

## **CONSEQUENTIAL LOSS (FIRE) INSURANCE**

In consideration of the Insured named in the Schedule hereto having paid to The UNIVERSAL SOMPO GENERAL INSURANCE COMPANY LTD (hereinafter called the COMPANY), the premium mentioned in this Schedule, the Company agrees (subject to Special Conditions and Exclusions contained herein or endorsed or otherwise expressed hereon and also to the Conditions and Exclusions contained in the Fire Policy covering the interest of the Insured in the property at the premises) that if any building or other property or any part thereof used by the Insured at the premises for the purpose of the Business, be destroyed or damaged by the perils covered under the FIRE POLICY,(Destruction or damage so caused being hereafter termed Damage), and the Business carried on by the Insured at the Premises be in consequence thereof interrupted or interfered with, then the company will pay to the insured in respect of each item in the Schedule hereto the amount of loss resulting from such interruption or interference in accordance with the Provisions contained therein:

### PROVIDED THAT:

- Such Damage is caused at any time after payment of the premium during the period of Insurance named in the Schedule or any subsequent period in respect of which the Insured shall have paid and the Company shall have accepted the premium required for the renewal of the policy.
- 2) At the time of the happening of the Damage there shall be in force a FIRE POLICY covering the interest of the Insured in the property at the premises against such Damage and that payment shall have been made or liability admitted there under. However, the Proviso shall not apply where payments is not made under FIRE POLICY, solely due to operation of a proviso in FIRE POLICY excluding liability for losses below a specified amount.
- 3) The liability of the Company shall in no case exceed in respect of each item the sum expressed in the said Schedule to be insured thereon or in the whole the total sum insured hereby or such other sum or sums as may hereafter be substituted there for by memorandum duly signed by or on behalf of the Company.



### **CONDITIONS**

- 1. The insurance by this Policy shall cease if:
  - a) the business be wound up or carried on by a Liquidator or Receiver or Permanently discontinued

or

b) the Insured's interest ceases otherwise than by death

or

- c) any alteration be made either in the business or in the premises or property therein where by the risk of Damage is increased, at any time after the commencement of this insurance, unless its continuance be admitted by memorandum signed by or on behalf of the Company.
- 2. Notice shall be given to the company of alteration in existing blocks, addition of new blocks and or premises and / or deletion of existing blocks and / or premises during the currency of the Policy to enable the company to determine whether the basis rate of the policy undergoes a change as a result of such inclusions/ exclusions and to effect necessary adjustments in the premium under this policy.
- 3. On the happening of any Damage in consequence of which a claim is or may be made under this policy, the insured shall:
  - a) Forthwith give notice thereof to the Company
  - b) With due diligence do and concur in doing and permit to be done all things which may be reasonably practicable to minimize or check any interruption of or interference with the business or to avoid or diminish the loss.
  - c) Not later than thirty days after the expiry of the period of Indemnity or within such further time as the Company may in writing allow, at his own expense deliver to the company in writing a statement setting forth particulars of his claim together with details of all other Insurances (if any) covering the damage or any part of it or consequential loss of any kind resulting there from.
  - d) At his own expense produce or procure and give to the Company such books of account and other business books, vouchers, invoices, balance sheets and other documents, proofs, information, explanation and other evidence as may reasonably be required by or on behalf of the Company for the purpose of investigating or verifying the claim together with a declaration on oath or in other legal from of the Truth of the claim and of any matters connected therewith.

No claim under this policy shall be Payable unless the terms of this condition have been complied with and in the event of non- compliance therewith in any respect, any payment on account of the claim already made shall be repaid to the Company forthwith.

- 4. In no case whatsoever shall the Company be liable in respect of any claim under this Policy after the expiration of :
- a) One year from the end of the period of indemnity or if later.



- b) Three months from the date on which payment shall have made or liability admitted by the Insurers covering the Damage giving rise to the said claim, unless the claim is the subject of pending action or Arbitration.
- 5. This Policy and the Schedule annexed (which forms an integral part of this Policy) shall be read together as one contract, and words and expressions to which specific meanings have been attached in any part of this Policy or of the Schedule shall bear such specific meanings wherever they may appear.
- 6. This insurance does not cover any loss resulting from damage occasioned by or through or in consequence, directly or indirectly, of any of the following occurrences, namely:-
- a) War, Invasion, act of foreign enemy, hostilities or Warlike Operations (whether war be declared or not), Civil War.
- b) Mutiny, Civil Commotion assuming the proportion of or amounting to a popularrising, military rising, insurrection, rebellion, revolution, military or usurped power.

In any action suit or other proceeding where the company alleges that by reason of the provision of this condition any loss or damage is not covered by this Insurance, the burden of proving that such loss or damage is covered shall be upon the Insured.

7. At all times during the period of insurance of this Policy, the insurance cover will be maintained to the full extent of the respective sum Insured in consideration of which, upon the settlement of any loss under this Policy, pro-rata premium for the unexpired period from the date of such loss to the expiry of period of Insurance for the amount of such loss shall be payable by the Insured to the company.

The additional premium referred above shall be deducted from the net claim amount payable under the Policy. This continuous cover to the full extent will be available notwithstanding any previous loss for which the company may have paid hereunder and irrespective of the fact whether the additional premium as mentioned above has been actually paid or not following such loss. The intention of this condition is to ensure continuity of the cover to the Insured subject only to the right of the company for deduction from the claim amount when settled of pro-rata premium to be calculated from the date of loss till expiry of the Policy.

Notwithstanding what is stated above, the Sum Insured shall stand reduced by the amount of loss in case the Insured, immediately on occurrence of loss, exercises his option not to reinstate the Sum Insured as above.

### **GRIEVANCES**

In case of any grievance the insured person may contact the company through

i. Website: www.universalsompo.com

ii. Toll Free: 1 - 800 - 224030 (For MTNL/BSNL Users) or

1 - 800 – 2004030 or on chargeable numbers

at +91-22-27639800/+91-22-39133700;

iii. E-mail: contactus@universalsompo.com



iv. Courier: Universal Sompo General Insurance Co. Ltd, Unit No- 601 &602 A Wing, 6th Floor, Reliable Tech Park, Cloud City Campus; Thane- BelapurRoad, Airoli- 400708

**Policyholder** may also approach the grievance cell at any of the company's branches with the details of grievance :

If **Policyholder** is not satisfied with the redressal of grievance through one of the above methods, insured person may contact the grievance officer at

# grievance@universalsompo.com

For updated details of grievance officer, kindly refer the link **www.universalsompo.com**Grievance may also be lodged at IRDAI Integrated Grievance Management System - https://igms.irda.gov.in/

### Insurance Ombudsman -

The insured person may also approach the office of Insurance Ombudsman of the respective area/region for redressal of grievance. The contact details of the Insurance Ombudsman offices have been provided as Annexure-A.

Office Details	Jurisdiction of Office Union Territory,District)
AHMEDABAD - Shri Kuldip Singh	Gujarat,
Office of the Insurance Ombudsman,	Dadra & Nagar Haveli,
Jeevan Prakash Building, 6th floor,	Daman and Diu.
Tilak Marg, Relief Road,	
Ahmedabad - 380 001.	
Tel.: 079 - 25501201/02/05/06	
Email: bimalokpal.ahmedabad@cioins.co.in	
BENGALURU -	
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,	Karnataka.
Bengaluru — 560 078.	
Tel.: 080 - 26652048 / 26652049	
Email: bimalokpal.bengaluru@cioins.co.in	
BHOPAL -	Madhya Pradesh
Office of the Insurance Ombudsman,	Chattisgarh.
Janak Vihar Complex, 2nd Floor,	
6, Malviya Nagar, Opp. Airtel Office,	
Near New Market,	
Bhopal — 462 003.	
Tel.: 0755 - 2769201 / 2769202	
Fax: 0755 - 2769203	
Email: bimalokpal.bhopal@cioins.co.in	
BHUBANESHWAR - Shri Suresh Chandra Panda	
Office of the Insurance Ombudsman,	Orissa.
62, Forest park,	



Bhubneshwar -751009. Tel.: 0674 - 2596461 /2596455 Fax: 0674 - 2596429 Email: bimalokpal.bhubaneswar@cioins.co.in **CHANDIGARH -**Punjab, Office of the Insurance Ombudsman, Haryana(excluding Guruaram, Faridabad, Sonepat and Bahadurgarh) S.C.O. No. 101, 102 & 103, 2nd Floor, Himachal Pradesh, Union Territories of Jammu & Kashmir. Batra Building, Sector 17 – D, Ladakh & Chandigarh. Chandigarh - 160 017. Tel.: 0172 - 2706196 / 2706468 Fax: 0172 - 2708274 Email: bimalokpal.chandigarh@cioins.co.in **CHENNAI -**Tamil Nadu, Office of the Insurance Ombudsman, Tamil Nadu Fatima Akhtar Court, 4th Floor, 453, PuducherryTown and Anna Salai, Teynampet, Karaikal (which are part of Puducherry). CHENNAI - 600 018. Tel.: 044 - 24333668 / 24335284 Fax: 044 - 24333664 Email: bimalokpal.chennai@cioins.co.in **DELHI - Shri Sudhir Krishna** Delhi & Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Following Districts of Asaf Ali Road, Haryana - Gurugram, New Delhi - 110 002. Faridabad, Sonepat & Tel.: 011 - 23232481/23213504 Bahadurgarh. Email: bimalokpal.delhi@cioins.co.in **GUWAHATI-**Assam, Office of the Insurance Ombudsman, Meghalaya, Jeevan Nivesh, 5th Floor, Manipur, Nr. Panbazar over bridge, S.S. Road, Mizoram, Guwahati - 781001 (ASSAM). Arunachal Pradesh, Tel.: 0361 - 2632204 / 2602205 Nagaland and Tripura. Email: bimalokpal.guwahati@cioins.co.in **HYDERABAD** -Andhra Pradesh, Office of the Insurance Ombudsman, Telangana, 6-2-46, 1st floor, "Moin Court", Yanam and Lane Opp. Saleem Function Palace, part of Union Territory of Puducherry. A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004.



Tel.: 040 - 23312122	
Fax: 040 - 23376599	
Email: bimalokpal.hyderabad@cioins.co.in	
JAIPUR -	
Office of the Insurance Ombudsman,	
Jeevan Nidhi — II Bldg., Gr. Floor,	
Bhawani Singh Marg,	
Jaipur - 302 005.	Rajasthan.
Tel.: 0141 - 2740363	
Email: bimalokpal.jaipur@cioins.co.in	
ERNAKULAM - Ms. Poonam Bodra	Kerala,
Office of the Insurance Ombudsman,	Lakshadweep,
2nd Floor, Pulinat Bldg.,	Mahe-a part of Union
	Territory of Puducherry.
Opp. Cochin Shipyard, M. G. Road,	
Ernakulam - 682 015.	
Tel.: 0484 - 2358759 / 2359338	
Fax: 0484 - 2359336	
Email: bimalokpal.ernakulam@cioins.co.in	
KOLKATA - Shri P. K. Rath	West Bengal,
Office of the Insurance Ombudsman,	Sikkim,
Hindustan Bldg. Annexe, 4th Floor,	Andaman & Nicobar Islands.
4, C.R. Avenue,	
KOLKATA - 700 072.	
Tel.: 033 - 22124339 / 22124340	
Fax: 033 - 22124341	
Email: bimalokpal.kolkata@cioins.co.in	
LUCKNOW -Shri Justice Anil Kumar Srivastava	Districts of Uttar Pradesh :



Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratgani, Lucknow - 226 001.

Tel.: 0522 - 2231330 / 2231331

Fax: 0522 - 2231310

Email: bimalokpal.lucknow@cioins.co.in

Lalitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhabdra, Fatehpur, Pratapaarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajaana, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar.

### MUMBAI -

Office of the Insurance Ombudsman,

3rd Floor, Jeevan Seva Annexe,

S. V. Road, Santacruz (W), Mumbai - 400 054.

Tel.:

69038821/23/24/25/26/27/28/28/29/30/31

Fax: 022 - 26106052

Email: bimalokpal.mumbai@cioins.co.in

Goa,

Mumbai Metropolitan Region excluding Navi Mumbai & Thane.

## NOIDA - Shri Chandra Shekhar Prasad

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 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, Amroha, Hathras,
Kanshiramnagar,



PATNA - Shri N. K. Singh	Bihar,
Office of the Insurance Ombudsman,	Jharkhand.
2nd Floor, Lalit Bhawan,	
Bailey Road,	
Patna 800 001.	
Tel.: 0612-2547068	
Email: bimalokpal.patna@cioins.co.in	
PUNE - Shri Vinay Sah	Maharashtra,
Office of the Insurance Ombudsman,	Area of Navi Mumbai and Thane
Jeevan Darshan Bldg., 3rd Floor,	excluding Mumbai Metropolitan Region.
C.T.S. No.s. 195 to 198,	
N.C. Kelkar Road, Narayan Peth,	
Pune – 411 030.	
Tel.: 020-41312555	
Email: bimalokpal.pune@cioins.co.in	

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