

CUSTOMER INFORMATION SHEET

This document provides only key information about your policy. Please refer to the policy document for detailed terms and conditions.

Sl. No	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy / Clause Number										
1	Product Name	FG Dog Health Cover	NA										
2	Unique Identification Number (UIN) allotted by IRDAI	IRDAN132RP0002V02202122	NA										
3	Structure	Indemnity	NA										
4	Interests Insured	Insured's pet dog	NA										
5	Sum Insured	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Section</th> <th style="width: 50%;">Cover</th> <th style="width: 40%;">Sum Insured</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">I.</td> <td>Surgery and Hospitalization Cover</td> <td style="text-align: center;"><<<INR XXX>>></td> </tr> <tr> <td style="text-align: center;">II.</td> <td>OPD Cover</td> <td style="text-align: center;"><<<INR XXX>>></td> </tr> </tbody> </table>	Section	Cover	Sum Insured	I.	Surgery and Hospitalization Cover	<<<INR XXX>>>	II.	OPD Cover	<<<INR XXX>>>	NA	
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6	Policy Coverage	<p>1. Surgery and Hospitalization (In-patient) Cover: Covers reasonable Medical Expenses incurred towards Medically Required Treatment of the Insured Dog</p> <p>2. OPD Cover: Covers costs incurred by insured towards the treatment of the Insured Dog, carried out by a vet at his/her veterinary clinic</p> <p>3. Terminal Illness Cover – Company pays a lumpsum amount, in the event that the Insured Dog is diagnosed with any one or more Terminal Illness at first instance during the Policy Period, and provided that the Insured Dog survives for at least 30 days from the date of diagnosis of the Terminal Illness. For the purpose of this benefit, "Terminal Illness" shall mean one or more of the following: a. Cancer – Any b. Cardiac Dysfunction c. Leptospirosis d. Kidney Failure e. Canine Distemper</p> <p>4. Lost and Stolen Cover: Company pays, in the event that the Insured Dog is lost or stolen (ie, for at least 5 continuous days during the Policy Period), towards the cost of advertising locally (provided that such advertisement is permitted in the Insured's locality and has received the written approval of the Company prior to advertising) and for offering a reward for the recovery of the Insured Dog</p> <p>5. Long Term Care Cover: Company pays a lump sum amount if the Insured dog is diagnosed as suffering from any of the Illnesses listed below and require long term care, which first occurs or manifests itself during the Policy Period. Illnesses are: 1. Epilepsy, 2. Pancreatitis, 3. Cushing's Syndrome, 4. Diabetes, 5. Thyroid Dysfunction, 6. Ascites, 7. Glaucoma, 8. Inflammatory Bowel Disease</p>	Coverage Clause										
7	Add-on Cover / Optional Cover	<p><<< Add-On Covers - Opted</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">Cover</th> <th style="width: 50%;">Sum Insured</th> </tr> </thead> <tbody> <tr> <td>Terminal Illness Cover</td> <td style="text-align: center;"><<<INR XXX>>></td> </tr> <tr> <td>Lost and Stolen Cover</td> <td style="text-align: center;"><<<INR XXX>>></td> </tr> <tr> <td>Long Term Care Cover</td> <td style="text-align: center;"><<<INR XXX>>></td> </tr> <tr> <td>Funeral Cost Cover</td> <td style="text-align: center;"><<<INR XXX>>></td> </tr> </tbody> </table>	Cover	Sum Insured	Terminal Illness Cover	<<<INR XXX>>>	Lost and Stolen Cover	<<<INR XXX>>>	Long Term Care Cover	<<<INR XXX>>>	Funeral Cost Cover	<<<INR XXX>>>	NA
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		Veterinary on Call <<<INR XXX>>> Emergency Pet Minding Cover <<<INR XXX>>> Third Party Liability Cover <<<INR XXX>>>											
8	Loss Participation	<<INR XX>> Illustration <table border="1"> <thead> <tr> <th>Description</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>Policy SI</td> <td>INR 1,00,00,000</td> </tr> <tr> <td>Claim Amount:</td> <td>INR 57,00,000</td> </tr> <tr> <td>Policy Deductible: 5% of the claim amount, applicable on each and every claim</td> <td>INR 2,85,000</td> </tr> <tr> <td>Net Payable amount</td> <td>INR 54,15,000</td> </tr> </tbody> </table>	Description	Amount	Policy SI	INR 1,00,00,000	Claim Amount:	INR 57,00,000	Policy Deductible: 5% of the claim amount, applicable on each and every claim	INR 2,85,000	Net Payable amount	INR 54,15,000	NA
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9	Exclusions	Special Exclusions <<< Specific Exclusion: Surgery and Hospitalization (In-patient) Cover >>> The Company will not be liable for any Claim under the Surgery and Hospitalization Cover directly or indirectly caused by, based on, arising out of or howsoever attributable to the following: <ol style="list-style-type: none"> a) Pre-Existing Diseases will be covered after a waiting period of 12 months of continuous coverage with the Company. b) Waiting Period - The Company will not cover any treatment taken during the Waiting Period, unless the treatment is Medically Required as a result of an Accident. This waiting period does not apply for any subsequent and continuous renewals of Your Policy. c) Treatment for any Congenital Abnormalities. d) Costs for cosmetic treatment, elective treatment, routine treatment or preventative treatment recommended by a Vet to prevent an Injury or illness. This is not limited to but includes vaccination, micro-chipping, spaying, castration, Cryptorchidism (retained testes), grooming, nail clipping, whelping, kitting, bathing, dematting, killing and controlling fleas and worms, spaying to prevent the re-occurrence of false pregnancy and any Claims as a result of these procedures unless specified in the Schedule. e) Treatment undergone purely for cosmetic or psychological reasons to improve appearance. However, this exclusion does not apply where Medically Required as a part of treatment for cancer, accidents and burns to restore functionality. f) Dental Treatment including Surgical Procedures for the treatment of bone disease when related to gum disease or damage, or treatment for, or treatment arising from, disorders of the temporomandibular joint except if Injury is due to an Accident. g) OPD Treatment, except those OPD Treatments specified in the Schedule will be covered under the Policy. h) Any treatment received outside India i) Unrecognised physician or Hospital: <ol style="list-style-type: none"> a. Treatment provided by a Veterinary Practitioner who is not recognized by the Veterinary Council of India. 	Coverage Clause Exclusion Clause										

- b. Treatment in any hospital or by any Veterinary Practitioner or any other provider of services that We have blacklisted as listed on Our website.
- j) Any Claim arising from skin related treatments.
- k) Any Claim arising from expenses incurred in connection with breeding, pregnancy or giving birth.
- l) k. Any non-medical cost and expenses.
- m) Any Claim arising from expenses incurred for treatment of Illness or Injury arising out of:
 - a. Racing;
 - b. Coursing;
 - c. Commercial guarding;
 - d. Organized fighting; or
 - e. Any other occupational, professional or business uses of the Insured Dog

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<<<Specific Exclusion : Terminal Illness Cover

The Company will not be liable for any Claim under Terminal Illness Cover directly or indirectly caused by, based on, arising out of or howsoever attributable to any of the following:

- a) Any Terminal Illness arising on account of or in connection with any Pre-Existing Disease.
- b) Any Terminal Illness diagnosed within the Waiting Period. This exclusion shall not apply to Policies that are continuously renewed with Us, and if the Insured was covered under a policy from any other insurer in India covering the same health conditions and under the same terms as are being covered under this Policy during the previous 12 continuous months, provided the renewal of such policy is continuous or the Policy is renewed within 15 days of expiry of the previous policy.
- c) Treatment arising from or traceable to pregnancy, childbirth postpartum complications including but not limited to caesarian section, birth defects and Congenital Abnormalities.
- d) Intentional self-Injury and / or the use or misuse of intoxicating drugs and / or alcohol.

<<<Specific Exclusion : Lost and Stolen Cover

The Company will not be liable to pay any Claim under Lost and Stolen Cover directly or indirectly caused by, based on, arising out of or howsoever attributable to the following:

- a. Any reward given to:
 - i. any person who lives with the Insured; or
 - ii. anyone who was looking after the Insured Dog when it was lost or stolen; or
 - iii. any person who stole the Insured Dog, or acted in collusion with the person who stole the Insured Dog.
- b. Claim not supported by a signed receipt which shows the full name and address of the person who finds the Insured Dog;
- c. Claim for advertisements issued without prior written approval of the Company;
- d. Any Claim made after 121 days from the date the Insured Dog was lost or stolen;

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<<<Specific Exclusion : Long Term Care Cover

More than one Claim shall not be honored under this Section during the lifetime of the dog.

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<<<Specific Exclusions: Funeral Cost Cover

The Company will not be liable for any Claim under Funeral Cost Cover towards cremation costs of the Insured Dog if aged 8 years and over at the time of death.

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<<<Specific Exclusions: Veterinary On Call (Home Visits)

The Company will not be liable to pay any Claim under this section, directly or indirectly caused by, based on, arising out of or howsoever attributable to the following:

- a. Any Claim arising out of or paid under mandatory covers, Terminal Illness or Long- term care
- b. Pre-Existing Diseases
- c. Any Illnesses, including any signs and symptoms of Illness which the Insured or the Vet are aware of during the Waiting Period;
- d. Vaccinations, homeopathic vaccinations, flea, tick or worming prevention or treatment for elective treatments, tests or diagnostic procedures including cosmetic surgery;
- e. For routine examinations, nail clipping, bathing or de-matting, spaying, castration/neutering;
- f. For pregnancy or related consultations or complications, including giving birth or rearing puppies;
- g. Any skin related infections, diarrhoea /dysentery, gastritis, gastro enteritis, vomiting, and dental care (including any Dental Surgery/Treatment).
- h. Vet Fees outside normal Surgery hours except where a Vet considers and confirms in writing that the Insured Dog cannot wait until normal Surgery hours;
- i. Non-essential house calls unless the Vet declares in writing to move the Insured Dog would seriously endanger it's health;
- j. Any costs for teeth or gums unless caused by an Accident;
- k. Food unless it has been prepared to treat a specific Accident or Illness and is used instead of medication on the written confirmation of the Vet;
- l. Removal of dew claws unless as a result of an Accident;
- m. Post-mortem costs;
- n. Cost of transplant Surgery, including pre and post-operative care.

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<<<Specific Exclusions: Third party Liability Cover

The Company will not be liable to pay any Claim under Third Party Liability Cover directly or indirectly caused by, based on, arising out of or howsoever attributable to the following:

- a. Claims where no liability is established by a competent court or tribunal or forum constituted under applicable law.
- b. Any damages, costs and expenses where the Injury or damage was caused by the deliberate acts or omissions of the Insured or members of Insured's Family, or employed by the Insured including staff/caretaker.
- c. Any Claim arising from breach of quarantine restrictions or import or export rules and regulations.

d. Any compensation cost and expenses if the incident happens in an area or place where dogs are specifically prohibited unless the Insured Dog escapes and enters the area outside of Insured's control.

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General Exclusions:

The Company shall not be liable to make any payment for any Claim under the Policy, directly or indirectly for, caused by, arising from or in any way attributable to any of the following:

1. Accidents occurring and/or disease/Illness contracted prior to commencement of risk under this Policy. This exclusion is not applicable for the Policies renewed in continuity.
2. Any Claims for diseases for which preventive medicines/vaccines has not been taken.
3. Any excess/deductible amount as shown on the Schedule against each benefit in force under the Policy.
4. Any Claims for costs or fees for Experimental Surgery/Procedure
5. Any Claim for treatment of disease or Injury due to an Accident to Working Dogs and Volunteer Dogs.
6. Any loss or damage caused wilfully or knowingly by the Insured, or any loss or damage in which the Insured or any person acting on his/her behalf, is involved or implicated.
7. Any consequential loss, how so ever arising.
8. Any Claims arising outside the territorial limits of India.
9. The capture or killing of Insured Dog by Government or public authorities, or under applicable laws.
10. The Insured breaking any laws, or regulations, including those relating to animal health or importation.
11. Any medication or treatment not recommended by a Vet.
12. Where fraud or mis-representation has been committed against the Company or where false information has been provided to the Company.
13. Any loss where the Insured is entitled to indemnity under insurance cover under any other insurance policy.
14. If the Insured Dog is sold or where any insurable interest whatsoever is parted with by the Insured, whether temporarily or permanently.
15. Any endemic disease as declared by the Indian local authorities or State or Central Government.
16. Any Illness that Insured Dog contracted while outside the territorial limits of India that it would not normally have contracted in India.
17. Legal Expenses, fines and penalties connected with, or resulting from, a criminal case or an act of Parliament made in India.
18. Any Claim for treatment of a third party as a result of the disease transmitted from animals to humans.
19. Malicious or wilful Injury or neglect, or gross negligence to Insured Dog caused by the Insured, his/her agent, employees or members of Insured's Family and unskilful medical treatment.
20. Any Claim in respect of a dog, categorized as dangerous dogs by State or Central government authority.
21. Any charges or fees billed by the treating Vet to complete a Claim form or to provide information to support the Insured's Claim.
22. War, invasion, acts of foreign enemies, hostilities (whether war be declared or not), civil war, commotion, unrest, rebellion, revolution, insurrection, military

		<p>or usurped power or confiscation or nationalization or requisition of or damage by or under the order of any government or public local authority, riot, strike, or Terrorism.</p> <p>23. Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste or nuclear weapons material or from the combustion of nuclear fuel, or the radioactive toxic explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.</p> <p>24. Any cost directly or indirectly arising or resulting from, or contributed to or by chemical, biological, biochemical or electromagnetic weapon, device, agent or material, whether controlled or uncontrolled, accidental or otherwise;</p> <p>25. Treatment to the teeth and gums of the Insured Dog is excluded except which is as a direct result of an Injury caused by an Accident to the Insured Dog.</p> <p>26. Costs resulting from an Accident, Injury or Illness that:</p> <ol style="list-style-type: none"> i. is the same as or has the same diagnosis or clinical signs and symptoms as an Accident, Injury or Illness of the Insured Dog before the date of commencement of the Policy; ii. is caused by, relates to or results from an Accident, Injury, Illness or clinical signs and symptoms existent before the date of commencement of the Policy. <p>27. Any claim within initial 30 days waiting period of policy commencement date (not applicable to renewal or for accidents)</p> <p>28. Sanction, Limitation And Exclusion Clause No insurer shall be deemed to provide cover and no insurer shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose that insurer to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America.</p>							
10	Special Conditions and warranties (if any)	<<< any special conditions or warranties>>>	NA						
11	Admissibility of Claim	<p>1. Broad principle of Admissibility or Denial of claim</p> <ul style="list-style-type: none"> • Insurance is a contract between 2 entities & loss governing contracts as well as tort shall be underlying guideline for admission or denial of claim. • Further specific terms and conditions as well as warranties incorporated in the contract shall also play a major role • Insured is expected to exhibit reasonable duty of due care and diligence failing with a claim may get rejected. • Insurance is a contract of utmost good faith and any mis-declaration or omission to state material facts can prejudice a claim. <p>2. Sample Claim Calculation (only applicable for Market value or RIV basis of settlement)</p> <table border="1" data-bbox="370 1766 1013 1942"> <thead> <tr> <th>Description</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>Gross Loss Assessed</td> <td>10000</td> </tr> <tr> <td>Less: Depreciation, if applicable</td> <td>1000</td> </tr> </tbody> </table>	Description	Amount	Gross Loss Assessed	10000	Less: Depreciation, if applicable	1000	NA
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		Less: Salvage, if applicable	500		
		Gross Loss	8500		
		Less: Under Insurance*, if applicable 20%	1700		
		Gross Assessed Loss	6800		
		Less: Excess, if applicable	1000		
		Net Loss Payable	5800		
		Calculation of Under Insurance -			
		Description	Amount		
		Value at risk of Insured property	Rs. 5,00,000		
		Sum Insured opted by Insured	Rs. 4,00,000		
		Difference	Rs. 1,00,000		
		Under Insurance % (Rs. 1,00,000 divided by Rs. 5,00,000)	20%		
12	Policy Servicing – Claim Intimation and Processing	<ul style="list-style-type: none"> Toll free / IVRS number: 1800 220 233 / 1860-500-3333 / 022-67837800 Website: https://general.futuregenerali.in/ Email: fgclaims@futuregenerali.in Details of designated company officials to be contacted in time of claim – <<< Branch Policy - Branch Manager & Policy Servicing Office address and contact details For example – <i>Branch Manager</i> <i>Address - Off Code- 3N, 3rd Floor, No. 310, Radhe Arcade, Near Diwan Ballubhai High School, Maninagar, Maninagar, Gujarat Pincode:380008.</i> <i>Phone: +91 079-25464166 >>></i> <<<Direct Policy – <i>Future Generali India Insurance,</i> <i>Ph: 1800 220 233 / 1860-500-3333 / 022-67837800</i> <i>Email: fgclaims@futuregenerali.in</i> <i>Address: Future Generali India Insurance Co Ltd., Unit 801 and 802, 8th floor, Tower C, Embassy 247 Park, L.B.S. Marg, Vikhroli (W), Mumbai - 400 083>>></i> Details of procedure to be followed for reimbursement of claim <ul style="list-style-type: none"> - Intimate claims immediately upon occurrence of any event. - To intimate claim, send email to fgclaims@futuregenerali.in or call at our helpline number 1800-220-233/1860-500-3333. - Customer to use the same claim number for all communications. - Surveyor appointment as per regulatory guidelines. 			NA

		<ul style="list-style-type: none"> - Preserve all records of damages, purchases invoices, reinstatement invoices, reports of police and other authorities concerned, photographs & any other documents may be called for. - Do not take any actions that may compromise your claim as well as deny any opportunity to assess the claim. - Upon completion of all formalities, Insurance company shall confirm decision on acceptance of liability. - If claim is admissible and KYC/AML documents are already available with Insurer; claims payment shall be processed by NEFT mode of payment. <ul style="list-style-type: none"> • Turn Around Time (TAT) for claims settlement <table border="1" data-bbox="461 579 1369 1129"> <thead> <tr> <th>S. No</th> <th>Stages of claim</th> <th>Times lines for settlement of claims</th> </tr> </thead> <tbody> <tr> <td>1.</td> <td>Appointment of surveyor, if applicable.</td> <td>Immediately, in any case within 24 hours of the receipt of intimation from the insured</td> </tr> <tr> <td>2.</td> <td>Submission of survey report</td> <td>within 15 days of appointment subject to all documents required to conclude assessment being submitted on the same day of intimation. If else, 15 days from the receipt of last document</td> </tr> <tr> <td>3</td> <td>Settlement of claim</td> <td>Within 7 days of receipt of survey report or 22 days from submission of all documents required to assess a claim.</td> </tr> </tbody> </table> <ul style="list-style-type: none"> • Escalation Matrix when TAT is not satisfied: Grievance Redressal Future Generali 	S. No	Stages of claim	Times lines for settlement of claims	1.	Appointment of surveyor, if applicable.	Immediately, in any case within 24 hours of the receipt of intimation from the insured	2.	Submission of survey report	within 15 days of appointment subject to all documents required to conclude assessment being submitted on the same day of intimation. If else, 15 days from the receipt of last document	3	Settlement of claim	Within 7 days of receipt of survey report or 22 days from submission of all documents required to assess a claim.	
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13.	Grievance Redressal and Policy holders Protection	<ul style="list-style-type: none"> • State the brief details of Protection of Policyholder's Interest - Policies Future Generali • Details of Grievance Redressal Officer of the Insurer - fgcare@futuregeneralii.in • Bima Bharosa Portal - bimabharosa.irdai.gov.in • Ombudsman - https://www.cioins.co.in/Ombudsman 	NA												
14.	Obligations of the Policyholder	<ul style="list-style-type: none"> • 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. <p>Material information is very subjective and below are few examples:</p> <ul style="list-style-type: none"> • Risk location • Security measures • Risk occupancy • Case specific material facts or risk details 	NA												

Declaration by the Policyholder.

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

Place:

Date:

(Signature of the Policyholder)

(Authorized Signatory, where policyholder is a juridical person)

(Stamp of the legal entity)

Note:

- i. Website link for documents: - <https://general.futuregenerali.in/customer-service/downloads>
- ii. In case of any conflict, the terms and conditions mentioned in the policy document shall prevail.