

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	Stand-alone Compulsory Personal Accident Cover For Owner-Driver	NA
2	Unique Identification Number (UIN) allotted by IRDAI	IRDAN132RP0060V02201819	NA
3	Structure	Benefit Payment	NA
4	Interests Insured	Owner Driver of Vehicle insured	NA
5	Sum Insured / Motor Insured Declared Value Scope	<<<INR XXX>>>	NA
6	Policy Coverage	Bodily injury/ death sustained by the owner-driver of the vehicle, in direct connection with the vehicle insured.	Section I
7	Add-on Cover	NA	NA
8	Loss Participation	NA	NA
9	Exclusions	<p>The Company shall not be liable under this Policy in respect of</p> <ol style="list-style-type: none"> 1. Any accidental death or injuries caused sustained or incurred outside the geographical area of corresponding motor policy 2. Intentional self-injury suicide or attempted suicide physical defect or infirmity 3. An accident happening whilst such person is under influence of intoxicating liquor or drugs 4. Any accident/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 5. Any injury caused by, contributed to, by or arising from nuclear ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste or from the combustion of 	Exclusions

		<p>nuclear fuel (including any self-sustaining process of nuclear fission) or nuclear weapons material or nuclear equipment or any part of that equipment</p> <p>6. Committing breach of law with criminal intent.</p> <p>Refer policy wordings for complete details on exclusion</p>	
10.	Special Conditions and Warranties (if any)	<< As per the Schedule>>	NA
11.	Admissibility of Claim	<ul style="list-style-type: none"> Mention the broad principle of admissibility / denial of claims <p>The admissibility of a claim depends on below factors:</p> <ul style="list-style-type: none"> Policy Coverage: The incident must be covered under the insurance policy. Prompt Intimation: The claim must be reported promptly. Full Disclosure: All relevant information related to the claim must be shared. Document Submission: All required documents related to the claim must be submitted. Policy Terms and Conditions: The claim must comply with the terms and conditions of the policy. <p>The claims which fall under the exclusion, special conditions and warranties, mis representation of facts and fraud will not be admissible</p> <p>Reporting of loss: The loss shall be reported immediately [Example: Reporting of loss occurrence; Duty of care & loss minimization; Exclusion of Willful Negligence]</p> <ul style="list-style-type: none"> Include a sample claim calculation process for retail products <p>Sample claim calculation Policy Sum Insured – 1000000 In case of Death of Owner due to accident of insured vehicle 1000000 will be paid.</p>	NA

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/ • Claim Form: https://general.futuregenerali.in/downloads/motor-insurance/stand-alone-compulsory-personal-accident-cover-for-owner-driver/claim-forms/stand-alone-compulsory-personal-accident-cover-for-owner-driver-claim-form.pdf • Email: fgcare@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 – Grievance Redressal Officer, Ph: +91-79001 97777 Email: fgcare@futuregenerali.in & fggro@futuregenerali.in • 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>>> • Details of procedure to be followed for cashless service (In case of Motor Insurance) as well as for reimbursement of claim <p>Cashless claim process (Accident claim)</p> <ul style="list-style-type: none"> • Claim Intimation: Claim can be intimated through any of the mode mentioned above. A claim number will be generated and sent on the registered mobile number for reference and tracking • Assignment of Surveyor: Surveyor will be assigned for the registered accident claim. • Documents: The claim documents to be submitted to the surveyor • Claim Assessment: The surveyor will assess the loss based on the claim documents submitted and the policy terms and condition • Vehicle Repair: The vehicle will be repaired by the workshop • Delivery order: The vehicle delivery confirmation will be provided once the Invoice/ pre-invoice is received based on the surveyor report and policy terms and conditions. The vehicle can be collected by paying the difference amount between the invoice value and the Insurance amount in the delivery order • Payment: The claim payment will be done directly to the workshop <p>Reimbursement claim process (Accident claim)</p>	NA	
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13.	Grievance Redressal and Policyholders 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@futuregenerali.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. 	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:

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