Group Personal Accident

Customer Information Sheet / Know Your Policy

This document provides key information about your policy. You are advised to go through your policy document. Description is illustrative and not exhaustive.

<table>
<tr><th>Sr. No</th><th>Description
(Please refer to applicable Policy Clause Number in next column)</th><th>Policy Clause Number</th></tr>
<tr><td>1</td><td>Name of Insurance Product/Policy:
Group Personal Accident</td><td></td></tr>
<tr><td>2</td><td>Policy Number:
XXXX/XXXXXX/XX/XXXX</td><td></td></tr>
<tr><td>3</td><td>Type of Insurance Product/Policy:
Benefit</td><td></td></tr>
<tr><td>4</td><td>Sum Insured (Basis):
INR XX,XXXX
Sum insured of the individual policy as per PF</td><td></td></tr>
<tr><td>5</td><td><u>Benefit Covers:</u>
<table>
<tr><th>Cover Name</th><th>Payout</th></tr>
<tr><td>Policy Coverage:

<As per the Quote including Special Conditions and Exclusions, all details that are currently captured in the master policy for 4005/M GPA product></td><td></td></tr>
<tr><td>Benefit: Insured Event - Death resulting from Accident</td><td>As per the enrolment Annexure of the Group Policy</td></tr>
<tr><td>Benefit: Insured Event - Permanent Total Disablement (PTD) resulting from Accident</td><td>As per the enrolment Annexure of the Group Policy</td></tr>
<tr><td>Benefit: Insured Event - Permanent Partial Disablement (PPD) resulting from Accident</td><td>As per the enrolment Annexure of the Group Policy</td></tr>
<tr><td>Benefit: Insured Event - Temporary Total Disablement (TTD) resulting from Accident</td><td>As per the enrolment Annexure of the Group Policy</td></tr>
</table></td><td>As per the policy coverage description below

2.1

2.2

2.3

2.4</td></tr>
</table>

	Maximum Liability of the Company for Benefits Mentioned from Section 2.1 to 2.4	2.5
	Extension Covers:	
	Cover for Expenses related to Burns	3.1
	Modification of residential accommodation & vehicle	3.2
	Repatriation of Mortal Remains	3.3
	Ambulance Charges	3.4
	Transportation Allowance (Compassionate visit)	3.5
	Travel expenses for medical treatment	3.6
	Catastrophe Evacuation	3.7
	Cost of clothing damage	3.8
	Loss of Job cover	3.9
	Improved Disability Benefit/ Dismemberment	3.10
	Daily Cash Allowance	3.11
	Carriage of Dead Body	3.12
	On Duty Cover	3.13
	Children's Education Grant	3.14
	Accidental Hospitalization Expenses	3.15
	Mysterious Disappearance	3.16
	Treatment outside India (along with travelling cost & boarding & lodging of the attendant)	3.17
	Medical Expenses	3.18
	Out Patient Department (OPD) expenses	3.19
	Loss/damage to School Bag/Books	3.20
	Widowhood cover	3.21
	Purchase of blood	3.22
	Prosthesis & Artificial Limbs	3.23
	Broken Bones	3.24
	Legal Expenses	3.25
6	**Exclusions (What the policy does NOT cover)** The Company shall not be liable under this policy for: a) Compensation in more than one base benefit other than extensions if opted b) Benefit over and above base covers unless opted separately c) Payment in multiple claims for same event unless opted separately d) Payment of compensation relating to medical expenses until an additional premium is paid for the same as mentioned in Part I Schedule to this policy. e) Payment of compensation in respect of death, injury or disablement of insured person from:	4

	i. Intentional self-injury, suicide or attempted suicide ii. The influence of intoxicating liquor or drugs iii. Whilst engaging in air travel other than as passenger in common carrier f) Payment of compensation in respect of death, injury or disablement of insured person from: i. Adventure sports as defined in policy wordings ii. Directly or indirectly caused by venereal disease; iii. Arising or resulting from the Insured committing any breach of the law. g) Claims arising out of 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 and detainment of all kinds. h) Payment of compensation in respect of death of, or bodily injury or any disease or illness to the Insured Persons. i. Directly or indirectly caused by or contributed to by or arising from ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste or from the combustion of nuclear fuel. For the purpose of this exception, combustion shall include any self-sustaining process of nuclear fission. ii. Directly or indirectly caused by, contributed to by, or arising from nuclear weapon Materials. i) Claim for aggravated or prolonged by childbirth or pregnancy or in consequence thereof. j) Claim for Persons while serving in any branch of the Military or Armed Forces of any country during war or warlike operations. **Special condition applicable to all the exclusion:** If the Company alleges that by reason of any of the above exclusion i.e. any loss, damage, cost or expenses is not covered by this insurance, the onus of proving the contrary shall be upon the Insured. (Note: The above is only an indicative list of policy exclusions. Please refer to the policy wordings for the full listing)	
7	**Waiting period:** • Time period during which specified diseases/treatments are not covered	

	• It is counted from the beginning of the policy coverage Initial waiting period/Specific Waiting Periods /Pre-existing diseases: Not applicable for claims arising due to an accident).	
8	**Financial limits of coverage:** **i. Sub-limit** (It is a pre- defined limit and the insurance company will not pay any amount in excess of this limit Not applicable **ii. Co-payment:** (It is a specified amount /percentage of the admissible claim amount to be paid by policyholder/insured) Not applicable **iii. Deductible** It is a specified amount: - Up to which an insurance company will not pay any claim, and - Which will be deducted from total claim amount (if claim amount is more than the specified amount) Not applicable	
9	**Claim Procedure:** The procedure of lodging the claim shall be as under: Upon the happening of any event giving rise or likely to give rise to a claim under this Policy: • Claims under this policy should be intimated and registered with the Company on our 24x7 toll free helpline 1800 2666 and in writing to our address. • The list of documentation required is provided in the policy wordings. • The Insured shall intimate the claims with all the necessary documents to our claim processing team immediately and in any event within 7 days of claim intimation. (b) The Insured shall deliver to the Company, within 14 days of the date on which the event shall have come to his knowledge, a detailed statement in writing as per the claim form and any other material particular, relevant to the making of such claim. Customer to send documents to Company at :- ICICI Lombard General Insurance Company Limited	5 & 6

	1st, 4th (Half) , 5th and 6th floors, Varun Towers- II , Opp. Hyderabad Public school , Begumpet Hyderabad District Hyderabad , Pin code -500016 Benefits payable under this policy will be paid within 15 days of the receipt of claim along with claim form and required documents. Download the Claim Form here https://www.icicilombard.com/downloads Find our extensive list of hospitals providing services on our website https://www.icicilombard.com/health-insurance/health-claim/partner-hospital or on the IL TakeCare App. List of excluded providers/delisted hospitals is available on our website https://www.icicilombard.com/docs/default-source/apps/healthclaims/assets/files/delisted-hospital-list.pdf	
10	**Policy Servicing:** Contact us via: • Website: https://www.icicilombard.com/customer-support • IL TakeCare App • WhatsApp: 7738282666 (for policy download only) • Toll-free number: 1800 2666 • Email: customersupport@icicilombard.com	
11	ln case of any grievance the insured person may contact the Company through Website: www.icicilombard.com Toll free: 1800 2666 Email: customersupport@icicilombard.com ICICI Lombard General Insurance Co. Ltd. Ground floor- Interface 11, Sixth floor- Interface 16 , Office no 601 & 602, New linking Road, Malad (West), Mumbai – 400064 There is an interactive voice response (IVR) facility for senior citizens' grievance redressal for easy and faster resolution lnsured person may also approach the grievance cell at any of the company's branches with the details of grievance. For branch details, please visit https://www.icicilombard.com/docs/default-source/policy-wordings-product-brochure/final-gro-mapping.pdf.	Part III 20

	If Insured person is not satisfied with the redressal of grievance ,insured person may contact the grievance redressal officer at the details provided in the below link: https://www.icicilombard.com/grievanceredressal.com If Insured person is not satisfied with the redressal of grievance, the insured person may also approach Insurance Regulatory and Development Authority of India (IRDAI) through the Bima Bharosa Portal - https://bimabharosa.irdai.gov.in/ or IRDA Grievance Call Centre(IGCC) at their toll free no. 1800 4254 732 / 155255 Insured may also approach Insurance Ombudsman, subject to vested jurisdiction, for the redressal of grievance. Details of Insurance Ombudsman offices are available at IRDAI website: www.irdai.gov.in, or on the Company's website at www.icicilombard.com or on https://www.cioins.co.in/Ombudsman	
12	**Things to Remember** **Free Look Period** Every insured of new health insurance policies, except for those policies with tenure of less than a year, shall be provided a free look period of 30 days beginning from the date of receipt of policy document, whether received electronically or otherwise, to review the terms and conditions of such policy. If the insured cancels the policy within free look period then the insured shall be entitled to a refund of the premium paid subject only to a deduction of a proportionate risk premium for the period of cover and the expenses, if any, incurred by the insurer on medical examination of the insured and stamp duty charges. **Withdrawal of Policy** i. In the likelihood of this product being withdrawn in future, the Company will intimate the insured person about the same 90 days prior to expiry of the policy. ii. Insured Person will have the option to migrate to similar health insurance product available with the Company at the time of renewal with all the accrued continuity benefits such as cumulative bonus, waiver of waiting periodas per regulatory prescriptions, provided the policy has been maintained without a break Moratorium Period **Renewal**: The policy can be renewed as a separate contract under the prevailing ICICI Lombard Group Personal Accident Insurance product or its nearest substitute (in case the product is withdrawn by the Company)	

The policy shall ordinarily be renewable except on grounds of established fraud, or misrepresentation or non- cooperation by the insured.
On renewal of the policy, the benefit provided under the policy and/or terms and condition of the policy including premium may be subject to change.

Migration: In case of migration of this policy with the Company, the insured can transfer the credits gained to the extent of the Sum Insured and benefits available in the previous policy to the migrated policy. The Company may underwrite the proposal in case of migration, if the insured is not continuously covered for 36 months.

Portability:
a. The insured has the choice to port his / her policies from one Insurer to another. An Insured desirous of porting his/her policy to another insurer shall apply to such insurer to port the entire policy along with all the members of the family, if any, at least 30 days before, but not earlier than 60 days from the due date for renewal.b. The insured is entitled to transfer the credits gained to the extent of the sum insured and the benefits available in the previous policy, subject to the underwriting policy of the Company c. The Company shall decide and communicate on the proposal upon receipt of information from Existing insurer within prescribed timelines .d. This benefit is not applicable for enhanced sum insured.

Change in Sum Insured: You may change the sum insured (increase/decrease) only at the time of renewal or at any time, subject to underwriting by the company. For increase in SI, the waiting period if any shall start afresh only for the enhanced portion of the sum insured

Moratorium Period: After completion of sixty continuous months of coverage (including portability and migration) in health insurance policy, no policy and claim shall be contestable by the insurer on grounds of non-disclosure, misrepresentation, except on grounds of established fraud. This period of sixty continuous months is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy. Wherever, the sum insured is enhanced, completion of sixty continuous months would be applicable from the date of enhancement of sums insured only on the enhanced limits

13	**Your Obligations:** Please disclose all material information including occupancy/profile of the group members before buying the policy. non-disclosure may affect the claim settlement. Immediately notify us about any changes in the exposure /sum insured/occupancies of the insured members during the policy tenure. Kindly cooperate in providing all or sufficient documents, as per the claims procedure, in support of a claim.	

Declaration by the policy holder:

I have read the above and confirm having noted the details

Place

Dated Signature

NOTE: In case of any conflict, the terms and conditions mentioned in the policy document shall prevail.

The product related documents including the Customer Information sheet are available on the website at https://www.icicilombard.com/downloads