

Liberty Inland Travel Insurance

For IRCTC customers

Policy Wordings

i) Conditions precedent to the contract

Liberty General Insurance Limited (“the Company, We, Our, or Us”), having received a Proposal from the Proposer, along with declaration(s), reports and such other documents as may be required, upon receipt of such proposal and upon occurrence of the Insured event(s) agree to pay the compensation having become payable under Part 2 of this Policy, i.e. that the Sum Insured/ appropriate benefit (s), subject however to the terms, conditions, provisos, exclusions contained herein or endorsed or otherwise expressed herein.

Part I: Definitions

The following words and terms shall have the meaning as described herein, wherever they appear in this Policy. The references to singular or masculine will include references to plural and female wherever the context permits and vice versa.

1. **“Accident”** - An Accident means sudden, unforeseen and involuntary event caused by external, visible and violent means.
 - (a) When in the course of working a railway, an accident occurs, being either a collision between trains of which one is a train, carrying passengers or the derailment of or other accident to a train or any part of a train carrying passenger.
 - (b) When in the course of working a railway an untoward incident occurs, in the train carrying passengers (any part of the train) or at the actual departure from the originating station to actual arrival of train at the destination station.
2. **“Age”**—means completed age on last birthday as per English calendar.
3. **“Act of terrorism”**- means the calculated use of violence (or the threat of violence) against civilians, harmful to human life, tangible or intangible property or infrastructure in order to attain goals that are political, economical, religious or racial interests; this is done through intimidation or coercion or instilling fear. Terrorism shall also include any act which is verified or recognized by the relevant Government as an act of Terrorism.
4. **“Cashless facility”** means a facility extended by the Insurer to the Insured where the payments, of the costs of treatment undergone by the Insured in accordance with the policy terms and conditions, are directly made to the network provider by the Insurer to the extent pre-authorization approved.
5. **“Condition Precedent”** - Condition Precedent means a Policy term or condition upon which the Insurer's liability under the Policy is conditional upon.

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6. **“Congenital Anomaly”** - Congenital Anomaly means a condition which is present since birth, and which is abnormal with reference to form, structure or position.
- a) **“Internal Congenital Anomaly”** - Congenital anomaly which is not in the visible and accessible parts of the body.
- b) **“External Congenital Anomaly”** - Congenital anomaly which is in the visible and accessible parts of the body.
7. **“Day Care Treatment”** - Day care treatment refers to medical treatment, and/or surgical procedure which is:
- undertaken under General or Local Anesthesia in a hospital/Day Care Center in less than 24 hours because of technological advancement, and
 - which would have otherwise required a hospitalization of more than 24 hours.
- Treatment normally taken on an out-patient basis is not included in the scope of this definition.
8. **“Deductible”**- Deductible means a cost-sharing requirement under a health insurance policy that provides that the Insurer will not be liable for a specified rupee amount in case of indemnity policies and for a specified number of days/hours in case of hospital cash policies which will apply before any benefits are payable by the Insurer. A deductible does not reduce the sum insured. Deductible will be applicable for each event claimed by the Insured.
9. **“Declaration”**—means explicitly written or verbal statement/ information provided by the Insured during the course of Insurance, which forms the basis of this contract.
10. **“Disclosure to information norm”** - 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.
11. **“Doctor/Physician/Medical practitioner”**- A 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 his license, somebody who is not related to Insured either by sharing the residence of Insured or is a family member of the Insured. It would also include specialist Surgeon and Anesthetist.
12. **“Emergency Care”** - Emergency care means management for an 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.

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13. **“Geographical Scope”** - The geographical scope of this Policy will be India and the claims shall be settled in India in Indian rupees only. The laws of India shall govern the construction, interpretation and meaning of the provisions of this Policy for the time being in force. The parties hereto unconditionally submit to the jurisdiction of the courts in India.
14. **“Group”**-A group shall mean and include the customers of IRCTC holding a valid travel ticket.
15. **“Hospital”**- A 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 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 make these accessible to the Insurance Company's authorized personnel.
16. **“Hospitalization”** - Means admission in a Hospital for a minimum period of 24 consecutive 'In-patient Care' hours except for specified procedures/ treatments, where such admission could be for a period of less than 24 consecutive hours.
17. **“ICU (Intensive Care Unit) Charges”** means the amount charged by a Hospital towards ICU expenses which shall include the expenses for ICU bed, general medical support services provided to any ICU patient including monitoring devices, critical care nursing and intensivist charges
18. **“Illness”**- Illness means a sickness or a disease or pathological condition leading to the impairment of normal physiological function 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 or 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:
 1. it needs ongoing or long term monitoring through consultations, examinations, check-ups, and/or tests.

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2. it needs ongoing or long term control or relief of symptoms.
 3. it requires Your rehabilitation for the patient or for the patient to be specially trained to cope with it.
 4. it continues indefinitely.
 5. it recurs or is likely to recur.
19. **“Immediate family member”** – means Insured’s spouse, children, parents, siblings, children in law, parents in law, siblings in law, grandchildren, grandparents, legal guardian who reside in India
20. **“Injury”** - 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.
21. **“Inpatient Care”** - Inpatient care means treatment for which the Insured person has to stay in a hospital for more than 24 hours for a covered event.
22. **“Insured/ You/ Your/ Yourself”** - means a Group Policyholder on whose name the Policy is issued.
23. **“Insured Person/s”** - means the person/s named in Certificate of Insurance issued by the Company either directly or through Group Policyholder, for whom the insurance is proposed and appropriate premium is paid.
- “Insured Journey”** - means a Single Trip, Onward Trip and Multi-Trip undertaken during the Policy Period to a destination within India by a common carrier/owned vehicle/private vehicle.
24. **“Jewellery”** - means personal ornaments including but not limited to necklaces, rings, or bracelets typically made from or containing precious stones, gold, silver, platinum or other precious metals.
25. **“Limb”** - means the hand above the wrist joint or foot above the ankle joint.
26. **“Limit of Indemnity”** - means the amount stated in the Schedule against each relevant Section, which shall be Our maximum liability under this Policy (regardless of number of Claims made) for any one claim and in the aggregate for all claims under such Section subject to deductible specified in the Policy Schedule.
27. **“Medical Advice”** - Medical Advice means any consultation or advice from a Medical Practitioner including the issue of any prescription or follow-up prescription.
28. **“Medical Expenses”** - 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

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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.

29. **“Medically Necessary Treatment”** - Medically necessary treatment means any treatment, tests, medication, or stay in hospital or part of a stay in hospital which
- is required for the medical management of the illness or injury suffered by the Insured;
 - must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration, or intensity;
 - must have been prescribed by a Medical Practitioner,
 - must conform to the professional standards widely accepted in international medical practice or by the medical community in India.
30. **“Network Provider”** - Network Provider means hospitals enlisted by an Insurer, TPA or jointly by an Insurer and TPA to provide medical services to an Insured by a Cashless Facility.
31. **“Nominee”** means the person named in the Proposal or Schedule to whom the benefits under the Policy is nominated by the Insured Person.
32. **“Non- Network Provider”** - Non-Network Provider means any hospital, day care Centre or other provider that is not part of the network.
33. **“Notification of Claim”** - Notification of claim means the process of intimating a claim to the Insurer or TPA through any of the recognized modes of communication.
34. **“OPD treatment”** - OPD treatment means the one in which the Insured visits a clinic / hospital or associated facility like a consultation room for diagnosis and treatment based on the advice of a Medical Practitioner. The Insured is not admitted as a day care or in-patient.
35. **“Passenger”** - means a traveller travelling against a confirmed ticket on a train managed by IRCTC.
36. **“Permanent Partial Disability”** - means an accidental Injury caused by accident, which as a direct consequence thereof, disables any part of the limbs or organs of the body of the Insured person and which falls into one of the categories listed in the Table of Benefits.
37. **“Permanent Total Disablement”** - means Doctor certified total, continuous and permanent physical or functional loss of body parts as a result of accidental bodily injury.
38. **“Policy”** – means this document of Policy describing the terms and conditions of this contract of insurance including the Company’s covering letter to the Insured if any, the Schedule attached to

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and forming part of this Policy, the Insured's declarations made at proposal of Insurance and any applicable endorsement attaching to and forming part thereof either at inception or during the period of insurance.

39. **"Policy Period"** - means the period between the inception date and time and the expiry date and time as specified in the Schedule to this Policy or the cancellation of this insurance, whichever is earlier.
40. **"Portable electronic equipment"** means any self-contained, easily carried, battery-operated electronic equipment for personal use for communicating, viewing, listening, recording, playing video games, computing, or global positioning. It included a cellular or satellite telephone, paging device, personal global positioning system unit, portable computer, audio listening or recording device, digital camera, portable video game system, telephone answering machine, docking or charging station for a portable electronic device, and similar devices. It also included accessories for and services related to the use of such devices.
41. **"Property"** - refers to all moveable contents at the declared residence of Insured Person excluding Motor Vehicles, Pedal Cycles, Money, Jewellery and Valuables, work or art, paintings, curios, manuscripts, stamps, collection of stamps, bonds, cheques, securities, medals, documents, portable electronic equipment, livestock, credit and debit cards. It should be owned by Insured Person and/or Family of Insured and/or for which the Insured Person and/or Family of the Insured are legally responsible for and should not be used for business or business purposes.
42. **"Proposal and Declaration Form"** - means any initial or subsequent declaration made by the Insured/ Insured Person/s and is deemed to be attached and forming part of this Policy.
43. **"Reasonable and Customary Charges"** – 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 .
44. **"Room rent"** -Room Rent means the amount charged by a Hospital towards Room and Boarding expenses and shall include the associated medical expenses
45. **"Robbery"** means (i) in order to the committing of the theft at the declared residence of Insured Person, or in committing the theft at the declared residence of Insured Person, or in carrying away or attempting to carry away property obtained by the theft from declared residence of Insured Person, the offender, for that end, voluntarily causes or attempts to cause to the Insured Person's Immediate Family Members, death or hurt or wrongful restraint, or fear of instant death or of instant hurt, or of instant wrongful restraint or (ii) if the offender, at the time of committing the extortion at the declared residence of Insured Person, is in the presence of Insured Person's

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Immediate Family Members who is/are put in fear, and commits the extortion at the declared residence of Insured Person by putting the Insured Person's Immediate Family Members in fear of instant death, of instant hurt, or of instant wrongful restraint to the Insured Person's Immediate Family Members, and, by so putting in fear, induces the Insured Person's Immediate Family Members so put in fear then and there to deliver up the thing extorted at the declared residence of Insured Person. In this regard the offender is said to be present if he is sufficiently near to put the Insured Person's Immediate Family Members in fear of instant death, of instant hurt, or of instant wrongful restraint.

The term 'Extortion' means whoever intentionally putting the Insured Person's Immediate Family Members in fear of any injury to the Insured Person's Immediate Family Members, and thereby dishonestly induces the Insured Person's Immediate Family Members so put in fear to deliver to any person any property commits "extortion".

46. **"Subrogation"** - 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.
47. **"Surgery" or "Surgical Procedure"** Surgery or Surgical Procedure means manual and / or operative procedure (s) required for treatment of an illness or injury, correction of deformities and defects, diagnosis and cure of diseases, relief from suffering and prolongation of life, performed in a hospital or day care center by a medical practitioner.
48. **"Theft"** as defined in Section 378 of Indian Penal Code shall mean whoever, intending to take dishonestly any movable property from declared residence of the Insured Person, out of the possession of any person without that person's consent, moves that property in order to such taking, is said to commit theft.
49. **"Trip"** - shall mean a travel or journey undertaken by the Insured Person (s) travelling with a valid train ticket booked from IRCTC, from the date and time of actual boarding the train to the date of time of actual arrival of the train at the destination station as mentioned in the Policy schedule including 'process of entraining' and 'process of detraining' the train.
50. **"Trip Duration"**- means the time period commencing from the date & time when the Insured Person (s) boards the train and ending on the date & time of arrival at the destination station as mentioned in the Policy schedule including 'process of entraining' and 'process of detraining' as specifically mentioned in the Policy Schedule for the journey undertaken within the Policy period.
51. **"Unproven/Experimental treatment"** - Unproven/Experimental treatment means the treatment including drug Experimental therapy, which is not based on established medical practice in India, is treatment experimental or unproven.

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52. **“Untoward incident”**- means
- (a) The commission of a terrorist act within the meaning of sub-section (1) of section 3 of the Terrorist and Disruptive Activities (Prevention) Act, 1987(28 of 1987), or
 - (b) The making of a violent attack or the commission of robbery or dacoity; or
 - (c) The indulging in rioting, shoot-out or arson, by any person in or any train carrying passengers or, from the actual departure from originating station to actual arrival of train at destination station including ‘process of entraining’ and ‘process of detraining the train’ and Vikalp train, short termination and diverted route
 - (d) The accident falling of any passenger from a train carrying passengers.
53. **“Valuables”** - means photographic, audio, video, computer, computer peripherals, kindle, telecommunications and electrical equipment, telescopes, binoculars, spectacles, sunglasses, antiques, watches, art, jewelry, furs and any articles made of precious stones and metals, money, manuscripts, stamps, collection of stamps, bonds, ATM cards, credit cards, cheques, securities, medals, i-pods, mini disc players, MP3 players, tapes, films, cassettes, cartridges, headphones.
54. **“War”** – means Open and declared conflict between the armed forces of two or more states or nations to achieve economic, geographic, nationalistic, political, racial, religious or other ends.
55. **“We, Us, Our, Company”** – means Liberty General Insurance Limited.

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ii) Conditions applicable during the contract

Part II: Scope of Cover

Section 1- Accidental Death

The Company agrees to pay 100% Sum Insured as specified in the Policy Schedule under this Section to the Nominee or legal heirs, if during the Trip an Insured Person (s) sustains Bodily Injury which directly and independently of all other causes results in Death within twelve (12) calendar months from the Date of Loss.

If applicable and if payment has been made under the Permanent Total / Partial Disablement Section, any amounts paid under that Section would be deducted from payment of a claim under this Section of the Policy.

Specific Extension

Disappearance- If the Insured Person is not found within 7 years of the disappearance, sinking or wrecking of the Scheduled Railway Carrier in which he was travelling as a passenger, the Insured Person will be presumed to have died as a result of the Accident subject to all other terms and conditions of this Policy. If at any time, after the payment of the Accidental death benefit considered under disappearance, it is discovered that the Insured Person is still alive; all payments shall be reimbursed in full to the Company.

Section 2- Permanent Total Disablement

The Company agrees to pay to the Insured Person the Compensation, if during the Trip an Insured Person sustains Accidental Bodily Injury which directly and independently of all other causes results in Permanent total disablement within twelve (12) calendar months of the Date of Loss.

If applicable and if payment has been made under the Partial Disablement Section, any amounts paid under that Section would be deducted from payment of a claim under this Section of the Policy.

For the purpose of this cover, Permanent total disablement shall mean either of the following and compensation will be paid as per table below.

The Disablement	<i>Compensation Expressed as a Percentage of Total Sum Insured</i>
1. Permanent Total Disablement	100%

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2. Permanent and incurable insanity	100%
3. Permanent Total Loss of two <i>Limbs</i>	100%
4. Permanent Total <i>Loss of Sight</i> in both eyes	100%
5. Permanent Total <i>Loss of Sight</i> of one eye and one <i>Limb</i>	100%
6. Permanent Total <i>Loss of Speech</i>	100%
7. Complete removal of the lower jaw	100%
8. Permanent Total <i>Loss of Mastication</i>	100%
9. Permanent Total Loss of the central nervous system or the thorax and all abdominal organs resulting in the complete inability to engage in any job and the inability to carry out <i>Daily Activities</i> essential to life without full time assistance	100%
10. Permanent disablement not otherwise provided for under above Items inclusive up to a maximum of sum, Insured.	100%

Section 3- Permanent Partial Disablement

The Company agrees to pay to the Insured Person the Compensation, if during the Trip an Insured Person sustains Bodily Injury which directly and independently of all other causes results in Permanent Partial disablement within twelve (12) months of the Date of Loss.

For the purpose of this cover, Permanent partial disablement shall mean either of the following and compensation will be paid as per table below.

The Disablement	Compensation Expressed as a Percentage of Total Sum Insured
1. Permanent Total <i>Loss of Hearing</i> in both ears	100%
2. Permanent Total Loss of one <i>Limb</i>	67%

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3. Permanent Total <i>Loss of Sight</i> of one eye	67%
4. Permanent Total <i>Loss of Hearing</i> in one ear	20%
5. Permanent Total Loss of the lens in one eye	33%
6. Permanent Total Loss of use of four fingers and thumb of either hand	53%
7. Permanent Total Loss of use of four fingers of either hand	27%
8. Permanent Total Loss of use of one thumb of either hand	27%
9. Permanent Total Loss of one finger of either hand	7%
10. Permanent Total Loss of use of toes	20%
11. Established non-union of fractured leg or kneecap	13%
12. Shortening of leg by at least 5 cms.	10%
13. Any loss is of the elbow, hip or knee	27%
14. Any other Permanent Partial not included in above items.	% as assessed by Doctor.

Specific Condition

- 1) The total amount payable in respect of more than one disablement due to the same Accident is arrived at by adding together the various percentages shown in the Table of Benefits, but shall not exceed the Total Sum Insured.
- 2) If an Insured Person dies as the result of the Bodily Injury any amount claimed and paid to an Insured under the Permanent Disablement Section will be deducted from any payment under the Accidental Death and/or Permanent Total Disablement Section.

Section 4 - Emergency Accidental Hospitalization

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The Company will indemnify the Insured Person (s) up to the Sum Insured specified in the Policy Schedule for reasonable and customary medical expenses incurred by the Insured Person (s) towards hospitalization in India on account of accidental injury occurring during the Trip, subject to following:

The medical expenses shall include and be limited to the following services:

- I. Room, Boarding expenses to be capped at 2% of the sum insured
- II. Intensive/Critical Care Unit charges to be capped at 4% of the sum insured
- III. OPD charges are not covered. However, procedures followed under day care shall be covered.

Associated medical expenses as specified below:

- i. Doctor's fees
- ii. Nursing Expenses
- iii. Surgical Fees, Operation Theatre Charges, Anesthetist, Anesthesia, Blood, Oxygen and their administration, Physical Therapy
- iv. Prescribed Drugs and medicines consumed on the premises
- v. Investigation Services such as Laboratory, X-Ray, Diagnostic tests
- vi. Dressing, Ordinary splints and plaster casts
- vii. Cost of Prosthetic and other devices that are used intra operatively during a Surgical Procedure, if recommended by the attending Medical Practitioner

If the Insured Person is admitted in a room where the Room Rent incurred or the Room Category is different than the one specified in the Policy Certificate, then the Insured shall bear the rateable proportion of the total associated Medical Expenses (including surcharge or taxes thereon) in the proportion of the difference between the room rent actually incurred and the room rent limit or the Room Rent of the entitled room category to the room rent actually incurred.

The coverage for Hospitalization Expenses for Injury is over and above the Death/Permanent Total Disability/Permanent Partial disability Sum Insured mentioned in the Benefit Schedule.

Section 5- Transportation of the Mortal Remains

If the Insured Person dies during the Risk Period, then the Insurance Company will reimburse INR 10,000/- as the cost of either transporting his mortal remains to his usual place of residence or to a cremation or burial ground subject to a valid claim admissible under Section Accidental Death mentioned in the Policy Schedule.

Section 6- Train Delay

The Company is liable to pay the amount specified in the Policy Schedule if the Insured journey in the train as a passenger on which he is booked to travel at destination place forming part of the Trip, is delayed than the original arrival time beyond the no. of hours as specified in the Policy Schedule, the Company will pay

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the amount given below to the Insured Person for Trip delay. The Insured person must provide the written confirmation towards the duration and cause of delay from IRCTC.

S. No.	Delay in arrival of Train at destination	Coverage
1.	Delay of more than 1 hours	Rs. 100/- (Rs. One Hundred Only)
2.	Delay of more than 2 hours	Rs. 250/- (Rs. Two Hundred and fifty Only)

The maximum liability under this section will be processed as per the delay hours and subject to maximum upto INR 250/- per Insured Person.

Section 7- Household Theft/Robbery (Contents)

The Company herewith agrees to compensate the Insured Person for any loss to the contents caused by any theft/robbery at his residence located in India during his ongoing Trip, subject to Deductible and the sum insured specified in the Policy Schedule.

Special Conditions

- i. **Articles in Pairs or Sets:** Where any item insured hereunder consists of articles in pair or set, Our liability in respect thereof shall not exceed the value of any particular part or parts which may be lost or Damaged without reference to any special value which such article or articles may have as part of such pair or set not more than a proportionate part of the insured value of the pair or set.

Exclusions applicable to Section 7-

This section of the Policy does not indemnify Insured Person,

- 1) If the Loss is caused by theft and/or robbery and where Insured Person and/or any member of Insured Person's family member/domestic staff is concerned as principal or accessory.
- 2) For any Loss caused by use of the key to the Insured Person's residence or any duplicate thereof belonging to the Insured Person's, unless such key has been obtained from Insured Person, by assault or violence or any threat thereof.
- 3) For any Loss directly or indirectly, proximately or remotely occasioned by or which arises out of or in connection with riot and strike, civil commotion, terrorist activities.
- 4) For any Loss to any part of the property or item occupied illegally in any manner.
- 5) Anything listed in General Exclusions.

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Basis of Indemnity

In the event of Property insured being stolen from declared residence of Insured Person, We shall pay for the current market value of the property.

Part III: Exclusions applicable to all the Sections

The Company shall bear no liability to make the payment in respect of claims arising directly or indirectly out of or attributable or traceable to any of the following:

General Exclusions:

1. Accident while crossing the Railway tracks
2. Accident due to breach of law with criminal intent.
3. Damage of health caused by curative measures, radiations, infection, poisoning except where arise from the accident.
4. From intentional self-injury, suicide or attempted suicide.
5. Whilst engaging in any sort or form of adventurous sport.
6. Committing any breach of law with criminal intent.
7. Influence of intoxication, liquor or drugs.
8. Directly or indirectly caused or contributed by congenital anomaly, venereal disease or insanity caused by, contributed to or aggravated or prolonged by child birth or from pregnancy
9. Any natural cause or disease or medical or surgical treatment unless such treatment becomes necessary due to injury caused by the said untoward incident.
10. War (whether declared or not), civil war, invasion, act of foreign enemies, rebellion, revolution, insurrection, mutiny, military or usurped power, seizure, capture, arrest, restraint or detainment, confiscation or nationalization or requisition of or damage by or under the order of any government or public local authority.
11. Nuclear energy, radiation.
12. Claim on account of injury due accident prior to the date & time of journey & post the date & time of journey would be excluded from the scope of the policy, however any delay in the time of departure & arrival of the respective train would be taken into consideration
13. Claim in instances wherein ticket was booked by the insured; however the train was not boarded. This is irrespective of whether the train ticket was cancelled or not.
14. Claim in instances wherein ticket was booked by the insured; however the ticket was not confirmed but still the passenger boarded the train.

Exclusion for hospital expenses:

1. The treatment of any illness even if caused by the Accident suffered by the Insured Person except any caused by Accident and requiring immediate medical treatment in order to maintain life or relieve immediate pain or distress.

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2. Any medical treatment which was not medically necessary.
3. Plastic or cosmetic surgery unless this is certified by the attending Medical Practitioner to be medically necessary for reconstruction following an Accident.
4. Dental treatment or surgery of any kind, unless to sound natural teeth and necessitated by an Accident.
5. Any health check-ups or examinations or measures primarily carried out for diagnostic or investigative reasons for any purpose other than treatment related to an Accident
6. Any costs relating to physiotherapy unless undertaken while the Insured Person is hospitalized.
7. Any costs or periods of residence incurred in connection with rest cures or recuperation at spas or health resorts, sanatorium, convalescence homes or any similar institution.
8. Any costs relating to the Insured Person's pregnancy, childbirth or the consequences of either.
9. Any congenital internal or external diseases, defects or anomalies.
10. Any Pre-existing conditions and complications
11. Any claim lodged being fraudulent in any respect or false declaration made or use of support documents or devices by Insured Person or anyone acting on Insured Person's behalf to obtain benefit out of the Policy by wrongful means or willful act.
12. Experimental, unproven or non-standard treatment.
13. Treatment by any other system other than modern medicine (also known as Allopathy).
14. The cost of spectacles, contact lenses, and hearing aids, crutches, artificial dentures, crowns and external appliances or devices whether for diagnosis or treatment.
15. Medicines, investigations and treatment not supported by prescription by the physician.

Part IV: General Conditions Applicable to all Sections

A. Declaration

- i. The Company shall have no liability towards any claim arising under this Policy if Insured Person makes any false/ incorrect declaration/information while proposing for insurance, which is material for accepting the risk and offering the cover under the Policy.

B. Transfer of Interest

The insurance Policy forms a Contract between the Company and the Insured Person. The Person under the Policy is not eligible to transfer, assign, alienate or in any way pass the benefits and/or liabilities to any other person, Institution, Hospital, Company or Corporate without specific prior approval in writing from the authorized officer of the Company. However, if the Insured Person is permanently incapacitated or deceased, the legal heirs of the Insured may represent him in respect of Claim under the Policy.

C. Subrogation

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The Insured and any claimant under this Policy, shall at the expense of the Company do or concur in doing or permit to be done all such acts and things that may be necessary or reasonably required by the Company for the purpose of enforcing any rights and remedies or obtaining relief or indemnity from other parties to which the Company shall be or would become entitled or subrogated upon the Company paying for or making good any loss or damage under this Policy whether such acts and things shall be or become necessary or required before or after the Insured's indemnification by the Company. The clause will be applicable for indemnity covers and not for benefit covers under the Policy.

D. Arbitration

In the event any dispute arises between the Parties out of or in connection with this Agreement, including the validity thereof, the Parties hereto shall endeavor to settle such dispute amicably in the first instance. The attempt to bring about an amicable settlement shall be treated as having failed as soon as one of the Parties hereto, after reasonable attempts, which shall continue for not less than 30 days, gives a notice to this effect, to the other party in writing. In case of any dispute, controversy or claim arising out of or relating to this Agreement, the Services or any matter or issue arising there from ('Dispute') shall be resolved in accordance with Arbitration and conciliation Act 1996. Such dispute, controversy, or claim shall be referred to the Sole Arbitrator to be mutually appointed by the parties as per the provisions of "The Arbitration and Conciliation Act-1996". In case, the parties fail to appoint Sole Arbitrator within 30 days, the event shall be referred to a three member Arbitral tribunal. One member each shall be appointed by both the parties. They shall, within 30 days of their appointment, mutually decide on the name of the third arbitrator. Arbitration proceedings shall be deemed to commence only on the first date of meeting of all the three arbitrators. The award of the arbitrator shall be final and binding on the parties to this contract. The venue of the Arbitration shall be New Delhi. The fees and expenses of the Arbitration Tribunal all other expenses of the Arbitration shall be borne jointly by the Parties in equal proportion and shall be governed by Circular No. 2011/IRCTC/Co/Legal/App. Arbitrator dated 05.09.2012. The Parties submit to the exclusive jurisdiction of the Courts of Delhi. This Agreement shall be interpreted in accordance with Indian law.

E. Electronic Transaction

The Insured agrees to adhere to and comply with all such terms and conditions as the Company may prescribe from time to time, and hereby agrees and validates that all transactions effected by or through facilities for conducting remote transactions including the Internet, World Wide Web, electronic data interchange, call centers, teleservice operations (whether voice, video, data or combination thereof) or by means of electronic, computer, automated machines network or through other means of telecommunication, established by or on behalf of the Company, for and in respect of the Policy or its terms, or the Company's other products and services, has his concurrence and full understanding of the terms and conditions affecting this Contract and shall constitute legally binding and valid transactions when done in adherence to and in compliance with the Company's terms and conditions for such facilities, as may be prescribed from time to time. The Company may exchange, share or part with any information to or with other group companies or any other person in connection with the Policy, as may be determined by the Company and shall not hold the Company liable for such use/application when done so after agreement with Insured.

Liberty Inland Travel Insurance

For IRCTC customers

Policy Wordings

F. Cancellation/Termination of the Policy

This Policy will terminate at the expiration of the period for which premium has been paid or on the Expiration Date shown in Policy Schedule.

Cancellation by Insurer:

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 made declared at Proposal of Insurance, statement, claim form and connected documents or any material information having been withheld or a Claim being fraudulent or any fraudulent means or devices being used by Insured to gain benefit under the Policy. In such event of policy cancellation no premium shall be refunded to the Insured.

The Company may, in the event of non-cooperation of the Insured/Insured person/s cancel this Policy, by giving 15 days notice by sending either physically or electronically, on the email/address made available to the Us shall be sufficient proof of the service of the notice and this policy shall be deemed cancelled as to all Insureds in which case the Company shall be entitled to deduct 10% of the premium amount received as administration charges and refund the balance amount subject to there being no claim made/ reported under the Policy.

Cancellation by Insured/Insured Person:

No cancellation of the policy by the insured will be allowed in case the insured has reported and received payment for a claim under any of the covers of this Policy prior to the date of notice of cancellation.

In case of ticket cancellation, Policy Schedule issued to Insured Person may be cancelled by the Insured Person within 10 days from the policy period end date, by intimation in writing to the Company as long as the Insured Person is able to establish to the Company's satisfaction that the Insured Person's Trip has not commenced. In this case we will process the full premium to the Insured Person.

G. Notifications & Declarations

The Insured/Insured Person needs to send any and all notices and declarations to the Company in writing only. Any and all notices and declarations for the attention of the Company shall be sent to the address specified in the Policy Schedule.

H. Fraud

If the Insured Person shall make any Claim knowing the same to be false or fraudulent as regards amount or otherwise, this Policy Schedule issued to Insured Person shall be void and all Claims or payments hereunder shall be forfeited.

I. Governing Law

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For IRCTC customers

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The construction, interpretation and meaning of the provisions of this Policy shall be determined in accordance with the laws of India. The section headings of this Policy are included for descriptive purposes only and do not form part of this Policy for the purpose of its construction or interpretation. The terms of this Policy shall not be waived or changed except by endorsement issued by the Company.

J. Entire Contract

The Policy constitutes the complete contract of insurance. No change or alteration in this Policy shall be valid or effective unless approved in writing by the Company, which approval shall be evidenced by an endorsement on the Policy. No agent shall or has the authority to change in any respect whatsoever any term and conditions and exclusions under this Policy or waive off any of its provisions.

Liberty Inland Travel Insurance

For IRCTC customers

Policy Wordings

iii) Conditions when a claim arises

K. Notification of Claims

Upon the happening of any event giving rise or likely to give rise to a claim under this Policy, the Insured/Insured Person(s) shall give immediate notice to Us but not later than 4 months after the event has taken place through on-line module or calling toll-free number or in writing to the address as shown in the Schedule with Particulars below:

- i. PNR no.
- ii. Policy Number/ Certificate No.
- iii. Type of claim
- iv. Name of the Insured Person availing treatment
- v. Details of injury
- vi. Name and address of the Hospital
- vii. Any other relevant information

The Company's liability under this Policy will be subject to the following provisos, upon the happening of any event giving rise to or likely to give rise to a Claim under any Section of this Policy,

- i) An immediate notification is made to the Insurance Company in respect of any Claim under Medical expenses and disability or train delay, by the Insured Person or, if deceased, his legal or other representative or immediate family member, and provided with the name of the treating Physician, the name and telephone number of the hospital at which treatment is being obtained, and the fact or matter giving rise to the need for medical treatment, all the original bills, receipts and documentation or information as mentioned in Annexure 'A'- Claim Documents Checklist or any other documents or information that might be required or requested by the Company for assessment of the claim.
- ii) The Insured Person/Claimant need to fill in the claim form (including online form) and forward the same to the Company along with all the bills, receipts and other supporting documentation or additional information requested by the Company for assessment of the claim.

L. Assessment of Claim & Payment

Reimbursement Claims - Notice of claim with particulars relating to Policy numbers, Policy schedule no, name of the Insured Person in respect of whom claim is made, nature of injury and name and address of the attending Medical Practitioner/ Hospital/ Nursing Home should be given to Us immediately on hospitalization due to injury/ death, failing which admission of claim would be based on the merits of the case as per the board approved underwriting policy of the Company. The Insured Person shall after intimation as aforesaid, further submit documents as per Annexure A at his/her own expense to Us within 15 days of discharge from the hospital.

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For IRCTC customers

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The Insured Person/s shall at any time as may be required authorize and permit the Company to obtain any further information or records from the Hospital, Medical Practitioner, Lab or other agency, in connection with the treatment relating to the claim. The Company may call for additional documents/information and/or carry out verification on a case to case basis to ascertain the facts/collect additional information/documents of the case to determine the extent of loss. Verification carried out will be done by professional Investigators or a member of the Service Provider and costs for such investigations shall be borne by the Company.

The Company may accept claims where documents have been provided after a delayed interval in case such delay is proved to be for reasons beyond the control of the Insured/ Insured Person/s. The Insured shall tender to the Company all reasonable information, assistance and proofs in connection with any claim hereunder.

No person other than the Insured /Insured Person(s) and/ or nominees declared at proposal can claim under this Policy.

a. Payment of Claim

- i. We will make payment to Insured Person or Insured Person's Nominee. If there is no Nominee and Insured Person are incapacitated or deceased, We will pay Insured Person's heir, executor or validly appointed legal representative and any payment We make in this way will be a complete and final discharge of our liability to make payment.
- ii. On receipt of all the documents as mentioned under Annexure 'A'- Claim Documents Checklist as provided hereunder and on being satisfied with regards to admissibility of the claims as per Policy terms and conditions, We shall settle the claim in accordance with the provisions of 'Protection of Policyholders' Interest Regulations, 2017'.
- iii. The Policy - excludes the List of excluded items - attached in the Policy document.
- iv. The following will apply specifically in respect of a Claim under Accidental Hospitalization:
 - a) The Insured Person shall present himself for medical examination by a Medical Advisor as considered necessary by the Company at his expense and the Insured Person agrees that the Company may approach anyone who may have treated the Insured Person for information and/or documentation in respect of the Claim.

M. Withdrawal of Product

Liberty Inland Travel Insurance

For IRCTC customers

Policy Wordings

In case the product is found to be financially unviable or is deficient in any manner, the Company shall, in terms of IRDAI (Health Insurance) Regulations 2016, have the option to withdraw this product from the market subject to prior approval of such withdrawal from the Regulatory Authority. Any withdrawal of the product would be duly intimated to existing customers.

N. Due Observance

The due observance of and compliance with the terms, provision, warranties and conditions of this Policy in so far as they relate to anything to be done or complied with by the Insured shall be a condition precedent to the Company's liability under this Policy.

O. Benefit Schedule:

Sections	Scope of Cover	Description	Sum Insured-INR	Deductible-INR/hours per Claim
Section 1	Accidental Death	Covers death due to an accident during the trip.	2,500,000	Nil
Section 2	Permanent Total Disablement	Covers Permanent Total Disability caused due to an accident during the trip.	2,500,000	Nil
Section 3	Permanent Partial Disablement	Covers Permanent Partial Disability caused due to an accident during the trip.	Up to 1,500,000	Nil
Section 4	Emergency Accidental Hospitalization	Covers medical expenses incurred towards hospitalization on account of accidental injury occurring during the trip.	Max upto 500,000	Nil
Section 5	Transportation of Mortal Remains	Covers cost of transportation of mortal remains or equivalent amount for burial or cremation of the Insured at the location where death has occurred, in case of death on account of accidental injury during the trip.	Max upto 10,000	Nil

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Section 6	Train Delay	Payment of a claim, if the Insured journey is delayed than the original arrival time at destination station beyond hours as specified in your Policy Schedule.	Delay of > 1 hour to 2 hours: INR 100 Delay of > 2 hours : INR 250	< 1 hour
Section 7	Household Theft/Robbery (Contents)	We will compensate the Insured in case of any theft/robbery at his residence during the trip.	Max upto 100,000	Nil

Part V: Grievance Redressal Procedure

We are concerned about You and are committed to extend the best possible services. In case You are not satisfied with our services or resolutions, please follow the below steps for redressal.

Step 1	Step 2	
Call us on Toll free number: 1800-266-5844 (8:00 AM to 8:00 PM, 7 days of the week) or Email us at: care@libertyinsurance.in or Write to us at: Customer Service Liberty General Insurance Ltd. 10th Floor, Tower A, Peninsula Business Park, Ganpatrao Kadam Marg, Lower Parel, Mumbai 400 013	If our response or resolution does not meet Your expectations, You can escalate at Manager@libertyinsurance.in	
	<th>Step 3</th>	Step 3
	If You are still not satisfied with the resolution provided, You can further escalate at ServiceHead@libertyinsurance.in	

An acknowledgement will be sent on receipt of Insured Person's concern, We would then investigate the matter internally and respond with a suitable resolution. Please share Insured Person's contact details to enable us to get in touch with You.

Liberty Inland Travel Insurance

For IRCTC customers

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In case You are not satisfied with the decision or resolution provided by the Company You may approach the Insurance Ombudsman for redressal. The details of Insurance Ombudsman offices are given below:

Office of the Ombudsman and Contact Details	Areas of Jurisdiction
AHMEDABAD - Shri Kuldip Singh Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor, Tilak Marg, Relief Road, Ahmedabad – 380 001. Tel.: 079 - 25501201/02/05/06 Email: bimalokpal.ahmedabad@ecoi.co.in	Gujarat, Dadra & Nagar Haveli, Daman and Diu.
BENGALURU – Smt. Neerja Shah Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No. 57-27-N-19, Ground Floor, 19/19, 24th Main Road, JP Nagar, Ist Phase, Bengaluru – 560 078. Tel.: 080 - 26652048 / 26652049 Email: bimalokpal.bengaluru@ecoi.co.in	Karnataka.
BHOPAL – Shri Guru Saran Shrivastava Office of the Insurance Ombudsman, 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@ecoi.co.in	Madhya Pradesh Chattisgarh.

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BHUBANESHWAR - Shri Suresh Chandra Panda Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar – 751 009. Tel.: 0674 - 2596461 / 2596455 Fax: 0674 - 2596429 Email: bimalokpal.bhubaneswar@ecoi.co.in	Orissa
CHANDIGARH – Dr. Dinesh Kumar Verma Office of the Insurance Ombudsman, S.C.O. No. 101, 102 & 103, 2nd Floor, Batra Building, Sector 17 – D, Chandigarh – 160 017. Tel.: 0172 - 2706196 / 2706468 Fax: 0172 - 2708274 Email: bimalokpal.chandigarh@ecoi.co.in	Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir, Chandigarh.
CHENNAI – Shri. M. Vasantha Krishna Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018. Tel.: 044 - 24333668 / 24335284 Fax: 044 - 24333664 Email: bimalokpal.chennai@ecoi.co.in	Tamil Nadu, Pondicherry Town and Karaikal (which are part of Pondicherry).
DELHI - Shri Sudhir Krishna Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel.: 011 - 2323481/23213504 Email: bimalokpal.delhi@ecoi.co.in	Delhi.

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ERNAKULAM - Ms. Poonam Bodra Office of the Insurance Ombudsman, 2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard, M. G. Road, Ernakulam - 682 015. Tel.: 0484 - 2358759 / 2359338 Fax: 0484 - 2359336 Email: bimalokpal.ernakulam@ecoi.co.in	Kerala, Lakshadweep, Mahe-a part of Pondicherry.
GUWAHATI – Shri Kiriti. B. Saha Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati – 781001 (ASSAM). Tel.: 0361 - 2132204 / 2132205 Email: bimalokpal.guwahati@ecoi.co.in	Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.
HYDERABAD – Shri L Suresh Babu Office of the Insurance Ombudsman, 6-2-46, 1st floor, "Moin Court", Lane Opp. Saleem Function Palace, A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004. Tel.: 040 - 65504123 / 23312122 Fax: 040 - 23376599 Email: bimalokpal.hyderabad@ecoi.co.in	Andhra Pradesh, Telangana, Yanam and part of Territory of Pondicherry.
JAIPUR – Smt. Sandhya Baliga Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141 - 2740363 Email: Bimalokpal.jaipur@ecoi.co.in	Rajasthan.

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KOLKATA - Shri P. K. Rath Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 / 22124340 Fax : 033 - 22124341 Email: bimalokpal.kolkata@ecoi.co.in	West Bengal, Sikkim, Andaman & Nicobar Islands.
LUCKNOW -Shri Justice Anil Kumar Srivastava Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, Lucknow - 226 001. Tel.: 0522 - 2231330 / 2231331 Fax: 0522 - 2231310 Email: bimalokpal.lucknow@ecoi.co.in	Districts of Uttar Pradesh : Laitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhabdra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar.
MUMBAI – Shri Milind A. Kharat Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 022 - 26106552 / 26106960. Fax: 022 - 26106052 Email: bimalokpal.mumbai@ecoi.co.in	Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane.

Liberty Inland Travel Insurance

For IRCTC customers

Policy Wordings

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.: 0120-2514250 / 2514252 / 2514253 Email: bimalokpal.noida@ecoi.co.in	State of Uttaranchal and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshihar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.
PATNA - Shri N. K. Singh Office of the Insurance Ombudsman, 1st Floor, Kalpana Arcade Building,, Bazar Samiti Road, Bahadurpur, Patna 800 006. Tel.: 0612-2680952 Email: bimalokpal.patna@ecoi.co.in	Bihar, Jharkhand.
PUNE - Shri Vinay Sah 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.: 020-41312555 Email: bimalokpal.pune@ecoi.co.in	Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region.
EXECUTIVE COUNCIL OF INSURERS, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai – 400 054. Tel: 022 – 26106889 / 671 / 980. Fax: 022 – 26106949 Email: inscoun@ecoi.co.in Shri M.M.L. Verma, Secretary General Smt Moushumi Mukherji, Secretary	

Liberty Inland Travel Insurance

For IRCTC customers

Policy Wordings

For updated details of Insurance Ombudsman Offices You may visit Governing Body of Insurance Council (GBIC) website at <http://www.ecoi.co.in/ombudsman.html> or our website at <https://www.libertyinsurance.in/customer-support/grievance-redressal>

Annexure A- Claim Documents Checklist

Following is the indicative document list for reimbursement claims:

Emergency Accidental Hospitalization

- Report of the Railway Authority confirming the accident of the train
- Train ticket details
- Duly filled and signed Claim Form by insured / Nominee along with the NEFT mandate details & Original cancelled cheque with payee name printed on the cheque. If the name of the payee is not printed on the cheque please provide copy of first page of bank passbook
- Policy details
- Original Detailed Discharge Summary / Day care summary from the hospital.
- Original consolidated hospital bill with bill no. and break up of each Item, duly signed by the insured.
- Original payment Receipt of the hospital bill with receipt number, Reports for investigation supported by the note from Attending Medical Practitioner / Surgeon demanding such test.
- Copy of Indoor cases papers and other medical records as applicable for claim
- Surgeons certificate stating nature of Operation performed and Surgeons Bills and Receipts
- Attending Doctors/ Consultants/ Specialist's/ Anesthetist Bill and receipt and certificate regarding same
- Original medicine bills and receipts with corresponding Prescriptions.
- Original invoice/bills for Implants (viz. Stent /PHS Mesh/ IOL etc.) with original payment receipts.
- Hospital Registration Number and PAN details from the Hospital
- Doctors registration Number and Qualification from the doctor
- Photo ID and Address proof of policy holder and patient
- C-KYC form for claims above 1 lac

Accidental Death

- Report of the Railway Authority confirming the accident of the train
- Report of the Railway Authority carrying the details of the passengers declared dead.
- Duly Completed Personal Accident Insurance Policy Claim Form signed by Nominee / Legal Heir along with the NEFT mandate details & Original cancelled cheque with payee name printed on the cheque. If the name of the payee is not printed on the cheque please provide copy of first page of bank passbook
- Train ticket details towards the journey
- Attested copy of Death Certificate.
- Burial Certificate (wherever applicable).
- Policy details

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Permanent Total Disablement & Permanent Partial Disablement

- Report of the Railway Authority confirming the accident of the train
- Report of attending doctor confirming the extent of disability.
- Medical bills corresponding to doctor's prescription
- Duly Completed Personal Accident Insurance Policy Claim Form signed by insured/nominee along with the NEFT mandate details & Original cancelled cheque with payee name printed on the cheque. If the name of the payee is not printed on the cheque please provide copy of first page of bank passbook
- Attested copy of disability certificate from Civil Surgeon of Government Hospital stating percentage of disability.
- Attested copy of FIR.
- All X-Ray / Investigation reports and films supporting to disablement.
- Policy details
- Photograph before & after disability
- ticket details towards the journey

Transportation of Mortal Remains:

- Report of the Railway Authority confirming the accident of the train
- Report of the Railway Authority carrying the details of the passengers declared dead
- Photo identity proof of nominee. In absence of nominee, claim will be paid to Legal Heir only – as per Legal Heir / Succession Certificate
- Duly filled and signed Claim Form along with the NEFT mandate details & Original cancelled cheque with payee name printed on the cheque. If the name of the payee is not printed on the cheque please provide copy of first page of bank passbook
- Policy details.
- ticket details
- Attested Copy of death certificate with date, time, place and cause of death.
- Receipt towards expenses incurred in preparation and packing of mortal remains of the deceased along with the transportation of the same to the city of residence.

Train Delay

- Confirmation Letter from IRCTC
- Duly filled Claim Form
- Cancelled cheque/ NEFT details.
- Ticket details.

Household Theft/Robbery:

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For IRCTC customers

Policy Wordings

- Duly filled and signed claim form
- Policy details
- Travel ticket details
- FIR copy
- Inventory/list of items stolen and their original invoice
- Any other document as may be appropriately applicable for the claims

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For IRCTC customers

Policy Wordings

LIST OF EXCLUDED ITEMS (Applicable for Claim under Accidental Hospitalization only)

Sr no	Item
1	Baby food
2	Baby utilities charges
3	Beauty services
4	Belts/ braces
5	Buds
6	Cold pack/hot pack
7	Carry bags
8	Email / internet charges
9	Food charges (other than patient's diet provided by hospital)
10	Leggings
11	Laundry charges
12	Mineral water
13	Sanitary pad
14	Telephone charges
15	Guest services
16	Crepe bandage
17	Diaper of any type
18	Eyelet collar
19	Slings
20	Blood grouping and cross matching of donors samples
21	Service charges where nursing charge also charged
22	Television charges
23	Surcharges
24	Attendant charges
25	Extra diet of patient (other than that which forms part of bed charge)
26	Birth certificate
27	Certificate charges
28	Courier charges
29	Conveyance charges
30	Medical certificate

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31	Medical records
32	Photocopies charges
33	Mortuary charges
34	Walking aids charges
35	Oxygen cylinder (for usage outside the hospital)
36	Spacer
37	Spirometre
38	Nebulizer kit
39	Steam inhaler
40	Armsling
41	Thermometer
42	Cervical collar
43	Splint
44	Diabetic foot wear
45	Knee braces (long/ short/ hinged)
46	Knee immobilizer/shoulder immobilizer
47	Lumbo sacral belt
48	Nimbus bed or water or air bed charges
49	Ambulance collar
50	Ambulance equipment
51	Abdominal binder
52	Private nurses charges- special nursing charges
53	Sugar free tablets
54	Creams powders lotions (toiletries are not payable, only prescribed medical pharmaceuticals payable)
55	Ecg electrodes
56	Gloves
57	Nebulisation kit
58	Any kit with no details mentioned [delivery kit, orthokit, recovery kit, etc]
59	Kidney tray
60	Mask
61	Ounce glass
62	Oxygen mask
63	Pelvic traction belt
64	Pan can

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65	Trolley cover
66	Urometer, urine jug
67	Ambulance
68	Vasofix safety