



TATA AIG PERSONAL ACCIDENT & LOSS OF JOB

UIN: TATPAGP20040V011920

POLICY WORDINGS

Tata AIG General Insurance Co. Ltd.

Registered Office:

Peninsula Business Park, Tower A, 15th Floor,

G.K. Marg, Lower Parel, Mumbai – 400013

24X7 Toll Free No: 1800 266 7780 or 1800 22 9966 (Senior Citizen)

Fax: 022 6693 8170

Email: customersupport@tataaig.com Website: www.tataaig.com

IRDA of India Registration No: 108 CIN:U85110MH2000PLC128425

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 in excess of Aggregate Deductible 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.

Preamble

We will provide the insurance cover detailed in the Policy to the Insured Persons up to the Sum Insured subject to:

- i. The terms, conditions and exclusions of this Policy,
- ii. Statements in the proposal/enrolment form and information disclosed to Us by You or on Your behalf and on behalf of all persons to be insured which is incorporated into the Policy and is the basis of it.

Commencement of risk cover under the policy is subject to receipt of premium by Us.

Our liability at any time shall not exceed the maximum sum insured applicable for the benefit as specified in Your policy schedule or Certificate of insurance.

In case of any other sum insured and coverage restrictions, the same shall be clearly specified in Your Policy schedule/Certificate of Insurance.

I. Coverage

In consideration of payment of the premium and receipt thereof by the Company and subject to the terms, conditions and deductible of this Policy, the Company will pay the benefit sum insured as specified on the policy schedule/certificate of insurance, during the policy term; if You suffer a loss due to coverage mentioned under following Sections:

C1: Personal Accident

C1.1 Accidental Death:

If an Insured Person suffers an accident during the policy period and this is the proximate cause of his death within 365 days from the date of accident, then We will pay to Insured person's beneficiary or legal representative the benefit Sum Insured specified in the Policy Schedule/Certificate of insurance.

C1.2 Disappearance

We will pay the benefit 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 or as a result of any Acts of God, subject to all other terms and provisions of the Policy.

Specific Exclusions applicable to Section C1

- i. Intentional self- Injury, suicide,
- ii. Arising or resulting from the insured person(s) committing any breach of law with criminal intent; or
- iii. Being under the influence of drugs, alcohol, or other intoxicants or hallucinogens by the insured person unless properly prescribed by a Physician and taken as prescribed; or
- iv. War, civil war, invasion, insurrection, revolution, act of foreign enemy, hostilities (whether War be declared or not), rebellion, mutiny, use of military power or usurpation of government or military power; or
- v. Serving in any branch of the Military or Armed Forces of any country, whether in peace or War, and in such an event We, upon

written notification by You, shall return the pro rata premium for any such period of service; or

- vi. Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from burning nuclear fuel; or
- vii. The radioactive, toxic, explosive or other dangerous properties of any explosive nuclear equipment or any part of that equipment; or
- viii. Caused due to act of terrorism.
- ix. Participation in winter sports, skydiving/parachuting, hang gliding, bungee jumping, scuba diving, mountain climbing (where ropes or guides are customarily used), riding or driving in races or rallies using a motorized vehicle or bicycle, caving or pot-holing, hunting or equestrian activities, skin diving or other underwater activity, rafting or canoeing involving white water rapids, yachting or boating outside coastal waters (2 miles), participation in any Professional Sport, any bodily contact sport or any other hazardous or potentially dangerous sport for which you are trained or untrained; or

C2: Resignation from Employment:

We will pay the Sum Insured as stated in Policy Schedule/Certificate of Insurance if you suffer Loss of Income during the Period of Insurance due to your resignation from the employment arising out of accidental bodily injury sustained resulting into any of the following:

- i. Permanent Total Disablement
- ii. Permanent Partial Disablement
- iii. Temporary Total Disablement

Specific Exclusions applicable to Section C2

No Claims are payable under the Policy in case of following:

1. The Company shall not be liable to make any payment under this Section in the event of termination, dismissal, temporary suspension or retrenchment from employment of the Insured being attributed to any dishonesty or fraud on the part of the Insured or his willful violation of any rules of the employer or laws for the time being in force or any disciplinary action against the Insured by the employer.
2. Any Loss of Income due to Resignation for reasons other than mentioned under Coverage Section C2 or due to illness/disease
3. The Company shall not be liable to make any payment under this Policy in connection with or in respect of unemployment at the time of inception of the Period of Insurance or arising within the first 90 days of inception of the Period of Insurance.
4. Any unemployment from a job under which no salary or any remuneration is provided to the Insured
5. Any loss of Income due to retirement whether voluntary or otherwise
6. Any Resignation due to non-confirmation of employment after or during such period under which the Insured was under probation
7. If accidental Injury is direct or indirect result of carrying out the duties of your occupation, If your occupation involves;
 - i. Working above 10 meters from ground
 - ii. Working underground
 - iii. Working offshore
 - iv. Underwater diving
 - v. Working with explosives
 - vi. Employment in armed forces
8. Claims due to self-inflicted injury, being under the influence of alcohol or drugs
9. Claims due to any accidental Injury/disability or its related complications that occurred prior to Period of Insurance
10. Claims arising directly due to participation in winter sports, skydiving/parachuting, hang gliding, bungee jumping, scuba

diving, mountain climbing (where ropes or guides are customarily used), riding or driving in races or rallies using a motorized vehicle or bicycle, caving or pot-holing, hunting or equestrian activities, skin diving or other underwater activity, rafting or canoeing involving white water rapids, yachting or boating outside coastal waters (2 miles), participation in any Professional Sport, any bodily contact sport or any other hazardous or potentially dangerous sport for which you are trained or untrained.

Limitations applicable to Coverage Section I

- In the event of more than one claim is/are lodged under the Section I (Coverage) of this policy, We shall only pay for only one claim under Section C2 (Resignation from Employment).
- Upon payment of the claim under the Section C2 (Resignation from Employment) of this policy, the cover would cease to continue due to all aspects (except Section C1). However, the coverage for Section C1 (Personal Accident) of this policy shall continue till the expiry of the policy.

II. General Definitions

The terms defined below and at other junctures in the Policy Wording have the meanings ascribed to them wherever they appear in this Policy and, where appropriate, references to the singular include references to the plural; references to the male include the female and references to any statutory enactment include subsequent changes to the same:

1. Accident

An accident means sudden, unforeseen and involuntary event caused by external, visible and violent means.

2. EMI or EMI Amount

EMI means and includes the amount of monthly payment required to repay the principal amount of Loan and Interest by the Insured as set forth in the amortization chart referred to in the loan agreement (or any amendments thereto) between the Bank/Financial Institution and the Insured person prior to the date of occurrence of the Insured Event under this Policy. For the purpose of avoidance of doubt, it is clarified that any monthly payments that are overdue and unpaid by the Insured prior to the occurrence of the Insured Event will not be considered for the purpose of this Policy and shall be deemed as paid by the Insured.

3. 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.

4. Hazardous or Potentially dangerous Sport

Hazardous or potentially dangerous sport shall mean those sports / activities which involves speed, height, a high level of physical exertion etc and holds high degree of risk.

5. 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.

6. Insured Event

Insured Event means any event specifically mentioned as covered under this Policy and which is in accordance with the Policy Terms and Conditions.

7. Medical Practitioner

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.

8. Permanent Partial Disablement or PPD

Permanent Partial Disablement means bodily injury of such nature as permanently reduces the earning capacity of the Insured/Insured Person in any employment, which he was capable of undertaking at the time of accident described as given below.

- Sight of one eye
- One hand or One foot
- Loss of toes-all
- Loss of Toes Great - both phalanges
- Loss of Toes Great - one phalanges
- Loss of Toes Other than great, if more than one toe lost, each
- Loss of hearing-both ears
- Loss of hearing –one ear
- Loss of speech
- Loss of four fingers and thumb of one hand
- Loss of four fingers
- Loss of thumb –both phalanges
- Loss of thumb- one phalanx
- Loss of index finger-three phalanges
- Loss of middle finger-three phalanges
- Loss of ring finger-three phalanges
- Loss of little finger-three phalanges
- Loss of metacarpals-first or second, third, fourth or fifth

9. Permanent Total Disablement or PTD

Permanent Total Disablement means bodily injury, which permanently, totally and absolutely prevents Insured/Insured Person from engaging in any kind of occupation whatsoever described as given below:

- Loss of sight of both eyes
- Physical separation of two entire hands or two entire feet
- Loss of one entire hand and one entire foot
- Loss of sight of one eye and such loss of one entire hand or one entire foot
- Complete loss of hearing of both ears and complete loss of speech
- Complete loss of hearing of both ears and loss of one limb/loss of sight of one eye
- Complete loss of speech and loss of one limb/loss of sight of one eye

The term "Loss" used with reference to hand/foot means 'loss by physical severance of such hand/foot.

10. Policyholder

The Policyholder shall be the Employer who has taken the group insurance policy as a service benefit for his Employees or a Group Manager of a homogeneous group of persons who assemble together for a commonality of purpose and there is a clearly evident relationship between the member and group manager for services other than insurance.

11. Portability

Portability means the right accorded to an individual health insurance policyholder (including family cover) to transfer the credit gained by the insured for pre-existing conditions and time bound exclusions if the policyholder chooses to switch from one insurer to another insurer or from one plan to another plan of the

same insurer, provided the previous policy has been maintained without any break.

12. Policy Period

Policy period means the period between the inception date and the expiry date of the Policy/Certificate of Insurance as specified in the Schedule to this Policy/Certificate of Insurance or the date of cancellation of this policy/Certificate of Insurance, whichever is earlier.

13. Pre-Existing Disease

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.

14. Professional Sports

Professional Sports means a sport, which would remunerate a player in excess of 50% of his or her annual income as a means of their livelihood.

15. Temporary Total Disablement or TTD

Temporary Total Disablement means disablement, which temporarily and entirely prevents an Insured Person from engaging in or giving attention to the Insured Person's usual occupation.

16. Renewal

Renewal means the terms on which the contract of insurance can be renewed on mutual consent with a provision of grace period for treating the renewal continuous for the purpose of gaining credit for pre-existing diseases, time-bound exclusions and for all waiting periods.

17. We/Us/Our/Company

We/Us/Our/Company means TATA AIG General Insurance Company Limited.

18. Winter Sports

Winter Sports shall mean snow skiing, Heli Skiing, Mountaineering & Ice Climbing, Auli skiing or sports held in the open air on snow or ice.

19. You/Your/Yourself

Means the Policy Holder and/or Insured Person(s) who is named in the Policy Schedule/Certificate of Insurance.

III. General Exclusions

The Company shall not liable to make any payment under this policy in connection with or in respect of:

1. Self Employed Person
2. Claim arising or resulting from the Insured person committing any breach of law with criminal intent
3. Claim arising due to, or arising out of, or directly or indirectly connected with or traceable to, war, invasion, act of foreign enemy, hostilities (whether war be declared or not) civil war, rebellion, revolution, insurrection, mutiny, military or usurped power, seizure, capture, arrests, restraints.

IV. General Conditions

1. Condition Precedent

- i. Condition Precedent means a policy term or condition upon which the Insurer's liability under the policy is conditional upon.
- ii. The fulfilment of the terms and conditions of this Policy (including the payment of premium by the due dates mentioned in the Schedule) insofar as they relate to anything to be done or complied with by You or any Insured Person shall be conditions precedent to Our liability.

iii. The premium for the policy will remain the same for the policy period as mentioned in the policy schedule.

iv. No change in this Policy shall be valid unless a valid endorsement is passed in the policy.

2. Insured Person

Only those persons named as an Insured Person in the Certificate of insurance shall be covered under this Policy.

3. Entire Contract

i. This Policy, its Schedule, endorsement(s), proposal/ enrolment form constitutes the entire contract of insurance. No change in this policy shall be valid unless approved by Us and such approval be endorsed hereon.

ii. This Policy and the policy Schedule/Certificate of insurance shall be read together as one contract and any word or expression to which a specific meaning has been attached in any part of this Policy or of the Schedule shall bear such meaning wherever it may appear.

4. Fraud

i. We will not be liable to pay under the policy if any claim is in any manner dishonest or fraudulent, or is supported by any dishonest or fraudulent means or devices, whether by You or any Insured Person or anyone acting on behalf of You or an Insured Person.

ii. In the event of fraud done by the insured person, the certificate of insurance shall be terminated ab initio without any premium refund.

5. Mis-representation, or non-disclosure of material facts

We will not be liable to pay under the policy if any Mis-representation or non-disclosure of material facts is noted at the time of claim or otherwise, whether by You or any Insured Person or anyone acting on behalf of You or an Insured Person, & policy schedule/certificate of insurance shall be void ab-initio without any premium refund.

6. Renewal conditions

i. The Policy is ordinarily renewable lifelong unless You or any one acting on behalf of You has acted in a fraudulent manner or any misrepresentation under or in relation to this policy or renewal of the Policy poses a moral hazard.

ii. The Policy/Certificate of Insurance may be renewed upon payment of premium which is due and 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.

iii. Your premium will also change if you change the plan.

iv. The Policy may be renewed by mutual consent and in such event the renewal premium should be paid to Us on or before the date of expiry of the Policy or within the grace period of 30 days from the expiry of the Policy. Grace Period of 30 days for renewing the Policy/Certificate of Insurance is provided under this Policy. If the renewal is made within the grace period, continuity of benefits will be allowed. We will not be liable to pay for any claim under this policy that occur during the grace Period. Grace period at the time of renewal is applicable for all policies irrespective of premium payment frequency.

v. 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.

vi. Any revision / modification in the product will be done with the approval of the Insurance Regulatory and Development Authority of India (IRDAI) and will be intimated to You at least 3 months in advance.

7. 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 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.

8. Withdrawal of Policy

- i. In the likelihood of this product being withdrawn in future, we will intimate you about the same 3 months prior to expiry of the policy.
- ii. You will have the option to migrate to similar health insurance product 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 as per portability guidelines issued by IRDAI.

9. Portability

We shall allow portability under this policy which shall be in accordance with portability guidelines as defined by the IRDAI from time to time.

10. Notices

Any notice, direction or instruction under this Policy shall be in writing and if it is to:

- a. The Insured Person, then it shall be sent to You at Your address specified in the Schedule to this Policy
- b. Us, it shall be delivered to Our address specified in the Schedule to this Policy/Certificate of Insurance. No insurance agents, brokers or other person or entity is authorised to receive any notice, direction or instruction on Our behalf unless We have expressly stated to the contrary in writing.

11. Termination

- i. You may terminate this Policy / Certificate of Insurance at any time by giving Us written notice, and the Policy/Certificate of Insurance shall terminate when such written notice is received.
- ii. In case of master policy, each Certificate of Insurance will get terminated on the earliest of the following dates:
 - a. The date You or We cancel the Certificate of Insurance
 - b. The member opts out of the scheme/group
- iii. If no claim has been made under the Policy/Certificate of Insurance, then We will refund premium in accordance with the short rate table below :

Length of time Policy in force	1 Year
Upto 1 Month	85.00%
>1 month & Upto 3 Months	70.00%
>3 months & Upto 6 Months	50.00%
>6 months & Upto 12 Months	Nil

- iv. We may at any time terminate this Policy /Certificate of insurance on grounds of misrepresentation, fraud, non-disclosure of material facts or non-cooperation by You or anyone acting on Your behalf or on behalf of an Insured Person by sending an endorsement to Your address shown in the Schedule to this Policy.
- v. In the event of termination of this Policy/Certificate of insurance on grounds of mis-representation, fraud, non-disclosure of

material facts, the policy shall stand cancelled ab-initio and there will be no refund of premium.

- vi. In the event the policy/Certificate of insurance is terminated on grounds of non-cooperation of the Insured Person the premium shall be computed in accordance with Our short rate table for the period the Policy has been in force, upon 15 days notice by sending an endorsement to Your address shown in the Schedule provided no claim has occurred up to the date of termination. In the event a claim has occurred in which case there shall be no return of premium.

12. Free Look Period

- i. You have a period of 15 days from the date of receipt of the Policy /Certificate of Insurance 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/Certificate of insurance stating the reasons for cancellation.
- ii. You will be refunded the premium paid by You after adjusting the stamp duty charges and proportionate risk premium.
- iii. You can cancel Your Policy/Certificate of insurance only if You have not made any claims under the Policy.
- iv. All Your rights under this Policy will immediately stand extinguished on the free look cancellation of the Policy.
- v. Free look provision is not applicable and available at the time of renewal of the Policy.

V. Claims Procedure and Claims 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. Please use the Claim Intimation Form for intimation of a claim.

You can even write to us at general.claims@tataaig.com and scan documents may be submitted at paclaim.support@tataaig.com to initiate claim processing

- Do keep your policy/certificate number and also keep a set of copy of claim documents with you
- Please quote your policy/certificate number and Claim Number in all your correspondences
- Please provide the following information at the time of intimation of claim
 - Name of Insured person
 - Date & Time of Loss
 - Nature of injury /accident
 - Name of hospital / doctor where treatment taken (if applicable)
 - E-mail ID & mobile/ telephone no. of insured
- Intimation about an event or occurrence that may give rise to a claim under this policy must be given within 30 days of its happening. The Company will examine and relax this time limit mentioned herein depending upon the merits of the case.

B. Claim Notification

It is a condition precedent to Our liability hereunder that written notice of claim must be given by You to Us within seven (7) days after an actual or potential loss begins or as soon as reasonably possible and in any event no later than (30) Days after an actual or potential loss begins. Failure to furnish such evidence within the time required shall not invalidate nor reduce any claim if you can satisfy us that it was not reasonably possible for you to give proof within such time.

We may accept claims where documents have been provided after a delayed interval only in special circumstances and for the reasons beyond the control of the Insured Person.

C. Supporting Documentation & Examination

- i. You or someone claiming on Your behalf shall provide Us with documentation/ medical records and information We may request to establish the circumstances of the claim, its quantum or Our liability for the claim within 15 days or earlier of Our request or occurrence of the insured event.
- ii. Failure to furnish such evidence within the time required shall not invalidate nor reduce any claim if you can satisfy us that it was not reasonably possible for you to give proof within such time.
- iii. We may accept claims where documents have been provided after a delayed interval only in special circumstances and for the reasons beyond the control of the Insured Person.
- iv. **Such documentation will include the following:**
 - a. Our claim form -duly completed and signed for on behalf of the Insured Person
 - b. **Applicable to Section C1 (Personal Accident):**
 1. Original Attested copy of Death Certificate
 2. In the event of disappearance where death certificate is not issued, we would require missing compliant report filed with the police authorities or police inquest/ investigation report.
 3. Copy of death summary, all previous medical records, if hospitalised / treatment given.
 4. Legal heir/succession certificate, if required
 5. PM report (wherever applicable and conducted)
 6. Regulatory requirements as amended from time to time, currently mandatory NEFT (to enable direct credit of claim amount in bank account) and KYC (recent ID/Address proof and photograph) requirements
 - c. **Applicable to Section C2:**
 1. Salary Slips
 2. Proof of Loss of Income/Form 26AS
 3. Appointment/Confirmation letter from the employer at the time of Claim
 4. Regulatory requirements as amended from time to time, currently mandatory NEFT (to enable direct credit of claim amount in bank account) and KYC (recent ID/Address proof and photograph) requirements
 5. Resignation letter of employee
 6. Medical Certificate from Medical Practitioner
 7. Proof of Accident/Injury/treatment papers
 8. Medical Practitioner's prescription advising drugs / diagnostic tests / first consultation letter and subsequent prescriptions
 9. Pathological / Radiological / Diagnostic test reports
 10. First Information Report/ Final Police Report/MLC, if applicable
- v. For any claim related assistance, notification of claim and submission of claim related documents, insured person can contact Us through:
 - Website : www.tataaig.com
 - Toll Free No.: 1800 266 7780/ For Senior Citizens: 1800 22 9966
 - Courier:

Accident & Health Claims Department (Tata AIG Personal Accident & Loss of Job policy)

Tata-AIG General Insurance Co. Ltd.

A-501,5th Floor, Bldg No -4, Infinity Park,

Dindoshi, Malad (E)

Mumbai 400 097

We at our own expense, shall have the right and opportunity to examine insured persons through independent Medical Practitioner whose details will be notified to insured person when and as often as We may reasonably require during the pendency of a claim hereunder. In case of forced resignations, We shall have the right to carry out investigations to establish authenticity of such claims.

D. Claims Payment

- i. We shall be under no obligation to make any payment under this Policy unless We have received all the premiums which are due for that policy and We have been provided with the documentation and information requested to establish the circumstances of the claim, its quantum or Our liability for it, and unless the Insured Person has complied with his obligations under this Policy.
- ii. We will only make payment to You under this Policy. Your receipt shall be considered as a complete discharge of Our liability against any claim under this Policy.
- iii. In the event of Your death, We will make payment to the Nominee (as named in the Certificate of Insurance).
- iv. We shall settle or reject a claim, as may be the case, within 30 days of the receipt of the last 'necessary' document
- v. 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 document.
- vi. 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.
- vii. All claims will be settled in accordance with the applicable regulatory guidelines, including IRDAI (Protection of Policyholders Interests Regulation), 2017.

VI. Customer Grievance Redressal Procedure

The Company is committed to extend the best possible services to its customers. However, if **you** are not satisfied with **our** services and wish to lodge a complaint, please feel free to call **our** 24X7 Toll free number 1800-266-7780/022-66939500 (tolled) or **you** may email to the customer service desk at customersupport@tataaig.com. Senior citizens can call our dedicated line at 1800 22 9966.

Nodal Officer

Please visit **our** website at www.tataaig.com to know the contact details of the nodal officer for **your** servicing branch.

After investigating the grievance internally and subsequent closure, **We** will send **Our** response within a period of 10 days from the date of receipt of the complaint by the Company or its office in Mumbai. In case the resolution is likely to take longer time, **We** will inform **you** of the same through an interim reply.

Escalation Level 1

For lack of a response or if the resolution still does not meet **your** expectations, **you** can write to manager.customersupport@tataaig.com. After investigating the matter internally and subsequent closure **We** will send **Our** response within a period of 8 days from the date of receipt at this email id.

Escalation Level 2

For lack of a response or if the resolution still does not meet **your** expectations, **you** can write to the Head - Customer Services at head.customerservices@tataaig.com. After examining the matter, **We** will send **you** our final response within a period of 7 days from the date of receipt of **your** complaint on this email id.

Within 30 days of lodging a complaint with **us**, if **you** do not get a satisfactory response from **us** and **you** wish to pursue other avenues for redressal of grievances, **you** may approach Insurance Ombudsman appointed by IRDAI under the Insurance Ombudsman Scheme..

NAMES OF OMBUDSMAN AND ADDRESSES OF OMBUDSMAN CENTRES

Office of the Ombudsman	Address & Contact details	Jurisdiction of Office Union Territory, District
AHMEDABAD	Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor, Tilak Marg, Relief Road, Ahmedabad – 380 001. Tel.: 079 - 25501201/02/05/06 Email: bimalokpal. ahmedabad@ecoi.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, 1st Phase, Bengaluru – 560 078. Tel.: 080 - 26652048 / 26652049 Email: bimalokpal. bengaluru@ecoi.co.in	Karnataka
BHOPAL	Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp. Airtel Office, Near New Market, Bhopal – 462 003. Tel.: 0755 - 2769201 / 2769202 Fax: 0755 - 2769203 Email: bimalokpal. bhopal@ecoi.co.in	Madhya Pradesh, Chattisgarh
BHUBANESHWAR	Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar – 751 009. Tel.: 0674 - 2596461 /2596455 Fax: 0674 - 2596429 Email: bimalokpal. bhubaneswar@ecoi.co.in	Orissa
CHANDIGARH	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: bimalokpal. chandigarh@ecoi.co.in	Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir, Chandigarh
CHENNAI	Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018. Tel.: 044 - 24333668 /	Tamil Nadu, Pondicherry Town and Karaikal (which are part of Pondicherry).

	24335284 Fax: 044 - 24333664 Email: bimalokpal. chennai@ecoi.co.in	
DELHI	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: bimalokpal. delhi@ecoi.co.in	Delhi
GUWAHATI	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: bimalokpal. guwahati@ecoi.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 Email: bimalokpal. hyderabad@ecoi.co.in	Andhra Pradesh, Telangana, Yanam and part of Territory of Pondicherry.
JAIPUR	Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141 - 2740363 Email: Bimalokpal. jaipur@ecoi.co.in	Rajasthan
ERNAKULAM	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: bimalokpal. ernakulam@ecoi.co.in	Kerala, Lakshadweep, Mahe-a part of Pondicherry
KOLKATA	Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 / 22124340	West Bengal, Sikkim, Andaman & Nicobar Islands

	Fax : 033 - 22124341 Email: bimalokpal. kolkata@ecoi.co.in	
LUCKNOW	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: bimalokpal. lucknow@ecoi.co.in	Districts of Uttar Pradesh : Laitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Gorkhpur, Ghazipur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Amethi, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Kaushambi, Mau, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Deoria, Chandauli, Ballia, Sidharathnagar
MUMBAI	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: bimalokpal. mumbai@ecoi.co.in	Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane
NOIDA	Office of the Insurance Ombudsman, Bhagwan Sahai Palace 4th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddh Nagar, U.P-201301. Tel.: 0120-2514250 / 2514252 / 2514253 Email: bimalokpal. noida@ecoi.co.in	State of Uttaranchal and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Oraiyya, Bulandshehar, Etah, Kanoj, Mainpuri, Mathura, Meerut, Hathras, Moradabad, Muzaffarnagar, Pilibhit, Etawah, Farrukhabad, Firozbad, Hardoi, Gautambodhanagar, Ghaziabad, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Kanshiramnagar,

		Saharanpur
PATNA	Office of the Insurance Ombudsman, 1st Floor, Kalpana Arcade Building, Bazar Samiti Road, Bahadurpur, Patna 800 006. Tel.: 0612-2680952 Email: bimalokpal. patna@ecoi.co.in	Bihar, Jharkhand
PUNE	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: bimalokpal. pune@ecoi.co.in	Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region

Prohibition of Rebates - Section 41 of the Insurance Act, 1938 as amended by Insurance Laws (Amendment) Act, 2015.

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 the 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 prospectuses or tables of the insurer.
2. Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakh rupees.

“Insurance is the subject matter of the solicitation”. For details on benefits, exclusions, limitations, terms & conditions, please refer sales brochure/policy wordings carefully, before concluding a sale.”