

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)				
1	Product Name	Marine insurance - Cargo				
2	Unique Identification Number (UIN) allotted by IRDAI	IRDAN132RP0013V01200708				
3	Structure	Indemnity				
4	Interests Insured	Type of cargo, nature of transit and the risks or wider cover.	covered i.e. Whether restricted cover	NA		
5	Sum Insured / Motor Insured Declared Value Scope	<<< INR XXXX >>>				
6	Policy Coverage	<< <as per="" schedule="">>></as>				
7	Add-on Cover / Optional Cover	No Add-ons available under this product.		NA		
8	Loss Participation	Policy SI Claim Amount: INF Policy Deductible: 5% of the claim amount, applicable on each and every claim	R 1,00,00,000 R 57,00,000 R 2,85,000	NA		
9	Exclusions	<pre></pre> <pre> </pre> <pre> <pre> </pre> <pre> <pre> </pre> <pre> <pre> </pre> <pre> <</pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre></pre>				
10	Special Conditions and warranties (if any)	<< Any other from policy schedule >>				



12	Policy Servicing – Claim Intimation	Website: https://general.futuregeEmail:
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and Processing

<<< Branch Policy - Branch Manager & Policy Servicing Office address and contact details

For example –

Branch Manager

Address - Off Code- 3N, 3rd Floor, No. 310, Radhe Arcade, Near Diwan Ballubhai High School, Maninagar, Maninagar, Gujarat Pincode: 380008.

Phone: +91 079-25464166>>>

<< Direct Policy – Future Generali India Insurance, Ph: 1800 220 233 / 1860-500-3333 / 022-67837800 Email: fgclaims@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 reimbursement of claim
 - Intimate claims immediately upon occurrence of any event.
 - To intimate claim, send email to <u>fgclaims@futuregenerali.in</u> 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.
 - 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.

• Turn Around Time (TAT) for claims settlement

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.

• Escalation Matrix when TAT is not satisfied: <u>Grievance Redressal | Future Generali</u>



13.	Grievance Redressal and Policy holders Protection	 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	 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. Material information is very subjective and below are few examples: Cargo description Packing description Past loss history Voyage to be insured Value of per bottom limit, per sending limit, annual estimated sum insured etc. 	NA

Declaration by the Policyholder.

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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.