1   1   1   1   1   1   1   1   1   1	3   Si No 4   5   1   6   2   7   8   4   9   5   10   11   6	Unit 1501.51522, 15th Floor, Tower 2, One International Command Stand New Publisheds, Mumbel —400013,  Phone: 92 126700 13315 Fac et 21.26700 1608  IRBA of India Rep, 15th 30, CNE U80000H41010PLC2996  Website Link: www.libertyinsurance.in  Title  Product Name  Usique Identification Number (UIN) allotted by IRDA/  Smichare  International Command Com	This docume  Hotor Liability policy Only  IRDAN150RP0034V01201213  Indemnity  Interest of insured is third party liability arising out of insure  /-  SECTION III - LIABILITY TO THIRD PARTIES : Subject to the insured shall become legally liabile to pay in respect of it. Death of or body linginy to any specion caused by or a it. Damage to property caused by the use (including the I the Company undertakes to pay compensation as per the	CUSTON Int provides only key information about your policy he XXXXXX Int provides only key information about your policy he XXXXXX Int provides only key information about your policy he XXXXXXXIII Int provides only key information about your policy he information about your policy he information and your policy he is a laid down in the Schedule hereto the issing out of the use (including the loading and/or unloading)	HEI INFORMATION SHEET  2020.000.000.000.000.000.000.000.000.0	erty val Insurance	Policy / Clause Number NA NA			
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The Processing Section of Section and Section and Section of Section	11	Policy Coverage	The Company undertakes to pay compensation as per the							
Minuted Printings   Minute	11	Policy Coverage		following scale for bodily injury/ death sustained by the Insured,	in direct connection with any of the vehicle of which he / she is registered owner or whilst driving or mounting into/dismounting from such vehicle or while	ist travelling in it as a co-driver,				
Manual Property of the State of Companyanian State of Companyanian State of Companyanian State of Companyanian State of State of Companyanian State of Sta			causeu by violent accidental external and visible means w	nich independent of any other cause shall within six calendar m	oritins or such injury result In:					
13   1	12		M-4	re of Injury	Scale of Pampageation					
13   1				y/			Section III			
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Section 1987    Section 1987   Computer published will be specified with the specified with project of the policy			(iv) permanent total disablement from injuries other than	named above	100%					
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Decided with the Company and not be bable in regach of:    Design processing the Company and a company of the Compa			Compulsary deductible will be applied in each and every of	laim intimated under Own Damage section of the policy.			NA			
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Compliance (Area )   1007	30		<del></del>							
32 Toll free / INRS number of the Insurer - 1800-266-5844  Website / Email - care@libertyinsurance.in	31		Final Claim amount 49386							
33 Website / Email - care@Ubertyinsurance.in	32	Policy Servicing - Ctaim Intimation and Processing	Toll free / NPS number of the Insurer - 1809-266-5844							
	33		Website Final: care@ilbertylinsurance.in Databask ofdersinants representation to product of nine of claim: 1800-986-9844							
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Consomer can't can	36		The Company shall settle or reject a claim, as the case ma	ay be, within 30 days from the date of receipt of last necessary d	ocument.					
Call us on Toll free number: 1800- 266-5844 (8:00 AM to 8:00 PM, 7 days of the weekl or Email us at: care@libertvinsurance.in or Write to us at: Customer Service Libertv General Insurance Limited 10th Floor, Tower A. Peninsula Business Park, Ganpatrao Kadam Marg, Lower Parel, Mumbai 400 013	37		Call us on Toll free number: 1800- 266-5844 (8:00 AM to 8	AA BAA M I 411 II II II II II II II II II	La William and Control Control (Ind.) Control (Ind.) And Flory Town & Project Control (Ind.)	r Parel Mumbai 400 013				

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3	-	Grievance Redressal Officer : Sameer Malgundkar					
9		Email ID : gro@libertyinsurance.in					
		Bima Bharosa (Grievance Redressal Portal), IRDAI- https://bimabharosa.irdai.gov.in/	Sima Bhanosa (Grievance Redressal Portal), RDAI- https://mbanbhanosa.id.ida.evu in/				
.		Insurance Ombudsman – The contact details of the Insurance Ombudsman offices have been provided as					
1		AnneNoure-B of Policy document.  OMBUDSMAN'S OFFICE					
1		Office of the Insurance Ombudsman,					
		Jeevan Prakash Building, 6th floor, Tilak Marg. Relief Road.	Tel.: 079 -25501201/02/05/06 bimalokpal.ahmedabad@cioins.co.in	Gujarat, Dadra & Nagar Haveli, Daman and Diu.			
2		Ahmedabad – 380 001.					
		Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No. 57-27-N-19					
		Ground Floor, 19/19, 24th Main Road,	Tel.: 080 - 26652048 / 26652049 bimalokpal.bengaluru@cioins.co.in	Karnataka			
3		JP Nagar, Ist Phase,  Rengaluru – 560.078  Office of the Insurance Ombudsman,					
		Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor,	Tel.: 0755 - 2769201 / 2769202				
		6, Malviya Nagar, Opp. Airtel Office, Near New Market,	Fax: 0755 - 2769203 bimalokpal.bhopal@cioins.co.in	Madhya Pradesh and Chhattisgarh			
4		Rhonal – 462 003	billialoxpai.bilopai@ciolis.co.iii				
		Office of the Insurance Ombudsman,	Tel.: 0674 - 2596461 /2596455				
		62, Forest park, Bhubneshwar – 751 009.	Fax: 0674 - 2596429 bimalokpal.bhubaneswar@cioins.co.in	Orissa			
<u> </u>		Office of The Insurance Ombudsman	· · ·	Provide	-		
		Jeevan Deep Building	Tel.: 0172 - 2706196 / 2706468	Punjab, Haryana(excluding Gurugram, Faridabad, Sonepat and Bahadurgarh)			
.1	ĺ	SCO 20-27, Ground Floor Sector- 17 A,	Fax: 0172 - 2708274 bimalokpal.chandigarh@cioins.co.in	Himachal Pradesh, Union Territories of Jammu & Kashmir, Ladakh & Chandigarh.			
Ή	ĺ	Chandigarh - 160017 Office of the Insurance Ombudsman,	1		1		
1	ĺ	Fatima Akhtar Court, 4th Floor, 453,	Tel.: 044 - 24333668 / 24335284 Fax: 044 - 24333664	Tamil Nadu, PuducherryTown and			
-1	ĺ	Anna Salai, Teynampet, CHENNAI – 600 018.	bimalokpal.chennai@cioins.co.in	Karaikal (which are part of Puducherry).			
1	ĺ	Office of the Insurance Ombudsman,	İ		1		
		2/2 A, Universal Insurance Building, Asaf Ali Road,	Tel.: 011 - 23232481/23213504 bimalokpal.delhi@cioins.co.in	Delhi & Following Districts of Haryana - Gurugram, Faridabad, Sonepat & Bahadurgarh.			
3		New Delhi – 110 002.	binatorpulacing considering				
		OFFICE OF THE INSURANCE OMBUDSMAN LIC OF INDIA	Tel.:- 0484-2358759/2359338	Kerala,	NA		
		10TH FLOOR, 'JEEVAN PRAKASH', DIVISIONAL OFFICE	Fax:- 0484-2359336 bimalokpal.ernakulam@cioins.co.in	Lakshadweep, Mahe-a part of Union Territory of Puducherry.			
13	Grievance Redressal and Policyholders Protection	M G ROAD ERNAKUI AM	bimalokpai.emakulam@cioins.co.in	wantes part of onlon renitory of roductions.			
		Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor,	Tel.: 0361 - 2632204 / 2602205	Assam, Meghalaya, Manipur, Mizoram,			
		Nr. Panbazar over bridge, S.S. Road,	bimalokpal.guwahati@cioins.co.in	Arunachal Pradesh, Nagaland and Tripura.			
)		Guwahati – 781001(ASSAM).			-		
		Office of the Insurance Ombudsman, 6-2-46, 1st floor, "Moin Court",	Tel.: 040 - 23312122	Andhra Pradesh,			
		Lane Opp. Saleem Function Palace,	Fax: 040 - 23376599	Telangana, Yanam and			
.		A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004.	bimalokpal.hyderabad@cioins.co.in	part of Union Territory of Puducherry.			
4		Office of the Insurance Ombudsman,			1		
		Jeevan Nidhi – II Bldg., Gr. Floor,	Tel.: 0141 - 2740363	Rajasthan			
2		Bhawani Singh Marg, Jaipur - 302 005.	bimalokpal.jaipur@cioins.co.in		1		
		Office of the Insurance Ombudsman,	Tel.: 033 - 22124339 / 22124340	West Bengal,			
		Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue,	Fax: 033 - 22124341 M: 8009693830	Sikkim, Andaman & Nicobar Islands.			
3		KOLKATA - 700 072.	bimalokpal.kolkata@cioins.co.in				
		Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II,	Tel.: 0522 - 2231330 / 2231331	Districts of Uttar Pradesh: Lalitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhabdra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur,			
		Nawal Kishore Road, Hazratganj,	Fax: 0522 - 2231310 bimalokpal.lucknow@cioins.co.in	Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, Santkabirnagar, Azamgarh,			
4		Lucknow - 226 001.	omalospa.iacenowecions.co.iii	Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar.	_		
		Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe,	Tel.: 69038821/23/24/25/26/27/28/28/29/30/31	Goa,			
		S. V. Road, Santacruz (W),	Fax: 022 - 26106052 bimalokpal.mumbai@cioins.co.in	Mumbai Metropolitan Region excluding Navi Mumbai & Thane.			
5		Mumbai - 400 054.  Office of the Insurance Ombudsman,	1		1		
1	ĺ	Bhagwan Sahai Palace	L	State of Uttaranchal and the following Districts of Uttar Pradesh:			
1	ĺ	4th Floor, Main Road, Naya Bans, Sector 15,	Tel.: 0120-2514252 / 2514253 bimalokpal.noida@cioins.co.in	Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad,			
.1	ĺ	Distt: Gautam Buddh Nagar, U.P-201301.		Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.			
4	ĺ	Office of the Insurance Ombudsman,	1		1		
1	ĺ	2nd Floor, Lalit Bhawan,	Tel.: 0612-2547068	Bihar, Jharkhand.			
1		Bailey Road, Patna 800 001.	bimalokpal.patna@cioins.co.in				
1	ĺ	Office of the Insurance Ombudsman,			1		
1	ĺ	Jeevan Darshan Bldg., 3rd Floor,	Tel.: 020-41312555	Maharashtra, Area of Navi Mumbai and Thane	1		
		C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune – 411 030.	bimalokpal.pune@cioins.co.in	excluding Mumbai Metropolitan Region.			
1		To disclose all information correctly sought by the insurer	at time of filling the proposal form	1	+		
1	In case of any change / modification / addition to the already declared information the same shall be brought to the notice of the insurer immediately						
14	Obligations of the Policyholder	Non-disclosure of material information may affect the cla (Disclosure of other material information during the policy					
		Insurer to specify the material information			<u> </u>		
I have read	the above and confirm having noted the details.	1	Declar	ration by the Policyholder;			
Place:	and above and commit having flored the details.						
race.			1	(Signature of the Policyholder)	<del>                                     </del>		
Date:							
Place:  Date:	go displayed above belongs to Liberty Mutual and used b	the Ukerte Country and		(organization size a conspiration)			