

## **OVERSEAS TRAVEL CONNECT INSURANCE POLICY**

#### NOTIFICATION

We request you to read and understand this document carefully before travelling from India. This will also help you in understanding the terms, conditions and exclusions of this Policy and the procedures to be followed in case of emergency assistance from us and an event occurring giving rise to a claim under the policy.

Liberty General Insurance Limited (We, Our or Us) hereby agree to provide the insurance described in this policy to the named Insured (You, Your/Yourself) in the policy schedule, which is based on the proposal and declaration from the Insured forming the basis of the contract, on payment of premium specified in the schedule and realization thereof by the Us, for the Insured Period defined in the Policy, subject to the terms, conditions, benefits and exclusions mentioned in the Policy. The limit of indemnity under the Policy will be the amount exceeding deductible subject to sum insured specified against the coverage and mentioned in the policy schedule.

#### 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 or Accidental" An accident is a sudden, unforeseen and involuntary event caused by external, visible and violent means.
- 2. "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.
- 3. **"Adventure sport"** An extreme sport (also called freesport, action sport, and adventure sport) is a popular term for certain activities perceived as having a high level of inherent danger. These activities often involve speed, height, a high level of physical exertion, and highly specialized gear or spectacular stunts.
- 4. "Age"-means completed age on last birthday as per English calendar.
- 5. "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.



- 6. **"Any One illness"** Any one illness means continuous period of illness and it includes relapse within 45 days from the date of last consultation with the Hospital/Nursing Home where treatment may have been taken.
- 7. **"Bodily Injury"** means physical, external, Accidental bodily injury occurring suddenly in time and resulting solely and independently of any other cause or any physical defect or condition existing prior to Policy Period.
- 8. **"Burglary"**—means the act of entry into or exit from a premise unlawfully, forcibly and violently with the intention of committing an act of crime.
- 9. "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.
- 10. "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.
- 11. "Common Carrier"- means any civilian land or water conveyance or Scheduled Aircraft, in each case operated under a valid license issued by relevant authority for the transportation of passengers for hire.
- 12. **"Condition Precedent"** Condition Precedent shall mean a policy term or condition upon which the Insurer's liability under the policy is conditional upon.
- 13. **"Congenital Anomaly"** Congenital Anomaly refers to a condition(s) which is present since birth, and which is abnormal with reference to form, structure or position.
- 14. "Internal Congenital Anomaly" Congenital anomaly which is not in the visible and accessible parts of the body
- 15. **"External Congenital Anomaly" -** . Congenital anomaly which is in the visible and accessible parts of the body.
- 16. **"Contribution"** 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 ratable proportion of Sum Insured.
- 17. "Damages for third party civil claims" means monetary sums payable pursuant to judgments or awards but shall not include fines, penalties, punitive damages, exemplary damages, any non-pecuniary relief, or any other amount which is without legal recourse to the Insured, or any matter that may be deemed to be uninsurable under Indian Law.
- 18. **"Day Care Center"** A day care center means any institution established for day care treatment of illness and / or injuries or a medical set -up within a hospital and which has been registered with the local authorities, wherever applicable, and is under the supervision of a registered and qualified medical practitioner AND must comply with all minimum criteria as under:
  - a. has qualified nursing staff under its employment;
  - b. has qualified medical practitioner (s) in charge;
  - c. has a fully equipped operation theatre of its own where surgical procedures are carried out;



- d. Maintains daily records of patients and will make these accessible to the Insurance company's authorized personnel.
- 19. "Day Care Treatment"-Day care treatment refers to medical treatment, and/or surgical procedure which is:
  - i. undertaken under General or Local Anesthesia in a hospital/Day Care Center in less than 24 hours because of technological advancement, and
  - ii. 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.
- 20. **"Deductible"**-A deductible is a cost-sharing requirement under this policy that provides that the Insurer will not be liable for a specified rupee amount of the covered expenses, 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.
- 21. "Declaration"-means explicitly written or verbal Statement/ information provided by the Insured during the course of Insurance, which forms the basis of this contract.
- 22. **"Dental Treatment"** -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.
- 23. "Dependent Child" -A dependent child refers to a child up to 18 years (natural or legally adopted), who is financially dependent on the primary insured or proposer and does not have his / her independent sources of income and is studying.
- 24. "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.
- 25. **"Doctor/Physician/Medical practitioner"** A Medical practitioner is a person who holds a valid registration from the medical council of any state/country in which the treatment is provided 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.
- 26. "Eligible Family"- means Insured person and/or insured's spouse and/or insured's two children.
- 27. "Emergency Care" -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.
- 28. **"Hazardous Activity"** participating in any sports or activity which could pose an increased risk or danger to You, and may require You to take additional precautions to avoid injury or claim.
- 29. **"Hijack"** means the unlawful seizure or exercise of control of any Carrier by force or violence or threat of force or violence or an act, including but not limited to the use of force or violence or the threat thereof, committed for any reason (including political, religious or ideological) by any person or group of persons, whether acting alone or on behalf of or in connection with any organization or government.
- 30. **"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 will make these accessible to the Insurance Company's authorized personnel.
- 31. "Hospitalisation" 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 24consecutive hours.
- 32. "Illness"- 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.
- 33. **"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 same country as the insured person.
- 34. **"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.
- 35. "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.
- 36. "Insured" means You and/or person(s) named in the policy schedule.
- 37. **"Insured Journey"** -means a single journey during the Policy Period to a destination outside of India, which is undertaken (departure and arrival) during the Policy Period.
- 38. **"Inclement weather"** means any catastrophic weather conditions which affect the scheduled arrivals or departures of the common carriers and does not include normal, seasonal climatic/ weather changes.
- 39. **"Intensive Care Unit"**-Intensive care unit means an identified section, ward or wing of a hospital which is under the constant supervision of a dedicated medical practitioner(s), and which is specially equipped for the continuous monitoring and treatment of patients who are in a critical condition, or require life support facilities and where the level of care and supervision is considerably more sophisticated and intensive than in the ordinary and other wards.
- 40. **"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.
- 41. "Medical Advise" Any consultation or advice from a Medical Practitioner including the issue of any prescription or repeat prescription.
- 42. **"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.



43. "Medically Necessary" -Medically necessary treatment is defined as 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.

- 44. "Network Provider" means hospitals or health care providers enlisted by an insurer or by a TPA and insurer together to provide medical services to an insured on payment by a cashless facility.
- 45. "Non- Network"-Any hospital, day care Centre or other provider that is not part of the network.
- 46. **"Notification of Claim" -** 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.
- 47. **"OPD treatment" -** OPD treatment is 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.
- 48. **"Permanent Total Disablement"** -means Doctor certified total, continuous and permanent physical or functional loss of body parts as a result of accidental bodily injury.
- 49. "Pet" A pet is a household animal kept for companionship and a person's enjoyment, as opposed to wild animals or livestock, laboratory animals, working animals or sport animals, which are kept for economic or productive reasons.
- 50. **"Policy"** means the proposal forms and declaration with your statements, the Policy Schedule, and any attached enrollment forms, endorsements, papers or riders.
- 51. **"Policy Period"** means the period starting when the insured passenger boards the aircraft for onward overseas journey from India on or after the policy commencement date and terminates when he disembarks on return to India or the Expiration date specified in the policy schedule, whichever is earlier.
- 52. **"Pre-existing condition"** means any condition, ailment or injury or related condition(s) for which you had signs or symptoms, and / or were diagnosed or diagnosable and / or received medical advice/ receiving medical advice/ treatment prior to inception of Your first policy with Liberty General Insurance Ltd.
- 53. **"Proposal form"** the application form for insurance cover submitted to Us along with all information and declarations which has enabled Us in considering whether and on what terms to offer this insurance.
- 54. "Qualified Nurse" -Qualified nurse is a person who holds a valid registration from the Nursing Council of respective country or the Nursing Council of any state in respective country.
- 55. **"Reasonable and Customary Charges"** Reasonable 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.



- 56. **"Sound Natural Teeth"** means natural teeth that are unaltered or are fully restored to their normal function and are Disease-free, have no decay and are not more susceptible to Injury than unaltered natural teeth.
- 57. "Strike" means a stoppage of work(a) Announced, organized and sanctioned by a labor union; and(b) Which interferes with the normal departure and arrival of a Common Carrier. Included in the definition of Strike are work slowdowns, lockouts and sickouts.
- 58. **"Subrogation"** shall mean 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.
- 59. **"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 of suffering or prolongation of life, performed in a hospital or day care center by a medical practitioner.
- 60. **"Theft**"-means a criminal act in which Insured's property is stolen or taken away by unlawful or felonious means with intent to deprive the insured of his property.
- 61. "Claims Administrator/Third Party Administrator (TPA)/Service Provider" means an organization or institution that is licensed by the IRDA and engaged for a fee or remuneration to provide claims facilitation services to the Insured/Insured person and the Company and that We appoint from time to time as specified in the Schedule.
- 62. **"Trip"** shall mean and include all journeys abroad undertaken from a port at the Country of Your Residence and return to any first port in the Country of Your Residence during the Period of Insurance as specified in the policy.

The maximum trip duration extended under the single trip will be 180 days and in case of annual multi trip policies the period will be restricted to 45 days per trip.

- 63. **"Unattended"** When Your property is not in full view of You or is not taken care of and as a consequence there is an unauthorized interference /loss of the same.
- 64. "Unproven/Experimental treatment" is treatment including drug Experimental therapy, which is not based on established medical practice in India, is treatment experimental or unproven.
- 65. **"Valuables"** means photographic, audio, video, computer, 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.
- 66. **"War"** 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.
- 67. "We, Us, Our, Company" Liberty General Insurance Limited.
- 68. "You/Your/Yourself"- means the Insured Person(s) who is named in the Policy Schedule.



Part II: Scope of Cover

#### Section 1-Medical expenses, Medical Evacuation and Repatriation

The Company will indemnify the Insured reasonable and customary expenses up to Sum Insured specified in the Policy schedule under this Section subject to deductible applicable to each claim separately under this Section in respect of the following:

- A) *Medical expenses* incurred by the Insured outside Republic of India towards the emergency care and Illness occurring for the first time during Policy Period or contracted during Trip. The expenses would include:
  - i. Doctor's Fees along with prescription. (Certified doctor's bill printed/written on his letter head)
  - ii. Expenses towards the room and boarding use of emergency room, operation theatre, surgeon charges in accordance with the room and the duration of the patient's stay in the hospital.
  - iii. Emergency outpatient treatments if the same is critical and cannot remain unattended till the Insured's return to India.
  - iv. Pathological investigations and diagnostic tests, x-rays for ailments occurring within the Policy Period.
  - v. Physician prescribed day care procedures like plaster casts, suturing, radiotherapy and phototherapy.
  - vi. Dental care as a result of Accidental Bodily Injury affecting the sound natural teeth of the Insured for the first time during the Trip.
  - vii. Ambulance charges towards medical evacuation of the Insured from accident location to the hospital up to limit specified in the Policy.
- B) Emergency Medical Evacuation to the Network Hospital in India due to accidental injury and/or illness occurring during the Policy Period. This benefit has to be preapproved by the Insurance Company/ Claims administrator of the Insurance Company and shall be after due approval by the treating doctor. The Company will also indemnify the Insured in respect of the Medical Expenses incurred by him within India to continue medical treatment commenced by the Insured outside of India, as a result of the Insured first having sustained Accidental Bodily Injury and/or Sickness and/or Disease during the course of the Insured Journey. The Company's liability to make payment hereunder shall be limited to a period of 60 days from and including the date upon which the aforesaid Accidental Bodily Injury and/or Sickness at the reasonable and customary Level.
- C) **Repatriation of the Mortal Remains** to the Republic of India in case of death of the Insured on account of insured event up to the limit specified in the Policy or the equivalent amount for burial or cremation of the Insured in the country where death has occurred. The expenses should be pre accepted and approved by the Company or the Claims administrator prior to preparing the remains for transportation to India or local burial/cremation.

#### Section 2-Personal Accident

The Company will indemnify the Insured Sum Insured specified in the Policy schedule under this Section. The cover would be applicable for only one of the below mentioned benefits for same accident. We will cover an Accidental Bodily Injury sustained during the course of the Insured Journey, provided that such Bodily Injury is within 12 months of the date upon which it was sustained and is the sole and direct cause of the,

- A) Death
- B) Permanent Total Disablement
- **C) Disappearance** In the event of the disappearance of the *Insured Person*, following a forced landing, stranding, sinking or wrecking of a conveyance in which such *Insured Person* was known to have been travelling as an occupant, it shall be deemed after twelve (12) months from the date of loss, subject to all other terms and conditions of this Policy, that such *Insured Person* shall have died as the result of an *Accident*. 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*.

**D)** *Children Education Bonus*. If the claim is payable as per policy terms and conditions under above mentioned benefits in this Section, we will pay the amount specified in the policy schedule as benefit payment for use towards the cost of education for two of Your dependent children under the age of 18 years as on the date of loss.

## Table for benefits under Death and Permanent Total disablement:-

Total sum insured will be restricted to 50% of the amount specified in the policy, for 6 months to 18 years.

Type of Disablement	Compensation in % of Total Sum Insured available under this benefit
Permanent Total Loss or dismemberment of two limbs	100
Permanent Total Loss of Sight of Both Eyes	100
Permanent Total Loss of Sight of One Eye and one limb	100
Permanent Total Loss of Hearing of Both ears	100
Permanent Total Loss of one eye/one limb	50
Permanent Total Loss of foot at ankle/arm at wrist	25
Permanent Total Loss of any of the fingers or toes	5
Quadriplegia	100
Paraplegia/Hemiplegia	50
Death	100

#### Exclusions applicable to Section 1 & 2

The Company shall be under no liability to make payment in respect of:

- 1) Any medical condition or complication arising from condition for which medical advice, diagnosis, care, or treatment (includes receiving services and supplies, consultations, diagnostic tests or prescription medicines) was recommended or received before the commencement of the Policy Period, or condition that had manifested itself in such a manner that would have caused a reasonably prudent person to seek medical advice, diagnosis, care, or treatment (includes receiving services and supplies, consultations, diagnostic tests or prescription medicines), or injury, illness, sickness, disease, or other physical, medical, mental, or nervous conditions, disorder or ailment (whether known or unknown) that, with reasonable medical certainty, existed at the time of application for the insurance herein or within preceding 48 months from the date of policy inception.
- 2) In case of any routine health checkup/ investigations without any objective existence of impairment of normal health, and expenses incurred for treatment in India except for expenses towards *Emergency Medical Evacuation* (Section 1B)
- 3) For any medical expenses beyond the policy period specified in the schedule.
- 4) Medical treatment if the same is the sole reason or one of the reasons for travel.
- 5) In respect of claims arising out of or attributable to travel undertaken against medical advice, or if the Insured is under treatment for illness declared in medical report or medical certificate provided by the Insured with the proposal form.
- 6) Suicide, attempted suicide (whether sane or insane) or intentionally self-inflicted Injury or Illness, or sexually transmitted conditions, mental or nervous disorder, anxiety, stress or depression, Acquired Immune Deficiency Syndrome (AIDS), Human Immune deficiency Virus (HIV) infection, venereal disease, alcoholism, drunkenness or abuse of drugs.
- 7) Participation of the Insured as driver in races and rallies. Losses on account of Accidental injuries arising out of driving vehicle without having International driving License and not following all safety norms of the jurisdiction (e.g. Wearing helmet whilst driving, driving within specified speed limits etc.).



- 8) If the Insured is exposed to any hazardous occupation like working with fireworks, trainer or instructor for trekking, mountaineering, scuba diving, winter sports, etc. (except in life saving attempt), any criminal or illegal act, serving in any branch of the Military or Armed Forces of any country, whether in peace or War. In case of such service in Military or Armed Force, We, upon written notification by You, shall return the pro rata premium for any such period of service during the Trip.
- 9) Claims arising out of any participation of the Insured unless under supervision of a trained professional in winter sports, mountaineering (where ropes or guides are customarily used), bungee jumping, rafting, underwater diving, parasailing, ballooning, parachuting, skydiving, paragliding, hang gliding, mountain or rock climbing necessitating the use of guides or ropes, potholing, abseiling, deep sea diving using hard helmet and breathing apparatus, polo, snow and ice sports, hunting or equestrian, skin diving or canoeing involving white water rapids, yachting or boating outside coastal waters (2 miles), professional sports or any other hazardous or potentially dangerous sport.
- 10) For any loss arising out of War, civil war, invasion, insurrection, revolution, act of foreign enemy, hostilities (whether War be declared or not), rebellion, mutiny, use of military power or usurpation of government or military power, terrorism.
- 11) For elective cosmetic/plastic surgery except as a result of accidental bodily injury during the policy period.
- 12) For Dental care except as a result of accidental bodily injury to the sound natural teeth, during the Policy Period.
- 13) Any claims arising directly or indirectly out of external or internal congenital anomalies.
- 14) Pregnancy resulting in childbirth, miscarriage, abortion, or complication arising out of any of the foregoing, expenses related to treatment of infertility or birth control measures except ectopic pregnancy.
- 15) Routine pre-natal care, childbirth, care of newborns, post-natal care, birth control, artificial insemination, infertility, impotency or sexual dysfunction, sterilization or reversal thereof.
- 16) Treatment of all forms of cancer/neoplasm.
- 17) Treatment incurred as a result of exposure to non-medical nuclear radiation and/or radioactive material(s).
- 18) Any costs incurred in connection with rest or recuperation at a spa or health resort, sanatorium convalescence home or similar institution.
- 19) Expenses towards immunizations and treatment towards obesity, its causes and complications.
- 20) Experimental, unproven or non-standard treatment.
- 21) Medicines, investigations and treatment not supported by prescription by the physician.
- 22) Treatment by any other system other than modern medicine (also known as Allopathy).
- 23) The cost of spectacles, contact lenses, and hearing aids, crutches, artificial dentures, crowns and all other external appliances and/or devices whether for diagnosis or treatment.
- 24) All those exclusions listed under General Exclusions.

#### Section 3 – Emergency Dental Care

If you are diagnosed of dental pain for the first time during the Trip, the Company will pay for Dental care in case of emergency dental pain relief up to the limit specified in the policy schedule. In case of accidental Injury the dental care benefits will be limited to medical expenses limits as mentioned in the policy. The benefit is applicable only for treatment for illness or accidental injury to sound natural teeth.

#### Section 4 – Hospital Confinement Allowance

The Company will pay the Insured the amount specified in the schedule for each continuous and completed 24 hour inpatient hospitalization of the named Insured subject to the liability being accepted under *Medical expenses* (Section 1). The liability under this Section would commence after the hospitalization of more than 48 hours.

Exclusions: Same as Section 1 &2



#### Section 5–Personal Liability

The Company will indemnify the Insured reasonable and customary expenses up to Sum Insured specified in the Policy schedule under this Section subject to deductible applicable to each claim separately, in respect of any legal liability arising out of accidental bodily injury or accidental property damage caused by the Insured in his private capacity to a third party occurring during the Insured Journey.

#### Special Conditions:

- A) The deductible will not apply in case the legal liability is incurred by the Insured in his private capacity to pay the damages towards third party Accidental Bodily Injury.
- B) The liability of the Company to indemnify the Insured under this section will be restricted to the compensation determined by the foreign court of law or otherwise agreed and approved in advance by the Company. If the legal action is initiated against the Insured within India, the Company's liability would be subject to:
  - a) Written intimation provided to the Company immediately on occurrence of legal liability overseas, at the address specified in the schedule, and
  - b) Not incurring any defense costs or expenses, admit liability for or settle or attempt to settle, make any admission or offer any payment or otherwise assume any contractual obligation with respect to any claim or claimant without the prior written consent of the Company, which shall be entitled (but in no case obligated) at any time to take over and conduct in the name of the Insured the defense and/or settlement of any action or claim and shall be entitled at all times to receive the Insured's cooperation and assistance and to appoint lawyers on the Insured's behalf. Any and all costs and expenses incurred by the Company or the lawyers appointed by the Company shall be a first charge on the Sum Assured hereunder.

The Company will not settle any claim without written consent from the Insured, however if the Insured disagrees on available settlement recommended by the Company, then the Company's liability will be limited to the amount for which the claim could have been settled.

#### Exclusions applicable to Section 5:

The Company will not be liable to make payments for the claims arising out of or traceable to:

- 1) Insured's liability to any employee/employer (under contract for services)
- 2) Third party property damage or bodily injury to Insured's family, co-worker or travelling companion.
- 3) Professional liability arising out of Insured's profession/activities.
- 4) Livestock belonging to Insured or is in custody of Insured.
- 5) The ownership, possession or use of vehicles, aircrafts or watercrafts, rented to or by You.
- 6) Any dangerous or hazardous activity, use of firearms, willful, criminal or unlawful act, terrorism.
- 7) Mental illness, Alcoholism, drug addiction or drugs (expect medically prescribed medicines)
- 8) Any supply of goods or services.
- 9) Any form of ownership or occupation of land or buildings, rental or holding any part of premises on rental basis.
- 10) Liability under any agreement or contract.
- 11) Sexual molestation, corporal punishment, or physical or mental abuse
- 12) Anything listed in General Exclusions.

#### Section 6 - Hijack Allowance

The Company is liable to pay the Insured the amount specified against this section, if the common carrier in which Insured is travelling is hijacked during the Trip, within the Policy Period specified and Insured Journey is interrupted for more than 24 hours.



## Exclusions applicable to Section 6:

The Company will not be liable for payment of any claim arising out of, traceable to attributable to and in respect of:

- 1) The Insured is suspected to be either principal or accessory in the hijacking.
- 2) Any claim on account of change in regular route of travel of the common carrier due to weather, fuel shortage, traffic and technical snag or security reasons.
- 3) Anything listed in General Exclusions.

## Section 7 - Travel Impediments

A) <u>Trip Delay</u>-The Company is liable to pay the amount specified in the schedule if the Insured's forward journey to foreign country, in a common carrier as a fare paying passenger on which he is booked to travel from India, is delayed than the original scheduled time beyond the deductible mentioned in the policy schedule. The benefit would be payable for continuous and completed period of 12 hours in excess of the deductible, subject to all other policy terms and conditions and policy limit mentioned.

The section covers the inadvertent delay due to inclement weather, strike of employees or technical/equipment failure of common carrier booked for Your travel.

#### Exclusions applicable to Section 7A:

- 1) The delayed departure due to strike or industrial action was known to exist or anticipated at the time of booking the trip.
- 2) The aircraft being taken out of service by Civil Aviation Authority or similar authority.
- 3) The Insured or accompanying passenger(s) has not checked in as per airlines requirement.
- 4) Anything listed in General Exclusions
- B) <u>Trip Curtailment</u>-The Company will pay the amount specified in the schedule as compensation towards the expenses incurred for travel tickets or hotel booking, if the Insured's Trip is cut short or Insured needs to return to India on account of following reasons:
  - 1. Death or Critical illness diagnosis of the Insured or immediate family members.
  - 2. Serious damage to Insured's residence in India declared in the policy from catastrophic conditions like floods, fire, earthquake and riots.
  - 3. Hospitalization of Insured, Insured's spouse or child for at least 3 days due to sudden illness or injury.

#### Exclusions applicable to Section 7B-

- 1) The earlier (those bookings of return journey, which were booked prior to travel from India) bookings are not cancelled and rescheduled by You within 48 hours of the occurrence of the event.
- 2) Any claim incurred on account of any foreseeable reason by You, prior to policy inception with a high degree of probability.
- 3) Anything listed in General Exclusions.
- C) <u>Trip Cancellation</u> The Company will pay the amount specified in the schedule as compensation towards expenses for travel tickets or hotel booking, which are unrecoverable from any other sources, if the Insured's trip needs to be cancelled prior to commencement from India on account of:
  - 1. Death or Critical illness diagnosis of the Insured or immediate family members.
  - 2. Serious damage to Insured's residence in India declared in the policy from catastrophic conditions like floods, fire, earthquake and riots.



- 3. Hospitalization of Insured, Insured's spouse or child who were booked to travel with Insured and were insured with Us, for at least 3 days due to sudden illness or injury in Your country of residence.
- 4. Compulsory quarantine or prevention of travel by Government.
- D) <u>Missed Connection</u> The Company will pay the amount mentioned in the schedule towards missed connection, if the flight booked by the Insured to travel from India is delayed beyond 12 hours than the original scheduled time for arrival at the destination of the connecting flight, resulting in missing of the connecting flight, subject to policy terms and conditions. The claim has to be payable under Section 7A-Trip Delay for the liability being payable under this section.
- E) <u>Volcanic Eruption Cover</u>–In the event you have opted for the plan with this cover, the Company is liable to pay the amount specified in the schedule if due to Volcanic Eruption, the Insured journey from foreign country, in a common carrier as a fare paying passenger on which he is booked to travel to India is delayed than the original scheduled time beyond 12 hours. The benefit would be payable for continuous and completed period of 12 hours in excess of first 12 hours towards the reasonable travel and accommodation expenses incurred by you, subject to all other policy terms and conditions and policy limit mentioned.

## Exclusions applicable to Section 7E:

- 1) Any claim arising as a result of You travelling against the advice of local or national authority.
- 2) The aircraft being taken out of service by Civil Aviation Authority or similar authority.
- 3) The condition where the delay was known prior to inception of cover.
- 4) Anything listed in General Exclusions
- F) <u>Loss of Passport</u>-The Company will reimburse the Insured, the amount specified in the schedule if the Insured loses his passport overseas. The expenses incurred by the Insured for obtaining a duplicate or fresh passport overseas would be reimbursed.
- G) Loss of Credit Card/Debit Card/International Driving license The Company will reimburse the Insured, the amount specified in the schedule if the Insured loses the Credit card/Debit Card/International Driving license overseas. The expenses incurred by the Insured for obtaining a duplicate or fresh Credit card/Debit Card/International Driving license overseas would be reimbursed. The cover shall not be applicable to the purchases made or monetary losses incurred due to misuse of the card after loss.

## Exclusions applicable to Section 7F & G

- 1) Any loss not reported to the local overseas police and written copy of the same not obtained within 24 hours of the occurrence of the event.
- 2) Loss on account of confiscation or detention by customs, police or public authorities.
- 3) Theft of the passport/credit card/debit card/international driving license unless reported to the police in the foreign country within 24 hours and the copy of the complaint submitted to Us.
- 4) Loss or theft from private vehicle hired for travelling or private place of accommodation unless the same was kept in locked hotel room or apartment and was stolen with violent and forcible entry.
- 5) Loss due to unattendence and ignorance in safeguarding the passport/credit card/debit card/international driving license.
- 6) Anything listed in General Exclusions
- H) <u>Bounced Hotel and Airlines Bookings</u>. In the event you have opted for the plan with this cover, the Company herewith agrees to reimburse the Insured the expenses for the loss incurred on account of bouncing due to overbooking of hotel reservation or airline tickets, subject to limit mentioned against the Section in the policy schedule. The cover shall be applicable only towards the confirmed bookings.



The Insured should provide the written documentation towards the booking. The booking under waiting list will not be considered for compensation. The Insured will be reimbursed for reasonable and customary expenses towards the cost incurred towards lodging in similar Hotel or buying new ticket after deduction of refund or compensation provided by the hotel or airline.

 Emergency Catastrophe Cover- In the event You have opted for the plan with this cover, the Company will reimburse You the reasonable cost of accommodation (room only) if the booked accommodation is uninhabitable due to fire, flood, earthquake or storm.

## Section 8- Personal Solicitude

A) <u>Delay of Checked-in Baggage</u>. The Company herewith agree to reimburse You the expenses incurred towards the emergency purchase of medicine, toiletries and clothing to replace the ones contained in checked in baggage, subject to deductible and limit specified the policy schedule, in case if Your checked in baggage is delayed by the common carrier by more than 12 hours beyond Your arrival time at the destination outside India. The benefit will be extended towards the trip specified in the travel ticket from India to Overseas destination till the first port of return to India including the halts and via destinations.

The Insured must be a ticketed passenger and must provide written communication from the common carrier towards the delay of baggage.

In the event of total loss of checked in baggage, which is claimed under Delay of baggage clause, the higher of the claim(s) under either loss or delay will be considered under the policy during any one Policy Period after deduction of refund or compensation provided by the airline.

B) Loss of Checked-in Baggage- The Company herewith agree to reimburse You the expenses incurred towards the total loss of checked in baggage, subject to limit specified in the policy schedule, in case if your checked in baggage is lost by the common carrier at the destination outside India. The benefit will be extended towards the trip specified in the travel ticket from India to Overseas destination till the first port of return to India including the halts and via destinations.

The Insured must be ticketed passenger and must provide written communication from the common carrier towards the loss of baggage.

## Special Condition-

- i. In case more than one bag is checked in and are lost, then the maximum limit of Indemnity per bag would be restricted to 50% and per item 10% of the applicable sum insured or actuals whichever is less, after deduction of refund or compensation provided by the airline.
- ii. Insured provides the written proofs towards the loss of baggage to the Insurer/Claims Administrator.
- iii. The Company's liability arises only on acceptance of the liability by the Airlines in the form of compensation.
- iv. In the event that the Company makes any payment or reimbursement under this benefit, it is a condition of such payment that any recovery from any Common carrier by the Insured, or on behalf of the Insured, under the terms of the Convention for the Unification of Certain Rules Relating to International Carriage by Air, 1929 ("Warsaw Convention") shall become the property of the Company.

## Exclusions applicable to Section 8B-

- 1) Valuables, money, securities and tickets/passes or any other item not declared to or agreed upon by the Company.
- 2) Any partial loss of items contained in the checked-in baggage.
- 3) Items having value of more than 100 USD or equivalent amount in any other currency will have to be supported by the bill/ receipts or documentation confirming the ownership of the Insured.



- 4) The same baggage being insured under any other insurance will be considered for ratable proportion of the cover.
- 5) Self-carried baggage
- 6) Anything listed in General Exclusions.
- C) <u>Child Escort Cover</u> The Company herewith agree to reimburse You the expenses for economy class transportation by the most direct route via common carrier, incurred towards the return journey to India, of your child below 18 years of age travelling with you and covered under the policy, in the event of your Death/disability/illness incapacitating you for at least 7 days, provided there is no other adult accompanying the child. The disablement needs to be supported by the medical certificate from the treating doctor and the benefit would be covered up to the sum insured specified in the policy schedule.
- D) <u>Emergency Cash Arrangement</u> The Company herewith agrees to assist the Insured in case of any emergency need of immediate cash by the Insured during his overseas journey followed by theft/burglary of luggage or money. The Insurer / administrator will coordinate with the Insured's relatives in India and arrange for emergency cash for the Insured overseas as per the limit specified in the policy schedule. The administration and delivery charges will be included in the limit mentioned in the policy.
- E) <u>Golfer's Hole in one</u>- The Company herewith agrees to reimburse the expenses incurred towards celebration after the achievement of hole in one by You during your trip anywhere in the World (except India), in any of the United States Golfer's Association (USGA) recognized Golf course, subject to limit specified in the policy schedule.
- F) <u>Automatic extension of Policy up to 7 days</u>- In case of delay on account of unavoidable circumstances by the airlines and no alternative arrangement for return journey of the Insured to India, the insurance cover will be extended further for 7 days from the policy expiry date if the delay is intimated to the Company within 24 hours of the declaration of the same by the airlines.

## Section 9-Accidental Injury to Pet

In the event You have opted for the plan with this cover, the Company herewith agrees to pay to the Insured the amount specified in the policy schedule, subject to policy terms and conditions, towards the expenses incurred towards the unexpected veterinary bills for consultations, x-rays, injections, medications, tests and surgical treatments on account of accidental injury suffered by the Pet when the Insured is on trip abroad. The Insured needs to provide the legal documentation towards the ownership of the pet and the prescriptions and bills towards the medical expenses incurred towards the treatment of the pet. The Company shall be liable to settle the ratable proportion of the admissible amount towards the loss or damage in case the pet is covered under any other policy.

#### Section 10-Home Burglary

In the event you have opted for the plan with this cover, the Company herewith agrees to compensate the Insured in case of any burglary/theft at his residence (as declared in the proposal form) during his overseas travel, the sum specified in the policy schedule subject to policy terms and conditions.

## Exclusions applicable to Section 10-

- 1) The liability of the Company will be up to the sum specified in the section for burglary during that particular year.
- 2) The cover excludes jewelry and valuables.
- Loss or damage caused by Your employee or family member's direct or indirect involvement in the attempted burglary.



- 4) Loss or damage to any part of the property or item occupied illegally in any manner.
- 5) Anything listed in General Exclusions.

#### Section 11- Common Carrier-Accidental Death & Disability

The Company is liable to pay the amount specified in the policy schedule towards accidental death or permanent total disablement of the named Insured subject to other policy terms and conditions. The cover is specifically towards death or disablement on account of accidental bodily injury arising within 12 months from the date of accident while travelling in common carrier like bus, tram, rail or aircraft and which is the sole and direct cause of death of the Insured or loss of vision in both eyes, two limbs, or loss of one limb and one eye.

#### Exclusions applicable to Section 11-

- 1) All exclusions under Section 1&2.
- 2) Anything listed in General Exclusions.

#### Section 12- Adventure Sports

In the event you have opted for the plan with this cover, the Company is liable to pay the amount specified in the policy schedule subject to deductible and policy terms and conditions, towards medical expenses incurred by the Insured towards accidental bodily injury on account of Insured's participation in any of the adventure sports accompanied by certified instructor or trainer. The documents required for claim would be medical report confirming cause of the injury, injury details and treatment details, with original ticket/ pass confirming Your participation in the event.

#### Exclusions applicable to Section 12-

- 1) Any participation in professional or organized sports, racing, speed or endurance tests and dangerous pursuits.
- 2) Anything listed in General Exclusions.

#### Part III:General 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:

1. Any consequential losses causing damage to any property arising directly or indirectly from:

- 1.1- Any radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component.
- 1.2- Contamination by radioactivity from any nuclear waste from combustion of nuclear fuel.
- 1.3- Any sickness or disease related to and arising out of existence, production, handling, manufacture, sale, distribution, deposit or use of asbestos or product thereof, e.g. Asbestosis.
- 2. Any loss or damage arising from insured person committing any breach of law with criminal intent.
- 3. Insured travelling abroad unless as a fare paying passenger.
- 4. Any and all consequential losses.
- 5. Insured's participation in any naval, military or air forces operations whether in the form of military exercises, war games or actual engagement with domestic or foreign enemies.
- 6. For any loss arising out of War, civil war, invasion, insurrection, revolution, act of foreign enemy, hostilities (whether War be declared or not), rebellion, mutiny, use of military power or usurpation of government or military power, terrorism.



- 7. Self-inflicted injury, willful or deliberate exposure to danger, suicide or attempt threat.
- 8. Insured being under the influence of alcohol, drugs or intoxicating substances during and insured event.
- 9. Participation of the Insured in any sports events as a professional or for gain or rewards thereof.
- 10. Driving any vehicle without valid driving license and all precautionary measures following traffic rules and regulations.
- 11. Any pathological fractures.
- 12. Pregnancy except ectopic pregnancy resulting in childbirth, miscarriage, abortion, or complication arising out of any of the foregoing and expenses related to treatment of infertility or birth control measures unless the medical assistance provided abroad involves unforeseen emergency measures to save the Insured's or the child's life in event of acute complications, provided that the Insured has not completed the age of 38 years and 30<sup>th</sup> week of pregnancy.
- 13. Routine pre-natal care, childbirth, care of newborns, post-natal care, birth control, artificial insemination, infertility, impotency or sexual dysfunction, sterilization or reversal thereof.
- 14. Any Pre-existing conditions and complications arising out of the same.
- 15. Any claim lodged being fraudulent in any respect or false declaration made or use of support documents or devices by You or anyone acting on Your behalf to obtain benefit out of the policy by wrongful means or willful act.
- 16. Travel against medical advice, receiving or waiting to receive any medical treatment, received any terminal prognosis for medical condition.
- 17. In respect of Your travel to any country against whom the Republic of India has imposed general or special travel restrictions, or against whom it may impose such restrictions, or any country which has imposed or may impose subsequently, such restrictions against travel by a citizen of the Republic of India to such country.

## General Conditions Applicable to all Sections-

## A) Declaration

- i. The Company shall have no liability towards any claim arising under this policy if You make any false/ incorrect declaration/information in the proposal form for insurance, which is material for accepting the risk and offering the cover under the policy.
- ii. The Company further understands that You have read the policy and prospectus and have understood the implications of the contents prior to affixing your signature on the proposal from.

#### B) Notification of Claims

Every notice and communication to the Company required by this Policy shall be in writing and be addressed to the nearest office of the Company. In case the Policy is sold via voice log the notice to the Company may be placed via same mode.

The Company's liability under this Policy will be subject to the following provisions, 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/ Claims administrator in respect of any Claim under Medical expenses and emergency medical evacuation, by the Insured 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 and receipts and any other documentation or information that might be required or requested by the Insurance Company / Claims Administrator for assessment of the claim.
- ii) The named Insured shall notify the Insurance Company/Claims administrator immediately or not later than 30 days after his return to India. He will have to fill in the claim form and forward the same to the Company/ Claims administrator along with all the bills, receipts and other supporting documentation or additional information requested by the Company/Claims administrator for assessment of the claim.



iii) The Insured shall not admit any liability or make any offer or promise of payment without the prior intimation and written consent of the Company.

## C) Reasonable Care

The Insured shall take all reasonable and proper steps to safeguard and protect himself and his possessions against any fact, matter, circumstance or cause that might result in a Claim under this Policy, and shall not do or cause to be done anything that might enhance the likelihood of a Claim under this Policy (except in an attempt to save human life).

## D) 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(s) is permanently incapacitated or deceased, the legal heirs of the Insured may represent him in respect of Claim under the Policy.

## E) Assessment of Claim & Payment

The claim will be assessed and processed for payment only on receipt of complete documentation and or information within 30 days from the date of intimation of the claim as requested by the Company for arriving at the decision towards the claim liability under the policy, until such time there will be no liability imposed on the Company for payment of the claim. If the insured does not provide the requisite documentation within 30 days from the date of intimation to the Company, the Company shall assume that Insured is not interested in pursuing the claim and thus constrained to repudiate the concerned claim. In the event that the Company decides to reject a claim made under this policy, the Company shall do so within a period of thirty days of the investigation report or the additional investigation report, as the case may be, in accordance with the provisions of Protection of Policyholders' Interest Regulations 2002.

- i) Any settlement amount or payable amount under the policy will not carry any interest.
- ii) All the claim payments with respect to the claims made by the Insured on his return to the Republic of India will be made in Indian Rupees only.
- iii) The following will apply specifically in respect of a Claim under Sections 1 and/or 2:
  - a) The Company is not liable to make payment in respect of those charges approved by the Insurance Company/ Claims Administrator prior to being incurred.
  - b) The Insured or legal heir in case of death of the Insured, shall furnish all certificates, Post mortem report, information, proofs or other evidence in support of the Claim.
  - c) The Insured shall present himself for medical examination by a Medical Advisor as considered necessary by the Insurance Company / Claims Administrator at his expense and the Insured agrees that the Insurance Company / Claims Administrator may approach anyone who may have treated the Insured for information and/or documentation in respect of the Claim.
  - d) The Insured or legal heir in case of death of the Insured, shall furnish the additional documents if required to assess the claim to the Company.
  - e) The Company may make arrangements to pay the Claim to the Insured's legal guardian or legal representative in case of permanent disablement of the Insured. Any payment made by the Company thereby in good faith shall operate as a complete discharge of the Company's liability in respect of the Claim.
  - f) Medical Expenses except at the Usual and Customary Level shall not be considered by the Insurance Company.
  - g) The foreign currency exchange rate as on date of loss or first bill shall be considered for all reimbursement claims settlement.



h) The list of Network hospitals where we are having cash less arrangement would be made available to the Policy holder and subsequent amendments to the same would also be duly communicated by us/ the TPA service provider.

## F) Contribution

The Company shall be liable to settle the ratable proportion of the admissible amount towards the loss or damage in case You are covered under any other policy covering the similar losses, at the time of loss during the Policy Period. The clause will be applicable for indemnity covers and not for benefit covers under the policy.

## G) Subrogation

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.

## H) Arbitration

- i) Any dispute or difference arising towards the quantum to be paid under the policy (liability being otherwiseadmitted) shall independently of all other questions be referred to decision of a sole arbitrator inwriting by the parties, or if they cannot agree upon a single arbitrator within 30 days of any party invoking arbitration, the same shall be referred to a panel of the arbitrators comprising of two arbitrators, one appointed by each of the parties to the dispute/difference and the third arbitrator to be appointed by such two arbitrators and arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996. The law of the arbitration will be the Indian law, and the seat of the arbitration and venue for all hearings shall be within India.
- ii) It is clearly agreed and understood that no difference or dispute shall be referable to arbitration as herein before provided, if the Company has disputed or not accepted liability under or in respect of this policy.
- iii) It is hereby expressly stipulated and declared that it shall be a condition precedent to any right of action or suit upon this policy that award by such arbitrator/arbitrators of the amount of the loss or damage shall be first obtained.
- iv) If these arbitration provisions are held to be invalid, then all such disputes or differences shall be referred to the exclusive jurisdiction of the Indian Courts.

## I) <u>Age</u>

The Age shall be computed as on the Risk start Date.

- i. In Travel plans minimum entry age of the Insured will be 18 years and maximum entry age would be 60 years and that for dependent children will be 6 months to 18 years.
- ii. In Senior citizen plans minimum entry age of the Insured will be 61 years and maximum entry age would be 75 years.
- iii. In Multi Trip travel plans for frequent travelers, minimum entry age of the Insured will be 18 years and maximum entry age would be 70 years.
- iv. Family floater: Self & spouse up to 60 years of age and two dependent children from 6 months to 18 years of age. Dependent parents up to 70 years of age.



Cover	Age Band	Asia Excluding Japan	Worldwide/Worldwide excluding US & Canada
Single trip cover	Between 6 months to 75 years of age	Yes	Yes
Annual Multitrip cover	From 18 years to 70 years of age	Yes	Yes
Family floater	i) Self & Spouse-Up to 60 years of age.	Yes	Yes
	ii) Dependent Children-Between 6 months to	Yes	Yes
	18 years of age		
	iii) Dependent Parent-Up to 70 years of age	Yes	Yes

## J) 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.

#### K) Cancellation Of the policy

- i. This Policy may be cancelled by the Insured after 15 days from the date of policy inception, by intimation in writing to the Company as long as the Insured is able to establish to the Company's satisfaction that the Insured Journey has not commenced and this Policy shall stand cancelled if the Insured Journey has not commenced within 15 days of the commencement date shown on the Schedule.
- ii. Upon cancellation, the Company shall be entitled to deduct cancellation charges subject to retaining a minimum of Rs.250/-.
- iii. In the event the Annual Multi Trip policy is cancelled for non-cooperation of the Insured or if You cancel the Annual Multi Trip Policy, the premium shall be computed in accordance with Our short rate table for the period the Policy has been in force, provided no claim has occurred and/or no trip has happened up to the date of cancellation. In the event a claim has occurred and/or trip has happened in such case there shall be no return of premium.
- iv. In case of any early return of the Insured person prior to expiry of the Policy Period the Company will refund premium at the following rates subject to no claims being incurred on the policy.

Risk Period	% of Premium retained by Company
Above 50% of Policy Period	100
Above 40% to 50% of Policy Period	80
Above 30% to 40% of Policy Period	75
Above 20% to 30% of Policy Period	60
Up to 20% of Policy Period	50



## L) Notifications & Declarations

The Insured 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.

## M) <u>Fraud</u>

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

#### N) Governing Law

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.

#### O) 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.

#### P) Product withdrawal

The product if withdrawn in future will be subjected to approval from authority and due intimation will be given to the policy holder. However we assure to serve you till the time the policy period is expired or cancelled by the Insured and the Insured can opt for any other existing product which would cater to the need of the Insured.

#### Q) Due Observance

The due observance of and compliance with the terms, provisions, 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.

#### R) Policy Extension

The policy period can be from minimum 1 day to maximum 180 days which can be extended further for 180 days on payment of additional premium.

Travel policy Extension beyond seven days can be granted on all travel plans up to the age of 70 years subject to following,

- 1. No claims being incurred under the original policy.
- 2. Declaration from the insured that the person is in good health and there are no claims reported/occurred during original policy period.
- 3. Request should be received by the company at least 7 days prior to expiry of the earlier policy period in order to ensure that there is no break in insurance between the original policy period and requested extension period.
- 4. Grace period of 7 days with exclusions for the break period will be acceptable and allowed. However all such proposals need to be referred to and approved by the Underwriting Manager at Head Office.



5. Policy cannot be extended beyond 180 days for insured travelling on immigration visa or work visa or PR visa.

## S) Sum Insured

- 1. Asia excluding Japan plans are available form 15000 USD to 100000 USD as sum insured.
- 2. Worldwide and Worldwide excluding US-Canada plans are available from 50000 USD to 500000 USD for individuals as sum insured.
- 3. Worldwide and Worldwide excluding US-Canada plans are available from 50000 USD to 100000 USD for family of 4 members including Self, spouse and two dependent children as sum insured.
- 4. Worldwide and Worldwide excluding US-Canada plans are available from 50000 USD to 250000 USD for Senior Citizen as sum insured.
- 5. Annual Multi trip plan for frequent travelers available from 100000 USD to 500000 USD as sum insured.

## T) Premium Loading

1. In extended Family Floater policy cover beyond four members, addition of a child up to 18 years would be loaded @ 25% and addition of an adult would be loaded @ 40%.

2. In case adventure sports opted – the premiums will be loaded by 100%

## U) Premium Discount

Family Discount Matrix		
1 member	0%	
2 members	5%	
3 members	10%	
4 members	15%	

## Sub limits:

Loss of Checked in Baggage:- In case more than one bag is checked in and are lost, then the maximum limit of Indemnity per bag would be restricted to 50% and per item 10% of the sum insured or actuals, whichever is less.

Personal Accident: Personal accident sum insured will be restricted to 50% for children aged 6 months to 18 years.

#### **Deductibles:**

Benefit	Deductible
Medical expenses and evacuation	100
Emergency Dental Care	100
Delay of checked in baggage	12 Hours
Loss of Passport	30
Hijack Allowance	24 Hours
Trip Delay	12 Hours
Personal Liability	100
Hospital Confinement Allowance	48 Hours
Loss of Credit/Debit Card/International Driving License	30
Volcanic Eruption Cover	12 Hours
# Adventure Sports Extension	100



#### Additional Guidelines applicable for insured (s) above 70 years of age

- a) Travel Period: Upto 30 days: Cost of the medical tests (if required) need to be borne by the proposer.
- b) Travel Period: Above 30 days to 180 days Every proposal will be subjected to Pre-acceptance Medical Tests at proposer's cost which will be advised on submission of proposal form. Pre acceptance medical tests to be conducted are as under:-
  - 1. ECG
  - 2. Blood Sugar : Fasting and Post Prandial
  - 3. Heamogram
  - 4. Urine Routine
  - 5. FMR (Full Medical Report )
  - 6. Blood pressure reading(As certified by physician)
  - 7. HbA1Ċ
  - 8. Total cholesterol

Cost for all the medical tests mentioned above will be borne by the proposer.

In cases where any of the above test results is not available, the proposal will be rated/decided upon as per merits of the case.

#### General Guidelines for underwriting of the Policy are:

- 1. We can cover Persons of Indian Origin going abroad on vacation who have obtained passport of foreign countries on getting the below :
  - a. Passport copy
  - b. VISA copy
  - c. Registration as Resident in India
  - d. Proof of Resident ship in India
  - e. Proof of paying Income Tax in India / Studying continuously in India (in case of minors)
- 2. We can consider issuing policy to foreign nationals who are staying in India (People who reside in India and pay taxes to Indian Govt. and do not have any cover in the country they are travelling to, require travel insurance cover for short business trips or vacations) and planning to go overseas for vacation or short business trip up to 30 days on getting following documents
  - a. Passport copy
  - b. VISA Copy
  - c. Registration as Resident in India
  - d. Proof of paying Income Tax in India (IT return / PAN Card copy)
  - e. Purpose of overseas travel
- 3. Please note that we do not provide any overseas travel insurance to overseas travelers coming to India on tourism and moving to other country for further tourism.
- 4. For passengers traveling on Immigration visa or work visa or PR Visa, we can accept the proposal for maximum 180 days with no further extension. However all such proposals need to be referred to and approved by the Underwriting Manager at Head Office.
- 5. Cover to foreign nationals is given with exclusion for claims arising out of travel to home country (Country whose passport is held).



#### Customer Care

#### 24\*7 Emergency Assistance:

We at Liberty General Insurance assure to provide assistance to you round the clock globally. Hence request you to get in touch with our advisor on the mentioned toll free contact number or email ID for any queries, assistance, feedback or grievances. Your suggestions are most welcome to enhance the services.

#### Grievances:

In case the Insured is aggrieved in any way, the Insured may contact Insurer at the specified address, during normal business hours. In case the Insured/Insured Person has not got his/her grievances redressed by the Company within 15 days, then he/she may approach the Insurance Ombudsman for the redressal of the same. A list containing the addressees of Offices of Ombudsman is attached to this Policy. Policy holder may also obtain copy of IRDA circular number 1385\_GI-2002\_ENG dated 26-04-2002, notification on Insurance Regulatory and Development Authority (Protection of policy holders' interests) Regulations, 2002.

#### 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:

Call us- on our Toll free no-1800-266-5844 (8:00 AM to 8:00 PM, 7 days of the week)

Email us at- <u>care@libertyinsurance.in</u>.

Write to us-Liberty General Insurance Ltd 10th Floor, Tower A, Peninsula Business Park, Ganpatrao Kadam Marg, Lower Parel, Mumbai- 400013

Step 2:

If our response or resolution does not meet your expectations, you can escalate at Manager@libertyinsurance.in

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 your concern. We would then investigate the concern internally and respond with a suitable resolution. Please share your contact details to enable us to get in touch with you.

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:



Ombudsman AHMEDABAD     Insurance Ombudsman, Office of the Insurance Ombudsman, 2nd Floor, Ambica House, Nr. C. U. Shah College, Ashram Road.     Gujarat., UT of Dadra & Nagar Haveli, Daman and Diu Nagar Haveli, Daman and Diu Nagar Haveli, Daman and Diu Sagar Haveli, Daman and Diu Sagar Haveli, Daman and Diu Madhya Pradesh & Chhattisgarh       BHOPAL     Insurance Ombudsman, Office of the Insurance Ombudsman, Janak Vihar Complex, 2th Floor, 6, Maivya Nagar, Opp. Airtel, Near New Market, BHOPAL (M.P.)-462 023. Tel.: 0755-2769203 Email bimatokpathopat@airtelmail.in     Madhya Pradesh & Chhattisgarh       BHUBANESHWAR     Insurance Ombudsman, Janak Vihar Complex, 2th Floor, 6, Maivya Nagar, Opp. Airtel, Near New Market, BHOPAL (M.P.)-462 023. Tel.: 0755-2769203 Email bimatokpathopat@airtelmail.in     Orissa       BHUBANESHWAR     Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR r551 009. Tel.: 0674-2596455 Farx: 0674-2596459 Email loobstr@datone.in     Punjab     Haryana, Himachal Pridesh, Jammu & Kashmir , UT of Chandigarh       CHANDIGARH     Insurance Ombudsman, Office of the Insurance Ombudsman, 53, C.O. No. 101-103, 2nd Floor, Batra Building, Sector 17-D CHANDIGARH     Punjab     Haryana, Himachal Pridesh, Jammu & Kashmir , UT of Chandigarh       CHENNAI     Insurance Ombudsman, Office of the Insurance Ombudsman, Fathima Akhtar Court, 4th Floor, 453 (did 312), Anna Salia, Teynampet, CHENNAI     Tamil Nadu. UT-Pondicherry)       NEW DELHI     Shri Surendra Pal Singh Insurance Ombudsman, Office of the Insurance Ombudsman,     Delhi & Rajasthan	Office of the	Contact Details	Areas of Jurisdiction
AHMEDABAD     Insurance Ombudsman, Office of the Insurance Ombudsman, 2nd Floor, Ambica House, Nr. C.U. Shah College, Ashram Road, <u>AHMEDABAD-380 014,</u> Ttel: - 079-27546142 Email ins omb@rediffmall.com     Gujarat , UT of Dadra & Nagar Haveli, Daman and Diu Magar Haveli, Daman and Diu Nagar Haveli, Daman and Diu Magar Haveli, Daman and Diu Office of the Insurance Ombudsman, Sc.O. No 101-103, 2nd Floor, Batra Building, Sector 17-D, CHANDIGARH Isourace Ombudsman, Sc.O. No 101-103, 2nd Floor, Batra Building, Sector 17-D, CHANDIGARH Isourace Ombudsman, Sc.O. No 101-103, 2nd Floor, Batra Building, Sector 17-D, CHENNAI Insurance Ombudsman, Sc.O. No 101-103, 2nd Floor, Batra Building, Sector 17-D, CHENNAI Insurance Ombudsman, Fathima Akhat Court, 4th Floor, 433 (old 312), Anna Stai, Teymampet, CHENNAI-600 018, Tel: - 044-2433664 / Email chennalinsuranceombudsman, Office of the Insurance Ombudsman, Office o			
Office of the Insurance Ombudsman, 2nd Floor, Ambica House, Nr. C.U. Shah College, Ashram Road, AHMEDABAD-380 014, Tel.: 079-27546840 Fax: 079-27546142 Email ins.omb@rediffmail.com     Madhya     Pradesh     &       BHOPAL     Insurance Ombudsman, Office of the Insurance Ombudsman, Janak Vihar Complex, 2rd Floor, 6, Maiviya Nagar, Opp. Artel, Near New Market, BHOPALUM,P.J-462 023, Tel.: 0755-2769203 Email binalokpalbhopa@airtelmail.in     Madhya     Pradesh     &       BHUBANESHWAR     Insurance Ombudsman, Office of the Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR     Orissa     Orissa       CHANDIGARH     Insurance Ombudsman, Office of the Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR, Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR, Insurance Ombudsman, 52, CO, No.101-103, 2nd Floor, Batra Building, Sector 17-D, CHANDIGARH     Orissa       CHENNAI     Insurance Ombudsman, Office of the Insurance Ombudsman, 5, C.O, No.101-103, 2nd Floor, Batra Building, Sector 17-D, CHANDIGARH-160 017, Tel.: 0172-27062/4 Email iombch@yahoo.co.in     Tamil Nadu, UT-Pondicherry Town and Karaikal (which are part of UT of Pondicherry)       CHENNAI     Insurance Ombudsman, Office of the Insurance Ombudsman, 5 atima Akhar Court, 4 th Floor, 453 (old 312), Anna Saial, Tegnampet, CHENNAI-600 018, Tel.: 042-24333664     Tamil Nadu, UT-Pondicherry)       NEW DELHI     Shri Surendra Pal Singh Insurance Ombudsman, Office of the Insurance Ombudsman, Offi		Insurance Ombudsman.	Guiarat UT of Dadra &
2nd Floor, Ambica House, Nr. C.U. Shah College, Ashram Road,       AHMEDABAD-380 014, Tell:- 079-27546142         Email ins.omb@rediffmall.com       Madhya       Pradesh         BHOPAL       Insurance Ombudsman, Janak Vihar Complex, 2 <sup>nd</sup> Floor, 6, Malviya Nagar, Opp. Airel, Near New Market, BHOPALMR, 2 <sup>nd</sup> Floor, 6, Malviya Nagar, Opp. Airel, Near New Market, BHOPALMR, 2 <sup>nd</sup> Floor, 6, Malviya Nagar, Opp. Airel, Near New Market, BHOPALMR, 2 <sup>nd</sup> Floor, 6, Malviya Nagar, Opp. Airel, Near New Market, BHOPALMR, 2 <sup>nd</sup> Floor, 6, Malviya Nagar, Opp. Airel, Near New Market, BHUBANESHWAR       Orissa         BHUBANESHWAR       Insurance Ombudsman, 0ffice of the Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR, 10614-2596429       Orissa         CHANDIGARH       Insurance Ombudsman, 0ffice of the Insurance Ombudsman, 5, CO, No. 101-103, 2nd Floor, Batra Building, Sector 17-0, CHANDIGARH       Punjab , Haryana, Himachal Pradesh, Jammu & Kashmir , UT of Chandigarh         Office of the Insurance Ombudsman, Scitor 17-0, CHANDIGARH       Tamil Nadu, UT=Pondichery Town and Karaikal (which are Fax: 1012-20082/4 Email ombchd@yaho.co.in         CHENNAI       Insurance Ombudsman, Office of the Insurance Ombudsman, Fathima Akhar Court, 4th Floor, 453 (of 312), Anna Salai, Teynampet, CHENNA1600 RB, Tel:- 044-24333664       Tamil Nadu, UT=Pondichery Town and Karaikal (which are fathima Akhar Court, 4th Arbor, 453 (of 312), Anna Salai, Teynampet, CHENNA1600 RB, Tel:- 044-24333664       Delhi & Rajasthan         NEW DELHI       Shri Surendra Pal Singh Insurance Ombudsman, Office of the Insurance Ombudsman, Office of the Insurance Ombudsman, Office of the Insurance Ombudsman, Office of the Insurance O			
Nr. C.U. Shah College, Ashram Road, AHMEDABAD-380 014, Tel.: 079-27546402     Natheenee Fax: 079-27546142       BHOPAL     Insurance Ombudsman, Office of the Insurance Ombudsman, Janak Vihar Complex, 2 <sup>rd</sup> Floor, 6, Malviya Nagar, Opp. Airtel, Near New Market, BHOPAL(M.P.)-462 023. Tel.: 0755-2569201 Fax: 0755-2569201 Email binalokpalbhopa@airtelmail.in     Madhya     Pradesh     & Chhatlisgarh       BHUBANESHWAR     Insurance Ombudsman, Office of the Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR     Orissa     Orissa       CHANDIGARH     Office of the Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR     Orissa     Orissa       CHANDIGARH     Insurance Ombudsman, Office of the Insurance Ombudsman, 52, Forest Park, BHUBANESHWAR, Insurance Ombudsman, 52, CO. No.101-103, 2nd Floor, Barta Building, Sector 17-D, CHANDIGARH-160 017. Tel.: 0172-2708474 Email ombch@yahoo.co.in     Punjab., Haryana, Himachal Pradesh, Jammu & Kashmir , UT of Chandigarh       CHENNAI     Insurance Ombudsman, Office of the Insurance Ombudsman, 543 (old 312), Anna Salal, Teynanpet, CHENNAI     Tamil Nadu, UT-Pondicherry Town and Karaikal (which are part of UT of Pondicherry)       CHENNAI     Shri SuranceOmbudsman@gmail.com     Tamil Nadu, UT-Pondicherry)       NEW DELHI     Shri SuranceOmbudsman, Office of the InsuranceOmbudsman, Office Of			
Ashram Road, AHM E Da6BA.380 014. Tel.: 019-27546840 Fax: 079-27546840 Fax: 079-27546142 Email ins.omb@rediffmal.com       Madhya       Pradesh       &         BHOPAL       Insurance Ombudsman, Janak Vihar Complex, 2 <sup>we</sup> Floor, 6, Malviya Nagar, Opp. Airtel, Near New Market, BHOPAL(MP.)-462 023. Tel.: 0755-2569201 Fax: 0755-2569201 Fax: 0755-2569201 Fax: 0755-269203 Email bimalokalbhopal@airtelmail.in       Madhya       Pradesh       &         BHUBANESHWAR       Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR       Orissa       Orissa       Orissa         CHANDIGARH       Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR       Punjab , Haryana, Himachal Pradesh, Jammu & Kashmir , UT of Chandigarh       Orissa         CHANDIGARH       Insurance Ombudsman, 61 insurance Ombudsman, 0ffice of the Insurance Ombudsman, S.C.O. No. 101-103, 2nd Floor, Batra Building. Sector 17-D, CHANDIGARH-I Insurance Ombudsman, Office of the Insurance Ombudsman, Fathima Akhtar Court, 4th Floor, 453 (0d 312), Anna Salai, Teynampet, CHENNAI       Tamil Nadu, UT-Pondicherry)         CHENNAI       Insurance Ombudsman, Office of the Insurance Ombudsman, Fathima Akhtar Court, Athana Salai, Teynampet, CHENNAI-600 0B; Tel:: 047-24333664       Tamil Nadu, UT-Pondicherry)         NEW DELHI       Shri Surendra Pal Singh Insurance Ombudsman, Office of the Insurance Ombudsman, Office			
AHMEDABAD-380 014. Tel.:-079-2754640 Fax: 079-27546142 Email Ins.omb@rediffmall.com     Madhya     Pradesh       BHOPAL     Insurance Ombudsman, Janak Whar Complex, 2 <sup>md</sup> Floor, 6, Malviya Nagar, Opp. Airtel, Near New Market, BHOPAL (M.P.)-462 023. Tel.:-0755-2569201 Fax: 0755-2769203 Email bimalokpalbhopal@airtelmail.in     Madhya     Pradesh     & Chhattisgarh       BHUBANESHWAR     Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR-751 009. Tel.:-0614-2596455 Fax: 0614-2596459 Fax: 0614-2596459 Email loobbs?eddatane.in     Orissa     Orissa       CHANDIGARH     Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR-751 009. Tel.:-0614-2596459 Fax: 0614-2596459 Fax: 0614-2596459 Fax: 0614-2596459 Fax: 0617-D, CHANDIGARH     Punjab     Haryana, Himachal Pradesh, Jammu & Kashmir , UT of Chandigarh       CHANDIGARH     Insurance Ombudsman, Office of the Insurance Ombudsman, S.C.O. No.101-103, 2nd Floor, Batra Building, Seetch 17-D, CHANDIGARH-160017. Tel.:-0172-2706468 Fax: 0172-2706274 Email ombchd@yahoo.co.in     Tamil Nadu, UT-Pondicherry Town and Karaikal (which are Fathima Akhtar Court, 4th Floor, 453 (0d 312), Anna Salai, Teynampet, CHEINNAI     Tamil Nadu, UT-Pondicherry) Town and Karaikal (which are fathima Akhtar Court, 4th Floor, 453 (0d 312), Anna Salai, Teynampet, CHEINNAI-600 188. Tel.:-044-24333664 Email chennalinsurance ombudsman@gmail.com     Delhi & Rajasthan       NEW DELHI     Shri Surendra Pal Singh Insurance Ombudsman, Office of the Insurance Ombudsman,     Delhi & Rajasthan			
Tel:-079-2754640         Fax:079-27546142         Email ins.omb@rediffmail.com         BHOPAL       Insurance Ombudsman, Orfice of the Insurance Ombudsman, Janak Vihar Complex, 2re Floor, 6, Malviya Nagar, Opp, Airtel, Near New Warket, BHOPAL (M.P.)-462 023. Tel:-0755-2569201       Madhya       Pradesh       & Chhattisgarh         BHUBANESHWAR       Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR       Orissa       Orissa         CHANDIGARH       Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR       Orissa       Orissa         CHANDIGARH       Office of the Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR, 1630429       Punjab , Haryana, Himachal Pradesh, Jammu & Kashmir , UT of Chandigarh         CHANDIGARH       Office of the Insurance Ombudsman, 5.C.O. No.101-103, 2.nd Floor, Batra Building, Sector 17-D, CHANDIGARH-Building, Sector 17-D, CHANDIGARH-Building, Sector 17-D, CHANDIGARH-Gout, Hinsurance Ombudsman, Fathima Akhar Court, 4th Floor, 453 (old 312), Anna Salai, Teynampet, CHENNAI       Tamil Nadu, UT-Pondicherry Town and Karaikal (which are part of UT of Pondicherry)         CHENNAI       Insurance Ombudsman, Fathima Akhar Court, 4th Floor, 453 (old 312), Anna Salai, Teynampet, CHENNAI Email chennainsuranceombudsman@gmail.com       Tamil Nadu, UT-Pondicherry)         NEW DELHI       Shri Surendra Pal Singh Insurance Ombudsman, Office of the Insurance Ombudsman, Office of the Insurance Ombudsman, Fathima Akhar Court, 4th Floor, 453 (old 312), Anna Salai, Teynampet, CHENNAI-600 18, Tel:- 042-24333664       Delhi & Rajasthan			
Fax: 079-27546142       Email ins.omb@rediffmail.com         BHOPAL       Insurance Ombudsman, Janak Vihar Complex, 2™ Floor, 6, Malviya Nagar, Opp. Airtel, Near New Market, BHOPAL(MP.)-462 023. Tel.: 0755-2769203       Madhya       Pradesh & Chhattisgarh         BHUBANESHWAR       Insurance Ombudsman, Janak Vihar Complex, 2™ Floor, 6, Malviya Nagar, Opp. Airtel, Near New Market, BHOPAL(MP.)-462 023. Tel.: 0755-2769203       Orissa         BHUBANESHWAR       Insurance Ombudsman, 0ffice of the Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR       Orissa         CHANDIGARH       Insurance Ombudsman, 0ffice of the Insurance Ombudsman, 5.C.O. No.101-103. 2nd Floor, Batra Building. Sector 17-D, CHANDIGARH-160 017. Tel.: 0172-2706468 Fax: 0172-2708274 Email ombchd@yaho.co in       Punjab , Haryana, Himachal Pradesh, Jammu & Kashmir , UT of Chandigarh         CHENNAI       Insurance Ombudsman, Office of the Insurance Ombudsman, Sector 17-D, CHANDIGARH-160 017. Tel.: 0172-2706468 Fax: 0172-2708274 Email ombchd@yaho.co in       Tamil Nadu, UT-Pondicherry Town and Karaikal (which are part of UT of Pondicherry)         CHENNAI       Insurance Ombudsman, Office of the Insurance Ombudsman, Fathima Akhtar Court, 4th Floor, 453 (old 312), Anna Salai, Teynampet, CHENNAI-600 018. Tel.: 044-24333664 /5284 Fax: 044-24333664 /5284 Fax: 044-24333664 /5284 Fax: 044-24333664 /5284 Fax: 044-24333664 /5284 Fax: 044-24333664       Delhi & Rajasthan         NEW DELHI       Shri Surendra Pal Singh Insurance Ombudsman, Office of the Insurance Ombudsman, Office of the Insurance Ombudsman,       Delhi & Rajasthan			
Email ins.omb@rediffmail.com       BHOPAL     Insurance Ombudsman, Office of the Insurance Ombudsman, Janak Vihar Complex, 2 <sup>err</sup> Floor, 6, Maiviya Nagar, Opp. Airtel, Near New Market, BHOPAL(M.P.)-462 023. Tel.: 0755-2569201 Fax: 0755-2569201 Fax: 0555-2769203 Email bimatokpathopad@airtelmail.in     Madhya Chhattisgarh     Pradesh     &       BHUBANESHWAR     Insurance Ombudsman, Office of the Insurance Ombudsman, 2. Forest Park, BHUBANESHWAR     Orrissa     Orrissa       CHANDIGARH     Insurance Ombudsman, Office of the Insurance Ombudsman, S. Forest Park, BHUBANESHWAR     Orrissa       CHANDIGARH     Insurance Ombudsman, Office of the Insurance Ombudsman, S. CO. No. 101-103, 2nd Floor, Batra Building, Sector 17-D. CHANDIGARH     Punjab , Haryana, Himachal Pradesh, Jammu & Kashmir , S. CO. No. 101-103, 2nd Floor, Batra Building, Sector 17-D. CHANDIGARH-160 017. Tel.: 0172-2708274 Email ombchd@yahoo.co.in     Tamil Nadu, UT-Pondicherry Town and Karaikal (which are part of UT of Pondicherry)       CHENNAI     Insurance Ombudsman, Fathima Akhtar Court, 4th Floor, 453 (old 312), Anna Salai, Teynampet, CHENNAI     Tamil Nadu, UT-Pondicherry Town and Karaikal (which are part of UT of Pondicherry)       NEW DELHI     Shri Surendra Pal Singh Insurance Ombudsman, Office of the Insurance Ombuds			
BHOPAL     Insurance Ombudsman, Office of the Insurance Ombudsman, Janak Vihar Complex, 2™ Floor, 6, Malviya Nagar, Opp. Airtel, Near New Market, BHOPAL(M.P.)-462 023. Tel.: 0755-2569201 Fax: 0755-2569203 Email bimatokpathopa@airtelmail.in     Madhya Chhattisgarh     Pradesh &     &       BHUBANESHWAR     Insurance Ombudsman, 0.2, Forest Park, BHUBANESHWAR-751009. Tel.: 0674-2596455 Fax: 0674-2596459 Fax: 0674-2596459 Fax: 0674-2596459 Fax: 0674-2596459 Fax: 0674-2596459 Fax: 0674-2596459 Fax: 0172-270820 Email ioobbsr@clataone in     Orissa     Orissa       CHANDIGARH     Insurance Ombudsman, 0.5, C.O. No 101-103, 2nd Floor, Batra Building, Sector 17-0, CHANDIGARH-160 017. Tel.: 0172-2706468 Fax: 0172-2708074 Email ombudsman, 0.6 CHENINAI     Punjab     Haryana, Himachal Pradesh, Jammu & Kashmir, UT of Chandigarh       CHENINAI     Insurance Ombudsman, 0.5, C.O. No 101-103, 2nd Floor, Batra Building, Sector 17-0, CHANDIGARH-160 017. Tel.: 0172-2708074 Email ombudsman, 0ffice of the Insurance Ombudsman, Fathima Akhtar Court, 4th Floor, 453 (old 312), Anna Salai, Teynampet, CHENINAI     Tamil Nadu, UT-Pondicherry Town and Karaikal (which are part of UT of Pondicherry)       NEW DELHI     Shri Surendra Pal Singh Insurance Ombudsman, Office of the Insurance Ombudsman, Office of th			
Office of the Insurance Ombudsman, Janak Vihar Complex, 2 <sup>ed</sup> Floor, 6, Malviya Nagar, Opp. Airtel, Near New Market, BHOPAL(M.P.)-462 023. Tel.: 0755-2769203 Email bimalokpalbhopal@airtelmail.in     Chhaťtisgarh       BHUBANESHWAR     Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR     Orissa       CHANDIGARH     Insurance Ombudsman, 62, Forest Park, BHUBANESHWARZ     Orissa       CHANDIGARH     Insurance Ombudsman, 62, Forest Park, BHUBANESHWARZ     Punjab, , Haryana, Himachal Pradesh, Jammu & Kashmir , UT of Chandigarh       CHANDIGARH     Insurance Ombudsman, Office of the Insurance Ombudsman, Sci CO. No. 101-103, 2nd Floor, Barta Building, Sector 17-D, CHANDIGARH-160 017, Tel.: 0172-2706426 Fax : 0172-2706427 Email ombch@yahoo.co.in     Punjab, , Haryana, Himachal Pradesh, Jammu & Kashmir , UT of Chandigarh       CHENNAI     Insurance Ombudsman, Office of the Insurance Ombudsman, Fathima Akhtar Court, 4th Floor, 453 (old 312), Anna Salai, Teynampet, CHENNAI-600 018, Tel.: 044-24333664 / 5284 Fax : 044-243336		Email instomp@redimmail.com	
Office of the Insurance Ombudsman, Janak Vihar Complex, 2 <sup>ed</sup> Floor, 6, Malviya Nagar, Opp. Airtel, Near New Market, BHOPAL(M.P.)-462 023. Tel.: 0755-2769203 Email bimalokpalbhopal@airtelmail.in     Chhaťtisgarh       BHUBANESHWAR     Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR     Orissa       CHANDIGARH     Insurance Ombudsman, 62, Forest Park, BHUBANESHWARZ     Orissa       CHANDIGARH     Insurance Ombudsman, 62, Forest Park, BHUBANESHWARZ     Punjab, , Haryana, Himachal Pradesh, Jammu & Kashmir , UT of Chandigarh       CHANDIGARH     Insurance Ombudsman, Office of the Insurance Ombudsman, Sci CO. No. 101-103, 2nd Floor, Barta Building, Sector 17-D, CHANDIGARH-160 017, Tel.: 0172-2706426 Fax : 0172-2706427 Email ombch@yahoo.co.in     Punjab, , Haryana, Himachal Pradesh, Jammu & Kashmir , UT of Chandigarh       CHENNAI     Insurance Ombudsman, Office of the Insurance Ombudsman, Fathima Akhtar Court, 4th Floor, 453 (old 312), Anna Salai, Teynampet, CHENNAI-600 018, Tel.: 044-24333664 / 5284 Fax : 044-243336		Insurance Ombudsman	Madhya Pradesh &
Janak Vihar Complex, 2 <sup>md</sup> Floor, 6, Malviya Nagar, Opp, Airtel, Near New Market, BHOPAL(M.P.)-462 023. Tel.: 0755-2569201 Fax: 0755-2569203 Email bimatokpalbhopal@airtelmail.in     Orissa       BHUBANESHWAR     Insurance Ombudsman, Office of the Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR     Orissa       CHANDIGARH     Insurance Ombudsman, Office of the Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR-751009. Tel.: 0674-2596455 Fax: 0674-2596459 Email ioobbsr@dataone.in     Punjab     Haryana, Himachal Pradesh, Jammu & Kashmir , UT of Chandigarh       CHANDIGARH     Insurance Ombudsman, Office of the Insurance Ombudsman, Sector 17-D, CHANDIGARH-160 017. Tel.: 0172-2706468 Fax: 0172-2706474 Email ombchd@yahoo.co.in     Punjab     Haryana, Himachal Pradesh, Jammu & Kashmir , UT of Chandigarh       CHENNAI     Insurance Ombudsman, Office of the Insurance Ombudsman, Sector 17-D, CHANDIGARH-160 017. Tel.: 0172-2706468 Fax: 0172-2708274 Email ombchd@yahoo.co.in     Tamil Nadu, UT-Pondicherry Town and Karaikal (which are part of UT of Pondicherry)       CHENNAI     Insurance Ombudsman, Fathima Akhtar Court, 4th Floor, 453 (old 312), Anna Salai, Teynampet, CHENNAI-600 018. Tel.: 044-24333664 /5284 Fax: 044-24333664     Tamil Nadu, UT-Pondicherry)       NEW DELHI     Shri Surendra Pal Singh Insurance Ombudsman, Office of the Insurance Ombudsman, Office of the In	DHOPAL		5
2 <sup>nd</sup> Floor, 6, Malviya Nagar, Opp. Airtel, Near New Market, BHOPAL(M.P.)-462 023. Tel.: 0755-2569201 Fax: 0755-2569203 Email bimalokpalbhopal@airtelmail.in     Orissa       BHUBANESHWAR     Insurance Ombudsman, Office of the Insurance Ombudsman, 62, Forest Park, BHUBANESHWAR-751 009. Tel.: 0674-2596455 Fax: 0674-2596459 Fax: 0674-2596459 Email loiobbsr@dataone.in     Orissa       CHANDIGARH     Insurance Ombudsman, Office of the Insurance Ombudsman, 52, Co. No. 101-103, 2nd Floor, Batra Building. Sector 17-D, CHANDIGARH-160 017. Tel.: 0172-2706468 Fax: 0172-2708274 Email ombchd@yahoo.co.in     Punjab     Haryana, Himachal Pradesh, Jammu & Kashmir , UT of Chandigarh       CHENNAI     Insurance Ombudsman, Sc. O. No. 101-103, 2nd Floor, Batra Building. Sector 17-D, CHANDIGARH-160 017. Tel.: 0172-2708274 Email ombchd@yahoo.co.in     Tamil Nadu, UT-Pondicherry Town and Karaikal (which are Fathima Akhtar Court, 4th Floor, 433 (01312), Anna Salai, Teynampet, CHENNAI-600 018. Tel.: 044-24333664 / Fax: 044-24333664 / Fax: 044-24333664 / Fax: 044-24333664       NEW DELHI     Shri Surendra Pal Singh Insurance Ombudsman, Office of the Insurance Ombudsman,     Delhi & Rajasthan			Chinattisyarn
Opp. Airtel, Near New Market, BHOPAL(M.P.)-462 023. Tel:- 0755-2569201 Fax: 0755-2769203 Email bimalokpathopal@airtelmail.inBHUBANESHWARInsurance Ombudsman, 0ffice of the Insurance Ombudsman, 62, Forest Park, BHUBANESHWARZ-551 009. Tel:- 0674-2596429 Email ioobbsr@dataone.inOrissaCHANDIGARHInsurance Ombudsman, 0671-2596429 Email ioobbsr@dataone.inPunjabHaryana, Himachal Pradesh, Jammu & Kashmir , UT of ChandigarhCHANDIGARHInsurance Ombudsman, 071ce of the Insurance Ombudsman, Sc.O. No.101-103, 2nd Floor, Batra Building. Sector 17-D, CHANDIGARH-160 017. Tel:- 0172-2706468 Fax: 0172-2708274 Email iombch@yahoo.co.inPunjabHaryana, Himachal Pradesh, Jammu & Kashmir , UT of ChandigarhCHENNAIInsurance Ombudsman, Office of the Insurance Ombudsman, Sector 17-D, CHANDIGARH-160 017. Tel:- 0172-2708274 Email ombudsman, Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453 (old 312), Anna Salai, Teynampet, CHEI:: 044-24333664 /5284 Fax: 044-24333664 /5284 Fax			
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Email ioobbsr@dataone.inCHANDIGARHInsurance Ombudsman, Office of the Insurance Ombudsman, S.C.O. No.101-103, 2nd Floor, Batra Building. Sector 17-D, CHANDIGARH-160 017. Tel.:- 0172-2706468 Fax : 0172-2708274 Email ombchd@yahoo.co.inPunjab , Haryana, Himachal Pradesh, Jammu & Kashmir , UT of ChandigarhCHENNAIInsurance Ombudsman, Office of the Insurance Ombudsman, Office of the Insurance Ombudsman, Office of the Insurance Ombudsman, Tati.:- 044-24333664 /5284 Fax : 044-24333664 /5284 Fax : 044-24333664Tamil Nadu, UT-Pondicherry Town and Karaikal (which are part of UT of Pondicherry)NEW DELHIShri Surendra Pal Singh Insurance Ombudsman, Office of the Insurance Ombudsman, Office of the Insurance Ombudsman@gmail.comDelhi & Rajasthan		Tel.:- 0674-2596455	
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	Insurance Ombudsman,	Mizoram, Arunachal Pradesh,
	Office of the Insurance Ombudsman,	Nagaland and Tripura
	"Jeevan Nivesh", 5th Floor,	5
	Near Panbazar Overbridge, S.S. Road,	
	<u>GUWAHATI-781 001 (ÅSSAM).</u>	
	Tel.:- 0361-2132204/5	
	Fax : 0361-2732937	
	Email ombudsmanghy@rediffmail.com	
HYDERABAD	Insurance Ombudsman,	Andhra Pradesh, Karnataka
	Office of the Insurance Ombudsman,	and UT of Yanam – a part of
	6-2-46, 1 <sup>st</sup> Floor, Moin Court,	the UT of Pondicherry
	A.C. Guards, Lakdi-Ka-Pool,	
	HYDERABAD-500 004.	
	Tel : 040-65504123	
	Fax: 040-23376599	
	Email insombudhyd@gmail.com	
KOCHI	Insurance Ombudsman,	Kerala , UT of (a)
	Office of the Insurance Ombudsman,	Lakshadweep , (b) Mahe – a
	2nd Floor, CC 27/2603, Pulinat Bldg.,	part of UT of Pondicherry
	Opp. Cochin Shipyard, M.G. Road,	
	ERNAKULAM-682 015.	
	Tel : 0484-2358759	
	Fax : 0484-2359336	
	Email iokochi@asianetindia.com	
KOLKATA	Ms. Manika Datta	West Bengal , Bihar ,
	Insurance Ombudsman,	Jharkhand and UT of
	Office of the Insurance Ombudsman,	Andeman & Nicobar Islands ,
	4th Floor, Hindusthan Bldg. Annexe, 4, C.R.Avenue,	Sikkim
	<u>Kolkata – 700 072.</u>	
	Tel: 033 22124346/(40)	
	Fax: 033 22124341	
	Email:iombsbpa@bsnl.in	
LUCKNOW	Insurance Ombudsman,	Uttar Pradesh and Uttaranchal
	Office of the Insurance Ombudsman,	
	Jeevan Bhawan, Phase-2,	
	6 <sup>th</sup> Floor, Nawal Kishore Road,	
	Hazaratganj,	
	LUCKNOW-226 001.	
	Tel : 0522 -2231331	
	Fax : 0522-2231310	
	Email insombudsman@rediffmail.com	
MUMBAI	Insurance Ombudsman,	Maharashtra, Goa
	Office of the Insurance Ombudsman,	



MUMBAI-400 054. Tel : 022-26106928 Fax : 022-26106052 Email ombudsmanmumbai@gmail.com

## OFFICE OF THE GOVERNING BODY OF INSURANCE COUNCIL

The Secretary General 3rd Floor, Jeevan Seva Annexe, S.V. Road, Santacruz (W), MUMBAI – 400 021 Tel: 022-26106245 Fax: 022-26106949 Email- inscoun@gmail.com Web: www.gbic.co.in The Secretary 3<sup>rd</sup> Floor, Jeevan Seva Annexe, S.V. Road, Santacruz (W), MUMBAI – 400 021. Tel: 022-26106980 Fax: 022-26106949

The updated grievances redressal procedure shall be provided on the website of the Company and is subject to change in compliance with guidelines/regulations issued by Insurance Regulatory and Development Authority.

## INSURANCE IS THE SUBJECT MATTER OF SOLICITATION



# POLICY SCHEDULE

Office Address: IMD Name:	IMD code:	IMD Contact No.
	Product name	
Policy No: Insurance Plan:		ırchase Date: nical Coverage:
Name of the Proposer: Residence Address:	0009.40	
Contact Numbers: Date of Birth of Proposer: Passport No:	Ema	ail ID:
Nominee: Policy Period: From(HH:MN early)	И) to(HH:MM) O	r return of the Insured to India (whichever is

Insured Details:

S.No	Name of the Insured	Relation to Insured	Gender (Male /Female )	Date of Birth (DDM MYYY Y)	Name of the Nomine e	Passport Number
1						
2						
3						
4						
5						
6						

Section	Benefits	Sum Insured Limit for above mentioned policy period	Deductible

Special Conditions:



**Previous Policy No:** 

Previous Policy Period:

Previous Claim history (If Any):

Base Premium in INR: Family Floater Premium in INR: Additional Member Premium in INR: Adventure Sports Premium in INR: Service Tax in INR: Education Cess in INR: Total Premium in INR:

Claims Assistance: Helpline: Email: Address for Claim Notification:

Authorized Signatory Signed for and on behalf of the Liberty General Insurance Limited, at Mumbai.

You will appreciate that this policy is based on the information provided by you/your representative and the policy is not valid if any of the information provided is found to be incorrect or there is non-disclosure of material facts. We also understand that this policy does not cover any pre-existing illness or disability or conditions arising therefrom.

# Policy will be valid only if counter singed by the insured Signature of Insured

Receipt No / Collection No / Amount (INR): (If Premium is paid through cheque the policy is void ab-initio in case of dishonor of cheque)

## Service Tax Reg. No. AABCL9950ASD001

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

Stamp duty for the said policy is paid vide GRASS DEFACE no. 0000067238201213 dated 24/12/2012 as prescribed in govt.notification revenue & forest department no. Mudrank 2004/4125/CR/690/M-1, Dt 31/12/2004

Corporate Office: Liberty General Insurance Ltd, 10th Floor, Tower A, Peninsula Business Park, Ganpatrao Kadam Marg, Lower Parel, Mumbai- 400013



# Annexure A- Claim Documents Checklist

Following is the indicative document list for reimbursement claims:

## A) Medical Expenses, Dental treatment

- i. Duly filled and signed claim form.
- ii. Consent for Declaration of Medical information form
- iii. Original discharge summary
- iv. Original set of investigation reports
- v. Original bills and receipts
- vi. Pharmacy bills in original with prescriptions
- vii. Any other treatment documents based on the discharge summary

## B) Non-Medical Benefit Claims

- 1) <u>Personal Accident</u>:
- a. Covering Letter detailing full statement of the facts of the Accident
- b. Duly filled and signed claim form.
- c. Original admission or discharge card

d. Copy of Emergency Room medical summary / Consultation summary provided by the treating doctor / hospital or ambulance service providers.

- e. Treating Doctor's medical report
- f. Passport /visa copy with entry and exit stamps.
- g. Copy of FIR (filed with the local police authorities).
- h. Post mortem report /death certificate, if applicable
- i. Certificate from Civil surgeon certifying the extent of disability
- j. Consent for Declaration of Medical information form
- k. Any other document if required will be advised on receipt of claim documents.

Benefit in the Policy	Documents Required	Procedure to be followed
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Personal liability	<ul> <li>Duly filled and signed claim form</li> <li>Self-Declaration and statement of event in writing</li> <li>Statements of the witnesses</li> <li>Legal notice/summons or any other documents relevant to incident</li> </ul>	<ul> <li>Immediate intimation to the common carrier and Company/Claims administrator</li> <li>Do not commit or agree up on any compensation to the third party without the consent of the Company</li> </ul>
Hijack Allowance	<ul> <li>Duly filled and signed claim form</li> <li>Copies of Travel ticket and boarding pass</li> <li>Passport copy revealing entry and exit stamps</li> <li>Correspondence copies with common carrier about the event</li> <li>Self-Declaration and statement of event in writing</li> <li>Statements of the witnesses</li> </ul>	<ul> <li>Immediate intimation to the Company/Claims administrator</li> <li>Fill the claim form completely and submit all the documents to the correspondence address of the TPA/Company</li> </ul>
Trip Delay	<ul> <li>Duly filled and signed claim form</li> <li>Copies of Travel ticket and boarding pass of flight scheduled from India</li> <li>Copies of Travel ticket and boarding pass of delayed flight scheduled from India</li> <li>Passport copy revealing entry and exit stamps</li> <li>Certificate from airlines confirming the cause and duration of delay from India</li> </ul>	<ul> <li>Immediate notification and complaint to airlines if delay is more than 12 hours.</li> <li>Get certificate from airlines confirming the cause and duration of delay from India</li> <li>Immediate intimation to the Company/Claims administrator</li> <li>Fill the claim form completely and submit all the documents to the correspondence address of the TPA/Company</li> </ul>
Trip Curtailment	<ul> <li>Duly filled and signed claim form</li> <li>Copies of Travel ticket and boarding pass</li> <li>Passport copy revealing entry and exit stamps</li> <li>Consent for Declaration of Medical information form</li> </ul>	<ul> <li>Immediate intimation to the Company/Claims administrator</li> <li>Fill the claim form completely and submit all the documents to the correspondence address of the TPA/Company within 30 days from the</li> </ul>



	<ul> <li>Medical reports and doctor's certificate in case of medical reasons for trip curtailment</li> <li>Copy of death certificate in case of death of the family member</li> <li>Copies of receipts of travel and accommodation and proof of refund received for travel and accommodation expenses</li> <li>Certificate from service providers about deductions of travel and accommodation charges</li> </ul>	<ul> <li>date of return of the insured to India or policy expiry date, whichever is earlier.</li> <li>Payment will be done in INR only.</li> </ul>
Trip Cancellation	<ul> <li>Duly filled and signed claim form</li> <li>Copies of Travel ticket and boarding pass</li> <li>Passport copy revealing entry and exit stamps</li> <li>Consent for Declaration of Medical information form</li> <li>Medical reports and doctor's certificate in case of medical reasons for trip curtailment</li> <li>Copy of death certificate in case of death of the family member</li> <li>Copies of receipts of travel and accommodation and proof of refund received for travel and accommodation expenses</li> <li>Certificate from service providers about deductions of travel and accommodation charges</li> </ul>	<ul> <li>Immediate intimation to the Company/Claims administrator</li> <li>Fill the claim form completely and submit all the documents to the correspondence address of the TPA/Company within 15 days from the cancellation of the trip.</li> </ul>
Missed Connection	<ul> <li>Duly filled and signed claim form</li> <li>Copies of Travel ticket and boarding pass of flight scheduled from India</li> <li>Copies of Travel ticket and boarding pass of delayed flight scheduled from India</li> <li>Passport copy revealing entry</li> </ul>	<ul> <li>Immediate notification and complaint to airlines if delay is more than 12 hours.</li> <li>Get certificate from airlines confirming the cause and duration of delay from India</li> <li>Immediate intimation to the Company/Claims</li> </ul>



	<ul> <li>and exit stamps</li> <li>Certificate from airlines confirming the cause and duration of delay from India</li> <li>Copies of Travel ticket and boarding pass of New flight scheduled from Overseas destination</li> </ul>	<ul> <li>administrator</li> <li>Fill the claim form completely and submit all the documents to the correspondence address of the TPA/Company within 30 days of return to India or policy expiry date whichever is earlier. The claim payment will be done in INR only.</li> </ul>
Volcanic Eruption cover	<ul> <li>Duly filled and signed claim form</li> <li>Copies of Travel ticket and boarding pass of flight delayed from Overseas</li> <li>Passport copy revealing entry and exit stamps</li> <li>Certificate from airlines confirming the cause and duration of delay</li> <li>Copies of Travel ticket and boarding pass of New flight scheduled from Overseas destination</li> <li>Written confirmation of additional travel and accommodation charges incurred.</li> </ul>	<ul> <li>Get certificate from airlines confirming the cause and duration of delay from India</li> <li>Immediate intimation to the Company/Claims administrator</li> <li>Fill the claim form completely and submit all the documents to the correspondence address of the TPA/Company within 30 days of return to India or policy expiry date whichever is earlier. The claim payment will be done in INR only.</li> </ul>
Loss of Passport/Debit card & Credit Card/International driving license	<ul> <li>Duly filled and signed claim form</li> <li>Copy of new passport/debit card/credit card/IDL</li> <li>Copy of previous passport/debit card/credit card/IDL (if available)</li> <li>Copy of return tickets</li> <li>Proof of complaint to local police</li> </ul>	<ul> <li>Immediate intimation to the Company/Claims administrator</li> <li>File a complaint with local police</li> <li>Contact Indian Embassy, wherever necessary</li> <li>Fill the claim form completely and submit all the documents to the correspondence address of the TPA/Company within 30 days of return to India or policy expiry date whichever is earlier. The</li> </ul>



		claim payment will be done in INR only.
Emergency catastrophe Cover	<ul> <li>Duly filled and signed claim form</li> <li>Written confirmation from appropriate public authority confirming the date and time, cause and nature of catastrophe and duration of the same</li> <li>Bills and receipts towards additional accommodation (room only)charges incurred</li> </ul>	<ul> <li>Immediate intimation to the Company/Claims administrator</li> <li>Fill the claim form completely and submit all the documents to the correspondence address of the TPA/Company within 30 days of return to India or policy expiry date whichever is earlier. The claim payment will be done in INR only.</li> </ul>
Delay of checked in baggage	<ul> <li>Duly filled and signed claim form</li> <li>Copies of travel tickets/boarding pass/baggage tags</li> <li>Correspondence copies with common carrier about the delay of Baggage certificate with delay and actual date and time of delivery of baggage.</li> <li>Property Irregularity report from the common carrier authority</li> </ul>	<ul> <li>Immediate intimation to the common carrier and Company/Claims administrator</li> <li>Fill the claim form completely and submit all the documents to the correspondence address of the TPA/Company within 30 days of return to India or policy expiry date whichever is earlier. The claim payment will be done in INR only.</li> </ul>
Loss of Checked in Baggage	<ul> <li>Duly filled and signed claim form</li> <li>Copies of Travel ticket and boarding pass</li> <li>Passport copy revealing entry and exit stamps</li> <li>Correspondence copies with common carrier about the loss of Baggage with declaration of contents and cost of the same in the lost baggage</li> <li>Property Irregularity report from the Common Carrier authority</li> <li>Details of compensation received from the common carrier</li> </ul>	<ul> <li>Immediate intimation to the common carrier and Company/Claims administrator</li> <li>Fill the claim form completely and submit all the documents to the correspondence address of the TPA/Company within 30 days of return to India or policy expiry date whichever is earlier. The claim payment will be done in INR only.</li> </ul>



Child Escort Cover	<ul> <li>Duly filled and signed claim form</li> <li>Copies of hospitalization of the adult family member, medical reports, disablement certificate, certificate from treating doctor confirming the disablement for travel for 7 days, death certificate (if applicable)</li> <li>Copies of Travel ticket and boarding pass</li> <li>Passport copy with entry and exit stamp</li> </ul>	<ul> <li>Immediate intimation to the common carrier and Company/Claims administrator</li> <li>Fill the claim form completely and submit all the documents to the correspondence address of the TPA/Company within 30 days of return to India or policy expiry date whichever is earlier. The claim payment will be done in INR only.</li> </ul>
Emergency cash arrangement	<ul> <li>Duly filled and signed claim form</li> <li>Copies of Travel ticket and boarding pass</li> <li>Passport copy with entry and exit stamp</li> <li>Proof of complaint to local police in case of burglary/theft/hold up</li> <li>Details of family member in India and amount of cash to be collected</li> <li>Details of exact location and nearby landmark/hotel will complete contact details.</li> </ul>	<ul> <li>Immediate notification to the Insurer or Claims administrator on provided contact number</li> <li>Assistance department will verify the details and ascertain the amount of cash required</li> <li>Assistance department will get in touch with the local contact/relatives of insured in India who can provide payment security including delivery charges through credit card</li> <li>Cash delivery will be arranged to the hotel or place requested and agreed by the insured.</li> <li>Forward the mentioned documents by E-mail to the insurer/Claims administrator</li> </ul>
Golfer's hole in One	<ul> <li>Duly filled and signed claim form</li> <li>Copies of Travel ticket and boarding pass</li> <li>Passport copy with entry and exit stamp</li> <li>Certificate from the United States Golfer's Association (USGA) recognized Golf</li> </ul>	<ul> <li>Immediate intimation to the common carrier and Company/Claims administrator</li> <li>Fill the claim form completely and submit all the documents to the correspondence address of the TPA/Company</li> </ul>



	<ul> <li>course outside India towards achievement</li> <li>Bills and receipts towards the celebration</li> </ul>	within 30 days of return to India or policy expiry date whichever is earlier. The claim payment will be done in INR only.
Accidental Injury to Pet	<ul> <li>Duly filled and signed claim form</li> <li>Copies of Travel ticket and boarding pass</li> <li>Passport copy with entry and exit stamp</li> <li>The legal document towards ownership of the pet</li> <li>all prescriptions and bills towards the incurred medical expenses</li> </ul>	• Fill the claim form completely and submit all the documents to the correspondence address of the TPA/Company within 30 days of return to India or policy expiry date whichever is earlier. The claim payment will be done in INR only.
Home Burglary	<ul> <li>Duly filled and signed claim form</li> <li>Copies of Travel ticket and boarding pass</li> <li>Passport copy with entry and exit stamp</li> <li>Proof of complaint to local police</li> <li>Inventory/list of items stolen/ damaged and their cost</li> <li>Details of householders policy</li> <li>Report of the Surveyor</li> <li>Bills towards repair of damages (if applicable)</li> </ul>	<ul> <li>Immediate intimation to the common carrier and Company/Claims administrator</li> <li>Fill the claim form completely and submit all the documents to the correspondence address of the TPA/Company within 30 days of return to India or policy expiry date whichever is earlier. The claim payment will be done in INR only.</li> </ul>