent of the respective Sum Insured in consideration of which upon the settlement of any loss under this policy, pro-rata premium for the unexpired period from the date of such loss to the expiry of period of insurance for the amount of such loss shall be payable by the Insured to us.

The additional premium referred above shall be deducted from the net claim amount payable under the policy. This continuous cover to the full extent will be available notwithstanding any previous loss for which we may have paid hereunder and irrespective of the fact whether the additional premium as mentioned above has been actually paid or not following such loss. The intention of this condition is to ensure continuity of the cover to the Insured subject only to the right of the Insurance Company for deduction from the claim amount, when settled, of pro-rata premium to be calculated from the date of loss till expiry of the policy. Notwithstanding what is stated above, the Sum Insured shall stand reduced by the amount of loss in case the Insured immediately on occurrence of the loss exercises his option not to reinstate the Sum Insured as above.

### **3. Key Replacement**

The Company will pay the Insured Person for replacing the, keys of Residence and/or the keys of the vehicle, which the Insured Person owns, and are lost or stolen whilst on Trip provided that such keys are carried in person by the Insured Person whilst on Trip.

### **4. Electronic Equipment Cover**

We will reimburse the actual loss incurred up to the amount specified in the Schedule / Certificate of Insurance in relation to the permanent and total loss of the Insured Person's Portable Electronic Equipment due to any Accidental damage, loss or theft during the Travel Period.

For the purpose of this Coverage,

(i) Portable Electronic Equipment shall mean any computer equipment or communication devices carried by the Insured Person.

This Coverage will be payable provided that:

- a. The Insured Person provides Us with a written proof of ownership or care, custody and control of the Portable Electronic Equipment;
- b. The Insured Person provides Us with a certified copy of the police report filed;
- c. We will reimburse only those expenses that are in excess of the Deductible;
- d. Any amount payable under this Coverage shall be adjusted for depreciation as per the percentage specified below unless provided to the contrary within the schedule / Certificate of Insurance.

<b>Age of the Equipment</b>	<b>Depreciation %</b>
0 – 6 months	30%
6 – 12 months	45%
12 – 18 months	60%
18 > months	75%

We shall not be liable to reimburse any expenses for:

- a. Any loss or destruction which will be paid or refunded by a Common Carrier, hotel, agent or any other provider of travel and/or accommodation;
- b. Any loss of stored data or re-creation of such stored data;
- c. Any damage of Portable Electronic Equipment caused due to the Insured Person's fault;
- d. Any actual or alleged loss or destruction arising from detention, confiscation or distribution by customs, police or other public authorities
- e. Manufacturing or Pre Existing condition failure
- f. Functional failure which is covered under extended warranty

## **5. Return of Minor Child**

The Company will reimburse upto the sum insured specified in Schedule / Certificate of Insurance for the Insured Person's Child who does not have any other adult accompanying other than Insured Person, provided that:

- a) Insured Person is being hospitalized beyond <<2 Days>> during an Trip
- b) The Dependent Child Age is less than 14 years of Age at the time of such Hospitalization of Insured Person
- c) Advance Approval by The Company
- d) Valid Claim of Insured Person under Coverage Medical Expenses.
- e) Insured Person's Child is covered under the Policy as Insured Person or are covered under any other Travel insurance Policy issued by The Company for the same period.



## 6. Assistance Services

The Company will arrange a services as mentioned in the Schedule/ Certificate of Insurance for the Insured Person up to the specified limits during travel period.

### 1. Doctor on Call

Online doctor consultations through app can be arranged if availed under the Policy

### 2. Medical Assistance Services

When Insured Person get into circumstances that require medical attention, such as an unfortunate accident, or simply first aid: our ground assistance connects you to the nearest medical response team as well as guides to reach your nearest hospital and to any additional medical assistance you require.

### 3. Legal assistance

The company would arrange an Assistance to seek legal advice incase of any emergency within travel period for the Insure Person.

### 4. Medical E- Opinion

The company will Cover the Opinion through online doctor consultations incase of any emergency and if covered under the Policy.

### 5. Delivery of Essential Medicine

We would arrange for an essential medicine if required during the Travel Period and opted under the Policy.

### 6. Trip Support/Information (General Assistance)

Any information you require while travelling can be provided to you through our active call services. In addition, we are always available to provide you with the current news, suggestions, and additional guidance to make your travel enjoyable and convenient (if required)

**Transit assistance:** When you are in transit through air, road, or rail, we navigate you through possibly confusing situations, and help you receive the best information and direction to solve your distress

**Theft:** In a situation where you are a victim of theft, our ground assistance helps you file a First Information Report at the nearest police station, and guides you to a convenient point of solution (if opted & required)

### 7. Home Care Assistance (Nurse at home arrangement)

Nursing and attendant services can be arranged within Travel period for the family back at home incase you are travelling.

### 8. Arrangement of Parent Accommodation

The Company will arrange an Hotel accommodation for Parents incase of any Accident / illness required Insured Person to be hospitalized and Treating Medical Practitioner has advised to parents to be available with Insured Person.

**9. Emergency Document Delivery**

The company would arrange to deliver important documents to be delivered at Insured person's place in travel period incase of an Accidental / Medical emergency or for the reason specified in the Policy.

**10. Emergency travel assistance**

In case of wallet lost, assistance / arrangements can be done for hotel booking and flight bookings.

**11. Short term RSA cover**

We will provide a RSA cover for family back at home when Insured Person is on Trip.

**12. Pet cover**

We would arrange an service to take care of Pet when Insured Person is on Trip.

**13. Travel and weather alerts**

Alerts that may affect your trip would be given when Insured person is on Trip.

**7. Loss of Tickets**

The Company will reimburse to an Insured Person towards the cost of regeneration of Ticket / Rearrangement of Duplicate ticket for the loss or damage to Original ticket due to following reasons of the Insured Person for which he/she would be travelling and the same would be impacted due to this loss.

- i. Loss of ticket due to Accident
- ii. Loss of Ticket due to Proven Theft
- iii. Occurrence of a Catastrophe

**8. Personal Liability**

We will reimburse any actual legal liability, including Defence Costs, incurred by the Insured Person in his/her private capacity to pay damages to a third party arising out of the third party's death, Injury or property being damaged during the Travel Period upto the limit specified in the Certificate of Insurance.  
provided :

- a. We are given immediate written notice of any event that may give rise to a claim under this In-built Benefit;
- b. The Insured Person does not incur any Defence Costs or expenses, admit liability or settle or attempt to settle, make any admission or offer any payment or otherwise assume any contractual obligation with respect to such claim without Our prior written consent;
- c. The Insured Person is obligated to defend himself/herself in any ensuing civil proceedings. We shall be entitled, but not obligated to, at any time to take over and conduct the defence and/or settlement of any action

or claim in the name of the Insured Person and shall be entitled at all times to receive the Insured Person's cooperation and assistance;

d. We shall not settle any claim without the express consent of the Insured Person, but if the Insured Person refuses an available settlement recommended by Us, then Our liability shall be restricted to the amount by which such claim could have been settled;

**Exclusions Specific to this coverage:**

1. Liability which is expected by or intended for **Insured Person**.
2. Any liability **Claim** which is intimated or brought post twelve (12) months from the date of occurrence of an event leading to a liability **Claim**.
3. Liability arising out of or in connection with a Business engaged in by **Insured Person**. This exclusion applies but is not limited to an act or omission, regardless of its nature or circumstance, involving a service or duty rendered, promised, owed, or implied to be provided because of the nature of the Business.
4. Liability arising out of the rental or holding for rental of any part of any premises by **Insured Person**.
5. Liability arising out of the **Insured Person's place** of residence.
6. Liability arising out of the rendering of or failure to render professional services.
7. Liability arising out of a premise, watercraft or aircraft that is owned by, rented to or rented by **Insured Person**.
8. Liability arising out of the ownership, maintenance, use, loading or unloading of motor vehicles, all other motorized land conveyances, watercraft or aircraft.
9. Liability arising out of the transmission of a communicable Disease by **Insured Person**.
10. Liability arising out of sexual molestation, corporal punishment, or physical or mental abuse.
11. Liability arising out of the use, sale, manufacture, delivery, transfer or possession by any person of a controlled substance or contraband as defined by the appropriate authority or the Federal Food and Drug Agency or equivalent or similar organization.
12. Liability under any contract or agreement.
13. **Property damage** to property owned by **Insured Person**.
14. **Property damage** to property rented to, occupied, or used by or in the care of **Insured Person**.
15. **bodily Injury** to any person eligible to receive any benefits voluntarily provided or required to be provided by **Insured Person** under any worker's compensation law, non-occupational disability law or occupational Diseases law, or similar law.
16. Suits or legal actions arising from **Insured Person's Immediate Family Member** or **Traveling Companion** or **Immediate Family Member** of a **Traveling Companion** against **Insured Person**.

**9. Trip Interruption**

The Company will reimburse towards Non refundable travel costs and / or accommodation costs up to the Sum Insured following shortening and / or alteration of the Trip/Trip Interruption due to;

- a. Illness and / or Injury requiring Hospitalisation or death of Insured Person or Insured Person's Traveling Companion or Insured Person's Spouse and/or Parent and/or Child (ren), Insured Person's Traveling Companion's Spouse and/or Parent and/or Child (ren) during the Trip.
- b. Occurrence of Catastrophe.
- c. Mass bandhs or widespread Strikes acknowledged / published by Public Authority which the Insured Person could not reasonably avoid or plan ahead in time.

- d. Any facts or matters which led to delay or which was publicly announced in advance, which the Insured Person was aware or should have been aware.

## **10. Hijack**

If the Common Carrier in which the Insured Person is traveling has been Hijacked during the course of an Journey whilst on an Trip, then the Company will pay a distress allowance per Day up to the maximum number of days as specified in the Schedule/Certificate of Insurance to Insured Person.

Exclusions Specific to this coverage:

The Insured Person and/or his Immediate Family Member being suspected to be an accomplice or an accessory in such Hijack.

## **11. Ambulance Transportation Cover**

The Company will reimburse the cost incurred for Ambulance up to the limit specified in the schedule/ Certificate of Insurance if the Insured Person suffers an Injury due to an Accident and such Injury requires the Insured Person to be transported to the Hospital by an Ambulance.  
provided;

- a. The treating Medical Practitioner certifies in writing that the transportation of the Insured Person by Ambulance was medically necessary;
- b. The transportation was availed immediately following the Accident;
- c. We will reimburse only those costs that are Reasonable and Customary Charges.

## **12. Pre-Existing Disease Waiver**

The Company has agreed, on additional payment, waiting period applicable on Pre-existing disease for each Insured Person before benefits are payable under the Policy is :  
[The Insured will have the choice of choosing between a) OR b) ]

- a) waived off OR
- b) Modified to 24 Months

For the purpose of this extension, Exclusion Code 01 stands deleted.

Condition – Coverage 5. iv. and/or 6. iv. stands deleted.

## **13. Physiotherapy**

The Company will reimburse up to Sum Insured as mentioned in the Schedule / Certificate of Insurance for Physiotherapy sessions recommended by the attending Physician/Surgeon. Such Covers would be applicable immediately following the Insured Persons discharge/ Treatment from Hospital and The Company has accepted Insured Person's Accidental Medical Expense, Inpatient Claim in this Policy. Physiotherapy sessions should start within 1 month from the date of Incident up to maximum sessions stated in the Schedule.

#### **14. Dependent Child Education**

The Company will reimburse up to Sum Insured as stated in the Schedule/ Certificate of Insurance, towards Education Fees to the Child / Children who is a full time student in any Institution at the time of such valid Claim under Accidental Death. The Benefit would be payable towards 2 Children.

#### **15. Missed Event**

The Company will reimburse the loss incurred towards Event Ticket, hotel booking and Travel Ticket cancellation by Insured Person for missing the planned event due to;

1. Illness and / or Injury requiring Hospitalisation or death of Insured Person, Insured Person's Traveling Companion, Insured Person's Spouse and/or Parent and/or Child (ren), Insured Person's Traveling Companion's Spouse and/or Parent and/or Child (ren).
2. Occurrence of a Catastrophe.
3. Mass bandhs or widespread Strikes acknowledged / published by Public Authority, which the Insured Person could not reasonably avoid or plan ahead in time.
4. Cancellation caused by Government regulations or control.

Incase of same event triggered under Trip Cancellation and Missed event, we would pay under either of the coverage.

#### **Exclusions Specific to this coverage:**

In addition to the General Exclusions listed in this **Policy** this Coverage shall not cover: -

1. Any of the covered causes for Missed Event which were known to Insured Person prior to the booking date of Insured Person's Trip or Policy issue date whichever is later.
2. Any amount which will be paid or refunded by the Common Carrier, hotel

#### **16. Emergency Cash**

The Company will reimburse the actual loss incurred in relation to the permanent and total loss of the Insured Person's travel funds due to any pilferage, theft, loss, robbery or dacoity during the Travel Period.

This Coverage will be payable provided that:

- a. The Insured Person provides Us with a copy of a police complaint reporting the incident. We shall not be liable to reimburse any expenses for:
- b. Any loss which will be paid or refunded by the Common Carrier, hotel, agent or any other provider of travel and/or accommodation;
- c. Any loss of Valuables, any kinds of securities or tickets;
- d. Any loss of travel funds contained in Checked-in Baggage.

#### **17. Travel with Pet**

The Company will pay to the Insured Person if he is travelling with his/her pet as detailed in the Schedule / Certificate of Insurance during the Travel Period, We will provide the following:

- a. We will reimburse the expenses incurred on the medical treatment of the Insured Person's pet if

the pet suffers an Injury due to an Accident during the Travel Period.

b. We will reimburse the costs incurred on additional travel and accommodation expenses by the Insured Person if the Insured Person's journey is cancelled or curtailed due to the Insured Person's pet suffering death or an Injury due to an Accident, during the Coverage Period.

provided:

- a. The Injury caused to the Insured Person's pet must be so disabling as to reasonably cause a journey to be cancelled or curtailed;
- b. We will reimburse only those expenses that are Reasonable and Customary Charges, which are evidenced by a report issued by any practicing veterinarian;
- c. The Insured Person's pet has been validly transported and accommodated in accordance with the rules of the Common Carrier, hotel or other provider of accommodation;
- d. The Insured Person's pet is maintained by the Insured Person exclusively for company, protection, or entertainment, and not for the purposes of commerce or research;
- e. We will reimburse only those expenses that are in excess of the Deductible;
- f. We shall not be liable to make any payment in respect of expenses incurred on the treatment of any Illness or which relate to any Pre-Existing Disease.

We shall not be liable to reimburse any expenses under this coverage for:

- a. Any facts or matters of which the Insured Person was aware or should have been aware might result in the curtailment of the journey;
- b. Costs for transportation of mortal remains of the Insured Person's pet from the place of death to the residence of the Insured Person;
- c. Any loss which will be paid or refunded by hotel, agent or any other provider of accommodation.

#### **18. Inconvenience due to Non-Confirmed Ticket**

The Company will reimburse the percentage (%)/ Amount specified in the Schedule/ Certificate of Insurance towards non-refundable booking amount of the entire trip which includes Accommodations and/or Entry fees and / or events tickets if the Insured Person's waiting list ticket is not confirmed prior to the scheduled departure by the Common Carrier.

Coverage will be payable provided that the Insured Person provides Us with proof of the non-confirmation of the waiting ticket or the same is available to us directly from a reliable source in the public domain.

The Company shall not be liable to reimburse any expenses under this Coverage for:

- a. Any cancellation of the journey by the Insured Person.
- b. Any cancellation of the travel bookings by the Common Carrier.
- c. Any booking done in the period where confirmation chances predictor/given by booking provider are less than 70%.

Waiting List Ticket means that the passenger is on the waiting list and may not get a seat in the Common Carrier.

### **19. Pre-Hospitalisation**

The company shall reimburse pre-hospitalization medical expenses incurred, related to an admissible hospitalization requiring inpatient care during the Travel Period, for a fixed period as opted for by the insured and as mentioned in schedule/ Certificate of Insurance.

### **20. Post-Hospitalisation**

The company shall reimburse post-hospitalization medical expenses incurred, related to an admissible hospitalization requiring inpatient care during the Travel Period, for a fixed period as opted for by the insured and as mentioned in schedule/ Certificate of Insurance.

### **21. EMI Protection**

The Company will pay for the outstanding EMI of the Insured Person up to the limit mentioned in the Schedule/Certificate of Insurance, in case he / she is hospitalized as an inpatient due to injury/illness within Travel period and the hospitalisation is continued for more than <<7 days>>. In this case We would pay an EMI for the <<due month>>. Insured Person can opt the number of EMI's to be covered under the Policy. For the term loan EMI would be payable as per pro-rata.

### **22. Income Protection**

The Company Will pay towards the Income loss of the Insured Person as mentioned in the Schedule/Certificate of Insurance for the period, he/she is hospitalized due to injury / illness which directly/indirectly impacting the loss of Income.

Proven declared Income of subsequent months would be considered to estimate the Loss.

### **23. Loss of Checked-in Baggage**

We will reimburse the actual loss upto the limit specified in the Certificate of Insurance incurred towards the permanent and total loss or destruction of the Insured Person's Checked-in Baggage, by the Common Carrier on which the Insured Person was travelling as a passenger, during the Travel Period.

Provided,

- a. The Insured Person provides Us with written proof from the Common Carrier confirming the loss of Checked-in Baggage;
- b. The Insured Person provides Us with a written proof of ownership for any item within the Checked- in Baggage valued at more than the amount specified in the Certificate of Insurance.

We shall not be liable to reimburse any expenses for:

- a. Any loss or destruction which will be paid or refunded by the Common Carrier;
- b. Any loss of Valuables, Money, any kinds of securities or tickets;
- c. Any loss of Checked-in Baggage amounting to a partial loss or not amounting to a permanent and total loss, unless specified otherwise in the Certificate of Insurance;
- d. Any actual or alleged loss or destruction arising from detention, confiscation or distribution by customs, police or other public authorities.

## 24. Replacement and Rearrangement

The company will reimburse expenses incurred for replacement and rearrangement of Business companion to complete the original business purposes due to;

- a) Disablement of Insured Person which totally prevents him from carrying out the Insured Person's occupational duties provided that such disablement has lasted (or is proven by medical evidence to be likely to last) more than Seven (7) Days.
- b) Death of Insured Person's Immediate Family member.
- c) Compulsory quarantine, jury service or witness call of an Insured Person or Travelling Companion.
- d) Insured Person's Usual Place of Residence or Business, in India, being rendered uninhabitable 10 Days or less prior to intended travel on a Trip as a result of Accidental damage
- e) Insured Person's presence being required by the police following Burglary or attempt there at the Insured Person's Usual Place of Residence or Business.

Expenses for this Coverage shall mean, the cost incurred in -

1. To and fro fare of the replacement of the Insured Person who will perform the duties which were being undertaken by the Insured Person. Such to and fro fare will be from place of residence of such a replacement to the place where Insured Person was working.
- Or,
2. To and fro fare of the Insured Person from the place where Insured Person was working to return to his Usual Place of Residence.

Conditions: -

1. Liability under this Cover shall be admissible either for the replacement or for the Insured Person and not both
2. To and fro journey should complete within six (6) months.

## E. Exclusions

### E.i. Standard Exclusions

#### 1. Pre-Existing Diseases (Code- Excl01)

- a) Expenses related to the treatment of a pre-existing Disease (PED) and its direct complications shall be excluded until the expiry of 48 months of continuous coverage after the date of inception of the first policy with us.
- b) In case of enhancement of sum insured the exclusion shall apply afresh to the extent of sum insured increase.
- c) If the Insured Person is continuously covered without any break as defined under the portability norms of the extant IRDAI (Health Insurance) Regulations then waiting period for the same would be reduced to the extent of prior coverage.
- d) Coverage under the policy after the expiry of 36 months for any pre-existing disease is subject to the same being declared at the time of application and accepted by us.

### E.ii. Specific Exclusions



We shall not be liable to make any payment for any claim under the Policy in respect of an Insured Person, directly or indirectly for, caused by, arising from or in any way attributable to any of the following, except where provided to the contrary under any Coverages within the Policy:

- a. Suicide or attempted suicide, intentional self-inflicted Injury or acts of self-destruction, whether the Insured Person is medically sane or insane.
- b. Medical or surgical treatment except as necessary solely and directly as a result of an Accident.
- c. Certification of disability by a Medical Practitioner who shares the same residence as the Insured Person or who is a member of the Insured Person's family.
- d. Death, disability or illness directly or indirectly caused by or associated with any venereal disease or sexually transmitted disease.
- e. Death, disability or illness resulting directly or indirectly, contributed or aggravated or prolonged by childbirth or from pregnancy or a consequence thereof including ectopic pregnancy unless specifically arising due to Accident.
- f. Death, disability or illness caused by participation of the Insured Person in any flying activity, except as a bona fide passenger on a public aircraft, which is operating under a valid license from the relevant authority for the transportation of passengers.
- g. Death, disability or illness or Injury arising from or caused by ionizing radiation or contamination by radioactivity from any nuclear fuel (explosive or hazardous form) or resulting from or from any other cause or event contributing concurrently or in any other sequence to the loss, claim or expense from any nuclear waste from the combustion of nuclear fuel, nuclear, chemical or biological attack.
- h. Any change of profession after inception of the Policy which results in the enhancement of Our risk under the Policy, if not accepted and endorsed by Us on the Certificate of Insurance.
- i. Any journey where the Insured Person is travelling as a commercial driver, operator or crew member in, or carrying out any testing or repairs on a Common Carrier.
- j. Any intentional illegal or unlawful act or confiscation, detention, destruction by customs or other authorities or any breach of government regulation.
- k. Any failure to take reasonable precautions to avoid a claim under the Policy following a mass media or government issued warning.
- l. Any event arising from or caused due to use, abuse or a consequence or influence of an abuse of any substance, intoxicant, drug, alcohol or hallucinogen.
- m. Any breach of law or participation of the Insured Person in an actual or attempted felony, riot, crime, misdemeanour or civil commotion with criminal intent.
- n. Any act of foreign invasion, act of foreign enemies, hostilities, warlike operations (whether war be declared or not or while performing duties in the armed forces of any country during war or at peace time), and participation of the Insured Person in any naval, military or air-force operation, civil war, public defence, rebellion, revolution, insurrection, military or usurped power.
- o. Engaging in any Hazardous Activities, testing of any kind of Common Carrier, engaging in manual work during a journey, engaging in any offshore work activity, mining, tunnelling or

any work involving electrical installation with high tension supply, aerial photography, ammunition, explosives, firearms or flight duty, except as a fare-paying passenger.

p. Any journey commenced when You are not fit to travel or are travelling against the advice of a Medical Practitioner.

q. Any journey commenced to obtain medical care, treatment or advice of any kind whether this is the sole purpose of Your journey or not.

r. Chemical attack or weapons means the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous chemical compound which, when suitably distributed, is capable of causing any Illness, incapacitating disability or death.

s. Biological attack or weapons means the emission, discharge, dispersal, release or escape of any pathogenic (disease producing) microorganisms and/or biologically produced toxins (including genetically modified organisms and chemically synthesized toxins) which are capable of causing

any Illness, incapacitating disability or death.

t. Any generally excluded non-medical expenses as specified in the Terms and Conditions.

## **F. General Terms & Conditions**

### **F.i. Standard Terms & Conditions**

#### **1. Disclosure of Information**

The policy shall be void and all premium paid thereon shall be forfeited to the Company in the event of misrepresentation, mis-description or non-disclosure of any material fact by the policyholder.

"Material facts" for the purpose of this policy shall mean all relevant information sought by the company in the proposal form and other connected documents to enable it to take informed decision in the context of underwriting the risk.

#### **2. Fraud**

If any claim made by the insured person, is in any respect fraudulent, or if any false statement, or declaration is made or used in support thereof, or if any fraudulent means or devices are used by the insured person or anyone acting on insured person's behalf to obtain any Benefit under this policy, all Benefits under this policy and the premium paid shall be forfeited.

Any amount already paid against claims made under this policy but which are found fraudulent later shall be repaid by all recipient(s)/policyholder(s), who has made that particular claim, who shall be jointly and severally liable for such repayment to the insurer.

For the purpose of this clause, the expression "fraud" means any of the following acts committed by the insured person or by his agent or the hospital/doctor/any other party acting on behalf of the insured person, with intent to deceive the insurer or to induce the insurer to issue an insurance policy:

- a. the suggestion, as a fact of that which is not true and which the insured person does not believe to be true;
- b. the active concealment of a fact by the insured person having knowledge or belief of the fact;
- c. any other act fitted to deceive; and
- d. any such act or omission as the law specially declares to be fraudulent

The Company shall not repudiate the claim and / or forfeit the policy Benefits on the ground of Fraud, if the insured person / beneficiary can prove that the misstatement was true to the best of his knowledge and there was no deliberate intention to suppress the fact or that such misstatement of or suppression of material fact are within the knowledge of the insurer.

### 3. Redressal of Grievance

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:

Our Grievance Redressal Officer - You can send Your grievance in writing by post or email to Our Grievance Redressal Officer at the following address:

Grievance cell - In case of any grievance the insured person may contact the company through:

Website: [www.universalsompo.com](http://www.universalsompo.com)

Toll free: 1 - 800 - 224030 (For MTNL/BSNL Users) or 1 - 800 – 2004030

E-mail: [contactus@universalsompo.com](mailto:contactus@universalsompo.com)

Courier: Universal Sampo General Insurance Co. Ltd, Unit No- 601 & 602 A Wing, 6th Floor, Reliable Tech Park, Cloud City Campus; Thane- Belapur Road, Airoli- 400708

Insured person may also approach the grievance cell at any of the company's branches with the details of Grievance If Insured person is not satisfied with the redressal of grievance through one of the above methods, insured person may contact the grievance officer at [grievance@universalsompo.com](mailto:grievance@universalsompo.com)

For updated details of grievance officer, kindly refer the link [www.universalsompo.com](http://www.universalsompo.com)

Grievance may also be lodged at IRDAI Integrated Grievance Management System -

<https://igms.irda.gov.in/>

#### 1. Consumer Affairs Department of IRDAI

a.) In case it is not resolved within 15 days or if You are unhappy with the resolution You can approach the Grievance Redressal Cell of the Consumer Affairs Department of IRDAI by calling Toll Free Number 155255 (or) 1800 4254 732 or sending an e-mail to [complaints@irdai.gov.in](mailto:complaints@irdai.gov.in). You can also make use of IRDAI's online portal - Integrated Grievance Management System (IGMS) by registering Your complaint at [igms.irda.gov.in](http://igms.irda.gov.in).

b.) You can send a letter to IRDAI with Your complaint on a Complaint Registration Form available by clicking [here](#). You must fill and send the Complaint Registration Form along with any documents by post or courier to General Manager, Insurance Regulatory and Development Authority of India (IRDAI), Consumer Affairs Department - Grievance Redressal Cell, Sy.No.115/1, Financial District, Nanakramguda, Gachibowli, Hyderabad- 500032.

c.) You can visit the portal <http://www.policyholder.gov.in> for more details.

2. Insurance Ombudsman 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 [www.generalinsurancecouncil.org.in](http://www.generalinsurancecouncil.org.in), the Consumer Education Website of the IRDAI at <http://www.policyholder.gov.in>, or from any of Our Offices.

IRDAI Integrated Grievance Management System – <https://igms.irda.gov.in/>

The contact details of the Insurance Ombudsman offices are as below-

**AHMEDABAD** - Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor,

Tilak Marg, Relief Road, Ahmedabad – 380 001. Tel.: 079 - 25501201/02/05/06, Email: [bimalokpal.ahmedabad@cioins.co.in](mailto:bimalokpal.ahmedabad@cioins.co.in) (Jurisdiction: Gujarat, Dadra & Nagar Haveli, Daman and Diu.)

**BENGALURU** - Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No. 57-27-N-19, Ground Floor, 19/19, 24th Main Road, JP Nagar, 1st Phase, Bengaluru – 560 078. Tel.: 080 - 26652048 / 26652049, Email: [bimalokpal.bengaluru@cioins.co.in](mailto:bimalokpal.bengaluru@cioins.co.in) (Jurisdiction: Karnataka.)

**BHOPAL** - Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp. Airtel Office, Near New Market Bhopal (M.P.)-462 003. Tel.: - 0755-2769201/2769202

Email: [bimalokpal.bhopal@cioins.co.in](mailto:bimalokpal.bhopal@cioins.co.in) (Jurisdiction: Madhya Pradesh and Chattisgarh.)

**BHUBANESHWAR** - Office of the Insurance Ombudsman, 62, Forest Park, Bhubaneswar-751 009. Tel.: - 0674-2596461/2596455 Email: [bimalokpal.bhubaneswar@cioins.co.in](mailto:bimalokpal.bhubaneswar@cioins.co.in) (State of Odisha.)

**CHANDIGARH** - Office of the Insurance Ombudsman S.C.O. No.101, 102 & 103, 2nd Floor, Batra Building, Sector 17- D, Chandigarh-160 017. Tel.: - 0172- 2706196 / 2706468 Email: [bimalokpal.chandigarh@cioins.co.in](mailto:bimalokpal.chandigarh@cioins.co.in) [Jurisdiction: Punjab, Haryana (excluding Gurugram, Faridabad, Sonapat and Bahadurgarh), Himachal Pradesh, Union Territories of Jammu & Kashmir, Ladakh & Chandigarh.]

**CHENNAI** - Office of the Insurance Ombudsman, Fathima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI-600 018. Tel.: - 044-24333668 /24335284 Email: [bimalokpal.chennai@cioins.co.in](mailto:bimalokpal.chennai@cioins.co.in) [Jurisdiction: Tamil Nadu, PuducherryTown and Karaikal (which are part of Puducherry).]

**DELHI** - Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi-110 002. Tel.: - 011- 23232481/23213504 Email: [bimalokpal.delhi@cioins.co.in](mailto:bimalokpal.delhi@cioins.co.in) (Jurisdiction: Delhi & following Districts of Haryana - Gurugram, Faridabad, Sonapat & Bahadurgarh.)

**GUWAHATI** - Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, S.S. Road, Guwahati-781001 (ASSAM) Tel.: - 0361- 2632204 / 2602205 Email: [bimalokpal.guwahati@cioins.co.in](mailto:bimalokpal.guwahati@cioins.co.in)

(Jurisdiction: Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.)

HYDERABAD - Office of the Insurance Ombudsman, 6-2-46, 1st Floor, "Moin Court", Lane Opp. Saleem Function Palace, A.C. Guards, Lakdi-Ka-Pool, Hyderabad-500 004. Tel: 040 - 23312122 Email: bimalokpal.hyderabad@cioins.co.in (Jurisdiction: Andhra Pradesh, Telangana, Yanam and part of Union Territory of Puducherry.)

JAIPUR - Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur – 302 005 Tel: 0141-2740363 Email: bimalokpal.jaipur@cioins.co.in (Jurisdiction: Rajasthan.)

ERNAKULAM - Office of the Insurance Ombudsman, 2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard, M.G. Road, Ernakulam-682 015. Tel.: 0484-2358759/2359338 Email: bimalokpal.ernakulam@cioins.co.in (Jurisdiction: Kerala, Lakshadweep, Mahe-a part of Union Territory of Puducherry.)

KOLKATA - Office of the Insurance Ombudsman, Hindustan Building. Annexe, 4th Floor, 4, C.R. Avenue, KOLKATA 700 072. Tel.: 033-22124339/22124340 Email: bimalokpal.kolkata@cioins.co.in (Jurisdiction: West Bengal, Sikkim, Andaman & Nicobar Islands.)

LUCKNOW - Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal

Kishore Road, Hazratganj, Lucknow - 226 001. Tel.: 0522 - 2231330 / 2231331 Email: bimalokpal.lucknow@cioins.co.in (Jurisdiction: Districts of Uttar Pradesh : Lalitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar.)

MUMBAI - Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S.V. Road, Santacruz(W), Mumbai – 400 054. Tel.: 69038821/23/24/25/26/27/28/28/29/30/31, Email: bimalokpal.mumbai@cioins.co.in [Jurisdiction: Goa, Mumbai Metropolitan Region (excluding Navi Mumbai & Thane).]

NOIDA - Office of the Insurance Ombudsman, Bhagwan Sahai Palace 4th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddh Nagar, U.P - 201301. Tel.: 0120- 2514252 / 2514253 Email: bimalokpal.noida@cioins.co.in (Jurisdiction: State of Uttarakhand and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kannauj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautam Buddh nagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.)

PATNA - Office of the Insurance Ombudsman, 2nd Floor, Lalit Bhawan, Bailey Road, Patna 800 001. Tel.: 0612- 2547068 Email: bimalokpal.patna@cioins.co.in (Jurisdiction: Bihar, Jharkhand.)

PUNE - Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 3rd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune – 411 030. Tel.: 020-41312555 Email: bimalokpal.pune@cioins.co.in [ Jurisdiction: Maharashtra, Areas of Navi Mumbai and Thane (excluding Mumbai Metropolitan Region).]

The updated details of Insurance Ombudsman offices are also available at the IRDAI website [www.irdai.gov.in](http://www.irdai.gov.in), or on the website of Council for Insurance Ombudsmen [www.cioins.co.in](http://www.cioins.co.in) or on the Company's website at [www.universalsompo.com](http://www.universalsompo.com)

4. Records to be maintained The Insured shall keep an accurate record containing all relevant particulars and shall allow the Company to inspect such record. The Insured shall exercise all necessary cooperation in obtaining the medical records from the Hospital, and furnish them, as the Company may require in relation to the Claim, within reasonable time limit and within the time limit specified in the Policy.

5. Fraudulent claims If any claim is in any respect fraudulent, or if any false statement, or declaration is made or used in support thereof, or if any fraudulent means or devices are used by the Insured or anyone acting on his/ her behalf to obtain any benefit under this Policy, or if a claim is made and rejected and no court action or suit is commenced within twelve months after such rejection or, in case of arbitration taking place as provided therein, within twelve (12) calendar months after the Arbitrator or Arbitrators have made their award, all benefits under this Policy shall be forfeited

6. Policy Disputes Any dispute concerning the interpretation of the terms, conditions, limitations and/or exclusions contained herein is understood and agreed by both the Insured and the Company to be adjudicated or interpreted in accordance with the Laws of India and only competent Courts of India shall have the exclusive jurisdiction to try all or any matters arising hereunder. The matter shall be determined or adjudicated in accordance with the law and practice of such Court

#### 7. Arbitration clause

The parties to the contract may mutually agree and enter into a separate Arbitration Agreement to settle any and all disputes in relation to this policy.

Arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996.

(This clause does not apply to Group policies where premium is paid by members)

### **F.ii. Specific Terms & Conditions:**

1. Material Information: Material information to be disclosed includes every matter that You are aware of, or could reasonably be expected to know, that relates to questions in the Proposal Form/personal statement and which is relevant to Us in order to accept the risk of insurance. You must exercise the same

duty to disclose those matters to Us before the Renewal, extension, variation, endorsement of the contract We may, adjust the scope of cover and / or premium, if necessary, accordingly.

2. **Alterations in the Policy:** This Policy constitutes the complete contract of insurance. No change or alteration will be effective or valid unless approved in writing which will be evidenced by a written endorsement, signed and stamped by Us.

3. **Geography & Policy Currency:** This Policy applies to events or occurrences taking place in the Geographical Scope specified in the Schedule / Certificate of Insurance. All payments under this Policy will only be made in the currency specified in the Schedule.

4. **Grace Period & Renewal:** The Policy may be renewed by mutual consent and in such event the Renewal premium should be paid to Us on or before the date of expiry of the Policy and in no case later than the Grace Period of 30 days from the expiry of the Policy. We will not be liable to pay for any claim arising out of any event that occurred during the Grace Period. Renewals will not be denied except on grounds of misrepresentation, moral hazard, fraud, non-disclosure of material facts or non-co-operation by the Insured Person. We may, revise the Renewal premium payable under the Policy or the terms of cover, provided that all such changes are approved in accordance with the IRDAI rules and regulations as applicable from time to time. Renewal premium will not alter based on individual claims experience. We will intimate You of any such changes at least 3 months prior to date of such revision or modification.

5. **Free Look Period:** You have a period of 15 days from the date of receipt of the Policy document to review the terms and conditions of this Policy. 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 any medical check-up, stamp duty charges and proportionate risk premium. You can cancel Your Policy only if no claims have been made 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.

6. **Cancellation/Termination of the Policy (other than cancellation in the Free Look Period):**

i. You may terminate this Policy at any time by giving Us written notice, and the Policy will terminate when such written notice is received. If no claim has been made under the Policy, then We will refund premium in accordance with the table below:

**Single Trip:**

Any Policy / Certificate of Insurance issued under a Single Trip Policy or its extensions are non-cancellable and non-refundable after the commencement of Trip or if any Claim has been lodged under such Policy / Certificate of Insurance

**Annual Multi Trip:**

Any Policy / Certificate of Insurance issued under Annual Multi Trip Policy are non-cancellable and non-refundable if any Claim has been lodged under such Policy / Certificate of Insurance.

a. In the event of Cancellation of Policy / Certificate of Insurance prior to commencement of Policy / Cover, the Company will deduct INR. 200/- (Rupees Two Hundred only) towards cancellation charges before refunding the premium amount, subject to there being no Claim made under the Policy / Certificate of Insurance.

b. If Insured Person cancels the Policy / Certificate of Insurance after Policy/Cover Start date, the refund premium shall be computed in accordance with short rate table as mentioned below.

Short rate table -

Period on risk	% Refund Premium
Up to 1 month	3/4th of the annual rate
Up to 3 months	½ of the annual rate
Up to 6 months	1/4th of annual rate
Exceeding 6 months	Nil

7. **Governing Law & Dispute Resolution:** Any and all disputes or differences under or in relation to this Policy will be determined by the Indian Courts and subject to Indian law.

8. **Notices & Communications:** Any notice or communication in relation to this Policy will be in writing and if it is to:

i. You or any Insured Person, then it will be sent to You at Your address specified in the Policy Schedule and You will act for all Insured Persons for these purposes.

ii. Us, it will be delivered to Our address specified in the Policy Schedule. No insurance agents, insurance intermediaries or other person or entity is authorised to receive any notice or communication on Our behalf.

9. **Electronic Transactions:** You agree to comply with all the terms and conditions of electronic transactions as We shall prescribe from time to time, and confirm that all transactions effected facilities for conducting remote transactions such as the Internet, World Wide Web, electronic data interchange, call centres, tele-service operations (whether voice, video, data or combination thereof) or by means of electronic, computer, automated machines network or through other means of telecommunication, in respect of this Policy and claim related details, shall constitute legally binding when done in compliance with Our terms for such facilities.

10. **Assignment:** The Policy and the benefits under this Policy can be assigned in only in accordance with applicable law.

11. **Condonation of delay:** The Company may condone delay in claim intimation/ document submission on merit, where it is proved that delay in reporting of claim or submission of claim documents, is due to reasons beyond the control of the insured. Notwithstanding the above, delay in claim intimation or submission of claim documents due to reasons beyond the control of the insured shall not be condoned where such claims would have otherwise been rejected even if reported in time.



## G. Claims Procedures

The fulfillment of the terms and conditions of this Policy (including payment of premium by the due dates mentioned in the Policy Schedule) insofar as they relate to anything to be done or complied with by You or any Insured Person, including complying with the procedures and requirements in relation to claims, shall be Conditions Precedent to Our liability under this Policy.

For details on the claims procedures and requirements or any assistance during the process, We or Our Assistance Service Provider may be contacted at Our call centre on the toll free number specified in the Policy Schedule or through Our website or on the contact details specified for Our Assistance Service Provider.

a. Claims Procedure: On the occurrence of a claim or discovery of any event which may give rise to a claim under this Policy, We or Our Assistance Service Provider shall be provided with the necessary information and documentation as indicated below, in respect of the claim as soon as reasonably practicable and in any event, within 30 days of the occurrence of the event giving rise to a claim under the Policy:

Claims Documentations:

1. Accidental Death: -
  - i. Duly filled original Claim Form, Policy Copy, Claim intimation.
  - ii. Copy of Death Certificate
  - iii. FIR / Copy of General Diary Entry (in case FIR not registered by Police)
  - iv. Final Police Report / Original Panchnama
  - v. Post-mortem Report
  - vi. Medical Treatment Documents, if applicable
  - vii. Medico Legal Case, if registered
  - viii. KYC Document; one as address proof and other photo ID proof.
  - ix. NEFT Documents
  - x. Any other documents required to support the claim, or any other statement made in connection with the claim.
  
2. Permanent Total Disability: -
  - i. Duly filled original Claim Form, policy copy, claim intimation.
  - ii. FIR / Copy of General Diary Entry (in case FIR not registered by Police)
  - iii. Final Police Report / Original Panchnama
  - iv. Certificate of from government hospital doctor confirming the nature and degree of disability
  - v. Discharge summary of the treating hospital clearly indicating the Hospital Registration No.
  - vi. Diagnostic reports
  - vii. Photograph of the injured with reflecting disablement
  - viii. KYC Document; one as address proof and other photo ID proof.
  - ix. NEFT Documents
  - x. Any other documents required to support the claim, or any other statement made in connection with the claim.

3. Permanent Partial Disability: -
  - i. Duly filled original Claim Form, Policy copy, Claim Intimation
  - ii. FIR – Attested or Original
  - iii. Final Police Report / Original Panchnama
  - iv. Certificate of from government hospital doctor confirming the nature and degree of disability
  - v. Discharge summary of the treating hospital clearly indicating the Hospital Registration No.
  - vi. Diagnostic reports
  - vii. Photograph of the injured with reflecting disablement.
  - viii. KYC Document; one as address proof and other photo ID proof.
  - ix. NEFT Documents
  - x. Any other documents required to support the claim, or any other statement made in connection with the claim
  
4. Personal Accident (Common Carrier): -
  - a. Accidental Death: -
    - i. Duly filled original Claim Form, Policy copy, Claim Intimation
    - ii. Copy of Death Certificate
    - iii. FIR / Copy of General Diary Entry (in case FIR not registered by Police)
    - iv. Final Police Report / Original Panchnama
    - v. Post-mortem Report
    - vi. Medical Treatment Documents, if applicable
    - vii. Medico Legal Case, if registered.
    - viii. Confirmed Tickets/ boarding passes.
    - ix. KYC Document; one as address proof and other photo ID proof.
    - x. NEFT Documents
    - xi. Any other documents required to support the claim, or any other statement made in connection with the claim.
  
  - b. Permanent Total Disability: -
    - i. Duly filled original Claim Form, Policy copy, Claim Intimation
    - ii. FIR / Copy of General Diary Entry (in case FIR not registered by Police)
    - iii. Final Police Report / Original Panchnama
    - iv. Certificate of from government hospital doctor confirming the nature and degree of disability
    - v. Discharge summary of the treating hospital clearly indicating the Hospital Registration No.
    - vi. Diagnostic reports
    - vii. Photograph of the injured with reflecting disablement.
    - viii. Confirmed Tickets/ boarding passes.
    - ix. KYC Document; one as address proof and other photo ID proof.
    - x. NEFT Documents
    - xi. Any other documents required to support the claim, or any other statement made in connection with the claim.

- c. Permanent Partial Disability: -
  - a. Duly filled original Claim Form, Policy copy, Claim Intimation
  - b. FIR – Attested or Original
  - c. Final Police Report / Original Panchnama
  - d. Certificate of from government hospital doctor confirming the nature and degree of disability
  - e. Discharge summary of the treating hospital clearly indicating the Hospital Registration No.
  - f. Diagnostic reports.
  - g. Photograph of the injured with reflecting disablement.
  - h. Confirmed Tickets/ boarding passes.
  - i. KYC Document; one as address proof and other photo ID proof.
  - j. NEFT Documents
  - k. Any other documents required to support the claim, or any other statement made in connection with the claim
  
5. Emergency Medical Expenses
  - i. Duly filled original Claim Form, Policy copy, Claim Intimation
  - ii. Discharge card/certificate/ death certificate in original
  - iii. Itemized hospital bill in original
  - iv. Hospital and related medical expenses receipt with revenue stamp in original
  - v. Copies of prescription for diagnostic test, treatment advise, medical references etc.
  - vi. Details of the implants including the sticker indicating the type as well as invoice towards the cost of implant
  - vii. Hospital registration number/ the number of beds available with the hospital verified by the authorized signatory of the Hospital
  - viii. KYC Document; one as address proof and other photo ID proof.
  - ix. NEFT Documents
  - x. Any other documents required to support the claim, or any other statement made in connection with the claim.
  
6. Accidental Medical Expenses: -
  - i. Duly filled original Claim Form, Policy copy, Claim Intimation
  - ii. Discharge card/certificate/ death certificate in original
  - iii. Itemized hospital bill in original
  - iv. Hospital and related medical expenses receipt with revenue stamp in original
  - v. Copies of prescription for diagnostic test, treatment advise, medical references etc.
  - vi. Details of the implants including the sticker indicating the type as well as invoice towards the cost of implant
  - vii. Hospital registration number/ the number of beds available with the hospital verified by the authorized signatory of the Hospital
  - viii. KYC Document; one as address proof and other photo ID proof.
  - ix. NEFT Documents
  - x. Any other documents required to support the claim, or any other statement made in connection with the claim.

7. OPD Treatment (Accident & Sickness): -
  - i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
  - ii. Itemized hospital bill in original
  - iii. Hospital and related medical expenses receipt with revenue stamp in original
  - iv. Copies of prescription for diagnostic test, treatment advise, medical references etc.
  - v. Any other documents required to support the claim, or any other statement made in connection with the claim.
  
8. OPD Treatment (Accident Only): -
  - i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
  - ii. Itemized hospital bill in original
  - iii. Hospital and related medical expenses receipt with revenue stamp in original
  - iv. Copies of prescription for diagnostic test, treatment advise, medical references etc.
  - v. Any other documents required to support the claim, or any other statement made in connection with the claim
  
9. Hospital Daily Allowance
  - i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
  - ii. Discharge summary of the treating hospital clearly indicating the Hospital Registration No. & number of days hospitalized.
  - iii. Copies of prescription for diagnostic test, treatment advise, medical references etc.
  - iv. Any other documents required to support the claim, or any other statement made in connection with the claim
  
10. Trip Cancellation: -
  - i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
  - ii. If trip is cancelled due to medical reasons, then provide medical reports and doctor's statement.
  - iii. In case the cancellation is owing to the sickness, injury or death of a traveling companion, the original tickets of the insured and the traveling companion indicating travel to the same destination for the same dates needs to be submitted.
  - iv. If due to other insured events, police report confirming the incident shall be submitted.
  - v. Death Certificate in case of Insured Person, Insured Person's Traveling Companion, Insured Person's Spouse and/or Parent and/or Child (ren), Insured Person's Traveling Companion's Spouse and/or Parent and/or Child (ren).
  - vi. All the bills / receipts of reasonable additional expenses incurred and / or proof of cancellation charges levied by the carriers shall be submitted Copies of Correspondence with the Airline authorities / common carrier certifying about the cancellation.
  - vii. Any other documents required to support the claim, or any other statement made in connection with the claim.
  
11. Trip Delay: -

- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
  - ii. Confirmation from the common carrier, clearly mentioning the scheduled arrival time and the actual arrival time
  - iii. Copies of Correspondence with the Airline authorities certifying about the delay.
  - iv. Any other documents required to support the claim, or any other statement made in connection with the claim.
12. Missed Common Carrier: -
- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
  - ii. If Common Carrier is missed due to medical reasons, then provide medical reports and doctor's statement.
  - iii. In case the missed is owing to the sickness, injury or death of a traveling companion, the original tickets of the insured and the traveling companion indicating travel to the same destination for the same dates needs to be submitted.
  - iv. If due to other insured events, police report confirming the incident shall be submitted.
  - v. Death Certificate in case of Insured Person, Insured Person's Traveling Companion, Insured Person's Spouse and/or Parent and/or Child (ren), Insured Person's Traveling Companion's Spouse and/or Parent and/or Child (ren).
  - vi. All the bills / receipts of reasonable additional expenses incurred and / or proof of cancellation charges levied by the carriers shall be submitted Copies of Correspondence with the Airline authorities / common carrier certifying about the missed.
  - vii. Any other documents required to support the claim, or any other statement made in connection with the claim.
13. Loss of Baggage: -
- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
  - ii. Final Police Report (FIR) / Copy of General Diary Entry
  - iii. Copies of Correspondence with the Airline authorities/Common Carrier about loss of baggage.
  - iv. Details of compensation received from Airlines/Common Carrier authorities, if any.
  - v. Any other documents required to support the claim, or any other statement made in connection with the claim.
14. Damage to Baggage: -
- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
  - ii. Copies of Correspondence with the Airline authorities/Common Carrier about Damager of Baggage.
  - iii. Details of compensation received from Airlines/Common Carrier authorities, if any.
  - iv. Details with original receipt towards expenses made for repairing of damage baggage.
  - v. Any other documents required to support the claim, or any other statement made in connection with the claim.
15. Emergency Evacuation: -
- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.

- ii. Written confirmation from the Medical Practitioner certifying medically necessary treatment to be rendered.
  - iii. If due to other insured events, police report confirming the incident shall be submitted.
  - iv. Details with original receipt towards expenses incurred towards emergency evacuation.
  - v. Any other documents required to support the claim, or any other statement made in connection with the claim.
16. Repatriation of Mortal Remains: -
- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
  - ii. Funeral Certificate along with original bills/ receipt towards funeral expenses (Repatriation of Mortal Remains).
  - iii. Any other documents required to support the claim, or any other statement made in connection with the claim.
17. Emergency Hotel Accommodation: -
- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
  - ii. Medical reports and certificate from the doctor confirming hospitalization of the insured/Immediate relative, reason of hospitalization and duration of hospitalization.
  - iii. Doctor's statement specifically stating the need for an attendant.
  - iv. Details with original receipt towards expenses incurred towards emergency evacuation.
  - v. Any other documents required to support the claim, or any other statement made in connection with the claim.
18. Checked in Baggage Delay: -
- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation
  - ii. Copies of baggage tags
  - iii. Copies of Correspondence with the Airline authorities / Common carrier certifying about the delay
  - iv. Property Irregularity Report (obtained from Airline)
  - v. Original bills/receipts/invoices pertaining to expenses incurred/purchases made during the delay period.
  - vi. Any other documents required to support the claim, or any other statement made in connection with the claim.
19. Hotel Cancellation: -
- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
  - ii. Written confirmation from the Medical Practitioner certifying medically necessary treatment to be rendered.
  - iii. If due to other insured events, police report confirming the incident shall be submitted.
  - iv. Death Certificate in case of Insured Person, Insured Person's Traveling Companion, Insured Person's Spouse and/or Parent and/or Child (ren), Insured Person's Traveling Companion's Spouse and/or Parent and/or Child (ren).

- v. Confirmation from Hotel authorities towards cancellation of hotel booking and amount refunded towards cancellation, if any.
  - vi. Any other documents required to support the claim, or any other statement made in connection with the claim.
20. Compassionate Visit: -
- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
  - ii. Provide Medical reports and certificate from the doctor confirming hospitalization of the insured, reason of hospitalization and duration of hospitalization
  - iii. Doctor's statement specifically stating the need for an attendant.
  - iv. Original copy of tickets for expenses incurred towards traveling.
  - v. Any other documents required to support the claim, or any other statement made in connection with the claim.
21. Fire and Allied Perils (Home Building & Contents) & Home Insurance
- First Information Report.
  - Panchnama.
  - Investigation Report by the Police.
  - Fire Brigade Report.
  - Estimate and final bills of repairers.
  - Invoices of owned articles, if required by the Company.
  - Legal opinion wherever required.
  - And any other document as may be appropriately applicable for the claims preferred under this section of the Policy.
  - Details of items lost and the values proofs
22. Key Replacement: -
- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
  - ii. Police report confirming the lost / stolen of keys shall be submitted.
  - iii. Details with original receipt towards expenses incurred towards replacement of key.
  - iv. Any other documents required to support the claim, or any other statement made in connection with the claim.
23. Electronic Equipment Cover: -
- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
  - ii. Written proof of ownership or care, custody, and control of the portable electronic equipment.
  - iii. Police report confirming the accidental damage / loss of Portable Electronic Equipment.
  - iv. Confirmation from Common carrier / hotel / other towards damage / loss of Portable Electronic Equipment.
  - v. Details with original receipt towards expenses incurred towards replacement of Portable Electronic Equipment.
  - vi. Any other documents required to support the claim, or any other statement made in connection with the claim.

24. Loss of baggage and Personal Effects: -

- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
- ii. Written proof from accommodation management or common carrier management towards care, custody, and control of Personal effects with proof of such loss.
- iii. Police report confirming the accidental damage / loss occurred.
- iv. Details with original receipt towards expenses incurred towards replacement of personal effects.
- v. Any other documents required to support the claim, or any other statement made in connection with the claim.

25. Return of Minor Child: -

- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
- ii. Provide Medical reports and certificate from the doctor confirming hospitalization of the insured, reason of hospitalization and duration of hospitalization.
- iii. Original copy of tickets for expenses incurred towards traveling.
- iv. Any other documents required to support the claim, or any other statement made in connection with the claim.

26. Assistance Services – As per Requirement from Network Provider.

27. Loss of Tickets: -

- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
- ii. Police report confirming the insured event / loss / damage of original tickets.
- iii. Confirmation of Airlines / common carrier towards regeneration of ticket / rearrangement of duplicate ticket.
- iv. Details with original receipt towards cost incurred towards regeneration of ticket / rearrangement of duplicate ticket.
- v. Any other documents required to support the claim, or any other statement made in connection with the claim

28. Personal Liability: -

- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
- ii. Full statement of the facts in writing.
- iii. Witness statements
- iv. Any other documents relevant to the incident, including Summons, Legal Notice etc.
- v. Any other information you would like to share with us.
- vi. Any other documents required to support the claim, or any other statement made in connection with the claim

29. Trip Interruption: -

- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
- ii. If trip is interrupted due to medical reasons, then provide medical reports and doctor's statement.



- iii. In case the interrupted is owing to the sickness, injury or death of a traveling companion, the original tickets of the insured and the traveling companion indicating travel to the same destination for the same dates needs to be submitted.
  - iv. If due to other insured events, police report confirming the incident shall be submitted.
  - v. Death Certificate in case of Insured Person, Insured Person's Traveling Companion, Insured Person's Spouse and/or Parent and/or Child (ren), Insured Person's Traveling Companion's Spouse and/or Parent and/or Child (ren).
  - vi. All the bills / receipts of reasonable additional expenses incurred towards non-refundable travel costs and / or accommodation costs.
  - vii. Any other documents required to support the claim, or any other statement made in connection with the claim
30. Hijack: -
- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
  - ii. Full statement of the facts in writing.
  - iii. Airline / Common carrier correspondence (copy of Passenger List etc.)
  - iv. Copy of ticket / Boarding Pass.
  - v. Any other documents required to support the claim, or any other statement made in connection with the claim
31. Ambulance Transportation Cover: -
- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
  - ii. Medical reports and certificate from the doctor confirming transportation of insured person by ambulance was medically necessary due to Injuries suffered due to an accident.
  - iii. Doctor's statement specifically stating the need for an attendant.
  - iv. Details with original receipt towards expenses incurred towards transportation through ambulance.
  - v. Any other documents required to support the claim, or any other statement made in connection with the claim.
32. Pre-Existing Disease Waiver – Same As Hospitalisation Documents.
33. Physiotherapy: -
- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
  - ii. Medical reports and certificate from the doctor confirming physiotherapy sessions.
  - iii. Doctor's statement specifically stating the need for physiotherapy.
  - iv. Details with original receipt towards expenses incurred towards physiotherapy.
  - v. Any other documents required to support the claim, or any other statement made in connection with the claim.
34. Dependent Child Education: -
- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
  - ii. Death Certificate of the Insured.

- iii. Copy of Educational Institute ID proof of insured's child.
  - iv. Copy of Fee Receipt of Educational Institute of insured's child.
  - v. Any other documents required to support the claim, or any other statement made in connection with the claim.
35. Missed Event: -
- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
  - ii. If event is cancelled due to medical reasons, then provide medical reports and doctor's statement.
  - iii. In case the cancellation is owing to the sickness, injury or death of a traveling companion, the original tickets of the insured and the traveling companion indicating travel to the same destination for the same dates needs to be submitted.
  - iv. If due to other insured events, police report confirming the incident shall be submitted.
  - v. Death Certificate in case of Insured Person, Insured Person's Traveling Companion, Insured Person's Spouse and/or Parent and/or Child (ren), Insured Person's Traveling Companion's Spouse and/or Parent and/or Child (ren).
  - vi. All the bills / receipts of reasonable additional expenses incurred and / or proof of cancellation charges levied by the carriers shall be submitted Copies of Correspondence with the Airline authorities / common carrier certifying about the cancellation.
  - vii. Any other documents required to support the claim, or any other statement made in connection with the claim.
36. Emergency Cash: -
- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
  - ii. Confirmation from Common carrier / hotel / other towards any compensation or refund received, if any.
  - iii. Copy of FIR/ Police Report with details of actual loss.
  - iv. Full statement of the facts in writing.
  - v. Any other documents required to support the claim, or any other statement made in connection with the claim
37. Travel with Pet: -
- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
  - ii. Written confirmation from the practicing veterinarian certifying the disabling to travel.
  - iii. Written confirmation from the practicing veterinarian certifying the injury or death due to accident.
  - iv. Details with original receipt towards medical expenses incurred towards medical treatment.
  - v. Details with original receipt towards expenses incurred for additional travel, accommodation expenses, trip cancellation or curtailed.
  - vi. Any other documents required to support the claim, or any other statement made in connection with the claim.
38. Inconvenience due to Non-Confirmed Ticket: -

- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation.
  - ii. Proof of non-confirmation of the waiting ticket booked through public domain.
  - iii. Any other documents required to support the claim, or any other statement made in connection with the claim.
39. Pre-Hospitalization: -
- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation
  - ii. Copy of Discharge card/certificate.
  - iii. Itemized medical bill in original.
  - iv. Hospital and related medical expenses receipt with revenue stamp in original.
  - v. Copies of prescription for diagnostic test, treatment advise, medical references etc.
  - vi. Any other documents required to support the claim, or any other statement made in connection with the claim
40. Post-Hospitalization: -
- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation
  - ii. Copy of Discharge card/certificate.
  - iii. Itemized medical bill in original.
  - iv. Hospital and related medical expenses receipt with revenue stamp in original.
  - v. Copies of prescription for diagnostic test, treatment advise, medical references etc.
  - vi. Any other documents required to support the claim, or any other statement made in connection with the claim.
41. EMI Protection: -
- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation
  - ii. Copy Discharge card/certificate.
  - iii. Copy of all treatment Papers & Discharge summary.
  - iv. Loan EMI statement/details with exact EMI amount
  - v. Any other documents required to support the claim, or any other statement made in connection with the claim.
42. Income Protection: -
- i. Duly filled original Claim Form, NEFT & KYC documents, Policy copy, Claim Intimation
  - ii. Copy Discharge card/certificate.
  - iii. Copy of all treatment Papers & Discharge summary.
  - iv. Certificated copy of confirmation declaring income of subsequent months.
  - v. Any other documents required to support the claim, or any other statement made in connection with the claim.

**\*\*Please note above list is only indicative. We may call for additional documents/information or may arrange for our representative to verify the facts of the case if required.**

All claims will be investigated (as required) and settled in accordance with the applicable regulatory guidelines, including the IRDAI (Protection of Policyholders Interests) Regulations, 2017.

In case of delay in payment of any claim that has been admitted as payable by Us under the Policy, beyond the time period as prescribed under IRDAI (Protection of Policyholders Interests) Regulations,

2017, We shall pay interest at a rate which is 2% above the bank rate where “bank rate” shall mean the bank rate fixed by the Reserve Bank of India at the beginning of the financial year in which claim has fallen due.