

## CUSTOMER INFORMATION SHEET

This document provides only key information about your policy No XXXXXXXXXXXXXXXXXXXX. Please refer to the policy document for detail terms and conditions.

SI No	Title	Description	Policy / Clause Number										
1	Product Name	Private Car Liability Policy - 3 Years	NA										
2	Unique Identification Number (UIN) allotted by IRDAI	IRDAN15ORP0005V01201819	NA										
3	Structure	Indemnity	NA										
4	Interests Insured	Interest of Insured is third party liability arising out of insured vehicle	NA										
5	Sum Insured / Motor Insured Declared Value Scope	/-	NA										
6	Policy Coverage	<b>SECTION II - LIABILITY TO THIRD PARTIES :</b> Subject to the limits of liability as laid down in the Schedule hereto the Company will indemnify the insured in the event of an accident caused by or arising out of the use of the vehicle against all sums including claimant's cost and expenses which the insured shall become legally liable to pay in respect of  i. Death of or bodily injury to any person caused by or arising out of the use (including the loading and/or unloading) of the vehicle. ii.Damage to property caused by the use (including the loading and/or unloading) of the vehicle.	Section II										
		The Company undertakes to pay compensation as per the following scale for bodily injury/ death sustained by the Insured, in direct connection with any of the vehicle of which he / she is registered owner or whilst driving or mounting into/dismounting from such vehicle or whilst travelling in it as a co-driver, caused by violent accidental external and visible means which independent of any other cause shall within six calendar months of such injury result in:	Section III										
		<table><tr><th>Nature of Injury</th><th>Scale of Compensation</th></tr><tr><td>(i) Death</td><td>100%</td></tr><tr><td>(ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye</td><td>50%</td></tr><tr><td>(iii) Loss of one limb or sight of one eye</td><td>100%</td></tr><tr><td>(iv) permanent total disablement from injuries other than named above</td><td>100%</td></tr></table>		Nature of Injury	Scale of Compensation	(i) Death	100%	(ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye	50%	(iii) Loss of one limb or sight of one eye	100%	(iv) permanent total disablement from injuries other than named above	100%
		Nature of Injury		Scale of Compensation									
		(i) Death		100%									
		(ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye		50%									
		(iii) Loss of one limb or sight of one eye	100%										
(iv) permanent total disablement from injuries other than named above	100%												
7	Add-on Cover	NA	NA										
8	Loss Participation	Compulsary deductible will be applied in each and every claim intimated under Own Damage section of the policy.	NA										
		Deductible : INR /-											
9	Exclusions	The Company shall not be liable in respect of: 1. any accidental loss damage and/or liability caused sustained or incurred outside the Geographical Area. 2. any claim arising out of any contractual liability. 3. any accidental loss damage and/or liability caused sustained or incurred whilst the vehicle insured herein is: a) being used otherwise than in accordance with the Limitations as to Use or b) being driven by or is for the purpose of being driven by him/her in the charge of any person other than a Driver as stated in the Driver's clause. 4. i) any accident loss or damage to any property whatsoever or any loss or expense whatsoever resulting or arising there from or any consequential loss ii) any liability of whatsoever nature directly or indirectly caused by or contributed to by or arising from ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. For the purposes of this exception combustion shall include any self-sustaining process of nuclear fission. 5. any accidental loss or damage or liability directly or indirectly caused by or contributed to by or arising from nuclear weapons material 6. any accidental loss damage and/or liability directly or indirectly or proximately or remotely occasioned by or contributed to by or traceable to or arising out of or in connection with war, invasion, the act of foreign enemies, hostilities or warlike operations (whether before or after declaration of war), civil war, mutiny rebellion, military or usurped power or by any direct or indirect consequences of any of the said occurrences and in the event of any claim hereunder the Insured shall prove that the accidental loss damage and/or liability arose independently of and was in no way connected with or occasioned by or contributed to by or traceable to any of the said occurrences or any consequences thereof and in default of such proof the Company shall not be liable to make any payment in respect of such a claim.	NA										
10	Special Conditions and Warranties (if any)	The Company may cancel the Policy on grounds of mis-representation, fraud, non-disclosure of material facts or non-cooperation of the insured by sending seven days' notice by recorded delivery to the insured at insured's last known address and in such event will return to the insured the premium paid less the pro rata portion thereof for the period the Policy has been in force or the Policy may be cancelled at any time by the insured on seven days' notice by recorded delivery and provided no claim has arisen during the currency of the Policy, the insured shall be entitled to a return of premium less premium at the Company's Short Period rates for the period the Policy has been in force. Return of the premium by the company will be subject to retention of the minimum premium of Rs.100/- (or Rs.25/- in respect of vehicles specifically designed/modified for use by blind/handicapped/mentally challenged persons). Where the ownership of the vehicle is transferred, the Policy cannot be cancelled unless evidence that the vehicle is insured elsewhere is produced.	NA										

11	Admissibility of Claim	<p>1. Notice shall be given in writing to the Company immediately upon the occurrence of any accident or loss or damage and in the event of any claim and thereafter the insured shall give all such information and assistance as the Company shall require. Every letter claim writ summons and/or process or copy thereof shall be forwarded to the Company immediately on receipt by the insured. Notice shall also be given in writing to the Company immediately the insured shall have knowledge of any impending prosecution inquest or fatal injury in respect of any occurrence which may give rise to a claim under this Policy. In case of theft or other criminal act which may be the subject of a claim under this Policy the insured shall give immediate notice to the police and co-operate with the Company in securing the conviction of the offender.</p> <p>2. No admission offer promise payment or indemnity shall be made or given by or on behalf of the Insured without the written consent of the Company which shall be entitled if it so desires to take over and conduct in the name of the Insured the defence or settlement of any claim or to prosecute in the name of the Insured for its own benefit any claim for indemnity or damages or otherwise and shall have full discretion in the conduct of any proceedings or in the settlement of any claim and the Insured shall give all such information and assistance as the Company may require.</p> <p>3. The Company may at its own option repair reinstate or replace the vehicle or part thereof and/or its accessories or may pay in cash the amount of the loss or damage and the liability of the Company shall not exceed:</p> <p>(a) for total loss / constructive total loss of the vehicle - the Insured's Declared Value (IDV) of the vehicle (including accessories thereon) as specified in the Schedule less the value of the wreck.</p> <p>(b) for partial losses, i.e. losses other than Total Loss/Constructive Total Loss of the vehicle - actual and reasonable costs of repair and/or replacement of parts lost/damaged subject to depreciation as per limits specified.</p> <p>4. The Insured shall take all reasonable steps to safeguard the vehicle from loss or damage and to maintain it in efficient condition and the Company shall have at all times free and full access to examine the vehicle or any part thereof or any driver or employee of the insured. In the event of any accident or breakdown, the vehicle shall not be left unattended without proper precautions being taken to prevent further damage or loss and if the vehicle be driven before the necessary repairs are effected any extension of the damage or any further damage to the vehicle shall be entirely at the insured's own risk.</p> <p>5. If at the time of occurrence of an event that gives rise to any claim under this Policy there is in existence any other insurance covering the same liability, the Company shall not be liable to pay or contribute more than its rateable proportion of any compensation, cost or expense.</p> <p>6. The due observance and fulfillment of the terms, conditions and endorsements of this Policy in so far as they relate to anything to be done or complied with by the insured and the truth of the statements and answers in the said proposal shall be conditions precedent to any liability of the Company to make any payment under this Policy.</p> <p>7. In the event of the death of the sole insured, this Policy will not immediately lapse but will remain valid for a period of three months from the date of the death of insured or until the expiry of this Policy (whichever is earlier). During the said period, legal heir(s) of the insured to whom the custody and use of the Motor Vehicle passes may apply to have this Policy transferred to the name(s) of the heir(s) or obtain a new insurance policy for the Motor Vehicle. Where such legal heir(s) desire(s) to apply for transfer of this Policy or obtain a new policy for the vehicle such heir(s) should make an application to the Company accordingly within the aforesaid period. All such applications should be accompanied by:-</p> <p>a) Death Certificate in respect of the insured</p> <p>b) Proof of title to the vehicle</p> <p>c) Original Policy</p> <table border="1"> <thead> <tr> <th colspan="4">Sample Caluclation :</th> </tr> <tr> <th>Particulars</th><th>Admissible amount</th><th>Amount net off depreciation</th><th>Final amount inc. Tax</th></tr> </thead> <tbody> <tr> <td>Part</td><td>40000</td><td>20000</td><td>23600</td></tr> <tr> <td>Labour</td><td>20000</td><td>20000</td><td>23600</td></tr> <tr> <td>Paint Material</td><td>1800</td><td>900</td><td>1062</td></tr> <tr> <td>Paint Labour</td><td>1800</td><td>1800</td><td>2124</td></tr> <tr> <td colspan="3">Final Amount (+)</td><td>50386</td></tr> <tr> <td colspan="3">Compulsory Excess (-)</td><td>1000</td></tr> <tr> <td colspan="3">Final Claim amount</td><td>49386</td></tr> </tbody> </table>	Sample Caluclation :				Particulars	Admissible amount	Amount net off depreciation	Final amount inc. Tax	Part	40000	20000	23600	Labour	20000	20000	23600	Paint Material	1800	900	1062	Paint Labour	1800	1800	2124	Final Amount (+)			50386	Compulsory Excess (-)			1000	Final Claim amount			49386	NA
Sample Caluclation :																																							
Particulars	Admissible amount	Amount net off depreciation	Final amount inc. Tax																																				
Part	40000	20000	23600																																				
Labour	20000	20000	23600																																				
Paint Material	1800	900	1062																																				
Paint Labour	1800	1800	2124																																				
Final Amount (+)			50386																																				
Compulsory Excess (-)			1000																																				
Final Claim amount			49386																																				
12	Policy Servicing -Claim Intimation and Processing	<p>Claim Intimation and details of designated company officials to be contacted at the time of claim Toll-Free number:- 1800-266-5844 Website: <a href="http://www.libertyinsurance.in">www.libertyinsurance.in</a> Email: <a href="mailto:care@libertyinsurance.in">care@libertyinsurance.in</a></p> <p>Customer can call our customer care number @1800-266-5844 or mail to <a href="mailto:care@libertyinsurance.in">care@libertyinsurance.in</a> or visit website or directly walk-in to any of our offices and can get his/her claim registered with us For Cashless Service: You may call to our Customer care number@1800-266-5844 or may visit to our Company website <a href="http://www.libertyinsurance.in">www.libertyinsurance.in</a> to know the list of cashless workshops.</p> <p>Surveyor appointment shall be within 24 hours from claim registration.</p> <p>The following basic minimum Claim documents ae to be submitted by the insured</p> <ul style="list-style-type: none"> <li>· Motor Claim Form</li> <li>· Copy of Registration Certificate</li> <li>· Copy of Driving License</li> <li>· Copy Estimate and invoice</li> <li>· FIR in case of TP Injury/Death Case</li> </ul> <p>We or our surveyors may call for any additional documents/ information depending upon the nature and type of loss.</p> <p>Turnaround Time (TAT) for claim settlement</p> <ol style="list-style-type: none"> <li>1. Time limit for appointment of surveyors - 24 hours from claim registration</li> <li>2. Submission of survey report - 15 days from the date of appointment of surveyor</li> <li>3. Settlement/rejection of Claim -7 days after receiving last document</li> </ol> <p>Call us on Toll free number: 1800- 266-5844 (8:00 AM to 8:00 PM, 7 days of the week) or Email us at: <a href="mailto:care@libertyinsurance.in">care@libertyinsurance.in</a> or Write to us at: Customer Service Liberty General Insurance Limited Unit 1501 &amp; 1502, 15th Floor, Tower 2, One International Center, Senapati Bapat Marg, Prabhadevi, Mumbai - 400013 Maharashtra.</p>	NA																																				
13	Grievance Redressal and Policyholders Protection	<p>For Details of Protection of Policyholders Interest kindly refer to the below link : <a href="http://www.libertyinsurance.in/customer-support/grievance-redressal.html">www.libertyinsurance.in/customer-support/grievance-redressal.html</a></p> <p>Details of GRO :</p>	NA																																				

		Grievance Redressal Officer : Sameer Malgundkar Email ID : gro@libertyinsurance.in			
		Bima Bharosa (Grievance Redressal Portal), IRDAI- <a href="https://bimabharosa.irdai.gov.in/">https://bimabharosa.irdai.gov.in/</a>			
		If the insured is not satisfied with the redressal of grievance through above methods, the insured person may also approach the office of Insurance Ombudsman of the respective area/region for redressal of grievance as per prevailing Insurance Ombudsman Rules. For the latest details of Ombudsman offices, please visit the Insurance Ombudsman website at the following link: <a href="http://www.cioins.co.in/Ombudsman">www.cioins.co.in/Ombudsman</a>			
14	Obligations of the Policyholder	To disclose all information correctly sought by the insurer at time of filling the proposal form In case of any change / modification / addition to the already declared information the same shall be brought to the notice of the Insurer immediately Non-disclosure of material information may affect the claim settlement.			
Declaration by the Policyholder;					
I have read the above and confirm having noted the details.					
Place:					
Date:					(Signature of the Policyholder)
Note :					
a) For product related documents including the Customer Information Sheet, Kindly refer to this link : <a href="https://www.libertyinsurance.in/customer-support/download-forms.html">https://www.libertyinsurance.in/customer-support/download-forms.html</a>					
b) In case of any conflict, the terms and conditions mentioned in the policy document shall prevail					
*Trade Logo displayed above belongs to Liberty Mutual and used by the Liberty General Insurance Limited under license					