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.	**Title** Description (Please refer to applicable Policy Clause Number in next column)	**Policy Clause Number**
1	**Product Name**: MACHINERY BREAKDOWN INSURANCE	
2	**Unique Identification Number (UIN) allotted by IRDAI** IRDAN115RP0020V01200708	
3	**Structure**: Indemnity Based Policy	
4	**Interests Insured:** This Product offers Machinery Breakdown insurance coverage for various type of Machineries working at Various Plants & Industries as mentioned in the policy schedule.	
5	**Sum Insured / Scope:** As per Policy Schedule	Sum Insured- Policy Schedule
6	**Policy Coverage** During your policy period, we cover various types of Risks upto the Machine SI mentioned in Policy schedule. Machinery Breakdown Insurance policy covers against any unforeseen and sudden physical loss or damage by any cause unless excluded whilst at the location mentioned therein necessitating its immediate repair or replacement. For more details, please refer to your policy schedule.	
7	**Add-on Cover:** Add-Ons enhances your policy with essential covers that give you extra protection. To see the applicable add-on covers and their respective Sum Insured, kindly refer the Policy Schedule.	
8	**Loss Participation** This means you contribute a small portion towards the repair costs, and we take care of the rest, ensuring you're well-protected without bearing the full burden.	Normal Excess

	Details of Policy deductible is mentioned in Section Normal Excess under the Policy Schedule. Please refer Policy schedule for the same.	
9	**Exclusions** While our MBD Policy offers strong protection, we will not indemnify you due to any loss or damage directly or indirectly caused by or arising out of or aggravated by: - 1. The Excess stated in the Policy Schedule. 2. Loss caused by fire or clearance of debris and dismantling necessitated thereby, smoke, soot, aggressive substance, lightning, theft, collapse of buildings, subsidence, landslide, rockslide, water which escapes from water containing apparatus, flood, inundation, storm, tempest, earthquake, volcanic eruption or other Acts of God. 3. Accident, Loss, damage/and/or liability resulting from over-load experiments 4. Loss of or damage to belts, ropes, chains, rubber tires, dies, molds, blades, cutters, knives 5. Loss or damage for which the manufacturer or supplier or repairer of the property is responsible either by law or contract. 6. War, invasion, Act of foreign Enemy, Hostilities or war like operations 7. Nuclear reaction, Nuclear radiation or Radioactive contamination. 8. Gradually developing flaws, defects, cracks or partial fractures in any part not necessitating immediate stoppage 9. Deterioration of or wearing away or wearing out of any part of any machine caused by or naturally resulting from normal use or exposure. 10. Loss, damage and/or liability caused by or arising out of the willful act or willful neglect or gross negligence of the Insured 11. Loss, damage and/or liability due to faults or defects existing at the time of commencement of this insurance and known to the insured or his responsible representatives but not disclosed to the Company 12. Loss of use of the Insureds plant or property or any other consequential loss incurred by the Insured. For detailed exclusions refer to exclusions mentioned under policy schedule Section Exceptions.	Exceptions
10.	**<u>Special Condition\s and Warranties (if any)</u>** Below is the **Conditions/Warranties** applicable to your policy: **Conditions**: ▪ <XX> ▪ <XX> ▪ <XX>	Warranties, Conditions

	Warranties: ▪ <XX> ▪ <XX> ▪ <XX>	
11.	**Admissibility of Claim** As soon as any loss or physical damage occurs to any Insured Machinery due to an Insured Event. Please notify us immediately and submit the claim form along with any supporting documents to prove the loss or damage. We will evaluate your claim in line with the policy's terms, conditions, and relevant laws and regulations. We appreciate your efforts in protecting your Mechanical Projects, minimizing potential losses, and promptly notifying us of any claims. Below is the **sample claim calculation** for reference**:** *The above sample claim calculation is only illustrative based on certain assumptions to give you a fair idea on how claim will be settled. The final amount payable will be decided basis the actual sum insured opted in your policy, the coverages opted, conditions applicable, etc.*	Claim Intimation Clause
12.	**Policy Servicing - Claim Intimation and Processing** For policy servicing and claim intimation you can contact us via our: Toll-free no.: 1800 2666, Email ID: customersupport@icicilombard.com, Mobile App: IL TakeCare App, or WhatsApp: Send "Hi" to RIA @**7738282666** Website: ICICI Lombard Website	Provisions Sr. No. 13

Gross Loss Claimed	50,00,000
Gross Loss Assessed	28,00,000
Less: Salvage Value	12,00,000
Subtotal	16,00,000
Less Under Insurance	-
Subtotal	16,00,000
Less Excess	50,000
Loss Adjusted	**15,50,000**

Reimbursement Claim Process:

Follow these steps for a smooth and hassle-free claim experience:

Intimate the Claim: Notify us by submitting the claim form (download here) or by calling 1800 2666. Our claims associate will contact you and assign a surveyor.

Survey of Loss: The surveyor will assess the loss and request any documents, which you can upload here. Our team will verify and submit the final report.

Verification and Processing: Our claims department will verify the report and process your claim request.

Offer for Settlement: If your claim is approved, we will send you a settlement offer for your consent.

Claim Payment: Once we have your consent and complete the KYC check, we will transfer the payment directly to your bank account.

Explanation for Denial: If your claim is not payable, we will personally explain the reasons to you in detail.

Claim Settlement Time: We aim to settle your claim within 7 days of receiving your claim notification or the final survey report, whichever comes later.

Escalation Matrix and Details of Designated Company Official: For details of the escalation matrix and designated company officials please click here.

Cancellation Clause:

If You Decide to Cancel: You can cancel your policy anytime with written notice. It will end as soon as we receive it.

If We Need to Cancel: If fraud is detected, we may cancel your policy with at least 7 days' notice before the cancellation takes effect.

Refund of Premium upon Cancellation:

- For policies up to one year with no claims, we will refund the premium for the remaining period proportionally, based on your policy terms.

Policy Renewal Date: Refer to the **Period of Insurance** section of the policy schedule.

13.	**Grievance Redressal and Policyholders Protection** We are committed to giving you fair treatment and clear, timely information about your coverage, so you can make informed decisions. We also ensure efficient service and uphold high standards throughout the sale and servicing of your policy. **Grievance Redressal:** 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	Provisions Sr. No. 13
14.	**Obligations of the Policyholder** Here are a few important things to keep in mind: ▪ To disclose all information correctly sought by the insurer at time of filling the proposal form ▪ 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. ▪ Disclosure of other material information during the policy period. ▪ Ensure you provide accurate information when completing your proposal. ▪ Notify us right away of any changes, modifications, or additions to the declared information, as failure to disclose material details may impact your claim settlement.	Provisions Sr. No. 5

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. You can click here to download policy documents.*