

## POLICY WORDINGS

### JANATA PERSONAL ACCIDENT INSURANCE

#### A. SCHEDULE

#### A. PREAMBLE

In consideration of Your having paid the premium for the period stated in the Schedule or for any further period for which We may accept the payment for Renewal of this Policy, We undertake that in the event of Death or Permanent Total Disablement sustained by the Insured Person(s) solely due to an Accidental Injury during the Policy Period, We will make payment to them or to their legal representative/Nominee as per the Table of Benefits set forth in the Policy 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 them have been met.

This Policy is an evidence of the contract between You and Universal Sampo 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 whenever it may appear.

#### C. DEFINITIONS

For the purposes of this Policy and endorsements, if any, the terms mentioned below shall have the meaning set forth:

Where the context so requires, references to the singular shall also include references to the plural and references to any gender shall include references to all genders.

##### C.1. Standard Definitions:

**Accident** means a sudden unforeseen and involuntary event caused by external, visible and violent means.

**AYUSH treatment** refers to the medical and / or hospitalization treatments given under Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy systems.

**Break in Policy** means the period of gap that occurs at the end of the existing policy term/installment premium due date, when the premium due for renewal on a given policy or installment premium due is not paid on or before the premium renewal date or grace period.

**Cashless facility** means a facility extended by Us to You where the payments, of the costs of treatment undergone by You in accordance with the Policy terms and conditions, are directly made to the network provider by Us to the extent pre-authorization approved.

**Condition Precedent** means a Policy term or condition upon which the Insurer's liability under the Policy is conditional upon.

**Dental Treatment** is treatment carried out by a dental practitioner including examinations, fillings (where appropriate), crowns, extractions and surgery excluding any form of cosmetic surgery/implants. **Disclosure to information norm** means the Policy shall be void and all premium paid hereon shall be forfeited to the Company, in the event of misrepresentation, mis-description or non-disclosure of any material fact

**Emergency Care** means management for a severe Illness or Injury which results in symptoms which occur suddenly and unexpectedly and requires immediate care by a Medical Practitioner to prevent death or serious long term impairment of the Insured Person's health.

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

**Hospital** means any institution established for In- patient care and Day Care treatment of Illness and/ or Injuries and which has been registered as a Hospital with the local authorities under the Clinical Establishments (Registration and Regulation) Act, 2010, or under the enactments specified under the Schedule of Section 56(1) of the said Act OR complies with all minimum criteria as under:

- has qualified nursing staff under its employment round the clock,
- has at least 10 inpatient beds, in those towns having a population of less than 10, 00,000 and 15 inpatient beds in all other places,
- has qualified Medical Practitioner (s) in charge round the clock,
- has a fully equipped operation theatre of its own where surgical procedures are carried out,
- maintains daily records of patients and will make these accessible to Insurance company's authorized personnel.

**Illness** means a sickness or a disease or pathological condition leading to the impairment of normal physiological function which manifests itself during the Policy Period and requires medical treatment.

**a) Acute condition** - Acute condition is a disease, Illness or Injury that is likely to respond quickly to treatment which aims to return the person to his/her state of health immediately before suffering the disease/Illness/Injury which leads to full recovery.

**b) Chronic condition** - A chronic condition is defined as a disease, Illness, or Injury that has one or more of the following characteristics:

- it needs ongoing or long-term monitoring through consultations, examinations, check-ups, and / or tests
- it needs ongoing or long-term control or relief of symptoms
- it requires Your rehabilitation or for you to be specially trained to cope with it
- it continues indefinitely
- it comes back or is likely to come back

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

**Inpatient Care** means treatment for which the Insured Person has to stay in a Hospital for more than 24 hours for a covered event.

**Medical Advise** means any consultation or advice from a Medical Practitioner including the issue of any prescription or repeat prescription.

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

**Medical Practitioner** is a person who holds a valid registration from the Medical Council of any State or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of

India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of licence and is not a member of the Insured Person's Family.

**Notification of Claim** is the process of notifying a claim to the insurer or TPA by specifying the timelines as well as the address / telephone number to which it should be notified.

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

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

**Subrogation** means the right of the insurer to assume the rights of the Insured Person to recover expenses paid out under the Policy that may be recovered from any other source.

## **C.2. Specific Definitions:**

**Accidental Death** means Death resulting from Bodily Injury solely and independently of any other cause except Illness directly resulting from, or medical or surgical treatment rendered necessary for such Injury, occasions the Death of the Insured Person within 12 months from the date of Accident.

**Adventure Sports:** Participation in sports activities such as bungee jumping, sky diving, white water canoeing/rafting and engaging in racing, hunting, mountaineering, ice hockey, winter sports and the like.

**Ambulance** means any vehicle used solely for the conveyance of injured persons from Accidental location or Your residential place or Hospital to any Hospital in emergency cases.

**Bodily Injury** means accidental physical bodily Injury solely and directly caused by external, violent visible cause.

**Capital Sum Insured** means the monetary amounts shown against Insured Person(s) which is the maximum limit of our liability against said Insured Person.

**Contribution** is essentially the right of an insurer to call upon other insurers liable to the same Insured to share the cost of an indemnity claim on a rateable proportion of Sum Insured. This clause shall not apply to any Benefit offered on fixed benefit basis.

**Insured** means the individual whose name is specifically appearing in the Schedule herein after referred as "You"/"Your"/"Yours"/"Yourself".

**Insured Person:** The person(s) named as Insured Person in the Schedule which will include you and your family inclusive of dependent parents.

**Nominee** means the person(s) nominated by the Insured Person to receive the insurance benefits under this

Policy payable on his/her death.

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**Period of Insurance:** The time period for which the contract of insurance is valid as shown in the Policy Schedule.

**Permanent Total Disablement:** The bodily Injury that totally, irrecoverably and absolutely prevents you from engaging in any kind of occupation.

**Permanent Partial Disability:** The bodily Injury that results in total, irrevocable, absolute and continuous loss of or impairment of a body part or sensory organ specified under the Table of Benefits.

**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.

**Policy:** Policy wording, the Schedule, the Proposal form and Endorsement / Memoranda, if any.

**Schedule** means Schedule attached to and forming part of this Policy mentioning the details of the Insured/Insured Persons, the Sum Insured, the period and the limits to which benefits under the Policy would be payable.

**Temporary Total Disablement:** The bodily Injury that prevents you from engaging in your occupation for a period not exceeding 104 weeks since the date of Injury to the time you are fit enough to resume your occupation as certified by Medical Professional

**Terrorism/Terrorist activity:** means any actual or threatened use of force or violence directed at or causing damage, Injury, harm or disruption, or commission of an act dangerous to human life or property, against any individual, property or government, with the stated or unstated objective of pursuing economic, ethnic, nationalistic, political, racial or religious interests, whether such interests are declared or not. Robberies or other criminal acts, primarily committed for personal gain and acts arising primarily from prior personal relationships between perpetrator(s) and victim(s) shall not be considered Terrorist activity. Terrorism shall also include any act, which is verified or recognized by the relevant Government as an act of terrorism.

**You/Your/Yours/Yourself** means the person(s) that We insure and is/are specifically named as Insured in the Schedule.

**We/Our/Ours/Us** mean Universal Sompo General Insurance Company Limited.

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

- b) Whilst under influence of intoxicating liquor or drugs.
- c) Drug addiction or alcoholism.
- d) Whilst engaged in any adventurous sports.
- e) Committing any breach of law with criminal intent.
- f) War, Civil War, invasion, act of foreign enemies, revolution, insurrection, mutiny, military or Usurped power, seizure, capture, arrest, restraint, or detainment, confiscation, or nationalisation or requisition by or under the order of any government or public authority.

5. Consequential loss of any kind and/or any legal liability
6. Death/disability due to pregnancy including child birth, miscarriage, abortion or complication.
7. Insured participating in any naval, military or air force operations.
8. Curative treatments or interventions
9. Venereal or sexually transmitted diseases.
10. Ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. For the purpose of this exclusion, combustion shall include any self-sustaining process of nuclear fission.
11. The radioactive, toxic, explosive or the hazardous properties of any nuclear assembly or nuclear component.

TABLE OF BENEFITS	
COVER FOR	PERCENTAGE OF CAPITAL SUM INSURED
1. Death	100
2. Permanent Total Disability:	
a. Loss of sight (both eyes)	100
b. Loss of two limbs	100
c. Loss of one limb and one eye	100
. Any other Permanent Total and absolute disablement as certified by Qualified Medical	100

## F. STANDARD TERMS AND CONDITIONS

### F.1. Standard Terms and conditions:

#### 1. Notice:

Janata Personal Accident Insurance  
UNIPAGP09002V020809

Every notice and communication to the Company required by this Policy shall be in writing.  
Initial  
notification can be made by telephone

## **2. Mis-description:**

This Policy shall be void and premium paid shall be forfeited to Us in the event of mis-representation, mis-description or non-disclosure of any materials facts by You.

Non-disclosure shall include failure on Your part to intimate us in writing and obtaining written approval from us in respect of Changes in Circumstances arising out of changes in the duty, business, occupation of the Insured Person(s).

## **3. Contribution and Subrogation:**

Subrogation and Contribution provisions are not applicable to the Policy.

## **4. Fraud**

All benefit under this Policy shall be forfeited and the Policy shall be treated as void in case of any fraudulent claims or if any fraudulent means are used by You or anyone acting on Your behalf to obtain any benefit under this Policy.

## **5. Cancellation/termination**

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.

- 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
- 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

## **6. Three Months Notice:**

We shall give You notice in the event We may decide to revise, modify or withdraw the product. Such notice shall be given to You at least three months prior the date when such modification or revision or withdrawal comes into effect. We shall adhere to the following:

- i) In case of modification or revision, the notice given to You shall detail the reasons for such revision or modification, in particular the reason for an increase in premium (if any) and the quantum of such increase.
- ii) The product shall be withdrawn only after due approval from the Insurance Regulatory and Development Authority. However, if You do not respond to Our intimation in case of such withdrawal, the Policy shall be withdrawn on the renewal date and We shall provide You with an option to migrate to a substitute product offered by Us.

## **7. Nomination**

The Policy has provision of nomination, In absence of Your declaring Nomination at the time of Proposal,  
then all benefits accrued under the Policy if any, shall be given to Your legal heir/ dependants.



## 8. Substitute Product

In case We may decide to withdraw this product under which this Policy is issued to You or where the children have attended maximum eligibility age under the Policy, if covered, We shall provide You with an option to buy a similar substitute Accident insurance Policy from Us.

## 9. Free Look -up period

1. The Policy shall have a free look period. The free look period shall be applicable at the inception of the Policy and:
  - i. You will be allowed a period of at least 30 days from the date of receipt of the Policy to review the terms and conditions of the Policy and to return the same if not acceptable
2. If You have not made any claim during the Free Look period, You shall be entitled to
  - i. A refund of the premium paid less any expenses incurred by Us on Your medical examination and the stamp duty charges or;
  - ii. Where the risk has already commenced and the option of return of the Policy is exercised by You, a deduction towards the proportionate risk premium for period on cover or;
  - iii. Where only a part of the risk has commenced, such proportionate risk premium commensurate with the risk covered during such period

## 10. Renewal

The policy shall ordinarily be renewable except on grounds of established fraud or non- disclosure or misrepresentation by the insured person.

- i. The Company will endeavour to give notice for renewal.
- ii. Renewal shall not be denied on the ground that the insured had made a claim or claims in the preceding policy years
- iii. At the end of the Policy Period, the policy shall terminate and can be renewed within the Grace Period to maintain continuity of benefits without Break in Policy. Coverage is not available during the grace period.
- iv. No loading shall apply on renewals based on individual claims experience.

The premium for renewals shall be subject to discount when group Policy issued witnesses favourable claims ratio as under:

Incurred Claim Ratio under the Group Policy	Discount Percentage (%)
Up to 20 %	25
21 % - 35 %	15
36 % - 50 %	10
51 % - 60 %	5

The premium for renewals shall be subject to loading when group Policy issued witnesses adverse claims ratio as under:

<b>Incurred Claim Ratio under the Group Policy</b>	<b>Loading Percentage (%)</b>
Between 80 % and 100 %	25
Between 101 % and 125 %	55
Between 126 % and 150 %	90
Between 151 % and 175 %	120
Between 176 % and 200 %	150

Over 200 %

Cover to be reviewed

We will inform You about the applicable risk loading through a counter offer letter. You have to revert to Us with consent and additional premium (if any) within 15 days of issuance of such counter letter. In case, You neither accept the counter letter from Us nor revert to Us within 15 days, We shall cancel Your application and refund the premium within next 7 days.

**Please note** We shall issue Policy only after getting Your consent

iv. The premium of the Policy may be revised subject to approval from Insurance Regulatory Development Authority

**11. Adjustment of Premium (applicable to policies issued on unnamed employees basis)** The premium payable hereon has been determined by reference to Your estimate of the number of persons and their category as stated in the Schedule. It is hereby agreed that during the Policy Period You shall maintain a proper and contemporaneous record of the actual number of persons within such category, which record shall be available for inspection by Us at any reasonable time.

Within one month from the expiry of this Policy, You shall provide Us with a written record of the actual number of persons within such category during the Policy Period and any information or supporting documentation in respect thereof at Our request. If the actual number of persons within such category ascertained after the expiry of this Policy shall differ from Your original estimate thereof, then:

- ☐ if the actual number of persons within such category exceeds the estimate of the same, You shall pay Us any additional premium that We may determine by reference to the differential, or
- ☐ if the actual number of persons within such category is less than the estimate of the same, We will reimburse You by reference to the differential but subject to minimum retention of premium of 50%

## **12. Compensation**

In case of claim by Death or Permanent Total Disablement compensation will be made only after deleting by an endorsement the name of the deceased/injured person in respect of whom such sums shall become payable.

## **13. Notices and Claims**

Any notice, direction or instruction given under this Policy shall be in writing and delivered by hand, post, or facsimile to:

**Universal Sampo General Insurance Co. Ltd.**

Unit No. 601 & 602, 6<sup>th</sup> Floor, Reliable Tech Park, Cloud City Campus; Gut No-31, ,  
Thane- Belapur Road, Airoli, Navi Mumbai- 400708

**Toll Free Numbers:** 1-800-224030 (For MTNL/BSNL Users) or 1-800-2004030

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

**Note:** Please include Your Policy number for any communication.

## 14. 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: Contact us

#### Write us at:

**Customer Service Universal Sampo  
General Insurance Co. Ltd.**

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

#### E- mail Address

[contactus@universalsompo.com](mailto:contactus@universalsompo.com)

#### For more details:

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

**Toll Free Numbers: 1800-22-4030 or**

**1800-200-4030**

**Senior Citizen toll free number: 1800-267-  
4030**

### Step 2: Grievance Cell

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.

**Customer Service Universal Sampo General  
Insurance Co. Ltd.**

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

#### E- mail Address:

[grievance@universalsompo.com](mailto:grievance@universalsompo.com)

#### For more details:

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

**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
- Seek and obtain further details, if any, from the complainant (permitted only once) Within one week
- Within 2 weeks of receiving your grievance, we will respond to you with the best solution.
- We shall regard the complaint as closed incase on non-receipt of reply from the complainant Within 8 weeks from the date of registration of the grievance

### Step 3: Chief Grievance Redressal Officer

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:

**Customer Service Universal Sompo General Insurance Co. Ltd.**

**Unit No. 601 & 602, 6<sup>th</sup> Floor, Reliable Tech Park, Thane- Belapur Road, Airoli, Navi Mumbai, Maharashtra – 400708**

For updated details of grievance officer, kindly refer the link  
<https://www.universalsompo.com/resource-grievance-redressal>

**Step 4: Insurance Ombudsman**

Bima Bharosa Portal link: <https://bimabharosa.irdai.gov.in/>

**E- mail Address:**

[gro@universalsompo.com](mailto:gro@universalsompo.com)

**For more details:**

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

You can approach the Insurance Ombudsman depending on the nature of grievance and financial implication, if any.

Information about Insurance Ombudsmen, their jurisdiction and powers is available on the website of the Insurance Regulatory and Development Authority of India (IRDAI) at [www.irdai.gov.in](http://www.irdai.gov.in), or of the General Insurance Council at <https://www.gicouncil.in/>, the Consumer Education Website of the IRDAI at <http://www.policyholder.gov.in>, 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/>.

**Note:** Please refer the Contact details of the Insurance Ombudsman mentioned in Annexure B.

## **F.2. Specific Terms and Conditions:**

### **1. Discount(s) under the Policy Group Discount**

We shall provide group discount as per below when the number of persons covered under the Policy exceeds 25. Group Discount will not be reviewed during the currency of the Policy, even if the size of the group exceeds the next slab.

<b>Number of Persons covered</b>	<b>Applicable discount</b>
Upto 25 persons	No discount
Between 25 and 50 persons	5% on total premium
Between 51 and 100 persons	10% on total premium
Between 101 and 300 persons	15% on total premium
Between 301 and 400 persons	20% on total premium
Between 401 and 500 persons	25% on total premium
Over 500 persons	To be decided by Corporate Office

### **On Duty Cover Discount:**

We may provide a discount up to 25% on the basic premium when Janata Personal Accident cover is only for restricted hours of duty (and not for all 24 hours of day and night) for the Insured Persons in

the Policy. The restricted cover is intended only for employers who wish to cover their employees for accidents during and in the course of employment.

**Off Duty Cover Discount:**

We may provide a discount up to 50% on the basic premium when Janata Personal Accident cover is required only for restricted hours, when the Insured Person is not at work and/ or not on official duty.

**2. Arbitration clause**

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

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

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

**14. Geographical Scope:**

The geographical scope of this Policy will be worldwide unless otherwise stated in the Policy schedule; however the claims shall be settled in India in Indian rupees. The provisions of this Policy shall be governed by the laws of India for the time being in force. The parties hereto unconditionally submit to the jurisdiction of the courts in India.

**15. Sum Insured Enhancement:**

Sum Insured can be enhanced only upon renewal, subject to Our underwriter's approval.

**3. Disclaimer Clause**

In case of any claim under the Policy which is not admitted by us and such claim shall not have been made 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.

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**G. CLAIM PROCEDURE****A) Upon happening of any Accident and/or Injury which may give rise to a claim under this Policy**

- You shall give us a notice to our call centre immediately and also intimate in writing to our Policy issuing office. In case of death, written notice also of death must, unless reasonable cause is shown, be given before interment/ cremation and in any case, within one calendar month after the death, and in the event of loss of sight or amputation of limbs, written notice thereof must also be given within one calendar month after such loss of sight or amputation.
- All certificates, information and evidence from a Medical Practitioner or otherwise required by Us as mentioned below shall be provided by You.

**B) Following documents shall be required in the event of a claim.****For Death Claim**

- Duly filled up claim form



- Death Certificate
- Original FIR
- Original Panchnama
- Post mortem report

**For Permanent Total disablement**

- Duly filled up claims form
- Original FIR
- Panchnama
- Hospitalization Report
- Hospital discharge card
- Original Certificate from Doctor of Govt. Hospital stating the degree of disability

We shall settle claim(s), including its rejection, within thirty days of the receipt of the last necessary claim document.

Wherever details pertaining to happening of claim are conveyed by You to Us after reasonable period, You shall provide the reasons of such delay to Us and We may on analysis of reasons provided by You, may condone the delay in intimation of claim or delay in providing the required information/documents to Us.

- C) On receipt of intimation from You regarding a claim under the Policy, we are entitled to carry out examination and ascertain details and in the event of death get the post-mortem examination done in respect of deceased person.

**D) Position after claim:**

We shall have no liability under this Policy, once the Sum Insured (Maximum Limit of Liability), as stated in the Policy Schedule with respect to any of the benefits, is exhausted by You.

**E) Claim Payment:**

- The Company shall settle or reject a claim, as the case may be, within 15 days from the date of submission of the claim.
- In the case of delay in the payment of a claim, the Company shall be liable to pay interest from the date of receipt date of receipt of intimation to till the date of payment.
- However, where the circumstances of a claim warrant an investigation in the opinion of the Company, it shall initiate and complete such investigation at the earliest in any case not later than 15 days from the date of submission of claim.
- In case of delay beyond stipulated 15 days the company shall be liable to pay interest at a rate 2% above the bank rate from the date of receipt of intimation to till the date of payment.

**Claims Disclaimer**

In the unfortunate event of any loss or damage to the insured property resulting into a claim on this policy, please intimate the mishap IMMEDIATELY to our Call Centre at Toll Free Numbers on 1-80022-4030 (for MTNL/BSNL users) or 1-800-200-4030 (other users) or on chargeable numbers at +91-22-41659800/+91-22-41659900. Please note that no delay should be allowed to occur in notifying a claim on the policy as the same may prejudice liability.

In case of any discrepancy, complaint or grievance, please feel free to contact Us within 15 days of receipt of the Policy

The details of Insurance Ombudsman are available below:

Areas of Jurisdiction	Office of the Insurance Ombudsman
<b>Gujarat, Dadra &amp; Nagar Haveli, Daman and Diu</b>	<b>AHMEDABAD</b> Shri Collu Vikas Rao Insurance Ombudsman Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor, Tilak Marg, Relief Road, AHMEDABAD – 380 001. Tel.: 079 - 25501201/02 Email: bimalokpal.ahmedabad@cioins.co.in
<b>Karnataka.</b>	<b>BENGALURU</b> Mr Vipin Anand Insurance Ombudsman Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No. 57-27-N-19 Ground Floor, 19/19, 24th Main Road, JP Nagar, 1st Phase, Bengaluru – 560 078. Tel.: 080 - 26652048 / 26652049 Email: bimalokpal.bengaluru@cioins.co.in
<b>Madhya Pradesh Chattisgarh.</b>	<b>BHOPAL</b> Shri R. M. Singh Insurance Ombudsman Office of the Insurance Ombudsman, 1st floor, "Jeevan Shikha",

	60-B,Hoshangabad Road, Opp. Gayatri Mandir,Arera Hills Bhopal – 462 011. Tel.: 0755 - 2769201 / 2769202 / 2769203 Email: bimalokpal.bhopal@cioins.co.in
<b>Odisha</b>	<b>BHUBANESHWAR</b> Shri Manoj Kumar Parida Insurance Ombudsman Office of the Insurance Ombudsman, 62, Forest park, Bhubaneswar – 751 009. Tel.: 0674 - 2596461 /2596455/2596429/2596003 Email: bimalokpal.bhubaneswar@cioins.co.in
<b>Punjab, Haryana (excluding Gurugram, Faridabad, Sonapat and Bahadurgarh), Himachal Pradesh, Union Territories of Jammu &amp; Kashmir,Ladakh &amp; Chandigarh.</b>	<b>CHANDIGARH</b> Mr Atul Jerath Insurance Ombudsman Office Of The Insurance Ombudsman, Jeevan Deep Building SCO 20-27, Ground Floor Sector- 17 A, Chandigarh – 160 017. Tel.: 0172-2706468 Email: bimalokpal.chandigarh@cioins.co.in
<b>Tamil Nadu, PuducherryTown and Karaikal (which are part of Puducherry).</b>	<b>CHENNAI</b> Insurance Ombudsman 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

<b>Delhi &amp; following Districts of Haryana - Gurugram, Faridabad, Sonapat &amp; Bahadurgarh.</b>	<b>DELHI</b> Insurance Ombudsman Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel.: 011 - 46013992/23213504/23232481 Email: bimalokpal.delhi@cioins.co.in
<b>Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura</b>	<b>GUWAHATI</b> Insurance Ombudsman Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Near Pan Bazar , S.S. Road, Guwahati – 781001(ASSAM). Tel.: 0361 - 2632204 / 2602205 / 2631307 Email: bimalokpal.guwahati@cioins.co.in
<b>Andhra Pradesh, Telangana, Yanam and part of Territory of Pondicherry.</b>	<b>HYDERABAD</b> Insurance Ombudsman Office of the Insurance Ombudsman, 6-2-46, 1st floor, "Moin Court", Lane Opp.Hyundai Showroom , A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004. Tel.: 040 - 23312122 / 23376991 / 23376599 / 23328709 / 23325325 Email: bimalokpal.hyderabad@cioins.co.in
<b>Rajasthan.</b>	<b>JAIPUR</b> Insurance Ombudsman Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg,

	<p>Jaipur - 302 005. Tel.: 0141- 2740363 Email: bimalokpal.jaipur@cioins.co.in</p>
<p><b>Kerala, Lakshadweep, Mahe-a part of Union Territory of Puducherry</b></p>	<p><b>KOCHI</b> Insurance Ombudsman Office of the Insurance Ombudsman, 10th Floor, Jeevan Prakash,LIC Building, Opp to Maharaja's College Ground,M.G.Road, Kochi - 682 011. Tel.: 0484 - 2358759 Email: bimalokpal.ernakulam@cioins.co.in</p>
<p><b>West Bengal, Sikkim, Andaman &amp; Nicobar Islands.</b></p>	<p><b>KOLKATA</b> Insurance Ombudsman 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</p>
<p><b>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,</b></p>	<p><b>LUCKNOW</b> Insurance Ombudsman Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, Lucknow - 226 001. Tel.: 0522 - 4002082 / 3500613 Email: bimalokpal.lucknow@cioins.co.in</p>

<p>Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar.</p>	
<p>Goa, Mumbai Metropolitan Region (excluding Navi Mumbai &amp; Thane)</p>	<p><b>MUMBAI</b> Insurance Ombudsman Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 022 - 69038800/27/29/31/32/33 Email: bimalokpal.mumbai@cioins.co.in</p>
<p>State of Uttaranchal and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal,</p>	<p><b>NOIDA</b> Insurance Ombudsman Office of the Insurance Ombudsman, Bhagwan Sahai Palace 4th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddh Nagar, U.P-201301. Tel.: 0120-2514252 / 2514253 Email: bimalokpal.noida@cioins.co.in</p>



<b>Amroha, Hathras, Kanshiramnagar, Saharanpur.</b>	
<b>Bihar, Jharkhand.</b>	<b>PATNA</b> Insurance Ombudsman Office of the Insurance Ombudsman, 2nd Floor, Lalit Bhawan, Bailey Road, Patna 800 001. Tel.: 0612-2547068 Email: bimalokpal.patna@cioins.co.in
<b>Maharashtra, Areas of Navi Mumbai and Thane (excluding Mumbai Metropolitan Region)</b>	<b>PUNE</b> Insurance Ombudsman Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 3rd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune – 411 030. Tel.: 020-24471175 Email: bimalokpal.pune@cioins.co.in

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