

CUSTOMER INFORMATION SHEET

This document provides only key information about your policy. Please refer to the policy document for detail terms and conditions.

Incured None	MR/Ms. XXXXXX
Insured Name	XXXXXXX

Sr.	Title	Description	Policy Clause Number
No		(Please refer to applicable Policy Clause Number in next column)	
1.	Name of Insurance Product	Standalone Motor Third Party Insurance – Miscellaneous Vehicle	Not Applicable
2.	Unique Identification Number (UIN) allotted by IRDAI	IRDAN134RP0004V01202122	Not Applicable
3.	Structure	Indemnity Basis: Section I Liability to Third Parties Benefit Basis: Section II Personal Accident Cover for Owner-driver	Section I – Liability to Third Parties Section II - Personal Accident Cover For Owner- Driver
4.	Interests Insured	 Liability to Third Party arising out of use of the insured vehicle Personal Accident Cover for Owner- Driver of the Insured Vehicle 	Section I – Liability to Third Parties Section II - Personal Accident Cover For Owner- Driver
5.	Sum Insured / Motor Insured Declared Value Scope	Section I- Liability to Third Party For Third Party Death / bodily injury – No Limit (Motor Accidents Claim Tribunal decides the third-party insurance claim amount)	Section I – Liability to Third Parties
		Section II - Personal Accident Cover For Owner-Driver (if Opted a shown in the Policy Schedule): Benefit payment up to 15 Lakhs basis below scale Nature of injury Scale of	Section II - Personal Accident Cover For Owner- Driver



			Compensation	
		i) Death	100%	
		ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye	100%	
		iii) Loss of one limb or sight of one eye	50%	
		iv) Permanent Total Disablement from injuries other than named above	100%	
		Third Party Property Damage- Rs.6000/Rs. 7.5 lakhs		
		PA Cover (other than Owner Driver)- Upto 2 lakh		
6.	Policy Coverage	 Liability To Third Parties We will indemnify against legal liabilities with respect arising out of accident of insured vehicle: a) Death of or bodily injury to any person including occident vehicle (provided such occupants are not careward) but except so far as it is necessary to meet of Motor Vehicles Act, the Company shall not be lideath or injury arises out of and in the course of the such person by the insured. b) Damage to property of the third party other than put to the insured or held in trust or in the custody Insured. c) Legal liability for death or bodily injury to extravelling/getting in or alighting from insured's vehicd driver) Personal accident cover for owner-driver (if opted and Policy Schedule) We will compensate for bodily injury/ death sustained be driver of the vehicle up to Rs. 15 lakhs during any one prinsurance. 	cupants carried in arried for hire or the requirements iable where such the employment of the roperty belonging or control of the employees whilstele (including paid and shown in the ty the owner-	Section I – Liability to Third Parties Section II - Personal Accident Cover For Owner- Driver



7.	Add on Cover	Nil	Not Applicable
8.	Loss Participation	Value as applicable Compulsory deductible Voluntary deductible	Endorsements
9.	Exclusions	SECTION II PERSONAL ACCIDENT COVER FOR OWNER-DRIVER The Company shall not be liable to pay in respect of death or bodily injury directly or indirectly wholly or in part arising or resulting from or traceable to (1) intentional self injury suicide or attempted suicide physical defect or infirmity or (2) an accident happening whilst such person is under the influence of intoxicating liquor or drugs.	Section II - Personal Accident Cover For Owner- Driver
		 General Exclusions Any claim arising out of any contractual liability; Any accidental loss or damage and/or liability caused sustained or incurred whilst the vehicle insured herein is being used otherwise than in accordance with the 'Limitations as to Use' or being driven by or is for the purpose of being driven by him/her in the charge of any person other than a Driver as stated in the Driver's Clause. 	General Exclusions



- 3. Except so far as is necessary to meet the requirements of the Motor Vehicles Act, the Company shall not be liable in respect of death arising out of and in the course of employment of a person in the employment of the insured or in the employment of any person who is indemnified under this policy or bodily injury sustained by such person arising out of and in the course of such employment
- 4. Except so far as is necessary to meet the requirements of the Motor Vehicles Act, the Company shall not be liable in respect of death or bodily injury to any person (other than a passenger carried by reason of or in pursuance of a contract of employment) being carried in or upon or entering or mounting or alighting from the Motor Vehicle at the time of the occurrence of the event out of which any claim arises
- 5. The Company shall not be liable in respect of any liability directly or indirectly or proximately or remotely occasioned by contributed to by or traceable to or arising out of or in connection with War, Invasion, the Act of foreign enemies, hostilities or warlike operations (whether before or after declaration of war), Civil War, Mutiny, Rebellion Military or usurped power or by any direct or indirect consequences of any of the said occurrences and in the event of any claim hereunder, the Insured shall prove that the accident, loss, damage and/or liability, arose independently of and was in no way connected with or occasioned by or contributed to by or traceable to any of the said occurrences or any consequences thereof and in default of such proof, the Company shall not be liable to make any payment in respect of such a claim
- 6. The Company shall not be liable in respect of any liability directly or indirectly caused by or contributed to by or arising from nuclear weapons material.



10	Special Conditions and Warranties (if any)	NIL			Not Applicable
11	Admissibility of Claim	party. 2. Claim will be admissible only if you have recei mounting into/dismounting it as a co-driver. The Third Party should	dental bodily injury or of under Personal Accid wed accidental boding from the vehicle in lodge a FIR at the local settled in a Motor must file a case at the n: s. These figures are	damage to property of third ent Cover for Owner Driver ly injury while driving or sured or whilst traveling in cal police station. All third-Accident Claims Tribunal e local tribunal.	Section: Claims Procedure
		Nature of Injury Death	Scale of Compensation 100%		
		Loss of Two Limbs or sight of two eyes or one limb and sight of one eye.	100%		



		Loss of one limb or sight of one eye.	50%		
		Permanent total disablement from injuries other than named above	100%		
12	Policy Servicing - Claim Intimation and Processing	The insured/ claimant may Policy Servicing – Claim Toll free numbers: 18 number: 1800-267-4 Website: www.unive Pulz app from Play S LIABILITY TO THIRD P Give immediate write accident to third part company may required to the same time, you relevant documents On receipt of intime advocate from the company may	Intimation and Servicing 300-22-4030 / 1800-200030 realsompo.com Store ARTIES CLAIM PROCEST Within 30 days. Find and documentary experience for future action. Four should be submitting and information about the submitted and information and submitted and submi	ng i0-4030, Senior citizen EESS ance company about an evidence as the insurance g a claim form along with the third-party victim. If EC Court, a competent pe appointed.	Section: Claims Procedure
		to be duly informed documents. • No offer or promise	to the insurance comp	taining to the said accident any along with received ured to third party without any.	



Personal Accident Cover For Owner-Driver

• Turn-around time (TAT) for claim settlement:

Investigator appointment- within 24hrs from Claim Intimation
Investigator First Visit- within 24hrs of Investigator appointment
Investigators report submission- within 15 days from Date of First Visit.
Settlement / Claim decision- within 7 days from date of receipt of Last
Document

<u>Claim Payment to Nominee / Legel Hier</u> –Claims shall be settled within 15 days of receipt of the last relevant and necessary document.

Claim Procedure

- 1. Intimate the claim through the various channels available for intimation.
- 2. Submit duly filled and signed claim form by Nominee / Legel Hier. Please mention the correct cause of loss.
- 3. Loss falling within the definition of named peril in the policy will be covered for any insurance claim.
- 4. Furnish all information and documentary evidence as required.
- 5. The Company will appoint Investigator immediately after receipt of intimation for Facts Finding.
- 6. The investigator will visit to Person who intimate the claim for facts finding.
- 7. In case of Permanent Total Disablement as per Policy Terms / Deathimmediately inform the police authorities and Insurance company as well

Escalation Matrix when TAT is not satisfied

For lack of a response or if the resolution still does not meet your expectations, you can write to

☐ Level 1: contactclaims@universalsompo.com



		□ Level 2- grievance@universalsompo.com □ Level 3- gro@universalsompo.com	
13	Grievance Redressal and Policyholders Protection	The Company is committed to extend the best possible services to its customers. However, if you are not satisfied with our services and wish to lodge a complaint, please feel free to contact us through: Toll Free @ 1-800-224030/1-800-2004030 Email of Grievance Redressal Officer at Contactus@universalsompo.com Write to us at (courier/ post): Unit No. 601 & 602, 6th Floor, Reliable Tech Park, Thane- Belapur Road, Airoli, Navi Mumbai, Maharashtra - 400708 Visit the Servicing Branch mentioned in the policy Document Insurance Ombudsman If You are still not satisfied with the redressal of grievance through above methods, you may also approach the office of Insurance Ombudsman of the respective area/region for redressal of grievance as per Insurance Ombudsman Rules 2017. Details of the offices of the Insurance Ombudsman are available at IRDAI website www.irdai.gov.in or General Insurance Council website https://www.cioins.co.in/ombudsman or on company website www.universalsompo.com. Grievance may also be lodged at IRDAI Integrated Grievance Management System (https://bimabharosa.irdai.gov.in/)	Section: Grievances



Declaration by the Policyholder;

	I have r	ead the	above	and	confirm	having	noted the	e details
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Place:

Date: (Signature of the Policyholder)

Universal Sompo General Insurance Suraksha, Hamesha Aapke Saath
Please read carefully the Customer Information Sheet (CIS) of your policy and acknowledge having received and noted the contents. Your acknowledgement will be deemed if no response is received within 15 days.