

**Surakshit Loan Bima  
Customer Information Sheet/Know Your Policy**

**This document provides key information about your policy. You are also advised to go through your policy documents.**

SI no	Title	Description	Policy Clause Number																																																																			
1	Name of Insurance Product /Policy	Surakshit Loan Bima	Not Applicable																																																																			
2	Policy Number	Not Applicable	Not Applicable																																																																			
3	Type of Insurance Product/Policy	Benefit	Not Applicable																																																																			
4	Sum Insured (Basis)	<ul style="list-style-type: none"> <li>• <b>Plans:</b> A, B, C, D, E</li> <li>• <b>Sum Insured Options:</b> ₹10,000 to ₹3 Cr</li> </ul>	Not Applicable																																																																			
5	Policy Coverage (What the policy covers?)	<p><b>Expenses in respect of:</b></p> <p>Critical Illnesses</p> <table border="1"> <thead> <tr> <th></th> <th>Plan A</th> <th>Plan B</th> <th>Plan C</th> <th>Plan D</th> <th>Plan E</th> </tr> </thead> <tbody> <tr> <td colspan="6"><b>(A) First Diagnosis of the below-mentioned Illnesses</b></td> </tr> <tr> <td>1</td> <td>Cancer of specified severity</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> </tr> <tr> <td>2</td> <td>Kidney failure requiring regular dialysis (End Stage Renal Failure)</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> </tr> <tr> <td>3</td> <td>Multiple Sclerosis with persisting symptoms</td> <td>x</td> <td>√</td> <td>√</td> <td>√</td> <td>√</td> </tr> <tr> <td>4</td> <td>Benign Brain Tumor</td> <td>x</td> <td>x</td> <td>√</td> <td>√</td> <td>√</td> </tr> <tr> <td>5</td> <td>Parkinson's Disease</td> <td>x</td> <td>x</td> <td>√</td> <td>√</td> <td>√</td> </tr> <tr> <td>6</td> <td>End Stage Liver Failure</td> <td>x</td> <td>x</td> <td>x</td> <td>√</td> <td>√</td> </tr> <tr> <td>7</td> <td>Alzheimer's Disease</td> <td>x</td> <td>x</td> <td>x</td> <td>√</td> <td>√</td> </tr> <tr> <td colspan="6"><b>(B) Undergoing for the first time of the following surgical procedures</b></td> </tr> </tbody> </table>		Plan A	Plan B	Plan C	Plan D	Plan E	<b>(A) First Diagnosis of the below-mentioned Illnesses</b>						1	Cancer of specified severity	√	√	√	√	√	2	Kidney failure requiring regular dialysis (End Stage Renal Failure)	√	√	√	√	√	3	Multiple Sclerosis with persisting symptoms	x	√	√	√	√	4	Benign Brain Tumor	x	x	√	√	√	5	Parkinson's Disease	x	x	√	√	√	6	End Stage Liver Failure	x	x	x	√	√	7	Alzheimer's Disease	x	x	x	√	√	<b>(B) Undergoing for the first time of the following surgical procedures</b>						Section B. I
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		1	Major Organ / Bone Marrow Transplant	x	√	√	√	√	
		2	Open Heart Replacement or Repair of Heart Valves (Heart Valve Replacement)	x	√	√	√	√	
		3	Open Chest CABG (Coronary Artery Bypass Graft)	x	√	√	√	√	
		4	Surgery of Aorta	√	x	x	√	√	
		(C) Occurrence for the first time of the following medical events							
		1	Stroke resulting in permanent symptoms	√	√	√	√	√	
		2	Permanent Paralysis of limbs	x	√	√	√	√	
		3	Myocardial Infarction (First Heart Attack of specified severity)	√	√	√	√	√	
		4	Coma of Specified Severity	x	x	√	√	√	
		5	Third Degree Burns	x	x	x	x	√	
		6	Deafness	x	x	x	x	√	
		7	Loss of Speech	x	x	x	x	√	
		<b>Total Critical Illnesses Covered</b>		5	9	12	15	18	
		Personal Accident a) Accidental Death b) Permanent Total Disability							
		Section B. II							

		Optional Cover Loss of Job	Section B.III
<p><i>Note: All the above covers are offered under this Product. However, the cover offerings are plan specific and shall be applicable as per the opted plan.</i></p>			
6	Exclusions (What the policy does not cover)	<p><b>Standard Exclusions</b></p> <ul style="list-style-type: none"> <li>• Investigation &amp; Evaluation</li> <li>• Change-of-Gender treatments</li> <li>• Cosmetic or Plastic Surgery</li> <li>• Hazardous or Adventure sports</li> <li>• Breach of law</li> <li>• Treatment for, Alcoholism, drug or substance abuse or any addictive condition and consequences thereof</li> <li>• Unproven Treatments</li> <li>• Birth control, Sterility and Infertility</li> </ul> <p><b>Specific Exclusions</b></p> <ul style="list-style-type: none"> <li>• due to, or arising out of, or directly or indirectly connected with or traceable to, war, invasion, act of foreign enemy, hostilities (whether war be declared or not) civil war, rebellion, revolution, insurrection, mutiny, military or usurped power, seizure, capture, arrests, restraints and detainment of the heads of state and citizens of any nation and of all kinds and acts of terrorism, riots, strike, malicious acts.</li> <li>• directly or indirectly caused by or contributed to by or arising from ionizing, radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste or from the combustion of nuclear fuel. For the purpose of this exclusion, combustion shall include any self-sustaining process of nuclear fission.</li> <li>• directly or indirectly caused by or contributed to by or arising from nuclear weapon materials.</li> <li>• directly or indirectly caused by or contributed to by or arising out of usage, consumption or abuse of alcohol and/or drugs.</li> <li>• arising out of or as a result of any act of self-destruction or self-inflicted injury, attempted suicide or suicide.</li> <li>• any sexually transmitted diseases other than, Acquired Immune Deficiency Syndrome (AIDS), AIDS related complex syndrome (ARCS) and all diseases caused by and/ or related to the HIV.</li> <li>• any consequential or indirect loss or expenses arising out of or related to any Insured Event.</li> <li>• arising out of or resulting directly or indirectly due to or</li> </ul>	Section C

		<p>as a consequence of pregnancy or treatment traceable to pregnancy and childbirth, abortion, miscarriage and its consequences, tests and treatment relating to infertility and invitro fertilization.</p> <ul style="list-style-type: none"> <li>• arising out of or resulting directly or indirectly while serving in any branch of the Military or Armed Forces of any country during war or warlike operations.</li> <li>• arising out of or resulting directly or indirectly caused by, resulting from or in connection with any act of terrorism/ sabotage regardless of any other cause or event contributing concurrently or in any other sequence to the loss. The Policy also excludes loss, damage, cost or expenses of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to action taken in respect of any act of terrorism/sabotage.</li> <li>• Participation in an actual or attempted felony, riot, crime, misdemeanor, or civil commotion</li> <li>• Participation in skydiving/ parachuting, hang gliding, bungee jumping, (where ropes or guides are customarily used), riding or diving in races or rallies using a motorized vehicle or bicycle, caving or potholing hunting or equestrian activities, skin diving or other underwater activity canoeing involving white water rapids, yachting or boating outside coastal waters (2 miles), any bodily contact sport , any other potentially dangerous sport participation in any professional sports.</li> </ul> <p><b>Exclusions applicable to Section I: Critical Illness</b></p> <ul style="list-style-type: none"> <li>• Medical Expenses incurred for the listed Critical Illnesses diagnosed within 90 days of the commencement of the Policy.</li> <li>• Any Insured Event arising on account of or in connection with any Pre-Existing Illness/ Disease.</li> <li>• If the Insured does not submit a medical certificate from the Medical Practitioner evidencing diagnosis of Illness or Injury or occurrence of the medical event or the undergoing of the medical / surgical procedure in relation to the claim of the particular insured person.</li> <li>• Any external congenital Illness or condition or birth defects;</li> <li>• Any medical procedure or treatment, which is not medically necessary or not performed by a Medical</li> </ul>	
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		<p>Practitioner.</p> <ul style="list-style-type: none"> <li>• Any physical, medical condition or treatment or service that is specifically excluded in the Policy in Part I of the Schedule under Special Conditions.</li> <li>• Hormone replacement therapy.</li> <li>• Treatment by a family member and self-medication</li> <li>• Any Illness, sickness or disease other than those specified as Critical Illnesses under this Policy;</li> <li>• Any claim with respect to any Critical Illness diagnosed or which manifested prior to Policy Inception Date</li> <li>• Any Critical Illness directly or indirectly caused due to or associated with human T-cell Lymphotropic virus type III (HTLV-III or HTLB-III) or Lymphadenopathy Associated Virus (LAV) and its variants or mutants.</li> <li>• Any condition directly or indirectly caused by or associated with any sexually transmitted disease, including Genital Warts, Syphilis, Gonorrhoea, Genital Herpes, Chlamydia, Pubic Lice and Trichomoniasis, whether or not arising out of conditions listed under section 1</li> <li>• Any Critical Illness arising out of use, abuse or consequence or influence of any substance (substances that are abuse like illegal drugs, opioids, marijuana etc.), intoxicant, drug, alcohol or hallucinogen;</li> <li>• Narcotics used by the Insured Person unless taken as prescribed by a registered Medical Practitioner,</li> <li>• Any Critical Illness directly or indirectly caused due to intentional self-injury, suicide or attempted suicide; whether the person is medically sane or insane;</li> <li>• Any Critical Illness directly or indirectly, caused by or arising from or attributable to a foreign invasion, act of foreign enemies, hostilities, warlike operations (whether war be declared or not or while performing duties in the armed forces of any country during war or at peace time), civil war, public defense, rebellion, revolution, insurrection, military or usurped power;</li> <li>• Any Critical Illness caused by ionizing radiation or contamination by radioactivity from any nuclear fuel (explosive or hazardous form) or from any nuclear waste from the combustion of nuclear fuel, nuclear, chemical or biological attack.</li> <li>• Working in underground mines, tunneling or involving electrical installations with high tension supply, or as jockeys or circus personnel;</li> </ul>	
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		<ul style="list-style-type: none"> <li>• Insured Persons whilst engaging in a speed contest or racing of any kind (other than on foot), bungee jumping, parasailing, ballooning, parachuting, necessitating the use of guides or ropes, potholing, abseiling, deep sea diving using hard helmet and breathing apparatus, polo, snow and ice sports in so far as they involve the training for or participation in competitions or professional sports, or involving a naval, military or air force operation;</li> <li>• Participation by the Insured Person in any flying activity, except as a bona fide, fare-paying passenger of a recognized airline on regular routes and on a scheduled timetable.</li> <li>• Any Critical Illness based on certification/diagnosis/treatment from persons not registered as Medical Practitioners, or from a Medical Practitioner who is practicing outside the discipline that he is licensed for.</li> <li>• Any treatment for surgical and non-surgical treatment of obesity, including morbid obesity (unless certified to be life threatening) and weight control programs, or treatment of an optional nature including complications/illness arising as a consequence thereof;</li> <li>• Any Critical Illness arising or resulting from the Insured Person committing any breach of law or participating in an actual or attempted felony, riot, crime, misdemeanor or civil commotion with criminal intent;</li> <li>• Failure to seek or follow Medical Advice.</li> <li>• Any treatment arising from or traceable to pregnancy (including voluntary termination), miscarriage (unless due to an accident), childbirth, maternity (including Caesarian section), abortion or complications of any of these. This exclusion will not apply to ectopic pregnancy.</li> <li>• Diagnosis outside India; unless reaffirmed by Specialist Medical Practitioner in India and subject to presentation of all Claim documents in English</li> </ul> <p><b>Exclusions applicable to Section II: Personal Accident</b></p> <ul style="list-style-type: none"> <li>• Payment under more than one of the categories specified (Death or Permanent Total Disablement) in the Benefit Payable in respect of the Insured Person</li> <li>• Any pre-existing disability / accidental injury;</li> </ul>	
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		<p>which results in the enhancement of risk under the Policy, if not accepted and endorsed by the Company;</p> <ul style="list-style-type: none"> <li>• Death or disablement directly or indirectly caused due to or associated with human T-cell Lymphotropic virus type III (HTLV-III or HTLB-III) or Lymphadenopathy Associated Virus (LAV) and its variants or mutants.</li> <li>• Death or disablement arising from or caused by ionizing radiation or contamination by radioactivity from any nuclear fuel (explosive or hazardous form) or resulting from or from any other cause or event contributing concurrently or in any other sequence to the loss, claim or expense from any nuclear waste from the combustion of nuclear fuel, nuclear, chemical or biological attack. <ul style="list-style-type: none"> <li>▪ Chemical attack or weapons means the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous chemical compound which, when suitably distributed, is capable of causing any illness, incapacitating disablement or death.</li> <li>▪ Biological attack or weapons means the emission, discharge, dispersal, release or escape of any pathogenic (disease producing) microorganisms and/or biologically produced toxins (including genetically modified organisms and chemically synthesized toxins) which are capable of causing any illness, incapacitating disablement or death.</li> </ul> </li> <li>• Payment of compensation in respect of death, injury or disablement of Insured person (a) from engaging in or participation in adventure sports including but not limited to winter sports, skydiving/parachuting, hang gliding, bungee jumping, scuba diving, mountain climbing (where ropes or guides are customarily used), riding or driving in races or rallies using a motorized vehicle or bicycle, caving or pot-holing, hunting or equestrian activities, skin diving or other underwater activity, rafting or canoeing involving white water rapids, yachting or boating outside coastal waters, participation in any Professional Sports, any bodily contact sport or any other hazardous or potentially dangerous sport for which the Insured is untrained, unless specifically covered under the Policy (b) directly or indirectly caused by venereal disease or insanity;</li> <li>• Insured whilst flying or taking part in aerial activities (including cabin crew) except as a fare-paying</li> </ul>	
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		<p>passenger in a regular scheduled airline or air Charter Company;</p> <ul style="list-style-type: none"> <li>• Working in underground mines, tunnelling or explosives, or involving electrical installation with high tension supply, or as jockeys or circus personnel, or engaged in Hazardous Activities;</li> <li>• Any physical, medical condition or treatment or service that is specifically excluded in the Policy.</li> <li>• Payment of compensation in respect of Death or Permanent Total Disablement arising from or resulting directly or indirectly from any Illness to any Insured Person.</li> <li>• No sum shall be payable under this Section in case of any Permanent Total Disability for which medical care, treatment, or advice was recommended by or received from a Medical Practitioner or from which the Insured person suffered or which was present before the commencement of the Policy Period.</li> </ul> <p><b>Exclusions applicable to Section III: Loss of Job (Optional Cover)</b></p> <ul style="list-style-type: none"> <li>• In the event of termination, dismissal, temporary suspension or retrenchment from employment of the Insured person being attributed to dishonesty or fraud or poor performance on the part of the Insured person or his wilful violation of any rules of the employer or laws for the time being in force or any disciplinary action against the Insured person by the employer.</li> <li>• The Company shall not be liable to make any payment under this Policy in connection with or in respect of: <ul style="list-style-type: none"> <li>▪ Self-employed persons;</li> <li>▪ Any claim relating to unemployment from a job which is casual, temporary, seasonal or contractual in nature or any claim relating to an employee not on the direct rolls of the employer;</li> <li>▪ Any voluntary unemployment;</li> <li>▪ Unemployment at the time of inception of the Policy Period or arising within the first 90 days of inception of the Policy Period.</li> </ul> </li> <li>• Any unemployment from a job under which no salary or any remuneration is provided to the Insured person.</li> <li>• Any suspension from employment on account of any pending enquiry being conducted by the employer/ Public Authority.</li> <li>• Any unemployment due to resignation, retirement whether voluntary or otherwise.</li> </ul>	
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		<ul style="list-style-type: none"> <li>Any unemployment due to non-confirmation of employment after or during such period under which the Insured was under probation.</li> </ul>	
7	<b>Waiting Period</b> <ul style="list-style-type: none"> <li>Time period during which specified diseases/ treatments are not covered.</li> <li>It is counted from the beginning of the policy coverage</li> </ul>	<b>Critical Illness cover:</b> Waiting period of first 90 days from commencement of the policy for listed critical illnesses	Section C (ii) 1)
		<b>Loss of Job:</b> Waiting period of first 90 days from commencement of the policy.	Section C (iv) 2) d)
8	<b>Financial Limits of Coverage</b>	Not Applicable	Not Applicable
	i. Sub Limits- (It is a predefined limit, and the insurance company will not pay any amount in excess of this limit)	Not Applicable	Not Applicable
	ii. Co-payment – (It is a specified amount /percentage of the admissible claim amount to be paid by policy holder/ Insured)	Not Applicable	Not Applicable
	iii. Deductible- (It is a specified amount up to which an insurance company will not pay any claim, and which will be deducted from total claim amount (if claim amount is more than the specified amount)	Not Applicable	Not Applicable

	iv. Any other limit (as applicable)	Not Applicable	Not Applicable
9	Claims/ Claims Procedure	<p>Please find below the details /web link for following:</p> <p>i. Network hospital details- <a href="https://general.futuregenerali.in/hospital-locator">https://general.futuregenerali.in/hospital-locator</a></p> <p>ii. Helpline Number (toll free) - 1800 209 1016 / 1800-103-8889</p> <p>iii. Hospitals which are blacklisted or from where no claims will be accepted by Insurer. - <a href="https://general.futuregenerali.in/hospital-locator">https://general.futuregenerali.in/hospital-locator</a></p> <p>iv. Downloading/getting claim form - <a href="https://general.futuregenerali.in/customer-service/downloads">https://general.futuregenerali.in/customer-service/downloads</a></p>	Not Applicable
10	Policy Servicing	<p>a) Call Centre number of Insurer Policy Servicing: 1800 220 233/1860 500 3333/ 022-67837800 Timing: 7 am to 10 pm Claims Servicing:1800 103 8889/1800 209 1016 Timing: 24*7</p> <p>b) Details of company officials Policy Servicing Office: Refer the Policy Schedule</p>	Not Applicable
11	Grievances /Complaints	<p>Details of -Grievance Redressal Officer of the Insurer: <a href="https://general.futuregenerali.in/customer-service/grievance-redressal">https://general.futuregenerali.in/customer-service/grievance-redressal</a></p> <p>-Insurance Company grievance portal / Department:</p> <ul style="list-style-type: none"> <li>• Helplines: 1800-220-233/ 1860-500-3333/ (022) 67837800</li> <li>• Email: <a href="mailto:Fgcare@futuregenerali.in">Fgcare@futuregenerali.in</a></li> <li>• Website: <a href="http://www.futuregenerali.in">www.futuregenerali.in</a></li> </ul> <p>-Ombudsman: The guidelines of taking up a compliant in ombudsman and the addresses of ombudsman are available on: <a href="http://www.policyholder.gov.in/Ombudsman.aspx">http://www.policyholder.gov.in/Ombudsman.aspx</a></p>	Section D.A.9
12	Things to remember	<ul style="list-style-type: none"> <li>• Free Look Cancellation: You may cancel the insurance policy if you do not want it, within 30 days from the beginning of policy. The Free Look Period shall only be applicable for new policies and shall not be available on renewal policies, ported policies and migrated policies. In the event you want to exercise Free Look Cancellation, you will need to place a request for the same through registered e-mail id or registered contact</li> </ul>	Section D.A. 3

	<p>number by calling on our Helpline Numbers 1800-220-233, 1860-500-3333, 022-67837800 or by submitting a request at any of our branch offices.</p> <p>If you have not made any claim during the Free Look Period, then you shall be entitled to</p> <ol style="list-style-type: none"> <li>a refund of the premium paid less any expenses incurred by the Company on medical examination of the Insured Person and the stamp duty charges or</li> <li>Where the risk has already commenced and the option of return of the policy is exercised by the Insured Person, a deduction towards the proportionate risk premium for period of cover or</li> <li>Where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period.</li> </ol>	
	<ul style="list-style-type: none"> <li>• Policy Renewal: Except on grounds of fraud, moral hazard or misrepresentation or non-cooperation, renewal of your policy shall not be denied, provided the policy is not withdrawn.</li> </ul>	Section D. B. iv. 1
	<ul style="list-style-type: none"> <li>• Migration &amp; Portability: When your policy is due for renewal, you may migrate to another policy with us or port your policy with other Insurer. The e-mail and address to be contacted for outward portability is: Customer Service Cell, Future Generali India Insurance Company Ltd. Corporate &amp; Registered Office 801 and 802, 8th floor, Tower C, Embassy 247 Park, L.B.S. Marg, Vikhroli (W), Mumbai – 400083 Email: <a href="mailto:Fgcare@futuregenerali.in">Fgcare@futuregenerali.in</a> For Detailed Guidelines on migration and portability, kindly refer the link <a href="https://general.futuregenerali.in/general-insurance/pdf/Guide%20to%20Portability%20and%20Migration%2025-Mar2020.pdf">https://general.futuregenerali.in/general-insurance/pdf/Guide to Portability and Migration 25-Mar2020.pdf</a></li> </ul>	Section D. B. ii.7
	<ul style="list-style-type: none"> <li>• Change in Sum Insured- Sum insured can be changed (increased/decreased) only at the time of renewal or at any time, subject to underwriting by the company. For Increase in SI, waiting period if any shall start afresh only for the enhanced portion of the sum insured.</li> </ul>	Not Applicable
	<p>Moratorium Period-After completion of sixty continuous months of coverage (including portability and migration) in health insurance policy, no policy and claim shall be contestable by the insurer on</p>	Section D.A.7

		grounds of non-disclosure, misrepresentation, except on grounds of established fraud. This period of sixty continuous months is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy. Wherever the sum insured is enhanced, completion of sixty continuous months would be applicable from the date of enhancement of sums insured only on the enhanced limits.	
13	Your Obligations	Please disclose all Pre-Existing Disease/s, or condition/s before buying a policy. Non-disclosure may affect claim settlement.	

Declaration by the Policy Holder:

I have read the above and confirm having noted the details:

Place \_\_\_\_\_

Date \_\_\_\_\_ (Signature of the Policyholder)

Note

- i. The web-link, where the product related documents including the Customer Information Sheet are available on the website of FGII, is at <https://general.futuregenerali.in/customer-service/downloads>
- ii. In case of any conflict, the terms and conditions mentioned in the policy documents shall prevail.
- iii. **Your confirmation, being the policyholder, regarding receiving of the Customer Information Sheet is necessary.**