

**Annexure – A****CUSTOMER INFORMATION SHEET/KNOW YOUR POLICY**

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

<b>Sl No.</b>	<b>Title</b>	<b>Description</b> (Please refer to applicable Policy Clause Number in next column)	<b>Policy Clause Number</b>
1	Name of Insurance Product/Policy	<b>COMPLETE TRAVELCARE INSURANCE</b>	--
2	Policy Number	<< >>	--
3	Type of Insurance Product/Policy	<p><b>Both Indemnity and Benefit</b></p> <ul style="list-style-type: none"> <li>• Indemnity: Where insured losses are covered up to the Sum Insured under the policy.</li> <li>• Benefit: Where an Insurance Policy pays a fixed amount under the policy on the occurrence of a covered event.</li> </ul>	--
4	Sum Insured (Basis) (Along with amount)	<p>Individual Sum Insured -Where each member has a separate sum insured under the policy.</p> <p>This Policy is on Individual Sum Insured basis.</p> <p>Days of travel:&lt;&lt; 1 to 60 + days &gt;&gt;</p> <p>Sum insured (In USD): 1000 to 5000000</p>	--
5	Policy Coverage (What the policy covers?) (Policy Clause Number/s)	<p><b>Coverages</b></p> <p><b>a. Base cover</b></p>	<b>D 1-79</b>

COMPLETE TRAVELCARE INSURANCE  
 UIN: UNITGOP24164V012324

**1. In Hospital Medical Expenses - (Accident & Sickness)**

The Company will reimburse the necessary and Reasonable Medical expenses incurred up to the Sum Insured stated in the Schedule, if an Insured Person sustains Bodily Injury or sudden unexpected Sickness during the travel period requiring hospitalisation. The Deductible, if applicable, shall be deducted from the Compensation payable.

**2. In Hospital Medical Expenses - (Accident Only)**

The Company will reimburse the necessary and Reasonable Medical expenses incurred up to the Sum Insured stated in the Schedule, if an Insured Person sustains Bodily Injury during the travel period requiring hospitalisation. The Deductible, if applicable, shall be deducted from the Compensation payable.

**3. Emergency Dental Expenses**

(The Company will pay for Dental Treatment of an Insured person during the Travel Period, which is Medically Necessary and as advised by treating Medical Practitioner up to per incident limit as shown in the Policy Schedule / Certificate of Insurance.

**4. Hospital Daily Cash**

The Company will pay to an Insured Person the daily benefit amount specified in Policy schedule, if he/she is hospitalized due to an Illness or Injury contracted during the Policy Period. This daily benefit is towards each continuous and completed period of 24 hours of Hospitalization to cover incidental expenses related to hospitalization like [but not restricted to] attendants' accommodation, food and transport.

**5. Accidental Death**

The Company shall pay 100% of the Sum Insured specified against this Benefit in the Policy Certificate, If an Insured Person suffers an Injury due to an Accident whilst on a Trip, and that Injury solely and directly results in the Insured Person's death within 365 days from the date of the Accident

**6. Permanent Total Disablement (PTD)**

The Company shall pay the percentage of the Sum Insured as is specified in the table of benefits If an Insured Person suffers an Injury due to an Accident whilst on a Trip, and that Injury solely and directly results in Permanent Total Disablement of the Insured Person which is of the nature specified in the policy within 365 days from the date of the Accident.

**7. Permanent Partial Disablement (PPD)**

The Company shall pay the percentage of the Sum Insured as is specified in the table of benefits, If an Insured Person suffers an Injury due to an Accident whilst on a Trip, and that Injury solely

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and directly results in Permanent Partial Disablement of the Insured Person which is of the nature specified in the table of benefits below within 365 days from the date of the Accident.

**8. Death & Disability (Common Carrier)**

Insured Person is riding as a passenger in or on, boarding or alighting from a Common Carrier and sustains Bodily Injury which directly and independently of all other causes results within twelve (12) calendar months of the Accident in death, then the Company agrees to pay to the Insured Person's Beneficiary or legal representative Compensation stated in the Schedule.

**9. Delay of Checked-in Baggage**

The Company shall pay fixed Amount OR reimburse either the reasonable costs necessarily incurred towards emergency purchases of toiletries, medication and clothing up to the limit of Sum Insured specified against this Benefit in the Policy Certificate OR the expenses incurred by the Insured Person towards transportation for recovering the Checked-in Baggage from the Common Carrier in the event of delay in scheduled arrival of the Checked-in Baggage whilst on a Trip and whilst it is in the custody of the Common Carrier.

**10. Total loss of Checked-in Baggage**

The Company shall reimburse the Insured Person for the Market Value of such Checked- in Baggage upto the limit of Sum Insured specified against this Benefit in the Policy Certificate, In the event of total and complete loss of Checked-in Baggage whilst on a Trip and whilst it is in the custody of the Common Carrier.

**11. Common Carrier Cancellation/Interruption**

The Company will pay the amount up to the Sum Insured or a fixed amount, as specified in the Policy Schedule / Certificate of Insurance, if the Insured Person's booked and confirmed journey is cancelled/interrupted, prior to the scheduled departure by the Common Carrier due to following covered events.

**12. Common Carrier Delay/ Trip Delay**

We will pay the amount specified in the Policy Schedule / Certificate of Insurance, if an Insured Person's journey on a Common Carrier is delayed beyond the number of hours specified in the Policy Schedule/ Certificate of Insurance of its scheduled departure or scheduled arrival time, during the Travel Period.

**13. Visa Rejection/Denial**

The Company will pay the following costs incurred or a fixed amount, as specified in the Policy Schedule / Certificate of Insurance, If the Insured Person's application for a visa for a

covered trip is rejected on arrival or before travel or Entry is denied by the issuing authorities or the visa arrival is delayed for more than the number of days specified in the Policy Schedule / Certificate of Insurance over the Expected Days of Visa Arrival then for the covered reasons as specified in the Certificate of Insurance

**14. Bounced Bookings Of Hotel And Airline**

The Company shall pay or reimburse the below stated expenses, up to the limit of Sum Insured specified against this Benefit in the Policy Certificate, If the Insured Person is denied a confirmed accommodation booking at the Intended Destination, whilst on a Trip, at the sole instance of the accommodation provider due to over-booking( Reason specified in the policy schedule).

**15. Hotel Cancellation**

The Company shall reimburse the difference in costs towards any alternate accommodation booking made by the Insured Person or a fixed amount, as specified in the Policy Schedule or Certificate of Insurance due to any cancellation of the Insured Person's booked and confirmed accommodation by a hotel or any other provider of accommodation.

**16. Ticket cancellation for medical reason – Flight, Bus and Train**

The Company will pay the expenses incurred by you will be eligible for reimbursement of the non-refundable portion of your flight, Bus and Train ticket booking, up to the specified Sum Insured in the Policy Schedule / Certificate of Insurance, if an Insured Person's journey is unavoidably cancelled (whether wholly or in part) during the Coverage Period due to one of the circumstances specified in the Schedule.

**17. Study Interruption**

This cover specifically applies to student travel plan, the company will reimburse the Insured Person the tuition fees which has already been paid in advance to the Educational Institution, up to the amount as specified in the Policy Schedule / Certificate of Insurance due to reason specified in the schedule.

**b. Extensions**

**1. Emergency Medical Evacuation**

The Company will reimburse Covered Expenses incurred when an Injury or Illness during a Trip necessitates an Insured Person's Emergency Medical Evacuation. This extension is in addition to the base coverage of emergency medical expenses provided under this policy.

## **2. Repatriation of Mortal Remains**

The Company will pay the expenses incurred up to the Sum Insured Covered within In Hospital Medical Expenses - (Accident & Sickness)/In Hospital Medical Expenses - (Accident Only), as specified in the Policy Schedule / Certificate of Insurance for transportation of mortal remains from the place of death of the Insured Person during the Travel Period to the residence of the Insured Person in the City of Residence, in case of death due to Injury or Illness suffered or contracted during the Travel Period.

## **3. Day Care Treatment Cover**

The Company will indemnify the Medical Expenses incurred towards the Day Care Treatment or Surgery undertaken that requires less than 24 hours Hospitalization due to advancement in technology and which is undertaken by an Insured Person in a Hospital / Nursing Home / Day Care Centre for the Illness or Injury, as specified in the Policy Schedule / Certificate of Insurance Covered within In Hospital Medical Expenses - (Accident & Sickness).

## **4. OPD Treatment**

The Company will reimburse the costs incurred on Medical Expenses to Insured Person if requires OPD Treatment for any of the treatments/tests/consultations due to Injury or Illness, suffered or contracted during the Travel Period, as specified in the Policy Schedule/ Certificate of Insurance, Covered within In Hospital Medical Expenses - (Accident & Sickness)/In Hospital Medical Expenses - (Accident Only).

## **5. Pre-hospitalization Medical Expenses**

The Company will pay Pre-hospitalization Medical Expenses means medical expenses incurred during pre-defined number of days preceding the hospitalization of the Insured Person Covered within Hospital Medical Expenses - (Accident & Sickness)/In Hospital Medical Expenses - (Accident Only)

## **6. Post-hospitalization Medical Expenses:**

The Company will pay Post-hospitalization Medical Expenses means medical expenses incurred during pre-defined number of days immediately after the insured person is discharged from the hospital, Covered within In Hospital Medical Expenses - (Accident & Sickness)/In Hospital Medical Expenses - (Accident Only)

## **7. Temporary Total Disability**

The company will pay the amount specified in the Policy Schedule / Certificate of Insurance at the frequency specified in the Policy Schedule / Certificate of Insurance for the duration that the

Temporary Total Disability continues, If an Insured Person suffers an Injury due to an Accident that occurs during the Travel Period and that Injury solely and directly results in the disability of the Insured Person which prevents the Insured Person from engaging in any employment or occupation on a temporary basis.

**8. Pre-Existing Disease Cover for a Life-Threatening Condition**

The Company will reimburse the Medical Expenses incurred in respect of the Medically Necessary Treatment rendered on the Insured Person during the Travel Period on an emergency basis for a Life-Threatening Condition only for any sudden, unexpected or unforeseen development which is attributable to a Pre- Existing Disease, upto the Sum Insured specified in the Policy Schedule / Certificate of Insurance.

**9. Newborn Baby Medical Expenses**

The company will reimburse the Medical Expenses incurred during the Coverage Period towards the Hospitalization of an Insured Person's New Born Baby which is born during a Hospitalization covered and admitted under the Maternity Benefit Cover Option.

**10. Maternity Expenses**

This cover specifically applies to student travel plan, the company will reimburse the Medical Expenses incurred during the Coverage Period in the event of Hospitalization of an Insured Person for delivery of a baby and/or related to a Medically Necessary Treatment following a pregnancy and/or lawful medical termination of pregnancy.

**11. Vision Care**

The Company shall pay a fixed amount, as specified in the Policy Schedule / Certificate of Insurance, incurred by the Insured Person towards vision check-up or damage to the eye vision corrective spectacles (provided that such damage is caused solely and directly due to an Accident) for the Insured Person during the Travel Period.

**12. Mental & Nervous Disorder**

The Company shall pay or reimburse the Medical Expenses incurred, on the recommendation of a Medical Practitioner, up to the Sub-limit as specified against this Benefit in the Policy Certificate.

**13. Recovery Benefit - Post hospitalization session based treatment**

The Company shall provide coverage for the recovery expenses and therapies Like speech therapy, Physio, Mental physical skill,

Repress therapy, psychological therapies etc. up to the maximum limit as specified in the Policy Schedule to treat a disablement due to an accident where treatment continuance is recommended in writing by the Medical Practitioner.

**14. Health Check up**

The Company shall provide coverage for the Health Check-ups/Medical Check-ups up to the maximum limit as specified in the Policy Schedule. This cover is applicable if it is shown on your policy schedule.

**15. Corporate Floater**

The Company will provide a separate amount as ‘the Corporate Floater Sum Insured’ specified in the Policy Schedule / Certificate of Insurance as additional Sum Insured available to the Insured Members of the Policy who have exhausted their Sum Insured in the current Policy Year, If this Cover Option is opted for under the Policy, This Sum Insured is at the group level on a floater basis as per the conditions specified in the Policy Schedule / Certificate of Insurance.

**16. Mobility Cover**

The Company will pay the expenses incurred up to the Sum Insured or a fixed amount, as specified in the Policy Schedule / Certificate of Insurance, on the purchase of support items including but not limited to crutches, artificial limbs, wheelchairs, tri-cycles intra-ocular lenses, spectacles, hearing aids, dentures, artificial teeth, imported medicines or any other item which in the opinion of the treating Medical Practitioner is necessary for the Insured Person to resume normal living following the Injury sustained in the Accident during the Travel Period.

**17. Home Care Treatment**

The Company will reimburse the cost incurred towards Home Care Treatment up to the sum insured specified in the Policy Schedule/policy certificate. For the purpose of this benefit, Home Care Treatment means a treatment availed by the Insured Person at home which in normal course would require care and treatment at a Hospital, but it is actually taken at home (Place where client will stay/ Quarantine while Overseas Travel)

**18. Waiting period Modification of Pre-existing Disease (24, 12 & nil)**

On payment of additional premium, waiting period applicable to all Pre-Existing Diseases for each Insured Person before benefits are payable under the Policy is modified to 24/12/0 Months.

**19. Ambulance**

The Company shall pay the costs incurred towards such transportation or a fixed amount, as specified in the Policy Schedule / Certificate of Insurance, If an Insured Person suffers from Injury or Illness, as specified in the Policy Schedule / Certificate of Insurance, suffered or contracted during the Travel Period and that Injury or Illness solely and directly requires the Insured Person to be transported to a Hospital by an Ambulance or any public transport for the purpose of availing Emergency Care.

**20. Loss of Passport/Identification Documents/International driving License**

The Company will pay the legal cost incurred by the Insured Person up to the Sum Insured or a fixed amount, as specified in the Policy Schedule / Certificate of Insurance

**21. Replacement and Rearrangement - Business Trip Only**

The Company will pay the costs of a direct route economy class airfare or a fixed amount for Business Trip Only, as specified in the Policy Schedule / Certificate of Insurance, for a replacement staff member of Insured Person's organisation to travel from the Country of Residence/City of Residence to the place of the Insured Person visit, in case of death of the Insured Person during the Travel Period.

**22. Missed Connection or Flight**

The Company will pay the cost of additional travel and accommodation expenses incurred or a fixed amount, as specified in the Policy Schedule/Certificate of Insurance due to the Insured Person's failure to reach the original departure point of the booked and confirmed journey owing to a delay beyond the number of hours specified in the Policy Schedule / Certificate of Insurance in the arrival of the Common Carrier/Flight which was connecting to the booked journey onwards.

**23. Missed Event**

The Company will pay irrecoverable costs of the Insured Person's Event tickets paid in advance or a fixed amount, as specified in the Policy Schedule / Certificate of Insurance, in case of the Insured Person's failure to reach the Event during the Travel Period, due to any unavoidable reasons beyond the control of the Insured Person.

**24. Denied Boarding – Carrier**

The Company will pay the difference amount in fare or a fixed amount, as specified in the Policy Schedule / Certificate of Insurance if an Insured Person is denied boarding of the booked Common Carrier during the Travel Period and the Insured Person has booked a new ticket and travelled within the number of hours

from the scheduled departure time of the original booking specified in the Policy Schedule/Certificate of Insurance.

**25. Compassionate Visit**

The Company shall pay or reimburse the amounts incurred by any one Immediate Family Member for obtaining return tickets in economy class on a Common Carrier to visit the Insured Person, and expenses for the duration of the stay in the Hospital up to the limit of Sum Insured as specified against this Benefit in the Policy Certificate.

**26. Compassionate Visit Stay**

The Company will pay accommodation expenses, as specified in the Policy Schedule / Certificate of Insurance for an Immediate Relative of the Insured Person to stay at the place of Hospitalization of the Insured Person during the Travel Period, If an Insured Person requires Hospitalization due to Injury or Illness, as specified in the Policy Schedule/ Certificate of Insurance, suffered or contracted during the Travel Period.

**27. Emergency Visit**

The Company will pay the amount incurred for direct route return (two way) economy class tickets or a fixed amount, as specified in the Policy Schedule / Certificate of Insurance towards the travel expenses, If an Insured Person needs to travel to the City residence of an Immediate Relative due to death or emergency Hospitalization of such Immediate Relative, during the Coverage Period.

**28. Hijack Daily Allowance**

The company will pay the amount specified in the policy schedule in the event of Person is travelling on board a Common Carrier which is Hijacked for every six (6) continuous hours upto the maximum number of hours as mentioned in the Policy Schedule / Certificate of Insurance.

**29. University Insolvency**

This cover specifically applies to student Travel Plan, The Company will pay the Insured Person the actual additional expenses incurred or a fixed amount, as specified in the Policy Schedule / Certificate of Insurance, for the Insured Person's expenses incurred towards travelling back to the City of Residence in a Common Carrier, and the accommodation expenses in case the Educational Institution in which the Insured Person applied for studying has become insolvent.

**30. Sponsor Protection**

This cover is applicable for student travel plan, The Company shall reimburse the remaining unpaid tuition fee of such Insured

Person, up to the limit of Sum Insured as specified against this Benefit in the Policy Certificate, In the event of death, due to an Injury arising from an Accident, of the education sponsor of an Insured Person, who is a student pursuing an educational course as a full time student in an educational institution in the Country of Visit during the Period of Insurance.

**31. Home Insurance Cover (Theft)**

The Company will reimburse any actual loss incurred during the Travel Period towards any theft or burglary of personal possessions or property stored within the Insured Person’s usual place of residence that was left vacant for the duration of the Travel Period.

**32. Personal Liability & Bail Bond**

**Personal Liability-** The Company shall reimburse any actual legal liability including Defense Costs, incurred by the Insured Person in his/her private capacity to pay Damages to such third party up to the limit of Sum Insured specified against this Benefit in the Policy Certificate, In the event of any third party's death, Injury or property being damaged whilst on a Trip in the Country of Visit.

**Bail Bond-** The Company shall provide the payment of bail amount to the appropriate authority/court on behalf of the Insured/ Insured Person up to the limit of Sum Insured specified against this Benefit in the Policy Certificate. If the Insured/ Insured Person is arrested or detained by Police or Judicial authorities, for any bailable offence whilst on a trip abroad covered by this Policy.

**33. Hardship Allowance**

The Company will pay the fixed amount specified in the Policy Schedule / Certificate of Insurance., If an Insured Person suffers an Injury during the Travel Period solely and directly due to any pilferage, theft, robbery, dacoity or any other Accident, which requires the Insured Person to undergo Medically Necessary Treatment. This Benefit will be payable provided that the Insured Person provides Us with a copy of a police complaint reporting the incident.

**34. Income Protection Cover**

The Company will pay the daily allowance amount specified against this Benefit in the Policy Schedule / Certificate of Insurance, for each continuous and completed day, on which the Insured Person is unable to carry out his/her regular employment, business or professional activity due to an Illness or Injury leading to hospitalization more than 3 days or daycare

procedure/treatment leading to rest more than 3 days, suffered or contracted during the Coverage Period.

**35. EMI Protection**

If an Insured Person is unable to pay the EMI Amounts payable under his/her Loan due to Injury or Illness (leading to hospitalization number of days specified in policy schedule then We will pay an amount equal to the EMI Amount which is due on the Insured's outstanding Loan for the number of months immediately following the date of such occurrence, as is specified in the Policy Schedule / Certificate of Insurance.

**36. Fraudulent Charges (Payment Card Security)**

The Company will indemnify the Insured Person for theft of the funds suffered by the Insured Person from his/her account as a result of Unauthorized Access of or Hacking of credit/debit card, mobile wallets or any prepaid card of the nature as specified in the Policy Schedule / Certificate of Insurance, by a third party upto the amount as specified in the Policy Schedule / Certificate of Insurance during the Travel Period.

**37. Political Risk & CAT**

This policy extension provides coverage for unforeseen events related to Political Risk and Catastrophic Events (CAT) that may disrupt your insured group travel arrangements.

**38. Pet Cover**

The Company will provide the following, If the Insured Person is travelling with his/her pet as detailed in the Policy Schedule /Certificate of Insurance during the Travel Period.

**39. Trip Curtailment and Interruption**

The Company shall reimburse the loss of any bookings made in advance towards travel, accommodation, visa charges, sightseeing, and Cruise, which is either paid by the Insured Person or contracted to be paid by the Insured Person, which are not recoverable from any other source, up to the limit of Sum Insured as specified against this Benefit in the Policy Certificate, due to one of the circumstances specified below, In the event of any unavoidable curtailment of the Insured Person's booked and confirmed Trip.

**40. Upgradation to Business Class**

The Company will pay for Cost incurred in respect of the Insured Person's up-gradation to a business class air ticket, provided that If a covered member requires hospitalization for a minimum of seven consecutive days during the trip and needs to be repatriated to their home country, the policy will cover the reasonable cost of upgrading their return flight ticket to Business

Class from the point of hospitalization subject to a doctor's certificate confirming the medical need for repatriation.

**41. Emergency Cash**

The Company will pay the actual loss incurred or a fixed amount, as specified in the Policy Schedule / Certificate of Insurance 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.

**42. HOLE-IN-ONE**

The Company will pay the expenses or a fixed amount, as specified in the Policy Schedule / Certificate of Insurance, incurred by the Insured Person in celebration of such accomplishment, In the event of an Insured Person being declared winner for a "hole-in-one" at any internationally recognized 18-hole golf course during the Travel Period.

**43. Golf Equipment Cover**

The Company shall reimburse the Market Value of such Golf Equipment, up to the limit of Sum Insured as specified against this Benefit in the Policy Certificate, In the event of Theft of or damage to the Insured Person's own or hired Golf Equipment in a Country of Visit whilst on a Trip.

**44. Return of Minor Child**

The Company shall pay or reimburse either of the following expenses in relation to a Minor Dependent Child covered under this Policy, provided they are not accompanied by any other adult Immediate Family Member, up to the Sum Insured specified against this Benefit in the Policy Certificate, based on the option of his/her legally appointed guardian, as specified in the Policy Certificate, If an Insured Person contracts an Illness or suffers an Injury due to an Accident in a Country of Visit whilst on a Trip, and that Injury solely and directly results in death of the Insured Person whilst on a Trip.

**45. Accompaniment of Minor Child**

The Company or Our Assistance Service Provider will arrange for booking a place of accommodation for the Insured Person's parents near the location of the Insured Person's Hospitalization outside the Country of Residence/City of Residence. The cost of such booking will be at the Insured Person's costs

**46. Key Replacement**

The Company shall pay the cost or reimburse expenses of replacement of key in relation to Any loss or damage or theft, directly or indirectly caused following the use of the key of said

residence or its premises or any duplicate thereof belonging to the Insured Person.

**47. Adventure Sports**

The Company shall pay or reimburse the Medical Expenses incurred, on the recommendation of a Medical Practitioner, up to Sub-limit as specified against this Benefit in the Policy Certificate, If an Insured Person suffers an Injury due to an Accident in a Country of Visit whilst on a Trip arising out of the Insured Person engaging in any Adventure Sport which is carried out in accordance with the guidelines, codes of good practice and any recommendations for safe practices as laid down by the applicable governing body or sports authority and requires Emergency Care.

**48. Pandemic Cover**

The Company will pay the Sum Insured as a lump sum amount mentioned in the Policy Schedule in case the Insured Person is diagnosed as suffering from the Pandemic Diseases provided it occurs or manifests itself during the policy period as a first incidence.

**49. Terrorism Cover**

The Company will pay the lumpsum amount for the loss caused due to damage 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.

**50. Doctor on Call**

The Company or Our Assistance Service Provider will provide for a telephonic consultation to the Insured Person, from a general Medical Practitioner empaneled with Us.

**51. Medical Assistance Services**

The Company or Our Assistance Service Provider will provide assistance or advice to the Insured person, of the description specified in the policy schedule, in relation to a medical emergency.

**52. Legal assistance**

The Company shall reimburse the, In the event of death, Injury or property being damaged, of insured person, whilst on a Trip in the Country of Visit.

**53. Medical E- Opinion**

The Company or Our Assistance Service Provider will arrange for the provision of medical advice to the Insured Person over the online chat. We or Our Assistance Service Provider will provide

the Insured Person with an internet chat-based consultation with a general Medical Practitioner empaneled with Us.

**54. Delivery of Essential Medicine**

The Company or Our Assistance Service Provider will arrange to transport and deliver to the Insured Person essential medicine, drugs and medical supplies that are necessary for the Insured Person's care and/or treatment but which are not available at the Insured Person's location

**55. Emergency translation**

The Company or Our Assistance Service Provider will arrange for the provision of medical translation to the Insured Person over the telephone.

**56. Trip Support/Information (General Assistance)**

The Company will provide support or Information on trip as mentioned in the policy schedule.

**57. Arranging medical evacuation or repatriation**

The Company will provide Assistance and coordination for medical evacuation and repatriation of remains.

**58. Home Care Assistance (Nurse at home arrangement)**

The Company or Our Assistance Service Provider will provide a reference for a Qualified Nurse near the Insured Person's location, If the medical condition of the Insured Person is of such severity that in Our or Our Assistance Service Provider's opinion, it is judged medically necessary to engage a Qualified Nurse to take care of the Insured Person.

**59. Arrangement of Parent Accommodation**

The Company or Our Assistance Service Provider will arrange for booking a place of accommodation for the Insured Person's parents near the location of the Insured Person's Hospitalization outside the Country of Residence/City of Residence. The cost of such booking will be at the Insured Person's costs.

**60. Arrangement of Compassionate Visit**

The Company or Our Assistance Service Provider will arrange for booking a direct route return economy class tickets for an Immediate Relative of the Insured Person desiring to travel to the place of Hospitalization of the Insured Person outside the Country of Residence/City of Residence. The tickets will be purchased at the Insured Person's costs.

**61. Emergency Document Delivery**

The Company or Our Assistance Service Provider shall assist the Insured Person to arrange for emergency document to be delivered to the Insured Person's Immediate Relative, upon the Insured Person's request to do so.

**62. 24\*7 global assistance hotline**

The Company or Our Assistance Service Provider shall assist the Insured Person to Assistance service global line for any emergency.

**63. Emergency travel assistance**

The Company or Our Assistance Service Provider will provide assistance In case of wallet lost, arrangements can be done for hotel booking and flight bookings – domestic and international during Travel Emergency situations.

**64. Travel and weather alerts**

The Company or Our Assistance Service Provider will arrange for the provision of emergency alerts and updates on negative changes in the security, economic, political, societal, or environmental affairs of the destination to which the Insured Person is traveling.

**65. Bag search / tag Services**

The Company or Our Assistance Service Provider will arrange for helps locating missed baggage.

**66. Home Rental Damage Coverage**

The Company at Our option will pay a fixed amount up to the sum insured specified in policy schedule/certificate against the rental home/property damaged or destroyed.

**67. Sports Equipment Coverage**

The Company will pay the actual loss incurred or a fixed amount, as specified in the Policy Schedule / Certificate of Insurance, in relation to any permanent and total loss, physical damage, theft, or any fine/penalty charged for a delayed return of at least 12 hours, in relation to any Rental Sports Equipment during the Travel Period.

**68. Roadside Assistance/ Road Trip Assistance**

This optional extension provides comprehensive Roadside Assistance and Road Trip Assistance services to insured members during their road trips within a designated geographical area under the Group Travel Insurance Policy.

**69. Sports Event/Musical Event/ Art Event Covers**

This policy extension provides optional coverage for unforeseen circumstances that may disrupt Insured's participation as a performer in Sports, Music, or Art Events during their travel.

**70. Digital Nomad Coverage**

In the event of Theft of the Insured Person's Mobile Phone in the Country of Visit whilst on a Trip, the Company shall reimburse the Market Value of such Digital Nomad up to the limit of Sum Insured specified against this Benefit in the Policy Certificate.

**71. Pet Relocation**

This optional extension provides comprehensive coverage for the unforeseen events your pets might encounter during their relocation as part of your insured travel.

**72. Cancer Screening & Mammographic Examination**

This optional extension provides coverage for the cost of cancer screening and mammographic examinations undergone by insured members during their international travel.

**73. Loss of Laptop, Tablet, Mobile, Phone, Camera**

In the event of Theft of the Insured Person's Mobile Phone in the Country of Visit whilst on a Trip, the Company shall reimburse the Market Value of such Laptop, Tablet, Mobile, Phone, Camera up to the limit of Sum Insured specified against this Benefit in the Policy Certificate.

**74. STD cover**

The Company shall pay or reimburse the Medical Expenses incurred, up to the Sub-limit as specified against this Benefit in the Policy Certificate, If the Insured Person suffers an Illness or Injury, in a Country of Visit whilst on a Trip, which is directly or indirectly attributable to any sexually transmitted disease, including HIV.

**75. Substance & Alcohol Abuse**

The Company shall pay or reimburse the Medical Expenses incurred on the recommendation of a Medical Practitioner, If the Insured Person suffers from any mental or nervous disorders or disturbances of consciousness, strokes, fits or convulsions due to alcoholism and/or drug dependency, in a Country of Visit whilst on a Trip and requires Emergency Care.

**76. Medical Sub-limit Cover**

The Company's liability under Benefit In-Patient Hospitalization - Medical Expenses, during a Trip shall be Sub limited given in the policy schedule.

		<p><b>77. Emergency Accommodation</b> The company shall pay as specified in the schedule in the event of the In the event of the Insured Person's intended place of accommodation in the Country of Visit being rendered uninhabitable due to fire, flood, earthquake, storm, hurricane, explosion, or outbreak of major infectious illnesses, the Company shall reimburse the difference in costs towards any alternate accommodation booking made by the Insured Person in the Country of Visit, up to the limit of Sum Insured limited to a maximum amount per night, specified against this Benefit in the Policy Certificate.</p> <p><b>78. University Excess Medical Cover</b> The company shall pay as specified in the schedule In the event of a claim payable during the Period of Insurance under any insurance policy issued by a foreign insurance company to an Insured Person, who is a student pursuing an educational course as a full time student in an educational institution in the Country of Visit during the Period of Insurance.</p> <p><b>79. Physiotherapy</b> 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.</p>	
6	Exclusions (What the policy does not cover)	<p><b>Specific Exclusions</b></p> <ol style="list-style-type: none"> <li>1. Any claim relating to events occurring before the Coverage Commencement Date or otherwise outside of the Period of Insurance</li> <li>2. Pre-existing Diseases Waiting Period - Expenses related to the treatment of a pre-existing Disease (PED) and its direct complications shall be excluded until the expiry of 36 months of continuous coverage after the date of inception of the first policy with us</li> <li>3. Any claim if the Insured Person –             <ol style="list-style-type: none"> <li>a. Is travelling against the advice of a Medical Practitioner, b. Is receiving, or is on any waiting list to receive, specified medical treatment declared in a Medical Practitioner's report or certificate</li> <li>c. Has received terminal prognosis for a medical condition</li> </ol> </li> <li>4. Dental Treatment, dentures or Surgery of any kind unless necessitated due to an Accident and requiring minimum 24 hours Hospitalization. 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.</li> <li>5. Circumcision unless necessary for Treatment of an Illness or Injury not excluded hereunder or due to an Accident.</li> <li>6. Birth control procedures, contraceptive supplies or services including complications arising due to supplying services,</li> </ol>	Section E

hormone replacement therapy and voluntary termination of pregnancy, surrogate or vicarious pregnancy. 7. Routine medical, eye examinations, cost of spectacles, laser Surgery for cosmetic purposes or corrective Surgeries or contact lenses.

8. Ear examinations, cost of hearing aids or cochlear implants.

9. Vaccinations except post-bite Treatment.

10. Laser Surgery for Treatment of focal error correction other than for focal error of +/- 7 or more and is a Medically Necessary Treatment.

11. All expenses arising out of any condition directly or indirectly caused due to or associated with human call Lymph tropic virus type III (HTLV-III or IITLB-III) or Lymphadenopathy Associated Virus (LAV) and its variants or mutants except to the extent it is expressly specified to be covered under any opted Benefits to this Policy.

12. All sexually transmitted diseases including Genital Warts, Syphilis, Gonorrhoeic, Genital Herpes, Chlamydia, Pubic Lice and Trichomoniasis and any condition directly or indirectly caused by or associated with them

13. Vitamins and tonics unless forming part of Treatment for Illness or Injury and prescribed by a Medical Practitioner

14. Instrument used in Treatment of Sleep Apnea Syndrome (C.P.A.P.) and Continuous Peritoneal Ambulatory Dialysis (C.P.A.D.) and Oxygen Concentrator for Bronchial Asthmatic condition, Infusion pump or any external devices used during or after Treatment

15. Artificial life maintenance, including life support machine use, where such Treatment will not result in recovery or restoration of the previous state of health.

16. Any expenses incurred in connection to Treatment for general debility, ageing, convalescence, sanatorium Treatment, rehabilitation measures, private duty nursing, respite care, health resort, run down condition or rest cure.

17. Sterility, fertility, infertility including IVF and other assisted conception procedures and its complications, subfertility, impotency, venereal disease.

18. Certification / diagnosis / Treatment by a family member, or a person who stays with the Insured Person, or from persons not registered as Medical Practitioners under the respective Medical Councils, or from a Medical Practitioner who is practicing outside the discipline that he is licensed for, or any diagnosis or Treatment that is not scientifically recognised or Unproven/Experimental treatment, or any form of clinical trials or any kind of self medication and its complications.

19. Ailment requiring Treatment due to use, abuse or a consequence or influence of an abuse of any substance, intoxicant, drug, alcohol or hallucinogen and Treatment for de-addiction, or rehabilitation.

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| <p>20. Any Illness or Hospitalization arising or resulting from the Insured Person or any of his family members committing any breach of law with criminal intent.</p> <p>21. Any Treatment received in convalescent homes, convalescent Hospitals, health hydros or nature cure clinics.</p> <p>22. Prostheses, corrective devices and and/or Medical Appliances, which are not required intra-operatively for the Illness/ Injury for which the Insured Person was Hospitalised.</p> <p>23. Any stay in Hospital without undertaking any Treatment or any other purpose other than for receiving eligible Treatment of a type that normally requires a stay in the Hospital.</p> <p>24. Any Cosmetic Surgery, aesthetic Treatment unless forming part of Treatment for cancer or burns, any elective Surgery or cosmetic procedure that improve physical appearance, Surgery for sex change or Treatment of obesity/morbid obesity (unless certified to be life threatening) and weight control programs, or Treatment/Surgery / complications/Illness arising as a consequence thereof.</p> <p>25. Charges incurred primarily for diagnostic, X-ray or laboratory examinations or other diagnostic studies not consistent with or incidental to the diagnosis and Treatment even if the same requires confinement at a Hospital.</p> <p>26. Costs of donor screening or costs incurred in an organ transplant Surgery involving organs not harvested from a human body.</p> <p>27. Injury caused whilst flying or taking part in aerial activities (including cabin) except as a fare-paying passenger in a regular scheduled airline or air charter company.</p> <p>28. All Illness/expenses caused by ionizing radiation or contamination by radioactivity from any nuclear fuel (explosive or hazardous form) or from any nuclear waste from the combustion of nuclear fuel nuclear, chemical or biological attack.</p> <p>29. All non-medical expenses including convenience items for personal comfort not consistent with or incidental to the diagnosis and Treatment of the Illness/Injury for which the Insured Person was Hospitalised, ambulatory devices, walker, crutches, belts, collars, splints, slings, braces, stockings of any kind, diabetic footwear, glucometer /thermometer and any medical equipment that is subsequently used at home except when they form part of room expenses.</p> <p>30. For complete list of non-medical expenses, please refer to the Annexure I “Non-Medical Expenses” and also on Our website.</p> <p>31. Any opted Deductible amount or percentage of admissible claim under Sub Limit if applicable and as specified in the Policy Schedule/ Policy Certificate to this Policy.</p> <p>32. No claim will be paid arising from suicide, attempted suicide</p> |
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33. Any External Congenital Anomalies or any consequence thereof.
34. Any Illness and Accidents as a result of war and warlike occurrence or invasion, acts of foreign enemies, hostilities (whether war de declared or not), civil war, rebellion, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power, active participation in riots, confiscation or nationalization or requisition of or destruction of or damage to property by or under the order of any government or local authority, 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.
35. Any claim arising out of sporting activities in so far as they involve in Adventure Sports, the training or participation in competitions of Professional or Semi-Professional Sportspersons.
36. Any claim which arises out of an Accident connected with the operation of an aircraft or which occurs during parachuting except when the Insured Person is flying as a passenger in a scheduled aircraft duly licensed to carry passengers.
37. Any claim arising due to the Insured Person when he/she is under the influence of intoxication, liquor or drugs.
38. Any losses arising from Accidents on motorized two wheeled vehicles, unless at the time of such Accident, (i) the person driving the vehicle is duly qualified and in possession of a current full International Driving License, (ii) the Insured Person is wearing a safety crash helmet, and (iii) such losses arise from Accidents on motorized two wheeled vehicles over 50 cc in engine capacity.
39. No claims will be paid for losses arising directly or indirectly from engaging in any manual work or hazardous occupation, unnecessary self-exposure to perils (except in an attempt to save another human's life).
40. Treatment which could be reasonably delayed until the Insured Person's return to India/ Country of Origin. The question of what can or what cannot be reasonably delayed will be decided jointly by the treating Medical Practitioner, EASP and the Company, and shall be in accordance with accepted standards of medical care.
41. Any charges in excess of any Reasonable and Customary Charges incurred for an emergency treatment on account of an Insured Event.
42. Any expenses incurred in connection with rest or recuperation taken by an Insured Person at a spa or health resort, rehabilitation clinic, or related to the treatment of alcoholism or drug dependency.

43. We shall not be obliged to make any payment that is brought about as a consequence of deliberate failure to seek or follow medical advice, or to intentional delay to circumvent the policy term and condition.

44. Maternity, child birth and any related complications, including any changes affecting other chronic conditions of the Insured Person as a result of the pregnancy. This exclusion shall however not apply in following cases:

1. Ectopic Pregnancy, which is proved by diagnostic means and certified as being a Life Threatening Condition by the attending Medical Practitioner.
2. Any unforeseen emergency measures to save the Insured Person or the child's life in the event of any acute complications, provided that such Insured Person has not completed the age of 38 years and the 30th week of the pregnancy is not completed at the time of such emergency treatment.

### **Specific Exclusions**

#### **1. Exclusions Specific to Medical Expenses**

1. Routine physicals or other examinations including but not restricted to laboratory diagnostic or Xray examinations where there are no objective indications or impairment in normal health.

2. Dental treatment, dentures or Dental / Oral Surgery, unless caused by Hospitalization 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

**2. Exclusions Specific to Benefits AD, PTD & PPD:**

The Company shall not be liable to make any payment for any claim under Benefits a.7, a.8, a.9 in respect of an Insured Person, directly or indirectly for, caused by, arising from or in any way attributable to any of the following:

- 1. Any damage to health caused by curative measures, radiation, infection, poisoning except insofar as the same arise from an Accident.
- 2. Any claim subsequent to a claim made under Benefit a.1 (Accidental Death) has been admitted by the Company and becomes payable.
- 3. Any breach of law by the Insured Person with criminal intent or participating in an actual or attempted felony, riot, crime, misdemeanor or civil commotion.
- 4. Any claim which arises out of an accident connected with the operation of an aircraft or which occurs during parachuting except when the Insured/Insured Person is flying as a Fare Paying passenger in a multi- engine, commercial aircraft.
- 5. Any consequential loss or damage cost or expense of whatsoever nature.
- 6. Any claim resulting, directly or indirectly, caused by, contributed to or aggravated or prolonged by childbirth, maternity or pregnancy or any complication thereof, venereal disease.
- 7. Any exclusion mentioned in the 'General Exclusions" Section of this Policy.

**3. Exclusions Specific to Benefit of Delay of Checked-in Baggage:**

The Company shall not be liable to make any payment for any claim under this Benefit of 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:

- 1. Valuables, Money, any kind of securities and tickets/passes or any other item not declared and/or agreed by the Company.
- 2. Loss of any Checked-in Baggage unless a Property Irregularity Report or other report usually issued by the Common Carrier in the event of loss of Checked-in Baggage has been procured and submitted to the Company.
- 3. Any partial loss of the items contained within the Checked-in Baggage.
- 4. Losses arising from any delay, detention, confiscation by the customs officials or other public authorities.
- 5. Any delay while the Insured Person is in India/ Country of Origin.

- 6. Loss due to complete/partial damage of the Checked-in Baggage.
- 7. Any exclusion mentioned in the “General Exclusions” Section of this Policy.

**4. Exclusions Specific to Benefit of Total Loss of Checked-in Baggage:**

The Company shall not be liable to make any payment for any claim under this Benefit of 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:

- 1. Valuables, Money, any kind of securities and tickets/passes or any other item not declared and/or agreed by the Company.
- 2. Loss of any Checked-in Baggage unless a Property Irregularity Report or other report usually issued by the Common Carrier in the event of loss of Checked-in Baggage has been procured and submitted to the Company.
- 3. Any partial loss of the items contained within the Checked-in Baggage.
- 4. Losses arising from any delay, detention, confiscation by the customs officials or other public authorities.
- 5. Any Checked-in Baggage loss while the Insured Person is in India/ Country of Origin.
- 6. Any exclusion mentioned in the “General Exclusions” Section of this Policy

**5. Exclusions Specific to benefit of Personal Liability & Bail Bond:**

The Company shall not be liable to make any payment for any claim under this Benefit of 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:

- 1. Any claim arising from the Insured Person's personal contractual liability or through promises made by the Insured Person.
- 2. Any actual or alleged liability of the Insured Person towards any Immediate Family Members, relatives and Travelling Companions, or colleagues, whether personal or official.
- 3. Any claim resulting from transmission of an Illness by the Insured Person.
- 4. Any claim for damage resulting from participation of the Insured Person in any professional sports or Adventure Sports.
- 5. Any claim for liability, arising directly or indirectly, from or due to:
  - a) Possession of animals, birds, reptiles, insects etc. and their by-products like skin, hair, feathers, horns, fur, ivory, bones, eggs, etc.

- b) ownership or possession of vehicles, aircrafts, water crafts, or activities of the Insured Person involving parachuting, hand-gliding, hot air ballooning or use of fire arms.
- c) Any willful, negligent, malicious or unlawful act, error or omission.
- d) Any supply of goods or services on the part of the Insured Person.
- e) The Insured Person's involvement in any activities of commerce or occupation.
- 6. Any ownership or occupation of land or buildings other than the occupation of any booked accommodation in the Country of Visit.
- 7. Any exclusion mentioned in the 'General Exclusions' Section of this Policy.
- 8. All non-bailable offences as per the local law of the country in which the incident has taken place whilst the Insured is on a trip abroad
- 9. Any exclusion mentioned in the "General Exclusions" section of this Policy

**6. Exclusions Specific to benefit of Golf Equipment Cover**

The Company shall not be liable to make any payment for any claim under this Benefit of 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:

- a. Any loss due to Theft or damage to the Insured Person's Golf Equipment by a Common Carrier, if no written PIR (Property Irregularity Report) is issued by the airline or obtained by the Insured Person.
- b. Theft of Golf Equipment which is not reported to the Police having jurisdiction at the place of loss within 24 hours of the occurrence of the incident, or for which no written police report is obtained.
- c. Loss or damage caused by wear and tear, moths, vermin, weather and atmospheric conditions or mechanical failure.
- d. Loss or damage to Golf Equipment left unattended at any place.
- e. Any loss or damage to the Golf Equipment due to confiscation or detention by any authority other than airline.
- f. Any amount of loss which is refundable from any other source whatsoever it may be.
- g. Any loss falling under the 'General Exclusions' Section of the Policy

**7. Exclusions Specific to benefit of Loss of Laptop, Tablet, Mobile, Phone, Camera**

		<p>The Company shall not be liable to make any payment for any claim under this Benefit of 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:</p> <ol style="list-style-type: none"> <li>I. Any Theft of Mobile Phone after 5 years from the date of its original purchase from a retailer/wholesaler/original equipment manufacturer.</li> <li>II. Laptop, Tablet, Mobile, Phone, Camera being left unattended by the Insured Person.</li> <li>III. Laptop, Tablet, Mobile, Phone, Camera packed in any Checked-In Baggage</li> <li>IV. Any Lost accessories or attachments</li> <li>V. Any internal or external damage caused to the Laptop, Tablet, Mobile, Phone, Camera, either due to mishandling of such Mobile Phone or otherwise on account of either the Insured Person or any other party involved in any Theft</li> </ol> <p><b>8. Specific Exclusions</b></p> <p>The Company shall not be liable to make any payment for any claim under this Benefit of 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:</p> <ol style="list-style-type: none"> <li>I. Visa application was submitted prior to issuance of Policy</li> <li>II. Missed pre-scheduled Appointment</li> <li>III. Past or current criminal Actions</li> <li>IV. Insufficient/ False Travel Document or income document</li> <li>V. Insufficient explanation for the purpose and circumstances of the planned stay</li> <li>VI. Damaged Passport</li> <li>VII. Passport Invalidity</li> <li>VIII. Lack to prove the travel itinerary</li> <li>IX. Invalid letter of reference</li> <li>X. Insufficient means of subsistence</li> <li>XI. Unacceptable birth or marriage certificate</li> <li>XII. Lacking to present a proof of accommodation</li> </ol>	
7	<p>Waiting Period</p> <ul style="list-style-type: none"> <li>• Time period during which specified diseases/treatments are not covered</li> <li>• It is counted from the beginning of the policy coverage.</li> </ul>	Not Applicable	

<p>8</p>	<p>Financial limits of coverage                      i. Sub-limit (It is a pre-defined limit, and the insurance company will not pay any amount in excess of this limit)                      ii. Co-payments (It is a specified amount/percentage of the admissible claim amount to be paid by policyholder/insured).                      iii. Deductible (It is a specified amount:                      - up to which an insurance company will not pay any claim, and                      - which will be deducted from total claim amount (if claim amount is more than the specified amount)                      iv. Any other limit (as applicable)</p>	<ol style="list-style-type: none"> <li>1. Sub – limit – As per opted</li> <li>2. Co – Payments – As per opted</li> <li>3. Deductible – As per opted</li> </ol>	
<p>9</p>	<p>Claims/Claims Procedures</p>	<p><b>Claim Intimation &amp; Assistance</b></p> <p>Insured Person can notify a Claim by calling the Company / Assistance Company Contact center at +911244498766 Or email at FGA@IN.FALCK.COM</p> <p>The Company's Assistance Company Service Center is equipped to provide Insured Person with the necessary guidance in Insured Person's situation and will direct Insured Person on Claims procedure.                      Please refer the check list of documents required as per coverage under the policy for claim.</p> <p>Note: The Company may call for additional documents/ information as relevant.</p> <p>If any Hospital does not submit a bill to Insured Person for the treatment/service rendered, please intimate The Company's Service Center before Insured Person leave the Hospital. Kindly submit all the requested documents at the address mentioned below:</p> <p>Universal Sompo General Insurance Co. Ltd.                      Claims Department- Travel</p>	<p>Section F</p>

		<p>C/o Falck India Pvt Ltd Upper Floor, The Peach Tree, Block – C, Sushant Lok –I, Sector 43, Gurgaon Haryana -122015</p> <p><b>Claim Notification</b> It is a condition precedent to The Company's liability hereunder that notice of Claim must be given by the Insured Person to The Company/ Assistance company within seven (7) days after an actual or potential loss occurs or as soon as reasonably possible and, in any event, no later than (30) Days after an actual or potential loss occurs. The fulfillment of the terms and conditions of this Policy (including payment of premium by the due dates mentioned in the Policy Schedule / Certificate of Insurance) insofar as they relate to anything to be done or complied with by the Insured Person(s), including complying with the procedures and requirements in relation to Claims, shall be Conditions Precedent to The Company liability under this Policy. For details on the Claims procedures and requirements or any assistance during the process, The Company /Assistance Company may be contacted at The Company's/ Assistance Company service call center on the number as specified below. The Company's /Assistance Contact center at +911244498766 Or email at FGA@IN.FALCK.COM</p> <p>In case of Claim the Insured Person must:</p> <ul style="list-style-type: none"> <li>• take immediate steps to protect, save and/or recover the covered property.</li> <li>• give immediate notice to the carrier or bailee who is or may be liable for the loss or damage.</li> <li>• notify the police or other appropriate authority in the case of Robbery or Theft within 24 hours.</li> </ul>	
10	Policy Servicing	<p><b>Universal Sampo General Insurance Co. Ltd.</b></p> <p>Unit No. 601 &amp; 602, 6th Floor, Reliable Tech Park, Thane Belapur Road, Airoli, Navi Mumbai- 400708</p> <p><b>Toll Free Numbers:</b> 1800-22-4030 or 1800-200-4030</p> <p><b>Senior Citizen toll free number:</b> 1800-267-4030</p> <p>E-mail Address: <a href="mailto:contactus@universalsompo.com">contactus@universalsompo.com</a></p> <p>For more details: <a href="http://www.universalsompo.com">www.universalsompo.com</a></p>	

11	Grievances/ Complaints	<p><b>Grievance Resolving Issue</b> Write to : Customer Service Universal Sampo General Insurance Co.Ltd. Unit No. 601 &amp; 602, 6th Floor, Reliable Tech Park, Thane-Belapur Road, Airoli, Navi Mumbai, Maharashtra – 400708 Email: <a href="mailto:grievance@universalsompo.com">grievance@universalsompo.com</a> For More details, visit - <a href="http://www.universalsompo.com">www.universalsompo.com</a> Visit Branch Grievance Redressal Officer (GRO)- Walk into any of our nearest branches and request to meet the GRO. Grievance Redressal Officer In case, the customer is not satisfied with the decision/resolution of the above office or have not received any response, he/she may write or email/mail to: Customer Service Universal Sampo General Insurance Co.Ltd. Unit No. 601 &amp; 602, 6th Floor, Reliable Tech Park, Thane-Belapur Road, Airoli, Navi Mumbai, Maharashtra – 400708 Email ID: <a href="mailto:GRO@universalsompo.com">GRO@universalsompo.com</a></p> <p><b>Insurance Ombudsman</b> Bima Bharosa Portal link : <a href="https://bimabharosa.irdai.gov.in/">https://bimabharosa.irdai.gov.in/</a> The customer can approach the Insurance Ombudsman depending on the nature of grievance and financial implication, if any. The updated contact details of the Insurance Ombudsman offices can be referred by clicking on the Insurance ombudsman official site: <a href="https://www.cioins.co.in/Ombudsman">https://www.cioins.co.in/Ombudsman</a>. 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="http://www.irdai.gov.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="http://www.policyholder.gov.in">http://www.policyholder.gov.in</a> or from any of Offices of the Company.</p>	Section H
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<p>12</p>	<p>Things to remember</p>	<p><b>1. Cancellation/ Termination of the Policy (Other than cancellation in the Free Look Period)</b></p> <p>The Insured may cancel this Policy by giving 7 days' written notice, and in such an event, the Company shall refund premium for the unexpired Policy Period as per the rates detailed below.</p> <p>a) If no claim has been made during the policy period, a proportionate refund of the premium will be issued based on the number of unexpired days. The date of cancellation request will be considered as expiry date of coverage</p> <p>b) If the claim has been made in the current policy year, the premium for the remaining policy year(s) will be refunded on cancellation</p> <p><b>2. Subrogation:</b> In the event of payment under this Policy, the Company shall be subrogated to all the Insured Person's rights or recovery thereof against any person or Organization, and the Insured Person shall execute and deliver instruments and papers necessary to secure such rights and assist and cooperate in any such action of the Company. The Insured Person and any claimant under this Policy shall at the expense of the Company do and concur in doing and permit to be done, all such acts and things as may be necessary or required by the Company, before or after Insured Person's indemnification, in enforcing or endorsing any rights or remedies, or of obtaining relief or indemnity, to which the Company shall be or would become entitled or subrogated. However, this condition shall not be applicable to the Personal Accident Section. specified by Us, which premium shall be at Our premium rate in force at the time of renewal. We, however, are not bound to give notice that it is due for renewal. Unless renewed as herein provided, this Policy shall terminate at the expiry of the period for which premium has been paid.</p> <p><b>3. Contribution:</b> If at the time of the happening of any loss or damage covered by this Policy, there shall be existing any other insurance of any nature whatsoever covering the same, whether effected by the Insured Person or not, then the Company shall not be liable to pay or contribute more than its ratable proportion of any loss or damage. However, this Section shall not be applicable to the Personal Accident Section, and any other Benefits offered on a fixed benefit basis.</p> <p><b>4. Right to inspect:</b> If required by the Company, an agent/representative of the Company including a loss assessor,</p>	<p>Section G</p>
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		<p>or a surveyor appointed in that behalf shall in case of any loss or any circumstances that have given rise to a claim to the Insured Person be permitted at all reasonable times to examine into the circumstances of such loss. The Insured Person shall on being required so to do by the Company produce all relevant documents relating to or containing reference relating to the loss or such circumstance in his possession including presenting himself for examination and furnish copies of or extracts from such of them as may be required by the Company so far as they relate to such claims or will in any way assist the Company to ascertain the correctness thereof or the liability of the Company under this Policy.</p>	
13	Your Obligations	<p>Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may affect the claim settlement. Disclosure of other material information during the policy period.</p> <p>Disclose any Material Information about Your Current/Recent Medical History, Past Medical History, Hospitalization History, Accidental Injury history, Any Surgical Procedure history &amp; or Congenital Diseases/Disorder birth defect.</p> <p>You can reach out at us for disclosure of Material Information-</p> <p><b>Universal Sampo General Insurance Co. Ltd.</b></p> <p>Unit No. 601 &amp; 602, 6th Floor, Reliable Tech Park, Thane Belapur Road, Airoli, Navi Mumbai- 400708</p> <p><b>Toll Free Numbers:</b> 1800-22-4030 or 1800-200-4030</p> <p><b>Senior Citizen toll free number:</b> 1800-267-4030</p> <p>E-mail Address: <a href="mailto:contactus@universalsompo.com">contactus@universalsompo.com</a></p> <p>➤ For more details: <a href="http://www.universalsompo.com">www.universalsompo.com</a></p>	--

Declaration by the Policy Holder

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

Place:

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

(Signature of the PolicyHolder)

Note:

i. For Product related documents including Customer Information Sheet, kindly refer to the below link: :  
<https://www.universalsompo.com/resources-downloads>

ii. In case of any conflict, the terms & conditions mentioned in the policy document shall prevail.