

KEY INFORMATION SHEET

Description is illustrative and not exhaustive

S.NO.	TITLE	DESCRIPTION	REFER TO POLICY CLAUSE NUMBER																																																																																													
1	Product Name	Shubh Yatra – Group																																																																																														
2	What am I covered for:	<ul style="list-style-type: none"> The cover is applicable while the Insured person is on trip in India. The covers under Business Plan/ Vacation Plan/ Daily commuters Plan will not be applicable at insured's home. The limits for each cover are either available on aggregate basis for entire policy period or on per trip basis, as specified in the Schedule of Benefits. <table border="1" data-bbox="451 577 1295 1249"> <thead> <tr> <th></th> <th>Daily Commuters Plan</th> <th>Business Plan</th> <th>Vacations Plan</th> </tr> </thead> <tbody> <tr><td>Accidental Death</td><td>Available</td><td>Available</td><td>Available</td></tr> <tr><td>Permanent Total Disability</td><td>Available</td><td>Available</td><td>Available</td></tr> <tr><td>Permanent Partial Disability</td><td>Available</td><td>Available</td><td>Available</td></tr> <tr><td>Accidental Hospitalization</td><td>Available</td><td>Available</td><td>Available</td></tr> <tr><td>Home Insurance</td><td>Available</td><td>Available</td><td>Available</td></tr> <tr><td>a) Fire and Allied Peril</td><td></td><td></td><td></td></tr> <tr><td>b) Burglary</td><td></td><td></td><td></td></tr> <tr><td>Bag Insurance</td><td>Available</td><td>Not Available</td><td>Not Available</td></tr> <tr><td>Trip Cancellation</td><td>Not Available</td><td>Available</td><td>Available</td></tr> <tr><td>Trip Curtailment</td><td>Not Available</td><td>Available</td><td>Available</td></tr> <tr><td>Trip Delay</td><td>Not Available</td><td>Available</td><td>Available</td></tr> <tr><td>Missed connections</td><td>Not Available</td><td>Available</td><td>Available</td></tr> <tr><td>Loss of Checked in baggage</td><td>Not Available</td><td>Available</td><td>Available</td></tr> <tr><td>Bounced Hotel and Flight</td><td>Not Available</td><td>Available</td><td>Available</td></tr> <tr><td>Emergency Hotel Extension</td><td>Not Available</td><td>Available</td><td>Available</td></tr> <tr><td>Medical Evacuation and Repatriation of Remains</td><td>Not Available</td><td>Available</td><td>Available</td></tr> <tr><td>Adventure Sports</td><td>Not Covered</td><td>Not Covered</td><td>Covered</td></tr> <tr><td rowspan="5">Assistance Services</td><td>Private Car Break Down</td><td>Available</td><td>Available</td><td>Available</td></tr> <tr><td>Taxi Breakdown</td><td>Not Available</td><td>Available</td><td>Available</td></tr> <tr><td>Ambulance Assistance</td><td>Not Available</td><td>Available</td><td>Available</td></tr> <tr><td>Concierge services</td><td>Not Available</td><td>Available</td><td>Available</td></tr> <tr><td>Medical Evacuation and Repatriation of Remains</td><td>Not Available</td><td>Available</td><td>Available</td></tr> </tbody> </table>		Daily Commuters Plan	Business Plan	Vacations Plan	Accidental Death	Available	Available	Available	Permanent Total Disability	Available	Available	Available	Permanent Partial Disability	Available	Available	Available	Accidental Hospitalization	Available	Available	Available	Home Insurance	Available	Available	Available	a) Fire and Allied Peril				b) Burglary				Bag Insurance	Available	Not Available	Not Available	Trip Cancellation	Not Available	Available	Available	Trip Curtailment	Not Available	Available	Available	Trip Delay	Not Available	Available	Available	Missed connections	Not Available	Available	Available	Loss of Checked in baggage	Not Available	Available	Available	Bounced Hotel and Flight	Not Available	Available	Available	Emergency Hotel Extension	Not Available	Available	Available	Medical Evacuation and Repatriation of Remains	Not Available	Available	Available	Adventure Sports	Not Covered	Not Covered	Covered	Assistance Services	Private Car Break Down	Available	Available	Available	Taxi Breakdown	Not Available	Available	Available	Ambulance Assistance	Not Available	Available	Available	Concierge services	Not Available	Available	Available	Medical Evacuation and Repatriation of Remains	Not Available	Available	Available	Section F
	Daily Commuters Plan	Business Plan	Vacations Plan																																																																																													
Accidental Death	Available	Available	Available																																																																																													
Permanent Total Disability	Available	Available	Available																																																																																													
Permanent Partial Disability	Available	Available	Available																																																																																													
Accidental Hospitalization	Available	Available	Available																																																																																													
Home Insurance	Available	Available	Available																																																																																													
a) Fire and Allied Peril																																																																																																
b) Burglary																																																																																																
Bag Insurance	Available	Not Available	Not Available																																																																																													
Trip Cancellation	Not Available	Available	Available																																																																																													
Trip Curtailment	Not Available	Available	Available																																																																																													
Trip Delay	Not Available	Available	Available																																																																																													
Missed connections	Not Available	Available	Available																																																																																													
Loss of Checked in baggage	Not Available	Available	Available																																																																																													
Bounced Hotel and Flight	Not Available	Available	Available																																																																																													
Emergency Hotel Extension	Not Available	Available	Available																																																																																													
Medical Evacuation and Repatriation of Remains	Not Available	Available	Available																																																																																													
Adventure Sports	Not Covered	Not Covered	Covered																																																																																													
Assistance Services	Private Car Break Down	Available	Available	Available																																																																																												
	Taxi Breakdown	Not Available	Available	Available																																																																																												
	Ambulance Assistance	Not Available	Available	Available																																																																																												
	Concierge services	Not Available	Available	Available																																																																																												
	Medical Evacuation and Repatriation of Remains	Not Available	Available	Available																																																																																												
3	What are the major Exclusions in the policy	<ol style="list-style-type: none"> Claim arising out of any illness except in case of Medical Evacuation and Repatriation of mortal remains. Accident while insured is at his/her home. Intentional self-Injury (including but not limited to the use or misuse of any intoxicating drugs or alcohol). Pregnancy and childbirth, miscarriage, abortion or complications arising out of any of these. Cosmetic surgery and plastic surgery. Whilst engaging in hazardous activity. Nuclear energy, radiation. Accident while under the influence of alcohol or drugs. <p>(Note: the above is a listing of the major general exclusions. Please refer to the policy clauses for the exclusions that may apply to particular Benefits under the Policy).</p>	Section C																																																																																													
4.	Waiting Period	Not applicable																																																																																														
5	Payout basis	Reimbursement of covered expenses up to specified limits OR Fixed amounts on the occurrence of covered events, depending on the nature of the Benefit. Please refer to the policy clauses for the details of the amounts payable under each Benefit under the Policy	Section B, Section F																																																																																													
9	Cancellation of the policy	<ol style="list-style-type: none"> We may cancel this insurance by giving You at least 15 days written notice, on the grounds of fraud, moral hazard or misrepresentation or non-cooperation and if no claim has been made then, We shall refund a pro-rata premium for the unexpired Policy Period. Policies taken for short period duration of less than 12 months can be cancelled prior to start date of the policy. It cannot be cancelled after the start date. Upon cancellation, the Company shall deduct 10% of the premium amount received as administration charges and refund the balance amount. Annual policies, may be cancelled any time by the Insured by giving 15 days' notice to the company in which case the insured would be entitled for refund of premium on short period basis as per the following scale: 	Section D. 2. ix.																																																																																													

		Period in Risk	Premium refunded		
		Within 15 Days	Pro Rate Refund		
		Exceeding 15 days up to 2 months	70.00%		
		Exceeding 2 months up to 4 months	55.00%		
		Exceeding 4 months up to 6 months	40.00%		
		Exceeding 6 months up to 8 months	25.00%		
		Exceeding 8 months up to 10 months	10.00%		
		Exceeding 10 months up to 12 months	0.00%		
If any claim has been made then no refund will be given for cancellation of policy					

(LEGAL DISCLAIMER) NOTE: The information must be read in conjunction with the product brochure and policy document. In case of any conflict between the Key Information Sheet and the policy document the terms and conditions mentioned in the policy document shall prevail.

Future Generali India Insurance Company Ltd., (The Company, We, Our or Us) will provide the insurance cover, described in the Policy and any endorsements thereto, for the Insured Period, as defined in the Policy schedule. The insurance cover provided under this Policy detailed below, for events described, if it occurs during the insured trip only and each benefit is subject to its own sum insured, as per limits mentioned in this policy schedule.

The insurance cover is governed by and subject to, the terms, conditions and exclusions of this Policy as mentioned below.

A. DEFINITIONS

The following words or terms shall have the meaning ascribed to them wherever they appear in this **Policy**, and references to the singular or to the masculine shall include references to the plural and to the female wherever the context so permits:

1. **Accident** is a sudden, unforeseen and involuntary event caused by external, visible and violent means.
Note: Insect and mosquito bites is not included in the scope of this definition.
2. **Act of Terrorism** means an act or threat of violence or an act harmful to human life, tangible or intangible property or infrastructure with the intention or effect of influencing any government or putting the public or any section of the public in fear.
3. **Age** means the completed years as at the commencement date of the policy
4. **AYUSH Treatment** refers to the medical and / or hospitalization treatments given under 'Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy systems.
5. **Adventure sports** are activities having high level of inherent danger. These activities often involve speed, height, a high level of physical exertion, and highly specialized gear such as racing on wheels or horseback, big game hunting, mountaineering, winter sports, skydiving, parachuting, scuba diving, riding or driving in races or rallies, mountain climbing, hunting or equestrian activities, rock climbing, pot holing, bungee jumping, skiing, ice hockey, aviation activities, ballooning, hand gliding, diving or under-water activity, river rafting, canoeing involving rapid waters, polo, yachting or boating.
6. **Bank Rate** means Bank rate fixed by the Reserve Bank of India (RBI) at the beginning of the financial year in which claim has fallen due.
7. **Burglary** means the unforeseen and unauthorized entry to or exit from the Insured Premises by aggressive and detectable means with the intent to steal Contents there from.
8. **Checked in Baggage** means the baggage handed over by the Insured and accepted by a Common Carrier for transportation in the same carrier in which the Insured is or would be travelling and for which the Common Carrier has issued a baggage receipt.
9. **Common Carrier** means any public road, rail or water conveyance or scheduled public aircraft, which is operating under a valid license from the relevant authority for the transportation of passengers and cargo for hire.
10. **Contents** means
 - a. Household goods, such as furniture, fixtures, fittings, home appliances, interior decorations, electricals and electronic equipment and any other items of like in nature.
 - b. Personal effects such as clothes and other articles of personal nature likely to be worn, used or carried but excluding money/cash, jewellery and any other valuables or any documents that forms as an asset/property.
Which is contained in the insured's home, belonging to the insured or his/her family members permanently residing with the Insured, including items for which the Insured is responsible, and is used for domestic purpose
11. **Contribution** means essentially the right of an insurer to call upon other insurers liable to the same insured to share the cost of an indemnity claim on a rateable proportion of Sum Insured. This clause shall not apply to any Benefit offered on fixed benefit basis.
12. **Condition Precedent** shall mean a **Policy** term or condition upon which the **Insurer's** liability under the **Policy** is conditional upon.
13. **Congenital Anomaly** refers to a condition(s) which is present since birth, and which is abnormal with reference to form, structure or position.
 - a. **Internal Congenital Anomaly – Congenital Anomaly** which is not in the visible and accessible parts of the body.
 - b. **External Congenital Anomaly – Congenital Anomaly** which is in the visible and accessible parts of the body.
14. **Co-payment** A co-payment is a cost-sharing requirement under a health insurance policy that provides that the policyholder/insured will bear a specified percentage of the admissible claim amount. A co-payment does not reduce the Sum Insured.
15. **Day care centre** means any institution established for day care treatment of illness and/or injuries or a medical setup with a hospital and which has been registered with the local authorities, wherever applicable, and is under supervision of a registered and qualified medical practitioner and must comply with all minimum criterion as under -
 - a. has qualified nursing staff under its employment;
 - b. has qualified medical practitioner/s in charge;
 - c. has fully equipped operation theatre of its own where surgical procedures are carried out;
 - d. maintains daily records of patients and will make these accessible to the insurance company's authorized personnel.
16. **Day care treatment** means medical treatment, and/or surgical procedure which is:
 - a. undertaken under General or Local Anesthesia in a hospital/day care centre in less than 24 hrs because of technological advancement, and
 - b. which would have otherwise required hospitalization of more than 24 hours.
 Treatment normally taken on an out-patient basis is not included in the scope of this definition.

17. **Deductible** means a cost sharing requirement under a health insurance policy that provides that the insurer will not be liable for a specified rupee amount in case of the covered expenses, which will apply before any benefits are payable by the Insurer. A Deductible does not reduce the sum insured.
18. **Dental Treatment** means a treatment related to teeth or structures supporting teeth including examinations, fillings (where appropriate), crowns, extractions and surgery.
19. **Dependent Child** refers to a child (natural or legally adopted), who is financially dependent on the primary insured or proposer and does not have his/ her independent sources of income.
20. **Disclosure to information norm:** The policy shall be void and all premium paid thereon shall be forfeited to the Insurer in the event of misrepresentation, mis-description or non-disclosure of any material fact.
21. **Emergency care** means management for an illness or injury which results in symptoms which occur suddenly and unexpectedly, and requires immediate care by a medical practitioner to prevent death or serious long term impairment of the insured person's health.
22. **Enrolment form** means a form to be filled in by the insured in written or electronic or any other format as approved by the Authority, for furnishing all material information as required by the insurer in respect of a risk.
23. **Equipment Failure** means any sudden, unforeseen breakdown in the Common Carrier's equipment that caused a delay or interruption of normal trips.
24. **Hazardous Activities** mean recreational or occupational activities which pose high risk of injury.
25. **Hijack** means any unlawful seizure or exercise of control, by force or violence or threat of force and with wrongful intent, of Common Carrier in which the Insured are travelling.
26. **Home** means the Insured's private residence not of Kutcha Construction as shown in the Schedule which is used or occupied solely for domestic purposes by the Insured and his/her Family whether owned or rented.
27. **Hospital:** A hospital means any institution established for in-patient care and day care treatment of illness and/or injuries and which has been registered as a hospital with the local authorities under Clinical Establishments (Registration and Regulation) Act 2010 or under enactments specified under the Schedule of Section 56(1) and the said act Or complies with all minimum criteria as under:
 - (i) has qualified nursing staff under its employment round the clock;
 - (ii) has at least 10 in-patient beds in towns having a population of less than 10,00,000 and at least 15 in-patient beds in all other places;
 - (iii) has qualified medical practitioner(s) in charge round the clock;
 - (iv) has a fully equipped operation theatre of its own where surgical procedures are carried out;
 - (v) maintains daily records of patients and makes these accessible to the insurance company's authorized personnel.
28. **Hospitalization** means admission in a **Hospital** for a minimum period of 24 consecutive '**In- patient Care**' hours except for specified procedures/ treatments, where such admission could be for a period of less than 24 consecutive hours.
29. **Illness** means a sickness or a disease or pathological condition leading to the impairment of normal physiological function and requires medical treatment.
 - a. **Acute condition** - Acute condition is a disease, illness or injury that is likely to respond quickly to treatment which aims to return the person to his or her state of health immediately before suffering the disease/ illness/ injury which leads to full recovery.
 - b. **Chronic condition** - A chronic condition is defined as a disease, illness, or injury that has one or more of the following characteristics:
 - (i) it needs ongoing or long-term monitoring through consultations, examinations, check-ups, and /or tests
 - (ii) it needs ongoing or long-term control or relief of symptoms
 - (iii) it requires rehabilitation for the patient or for the patient to be specially trained to cope with it
 - (iv) it continues indefinitely
 - (v) it recurs or is likely to recur
30. **Inclement Weather** means any severe, catastrophic weather conditions which delay the scheduled arrival or departure of a Common Carrier. This does not include normal, seasonal climatic/ weather changes.
31. **Injury** means accidental physical bodily harm excluding **Illness** or disease solely and directly caused by external, violent and visible and evident means which is verified and certified by a Medical Practitioner.
32. **Inpatient Care** means treatment for which the insured person has to stay in a **Hospital** for more than 24 hours for a covered event.
33. **Named Insured/ Insured/ Insured Person** means the person(s) named in the Schedule, whose name specifically appears as such in Schedule to this Policy.
34. **Intensive care unit** means an identified section, ward or wing of a hospital which is under the constant supervision of a dedicated medical practitioner(s), and which is specially equipped for the continuous monitoring and treatment of patients who are in a critical condition, or require life support facilities and where the level of care and supervision is considerably more sophisticated and intensive than in the ordinary and other wards.
35. **ICU (Intensive Care Unit) Charges** means the amount charged by a Hospital towards ICU expenses which shall include the expenses for ICU bed, general medical support services provided to any ICU patient including monitoring devices, critical care nursing and intensivists charges.
36. **Medical Advice** means any consultation or advice from a Medical Practitioner including the issuance of any prescription or follow-up prescription.
37. **Medical expenses** means those expenses that an Insured Person has necessarily and actually incurred for medical treatment on account of **Illness** or **Accident** on the advice of a Medical Practitioner, as long as these are no more than would have been payable if the Insured Person had not been insured and no more than other hospitals or doctors in the same locality would have charged for the same medical

treatment.

38. **Medical Practitioner** means a person who holds a valid registration from the Medical Council of any State or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within its scope and jurisdiction of license. The registered practitioner should not be the insured or close Family members.
39. **Medically Necessary Treatment** means any treatment, tests, medication, or stay in hospital or part of a stay in hospital which:
- is required for the medical management of the illness or injury suffered by the insured;
 - must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration, or intensity;
 - must have been prescribed by a medical practitioner;
 - must conform to the professional standards widely accepted in international medical practice or by the medical community in India.
40. **Modes of Transport** shall mean travel by any means by Air, Water, Rail, Road for the purpose of transporting/commuting from one place to another by common carrier or private vehicle.
In case of travelling through common carrier, insured should have to pay a fare for availing such means for transportation.
Insured is also covered as a pedestrian during trip as per the plan opted.
41. **Multi Trip** shall mean and include one or more Single Trips during the Policy Period.
42. **Nominee** is the person selected by the policyholder to receive the benefit in case of death of the insured thus giving a valid discharge to the insurer on settlement of claim under an insurance policy.
43. **Notification of claim** means the process of intimating a claim to the insurer or TPA through any of the recognized modes of communication.
44. **Permanent Total Disablement** means disablement which entirely prevents an Insured Person from attending to any Business or Occupation of any and every kind and which lasts 12 months and at the expiry of that period is beyond hope of improvement at the end of that period.
45. **Permanent Partial Disablement** means a Medical Practitioner certified total and continuous loss or impairment of a body part or sensory organ specified as per Table of events.
46. **Policy** means the complete documents consisting of the Proposal, Policy wording, Schedule and Endorsements and attachments if any.
47. **Policy Period**
- Policy Period with reference to the Annual Multi trip policy, shall mean the period from the start of Insurance cover to the end of insurance cover or actual trip duration, whichever is less. The maximum number of travel days per trip will be for 30 days.
 - Policy Period with reference to the Single trip policy shall mean the period from start of Insurance cover to the end of the insurance cover or actual trip duration, whichever is less. In Single Trip policy, multiple trips are not covered.
 - Policy Period with reference to Daily Commuters plan, shall mean the period from the start of Insurance cover to the end of insurance cover and will include all the trips taken by the insured.
48. **Post-hospitalization Medical Expenses**
Medical Expenses incurred immediately after the Insured Person is discharged from the hospital provided that:
- Such Medical Expenses are incurred for the same condition for which the Insured Person's Hospitalization was required and
 - The inpatient hospitalization claim for such Hospitalization is admissible by the Insurance company.
49. **Pre-Existing Disease** means any condition, ailment or injury or related condition(s) for which there were signs or symptoms, and / or were diagnosed, and / or for which medical advice / treatment was received within 48 months prior to the first policy issued by the insurer and renewed continuously thereafter.
50. **Pre-hospitalization Medical Expenses**
Medical Expenses incurred immediately before the Insured Person is hospitalized, provided that:
- Such Medical Expenses are incurred for the same condition for which the Insured Person's Hospitalization was required, and
 - The In-patient Hospitalization claim for such Hospitalization is admissible by the Insurance Company.
51. **Professional Sports** means a sport which is the primary livelihood earning of the player.
52. **Proposal form** means a form to be filled in by the prospect in written or electronic or any other format as approved by the Authority, for furnishing all material information as required by the insurer in respect of a risk, in order to enable the insurer to take informed decision in the context of underwriting the risk, and in the event of acceptance of the risk, to determine the rates, advantages, terms and conditions of the cover to be granted.
53. **Qualified nurse** means a person who holds a valid registration from the Nursing Council of India or the Nursing Council of any state in India.
54. **Reasonable and Customary charges** means the charges for services or supplies, which are the standard charges for the specific provider and consistent with the prevailing charges in the geographical area for identical or similar services, taking into account the nature of the illness / injury involved.
55. **Room Rent** mean the amount charged by a hospital for the occupancy of a bed on a per day (24 hours) basis and shall include associated medical expenses.
56. **Scheduled Airline** means any civilian aircraft operated by a civilian scheduled air carrier holding a certificate, license or similar authorization for civilian scheduled air carrier transport issued by the country of the aircraft's registry, and which in accordance therewith flies, maintains and publishes tariffs for regular passenger service between named cities at regular and specified times, on regular or chartered flights operated by such carrier.
57. **Service Provider/Third party administrator (TPA)** means persons, organization named in the Schedule who have been appointed by Us

to provide administrative services on Our Behalf and at Our direction to the Insured in accordance with the terms of this Policy.

58. **Subrogation** mean the right of the insurer to assume the rights of the insured person to recover expenses paid out under the policy that may be recovered from any other source.
59. **Sum Insured** means the amount which is Our maximum liability, either on aggregate basis or per trip basis, as specified in the Schedule of Benefits.
60. **Surgery or Surgical Procedure** means manual and / or operative procedure (s) required for treatment of an illness or injury, correction of deformities and defects, diagnosis and cure of diseases, relief from suffering and prolongation of life, performed in a hospital or day care centre by a medical practitioner.
61. **Strike** means a stoppage of work
- announced, organized and sanctioned by a labor union and
 - which interferes with the normal departure and arrival of a Common Carrier. Included in the definition of Strike is work slowdowns, lockouts and sickouts.
62. **Trip** means any Insured Journey during the Insured Period:
- In case of Business Plan/ Vacation Plan, trip starts and ends in the usual Town of Residence and involves a destination(s) outside the Municipal limits of the Usual Town of Residence.
 - In case of Daily commuters Plan, the cover shall include all the trips taken by the insured and is travelling outside the Usual Place of Residence.
The cover under Business Plan/ Vacation Plan/ Daily commuters Plan will not be applicable at insured's home.
63. **Valuables** means:
- gold or silver or any precious metals or articles made from any precious metals;
 - watches or Jewellery or Precious Stones or models or coins or curios, sculptures,
 - manuscripts, stamps, collections of stamps, rare books, medals, moulds, designs or any other collectibles;
 - deeds, ATM cards, credit cards, charge cards, bonds, bills of exchange, bank, treasury or promissory notes, cheques, money, securities, or any other negotiable instrument;
64. **We, Our, Us**, Insurer means Future Generali India Insurance Company Limited.
65. **You, Your, Yourself** means the Insured Person shown in the Schedule

B. SCOPE OF COVER

The cover is applicable while the Insured person is on trip in India.

The covers under Business Plan/ Vacation Plan/ Daily commuters Plan will not be applicable at insured's home.

The limits for each cover are either available on aggregate basis for entire policy period or on per trip basis, as specified in the Schedule of Benefits.

1. ACCIDENTAL DEATH

We shall pay the Insured Person the amount specified in the Policy Schedule if insured sustains Accidental Bodily Injury during the course of his/her Trip within the **Policy Period** which, results in his/ her Accidental Death.

We will pay the percentage of the Sum Insured shown in the table below:

Event	Percentage of Sum Insured
Accidental Death	100%

On the acceptance of a claim under this Benefit, this cover shall immediately and automatically cease in respect of that Insured Person.

2. PERMANENT TOTAL DISABILITY

If the Insured Person suffers an Injury due to an Accident that occurs during the Trip within the **Policy Period** and the Injury solely and directly results in permanent total disability then **We** agree to pay the percentage of the **Sum Insured** shown in the Table of Events below and as specified in the **Schedule**.

Event	Percentage of Sum Insured
Permanent total loss of sight of both eyes	100%
Permanent total loss of sight of one eye and physical separation of or the loss of ability to use either one hand or one foot	100%
Permanent total loss and physical separation of or the loss of ability to use both hands or both feet	100%
Permanent total loss and physical separation of or the loss of ability to use one hand and one foot	100%

On the acceptance of a claim under this Benefit, this cover shall immediately and automatically cease in respect of that Insured Person.

Specific exclusion applicable to Permanent Total Disability:

In addition to General Exclusions listed in this Policy, **We** shall not be liable to make any payment under this policy in connection with or in respect of any expenses whatsoever incurred by you in connection with or respect of:

- Any existing disablement prior to inception of policy

3. PERMANENT PARTIAL DISABILITY

If the Insured Person suffers an Injury due to an Accident that occurs during the Trip within the **Policy Period** and the Injury solely and directly results in permanent partial disability then **We** agree to pay the percentage of the **Sum Insured** shown in the Table of Events below and as specified in the **Schedule**. The Table of Events below sets out the events which constitute 'Permanent Partial Disablement'.

Special Conditions

a) Burns

If during the Trip within the **Policy Period**, the Insured Person sustains Injury which results in Second Degree Burns or Third Degree Burns, then We agree to pay the percentage of the Sum Insured shown in the Table of Events below and as specified in the Schedule.

- i. Rule of nine - A system used by Medical Practitioners for assessing the percentage of the body surface affected by Burns. In this system, the head and each arm cover 9% of the body; the front of the body and the back of the body and each leg covers 18% of the body. The groin covers the remaining 1%.
- ii. Second Degree Burns - Burns which penetrate beyond the epidermis, causing formation of blisters.
- iii. Third Degree Burns – There must be third-degree burns with scarring that cover at least 20% of the body's surface area. The diagnosis must confirm the total area involved using standardized, clinically accepted, body surface area charts covering 20% of the body surface area.

We will pay the percentage of the Sum Insured shown in the table below:

Event	Percentage of Sum Insured
Permanent Partial Disablement:	As Follows
An arm at the shoulder joint	75%
An arm above the elbow joint	70%
A hand at the wrist	50%
An arm beneath the elbow joint	60%
A thumb	25%
An index Finger	10%
Any other Finger	5%
A leg above mid-thigh	75%
A leg up to mid-thigh	60%
A leg up to beneath the knee	50%
A leg up to mid-calf	45%
A foot at the ankle	40%
A large Toe	5%
Any other Toe	2%
Permanent loss of sight of one eye	50%
Hearing of one ear	25%
Hearing of both ears	75%
Sense of smell	10%
Sense of taste	5%
Shortening of leg by at least 5%	7%
Burns as calculated on Rule of nine for each area of body affected	As Follows
Burns at least 18% of the body surface area.	30% of Sum Insured
Burns at least 27% of the body surface area.	50% of Sum Insured
Burns at least 45% of the body surface area.	100% of Sum Insured

If the Permanent Partial Disablement event not listed above, then the disability percentage certified by the Government Civil Surgeon would be considered under this section.

If there is more than one Permanent Partial Disablement due to an Injury, the claim amount payable for all such losses put together should not exceed the Sum Insured as opted by the Insured Person under this section.

Specific exclusion applicable to Permanent Partial Disability:

In addition to General Exclusions listed in this Policy, We shall not be liable to make any payment under this policy in connection with or in respect of any expenses whatsoever incurred by you in connection with or respect of:

- i. Any existing disablement prior to inception of policy

4. ACCIDENTAL HOSPITALIZATION EXPENSES -

If the Insured Person suffers an Injury due to an Accident that occurs during the Trip falling within the Policy Period, and he/she is Hospitalized for a minimum period of 24 hours on the advice of a Medical Practitioner, the Company will reimburse the In-patient Treatment- Medical Expenses for the below listed items up to the Sum Insured stated in the Policy Schedule, subject otherwise to all other terms, conditions and exclusions of the Policy.

- Room rent, boarding expenses
- Nursing
- Intensive care unit
- Consultation fees
- Anesthesia, blood, oxygen, operation theatre charges, surgical appliances
- Medicines, drugs and consumables,
- Diagnostic procedures,
- The Cost of prosthetic and other devices or equipment if implanted internally during a Surgical Procedure.
- Physiotherapy expenses as recommended by the treating Doctor

Specific exclusion applicable to Accidental Hospitalization Expenses Cover:

In addition to General Exclusions listed in this Policy, We shall not be liable to make any payment under this policy in connection with or in respect of any expenses whatsoever incurred by you in connection with or respect of:

- i. Pre-hospitalization Medical Expenses and Post-hospitalisation Medical Expenses are not covered.
- ii. AYUSH are not covered.
- iii. Any stay in Hospital for an Injury due to Accident without undertaking any treatment.
- iv. Any Hospitalization due to an Accidental Injury where the treatment is undertaken by a family member and self-medication or any treatment that is not scientifically recognized.
- v. Vaccination and inoculation of any kind unless forming part of treatment for Injury due to an Accident as prescribed by the Medical Practitioner.
- vi. Vitamins and tonics unless forming part of treatment for Injury due to an Accident as prescribed by the Medical Practitioner.
- vii. Aesthetic treatment, cosmetic surgery and plastic surgery unless necessitated due to Accident or as a part of any Injury.
- viii. Treatment taken from persons not registered as Medical Practitioners under respective Medical Councils. .

- ix. Any other medical or surgical treatment except as may be necessary solely as a result of Injury.
- x. Any treatment taken outside India.
- xi. Dental treatment or surgery of any kind unless as a result of Accidental Bodily Injury to natural teeth and also requiring hospitalization.
- xii. Experimental, unproven or non-standard treatment.
- xiii. Mental or nervous disorder, anxiety, stress or depression.
- xiv. Any existing disablement prior to inception of policy

5. BAG INSURANCE

We will reimburse the actual loss up to the limits specified in the schedule of benefits incurred in relation to the permanent and total loss of the Passport &/or Driving Licence, Sunglasses, Credit card, Laptop and Mobile Phone (up to 3 year age only) due to theft or robbery when in the bag, during the Trip within the Policy **Period** provided that:

- a) The Insured Person provides Us with an Invoice for any item lost.
In case Mobile Phone and Laptop is on the Company's name, a letter will be required from the company that the same is issued in the employees name
- b) The Insured Person provides Us with a certified copy of the police report filed
- c) We will reimburse only those losses occurring due to Theft and Robbery and no mysterious disappearance of the listed Items.
- d) Amount payable for Laptop and Mobile Phone under this benefit shall be adjusted for depreciation as per the percentage specified below unless provided to the contrary within the Certificate of Insurance.

Age of the Equipment	Depreciation % (on Invoice Value)
Not exceeding 1 year	30%
Exceeding 1 year but not exceeding 2 years	60%
Exceeding 2 years but not exceeding 3 years	80%

Exclusion specific to Bag Insurance –

In addition to General Exclusions listed in this Policy, We shall not be liable to make any payment under this policy in connection with or in respect of any expenses whatsoever incurred by you in connection with or respect of:

- a) Any loss or destruction which will be paid or refunded by a Common Carrier, hotel, agent or any other provider of travel and/or accommodation
- b) Any loss of stored data or re-creation of such stored data
- c) Any damage of Laptop and/ or Mobile Phone caused due to the Insured Person's fault
- d) Any actual or alleged loss or destruction arising from detention, confiscation or distribution by customs, police or other public authorities
- e) Loss caused by any faults or defects in Laptop and/ or Mobile Phone existing at the time of commencement of the present Insurance within the knowledge of the Insured, or his representatives, whether such faults or defects were known to the Company or not
- f) Theft from No Parking Zone
- g) Theft from unattended vehicle after an accident

6. HOME INSURANCE

6. 1. FIRE AND ALLIED PERIL (CONTENTS)

We will reimburse the actual loss up to the limits specified in the schedule of benefits in the event of loss of or damage to contents on First Loss Basis of the insured's home in India located at the address mentioned in the policy schedule caused by the perils mentioned below during the **Trip** within the **Policy period**.

PERILS:-

- 1) **Fire:** Excluding destruction or damage caused to the property insured by:
 - a) i) Its own fermentation, natural heating or spontaneous combustion. ii) Its undergoing any heating or drying process.
 - b) Burning of property insured by order of any Public Authority.
- 2) **Lightning.**
- 3) **Explosion/implosion:** Excluding loss, destruction of or damage:
 - a) to boilers (other than domestic boilers), economisers or other vessels, machinery or apparatus (in which steam is generated) or their contents resulting from their own explosion/implosion,
 - b) caused by centrifugal forces.
- 4) **Aircraft Damage:** Loss, Destruction or damage caused by Aircraft, other aerial or space devices and articles dropped there from excluding those caused by pressure waves.
- 5) **Riot, Strike, Malicious and Terrorism Damage:** Loss of or visible physical damage or destruction by external violent means directly caused to the property insured but excluding those caused by:
 - a) total or partial cessation of work or the retardation or interruption or cessation of any process or operations or omissions of any kind.
 - b) Permanent or temporary dispossession resulting from confiscation, commandeering, requisition or destruction by order of the Government or any lawfully constituted Authority.
 - c) Permanent or temporary dispossession of any building or plant or unit or machinery resulting from the unlawful occupation by any person of such building or plant or unit or machinery or prevention of access to the same.
 - d) Burglary, housebreaking, theft, larceny or any such attempt or any omission of any kind of any person (whether or not such act is committed in the course of a disturbance of public peace) in any malicious act.
- 6) **Storm, Cyclone, Typhoon, Tempest, Hurricane, Tornado, Flood and Inundation:** Loss destruction or damage directly caused by storm, cyclone, typhoon, tempest, hurricane, flood or inundation excluding those resulting from volcanic eruption or other convulsions of nature.
- 7) **Impact Damage:** Loss of or visible physical damage or destruction caused to the property insured due to impact by any Rail/ Road vehicle or animal by direct contact
 - a) not belonging to or owned by:
 - b) the Insured or any occupier of the premises or their employees while acting in the course of their employment.
- 8) **Subsidence and Landslide including Rock slide:** Loss, destruction or damage directly caused by Subsidence of part of the site on which the property stands or Land slide/Rock slide excluding:
 - a) the normal cracking, settlement or bedding down of new structures
 - b) the settlement or movement of made up ground
 - c) coastal or river erosion

- d) defective design or workmanship or use of defective materials
- e) demolition, construction, structural alterations or repair of any property or groundwork or excavations
- 9) **Bursting and/or overflowing of Water Tanks, Apparatus and Pipes.**
- 10) **Missile Testing operations.**
- 11) **Leakage from Automatic Sprinkler Installations, excluding loss, destruction or damage caused by**
 - a) Repairs or alterations to the buildings or premises
 - b) Repairs, Removal or Extension of the Sprinkler Installation
 - c) Defects in construction known to the Insured.
- 12) **Bush Fire**, excluding loss, destruction or damage caused by Forest Fire.
- 13) **Earthquake – Fire and Shock**
- 14) We will also reimburse **You** in respect of the accidental loss of or damage to **Contents** not insured elsewhere whilst temporarily removed from the **Insured Premises** and in transit as accompanied baggage anywhere in India to other premises to be used by **You** or **Your Family** as a temporary residence, or to other premises where **You** shall have placed any **Contents** for the purposes of safe custody during the course of his temporary absence from the **Insured Premises**, provided that:

Such absence does not exceed 120 days in the aggregate in any one Policy Period, and **Our** liability in respect of removed **Contents** shall not exceed 10% of the **Sum Insured** hereunder.

We shall not be liable for 5% of the claim amount for each and every claim arising out of Act of God perils (Lightning, Storm, Flood, Tempest, Inundation and the like, Subsidence, Landslide and Rockslide, Earthquake).

Special Condition: Average: If the value of the **Contents** hereby insured shall at the time of any insured event be of greater value than the **Sum Insured** thereon, then **You** shall be considered **Your** own insurer of the difference and shall bear a rateable proportion of the loss or damage. Every item, if more than one, shall be separately subject to this Special Condition. However, if the **Sum Insured** at the time of an insured event not less than 85% (eighty five percent) of the value of the **Contents**, this condition shall be of no purpose and effect.

6. 2. BURGLARY (HOME CONTENTS)

We will reimburse for the claim made in respect of loss of or damage to contents of your home in India located at the address mentioned in the policy schedule caused by actual or attempted Burglary and/or Robbery during the **Trip** within the **Policy period**.

The cover will be applicable during the Trip within the Policy Period as mentioned in the schedule and ends on the expiry date of the policy or date of return, whichever is earlier as mentioned in the schedule.

Our liability will be limited to the Sum Insured specified in the schedule.

Specific condition

- a. Insured should intimate the company within 48 hours of the Burglary and/or Robbery incident.

Specific Exclusion Applicable to Home Burglary Insurance:

In addition to General Exclusions listed in this Policy, We shall not be liable to make any payment under this policy in connection with or in respect of any expenses whatsoever incurred by you in connection with or respect of:

- a) Loss or damage caused by the Insured and/ or the Insured's employee(s) or agents and/or the Insured's family members direct or indirect involvement in the actual or attempted burglary.
- b) Any loss or damage to, or on account of loss livestock, motor vehicles, pedal cycles, money, securities for money, stamp, bullion, deeds, bonds, bills of exchange, promissory notes, stock or share certificates, business books, manuscripts, documents of any kind, ATM debit card or credit cards, precious stones that are not part of jewellery or ornaments, gold bullion.
- c) Loss or damage to any property/item illegally acquired, kept, stored or which has been forfeited in any manner whatsoever.

Basis of Loss Settlement

- a) Where the **Contents** can reasonably be repaired or reinstated at a cost less than the replacement cost then **We** will indemnify **You** in respect of the expenses necessarily incurred to restore the aforementioned to its state immediately prior to the happening of the actual or attempted **Burglary**.
- b) In the case of a total loss, we shall indemnify you in respect of the restoration or replacement cost. We shall not be bound to reinstate or restore exactly or completely, but only as permitted by the circumstances and in a reasonably sufficient manner and to the state that existed immediately prior to the happening of the **Burglary**.
- c) If the value of the **Contents** hereby insured shall at the time of any insured event be collectively of greater value than the **Sum Insured** thereon then **You** shall be considered **Your** own insurer of the difference and shall bear a rateable proportion of the loss or damage. Every item, if more than one, shall be separately subject to this Condition.

Specific Exclusion Applicable for Fire and Burglary sections

No indemnity is available hereunder and no payment will be made by **Us** for any claim directly or indirectly caused by, based on, arising out of or howsoever attributable to any of the following:

- 1) Loss or damage whether direct or indirect arising from War, Warlike operations, Act of Foreign Enemy, Hostilities (whether war be declared or not), Civil war, rebellion, Insurrection, Civil Commotion, Military or Usurped Power, Seizure, Capture, confiscation, Arrests Restraints and Detainment by the order of any Government or any other authority. In any action suit or other proceedings where the Company alleges that by reason of the above provisions any loss or damage is not covered by this insurance, the burden of proving that such loss or damage is covered, shall be upon the Insured.
- 2) Loss or damage caused by depreciation or wear and tear.
- 3) Consequential loss of any kind or description.
- 4) Loss or damage directly or indirectly caused by or arising from or in consequence of or contributed to nuclear weapons material by or arising from or in consequence of or contributed to by ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel (including any self-sustaining process of nuclear fission).
- 5) Terrorism Damage Exclusion Warranty: Notwithstanding any provision to the contrary within this insurance it is agreed that this insurance excludes loss, damage cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any act of terrorism regardless of any other cause or event contributing concurrently or in any other sequence to the loss.

For the purpose of this warranty an act of terrorism means an act, including but not limited to the use of force or violence and/ or the threat thereof, of any person or group(s) of persons whether acting alone or on behalf of or in connection with any organisation(s) or government(s), committed for political, religious, ideological or similar purpose including the intention to influence any government and/or to put the public, or any section of the public in fear.

The warranty 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.

If the Company alleges that by reason of this Exclusion, any loss, damage, cost or expenses is not covered by this insurance the burden of proving the contrary shall be upon the Insured.

7. TRIP CANCELLATION - (applicable for travel through Train and Flight only) –

We will reimburse the insured, non-refundable expenses incurred by the Insured subject to the amount specified in the Schedule on travel tickets, hotel bookings and scheduled tour bookings if the Insured's trip prior to its start is cancelled due to following:

- i. Death of insured or his/her family member up to 7 days prior to the trip start date
- ii. Serious injury or sudden sickness resulting in hospitalization of insured or his/her family member up to 2 days prior to the trip start date.
- iii. Inclement Weather conditions like Storm, flood, Hurricanes, or Natural Disaster on the trip start date at the place of origin of travel or the place of destination.

For the purpose of this Section Family means Spouse, Children, Parents, Parents in Law, Grand Parents, Brothers, Sisters residing with the Insured at the address stated in the Schedule.

Specific Exclusion Applicable To Trip Cancellation

In addition to General Exclusions listed in this Policy, We shall not be liable to make any payment under this policy in connection with or in respect of any expenses whatsoever incurred by you in connection with or respect of:

- a. Any trip which is cancelled as a result of the insured or any other person with whom he/she have arranged to travel with failing to check-in in time as required by the airline or report in time at the place of departure of the common carrier due to which the Insured is unable to undertake the trip .
- b. Any trip cancellation caused by strike or industrial action known to exist or was anticipated at the time the trip was booked

8. TRIP CURTAILMENT - (applicable for travel through Train and Flight only) –

We will reimburse the insured, the non-refundable expenses incurred by the Insured subject to the amount specified in the Schedule on travel tickets, hotel bookings and scheduled tour bookings if the Insured's trip within the Policy Period is curtailed due to any of the following:

- a. The aircraft which the Insured boarded as a passenger is hijacked.
- b. Death of the Insured's spouse, parents, parent in laws or child residing with Insured and is not travelling during the Trip.
- c. Serious injury or sudden sickness of Insured's spouse, parents, parent in laws or child residing with the Insured and is not travelling with the Insured during the Trip, leading to Emergency Hospitalization in any Critical Care Units of Hospital.
- d. Due to natural disaster which has prevented the Insured from continuing with the scheduled trip not known to exist or in public knowledge, prior booking of trip.
- e. Due to unexpected strike, riot or Civil commotion at place of visit other than the Insured's hometown which leads to the curtailment of the trip.
- f. Sickness or accidental Injury of the Insured or Insured's Traveling Companion warranting minimum 48 hours of hospitalization at any place other than Insured's hometown resulting in the curtailment of the trip under medical advice of the attending Physician.
- g. Death of the Insured or Insured's Traveling Companion at any place other than Insured's hometown resulting in the curtailment of the trip.

For the purpose of this Cover Travelling Companion shall be a Family Member and shall include Spouse, Children, Parents, Parents in Law, Grand Parents, and siblings.

Specific Conditions:

- a. This coverage is effective if the incident occurs within the Policy Period mentioned in the Policy Schedule and only if the Insured was unaware of any circumstances that could lead to disruption of his/her trip at the time of purchasing this policy.

Subject otherwise to all the other terms, conditions, limitations and exceptions of the Policy.

9. TRIP DELAY - (applicable for travel through Train and Flight only) –

We will reimburse the additional expenses incurred by the Insured subject to the amount specified in the Schedule on food expenses, accommodation expenses and toiletries, if the aircraft or Scheduled Railway on which Insured have booked to travel within India is delayed beyond 6 hours than the original scheduled departure time during the policy period due to the following perils:

- a. Delay of a Scheduled Aircraft or Scheduled Railway caused by Inclement Weather; or
- b. Delay due to a Strike or other job action by employees of Aircraft or Scheduled Railway scheduled to be used by the Insured during his/her Trip ; or
- c. Delay caused by Equipment Failure of a Scheduled Aircraft or Railway's equipment.
- d. Delay caused if the Scheduled Aircraft or Railway is taken out of service due to technical reasons on the instructions of the civil aviation authority or Railway's authority.

Subject otherwise to all the other terms, conditions, limitations and exceptions of the Policy.

Specific Exclusion Applicable to Trip Delay:

In addition to General Exclusions listed in this Policy, We shall not be liable to make any payment under this policy in connection with or in respect of any expenses whatsoever incurred by Insured in connection with or respect of:

- a. Any delay due to an insured peril which was made public or known to the Insured prior to the purchase of this Policy.
- b. For any delayed departure caused by strike or industrial action known to exist or was anticipated at the time the trip was booked.

- c. Where the alternative arrangements for either the food or the accommodation is provided by the Airline or Railway Authority as the case may be, with exception of any expenses incurred by the insured, related to this benefit, if receipts of the same are submitted in original.

10. MISSED CONNECTIONS - (applicable for travel through Train and Flight only)

We will reimburse the cost of alternate travel arrangements expenses so that the Insured can reach his/her destination, if the Common Carrier (Train or Flight) on which the Insured is travelling or scheduled to travel is delayed or cancelled for a period beyond 12 consecutive hours which results in the Insured missing the connecting Common Carrier (Train or Flight) on which the Insured is scheduled to travel during the Policy Period.

The cover will be limited up to the amount as specified in the Schedule or the original cost of booked tickets, whichever is less.

The Common Carrier must certify the period and the reason for the delay in writing.

The missed connection should have occurred due to the following reasons:

- i. Delay of a Scheduled Aircraft or train caused by Inclement Weather; or
- ii. Delay due to a Strike or other job action by employees of Airlines or railways scheduled to be used by the Insured during his/her Trip; or
- iii. Delay caused by Equipment Failure of a Scheduled Aircraft or train including derailment of train.
- iv. Delay caused if the Scheduled Aircraft or train is taken out of service due to technical reasons on the instructions of the civil aviation authority or railway authority or similar authority.
- v. Delay of scheduled aircraft or train caused by an act of terrorism

Exclusion specific to Missed Connection

In addition to General Exclusions listed in this Policy, We shall not be liable to make any payment under this policy in connection with or in respect of any expenses whatsoever incurred by you in connection with or respect of:

- a) Any missed connection due to above reasons which was made public or known to the Insured prior to the purchase of this Policy.
- b) For any missed connection as a result of the insured or any other person who have arranged to travel with failing to check-in in time as required by the airlines or report in time at the place of departure of the common carrier
- c) For any missed connection caused by strike or industrial action known to exist or was anticipated at the time the trip was booked

11. LOSS OF CHECKED IN BAGGAGE - (applicable for travel through Flight only)

If the Insured's Checked-in Baggage is completely and permanently lost or destroyed during the Policy Period, then We will (at Our option) either reimburse the Insured for the cost of replacement of the entire Checked-in Baggage and its contents or replace/reinstate the Checked-in Baggage subject to the limits specified in the schedule provided that:

- a) The Common Carrier certifies in writing that the Insured's Checked-in Baggage has been completely and permanently lost or destroyed;
- b) A copy of the Property Irregularity Report (or its equivalent) is provided to Us;
- c) If more than one piece of the Insured's Checked-in Baggage is completely and permanently lost/destroyed, the maximum amount payable by Us for each piece of lost/destroyed Checked-in Baggage shall not exceed 50% of the amount specified in the Schedule;
- d) Our maximum liability in respect of any single article lost/destroyed in the Insured Check-in Baggage shall be limited to 10% or 20% of the amount stated in the Schedule.
- e) The Company's payment to the Insured will be reduced by any sum for which the Airline is liable to make payment.

Specific Exclusion Applicable to Loss Of Checked Baggage

- a) Loss pertaining to Valuables and money, all kinds of securities and tickets/passes
- b) Loss of any part of any item contained within the Checked-in Baggage.
- c) Loss of the Insured's baggage sent in advance or souvenirs and articles mailed or shipped separately.
- d) The Hand baggage / cabin baggage stored in the cabin hold is specifically excluded from the policy coverage.

12. BOUNCED HOTEL AND FLIGHT –

We will reimburse the actual additional expenses / cost incurred by the Insured up to the Sum Insured specified in the Policy Schedule for alternative travel arrangements with a Common Carrier or for alternative accommodation in the event that the confirmed flight reservation or confirmed accommodation booking at the place of stay being part of the Trip is bounced. Provided that

- a) Our liability shall be in relation to the travel covered by such confirmed booking and in relation to accommodation in the same place of stay
- b) Our liability to such additional expenses shall be in relation to the same class of travel and same category of accommodation as the case may be covered by the original confirmed bookings.

Conditions specific to Bounced Hotel and Flight

- a) Insured shall try to recover from the airline and accommodation provider the consequential loss incurred by the Insured by way of additional expenses for alternative travel arrangement or alternative accommodation arrangement.
- b) Any recovery towards additional expenses incurred for alternative travel or accommodation arrangement effected from the Common Carrier or accommodation provider as the case may be, if any, effected from the concerned agencies after settlement of the claim under the policy shall be paid to the Company to the extent of the amount of claim admitted and paid by the Company to the Insured.

Exclusions specific to bounced hotel and flight:

In addition to General Exclusions listed in this Policy, We shall not be liable to make any payment under this policy in connection with or in respect of any expenses whatsoever incurred by you in connection with or respect of:

- a) If the Insured shall fail to adhere to the rules of the airline or the accommodation provider in connection with reconfirmation of the booking before the date of travel or occupation as the case may be
- b) In connection with any waitlisted travel booking or accommodation booking irrespective of whether such bookings have been promised to be confirmed later
- c) If the confirmed accommodation shall be a personal arrangement free of charge
- d) Where the alternative arrangements for either the travel or the accommodation is provided by the Airline or the Hotel as the case may be within 6 hours from the time of departure of the Bounced Flight or the commencement of stay is covered by the earlier confirmed Hotel booking.

13. EMERGENCY HOTEL EXTENSION -

We will reimburse to the insured up to the limits specified in the schedule of benefits for the cost of emergency hotel extension of the Insured and his/her family members during the trip within the policy period under the following circumstances:

- a. The Insured and his family members are unable to travel on the Scheduled Date of Departure from the destination place to the place of origin as the insured or his family member has sustained an accidental injury during the policy period which requires hospitalization due to which the date of departure from the destination place to the place of origin has been postponed to another date.
- b. The expenses payable under this clause will be the reasonable expenses incurred towards the cost of Hotel accommodation of the insured and his family members only when the hospitalisation is more than 7 consecutive days.

Our liability will be limited to maximum of 5 days of hotel extension, over and above the deductible, maximum up to the Sum Insured, specified in the policy schedule.

For the purpose of this Section, family member shall mean parents, spouse and children.

Specific Conditions

- a. It is agreed and declared that this benefit shall be extended only if the Insured or his family member is hospitalized due to accidental bodily injury during the trip.
- b. The Company's Liability in respect of this cover shall be limited to the actual expenses of Hotel accommodation or the Sum Insured mentioned in the Policy Schedule, whichever is less.

14. MEDICAL EVACUATION AND REPATRIATION OF MORTAL REMAINS

Medical Evacuation

We will reimburse the Reasonable and Customary Charges incurred up to the limit specified in the Schedule for the Insured's evacuation in an Emergency due to an Injury or Illness suffered by the insured during the course of his/her Trip within the **Policy Period**:

- a) The Medical Practitioner treating the Insured certifies in writing that the Insured is required to be transported to a different location for:
 - i. Medically Necessary Treatment which is not available at the location from where the Insured is being evacuated; or
 - ii. Further medical treatment.
- b) We will be liable to indemnify only those Reasonable and Customary Charges incurred on transportation of the Insured and medical services and medical supplies that are required to be rendered to the Insured during the transportation.
- c) We will reimburse expenses for transportation of the Insured Person and Medical Expenses incurred during the course of evacuation provided that it is Medically Necessary that treatment is provided to the Insured Person en route.
- d) Our Service Provider authorizes in writing in advance and arranges the conveyance for transporting the Insured.

Repatriation of mortal remains

We will also reimburse the Reasonable and Customary Charges incurred up to the limit specified in the Schedule for repatriating the mortal remains of the Insured to his/her Usual place of residence within India during the Policy Period or for the Insured's burial in the place of death following the Insured's death due to an Injury or Illness suffered during the course of his/her Trip within the **Policy Period** provided that Our Service Provider authorizes the repatriation/burial in writing in advance and arranges the conveyance for repatriation (if applicable).

C. GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS

We shall not be liable to make any payment under any Section of this Policy directly or indirectly for, caused by, based upon, arising out of or howsoever attributable to any of the following:

1. Claim arising out of any illness except in case of Medical Evacuation and Repatriation of mortal remains.
2. **Accident** while insured is at his/her home.
3. Intentional self-**Injury** (including but not limited to the use or misuse of any intoxicating drugs or alcohol).
4. **Accident** while under the influence of alcohol or drugs.
5. Participation in an actual or attempted felony, riot, crime, misdemeanor or civil commotion.
6. Any **Accident** of which a contributing cause was the **Insured Person's** actual or attempted commission of, or willful participation in, an illegal act or any violation or attempted violation of the law or his resistance to arrest.
7. Whilst engaging in aviation or whilst mounting in to, dismounting from or traveling in any aircraft other than as passenger (fare paying or otherwise) in any duly licensed standard type of aircraft.
8. Accident while participating in vehicle racing or trial run as a driver, co-driver or passenger.
9. Curative treatments or interventions that the **Insured Person** carries out or have carried out on his body.
10. Pregnancy and childbirth, miscarriage, abortion or complications arising out of any of these.
11. War, invasion, acts of foreign enemies, hostilities (whether war be declared or not), civil war, commotion unrest, rebellion, revolution, insurrection, military or usurped power or confiscation or nationalization or requisition of or damage or under the order of any government or public authority.
12. Nuclear energy, radiation.
13. Whilst engaging in hazardous activity.
14. Whilst engaging in Adventure Sports. This exclusion shall not be applicable for Accidental Death, Permanent Total Disablement, Medical evacuation or repatriation of mortal remains arising due to Adventure Sports in Vacation Plan.
15. Any **Medical Expenses**, services, supplies or treatment or **Hospital** stay which were not recommended or approved as **Medically Necessary Treatment** by a **Medical Practitioner**.
16. Any expense incurred which is not exclusively medical in nature/ **Unproven/ Experimental treatment** of any description
17. Expenses incurred for emergency medical evacuation except in Business Plan and Vacation Plan.
18. Any claim caused by osteoporosis (porosity and brittleness of the bones due to loss of protein from the bones matrix) or pathological fracture (any fracture in an area where there is weakening of the bone) or chronic degenerative diseases.
19. Expenses incurred on neck belts, wrist bandages, walking sticks, abdomen belts, CPAP and any other similar external aid /devices, the use of which has been necessitated following an accident.
20. Bodily Injury caused by or arising from terrorism, except in case where the policy holder is a victim of terrorist act and not abetting terrorism
21. Any claim relating to events occurring before the commencement of the Policy Period or after the completion of the Policy Period.
22. Any claim relating to events occurring beyond the maximum duration of trip as specified in the schedule.
23. Non-allopathic medicine.
24. Cosmetic surgery and plastic surgery.
25. In so far as it relates to, the Insured:
 - a) travelling against the advice of a Medical Practitioner;

- b) taking part in a naval, military or air force operation;
- 26. Medical Expenses relating to any hospitalization primarily and specifically for diagnostic, X-ray or laboratory examinations and investigations.
- 27. Standard list of excluded items as mentioned in our website <https://general.futuregenerali.in>.
- 28. Treatment taken in any hospital or by any Provider that We have blacklisted, as mentioned in our website <https://general.futuregenerali.in/general-insurance/network-hospitals>. However, this exclusion will not apply in case of emergency hospitalisation, subject to verification of claim.

D. CONDITIONS

1. Condition Precedent to the contract

i. Reasonable Care

The Insured person shall take all reasonable steps to safeguard against any accident or injury that may give rise to any claim under this policy.

Reasonable Care applicable to Fire and Burglary Cover

You shall:

- a) take all reasonable steps to safeguard the **Contents** against any insured event;
- b) take all reasonable steps to prevent a claim from arising under this **Policy**;
- c) ensure that any security system or aid is maintained in accordance with any maintenance schedule or recommendations of the manufacturer or if none then as may be required, and kept in good and effective working condition;
- d) when the **Insured Premises** are left unattended ensure that all means of entry to or exit from the **Insured Premises** have been properly and safely secured and any security system or aid has been properly deployed.

ii. Age Limit (Entry age)

To be eligible to be covered under the Policy or get any benefits under the Policy, the minimum age of entry is 18 years and the maximum age of entry is 65 years, on the date of commencement of the Policy Period, as applicable to such Insured.

In vacation plan, the family can be covered on individual sum insured basis.

Child can be covered from 3 years to 25 years as a **Dependent Child** in vacation plan.

iii. Incontestability and Duty of Disclosure

The policy shall be null and void and no benefit shall be payable in the event of untrue or incorrect statements, misrepresentation, misdescription, non-cooperation or on non-disclosure in any material particular in the proposal form, personal statement, declaration and connected documents, or any material information having been withheld, or a claim being fraudulent or any fraudulent means or devices being used by the Insured or any one acting on his behalf to obtain any benefit under this policy.

iv. Entire Contract

The **Policy** and the Proposal form constitutes the complete contract of insurance. No change or alteration shall be valid or effective unless approved in writing by **Us**, for which approval shall be evidenced by an endorsement on the **Schedule**

v. Due Observance applicable to Fire and Burglary Cover

The due observance of and compliance with the terms, provisions, warranties and conditions of this **Policy** insofar as they relate to anything to be done or complied with by **You** and/or **Your Family** shall be a condition precedent to any liability of **Us** under this **Policy**.

vi. Notification of Changes

It is a condition precedent to Our liability to make any payment under this Policy that You shall give Us written notice immediately of any change in the address, state of health and any other changes affecting You or any Insured Person.

2. Conditions applicable during the contract

i. Addition and Deletion of members

- a. The new members of the Shubh Yatra – Group can be added at periodic intervals. However the insurance coverage for every member of the Group shall not exceed the maximum policy term.
- b. The Company may issue multiple group insurance policies in tranches to the Group Organizer, subject to minimum group size and maximum policy term, for providing insurance coverage to the new members on an ongoing basis.
- c. All members of the group will be issued a Certificate of Insurance giving the details of the benefits, important conditions and exclusions.

ii. Communications

Every notice of communication to be given or made under this policy shall be delivered in writing at the address as shown in the schedule.

iii. Dispute Resolution

- a. Any dispute regarding the claim amount, liability otherwise being admitted, are to be referred to arbitration under the Arbitration & Conciliation Act 1996. The law of the arbitration shall be Indian law and the seat of the arbitration and venue for all the hearings shall be within India.
- b. If these arbitration provisions are held to be invalid, then all such disputes or differences shall be referred to the exclusive jurisdiction of the Indian courts.

iv. Territorial limit

- a. All covers under this policy are restricted to within India only.
- b. The admissible claims thereof shall be payable within India and in Indian currency (Indian Rupees) only.

v. Contribution (In case of Multiple Policies)

(Applicable only to health indemnity sections under the Policy)

- a. If two or more policies are taken by an insured during a period from one or more insurers to indemnify treatment costs, the policyholder shall have the right to require a settlement of his/her claim in terms of any of his/her policies.
- b. In all such cases the insurer who has issued the chosen policy shall be obliged to settle the claim as long as the claim is within the limits of and according to the terms of the chosen policy.

- c. The policyholder having multiple policies shall also have the right to prefer claims from other policy/ policies for the amounts disallowed under the earlier chosen policy/ policies, even if the sum insured is not exhausted. Then the Insurer(s) shall settle the claim subject to the terms and conditions of the other policy / policies so chosen.
- d. If the amount to be claimed exceeds the sum insured under a single policy after considering the deductibles or co-pay, the policyholder shall have the right to choose insurers from whom he/she wants to claim the balance amount.
- e. Where an insured has policies from more than one insurer to cover the same risk on indemnity basis, the insured shall only be indemnified the hospitalization costs in accordance with the terms and conditions of the chosen policy.

vi. **Subrogation**

(Applicable only to indemnity sections under the Policy)

The Insured and any claimant under this Policy, shall at Our expense do or concur in doing or permit to be done all such acts and things that may be necessary or reasonably required by Us for the purpose of enforcing any rights and remedies or obtaining relief or indemnity from other parties to which We shall be or would become entitled or subrogated upon Us paying for or making good any loss or damage under this Policy whether such acts and things shall be or become necessary or required before or after the Insured's indemnification by Us.

vii. **Maintenance of Sum Insured** (Applicable only to Home Insurance – Fire and Allied Perils and Burglary sections under the Policy)

Insured agree that the Sum Insured reflects and shall be maintained at a level representing the replacement value of any property insured under this Policy.

viii. **Cancellation/termination:**

- a. Cancellation will not be invoked by the Company except on ground of fraud, moral hazard or misrepresentation or non-cooperation by the Insured.
- b. **We** may cancel this insurance by giving **You** at least 15 days written notice, and if no claim has been made then **We** shall refund a pro-rata premium for the unexpired **Policy** Period
- c. **You** may cancel this insurance by giving **Us** at least 15 days written notice.
- d. Policies taken for short period duration of less than 12 months can be cancelled prior to start date of the policy. It cannot be cancelled after the start date. Upon cancellation, the Company shall deduct 10% of the premium amount received as administration charges and refund the balance amount.
- e. Annual policies, may be cancelled any time by the Insured by giving 15 days' notice to the company in which case the insured would be entitled for refund of premium on short period basis as per the following scale:

Period in Risk	Premium refunded
Within 15 Days	Pro Rate Refund
Exceeding 15 days up to 2 months	70.00%
Exceeding 2 months up to 4 months	55.00%
Exceeding 4 months up to 6 months	40.00%
Exceeding 6 months up to 8 months	25.00%
Exceeding 8 months up to 10 months	10.00%
Exceeding 10 months up to 12 months	0.00%

If any claim has been made then no refund will be given for cancellation of policy

ix. **Duties and Obligations after Occurrence of an Insured Event**

It is a condition precedent to **Our** liability under this **Policy** that, upon the happening of any event giving rise to or likely to give rise to a claim under this **Policy**:

- a) **You** shall immediately and in any event within 14 days give written notice of the same to the address shown in the **Schedule** for this purpose, and in case of notification of an event likely to give rise to a claim to specify the grounds for such belief, and
- b) In respect of Home Insurance, Section B. 6 of the policy, immediately lodge a complaint with the police detailing the items lost and/or damaged and in respect of which **You** intend to claim, and provide a copy of that written complaint, the First Information Report and/or Final Report to **Us**, and
- c) **You** shall within 28 days deliver to **Us** its completed claim form detailing the loss or damage that has occurred and an estimate of the quantum of any claim along with all documentation required to support and substantiate the amount sought from **Us**, and
- d) **You** shall expeditiously provide **Us** and its representatives and appointees with all the information, assistance, records and documentation that they might reasonably require, and
- e) **You** shall not admit liability or settle or make or promise any payment in respect of any claim which may be the subject of indemnity hereunder, or incur any costs or expenses in connection therewith, without the written consent of **Us** which shall be entitled to take over and conduct in the name of **You** the defence and/or settlement of any such claim, for which purpose **You** shall give all the information and assistance that **We** may reasonably require.

E. CLAIMS

i. **Claim procedure:**

i. **Reimbursement Claim Procedure of All Sections**

If the Insured Person meets with any Accidental Bodily Injury that may result in a claim, then as a condition precedent to our liability:

- a. Policyholder or the Insured Person or someone claiming on his/her behalf must inform us in writing immediately and in any event within 30 days from the date of the accident and submit all documents to us within 30 days from the date of intimation.
- b. Insured Person must immediately consult a Doctor and follow the advice and treatment that he recommends.
- c. Insured Person must take reasonable steps to lessen the consequence of Bodily injury.
- d. Insured Person should allow examination by our medical advisors if we ask for this.
- e. Policyholder or Insured Person or someone claiming on his/her behalf must promptly give us documentation and other information we ask for to investigate the claim or our obligation to make payment for it.
- f. In case of the Insured Person's death, someone claiming on his/her behalf must inform us in writing immediately and send us a copy of the post mortem report (if conducted) within 30 days.

*Note: Waiver of conditions (a) and (f) may be considered in extreme cases of hardship where it is proved to Our satisfaction that under the circumstances in which the Insured Person was placed, it was not possible for the Insured Person or any other person claiming on his/her behalf to give notice or file claim within the prescribed time limit.

List of Claim documents:

- a) Along with the claim documents required for specific covers, the following documents will also be called for to ascertain the mode of travel:
- In case of travel through common carrier
 - Tickets
 - Taxi bills
 - In case of travel through private car
 - Toll receipts
 - Petrol bills
 - In case of travel through Other modes (e.g. two wheelers)
 - Petrol bills

b) **List of Claim documents for specific covers:**

List of Claim documents for Death

- Duly Completed Claim Form signed by Nominee of the Insured Person.
- Copy of address proof (Ration card or electricity bill copy).
- Attested copy of Death Certificate.
- Burial Certificate (wherever applicable).
- Attested copy of Statement of Witness, if any lodged with police authorities.
- Attested copy of FIR / Panchanama / Inquest Panchanama.
- Attested copy of Post Mortem Report (only if conducted).
- Attested copy of Viscera report if any (Only if Post Mortem is conducted).
- NEFT details & cancelled cheque of the Nominee/Claimant
- Original Policy copy

List of Claim documents for Permanent Total Disability

- Duly Completed Claim Form signed by Insured Person.
- Attested copy of disability certificate from Civil Surgeon of Government Hospital stating percentage of disability.
- Attested copy of FIR. (If required)
- All X-Ray / Investigation reports and films supporting to disability.
- NEFT details & cancelled cheque of Insured Person.
- Original Policy copy.

List of Claim Documents Specific for Accidental Hospitalization Expenses

- First Consultation letter from the Doctor
- Duly completed claim form signed by the Claimant
- Hospital Discharge Card
- Hospital Bill giving detailed break up of all expense heads mentioned in the bill. Clear break ups have to be mentioned for OT Charges, Doctor's Consultation and Visit Charges, OT Consumables, Transfusions, Room Rent, etc.
- Proof of Payment to hospital.
- All original Laboratory and Diagnostic Test Reports. E.g. X-Ray, E.C.G, USG, MRI Scan, Haemogram etc.
- Photocopy of MLC or FIR (if any)

List of Claim Documents Specific to Trip Cancellation/ Trip Curtailment

- Claim Form (to be filled and signed by insured)
- Hospitalization discharge summary/consultation papers of insured/family members (if applicable)
- All bills and payment receipts towards cancellation of ticket, hotel bookings, scheduled tour bookings.
- NEFT form and Cancelled cheque stating insured's / Claimant Indian Bank account details.
- Death certificate in case of death if applicable

List of Claim Documents Specific to Emergency Hotel Extension

- Documents proving the reasons for the Extension of hotel stay
- Receipt showing amount paid for extension of hotel stay.
- Duly Completed Claim Form signed by Insured Person
- Hospitalization discharge summary/consultation papers of insured/family members (if applicable)
- NEFT form and Cancelled cheque stating insured's / Claimant Indian Bank account details.
- Original Policy copy

List of Claim Documents Specific to Missed Connection

- Claim Form (to be filled and signed by insured)
- Letter from the airlines/railways stating reason for delay and duration of delay.
- Ticket Itinerary
- All the bills/receipts of alternate travel arrangement expenses incurred.
- NEFT form and Cancelled cheque stating insured's / Claimant Indian Bank account details

List of Claim Documents Specific to Home Burglary Insurance

- Claim Form (to be filled and signed by insured)
- Covering Letter detailing full statement of the facts of the incidence of theft.
- First Information Report, Panchnama, Investigation Report by the police
- Details of local investigation and survey of loss in case carried out by insured.
- Details of any insurance covering same loss
- Estimate and final bills of repairers
- In case the Claim exceeding Rs.7500/- or other currency equivalent per article must be supported by documentation evidencing the Insured's ownership of the same.
- Legal opinion, wherever required
- NEFT form and Cancelled cheque stating insured's / Claimant Indian Bank account details
- Any other document as may be appropriately applicable for the claims preferred under this section of the Policy.

List of Claim Documents Specific to Bag Insurance

- Claim Form (to be filled and signed by insured)
- First Information Report

List of Claim Documents Specific to Bounced Hotel and Flight

- Claim Form (to be filled and signed by insured)
- Proof of confirmed hotel and flight booking details
- Letter from Hotel mentioning reason for non-accommodation and compensation received if any
- Letter from Airport Authority mentioning reason for non-availability of the confirmed flight reservation and compensation received if any
- Bills/invoices and receipt raised against the accommodation or transportation
- NEFT form and Cancelled cheque stating insured's / Claimant Indian Bank account details

List of Claim Documents Specific to Loss of Checked in Baggage

- Claim Form (to be filled and signed by insured), detailing the loss or damage that has occurred
- Proof of ownership of items contained within checked-in baggage.
- "Property Irregularity Report" (to be obtained from the airline authorities)
- Letter from the airlines accepting the liability for loss
- Proof of compensation received from airlines
- Proof of items valued more than 50% of the Sum Insured per Baggage.
- Bills and invoices etc required to support and substantiate the claim amount
- A letter from the airline need to be submitted stating the compensation received from them for the lost baggage
- NEFT form and Cancelled cheque stating insured's / Claimant Indian Bank account details
- Any other document deemed necessary to establish the loss or its quantum depending upon the nature of claim.

List of Claim Documents Specific to Trip Delay

- Claim Form (to be filled and signed by insured)
- All bills/ receipts of reasonable additional expenses for food, accommodation and toiletries incurred should be also be attached with the claim form.
- Airport/common carrier authority report confirming the incident causing Trip Delay.
- NEFT form and Cancelled cheque stating insured's / Claimant Indian Bank account details.
- Details of letter stating the alternative arrangements for either the food or the accommodation provided by the Airline or Railway Authority as the case may be

List of Claim Documents Specific to Medical Evacuation and Repatriation of the mortal remains

- Duly completed claim form signed by the insured/ claimant
- Photocopy of Death certificate and a Medical Practitioner's statement giving the cause of death needs to be submitted. Medical statements from relatives or spouses will not be accepted.
- A medical statement from an attending Medical Practitioner indicating the details along with the cause of illness/ accidental injury and the necessity of the transportation of Insured and treatment given en route. Medical statements from relatives or spouses will not be accepted.
- Original bills/receipts of the expenses incurred. These would be paid as per the Reasonable and Customary charges incurred for the same.
- Authorisation letter from the Service Provider.

c) All the other document(s) as may be required by the Company to process the claim.

ii. Paying a Claim

- a. Sum Insured specified for a particular section is the amount which is Our maximum liability, either on aggregate basis or per trip basis as mentioned in the Schedule of Benefits.
- b. You agree that We shall only make payment when You or someone claiming on Your behalf has provided Us with necessary documentation and information.
- c. We will make payment to You or Your Nominee. If there is no Nominee and You are incapacitated or deceased, We will pay Your heir, executor or validly appointed legal representative and any payment We make in this way will be a complete and final discharge of Our liability to make payment.
- d. On receipt of all the documents and on being satisfied with regard to the admissibility of the claim as per policy terms and conditions, we shall offer within a period of 30 days settlement of the claim to the insured. Upon acceptance of an offer of settlement by the insured, the payment of the amount due shall be made within 7 days from the date of acceptance of the offer by the insured. In the cases of delay in the payment, the insurer shall be liable to pay interest at a rate which is 2% above the bank rate prevalent at the beginning of the financial year in which the claim is reviewed by it.
- e. If We, for any reasons decide to reject the claim under the policy the reasons regarding the rejection shall be communicated to You in writing within 30 days of the receipt of documents. You may take recourse to the Grievance Redressal procedure stated under the Policy.

iii. Obligations of the Insured:

1. The Insured shall provide the Service Provider on demand of any information that is required to determine the occurrence of the insurable event or circumstances warranting Our liability to pay the benefits under the Policy. In particular, upon request, proof shall be furnished of the actual commencement date of the Policy Period.
2. We shall be released from any obligation to pay insurance benefits if any of the aforementioned obligations are breached by the Insured.

iv. Transfer and Set off of Claims

Claims to the insurance benefits may be neither pledged nor transferred by the Insured.

F. SCHEDULE OF BENEFITS

		Daily Commuters Plan			Business Plan		Vacations Plan	
		Option 1	Option 2	Option 3	Option 1	Option 2	Option 1	Option 2
Policy Period		Annual basis			a) Annual Multi Trip – Each trip not more than 30 days b) Single Trip (multiple trips are not covered)– 1-7 days, 8-15 days		a) Annual Multi Trip – Each trip of not more than 30 days b) Single Trip (multiple trips are not covered) – 1-7 days, 8-15 days, 16-30 days	
Accidental Death*		₹ 500000	₹ 1000000	₹ 2000000	₹ 1000000	₹ 2500000	₹ 1000000	₹ 2000000
Permanent Total Disability*		₹ 500000	₹ 1000000	₹ 2000000	₹ 1000000	₹ 2500000	₹ 1000000	₹ 2000000
Permanent Partial Disability*		₹ 500000	₹ 1000000	₹ 2000000	₹ 1000000	₹ 2500000	₹ 1000000	₹ 2000000
Accidental Hospitalization*		₹ 50000	₹ 75000	₹ 100000	₹ 100000	₹ 200000	₹ 100000	₹ 200000
Home Insurance* a) Fire and Allied Peril b) Burglary		₹ 200000	₹ 350000	₹ 500000	₹ 200000	₹ 400000	₹ 200000	₹ 400000
Bag Insurance*	Laptop	₹ 25000	₹ 40000	₹ 60000	Not Available	Not Available	Not Available	Not Available
	Mobile Phone	₹ 15000	₹ 25000	₹ 50000	Not Available	Not Available	Not Available	Not Available
	ID Proof	₹ 800	₹ 1200	₹ 2000	Not Available	Not Available	Not Available	Not Available
	Sun Glasses	₹ 1000	₹ 1500	₹ 2500	Not Available	Not Available	Not Available	Not Available
	Credit Card Cover	₹ 15000	₹ 25000	₹ 50000	Not Available	Not Available	Not Available	Not Available
Trip Cancellation*		Not Available	Not Available	Not Available	up to ₹ 100000	up to ₹ 150000	up to ₹ 100000	up to ₹ 150000
Trip Curtailment**		Not Available	Not Available	Not Available	₹ 15000	₹ 25000	₹ 15000	₹ 20000
Trip Delay**		Not Available	Not Available	Not Available	₹ 7500 Deductible : 6 Hours	₹ 12500 Deductible : 6 Hours	₹ 7500 Deductible: 6 Hours	₹ 10000 Deductible : 6 Hours
Missed connections**		Not Available	Not Available	Not Available	Train: up to ₹ 3000 Flight: up to ₹ 5000	Train: up to ₹ 5000 Flight: up to ₹ 7500	Train: up to ₹ 3000 Flight: up to ₹ 5000	Train: up to ₹ 3000 Flight: up to ₹ 5000
Loss of Checked in baggage**		Not Available	Not Available	Not Available	Up to ₹ 10000 one item within one piece of baggage = 10% of the SI More than one item of baggage, then maximum reimbursement for all items within one piece of baggage = 50% of the SI	Up to ₹ 15000 one item within one piece of baggage = 20% of the SI More than one item of baggage, then maximum reimbursement for all items within one piece of baggage = 50% of the SI	Up to ₹ 10000 one item within one piece of baggage = 10% of the SI More than one item of baggage, then maximum reimbursement for all items within one piece of baggage = 50% of the SI	Up to ₹ 15000 one item within one piece of baggage = 20% of the SI More than one item of baggage, then maximum reimbursement for all items within one piece of baggage = 50% of the SI
Bounced Hotel and Flight**		Not Available	Not Available	Not Available	Up to ₹ 10000	Up to ₹ 20000	Up to ₹ 15000	Up to ₹ 20000
Emergency Hotel Extension**		Not Available	Not Available	Not Available	If hospitalisation is more than 7 consecutive days Actual Room price for Max of 5 Days, max up to ₹ 20000. Deductible - 2 days	If hospitalisation is more than 7 consecutive days Actual Room price for Max of 5 Days, max up to ₹ 20000. Deductible - 2 days	If hospitalisation is more than 7 consecutive days Actual Room price for Max of 5 Days, max up to ₹ 25000. Deductible - 2 days	If hospitalisation is more than 7 consecutive days Actual Room price for Max of 5 Days, max up to ₹ 25000. Deductible - 2 days
Medical Evacuation and Repatriation of Remains*		Not Available	Not Available	Not Available	Up to ₹ 200000	Up to ₹ 200000	Up to ₹ 200000	Up to ₹ 300000
Adventure Sports*		Not Covered	Not Covered	Not Covered	Not Covered	Not Covered	Covered, only in case of Accidental Death, Permanent Total Disablement, Medical evacuation or repatriation of mortal remains	Covered, only in case of Accidental Death, Permanent Total Disablement, Medical evacuation or repatriation of mortal remains
Assistance Services**	Private Car Break Down	Available	Available	Available	Available	Available	Available	Available
	Taxi Breakdown	Not Available	Not Available	Not Available	Available	Available	Available	Available
	Ambulance Assistance	Not Available	Not Available	Not Available	Available	Available	Available	Available
	Concierge services	Not Available	Not Available	Not Available	Available	Available	Available	Available
	Medical Evacuation and Repatriation of Remains	Not Available	Not Available	Not Available	Available	Available	Available	Available

Period of policy would be as per the “Days of Travel” opted for.

* - the limits available are on aggregate basis for entire policy period

- the limits available are on per trip basis

In case of any claims contact

Claims Department

Future Generali Health (FGH)

Future Generali India Insurance Co. Ltd.

Office No. 3, 3rd Floor, "A" Building, G - O – Square

S. No. 249 & 250, Aundh Hinjewadi Link Road, Wakad, Pune - 411 057.

Toll Free Number: 1800 103 8889

Toll Free Fax: 1800 103 9998

Email: fgi@futuregenerali.in

In order to avail of the services related to Road-Side Assistance services, the Insured should ring up the following toll-free number and provide the details asked for. **1800-220-233, 1860-500-3333, 022-67837800**

Annexure Assistance Services

1. ASSISTANCE SERVICES

Assistance service will be provided as per the plan opted and mentioned in the Schedule. Our Service Provider will assist the insured in providing the following services during the trip within policy period. However the cost of service will be borne by the insured.

A. Assistance available in case of Private Car Breakdown/Accident

The Company will provide the following services in case the insured is travelling through private car.:

- i. **Towing due to Breakdown/Accident:** In the event, that the insured is immobilized on a public road due to breakdown or accident of the insured's vehicle, the Service Provider shall
 - a) Arrange for towing of the insured's vehicle to the nearest Company's Authorized Repair shop/Garage.
 - b) Provide for custody and storage of the insured's vehicle until the Repair shop/Garage re-open, if such Repair shop/Garage being closed due to holidays or night hours.

Exclusions specific to Towing due to Breakdown/Accident:

- a) Cost of towing beyond 50 kilometres from the spot of such accident of the insured's vehicle.
 - b) Any payment to a third-party for towing/storage/recovery by the Insured or on his behalf, unless specifically agreed by the Company.
- ii. **Flat Tyre:** In the event, that the insured's vehicle is immobilized on a public road due to a flat tyre caused by puncture of or damage to the tyre /tube/valve or bolts of the tyre, the Company shall arrange for an automobile technician to attend to the insured's vehicle on the spot of such event to replace the flat tyre with the spare tyre carried in the insured's vehicle

Exclusions specific to Flat Tyre

- a) Cost of parts or replacement elements or consumables and their transportation cost to the site of immobilization due to flat tyre in case repairs are carried out on spot of immobilization.
 - b) Entire cost of Tyre Repair shop/Garage's bill, and their transportation cost to and from the site of immobilization if the flat tyre had to be taken to any Tyre Repair shop/Garage for repairs.
- iii. **Dead Battery:** In the event, that the engine of the insured's vehicle fails to start due to a dead battery, the Company shall arrange for an automobile technician to attend to the Insured's vehicle on the spot of such event, to help jump start the vehicle so that it can be driven on its own power on self-propelled basis to the nearest Repair Shop/Garage.

Exclusions specific to Dead Battery

- a) Cost of parts or replacement elements, consumables and recharging of battery and its/their transportation cost to and from the site of immobilization due to dead battery in case battery jump start could not be carried out on spot of immobilization.
 - b) Entire cost of replacement battery and its transportation cost to the site of immobilization if the dead battery had to be replaced by another.
- iv. **Keys Locked-In :** In the event, that the insured's vehicle is immobilized on a public road, due to loss of its keys, or its keys being either locked inside the vehicle or broken, resulting in a situation where the Insured is unable to gain entry into the insured's vehicle, the Company shall
 - a. Locate and retrieve duplicate set of keys under due authorization of the Insured to do so, and deliver such keys to the Insured or his authorized representative upon production of personal identification and authorization.
 - b. Arrange for an automobile technician to attend to the insured's vehicle on the spot of such event in order to attempt the opening of the vehicle door with normally available tools, if the Insured desires to attempt opening the vehicle, since retrieval of a duplicate set of keys would be time consuming.

Conditions specific to Key Locked-In – Personal Identification details of the Insured matching with the Policy and vehicle records shall be produced for verification by the automobile technician, before any such attempt to reopen the vehicle is undertaken.

- v. **Contamination/ Incorrect or Running Out of Fuel:** In the event that the insured's vehicle is immobilized on a public road at least one kilometer away from the nearest petrol pump, due to the insured's vehicle running out of fuel, or the fuel in the insured's vehicle being incorrect or contaminated, the Company will arrange for delivery/ replacing/ changing the fuel –as the case may be, up to a maximum of ten litres- on the spot where the insured's vehicle stands immobilized.

Exclusions specific to Contamination/ Incorrect or Running Out of Fuel

- a) This service is not available if the Fuel type of the insured's vehicle is other than Petrol or Diesel.
 - b) Actual cost of the Fuel.
- vi. **Continuation of Journey:** In the event that the insured's vehicle is immobilized on a public road, at least 50 Kilometers away from the address of the Insured as appearing in the Policy Schedule, and On-the-spot repairs fails to mobilize the vehicle on its own power on self-propulsion basis, and it has had to be towed away to a Repair shop/Garage for repairs, the Company shall make arrangement for an alternate hired car/ taxi with capacity to carry all the occupants of the immobilized vehicle (subject to the maximum of licensed carrying capacity of the insured's vehicle),for continuation of their onward journey or return home.

Exclusions specific to Continuation of Journey:

- a) The Car hire/ Taxi expense for the first 50 Kilometers.
 - b) Any Car hire/ Taxi expense incurred by the Insured, if the arrangement of hiring such vehicle is done on his/ her own, without prior consent of the Company.
- vii. **Local Travel when on Tour :** In the event that the insured's vehicle is immobilized at a place, at least 100 Kilometers away from the address of the Insured as appearing in the Policy Schedule, and the vehicle is in a Repair shop/Garage for repairs, the Company shall arrange for an alternate hired car on best availability basis in that area, for the period the vehicle is undergoing repairs in the Repair Shop/Garage but not exceeding 3 (three) days on 8(Eight) hours/ 80 (Eighty) kilometer basis, to provide for the local travel of the Insured.

Exclusions specific to Local Travel when on Tour

- a) The Car hire expense beyond the first 8 (Eight) hours/80 (Eighty) kilometers in a day.
 - b) Any Car hire expense incurred by the Insured, if the arrangement of hiring such vehicle is done on his/ her own, without prior consent of the Company.
- viii. **Overnight Accommodation Expense when on Tour:** In the event that the insured's vehicle is immobilized at a place, at least 100 Kilometers away from the address of the Insured as appearing in the Policy Schedule, On-the-spot repairs could not be carried out, the vehicle has had to be towed away to a Repair shop/Garage for repairs and the vehicle is not delivered back on the same day within close of business hours of the Repair shop/Garage, the Company shall arrange for hotel accommodation for the occupants of the vehicle (subject to the maximum of licensed carrying capacity of the insured's vehicle), for the period the vehicle is under repair in the Repair Shop/ Garage but not exceeding 3 (Three) days, subject to the following conditions:
- a. The hotel accommodation will be provided on twin sharing basis for all the occupants of the immobilized insured's vehicle subject to maximum of the licensed carrying capacity of the vehicle.
 - b. The cost of such accommodation will be subject to maximum of Rs 2500/- per person per night, but not exceeding Rs 25000/- per event.
 - c. This benefit will not be available, if the Insured is availing of the benefit of Local Travel when on Tour.
- ix. **Repatriation of Vehicle:** In the event that the insured's vehicle is immobilized at a place, at least 100 kilometers away from the address of the Insured as appearing in the Policy Schedule, On-the-spot repairs could not be carried out and had to be towed away to a Repair shop/Garage for repairs, and the repaired vehicle was delivered after 3(Three) days, the Company will Repatriate the repaired vehicle to the address of the Insured as appearing in the Policy Schedule.
- This benefit is also available to any insured's vehicle immobilized after an accident, at least 100 kilometers away from the address of the Insured as appearing in the Policy Schedule, and no Company's authorized Repair shop/Garage is available.

Exclusions specific to Repatriation of Vehicle

- a) Any Repatriation expense incurred by the Insured, without prior consent of the Company.
- x. **Medical Coordination:** In the event of the insured's vehicle meeting with an accident, and any of the occupants getting injured, the Company may provide for a conference call with nearest Medical Service Provider including an Ambulance service Providers.
- The cost of such service providers has however to be borne by the Insured. The Company shall however be in no way responsible for the quality of service rendered by such Service Providers
- xi. **Urgent Message Relay:** In case the insured's vehicle is immobilized at least 100 kilometers away from the address of the Insured as appearing in the Policy Schedule, the Company will provide an urgent message relay service to the Insured/ or person in lawful possession of the vehicle at the time of immobilization of the insured's vehicle to communicate with the family back home.

Conditions applicable:

1. Services under points vii, viii and ix i.e. Local Travel when on Tour, Overnight Accommodation Expense when on Tour and Repatriation of Vehicle can be arranged once during a single Policy period
2. Services under points vi, vii, viii, ix i.e. Continuation of Journey, Local Travel when on Tour, Overnight Accommodation Expense when on Tour and Repatriation of Vehicle can be arranged twice in aggregate during a single Policy period.
3. Notwithstanding anything mentioned above, the services under this cover will not be available outside the geographical limits of India, as well as under the following circumstances:
 - a. Confiscation/ Intervention by Legal Authorities: Any immobilization of the insured's vehicle due to or arising out of confiscation, intervention, commandeering, requisition, detention or destruction by order of any Government or lawfully constituted Authority.
 - b. Act of God Perils: Any immobilization of the insured's vehicle due to Natural catastrophe like Flood, Inundation, Storm, Tempest, Cyclone, Earthquake, Tsunami, Volcanic eruption, Landslide, rockslide or other convulsions of nature.
 - c. War/ Riot/ Terrorism : Any immobilization of the insured's vehicle during or as a consequence of war, invasion, act of foreign enemy, hostilities, civil war, rebellion, revolution, insurrection, military or usurped power, terrorism, riot, civil commotion or loot or pillage in connection with it.

Exclusions specific to Basic Roadside Assistance

- a) Confiscation/ Intervention by Legal Authority: Any immobilization of the insured's vehicle due to or arising out of confiscation, intervention, commandeering, requisition, detention or destruction by order of any Government or lawfully constituted Authority.
- b) Natural Catastrophe : Any immobilization of the insured's vehicle due to any Natural catastrophe like Flood, Storm, Tempest, Cyclone, Earthquake, Tsunami, Volcanic eruption. The service will also be not available if accessibility to the insured's vehicle is cut-off due to Inundation, Landslide, rockslide or other convulsions of nature.
- c) War/ Riot/ Terrorism : Any immobilization of the insured's vehicle during or as a consequence of war, invasion, act of foreign enemy, hostilities, civil war, rebellion, revolution, insurrection, military or usurped power, terrorism, riot, civil commotion or loot or pillage in connection with it.

B. Assistance available in case of Taxi breakdown:

If during the course of trip, within the policy period, the Taxi in which the Insured is travelling as a fare paying passenger is immobilized due to a breakdown or an accident, then Our Service provider will assist the Insured by arranging for an alternate mode of transport (Taxi) to continue the Trip to the destination or return to his/ her home.

C. Ambulance assistance:

If due to an accident or illness, during the course of trip within the policy period, the Insured requires an ambulance, then Our Service provider will assist the Customer by arranging for the same from the nearest hospital or service provider within India.

The service provider will only provide assistance to this service on best effort basis and does not take any kind of medico-legal liability.

D. Concierge services:

If during the course of trip, within the policy period, the insured requires the Concierge services, then Our service provider will provide assistance, coordinate and arrange for the below mentioned services through the appropriate service providers. The services are available in the selected locations (major cities within India) and will be provided on a best effort basis and are subject to availability of the appropriate services providers to render the services.

- i. **Flower & Gift Delivery & Arrangement Assistance** – Our service provider will assist the Insured by arranging for delivery of flowers, gifts to their family or business associates for special occasions like birthdays/anniversaries/festivals.
- ii. **Dining Referral and Reservation Assistance** – Our service provider will assist the Insured by providing the contact details of restaurants in major cities in India. If requested, the service provider will facilitate in making the reservation on behalf of the insured; recommending restaurants friendly to people with special needs (special dining).
- iii. **Movie Tickets/ Special Events and Performance Assistance** - Our service provider will assist the Insured in procuring tickets/passes for special events/performance within India. This will be done on a best-effort basis & tickets cannot be guaranteed in case of sold-out events and movies.
- iv. **Golf Course Referral and Reservation Assistance** - Our service provider will assist Insured in registration of a golf booking as per requirement of Insured in the city where the insured is travelling
- v. **Wellness Solutions - Spa's, Salon, Health Club** – Our service provider will assist the Insured by providing the contact details of Well Solutions in major cities in India. If requested, and whenever possible, the service provider will facilitate in making the reservation on behalf of the Insured ; recommending Wellness Centre in the city where the insured is travelling.
- vi. **Alternate Therapies: Yoga, Naturopathy, Meditation, Aroma** – Our service provider will assist the Insured by providing the contact details of Alternate Therapies in major cities in India. If requested, and whenever possible, the service provider will facilitate in making the reservation on behalf of the Insured in recommending Alternate Therapies Centre.
- vii. **Car Rental Services** – Our service provider can refer car rental providers in India

E. **MEDIAL EVACUATION AND REPATRIATION OF MORAL REMAINS:**

In case a medical situation necessitates a medical evacuation during the course of his/her Trip within the **Policy Period**, then our service provider will arrange an appropriate air and/or surface transportation for moving the Insured to a recommended hospital in the nearest metropolitan city where appropriate medical care would be available.

In case of death of the Insured while on Trip within the Policy Period, our service provider will arrange for repatriating the mortal remains of the Insured to his/her home City/place of residence within India. However the decision to repatriate, how and where and means of transportation adopted would be strictly on grounds of medical necessity and at the sole discretion of the Medical Director of our Service Provider.



ISO NO. : FGH/UW/GRP/100/02

Future Generali India Insurance Company Limited. IRDAI Regn. No. 132 | CIN: U66030MH2006PLC165287.

Regd. and Corp. Office: 801 and 802, 8th floor, Tower C, Embassy 247 Park, L.B.S. Marg, Vikhroli (W), Mumbai – 400083.
Call us at: 1800-220-233 | Fax No: 022 4097 6900 | Website: <https://general.futuregenerali.in> | Email: fgcare@futuregenerali.in. Trade Logo displayed above belongs to M/S Assicurazioni Generali - Societa Per Azioni and used by Future Generali India Insurance Co Ltd. under license.

Please contact our 24 hour Helpline Number **+91 22 67347841**. Failure to intimate your claim within 24 hours to our Assistance Company shall invalidate your claim.

Note:-

1. Issuance of the form does not imply acceptance of the liability or a waiver of terms, conditions & exclusions of policy.
2. Please attach all Originals bills, receipts, credit card slips or bank statement to your claim. (Mandatory)

1. Policy Number -	
2. Policy Start Date -	3. Policy End date -
Certificate Number -	
Please Indicate any other insurance coverage (In India/overseas) - Policy Number/s :	
Name of the Policyholder:	
4. Name of the Insured Person/Member	
5. (a) Name of the Claimant Person (in respect of whom the claim is made)	
(b) Relationship to the Insured -	(c) E-mail ID/s :-
(d) Contact Numbers -	
(e) Residential Address –	

Trip Details: -

Date of Departure: ___/___/___ Mode of Travel: _____ Flight/ Train No: _____
 From _____ To _____
 Date of Arrival: ___/___/___ Mode of Travel: _____ Flight/ Train No: _____ From _____
 _____ To _____

Claim in Respect of following section (please tick against the applicable claim type)

Accidental Death	<input type="checkbox"/>	Home Insurance	<input type="checkbox"/>	Missed connections	<input type="checkbox"/>
Permanent Total Disability	<input type="checkbox"/>	Bag Insurance	<input type="checkbox"/>	Loss of Checked in baggage	<input type="checkbox"/>
Permanent Partial Disability	<input type="checkbox"/>	Trip Cancellation	<input type="checkbox"/>	Bounced Hotel and Flight	<input type="checkbox"/>
Accidental Hospitalisation	<input type="checkbox"/>	Trip Curtailment	<input type="checkbox"/>	Emergency Hotel Extension	<input type="checkbox"/>
Emergency Evacuation and Repatriation of Remains	<input type="checkbox"/>	Trip Delay	<input type="checkbox"/>		<input type="checkbox"/>

ACCIDENTAL HOSPITALISATION/ EMERGENCY EVACUATION

Name of the Hospital: _____

Address of the Hospital: _____

Name of Treating Doctor and Contact details: _____

Details of accident & Treatment: _____

Date of First Symptom ___/___/___ please confirm if the illness was also treated in past (Pre-Existing): Yes No

Treatment / Hospitalization dates for any illness/disease in past: From ___/___/___ To ___/___/___

Treatment Details of Any illness ailment in past: _____

Name of medicines you are presently or routinely taking: _____

PAST HISTORY OF ANY CHRONIC ILLNESS WITH DURATION				
Disease / Ailment	Yes	No	Duration (Specify Years / Months / Days)	
Hypertension	Yes	No		
Hyperlipidemia	Yes	No		
Cancer	Yes	No		
Osteoarthritis	Yes	No		
Diabetes	Yes	No		
Cardiovascular Diseases	Yes	No		
Asthma / COPD / Bronchitis	Yes	No		
Congenital Internal / External	Yes	No		
Any HIV or STD/Related Ailments	Yes	No		
Alcohol or Drug Abuse	Yes	No		
Any Surgery / Hospitalization	Yes	No		
Any Other Disease / Disability	Yes	No		

Name of Family Physician: _____
 Email ID and contact details of Family Physician: _____
 Please provide reasons for Evacuation) _____

(PLEASE ATTACH TREATING DOCTOR'S OPINION FOR THE NECESSITY OF AN ATTENDANT/EVACUATION).

Evacuation Request From: - _____ to: - _____

Date of Medical Evacuation required: _____

REPATRIATION OF REMAINS

Medical Transportation from _____ to _____ Date of Death/ Medical Transportation: ___/___/___

ITEM NO	DETAILS OF EXPENSES INCURRED – UNDER MEDICAL EXPENSES	AMOUNT
TOTAL CLAIMED AMOUNT * Kindly specify this total claimed amount.		

LOSS OF BAGGAGE/ TRIP DELAY/ TRIP CURTAILMENT

Date & Time of actual arrival: ___/___/___ at ___ am/pm. Date & Time of scheduled arrival ___/___/___ at ___ am/pm,

Date & Time of Retrieval of Baggage ___/___/___ at ___ am/pm, Total Hours of Delay _____

Details of Incident i.e. how, when, where _____

Date on which baggage was lost: ___/___/___ Place where baggage/passport was lost _____

ITEM NO	DETAILS OF EXPENSES INCURRED – UNDER TRIP DELAY/ TRIP CURTAILMENT	AMOUNT
TOTAL CLAIMED AMOUNT * Kindly specify this total claimed amount.		

PERSONAL ACCIDENT

Claiming for Personal Accident resulting into **DEATH** / **DISABILITY** (exact details of Disability) _____

Date of Accident: _____ Place of Accident: _____ Claimed Amount: _____

Details & Circumstances of Accident i.e. how, when, where _____

Was the injured person under the influence of alcohol/drugs/medicines at the time of accident: NO / YES _____

Name of the Police Station informed about accident _____ Police Information (FIR) No _____

Name & Address of Hospital _____

Name & Address of Casualty Doctor _____

Name & address of Insured's Regular physician in India _____

Nominee Name, Address & Contact Details _____

(Please attach Attending Physician's Statement as per standard format)

AUTHORIZATION FOR TRANSFER OF CLAIM AMOUNT BY NATIONAL ELECTRONIC FUND TRANSFER

Please provide below mentioned details of **INSURED'S INDIAN BANK ACCOUNT** for NEFT payment.

Bank Name	
Branch Name & Address	Branch Phone No.
Name of Proposer (As per Bank A/c): Relation with Insured	
Account No. (as appearing in Cheque Book)	
Branch IFSC Code for NEFT	Branch MICR Code
Account Type : Savings <input type="checkbox"/> Current <input type="checkbox"/> Cash / Credit <input type="checkbox"/>	
Contact numbers in India: _____ ; Alternate Email ID: _____	
(Please attach a scanned image of a blank , duly cancelled cheque - of your bank)	

Declaration: - I hereby declare that the particulars given above are correct and complete. If any transaction is delayed or not effected at all for reasons of incomplete or incorrect information, I shall not hold Future Generali India Insurance Company Ltd. responsible. I also undertake to advise any change in the particulars of my account to facilitate updations of records for purpose of credit of claim amount through NEFT.

I/ We hereby authorize service provider, Insurance Company & its authorized representative to collect my Medical Records, Treatment Papers, Investigation Reports etc. from Treating Doctor/ Family Physician / Hospitals in India or Overseas.

I/ We hereby to the best of my/ our knowledge and belief, warrant the truth of the above details in every respect. I/ We agree that if we have already made or if I/ We make in any of my/ our further statements in respect of the said incident or any false or fraudulent declarations or suppress or conceal any material fact, the policy shall be void and all rights of compensation in respect to the presence or future shall be forfeited.

Place: _____

Signature of the claimant/ Insured

Date: _____

Name of the claimant/ Insured

HOW TO REACH US

You may please call us on the our India Landline number - +91 22 67347841 (This number is chargeable and accessible 24 X 7 X 365). You may also ask for a call back on this number and we will immediately call you back on your preferred number as provided during the call request.

National Toll Free number is 1800-209-2333.

Alternatively, you may also write to us at fgi@europ-assistance.in / fgi.travel@futuregenerali.in.



Future Generali India Insurance Company Limited

Regd. and Corp. Office: 801 and 802, 8th floor, Tower C, Embassy 247 Park, L.B.S. Marg, Vikhroli (W), Mumbai – 400083.
Call us at: 1800-220-233 / 1860-500-3333 / 022-67837800 | Fax No: 022 4097 6900. Website:
<https://general.futuregenerali.in> | Email: fgicare@futuregenerali.in IRDAI Regn. No. 132 | CIN: U66030MH2006PLC165287





Dear Customer,

At **Future Generali** we are committed to provide “**Exceptional Customer-Experience**” that you remember and return to fondly. We encourage you to read your policy & schedule carefully. We want to make sure the plan is working for you and welcome your feedback.

What Constitutes a Grievance?

A “Grievance/Complaint” is defined as any communication that expresses dissatisfaction about an action or lack of action, about the standard service/deficiency of service from Future Generali or its intermediary or asks for remedial action.

If you have a complaint or grievance you may reach us through the following avenues:


	Help-Lines	1800-220-233 1860-500-3333 022-67837800		E-mail	fgcare@futuregenerali.in
	GRO at each branch	Walk-in to any of our branches and request to meet the Grievance Redressal Officer (GRO)		Website	https://general.futuregenerali.in

What can I expect after logging a Grievance?

- **We** will acknowledge receipt of your concern within 3 business days
- Within 2 weeks of receiving your grievance, **We** shall revert to you the final resolution
- **We** shall regard the complaint as closed if **We** do not receive a reply within 8 weeks from the date of receipt of response

How do I escalate?

You can write directly to our **Customer Service Cell at our Head office:**

	Customer Service Cell	Customer Service Cell Future Generali India Insurance Company Ltd. Corporate & Registered Office: 801 and 802, 8th floor, Tower C, Embassy 247 Park, L.B.S. Marg, Vikhroli (W), Mumbai – 400083. <i>Please send your complaint in writing. You can use the complaint form, annexed with your policy. Kindly quote your policy number in all communication with us. This will help us to deal with the matter faster.</i>
---	------------------------------	---

What should I do, if I face difficulty in registering a grievance?

While we constantly endeavor to promptly register, acknowledge & resolve your grievance, if you feel that you are experiencing difficulty in registering your complaint, you may register your complaint through the **IRDAI (Insurance Regulatory and Development Authority of India)**

Call center: toll free number (155255).

Register your complaint online at: <http://www.igms.irda.gov.in/>

Grievances of Senior Citizens:

We have established a separate channel to address the grievances of Senior Citizens. The concerns will be addressed to the Senior Citizen’s channel for faster attention or speedy disposal of grievance, if any

Insurance Ombudsman:

If you are still not satisfied with the resolution to the complaint as provided by our **GRO**, you may approach the Insurance Ombudsman for a review. The Insurance Ombudsman is an organization that addresses grievances that are not settled to your satisfaction.

You may reach the nearest insurance ombudsman office. For ease of reference, the list of Insurance Ombudsmen offices is as mentioned below:

OFFICE OF THE OMBUDSMAN	CONTACT DETAILS	AREAS OF JURISDICTION
-------------------------	-----------------	-----------------------

AHMEDABAD	Office of the Insurance Ombudsman 2nd Floor, Ambica House, Nr. C.U.Shah College, 5, Navyug Colony, Ashram Road, AHMEDABAD - 380 014 Tel: 079-27546150/27546139 Fax: 079-27546142 E-mail: bimalokpal.ahmedabad@gbic.co.in	Gujarat, Dadra & Nagar Haveli, Daman and Diu
BENGALURU	Office of the Insurance Ombudsman Jeevan Soudha Building, PID No. 57-27-N-19 Ground Floor, 19/19, 24th Main Road, JP Nagar, Ist Phase, Bengaluru – 560 078. Tel.: 080 - 26652048 / 26652049 E-mail: bimalokpal.bengaluru@gbic.co.in	Karnataka
BHOPAL	Office of the Insurance Ombudsman Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp. Airtel, Near New Market, BHOPAL - 462 023 Tel: 0755-2569201/9202 Fax: 0755-2769203 E-mail: bimalokpal.bhopal@gbic.co.in	Madhya Pradesh, Chhattisgarh
BHUBANESHWAR	Office of the Insurance Ombudsman 62, Forest Park, BHUBANESHWAR - 751 009 Tel: 0674-2596461 Fax: 0674-2596429 E-mail: bimalokpal.bhubaneswar@gbic.co.in	Orissa
CHANDIGARH	Office of the Insurance Ombudsman S.C.O. No.101 - 103, 2nd Floor, Batra Building, Sector 17-D, CHANDIGARH - 160 017 Tel: 0172-2706196/2706468 Fax: 0172-2708274 E-mail: bimalokpal.chandigarh@gbic.co.in	Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir, Chandigarh
CHENNAI	Office of the Insurance Ombudsman Fatima Akhtar Court, 4th Floor, 453 (old 312), Anna Salai, Teynampet, CHENNAI - 600 018 Tel:044-24333668 /5284 Fax: 044-24333664 E-mail: bimalokpal.chennai@gbic.co.in	Tamilnadu, Pondicherry Town and Karaikal (which are part of Pondicherry)
DELHI	Office of the Insurance Ombudsman 2/2 A, Universal Insurance Bldg. Asaf Ali Road, NEW DELHI - 110 002 Tel: 011-23237539/23232481 Fax: 011-23230858 E-mail: bimalokpal.delhi@gbic.co.in	Delhi
GUWAHATI	Office of the Insurance Ombudsman Jeevan Nivesh, 5th floor Nr. Panbazar Overbridge, S.S. Road, GUWAHATI - 781 001 Tel:0361-2132204/5 Fax: 0361-2732937 E-mail: bimalokpal.guwahati@gbic.co.in	Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura
HYDERABAD	Office of the Insurance Ombudsman 6-2-46 , 1st Floor, Moin Court Lane, Opp. Saleem Function Palace, A.C.Guards, Lakdi-Ka-Pool, HYDERABAD - 500 004 Tel: 040-65504123/23312122 Fax: 040-23376599 E-mail: bimalokpal.hyderabad@gbic.co.in	Andhra Pradesh, Telangana, Yanam and part of Pondicherry
JAIPUR	Office of the Insurance Ombudsman Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel : 0141-2740363 E-mail: bimalokpal.jaipur@gbic.co.in	Rajasthan
ERNAKULAM	Office of the Insurance Ombudsman 2nd Floor, CC 27/2603, Pulinat Building, Opp. Cochin Shipyard, M.G. Road, ERNAKULAM - 682 015 Tel: 0484-2358759/2359338 Fax: 0484-2359336 E-mail: bimalokpal.ernakulam@gbic.co.in	Kerala, Lakshadweep, Mahe - a part of Pondicherry
KOLKATA	Office of the Insurance Ombudsman 4 th Floor, Hindusthan Bldg., Annexe, 4, C.R.Avenue, KOLKATA - 700 072 Tel: 033-22124346 / (40) Fax: 033-22124341 E-mail : bimalokpal.kolkata@gbic.co.in	West Bengal, Sikkim and UT of Andaman & Nicobar Islands

LUCKNOW	Office of the Insurance Ombudsman Jeevan Bhawan, Phase 2, 6th Floor, Nawal Kishore Road, Hazratganj, LUCKNOW - 226 001 Tel: 0522 -2231331/30 Fax: 0522-2231310 E-mail: bimalokpal.lucknow@gbic.co.in	Districts of U.P:- Laitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar
MUMBAI	Office of the Insurance Ombudsman Jeevan Seva Annexe, 3rd Floor, S.V.Road, Santacruz (W), MUMBAI - 400 054 Tel: 022-26106928/26106552 Fax: 022-26106052 E-mail: bimalokpal.mumbai@gbic.co.in	Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane
NOIDA	Office of the Insurance Ombudsman 4th Floor, Bhagwan Sahai Palace, Main Road, Naya Bans, Sector-15, NOIDA – 201301 Tel: 0120-2514250/51/53 E-mail: bimalokpal.noida@gbic.co.in	Uttaranchal and the following Districts of U.P:- Agra, Aligarh, Bagpet, Bareilly, Bijnor, Budaun, Bulandshehar, Etah , Kanooj, Mainpuri, Mathura , Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozabad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur
PATNA	Office of the Insurance Ombudsman 1st Floor, Kalpana Arcade Building, Bazar Samiti Road, Bahadurpur, PATNA – 800006 Tel: 0612-2680952 E-mail: bimalokpal.patna@gbic.co.in	Bihar, Jharkhand
PUNE	Office of the Insurance Ombudsman Jeevan Darshan Bldg., 3 rd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, PUNE – 411 030 Tel: 020-41312555 E-mail: bimalokpal.pune@gbic.co.in	Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region

The updated details of Insurance Ombudsman are available on IRDAI website: www.irdai.gov.in on the website of General Insurance Council: www.generalinsurancecouncil.org.in, our website <https://general.futuregenerali.in> or from any of our offices

Future Generali India Insurance Company Limited. IRDAI Regn. No. 132 | CIN: U66030MH2006PLC165287.
Regd. and Corp. Office: 801 and 802, 8th floor, Tower C, Embassy 247 Park, L.B.S. Marg, Vikhroli (W), Mumbai – 400083. Call us at: 1800-220-233 | Fax No: 022 4097 6900 | Website: <https://general.futuregenerali.in> | Email: fgcare@futuregenerali.in.

I want to submit a Request Complaint Suggestion / Feedback Appreciation

Policy Type Motor Health Personal Accident Other _____

Policy Details Request Policy No. Claim No. Cover Note Health Card Existing Service

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Customer Name _____

Address _____

City: _____ Pin code: _____ Telephone No. : _____ Mobile No. : _____

Detailed Description _____

Date

D	D	M	M	Y	Y	Y	Y
---	---	---	---	---	---	---	---

Customer's Signature

You may submit the form to the Nearest Branch Office or mail it to our Customer Service Cell at:
 Customer Service Cell | Future Generali India Insurance Company Ltd.
 Registered and Corporate Office: 801 and 802, 8th floor, Tower C, Embassy 247 Park, L.B.S. Marg, Vikhroli (W),
 Mumbai – 400083. Website: <https://general.futuregenerali.in> | Email: fgcare@futuregenerali.in | Call us at: 1800-220-233 / 1860-500-3333 / 022-67837800

For office use only

Service / Case #

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Comments: _____

