

## **Group Travel Secure - Policy wordings**

Tata AIG General Insurance Company Limited (We, Our or Us) will provide the insurance cover, described in this Policy and any endorsements thereto, for the Insured Period, as defined in the Policy schedule. The insurance cover provided under this Policy is only with respect to such and so many of the benefits upto the Sum Insured as mentioned in the Policy Schedule. Commencement of risk cover under the policy is subject to receipt of premium by us.

The statements contained in the Proposal signed by the Policyholder (You) shall be the basis of this Policy and are deemed to be incorporated herein. The insurance cover is governed by and subject to, the terms, conditions and exclusions of this Policy.

### **For Tata AIG General Insurance Company Limited**

#### **Authorized Signatory**

Registered Office:

TATA AIG General Insurance Company Limited,

Peninsula Business Park,

Tower A, 15th Floor, G. K. Marg,

Lower Parel, Mumbai- 400013, Maharashtra, India

Toll Free No. 1800 266 7780 or 1800 22 9966 (Senior Citizen)

Visit us at [www.tataaiginsurance.in](http://www.tataaiginsurance.in)

IRDA of India Registration No.:108,

CIN: U85110MH2000PLC128425

Insurance is the subject matter of the solicitation". For more details on risk factors, terms and conditions please read policy document carefully before concluding a sale.

## Preamble

We will pay the insured person the benefits as detailed below, for events described, if it occurs during the insured journey only. Each Benefit is subject to its own Sum Insured, as per limits mentioned in the policy schedule.

## Section I - Benefits

### B1. Accidental Death

If an Insured Person, who is a passenger (fare-paying or otherwise) in any Scheduled Airline anywhere in the world, suffers an accident during the Insured journey and this is the sole and direct cause of his death within 365 days from the date of accident, then we will pay the Sum Insured subject to the following conditions.

#### a. Worldwide Coverage

#### b. Disappearance

We will pay the Accidental Death Sum Insured for Loss of Life occurring within policy period if Insured person's body cannot be located within 365 Days after the forced landing, stranding, sinking or wrecking of a conveyance in which You were a passenger, subject to all other terms and provisions of the Policy.

#### c. Specific Exclusions applicable to this Section

In addition to the General Exclusions listed in this Policy this coverage section shall not cover:

- i. loss caused directly or indirectly, wholly or partly by:
  - a) infections (except pyogenic infections which shall occur through an Accidental cut or wound) or any other kind of Disease;
  - b) medical or surgical treatment except as necessary solely and directly as a result of an Accident.
  - c) Intentionally self injury, mental or nervous disorder, anxiety, stress or depression
- ii. any Injury which shall result in hernia.

Payment of compensation in respect of Insured Event which occurs whilst the Insured is operating or learning to operate any aircraft, or performing duties as a member of the crew on any aircraft, or Scheduled Airlines or is engaging in aviation or ballooning, or whilst the Insured is mounting into, or dismounting from or traveling in any balloon or aircraft.

## **B2. Medical Expenses**

If an Insured Person suffers an Illness or Accident during the Insured journey wherein the illness or injury is reported at the emergency medical center in the Airport and gets hospitalized, then we will reimburse expenses towards:

- a) the services of a Physician;
- b) Hospital confinement and use of operating room;
- c) anesthetics (including administration), x-ray examinations or treatments, and laboratory tests; ambulance service;
- d) drugs, medicines, and therapeutic services and supplies;
- e) dental treatment resulting from Injury sustained to Sound Natural Teeth subject to the per tooth and per occurrence
- f) In-patient medical expenses limited to 5% of Accidental Death Sum Insured.
- g) Outpatient treatment limited to 10% of Medical expense sum insured.

The payment of any claim, for overseas medical expenses, under this benefit will be in Indian Rupees based on the rate of exchange as on the date of invoice, published by Reserve Bank of India (RBI) and shall be used for conversion of foreign currency into Indian Rupees for claims payment. If these rates are not published on the date of invoice, the exchange rate next published by RBI shall be considered for conversion.

### **Specific Exclusions to this Section**

In addition to the General exclusions under this policy, we will not make any payment for any claim in respect of any Insured Person directly or indirectly for, caused by, arising from or in any way attributable to:

- a) Any travel which is for the purpose of obtaining medical treatment.
- b) A Pre-existing Condition/Disease
- c) If the Insured Person is travelling against the advice of a Doctor or is receiving or on a waiting list for specified medical treatment.
- d) Any treatment of cancer, orthopedic, degenerative or oncology diseases, unless immediate medical treatment was required in order to maintain life or relieve acute pain or distress.
- e) Any treatment relating to the removal of physical flaws or anomalies or any form of cosmetic treatment or surgery.

- f) Any costs or periods of residence incurred in connection with rest cure or recuperation at spas or health resorts, sanatorium, convalescence homes or any similar institution.
- g) Any costs in any way related to psychiatric or mental disorders.
- h) Any costs relating to the Insured Person's pregnancy, childbirth or the consequences of either provided that:
  - i. This exclusion shall not apply if the Insured Person's pregnancy had not advanced beyond the 30th week, in which case We will reimburse the reasonable cost of the medically necessary emergency treatment required because of acute complications during the course of her pregnancy to directly avert danger to her life or that of the unborn child.
  - ii. This exclusion does not include admissions for ectopic pregnancy
  - iii. We will not make any payment towards the cost of abortion, childbirth except condition (i) above or any postnatal illness or disease or their consequences.
- i) Rehabilitation or physiotherapy or the costs of artificial limbs or any other external appliance and/or device used for diagnosis or treatment; any external diseases, defects or anomalies
- j) The abuse or the consequences of the abuse of intoxicants or hallucinogenic substances such as drugs and alcohol, including smoking cessation programs and the treatment of nicotine addiction or any other substance abuse treatment or services, or supplies.
- k) Treatment of Obesity and any weight control program.
- l) Any non allopathic treatment.
- m) Charges related to a Hospital stay not expressly mentioned as being covered, such as charges for admission, discharge, administration, registration, documentation and filing.
- n) Treatment rendered by a Doctor which is outside his discipline;
- o) Doctor's fees charged by the Medical Practitioner sharing the same residence as an Insured Person or who is an immediate relative of an Insured Person's family.
- p) The provision or fitting of hearing aids, spectacles or contact lenses including optometric therapy, any treatment and associated expenses for alopecia, baldness, wigs, or toupees, medical supplies including elastic stockings, diabetic test strips, and similar products.
- q) Non-prescription drugs or treatments.
- r) Venereal disease, sexually transmitted disease or illness; "AIDS" (Acquired Immune Deficiency Syndrome) and/or infection with HIV (Human immunodeficiency virus) like conditions related to or arising out of HIV/AIDS such as ARC (AIDS related complex), Lymphomas in brain, Kaposi's sarcoma, tuberculosis.

### **B3. Loss of Checked-in Baggage**

If an Insured Person's accompanying checked-in baggage is lost by a Carrier on which the Insured Person is travelling as a fare paying passenger and to whom it was entrusted against a receipt during the Insured journey, then We will pay the amount required to purchase new items of the same kind and quality less the amount representing the condition and reasonable depreciation of the articles lost, provided that:

- a) Our maximum liability for any one item within one piece of baggage will be 10% of the Sum Insured. If the Insured Person has checked in more than one item of baggage, then Our maximum liability for all items within one piece of baggage will be 50% of the Sum Insured.
- b) The Insured Person obtains a property irregularity report from the Carrier confirming the loss.
- c) Our payment will be reduced by any sum for which the Carrier is liable to make payment

#### **Specific Exclusions to this Section**

In addition to the General Exclusions listed in this Policy this coverage section shall not cover any Non-Documented Loss and We will not be liable under this section for any: -

- a) excluded classes of property: animals, motor vehicles (including accessories), motorcycles, boats, motors, any conveyance, (except bicycles while checked as baggage with a Common Carrier), snow skis, household effects, antiques, electronic equipment such as computers (including software and accessories), personal data assistants or handheld computers, cellular phones, digital video disc player, compact disc player, video camcorder, cameras, eyeglasses or sunglasses, contact or corneal lenses, artificial teeth, bridges or prosthetic limbs, hearing aids, money, securities such as credit cards, debit cards, checks, traveler checks, membership cards, tickets or documents, business goods or samples, data recorded on tapes, cards, discs or otherwise, musical instruments, perishables and consumables;
- b) loss to property insured under any other insurance policy, or otherwise reimbursed by a Common Carrier;
- c) loss of Your baggage sent in advance or souvenirs and articles mailed or shipped separately.
- d) Damage to the baggage

#### **B4. Baggage Delay**

If an Insured Person's accompanying checked-in baggage is delayed for more than 6 hours by a Carrier on which the Insured Person is travelling as a fare paying passenger and to whom it was entrusted against a receipt during the Insured journey, then We will reimburse the amount as mentioned against this benefit subject to limits stated in the policy schedule. The following conditions apply:

- a) Benefits will be reduced by the amount paid or payable by the responsible Common Carrier.
- b) All claims must be verified by the Common Carrier who must certify the delay or misdirection.
- c) If upon further investigation it is later determined that Your baggage checked with the Common Carrier has been lost, any amount claimed and paid to You under the Baggage Delay Policy Section will be deducted from any payment due to You under the Common Carrier Baggage Loss Policy Sections.

## **B5. Loss of Passport**

If an Insured Person loses his passport during the Insured journey, then We will reimburse you, necessary and reasonable expenses incurred in connection with obtaining a duplicate or a new passport, up to the maximum amount stated in the policy schedule.

### **Specific Exclusions to this Section**

We will not make any payment for any claim in respect of any Insured Person directly or indirectly for, caused by, arising from or in any way attributable to:

- a) Loss, delay or confiscation or detention by customs, police or public authorities.
- b) The theft of a passport unless the theft is reported to the police within 24 hours and a written Police Report confirming the theft has been submitted to Us.
- c) Loss or theft of passport left unattended by you unless located in a locked hotel room or apartment and appropriate sized safety deposit box was not available.

## **B6. Trip Cancellation**

If an Insured Person's outward journey as a fare paying passenger on a Carrier is unavoidably cancelled, or is curtailed before completion after it has commenced, because of one of the reasons below, then We will reimburse up to the Trip Cancellation Sum Insured as the case may be for those travel and accommodation expenses that he paid and cannot recover or for which no value can be derived or he is liable to pay as long as he paid or

committed to such expenses without knowledge of the likelihood of cancellation or curtailment:

- a) The death of the Insured Person or the travelling Insured Person's parent/s, spouse or child(ren).
- b) The Hospitalization of the Insured Person or the travelling Insured Person's parents, spouse or child(ren) for at least 3 days due to a sudden Illness or injury.
- c) Material loss or damage to the Insured Person's property due to fire, acts of God, or third party criminal action.
- d) Government restrictions following an epidemic or natural Calamity/ natural Disasters.

### **Specific Exclusions to this Section**

We will not make any payment for any claim in respect of any Insured Person directly or indirectly for, caused by, arising from or in any way attributable to:

- a) Childbirth, pregnancy or any medical complications resulting within 2 months of the expected date of delivery.
- b) Negligence or fault of the travel agent.
- c) Any charges that could have been avoided but were incurred because of any delay in cancelling travel or accommodation.
- d) Facts or matters of which the Insured Person was aware or should have been aware might result in the cancellation or curtailment of the trip.
- e) Suspension of services by the Carrier whether voluntarily or pursuant to any order from any authority

### **B7. Trip Delay**

If an Insured Person's journey on a Carrier as a fare paying passenger is delayed beyond its scheduled departure or arrival time during the Insured journey, then We will pay:

- a) The amount mentioned in the Schedule for the first continuous and completed 3-hour period of delay and an additional amount as mentioned in the Schedule for each continuous and completed 3 hour period of delay thereafter. In case the delay is more than 15 hours we will pay the sum insured mentioned in the policy schedule. The claim is payable subject to:
  - i. The Insured Person must provide Us with written confirmation from the Carrier confirming the length and exact nature of delay.

### **Specific Exclusions for this Section**

We will not make any payment for any claim in respect of any Insured Person directly or indirectly for, caused by, arising from or in any way attributable to:

- a) Delay caused by strike or other job action by employees of a common carrier scheduled to be used by you during your trip or an industrial action if already notified at the time the Insured Person booked his ticket or paid or committed to other travel and accommodation expenses.
- b) The failure to arrive for the Carrier's departure in sufficient time as specified by the scheduled airline, to complete all departure formalities in accordance with the Carrier's published time schedule.
- c) Any delay arising from the order or action of any government, civil authority or official government body.

### **B8. Missed Connection**

We will pay a fixed amount to the insured as mentioned in the policy schedule in case of failure of the insured to access the connecting flight as per schedule arising out of and consequent upon the delayed arrival of the earlier flight .

The following conditions apply for this benefit to be admissible:

- a) Missed connection solely by the delay of the flight in which the insured is travelling immediately prior to the missed flight
- b) If the time gap between the scheduled arrival of the previous flight and the scheduled departure of the next flight is more than 3 hrs.

### **Specific Exclusions for this Section**

- a) No claim shall be payable in case such delay is foreseen by the insured or that the insured could have reasonably become aware of such delay in advance
- b) If the missing of the flight is the result of
  - Any deviation from the originally scheduled route done at the instance of the insured for reasons whatsoever
  - any advance intimation given to the insured of a possible delay of the flight that might lead to missing of connecting flights
  - any circumstances other than those directly attributable to the delay of the earlier flight.

You may claim either trip delay or missed connection and not both.

## **B9. Home protection**

If an insured person suffers damage, disappearance or destruction of the following items due to burglary at the unoccupied residence during the insured journey then we will pay for the replacement cost (upto sum insured limits specified in the policy schedule) of:

1. your furniture, clothes, electrical and audio equipment
2. your money and cheque(s)

### **Specific Exclusions for this Section**

We will not pay for:

1. losses that occurred when your travel time is longer than 31 days
2. losses to personal affects you have carried with you during the trip
3. losses to any other items that are not listed above
4. losses that are due to events other than burglary such as fire, smoke, lightning, wind, water, flood, earthquake, volcanic eruption, tidal wave, landslide, hail, or other acts of god
5. losses due to or related to a nuclear, biological or chemical event.
6. losses related to laptops, tablets, cameras and mobile phones.

### **Specific Conditions for this section**

1. In any event coverage will not commence more than 24 hours prior to the booked departure time and will cease 24 hours after your actual return time.
2. Electrical and audio equipment includes home and kitchen appliances like TVs, CD/DVD players, stereo sets, computers, and refrigerators.
3. You must provide an official police report that indicates the incident happened within the covered time frame in order for us to pay the claim; unless you are legally incapable of doing so.
4. In no event will we pay more than the replacement cost of the covered item.

## **B10. Identity theft**

If an insured person incurs expenses resulting in efforts to resolve the identity theft, and expenses can be submitted up to 12 months after you make a claim, we will pay (upto the

maximum sum insured as specified in the policy schedule for this benefit) for the following expenses:

1. Legal Expenses – We will reimburse you for attorney and court fees incurred by you for:
  - a. Defending any suit brought against you by a creditor or collection agency or someone acting on their behalf as a result of the identity theft;
  - b. Removing any civil or criminal judgment wrongfully entered against you as a result of the identity theft;
  - c. Challenging the accuracy or completeness of any information in your consumer credit report provided this information is inaccurate and falsely provided to the credit agency or financial institution as a result of identity theft.
2. Lost Wages - We will reimburse you for time taken from work solely as a result of your efforts to correct your financial records that have been altered due to identity theft. Payment of lost wages includes compensation for whole or partial unpaid workdays. You must take these unpaid days within 12 months of making a claim.
3. Obligation to pay - If any credit accounts and or bank accounts were opened in your name without your authorization, we will pay for your actual loss from the unauthorized account. We will pay for your legal obligation to pay a creditor when the account was created as part of your identity theft.
4. Miscellaneous Expenses – We will reimburse the following expenses:
  - a. The cost of re-filing applications for credit accounts or banking accounts that are rejected solely because the lender received incorrect information as a result of identity theft;
  - b. The cost of notarizing documents related to your identity theft, long distance telephone calls, and certified mail reasonably incurred as a result of your efforts to report an identity theft or to correct your financial and credit records that have been altered as a result of your identity theft;
  - c. The cost of contesting the accuracy or completeness of any information contained in your credit history as a result of your identity theft;
  - d. The cost of a maximum of 4 (four) credit reports from an entity approved by us. The credit reports shall be requested when you make a claim.

### **Specific Exclusions for this Section**

We will not pay for any expenses or loss as a result of:

1. Monetary losses other than those covered above
2. Any physical injury, sickness, disease, disability, shock, mental anguish and mental injury including required care, loss of services or death;
3. Requesting credit reports before the discovery of your identity theft;
4. Taking time from self-employment or workdays that will be paid by your employer in order to correct your financial records that have been altered due to identity theft.

### **Specific Conditions for this section**

1. The fraudulent account must have been opened in your name without your authorization.
2. Any false charge or withdrawal from the unauthorized opened account must be verified by your financial institution.
3. Coverage for false charges is limited to the amount you are held liable for by the financial institution.
4. We will be permitted to inspect your financial records.
5. You will cooperate with us and help us to enforce any legal rights you or we may have in relation to your identity theft; this may include your attendance at depositions, hearings and trials, and giving evidence as necessary to resolve your identity theft.
6. You will only have to pay one deductible per identity theft occurrence during the policy period.

### **B11. Key replacement**

If an insured person incurs expenses towards the following during the insured journey then we will pay (upto the maximum sum insured as specified in the policy schedule for this benefit) for the following expenses:

1. Key Replacement – We will reimburse you for the cost of replacing your residence and/or your vehicle keys which are lost or stolen. The covered cost is limited to the money you paid to a locksmith to produce a new key.
2. Break-in Protection – We will reimburse you for the cost of replacing your locks and keys if your residence or your vehicle is broken into. The covered costs include the labor cost for replacing the lock.

3. Lock Out Reimbursement – We will reimburse you for the cost of obtaining a locksmith if you are locked out of your residence or your vehicle due to the loss or theft of your keys.
4. Rental Car Reimbursement – We will cover the reasonable cost of a rental car if your vehicle keys are lost or stolen and it will take more than 24 hours to replace them

**I. Specific Exclusions for this Section**

We will not pay for:

1. costs other than those listed above
2. costs associated with lost or stolen keys for a residence other than your primary residence;
3. The cost to replace keys to vehicles that you do not own for personal use;

**II. Specific Conditions for this Section**

For break-in protection claims, you must provide an official police report that indicates the incident happened within the covered time frame in order for us to pay the claim; unless you are legally incapable of doing so.

**B12. Lost wallet**

If an insured person's wallet is lost or stolen during the insured journey we will pay the benefit amount as mentioned in the policy schedule.

**I. Specific Exclusions for this Section**

We will not cover:

1. transportation tickets, or other similar items that were in the lost or stolen wallet other than your personal papers and payment cards;
2. losses that are caused by any events other than lost or stolen, such as fire, water, normal wear and tear, manufacturing defects, vermin, insects, cleaning or repairs, or similar events;
3. accidental damage to your wallet and items inside;
4. any fraudulent/unauthorized charges on the lost or stolen payment cards;
5. any identity theft related costs that are caused by lost or stolen personal papers or payment cards.

**II. Specific Conditions for this Section**

You must provide an official police report that indicates the incident happened within the covered time frame in order for us to pay the claim; unless you are legally incapable of doing so.

## Section II – Definitions

1. **Accident, Accidental** - means a sudden, unforeseen and involuntary event, caused by external visible and violent means.
2. **Act of Terrorism** – An act of terrorism means an act which includes the use of force or violence or the threat thereof, of any person or group(s) of persons whether acting alone or on behalf of or in connection with any organization(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.
3. **Age** - means the Age of the Insured Person on his / her most recent birthday as per the English calendar, regardless of the actual time of birth.

For purpose of this Policy, the Eligible age is from 18 years to 70 years Policy.

4. **ATM** means automatic teller machine.
5. **Business** means:
  - a. A trade, profession or occupation engaged in on a full-time, part-time or occasional basis; or
  - b. Any other activity engaged in for money or other compensation.
6. **Certificate of Insurance** - means the document issued by Us detailing the effective date, Insured Person(s), benefits, sums insured, Deductible, Franchise, premium and more generally all special condition(s) and or endorsement(s).
7. **Checked-in Baggage** - means a piece of baggage which was checked in and in the custody of a Common Carrier and for which a claim check has been issued to You by a Common Carrier.
8. **Cheque(s)** means any bank draft drawn against deposited funds to pay a specific sum to a specified payee on demand other than drafts with a stamped signature.
9. **Compensation** - means Sum Insured, Total Sum Insured or percentage of the Sum Insured, as appropriate.

10. **Day** - means a period of 24 consecutive hours
11. **Grace Period** -
- Grace period means the specified period of time immediately following the premium due date during which a payment can be made to renew or continue a policy in force without loss of continuity benefits such as waiting periods and coverage of pre-existing diseases. Coverage is not available for the period for which no premium is received.
12. **Injury** - Injury means accidental physical bodily harm excluding illness or disease solely and directly caused by external, violent, visible and evident means which is verified and certified by a Medical Practitioner.
13. **Inpatient Care (not applicable for Overseas Travel Insurance)** - Inpatient care means treatment for which the insured person has to stay in a hospital for more than 24 hours for a covered event
14. **Insured Journey** – means any journey undertaken by the insured during the insured period which commences when the insured enters the airport for onward journey and terminates when he exits the destination airport in each leg of journey.
15. **Insured Period(s)** - means with respect to the Policy, the period commencing with the Effective Date of the Policy and terminating with the Expiration Date of the Policy as stated in the Policy Schedule and any subsequent period for which the Policy may be renewed.
16. **Insured Person** - means the Insured Person as detailed in the Policy Schedule.
17. **Lost or Stolen** means having been inadvertently lost or having been stolen by a third party without **your** assistance, consent or co-operation.
18. **Money** means currency, coins and bank notes in current use and having a face value.
19. **Nominee**: In case of death of the Insured Person, the Nominee means, unless stipulated otherwise by the Insured Person, the surviving Spouse or immediate blood relative of the Insured Person, mentally capable and not divorced, followed by the children recognized or adopted, followed by the Insured Person's legal heirs. For all other benefits, the Nominee means the Insured Person himself unless stipulated otherwise.
- For the purpose of avoidance of doubt it is clarified that if the Insured is a minor, his guardian shall appoint the Nominee.
20. **Payment card** means an **ATM** card, credit card, charge card, prepaid card or debit card issued by a qualified financial institution for personal use only.

21. **Medical Practitioner (not applicable for Overseas Travel Insurance):-**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.
22. **Medical Practitioner (applicable for Overseas Travel Insurance):--** means a licensed medical practitioner acting within the scope of his license and who holds a degree of a recognized institution and is registered by the Authorised Medical Council of the respective country.
- The attending Physician will not be (a) an Insured Person or (b) Your Immediate Family Member. The term Physician would include surgeon.
23. **OPD treatment:**  
OPD treatment means the one in which the Insured visits a clinic / hospital or associated facility like a consultation room for diagnosis and treatment based on the advice of a Medical Practitioner. The Insured is not admitted as a day care or in-patient.
24. **Public Authority** means any governmental, quasi-governmental organization or any statutory body or duly authorized organization with the power to enforce laws, exact obedience, and command, determine or judge.
25. **Policy** - means the insurance contract, the Policy Schedule, and any attached enrollment forms, endorsements, or riders.
26. **Policyholder** - means the physical person(s) or the entity named in the Policy Schedule who is (are) responsible for payment of premiums
27. **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.
28. **Professional Sportsman** - means a sports person whose annual income from sports or its allied services is in excess of 50%.
29. **Proposal and Declaration Form** - means any initial or subsequent Proposal / Declaration made by the Policyholder/ Insured Person and is deemed to be attached and which forms a part of this Policy.
30. **Policy Schedule-** means this schedule and parts thereof, and any other annexure(s) appended, attached and / or forming part of this Policy.

31. **Relative** means **your** legally married spouse, parent, step-parent, parent in-law, grandparent, child, stepchild, legally adopted child, grandchild, brother, brother in-law, sister, sister in-law, son in-law, daughter in-law, uncle, aunt, niece, nephew, and first cousin. **Residence** means **the** place that is shown as the “insured mailing address” on the Policy Schedule. **SIM card** means the Subscriber Identity Module (SIM) card that is delivered together with a subscription contract or pay-as-you-go contract used for the operating of mobile **phones**.
32. **Reasonable and Customary Charges (not applicable for Overseas Travel Insurance):**  
  
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.
33. **Sum Insured-** means the sum shown in the Schedule which represents Our maximum liability for any and all benefits claimed for during each Policy Year.
34. **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.
35. **War** - means war, whether declared or not, or any warlike activities, including use of military force by any sovereign nation to achieve economic, geographic, nationalistic, political, racial, religious or other ends.
36. **We/Us/Our** - means TATA AIG General Insurance Company Limited.
37. **You/Your/Yourself** - means the Policy Holder and/or Insured Person(s) who is named in the Policy Schedule.
38. **Subrogation**  
Subrogation means 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.

### Section III - General Exclusions

In addition to the specific exclusions listed against each cover, this entire Policy does not provide benefits for any loss resulting in whole or in part from, or expenses incurred, directly or indirectly in respect of:

- a) Losses that do not occur within the policy period;
- b) The loss or destruction or damage to any property whatsoever or any loss or expenses whatsoever resulting or arising therefrom or any consequential loss directly or indirectly caused by or contributed to by or arising from:
  - I. Ionising radiation or contamination by radioactivity from any nuclear waste from combustion of nuclear fuel; or
  - II. The radioactive, toxic, explosive or other hazardous properties of any explosion nuclear assembly or nuclear component, thereof
  - III. Asbestosis or other related sickness or disease resulting from the existence, production, handling, processing, manufacture, sale, distribution of asbestos or other products thereof.
- b) War or any act of war, invasion, act of foreign enemy, war like operations (whether war be declared or not or caused during service in the armed forces of any country), civil war, public defence, rebellion, revolution, riot, insurrection, military or usurped acts, nuclear weapons/materials, radiation.
- c) Any Insured Person's participation or involvement in naval, military or air force operation or professional or semi-professional sporting, racing, aviation, scuba diving, parachuting, hang-gliding, rock or mountain climbing.
- d) Any Insured Person committing or attempting to commit a criminal or unlawful act, or intentional self injury or attempted suicide while sane or insane.
- e) Losses that you have intentionally caused;

#### **Exclusions applicable to benefits B9, B10, B11 and B12 (Home Protection, Identity Theft, Key Replacement and Lost Wallet)**

- A.** Losses that result from or related to **business** pursuits including **your** work or profession;
- B.** Losses that result from the direct actions of a **relative**, or actions that a **relative** knew of or planned.

## Section IV - General Conditions

### Conditions precedent to the contract

- A. ENTIRE CONTRACT - CHANGES:** This Policy, together with the Proposal and Declaration Form, as well as any forms, riders and endorsements and papers hereto, constitutes the entire contract of insurance.

No change in this Policy shall be valid until approved by Our authorized officer and such approval is endorsed hereon. No agent has authority to change this Policy or to waive any of the provisions of this Policy.

**B. CONSIDERATION:**

- i. Upfront Premium payment is applicable at the beginning of the policy inception

### Conditions applicable during the contract

**C. EFFECTIVE DATE:**

**i. For Master Policy**

The Policy will start on the latest of the policy effective date or the date on which premium is paid when due and Policy Schedule provided it is countersigned by Us .

**ii. For Certificate of Insurance**

The Certificate of Insurance takes effect on the Effective Date stated in the Certificate of Insurance. After taking effect each Certificate of Insurance may continue in effect after the renewal date subject to 'Renewal Conditions No. D 'set forth herein. All subsequent Insured Periods shall begin and end at midnight.

**D. EXPIRATION DATE:**

This Policy certificate will terminate on the earliest of the following dates:

- a) at the expiration of the period for which premium has been paid
- b) Expiration Date shown in the Policy Schedule
- c) You cease to be a resident of India,
- d) The date You or We cancel the Certificate of Insurance,
- e) You opt to exit from the scheme,

**E. CANCELLATION CLAUSE**

**1. For Certificate of Insurance**

We may cancel this Policy / Certificate of Insurance at any time on grounds of mis-representation, fraud, non-disclosure of material facts or non-cooperation of the insured by giving you 15 Days notice delivered to You, or mailed to Your last address as appears in Our records, stating when such cancellation shall be effective. In the event of cancellation for mis-representation, fraud, non-disclosure of material facts, the policy shall stand cancelled ab-initio and there will be no refund of premium. In the event the policy is cancelled for non-cooperation of the insured or if you cancel the Policy, the refund premium shall be computed in accordance with Our short period rate table shown below for the period the Policy has been in force, provided no claim has occurred up to the date of cancellation. In the event a claim has occurred in which case there shall be no return of premium.

Short Period Rate Table:

Period	% of annual premium retained
Not exceeding 1 month	1/4 <sup>th</sup> of annual rate
Exceeding 1 month but not exceeding 3 month	½ of the annual rate
Exceeding 3 month but not exceeding 6 month	3/4 <sup>th</sup> of annual rate
Exceeding 6 month	Full annual rate

**Free Look Period**-You have a period of 15 days from the date of receipt of the Policy document to review the terms and conditions of this Policy. If You have any objections to any of the terms and conditions, You have the option of cancelling the Policy stating the reasons for cancellation and You will be refunded the premium paid by You after adjusting the amounts spent on any medical check-up, stamp duty charges and proportionate risk premium. You can cancel Your Policy only if You have not made any claims under the Policy. All Your rights under this Policy will immediately stand extinguished on the free look cancellation of the Policy. Free look provision is not applicable and available at the time of renewal of the Policy.

**Option to Migrate** We will offer the Insured Person an option to migrate to similar health insurance Policy with Us provided that:

- i) Insured Person has been insured with Us under this Policy
- ii) This option for migration to similar health insurance policy shall be exercised by the Insured Person only when he / she is at the end of specified exit age provided master policy is renewed or not renewed by the Group policy holder and certainly at the time of renewal only.
- iii) Insured Person will be offered continuity of coverage & suitable credits, if any, for all the previous policy years, provided the policy has been maintained without a break.

In the likelihood of this policy being withdrawn in future, we will intimate you about the same 3 months prior to expiry of the policy. You will have the option to migrate to similar health insurance policy available with us at the time of renewal with all the accrued continuity benefits such as waiver of waiting period etc. provided the policy has been maintained without a break.

#### **Conditions for renewal of the contract**

#### **F. RENEWAL CONDITIONS:**

The Policy shall ordinarily be lifelong renewable except on grounds of fraud, moral hazard or misrepresentation or non-cooperation by the insured, provided the policy is not withdrawn.

The Policy and Certificate of Insurance may be renewed by upfront payment of the total premium specified by Us, which premium shall be at Our premium rate in force at the time of renewal. Premium rates are subject to revision at the time of renewal depending upon overall performance of the product and / or the claim experience under the policy.

Grace Period of 30 days for renewing the Policy is provided under this Policy.

We, however, are not bound to give notice that it is due for renewal. Unless renewed as herein provided, this Policy or Certificate of Insurance shall terminate at the expiration of the period for which premium has been paid.

**Conditions when a claim arises**

**Section V - Claim Procedure and Payment**

**A. Intimation & Assistance**

You can notify a claim by sending an SMS **CLAIMS** to **5616181** or by calling our 24x7 toll free helpline **1800-266 7780**.

The insured person has to submit the following documents for making a claim with us.

Type of claim	Documents required	Procedure
Accidental Death	<p>ACCIDENTAL DEATH</p> <ol style="list-style-type: none"> <li>1. Claim form (Personal Accident claim form)</li> <li>2. Attested copy of Death Certificate</li> <li>3. Attested copy of Post Mortem (if conducted)/ Coroner's report )</li> <li>4. Attested copy of FIR/ Police Inquest report, where applicable</li> <li>5. Copy of Passport/visa only in case of overseas travel</li> <li>6. C-KYC forms along with KYC documents</li> <li>7. NEFT details of nominee</li> </ol>	<ol style="list-style-type: none"> <li>1. Collect all documents pertaining to the loss including correspondence with Carrier and send to our Claims Office at the address given below.</li> <li>2. Claim Form can be obtained from our Service Center.</li> </ol>
Medical Expenses	<ol style="list-style-type: none"> <li>1. Claim form (Overseas Travel claim form,)</li> <li>2. Treating Doctor's report</li> <li>3. Original Admission/discharge card, if applicable</li> <li>4. Original Bills/Receipts/Prescription</li> <li>5. Original X-ray reports/Pathological/Investigative reports, if any</li> <li>6. Copy of passport/Visa with Entry &amp; exit stamp only in case of overseas travel</li> <li>7. Copy of MLC/FIR where applicable</li> </ol>	<ol style="list-style-type: none"> <li>1. Please contact our Service Center at the number given above and obtain a Claim Form from them and fill in. <b>It is necessary to obtain the attending physician's signature on the Form.</b></li> <li>2. Please collect all bills/receipts/invoices</li> <li>3. Send all documents to our Claims Office at the address given herein.</li> </ol>

	<p>and available</p> <ol style="list-style-type: none"> <li>8. C-KYC forms along with KYC documents, where applicable</li> <li>8. NEFT details of insured</li> </ol>	
Loss/Delay of Baggage	<ol style="list-style-type: none"> <li>1. Claim form (Overseas Travel claim form,)</li> <li>2. Property Irregularity Report (obtained from Airline)</li> <li>3. Copies of Correspondence with the Airline authorities/Others confirming the loss and details of compensation.</li> <li>4. Individual list of items in each baggage with approximate cost of each item.</li> <li>5. Copy of the passport/Visa with Entry &amp; exit stamp only in case of overseas travel</li> <li>6. NEFT details of insured</li> </ol>	<ol style="list-style-type: none"> <li>1. Intimate the airline about your loss and lodge complaint; obtain the PIR Property Irregularity report.</li> <li>2. Claim Form can be obtained from our Service Center.</li> <li>3. Fill in the Claim Form and send all documents to our Corporate Office at the address given above.</li> </ol>
Loss of Passport	<ol style="list-style-type: none"> <li>1. Claim form</li> <li>2. Copy of new passport</li> <li>3. Copy of previous passport (if available)</li> <li>4. Original bills/invoices of expenses incurred for obtaining a new passport</li> <li>5. Copy of FIR/ Police Report</li> <li>6. NEFT details of insured</li> </ol>	<ol style="list-style-type: none"> <li>1. File a complaint with the local police</li> <li>2. Contact with the Indian Embassy, where ever necessary</li> <li>3. Submit all documents to our Claims office at the address given below, along with a detailed statement.</li> </ol>
Trip Delay	<ol style="list-style-type: none"> <li>1. Claim Form</li> <li>2. Original Bills of purchases made/ Expenses incurred during the period of delay</li> <li>3. Copy of Ticket &amp; Boarding Pass</li> <li>4. Copies of Correspondence with the Airline authorities certifying about</li> </ol>	<ol style="list-style-type: none"> <li>1. Claim Form can be obtained from our Service Center.</li> <li>2. Fill in the Claim Form and send all documents to our Corporate Office at the address given below</li> </ol>

	<p>the delay</p> <p>5. NEFT details of insured</p>	
Missed Connection	<ol style="list-style-type: none"> <li>1. Claim Form</li> <li>2. Confirmation from the airline, clearly mentioning the scheduled arrival time and actual arrival time with the reason of delay</li> <li>3. Bills/receipts of reasonable additional expenses</li> <li>4. Copy of Ticket &amp; Boarding Pass</li> <li>5. NEFT details of insured</li> </ol>	<ol style="list-style-type: none"> <li>1. Claim Form can be obtained from our Service Center</li> <li>2. Obtain letter from the airline authorities clearly stating the period of delay</li> </ol>
Home Protection	<ol style="list-style-type: none"> <li>1. Claim Form</li> <li>2. Police F.I.R.</li> <li>3. Voucher in support of item lost/damaged, destroyed subject (Description, quantity, value and nature of loss).</li> <li>4. Bank statement (In case of loss of money, cheque)</li> <li>5. C-KYC forms along with KYC documents, where applicable</li> <li>6. NEFT details of insured</li> </ol>	<p>In the event of a covered loss:</p> <ol style="list-style-type: none"> <li>a) You shall call us at 18002667780 or provide written intimation within 6 hours of discovering the loss to report the claim and obtain the proper forms and instructions;</li> <li>b) You shall call the police within 6 hours of discovering the loss to report the incident and obtain the police report</li> <li>c) You shall complete and return any necessary documents like claim forms, police reports, demands, notices</li> <li>d) The claims form and accompanying documents must be returned to us within 3 days of making the original claim.</li> </ol>
Identity Theft	<ol style="list-style-type: none"> <li>1. Police Intimation</li> <li>2. Credit report</li> <li>3. Legal expenses tax invoices</li> <li>4. Salary/Wage slips (In case of Loss of Pay)(to be supported with suitable documents from</li> </ol>	<ol style="list-style-type: none"> <li>1. In the event of a covered loss you shall:</li> <li>2. Call us at 18002667780 or provide written intimation to make a claim within 15 days of discovering the identity theft to</li> </ol>

	<p>employer)</p> <ol style="list-style-type: none"> <li>5. Credit/bank account statements</li> <li>6. Miscellaneous Expenses tax invoices</li> <li>7. NEFT details of insured</li> </ol>	<ol style="list-style-type: none"> <li>1. obtain proper forms and instructions;</li> <li>3. File a police report within 24 hours of discovering the identity theft;</li> <li>4. Notify your bank(s) or credit account issuer(s) of the identity theft within 6 hours of discovering the identity theft;</li> <li>5. Complete and return any claims forms including an authorization for us to obtain records and other information such as credit reports (if applicable) within 3 days of making the claim;</li> <li>6. Provide proof that it was necessary to take time away from your work if you make a claim for lost wages. We will ask you to submit proof from your employer that you took unpaid days off, and you must have this information notarized;</li> <li>7. Send us copies of any demands, notices, summonses, complaints, or legal papers received in connection with a covered loss;</li> <li>8. Take all reasonable and prudent action to prevent further damage to your identity.</li> </ol>
<p>Key Replacement</p>	<ol style="list-style-type: none"> <li>1. Incident Report from customer</li> <li>2. Police F.I.R (for Break-in claims)</li> <li>3. Voucher in support of expense incurred on vehicle keys and/or residence keys, locks, rental car.</li> <li>4. NEFT details of insured</li> </ol>	<p>Duties After an Accident or Loss In the event of a covered loss:</p> <ol style="list-style-type: none"> <li>1. You shall call us at 18002667780 or provide written intimation within 24 hrs. of discovering the loss to make a claim and obtain the proper forms and instructions;</li> <li>2. You shall file a police report</li> </ol>

		<p>within 24 hours of discovering a covered incident.</p> <p>3. You shall fill out and return any claims forms and accompanying documents including police reports (where necessary), receipts for replacing locks and/or keys, and any other documents we may ask you to provide;</p> <p>4. The claims form and accompanying documents must be returned to us within 3 days of making the original claim.</p>
Lost Wallet	<ol style="list-style-type: none"> <li>1. Details of cards and personal papers lost (number, validity, period, issuer, etc.)</li> <li>2. Cards hot listing time verified by banks.</li> <li>3. Voucher in support of replaced wallet</li> <li>4. Voucher in support of obtaining new cards/personal papers and fee paid.</li> <li>5. NEFT details of insured</li> </ol>	<p>Duties After an Accident or Loss</p> <p>In the event of a covered loss:</p> <ol style="list-style-type: none"> <li>1. You shall contact us at 18002667780 or provide written intimation within 24 hours from the discovery of the incident to obtain a claim form and instructions;</li> <li>2. You must file a police report within 6 hours from the discovery of the incident;</li> <li>3. You shall complete, sign and return the form with the appropriate documents which include receipts, police reports, and any other documents we may ask you to provide;</li> <li>4. The claims form and accompanying documents must be returned to us within 3 days of making the original claim</li> </ol>

This is a General Check-list of documents; please check for availability of coverage under the policy.

**Kindly submit all the requested documents at the address mentioned below:**

**Accident & Health Claims Department**

**Tata AIG General Insurance Co. Ltd.,**

A-501, 5th Floor, Building No.4,

Infinity Park, Gen. A.K. Vaidya Marg,

Dindoshi, Malad (East)

Mumbai 400 097

**B. Claims Payment**

We shall make the payment of claim that has been admitted as payable by Us under the Policy terms and conditions within 30 days from the date of receipt of last necessary documents. All claims will be settled in accordance with the applicable regulatory guidelines, including IRDA (Protection of Policyholders Regulation), 2017. In the case of delay in the payment of a claim, We shall be liable to pay interest from the date of receipt of last necessary document to the date of payment of claim at a rate 2% above the bank rate. For the purpose of this clause, 'bank rate' shall mean bank rate fixed by the Reserve Bank of India (RBI) at the beginning of the financial year in which claim has fallen due.

C. **Subrogation-** In the event off any payment under this policy, we shall be subrogated to all your rights of recovery thereof against any person or organization or you shall execute and deliver instruments and papers to us and do whatever else is necessary to secure such rights and provide whatever assistance we might reasonable require from you in the pursuance of our Subrogation rights. We shall take no action after the loss to prejudice such rights.

## Section VI - Grievance Redressal Procedure

The Group Administrator would be facilitator for claims and policy servicing. However, settlement of claims would be done by TATA AIG General Insurance Company Ltd..

1. Complaint
  - i. However, if You are not satisfied with our services and wish to lodge a complaint, Kindly
    - email the customer service desk at [customersupport@tata-aig.com](mailto:customersupport@tata-aig.com) or
    - call our 24X7 Toll free number **1800-266-7780** or 022-66939500 (tolled)
    - Senior citizens can call our dedicated line at 1800 22 9966
  - ii. After examining the issue, We will send our response within 10 days from the date of receipt of the complaint by us. In case the resolution is likely to take longer time, We will inform you of the same through an interim reply.
2. Escalation Level 1
  - iii. In case you do not receive a resolution within 10 days or if the resolution still does not meet your expectations, You can write to [manager.customersupport@tata-aig.com](mailto:manager.customersupport@tata-aig.com). We will send our response within a period of 8 days from the date of receipt at this email id.
3. Escalation Level 2
  - iv. In case You do not receive a resolution within 8 days or if the resolution still does not meet your expectations, you can write to Head - Customer Services at [head.customerservices@tata-aig.com](mailto:head.customerservices@tata-aig.com). We will send You our final response within 7 days from the date of receipt of your complaint on this email id.
4. Dispute Resolution Clause
  - v. Any and all disputes or differences under or in relation to this Policy shall be determined by the Indian Courts and subject to Indian law.
5. Arbitration
  - vi. If any dispute or difference shall arise as to the quantum to be paid under this Policy, liability being otherwise admitted, such difference shall independently of all other questions be referred to the decision of a sole arbitrator to be appointed in writing by the parties or if they cannot agree upon a single arbitrator within 30 days of any party invoking arbitration, the same shall be referred to a panel of three arbitrators, comprising of two arbitrators, one to be appointed by each of the parties to the

dispute/ difference and the third arbitrator to be appointed by such two arbitrators and arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996.

vii. It is clearly agreed and understood that no difference or dispute shall be referable to arbitration, if We have disputed or not accepted liability under or in respect of this Policy.

6. Ombudsman

viii. If You do not receive a response from us within one month or are not satisfied with our reply, You may approach the nearest Insurance Ombudsman under the Insurance Ombudsman Scheme as per the Redressal of Public Grievances Rules, 2017.

**NAMES OF OMBUDSMAN AND ADDRESSES OF OMBUDSMAN CENTRES**

Office Details	Jurisdiction of Office (Union Territory, District)
<p><b>AHMEDABAD - Shri. / Smt.</b>            Office of the Insurance Ombudsman,            Jeevan Prakash Building, 6th floor,            Tilak Marg, Relief Road,            Ahmedabad – 380 001.            Tel.: 079 - 25501201/02/05/06            Email: <a href="mailto:bimalokpal.ahmedabad@gbic.co.in">bimalokpal.ahmedabad@gbic.co.in</a></p>	<p>Gujarat,            Dadra &amp; Nagar Haveli,            Daman and Diu.</p>
<p><b>BENGALURU - Shri/Smt.....</b>            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            Email: <a href="mailto:bimalokpal.bengaluru@gbic.co.in">bimalokpal.bengaluru@gbic.co.in</a></p>	<p>Karnataka.</p>
<p><b>BHOPAL - Shri/Smt.....</b>            Office of the Insurance Ombudsman,            Janak Vihar Complex, 2nd Floor,            6, Malviya Nagar, Opp. Airtel Office,            Near New Market,            Bhopal – 462 003.</p>	<p>Madhya Pradesh            Chattisgarh.</p>

Office Details	Jurisdiction of Office (Union Territory, District)
Tel.: 0755 - 2769201 / 2769202 Fax: 0755 - 2769203 Email: <a href="mailto:bimalokpal.bhopal@gbic.co.in">bimalokpal.bhopal@gbic.co.in</a>	
<b>BHUBANESHWAR - Shri. B. N. Mishra</b> Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar – 751 009. Tel.: 0674 - 2596461 /2596455 Fax: 0674 - 2596429 Email: <a href="mailto:bimalokpal.bhubaneswar@gbic.co.in">bimalokpal.bhubaneswar@gbic.co.in</a>	Orissa.
<b>CHANDIGARH -</b> Office of the Insurance Ombudsman, S.C.O. No. 101, 102 & 103, 2nd Floor, Batra Building, Sector 17 – D, Chandigarh – 160 017. Tel.: 0172 - 2706196 / 2706468 Fax: 0172 - 2708274 Email: <a href="mailto:bimalokpal.chandigarh@gbic.co.in">bimalokpal.chandigarh@gbic.co.in</a>	Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir, Chandigarh.
<b>CHENNAI - Shri/Smt.....</b> Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018. Tel.: 044 - 24333668 / 24335284 Fax: 044 - 24333664 Email: <a href="mailto:bimalokpal.chennai@gbic.co.in">bimalokpal.chennai@gbic.co.in</a>	Tamil Nadu, Pondicherry Town and Karaikal (which are part of Pondicherry).
<b>DELHI - Smt. Sandhya Baliga</b> Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel.: 011 - 23239633 / 23237532 Fax: 011 - 23230858 Email: <a href="mailto:bimalokpal.delhi@gbic.co.in">bimalokpal.delhi@gbic.co.in</a>	Delhi.

Office Details	Jurisdiction of Office (Union Territory, District)
<p><b>GUWAHATI - Sh. / Smt.</b> Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati – 781001(ASSAM). Tel.: 0361 - 2132204 / 2132205 Fax: 0361 - 2732937 Email: <a href="mailto:bimalokpal.guwahati@gbic.co.in">bimalokpal.guwahati@gbic.co.in</a></p>	<p>Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.</p>
<p><b>HYDERABAD - Shri/Smt.....</b> 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 Email: <a href="mailto:bimalokpal.hyderabad@gbic.co.in">bimalokpal.hyderabad@gbic.co.in</a></p>	<p>Andhra Pradesh, Telangana, Yanam and part of Territory of Pondicherry.</p>
<p><b>JAIPUR - Shri/Smt.....</b> Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141 - 2740363 Email: <a href="mailto:Bimalokpal.jaipur@gbic.co.in">Bimalokpal.jaipur@gbic.co.in</a></p>	<p>Rajasthan.</p>
<p><b>ERNAKULAM - Shri/Smt.....</b> Office of the Insurance Ombudsman, 2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard, M. G. Road, Ernakulam - 682 015. Tel.: 0484 - 2358759 / 2359338 Fax: 0484 - 2359336 Email: <a href="mailto:bimalokpal.ernakulam@gbic.co.in">bimalokpal.ernakulam@gbic.co.in</a></p>	<p>Kerala, Lakshadweep, Mahe-a part of Pondicherry.</p>
<p><b>KOLKATA - Shri. K. B. Saha</b> Office of the Insurance Ombudsman,</p>	<p>West Bengal, Sikkim,</p>

Office Details	Jurisdiction of Office (Union Territory, District)
<p>Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 / 22124340 Fax : 033 - 22124341 Email: <a href="mailto:bimalokpal.kolkata@gbic.co.in">bimalokpal.kolkata@gbic.co.in</a></p>	<p>Andaman &amp; Nicobar Islands.</p>
<p><b>LUCKNOW - Shri. N. P. Bhagat</b> Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, Lucknow - 226 001. Tel.: 0522 - 2231330 / 2231331 Fax: 0522 - 2231310 Email: <a href="mailto:bimalokpal.lucknow@gbic.co.in">bimalokpal.lucknow@gbic.co.in</a></p>	<p>Districts of Uttar Pradesh : 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.</p>
<p><b>MUMBAI - Shri/Smt.....</b> Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 022 - 26106552 / 26106960 Fax: 022 - 26106052 Email: <a href="mailto:bimalokpal.mumbai@gbic.co.in">bimalokpal.mumbai@gbic.co.in</a></p>	<p>Goa, Mumbai Metropolitan Region excluding Navi Mumbai &amp; Thane.</p>
<p><b>NOIDA - Shri. Ajesh Kumar</b> Office of the Insurance Ombudsman, Bhagwan Sahai Palace 4th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddh Nagar,</p>	<p>State of Uttaranchal and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura,</p>

Office Details	Jurisdiction of Office (Union Territory, District)
U.P-201301. Tel.: 0120-2514250 / 2514252 / 2514253 Email: <a href="mailto:bimalokpal.noida@gbic.co.in">bimalokpal.noida@gbic.co.in</a>	Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.
<b>PATNA - Shri. Sadasiv Mishra</b> Office of the Insurance Ombudsman, 1st Floor, Kalpana Arcade Building,, Bazar Samiti Road, Bahadurpur, Patna 800 006. Tel.: 0612-2680952 Email: <a href="mailto:bimalokpal.patna@gbic.co.in">bimalokpal.patna@gbic.co.in</a>	Bihar, Jharkhand.
<b>PUNE - Shri. A. K. Sahoo</b> Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 3rd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune – 411 030. Tel.: 020-41312555 Email: <a href="mailto:bimalokpal.pune@gbic.co.in">bimalokpal.pune@gbic.co.in</a>	Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region.

**OFFICE OF THE GOVERNING BODY OF INSURANCE COUNCIL**

(Monitoring Body for Offices of Insurance Ombudsman)

Shri P. N. Gandhi, Secretary General

Smt. Moushumi Mukherji, Secretary

3rd Floor, Jeevan Seva Annexe,

S. V. Road, Santacruz (W),



Mumbai - 400 054.

Tel.: 022 - 26106889 / 671 / 980

Fax: 022 - 26106949

Email: [inscoun@gbic.co.in](mailto:inscoun@gbic.co.in)

#### Section 41 (Prohibition of Rebates)

1. No person shall allow or offer to allow either directly or indirectly as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectus or tables of the insurer.
2. Any person making default in complying with the provisions of this section shall be liable for penalty which may extend to ten lakh rupees.