

Eye Wear Insurance Policy Policy Wordings

Preamble

In consideration of Your (Insured/ Insured beneficiary/Group Administrator) having paid the premium for the policy period as stated in the Schedule or for any further period of insurance for which We may accept the payment for renewal of this Policy, We will indemnify You in respect of Loss or Damage to the interests insured by any accidental and fortuitous causes, unless specifically excluded, during the Period of Insurance provided that all the terms, conditions and exceptions of this Policy in so far as they relate to anything to be done or to be complied with by You have been met.

This policy is evidence of the contract between You and Universal Sompo General Insurance Company Limited (We/Us/Our/Company). The information furnished by You in the proposal form and the declaration signed by You thus forms the basis of this contract.

The Policy, the Schedule and any Endorsement shall be read together and any word or expression to which a specific meaning has been attached in any part of this Policy or of Schedule shall bear such meaning wherever it may appear.

Definition

1. **Accidental Damage** means damage or breakage of Eye wear items insured that occurs suddenly as result of a sudden, unforeseen and involuntary event caused by external and visible and violent means
2. **Certificate of insurance** Means the certificate issued to You under the Group/Master Policy, which contains details such as the Group/Master Policy number, name and Your address, description of the items covered and other details.
3. **Cosmetic Repair** means to improvise the look and feel of the spectacle, which is in working condition, like replacing the frame without any damage, antiglare coating and the similar likes.
4. **Deductible / Excess** means an amount / a percentage of overall admissible claims that will be deducted from each and every claim
5. **Eyewear** - Spectacles, Lenses & Sunglasses
6. **Group**: A group should consist of persons who assemble together with a commonality of purpose or engaging in a common economic activity like employees of a company. It includes non employer–employee groups, like members of employee welfare associations, holders of credit/debit cards issued by a specific company, customers of a particular business where insurance may also be offered as an add on benefit, borrowers of a bank/ financial companies/ co-operative societies, professional associations or societies
7. **Group/Master Policy** means the policy issued to the Insured, containing the terms and conditions of the coverage available under the Policy, and under which, Certificate(s) of Insurance shall be issued.
8. **Group Administrator**

Means the Organization/Entity/Group Manager as named in the Policy Schedule who has concluded this Policy Contract with Us on a Group insurance basis

9. Insured

Means the name of the insured, as contained in the Schedule/Certificate of Insurance

10. Insured Beneficiary

It Means members covered under the Group/Master Policy

11. Market Value: represents the Replacement Value of the interest insured at time of damage or loss. This value is net off allowance for betterment, wear and tear and/or depreciation, for the use of the interest covered has been put upto

12. Proof of purchase is the original purchase receipt/ bill/ invoice provided at the point of sale. It provides details of the items purchased and provides proof of ownership

13. Policy Period

It means the period commencing on the commencement date of the Policy and terminating on the expiry date of the Policy, both days inclusive, as specified in the Schedule/ Certificate of Insurance. It is the duration for which the Policy is valid and the Insured is liable to make a claim subject to the terms and conditions as specified under this Policy.

14. Policy: Policy wording, the Schedule/ Certificate of Insurance, the Proposal form and Endorsement / Memoranda and additional benefits provided/enhanced if any

15. Reinstatement Value – means to indemnify insured with the proposed item to its original position which was prior to the loss or damage.

16. Replacement Value means the value of replacing the insured items as new at the time of damage with Eyewear of same and/or similar specifications.

17. Schedule: The document which describes You, the cover that applies, the Period of Insurance and other details of Your policy

18. Sum Insured: It means the monetary amount shown against each item under the Schedule/ Certificate of Insurance which shall be Our maximum liability

19. Spectacles means the prescriptive vision corrective glasses/ prescriptive vision corrective sunglasses/Sunglasses / clear lens glasses or non-prescription glasses, with the frames purchased as per Your original purchase receipt/bill/ invoice and as specified in the Policy Schedule/ Certificate of Insurance

20. Accessories means spectacles chain / cord, lens cleaner, lens cleaner solution, spectacle cases, sun clips / flip ups etc.

21. Sports Glasses comprises of frames and lenses that are designed to be shatterproof and to take an impact to protect the eye or surrounding area of eye that would otherwise strike the eyes or the surrounding area. Sports glass often feature polycarbonate lenses and the arms that rest on the ears are often made from rubber that will prevent the glass from moving and are specifically designed for sports activities like swimming, diving, racing, etc.

22. Total Loss/ BER (Beyond Economic Repair)

Your asset/item will be deemed a Total loss/ BER (Beyond Economic Repair) if the eyewear is damaged beyond repair or the cost of repair is more than 75% of Sum Insured, insurer will indemnify to the extent of Sum Insured.

23. We/Us/Our/Company: Universal Sampo General Insurance Company Limited

24. You/Your: The person (s) named as Insured in the Schedule/Certificate of Insurance

Scope of Cover

In consideration of payment of premium by You, it is hereby agreed and declared that notwithstanding anything to the contrary as contained in the Policy, the Company hereby undertakes to indemnify You from loss or damage caused to any of the items purchased under this cover

We shall indemnify loss or damage to Spectacles, Lenses & Sunglasses. Basis of Sum Insured would be the Replacement Value of such items, as mentioned in the Schedule/ Certificate of Insurance.

Our total liability to indemnify the Insured for each item shall not exceed the Sum Insured as specified against each such item in the Schedule /Certificate of Insurance

COVERAGE	EXCLUSIONS
<p>We shall cover the loss or damage to Eyewear due to any of the below events as selected by You:</p> <ul style="list-style-type: none"> • Fire and allied perils <ul style="list-style-type: none"> ○ Fire ○ Lightning ○ Explosion / Implosion ○ Aircraft damage ○ Riot, Strike and Malicious Damage ○ Storm, Cyclone, Typhoon, Tempest, Hurricane, Tornado, Flood and Inundation ○ Impact damage by any Rail/ Road vehicle or animal by direct contact not belonging to or owned by insured. ○ Bursting and/or overflowing of Water Tanks, Apparatus and Pipes ○ Subsidence and Landslide including Rock slide ○ Missile Testing operations 	<ol style="list-style-type: none"> 1. Eyewear older than a year unless agreed by the insurer 2. Damage due to mishandling or carelessness on the user's part 3. Any defects for which the manufacturer or supplier is liable 4. A claim resulting from improper handling, dismantling, fitting, adjustment, repair, alteration, or replacement carried out by anyone other than manufactures and/or the agents (retail franchisee) of manufactures 5. Overheating or due to chemical reactions. 6. Replacement of the Spectacles/lens due to a change in your prescription 7. Any damage caused by placing or using the insured items in a location or environment that is not in accordance with the manufacturer's instructions. 8. Sport glasses, accessories & any embedded valuable/jewellery along with eyewear shall not be covered unless agreed by the insurer 9. Any losses within the scope of manufacturer's warranty are excluded from the scope of cover. 10. Transferring of interest in this Policy to anyone else is not permitted 11. Loss registered due to normal wear and tear from normal usage 12. Aesthetic damages which do not affect the functioning of the item, including but not limited to dents, scratches on painted, polished, or enamelled surfaces, and broken plastic on ports and antennae 13. Any unexplained or mysterious disappearance of the Insured item

COVERAGE	EXCLUSIONS
<ul style="list-style-type: none"> ○ Leakage from Automatic Sprinkler Installations ○ Bush Fire ● Accidental Damage ● Burglary including theft <p><u>Limit of Liability:</u> - Our maximum liability in respect of each item shall be the Sum Insured as mentioned in the policy schedule/certificate of insurance.</p>	<ol style="list-style-type: none"> 14. Infidelity of and/or Theft by employees, servants, or household staff of the Insured 15. Damage due to moths, vermin, mildew or inherent defect, wear and tear, gradually operating cause 16. Loss due to theft of the insured item from an/any unattended vehicle 17. Loss due to theft in connivance with You or Your family 18. Loss directly or indirectly occasioned by or happening through or in consequence of war, Invasion act of foreign enemy, hostilities (whether war be declared or not), Civil war, rebellion, revolution, insurrection, Military or usurped power, Confiscation, nationalisation, or any such action 19. Loss or damage due to any action from Public Authority 20. Nuclear and nuclear group of perils 21. Any type of Cosmetic repairs, scratching, discoloration, wear and tear or gradual deterioration of the eyewear, from whatever cause. Any claim arising from willful act 22. Consequential loss of any nature 23. Terrorism cover is excluded from scope of cover unless agreed by the Insurer.

Basis Of Sum Insured

Basis of Sum Insured would be Replacement Value of such eyewear.

Jurisdiction – within India only

Coverage – India & Worldwide (As specified in policy schedule)

Depreciation :

For the purpose of claim settlement following is the depreciation chart for all the items insured as mentioned in the policy schedule/ Certificate of Insurance

Age	Depreciation %
0-3 months	10%
3-6 months	20%
6-9 months	30%
9-12 months	40%
Exceeding 12 months	50%

Above depreciation chart will be applicable for all Eyewear's unless separately as specified in the schedule / Certificate of Insurance.

Deductible/Excess:

The insured may opt for an excess on claim in which the discount will be as follows:

Excess	Discount on premium
5% of claim amount	5%
10% of claim amount	10%
15% of claim amount	15%
20% of claim amount	20%
25% of claim amount	25%

Special Conditions

1. Reinstatement of Sum Insured

In case of partial loss claim, the Sum Insured on the item will be automatically reinstated to original value by payment of additional premium. In case of total loss for any one article, the coverage for the said item will automatically cease and You will not be allowed refund of premium for the remainder of the policy period.

2. Basis of Indemnity

We may at our option reinstate, replace, or repair the property damaged or pay the amount of Loss/damage.

The basis of settlement will be as agreed at the time of insurance.

Basis of settlement shall be as below unless varied specifically in writing:

i) For Partial Loss- Reinstatement or repair cost; (Depreciation will be applicable for parts with limited life)

In case, We decide to exercise Our option of Reinstatement We shall not be bound to reinstate exactly or completely but only as the circumstances permit and in reasonably sufficient manner and in no case to expend more in Reinstatement than it would cost to reinstate such property as it was at the time of occurrence of such damage, nor more than the Sum Insured thereon.

ii) For Total Loss/BER(Beyond Economic Repair) - Market Value (i.e. the Replacement Value of the insured items as new at the time of damage less due allowance for betterment, wear and tear and/or depreciation).

iii) If the insured item shall at the time of any loss or damage be collectively of greater value than the Sum Insured thereon, then You shall be considered as being Your own insurer for the difference and shall bear a rateable proportion of the loss. Every such insured item (if more than one) insured under the Policy shall be separately subject to this condition.

3. Underinsurance

The Sum Insured for each insured item must be sufficient to pay for Reinstatement/Replacement of that insured item as on the date of loss. If the Reinstatement/Replacement Value of the insured item, in totality, including additions, alterations, and new acquisitions, is more than the Sum Insured, it amounts to

underinsurance, and will thus reduce proportionate to the difference from the amount that We will pay for Your claim.

Every item of Insured Property is subject to this condition separately.

4. **Pair and Sets clause**

Where any insured item consists of articles in a pair or set, this Policy is not to pay more than the value of any particular part or parts which may be lost without reference to any special value which such article(s) may have as part of such pair or set nor more than a proportionate part of such pair or set.

Every policy/certificate will be subject to pair and sets clause unless specifically agreed upon by Us

General Conditions

1. **Notice:**

Every notice and communication to Us required by or in respect of this policy shall be in writing.

2. **Reasonable care:**

You must take all reasonable steps to protect the interest insured, prevent damage or accidents, and maintain the interest insured in a sound condition.

3. **Mis-description:**

This Policy shall be void and premium paid shall be forfeited in the event of misrepresentation, mis-description, or non-disclosure of any material facts in the proposal form, by You or Your representative.

4. **Cancellation**

We may cancel this Policy by sending 15 days' notice in writing by recorded delivery to You at Your last known address. You will then be entitled to a pro-rata refund of premium for the un-expired period of this Policy from the date of cancellation, which We are liable to pay on demand.

You may cancel this Policy by sending a written notice to Us. Retention premium for the period We were on risk will be calculated based on following short period table and the balance will be refunded to You subject to the condition that no claim has been preferred on Us:

Time for which Policy in force	Refund of Premium
For a period not exceeding 15 days	90% of the Annual rate
For a period not exceeding 1 month	85% of the Annual rate
For a period not exceeding 2 months	70% of the Annual rate
For a period not exceeding 3 months	60% of the Annual rate
For a period not exceeding 4 months	50% of the Annual rate
For a period not exceeding 5 months	40% of the Annual rate
For a period not exceeding 6 months	30% of the Annual rate
For a period not exceeding 7 months	25% of the Annual rate
For a period not exceeding 8 months	20% of the Annual rate
For a period not exceeding 9 months	15% of the Annual rate
For a period exceeding 9 months	Nil

5. Fraud

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 You or anyone acting on Your behalf to obtain any such benefits under this policy or if loss or damage be occasioned by the wilful act or with Your connivance, all benefits under this policy shall be thus forfeited

6. Contribution

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 You or by any other person on Your behalf covering the same property, We shall not be liable to pay or contribute more than its rateable proportion of such loss.

7. Subrogation:

You shall at our expense do or concur in doing or permit to be done all such acts and things that may be necessary or required or reasonably required by Us for the purpose of enforcing any rights and remedies for obtaining relief or indemnify from the other parties, to which We shall be or would become entitled or subrogated upon and/or our paying or making good any such loss or damage under this Policy, whether such acts and things shall be or become necessary or required before or after and We shall indemnify Your loss or damage

8. Arbitration

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 policies bought by individuals and to Group policies where premium is paid by members)

9. Disclaimer Clause

If We shall disclaim Our liability in any claim, and such claim shall not have been made the subject matter of a suit in a court of law within 12 months from the date of disclaimer, then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable under this Policy.

10. Currency of Settlement:

All claims under this policy shall be settled in Indian Rupees only.

11. Renewal:

We agree to renew the policy on payment of the renewal premium. However, We do retain Our right not to renew the policy on any ground, more particularly on account of fraud, misrepresentation, or suppression of any material fact either at the time of taking the policy or any time during the currency of the earlier policies and on account of bad moral hazard. Renewal will be based on underwriting approval.

12. Consideration: This policy is issued subject to payment of premium in advance. No payment shall be valid unless made under our official receipt. The cover shall not be valid prior to the date and time of receipt of premium

Claims Procedures

The following procedures must be adhered to in the event that an irregularity occurs that might give rise to a loss and/or a claim under this Insurance.

1. Immediate Notice

Immediate claim notification must be given to Us on happening of a loss.

Checklist of documents:(Indicative)

- Fully completed and signed Claim form
- Photograph of the item/product/commodity claimed under the alleged incident.
- Copy of FIR lodged or acknowledgment by Police Authorities in case of theft/Burglary/ Riot/Strike.
- Invoice or Proof of Purchase for the alleged product/commodity claimed with payment details.
- Authorised repairer/service engineer's report along with the estimated cost of repair/replacement.
- Letter of Indemnity from Insured duly notarized in case loss value exceeds 1 Lakh.
- CKYC, Bank Mandate form, Cancelled cheque copy
- Any other

Note: Actual requirement shall be defined case specific by the deputed surveyor/insurer depending on the case merits.

Contact Details:

- **Website:** www.universalsompo.com
- **Toll free:** 1 - 800 - 224030 (For MTNL/BSNL Users) or 1 - 800 – 2004030
- **E-mail:** 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

Grievances:

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

Toll free: 1 - 800 - 224030 (For MTNL/BSNL Users) or 1 – 800-200-4030

E-mail: 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

For updated details of grievance officer, kindly refer the link 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. You can also make use of IRDAI's online portal - Integrated Grievance Management System (IGMS) by registering Your complaint at 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, or of the General Insurance Council at 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- please check for the latest list of insurance ombudsman office on Insurance ombudsman official site: <https://www.cioins.co.in/Ombudsman>)

Areas of Jurisdiction	Office of the Insurance Ombudsman
Gujarat, Dadra & Nagar Haveli, Daman and Diu.	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
Karnataka.	BENGALURU Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No. 57-27-N-19 Ground Floor, 19/19, 24th Main Road, JP Nagar, Ist Phase, Bengaluru –

		560 078. Tel.: 080 - 26652048 / 26652049 Email: bimalokpal.bengaluru@cioins.co.in
Madhya Chattisgarh.	Pradesh	BHOPAL 1st floor," Jeevan Shikha", 60-B,Hoshangabad Road, Opp. Gayatri Mandir, Bhopal – 462 011 Tel.: 0755 - 2769201 / 2769202 Fax: 0755 - 2769203 Email: bimalokpal.bhopal@cioins.co.in
Odisha		BHUBANESHWAR Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar – 751 009. Tel.: 0674 - 2596461 /2596455 Fax: 0674 - 2596429 Email: bimalokpal.bhubaneswar@cioins.co.in
Punjab, Haryana, Himachal Jammu & Chandigarh.	Pradesh, Kashmir,	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 Fax: 0172 - 2708274 Email: bimalokpal.chandigarh@cioins.co.in
Tamil Pondicherry Town and Karaikal (which are part of Pondicherry).	Nadu,	CHENNAI Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, Chennai – 600 018. Tel.: 044 - 24333668 / 24335284 Fax: 044 - 24333664 Email: bimalokpal.chennai@cioins.co.in
Delhi.		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
Assam, Meghalaya, Manipur, Mizoram, Arunachal Nagaland and Tripura.	Pradesh,	GUWAHATI Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati – 781001(Assam). Tel.: 0361 - 2632204 / 2602205 Email: bimalokpal.guwahati@cioins.co.in
Andhra Telangana, Yanam and part of Territory of Pondicherry.	Pradesh,	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

Rajasthan.	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
Kerala, Lakshadweep, Mahe-a part of Pondicherry.	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
West Bengal, Sikkim, Andaman & Nicobar Islands.	KOLKATA Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 7th Floor, 4, C.R. Avenue, Kolkata - 700 072. Tel.: 033 - 22124339 / 22124340, Fax : 033 - 22124341 Email: bimalokpal.kolkata@cioins.co.in
Districts of Uttar Pradesh : Laitpur, 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.	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
Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane.	MUMBAI Office of the Insurance Ombudsman, 3 rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 022 - 69038821/23/24/25/26/27/28/28/29/30/31 Email: bimalokpal.mumbai@cioins.co.in
State of Uttaranchal and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj,	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

Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.	
Bihar, Jharkhand.	PATNA Office of the Insurance Ombudsman, 2nd Floor, Lalit Bhawan, Bailey Road, Patna 800 001. Tel.: 0612-2547068 Email: bimalokpal.patna@cioins.co.in
Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region.	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