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		Liberty General Insurance Ltd. Unit 1501&1502, 15th Floor, Tower 2, One International Co	enter		A							
		UNIT 150142502, 13th Prior, (west 2, use international center, Sengate Bapt Mang Pathaback, Wimbai - 40013.										
	Phone: +91 226700 1313 Fax -91 226700 1606											
1		IRDAI of India Reg. No.150, CIN: U66000MH2010PLC2696 Website Link: www.libertyinsurance.in	56		General insurance	C n						
2			CUSTOMER INFORMATION SHEET									
3		I	This documer	nt provides only key information about your policy No XXXXXX	XXXXXXXXXXXXXXXXXXXII Please refer to the policy document for detail terms and conditions.	1						
	SI No	Title	Description									
4												
5	1	Product Name	Standalone Motor Third Party policy for Two Wheelers (Long term)									
6	2	Unique Identification Number (UIN) allotted by IRDAI	IRDAN15GRP0005V01201415									
l . l	3	Structure	ndemnity									
8	4	Interests Insured	interest of Insured is third party liability arising out of Insured webicle									
٥	5	Sum Insured / Motor Insured Declared Value Scope										
10	6	Policy Coverage	SECTION II - LIABILITY TO THIRD PARTIES: 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.									
10												
			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:									
11												
12			(i) Death	re of Injury	Scale of Compensation	Section III						
14			(ii) Loss of two limbs or sight of two eyes or one limb and si	ght of one eve	100%							
15			(iii) Loss of one limb or sight of one eye		50%							
14 15 16			(iv) permanent total disablement from injuries other than n	amed above	100%							
17	7	Add-on Cover	NA .									
18	8	Loss Participation	Computary deductible will be applied in each and every claim intimated under Own Damage section of the policy.									
19			Deductible: INR /-									
20	9	Exclusions	iting accidental loss damage and/or liability caused sustained or incurred outside the Geographical Area.  In you claim arriage out of any contractual lability.  In you claim arriage out of any contractual lability.  In you claim arriage out of any contractual lability caused sustained or incurred whilst the vehicle insured herein is:  Being dare here in a coordinace with the Limitations as to Use or  Being dare here in a coordinace with the Limitations as to Use or  Being dare here in a coordinace with the Limitations as to Use or  Being dare here in a coordinace with the Limitations as to Use or  Being dare here in a coordinace with the Limitations as to Use or  Being dare here in the contraction of any property whatoever or any loss or expense whatoever resulting or arising there from or any consequential loss  any lability of whatoever nature directly or indirectly crusted by or contributed to by or arising from inculsar results.  In you accidental loss of damage or lability directly or indirectly caused by or contributed to by or arising from nuclear weapons material  Biny accidental loss of damage or lability directly or indirectly caused by or contributed to by or arising from nuclear weapons material  Biny accidental loss of damage or lability directly or indirectly crusted or proving the contributed to by or this exception contributed to by or the contributed or by or the contributed or by the contributed or by or dark of the contributed or by or the contributed or by or the contributed to by or the accidental loss damage and/or lability arose independently of and was in no way connected with or occasioned by or intributed to by or the accidental loss damage and/or lability arose independently of and was in no way connected with or occasioned by or intributed to by or the accidental loss damage and/or lability arose independently of and was in no way connected with or occasioned by or intributed to by or the accidental loss damage and/or lability arose independently of and was in no way connected with									
21	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 he per or tata 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 organization of the insured of rates for the period critical returns to the Policy has been in force after or the Policy, the insured shall be entitled to a return of premium less premium at the insured of rates for the period critical returns to the policy has been in force after or the Policy has been in force or the Policy has be									
	11	Admissibility of Claim	Isotice 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 immediately on receipt by the insured. Notice shall also be given in writing to the Company immediately the insured shall have browsledge of any impending prosecution inquests or stati inquiry in respect of any occurrence which may give rise to a claim under this Policy. In case of their 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 comiction of the offender.  2.2. Also daminiscon of the promise payment or indemnity shall be embedded and or successful and the state of the state o									
22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37			Sample Caluciation :									
24			Particulars	Admissible amount	Amount net off depreciation Final amount inc.	ax						
25 26			Part Labour	40000 20000	20000 23600 20000 23600							
27			Paint Material	1800	900 1062							
<u>28</u>			Paint Labour	1800	1800 2124 Final Amount (+) 50386							
30			Compulsory Excess (-) 1000									
32			50   10   10   10   10   10   10   10									
33		Policy Servicing - Claim Intimation and Processing	Website / Email - care@BlbertyInsurance.in Details of designated company officials to be contacted in time of claim - 1800-266-5844									
35	12		Customer can call our customer care number @1800-266-5844 or mail to care@libertyinsutance.in or visit website/Liv Mobile app or directly walk-in to any of our offices and can									
36 37			The Company shall settle or reject a claim, as the case may be, within 30 days from the date of receipt of sat necessary document.  Call uses of little member 1000-2006-8464 (800 MM to 800 PM), 7480 yet frow eved in crimal use at carefully-derivariance in or Wittle to us at Customer Service Liberty General Insurance Limited 10th Poor, Tower A, Peninsula Business Park, Carpatae Kadam Marg, Lower Paret, Mumbal 400 013									
		•	Louis as on twin the institute. 1900-200-200-2004 (D.W.Pri to COUPTY, 7 upgs of the weeks) of critical for contract of the country of the cou									

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38			Grievance Redressal Officer : Sameer Malgundkar					
39			Email ID : gro@libertyinsurance.in					
		Bima Bharosa (Grievance Redressal Portal), RIDAI-						
			https://bimabharosa.irdai.gov.in/					
40			Insurance Othor Delay Contact details of the Insurance Ombudsman offices have been provided as AnneNourse Othor Delay document.					
41			OMBUDSMAN'S OFFICE	CONTACT DETAILS	JURISDICTION		4	
			Office of the Insurance Ombudsman,					
			Jeevan Prakash Building, 6th floor,	Tel.: 079 -25501201/02/05/06	Gujarat, Dadra & Nagar Haveli, Daman and Diu.			
40			Tilak Marg, Relief Road, Ahmedabad – 380 001.	bimalokpal.ahmedabad@cioins.co.in				
42			Office of the Insurance Ombudsman,					
			Jeevan Soudha Building, PID No. 57-27-N-19 Ground Floor, 19/19, 24th Main Road.	Tel.: 080 - 26652048 / 26652049	Karnataka			
l			JP Nagar, Ist Phase,	bimalokpal.bengaluru@cioins.co.in	N. di Hakawa			
43			Bengaluru - 560 078 Office of the Insurance Ombudsman,					
			Janak Vihar Complex, 2nd Floor,	Tel.: 0755 - 2769201 / 2769202				
			6, Malviya Nagar, Opp. Airtel Office, Near New Market,	Fax: 0755 - 2769203 bimalokpal.bhopal@cioins.co.in	Madhya Pradesh and Chhattisgarh			
44			Rhonal – 462 003	Simulospai, Siropai e cionis.co.iii				
			Office of the Insurance Ombudsman,	Tel.: 0674 - 2596461 /2596455				
			62, Forest park,	Fax: 0674 - 2596429	Orissa			
45			Bhubneshwar – 751 009.	bimalokpal.bhubaneswar@cioins.co.in				
П			Office of The Insurance Ombudsman Jeevan Deep Building	Tel.: 0172 - 2706196 / 2706468	Punjab,			
			SCO 20-27, Ground Floor	Fax: 0172 - 2708274	Haryana(excluding Gurugram, Faridabad, Sonepat and Bahadurgarh) Himachal Pradesh, Union Territories of Jammu & Kashmir,			
46			Sector- 17 A,	bimalokpal.chandigarh@cioins.co.in	Himachai Pradesh, Union Territories of Jammu & Kashmir, Ladakh & Chandigarh.			
70			Chandigarh - 160017 Office of the Insurance Ombudsman,		-		┥ !	
			Fatima Akhtar Court, 4th Floor, 453,	Tel.: 044 - 24333668 / 24335284 Fax: 044 - 24333664	Tamil Nadu, PuducherryTown and			
ا ـ ا		1	Anna Salai, Teynampet, CHENNAI – 600 018.	bimalokpal.chennai@cioins.co.in	Karaikal (which are part of Puducherry).			
47				<del> </del>				
			Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building,	Tel.: 011 - 23232481/23213504	Delhi &			
1 1			Asaf Ali Road,	bimalokpal.delhi@cioins.co.in	Following Districts of Haryana - Gurugram, Faridabad, Sonepat & Bahadurgarh.			
48			New Delhi – 110 002.  OFFICE OF THE INSURANCE OMBUDSMAN					
			OFFICE OF THE INSURANCE OMBUDSMAN LIC OF INDIA	Tel.:- 0484-2358759/2359338	Kerala,		NA	
			10TH FLOOR,	Fax:- 0484-2359336	Lakshadweep,			
49	13	Grievance Redressal and Policyholders Protection	'JEEVAN PRAKASH', DIVISIONAL OFFICE	bimalokpal.emakulam@cioins.co.in	Mahe-a part of Union Territory of Puducherry.			
			Office of the Insurance Ombudsman,					
			eevan Nivesh, 5th Floor, Tel.: 0361 - 2632204 / 2602205	Tel.: 0361 - 2632204 / 2602205	Assam, Meghalaya, Manipur, Mizoram,			
F0			Nr. Panbazar over bridge, S.S. Road, Guwahati – 781001(ASSAM).	bimalokpal.guwahati@cioins.co.in	Arunachal Pradesh, Nagaland and Tripura.			
30								
			Office of the Insurance Ombudsman, 6-2-46, 1st floor, "Moin Court",	Tel : 040 - 23312122	Andhra Pradesh,			
			Lane Opp. Saleem Function Palace,	Fax: 040 - 23376599	Telangana, Yanam and			
			A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004.	bimalokpal.hyderabad@cioins.co.in	part of Union Territory of Puducherry.			
51								
			Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor,	Tel.: 0141 - 2740363				
			Bhawani Singh Marg,	bimalokpal.jaipur@cioins.co.in	Rajasthan			
52			Jaipur - 302 005.					
			Office of the Insurance Ombudsman,	Tel.: 033 - 22124339 / 22124340	West Bengal,			
			Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue,	Fax: 033 - 22124341 M: 8009693830	Sikkim,			
53			KOLKATA - 700 072.	bimalokpal.kolkata@cioins.co.in	Andaman & Nicobar Islands.			
$\Box$			Office of the Insurance Ombudsman,	Tel.: 0522 - 2231330 / 2231331	Districts of Uttar Pradesh :			
1 1			6th Floor, Jeevan Bhawan, Phase-II,	Tel.: 0522 - 2231330 / 2231331 Fax: 0522 - 2231310	Lalitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhabdra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, J			
5.4			Nawal Kishore Road, Hazratganj, Lucknow - 226 001.	bimalokpal.lucknow@cioins.co.in	Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Mah Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar.	ıcı ajgarig, Santkabirnağar, Azamgam,		
J4			Office of the Insurance Ombudsman,					
			3rd Floor, Jeevan Seva Annexe,	Tel.: 69038821/23/24/25/26/27/28/28/29/30/31 Fax: 022 - 26106052	Goa, Mumbai Metropolitan Region			
ا ـ ـ ا			S. V. Road, Santacruz (W), Mumbai - 400 054.	bimalokpal.mumbai@cioins.co.in	excluding Navi Mumbai & Thane.			
55			Mumbai - 400 054.  Office of the Insurance Ombudsman,	-				
1 1			Bhagwan Sahai Palace	Tel.: 0120-2514252 / 2514253	State of Uttaranchal and the following Districts of Uttar Pradesh:			
			4th Floor, Main Road, Naya Bans, Sector 15,	bimalokpal.noida@cioins.co.in	Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Craiyya, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Sahar	, Pilibhit, Etawah, Farrukhabad, Firozbad, ranpur.		
56			Diett: Gautam Ruddh Nagar		ായം പ്രവാധ പ്രവാധ, ചര്വുണ്ടിലെ പ്രവാധ, ചര്വന്ന് , വരുന്ന് , വരുന്ന് , congon , cong		4	
			Office of the Insurance Ombudsman,	Tel. 0042 2047000				
1 1			2nd Floor, Lalit Bhawan, Bailey Road,	Tel.: 0612-2547068 bimalokpal.patna@cioins.co.in	Bihar, Jharkhand.			
57			Patna 800 001.					
П			Office of the Insurance Ombudsman.					
1 1			Jeevan Darshan Bldg., 3rd Floor,	Tel.: 020-41312555	Maharashtra, Area of Navi Mumbai and Thane			
			C.T.S. No.s. 195 to 198,	bimalokpal.pune@cioins.co.in	excluding Mumbai Metropolitan Region.			
58			N.C. Kelkar Road, Narayan Peth, Pune – 411 030.	l				
			To disclose all information correctly sought by the insurer	at time of filling the proposal form ady declared information the same shall be brought to the notice	of the locuser immediately			
1 1	14	Obligations of the Policyholder	Non-disclosure of material information may affect the cla	im settlement.	or are insurer minimediately			
		(Disclosure of other material information during the policy period.)						
59		Insurer to specify the material information						
60 61 i	hour '	the above and confirm having noted the details.	T	Declar	stion by the Policyholder;			
61 I	nave read Nace:	ure above and confirm naving noted the details.		<u> </u>		<del>                                     </del>		
63 64								
64 [	Date:			<b> </b>		(Signature of the Policyholder)		
66 *	*Trade Logo displayed above belongs to Liberty Mutual and used by the Liberty General Insurance Limited under license							
	5		,			•		