Aviation Insurance (Retail)

CUSTOMER INFORMATION SHEET

This document provides only key information about your policy. Please refer to the policy document for detailed terms and conditions.

Sl. No.	Description (Please refer to applicable Policy Clause Number in next column)	Policy Clause Number
1	**Product Name** Aviation Insurance (Retail)	
2	**Unique Identification Number (UIN) allotted by IRDAI** IRDAN115RP0007V01200607	
3	**Structure** Benefit Policy	
4	**Interests Insured** The insurance policy broadly covers Aviation Personal accident and Pilots Loss of Licence	
5	**Sum Insured / Scope** As captioned in schedule	Sr. No. 5 of Schedule or Annexure
6	**Policy Coverage** Following is the coverage's opted applicable to your policy. - Aviation Personal accident – for pilots/Crew/Passenger any bodily injury / death caused by accident violent external and visible means whilst means what being carried in standard type of aircraft anywhere in the world - Pilots Loss of Licence - in the event pilot suffers bodily injury/Illness and such be the sole and direct cause of cancellation/withdrawal/suspension of licence to serve as pilot.	Section 1 to Section 2 of the Policy Schedule
7	**Add-On Cover** **Add-On Covers**: 24 hours AVPA, Terrorism Extension, Addition and deletion of crew Other add-ons as stated in policy based on the final terms agreed during placement.	Part of Schedule
8	**Loss Participation** As defined in the policy schedule.	Part of Schedule
9	**Exclusions** **Aviation Personal Accident:** Suicide or attempted suicide whether felonious or not	Part II of the Schedule Refer Section 1 and Section 2 for Exclusions

		Disease self-injury or a deliberate self-exposure to unnecessary danger or Any breach of law by the Insured or the Insured Person. Any breach by the Insured or the Insured Person of any air navigation or airworthiness orders and requirements issued by any competent authorities or The Insured Person being in a state of insanity or under the influence of intoxicating liquor or any drug or The Insured Person flying in an aircraft used for any illegal purpose or engaged or taking part in racing, record attempts, speed trials, aerobatics aerial seeding or fertilization or crop dusting or spraying, hunting, shooting, hearding, fish spotting or any other form of flying involving abnormal hazards or Test flights after construction or reconstruction of the aircraft or The Insured Person and/or the aircraft in which he/she is flying engaging or taking part in any military naval or air force operations or manoeuveres or Landing on or taking off from unlicensed landing areas unless due to force majeure or covered by special endorsement hereon or War invasion acts of foreign enemies hostilities (whether war be declared or not) civil war, rebellion revolution insurrections military or usurped power martial law strikes riots civil commotions seizure capture arrests restraints and detainments of all kings princes and people of what nation condition or quality soever. All claims caused by or resultant from a declared endemic, epidemic and/or pandemic. Death of or bodily injury or any disease or illness to the Insured. directly or indirectly caused by or contributed to by or arising from ionizing radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. For the purpose of this exception, combustion shall include any self-sustaining process of nuclear fission. directly or indirectly caused by or contributed to by or arising from nuclear weapons material. Pregnancy Exclusion Clause : The Insurance under this Policy shall not extend to cover death or disablement resulting directly or indirectly from pregnancy or in consequence thereof. **Pilots Loss of Licence** No benefit is payable under this policy in the case of illness (whether a classified illness or not) or bodily injury or death directly or indirectly resulting from: a) War, invasion, acts of foreign enemies, hostilities, (whether war be declared or not), civil war, rebellion, revolution, insurrection, martial law, military or usurped power or attempts at usurpation of Power. b) Any hostile detonation of any weapon of war employing atomic or nuclear fission and/or fusion or other like reaction or radioactive force or matter. c) Intentional act or international omission inducing self-injury or	

	suicide or attempted suicide assault provoked by the Insured Person duelling or (except in bona- fide self-defence) fighting. d) Intentional exposure of the Insured Person to exceptional danger (except in any attempt to save human life or to prevent loss of or substantial damage to aircraft, aircraft equipment or other property of substantial value) e) All claims caused by or resultant from a declared endemic, epidemic and/or pandemic. f) Any criminal act of the Insured Person for which the Insured Person shall have been liable to Imprisonment. No benefit is payable under this Policy. a) In the case of illness (whether a classified illness or not) which is venereal disease or b) In the case of bodily injury or death resulting directly or indirectly from venereal disease or c) In the case of a sequela of venereal disease, or d) In the case of Acquired Immune Deficiency Syndrome (AIDS) or AIDS Related Complex (ARC) No benefit is payable under this Policy in the case of bodily injury or death directly or indirectly sustained while the Insured Person is in a state of permanent or temporary insanity. No benefit is payable under this Policy in respect of the loss of the license and/or the Certificate as a result of stipulations imposed by the License issuing Authority relating to the requirement of age for eligibility to hold such a License or Certificate. No liability shall attach to the Company hereunder in respect of any claim made under any Section of the Table of Benefits if the event of the death of the Insured Person but the company will waive its right of recovery in respect of any amounts which may have been paid under Section A or B of the Table of Benefits. Other exclusion as stated in policy based on the final terms agreed during placement.	
10.	**Special Condition\s and Warranties (if any)** Below is the **Conditions/Warranties** applicable to your policy: **Conditions/Warranties** 1. LOL waiting period is 90 days 2. LOL coverage for Pilots due for DGCA medical certification within frst 30 days from the policy inception, shall be covered under the policy post receipt of medical fitness clearance from DGCA. 3. Warranted that the Pilot Licence should be valid during the entire policy period. 4. Any claims caused due to pre-existing health conditions not covered	Part of Schedule

11.	**Admissibility of Claim** Claim will be Settled basis necessary documents: Aviation Personal Accident – Death Certificate, Accident FIR copy, Hospital letter Postmortem Report, etc. **Sample Claim Calculation AVPA:** Sum Agreed on policy: INR 1,00,00,000 Deductible: Nil Payable: INR 1,00,00,000 Loss of License – DGCA Form CA35, Monthly treatment documents, Permanent Medical Unfit medical Assessment issued by DGCA, Salary Slips, Form 16, Pilots License, etc. **Sample Claim Calculation LOL (Permanent Medically Unfit):** Sum Agreed on policy: INR 1,00,00,000 Deductible: Nil Payable: INR 1,00,00,000 **Sample Claim Calculation LOL (Temporary Medically Unfit):** Sum Agreed on policy: INR 1,00,00,000 % of Monthly Benefit as agreed on Policy: 1% Deductible: Nil Monthly Payable: INR 1,00,000 Any other documents will be confirmed basis the type of claim notified	
12.	**Policy Servicing - Claim Intimation and Processing** Contact details for Policy Servicing and Claim Intimation: Toll-free no.: 1800 2666, Email ID: customersupport@icicilombard.com, IL TakeCare App, or Send "Hi" to RIA on WhatsApp @7738282666. Our website: https://www.icicilombard.com/customer-support, For details of company officials, kindly visit our website: https://www.icicilombard.com/customer-support Escalation Matrix: Click here or scan the QR code below. **Reimbursement Claim Process:** Follow these steps for a hassle-free claim experience: **1. Intimate the Claim:** ▪ Notify us immediately with the claim form and supporting documents at customersupport@icicilombard.com, or call our toll-free number 1800 2666.	.

2. Claims Associate Contact:
- Our claims associate will contact you and advise the list of documents to be submitted.

3. Survey of Loss:
- Not Applicable

4. Submit Documents:
- Submit documents through the 'Upload Documents' link. The claims associate will verify and submit the interim/final assessment.

5. Offer for Settlement:
- For payable claims, you will receive an Offer for Settlement, which requires your consent.

6. Claim Payment:
- After receiving your consent and completing a KYC check, the payment will be credited to your bank account.

7. Explanation for Denial:
- If the claim is not payable, ICICI Lombard personnel will explain the reasons.

Claim Settlement Time:
- We aim to settle the claim within 7 days of receiving your claim notification or receipt of the final release and discharge, whichever is later.

Escalation Matrix and Details of Designated Company Official:
If you have a concern, click here to understand our grievance redressal process or scan this QR code. If the issue persists, contact our Grievance Redressal Officer here.

If the issue remains unresolved, you can approach the Insurance Ombudsman here or visit the Bima Bharosa Portal at bimabharosa.irdai.gov.in

Cancellation Clause:

Cancellation by You:
- You can cancel your policy anytime with written notice. The policy terminates when we receive your notice.

Cancellation by Us:
- If we detect fraud, we may cancel your policy and will provide you with at least 7 days' notice before the cancellation takes effect.

Premium Refund:
- For policies up to one year with no claims, we will refund the premium for the unexpired portion on a proportional basis, subject to policy terms.
- For policies longer than one year, we will refund the premium for the unexpired portion if risk coverage has not commenced.

Policy Renewal Date: Refer Period of Insurance of policy schedule.

13.	**Grievance Redressal and Policyholders Protection** Protection of Policyholders Interests:: (a) To ensure that Policyholders are (i) treated with fairness and impartiality; (ii) provided with clear and prompt information in relation to their policies at all times; (iii) not faced with unreasonable pressure or advice to change products or switch providers; (iv) not barred from submitting claims or making complaints. (b) Post-sale servicing of policyholders to be complemented with technological solutions to provide prompt and efficient services. Policyholders' reasonable expectations are met on servicing standards. To ensure fair treatment of prospects at the stage of solicitation and sale of insurance policies. For resolution of any query or grievance, Insured may contact the respective branch office of the Company or may call toll free no.1800-2666 or write to us at Grievance Redressal Officer. ICICI Lombard General Insurance Company Ltd. ICICI Lombard House, 414, Veer Savarkar Marg, Near Siddhi Vinayak Temple, Prabhadevi, Mumbai- 400025 or may approach us at the sub section "Grievance Redressal" on our website www.icicilombard.com (Customer Support section). Click here or Scan below QR Code for details of the Grievance Redressal Officer, Process and Details of Insurance Ombudsman, and link to Bima Bharosa Portal.	
14.	**Obligations of the Policyholder** • To disclose all information correctly sought by the insurer at the time of filling the proposal. • In case of any change / modification / addition to the already declared information, the same shall be brought to the notice of the insurer immediately. Non-disclosure of material information may affect the claim settlement. • Non-disclosure of material information may affect the claim settlement. • Disclosure of other material information during the policy period. • Any change in material information during the policy period should be brought to the notice of the insurer.	Refer General Conditions section – Point number 4 – Duties and Obligations after Occurrence of covered Insured Event.

Declaration by the Policyholder:

I have read the above and confirm having noted the details.

Place:

Date: Signature of the Policyholder

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