

# POLICY WORDING

#### **Preamble**

In consideration of Your having paid the premium for the policy period 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 Loss or Damage to 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 complied with by You have been met.

This policy is evidence of the contract between you and Universal Sompo General Insurance Company Limited. The information furnished by you in the proposal form and the declaration signed by you 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. You/Your: The person (s) named as Insured in the Schedule
- 2. We/Us/Our: Universal Sompo General Insurance Company Limited
- 3. Proposal: The application form you sign for this insurance and/or any other information you give to us or which is given to us on your behalf.
- **4.** Policy: Policy wording, the Schedule, the Proposal form and Endorsement / Memoranda if any.
- 5. Schedule: The document which describes you, the cover that applies the Period of Insurance and other details of your policy.
- **6.** Sum Insured: It means the monetary amount shown against each item under the Schedule which shall be our maximum liability.
- **7.** Period of Insurance: The time period for which the contract of insurance is valid as shown in the Policy Schedule.
- **8.** Excess/Deductible: The amount stated in the Schedule, which shall be borne by you first in respect of each and every claim made under this Policy.
- **9.** 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 to.
- **10.** Reinstatement Value represents the replacement value of the item as New at time of Damage or Loss less due allowance for betterment.



# **COVERAGE**

COVERAGE		EXCLUSIONS
Loss or Damage to interest insured by	i) Daı	mage due to moths, vermin, mildew or inherent defect, wear
any accidental & fortuitous causes,	and	d tear, gradually operating cause.
unless specifically excluded, during	ii) Da	mage during any process like bleaching, dyeing, heating,
the period of insurance	dry	ring etc
	iii) Ov	er winding denting or internal damage of watches or clocks.
<u>Limit of Liability</u> : - Our maximum	iv) Me	chanical or Electrical derangement/ breakdown of any
liability in respect of each item shall	arti	icle unless caused by accidental external means.
be the sum insured thereon or in the	v) Fire	e arms by rusting, bursting.
whole the total sum insured	vi) Da	mage due to cracking or scratching of interests such as but
	not	limited to household goods, foodstuff, domestic appliances,
	cro	ckery, glass etc
Single interest limit	vii) Los	s due to theft from any unattended vehicle.
Unless specifically and separately	viii) Los	s due to theft in connivance with you or your family
stated, our liability in respect of each	ix) Da	mage to interests with difference in intrinsic and commercial
article or pairs of articles shall not	val	ue, viz. money, securities, manuscripts, deeds, bonds, bills of
exceed 25% of the total sum insured	exc	change, promissory notes, stocks or share certificates, stamps
under this policy.	and	d travellers cheques and the like unless specifically declared
	and	d agreed to be insured.
	x) Any	y living creature.
	xi) Los	s directly or indirectly occasioned by or happening through
	or	in consequence of war, Invasion act of foreign enemy,
	hos	tilities (whether war be declared or not), Civil war, rebellion,
	rev	olution, insurrection, Military or usurped power, Confiscation,
	nat	ionalisation, or any such action
	xii) Los	s or damage due to any action from Public Authority.
	xiii) Nu	clear and nuclear group of perils.
	xiv) Coi	nsequential loss of any nature

# **SPECIAL CONDITIONS**

# 1. Reinstatement of Sum Insured

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In case of partial loss claims, the sum insured on the item will be automatically reinstated to original value. 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. 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. In case of valuables, the valuers' certificate will be required.

In case we decide to exercise our option of reinstatement We shall not be bound to reinstate exactly or completely but only as 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.

If the value of the property insured under this Policy (as of new) shall at time of Loss be greater value than the Sum Insured thereon, then you will be considered as being your own Insurer for the difference and shall bear a rateable proportion of loss accordingly. Every item more than one in the Policy, shall be separately subject to this condition.

# **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 mis-representation, mis-description or non-disclosure of any materials facts in the proposal form, by you or your representative.

# 4. Claims Procedure:

The claim would be admissible as per the coverages and the exclusions mentioned in the policy wordings.

#### **Claim Intimation**

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In the event of any circumstances likely to give rise to a claim insured must follow the following.

- a) Reporting and Lodging of complaint with the local police immediately for the loss due to Terrorism /Burglary / Theft / involvement of any third party / injury or casualty/ malicious act.
- b) Take all reasonable steps within the insured's power to recover / minimize the extent of the loss or damage.
- c) Intimate us as soon as reasonably possible. Notice of claim and registration shall be done at our Toll Free Number: 1800-22-4030/1800-200-4030. Alternatively, you can notify your claim by sending mail to <contactclaims@universalsompo.com>.
- d) While notifying your claim, please share your
- 1) policy number under which you prefer to lodge your claim,
  - 2) date of loss,
  - 3) place of loss,
  - 4) cause of loss
  - 5) estimate of your loss.
  - 6) Details of contact person with mobile no. and e- mail ID.
- e) Preserve the damaged or defective parts / items / assets and make them available for inspection by an official of the insurance company or surveyor /investigator appointed.
- f) Furnish all such information / proofs and documentary evidence as the surveyor / insurance company may require processing your claim.

# Followed by notification of a claim, insured is expected to follow the following procedures.

- a) Insured shall do all possible loss minimization activity to reduce further loss or aggravation of loss.
- b) Insured shall not dispose / throwing away /selling / destroying any of damaged item/salvage before inspection of loss by insurer/surveyor been appointed.
- c) Insured shall furnish all necessary documents/photographs/videos and proof / evidence in relevant to their claim to surveyor / insurance company to establish their loss.
- d) Insured shall not offer promise or assurance to any third party for their loss arising out of this incident.
- e) After receipt of all necessary claim documents, re-instatement bills and payment proofs, claim working with surveyor observation would be shared to insured by surveyor / insurance company for their understanding and concurrence.
- f) Based on the final surveyor report, claim preferred by insured would be processed and concluded for settlement.
- g) Post notification of a claim, Insured would be followed for the basic settlement documents or clarification on the discrepancy observed on the basic settlement documents. In spite of our best effort, if insured fails to responded for the basic details within the defined time limit, the claim preferred by insured would be repudiated as "Loss was not established".

Basic documents to be submitted by insured for claim settlement (To be submitted by insured after reporting of loss)



- 1. Claim Form Duly filled and signed by insured
- 2. Copy of FIR (First Information Report) for the loss estimated above ₹50,000/- caused under theft, burglary or by malicious act or by third party.
- 3. Estimate of loss.
- 4. Proof of ownership on the assists been insured. (Purchase invoice / bill or contract of right over the assets been held / used). This may not be required, if the same was submitted during inception of this policy or respective item was identified and specified in the policy.
- 5. Service engineer's report / quotation/ observation/ recommendation.
- 6. Police final report. (Not required for claim estimated up to ₹50,000/-)
- 7. Re-instatement bills and payment proofs.

#### Escalation Matrix

Level 1 - contactclaims@universalsompo.com

Level 2 - grievance@universalsompo.com

Level 3 - gro@universalsompo.com

# 5. 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.

The grounds for cancellation of the policy by Us, can be only on the grounds of mis- representation, non-disclosure of material facts, fraud or non-co-operation of the insured.

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:

Upto 1 month	25% of annual premium
Above 1 month and upto 3 months	50% of annual premium
Above 3 months and upto 6 months	75% of annual premium
Above 6 months	100% of annual premium

#### 6. 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 benefits under the policy or if loss or damage be occasioned by the wilful act or with your connivance, all benefits under this policy shall be forfeited.

#### 7. Contribution:

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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.

# 8. 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 reasonably required by us for the purpose of enforcing any rights and remedies or obtaining relief or indemnify from the other parties to which we shall be or would become entitled or subrogated upon our paying 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 we indemnify your loss or damage

#### 9. 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.

#### 10. 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.

# 11. Geographical Limits & Currency of Settlement:

The Geographical Limit of this Policy is worldwide. All claims under this policy shall be settled in Indian Rupees only.

#### 12. Renewal:

We agree to renew the policy on payment of the renewal premium. However, we retain our right not to renew the policy on any ground, more particularly 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 or bad moral hazard.

# **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:

#### **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:

- ➤ Step 1
  - a. Contact Us
    - 1-800-224030/1-800-2004030
  - b. **E-mail Address:** Contactus@universalsompo.com
  - c. Write to us Customer Service Universal Sompo General Insurance Company Limited

Unit No. 601 & 602, 6th Floor, Reliable Tech Park, Thane- Belapur Road, Airoli, Navi Mumbai, Maharashtra - 400708

- d. Senior Citizen Number: 1800 267 4030
- ➤ Step 2

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

Email Us- grievance@universalsompo.com

Drop in Your concern

Grievance Cell: Universal Sompo General Insurance Co. Ltd, Unit No. 601 & 602, 6th Floor, Reliable Tech Park, Thane-Belapur Road, Airoli, Navi Mumbai, Maharashtra - 400708

Visit Branch Grievance Redressal Officer (GRO)

Walk into any of our nearest branches and request to meet the GRO

- We will acknowledge receipt of your concern immediately
- Within 2 weeks of receiving your grievance, we will respond to you with the best solution.
- We shall regard the complaint as closed if we do not receive a reply within 8 weeks from the date of our response
- ➤ Step 3:

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

Chief Grievance Redressal Officer

# **Universal Sompo General Insurance Company Limited**

Unit No. 601 & 602, 6th Floor, Reliable Tech Park, Thane-Belapur Road, Airoli, Navi Mumbai, Maharashtra - 400708

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Email: gro@universalsompo.com

For updated details of grievance officer, kindly refer the link <a href="https://www.universalsompo.com/resourse-grievance-redressal">https://www.universalsompo.com/resourse-grievance-redressal</a>

# > Step 4.

Bima Bharosa Portal link: <a href="https://bimabharosa.irdai.gov.in/">https://bimabharosa.irdai.gov.in/</a>

#### 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 <a href="https://www.gicouncil.in/">www.irdai.gov.in</a>, or of the General Insurance Council at <a href="https://www.gicouncil.in/">https://www.gicouncil.in/</a>, the Consumer Education Website of the IRDAI at <a href="https://www.policyholder.gov.in">https://www.policyholder.gov.in</a>, or from any of Our Offices.

The updated contact details of the Insurance Ombudsman offices can be referred by clicking on the Insurance ombudsman official site: https://www.cioins.co.in/Ombudsman

Note: Grievance may also be lodged at IRDAI https://bimabharosa.irdai.gov.in/

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

Office Details	Jurisdiction of Office Unio Territory,District)
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	Gujarat, Dadra & Nagar Have 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, Ist Phase, Bengaluru - 560 078. Tel.: 080 - 26652048 / 26652049 Email: bimalokpal.bengaluru@cioins.co.in	Karnataka
BHOPAL Office of the Insurance Ombudsman, 1st floor,"Jeevan Shikha", 60-B,Hoshangabad Road, Opp. Gayatri Mandir, Bhopal – 462 011. Tel.: 0755 - 2769201 / 2769202 Email: bimalokpal.bhopal@cioins.co.in	Madhya Prades Chattisgarh.



	Suraksha, Hamesha Aapke Saath
BHUBANESHWAR Office of the Insurance Ombudsman, 62, Forest park, Bhubaneshwar - 751 009. Tel.: 0674 - 2596461 /2596455 Fax: 0674 - 2596429 Email: bimalokpal.bhubaneswar@cioins.co.in	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 - 4646394 / 2706468 Email: bimalokpal.chandigarh@cioins.co.in	Punjab, Haryana(excluding Gurugram, Faridabad, Sonepat and Bahadurgarh) Himachal Pradesh, Union Territories of Jammu & Kashmir, Ladakh & Chandigarh.
CHENNAI Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018. Tel.: 044 - 24333668 / 24333678 Email: bimalokpal.chennai@cioins.co.in	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 — 23237539 Email: bimalokpal.delhi@cioins.co.in	Delhi & Following Districts of Haryana - Gurugram, Faridabad , Sonepat & Bahadurgarh
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	Assam, Meghalaya, Manipur, Mizoram, Arunachal 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	Andhra Pradesh, Telangana, Yanam and part of Union Territory of Puducherry.



	Suraksha, Hamesha Aapke Saath
JAIPUR Office of the Insurance Ombudsman, Jeevan Nidhi — II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141 — 2740363/2740798 Email: bimalokpal.jaipur@cioins.co.in	Rajasthan
ERNAKULAM Office of the Insurance Ombudsman, 10th Floor, Jeevan Prakash, LIC Building, Opp to Maharaja's College, M.G.Road, Kochi - 682 011. Tel.: 0484 - 2358759 Email: bimalokpal.ernakulam@cioins.co.in	Kerala, Lakshadweep, Mahe-a part of Union Territory of Puducherry
KOLKATA Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 7th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 / 22124341 Email: bimalokpal.kolkata@cioins.co.in	West Bengal, Sikkim, Andaman & Nicobar Islands.
LUCKNOW Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratgani, Lucknow - 226 001. Tel.: 0522 - 4002082/3500613 Email: bimalokpal.lucknow@cioins.co.in	Districts of Uttar Pradesh: Lalitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhabdra, 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.: 69038800/27/29/31/32/33 Email: bimalokpal.mumbai@cioins.co.in	Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane.



				State of Uttaranchal and the following
NOIDA				Districts of Uttar Pradesh
Office	of the	Insurance	Ombudsman,	Agra, Aligarh, Bagpat, Bareilly, Bijno
Bhagwa	n	Sahai	Palace	Budaun, Bulandshehar, Etah, Kanoo
4th	Floor,	Main	Road,	Mainpuri, Mathura, Meerut, Moradabac
Naya	Bans,	Sector	15,	Muzaffarnagar, Oraiyya, Pilibhit, Etawal
Distt:	Gautam	Buddh	Nagar,	Farrukhabad, Firozbac
U.P-201	301.			Gautambodhanagar, Ghaziabad, Hardo
Tel.:	0120-251	4252 /	2514253	Shahjahanpur, Hapur, Shamli, Rampu
Email: bi	malokpal.noi	da@cioins.co.in		Kashgani, Sambhal, Amroha, Hathra Kanshiramnagar, Saharanpur.
PATNA				
Office	of the	Insurance	Ombudsman,	
2nd	Floor,	Lalit	Bhawan,	D:1
Bailey			Road,	Bihar,
Patna		800	001.	Jharkhand.
Tel.: 0612-2547068				
Email: bi	malokpal.pa	tna@cioins.co.in		
PUNE				
Office	of the	Insurance	Ombudsman,	
Jeevan	Darshan	Bldg.,	3rd Floor,	Maharashtra, Area of Navi Mumbai and Tho
C.T.S.	No.s.		to 198,	
N.C.	Kelkar	Road, Nara	yan Peth,	
Pune	_	411	030.	excluding Mumbai Metropolitan Region.
Tel.: 020-24471175				
Email: bi	malokpal.pu	ne@cioins.co.in		