Annexure B

CUSTOMER INFORMATION SHEET

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

Please Note: This Customer Information Sheet contains information specific to and available under this Product. Kindly refer to your Policy Schedule to know exact details of coverages opted by You.

Sl No	Title/ Description (Please refer to applicable Policy Clause Number in next column)	Policy/Clause Number
1	**Product Name** MISCELLANEOUS VEHICLE LIABILITY POLICY	Policy Schedule
2	**Unique Identification Number (UIN) allotted by IRDAI** IRDAN115RP0014V01200102 (Add-on (as mentioned in your policy schedule))	Policy Schedule
3	**Structure** Indemnity & Fixed Benefit	Policy Schedule
4	**Interests Insured** ▪ Motor Third Party ▪ Motor Personal Accident (if opted by you and as mentioned in your policy schedule)	Policy Schedule
5	**Sum Insured / Motor Insured Declared Value Scope** Sum Insured ▪ Motor Third party – Your Sum Insured is as per the MV Act ▪ Motor Personal Accident – Your Sum Insured (if opted by you and as mentioned in your policy schedule)	Chapter 1, Section III
6	**Policy Coverage** ▪ Motor Third party – Covers damage or injury to others and their property, with optional add-ons from (as mentioned in your policy schedule) to (as mentioned in your policy schedule) ▪ Motor Personal Accident (if opted by you)– Covers you from (as mentioned in your policy schedule) to (as mentioned in your policy schedule) For detailed coverages along with terms and conditions please refer to your policy schedule and wordings here https://www.icicilombard.com/downloads QR Code:	Chapter 1, Section II, 4
7	**Add-on Covers:** Opted by you (as mentioned in your policy schedule) are as follow:	Chapter 7
	IL Smart Assist- Comprehensive list of services (as specified in your policy schedule) to support at the every distress situation of the customer.	7.1
	Motor Sahayak: Covers accident related assistance, RTO documentation support, and reimbursement of eligible defence expenses, including support for bail application proceedings, Traffic Challan Regularization and insured vehicle release procedures, as per policy terms and conditions.	7.2

	To know detail coverages, terms and conditions, exclusions of add on covers please refer policy schedule and policy wordings.	
8	**Loss Participation:** Not Applicable	Not Applicable
9	**Exclusions:** To help you understand what isn't covered by your policy, here's a quick overview of the exclusions: Claims will not be covered if the insured vehicle is used outside the permitted limitations or driven by someone not authorized as per the Driver's Clause. Additionally, claims resulting from contractual liability, liability due to death in the course of employment, or death or injury while entering, riding, or leaving the vehicle are excluded. Any liability arising from war, invasion, foreign enemy actions, or nuclear weapons material will also not be covered. For detailed list of exclusions along with terms and conditions please refer to your policy schedule and wordings here: https://www.icicilombard.com/downloads	Chapter 2.1
10	**Special Conditions and Warranties (if any)** **Limitations of Usage:** The policy covers your vehicle for all purposes using it for hire, carrying goods (except personal luggage), organized racing or speed tests, and motor trade activities.	Chapter 4
	Driver's Clause: The policy covers any driver, including you, as long as you have a valid driving license at the time of the accident and are not disqualified from holding one, or if you have a learner's license that follows Rule 3 of the Central Motor Vehicles Rules, 1989.	Chapter 5
	Important Notice: If your vehicle is used outside the terms of this policy, you won't be covered. Any payments made by the company to comply with the Motor Vehicle Act, 1988 will need to be repaid by you. For more details, see the "Avoidance of Certain Terms and Right of Recovery" clause in your policy schedule.	Chapter 1. Section II.2
	Warranty: You must have a valid Pollution Under Control (PUC) certificate and/or Vehicle Fitness Certificate at the start of the policy and ensure they stay up to date throughout the policy period. This keeps your coverage smooth and uninterrupted.	Chapter 8
11	**Admissibility of Claim:** Claims are assessed based the coverages, exclusions and conditions outlined in your CIS, policy wording and schedule, so ensure you take care of your vehicle, minimize any potential losses, and notify us of a claim within 30 days for smooth processing. Claims are subject to the Motor Vehicle Act 1988 & 2019, Central Motor Vehicle Rules 1989, Insurance Act 1938 & 2015 and any other relevant laws or regulations. **Claim calculation process - post claim admission:** ▪ **Motor TP Claim:** As decided by the court ▪ **Motor PA Claim** (if opted by you and as mentioned in your policy schedule)**:** Paid as per Sum Insured for death or injury.	Policy Schedule

12	**Policy Servicing - Claim Intimation and Processing** For policy servicing, you can reach us through: • Toll-free number: 1800 2666 • Email: customersupport@icicilombard.com • IL TakeCare App • WhatsApp: Send "Hi" to RIA at 7738282666 Or • Website: https://www.icicilombard.com/customer-support • Contact your CSM at motorintimation@icicilombard.com **Escalation**: Report concerns using the cloud calling number sent to you on your registered contact number via SMS/WhatsApp or call 18002666. **Your Responsibilities in a Third-Party Claim:** In a third-party claim, get the victim medical help, notify us, and file an FIR. For support, contact the state Nodal Officer in your state- https://www.icicilombard.com/docs/default-source/default-document-library/motor-third-party-claims--statewise-nodal-officer-details.pdf **How to File a Motor Personal Accident Claim** (if opted by you and as mentioned in your policy schedule)**:** In the case of an accidental death or permanent disability, call 1800 2666. Send the required documents to your Claims Manager; once verified, we will handle the payment to the garage, with any balance covered by you. **Cancellation Clause:** You can cancel your policy anytime by notifying us. We can cancel only for established fraud with 7 days' notice. If no claims were made, we will refund the unused premium. For further details, please refer to your policy wordings. **Your Policy Renewal Date: Current policy end date**	Chapter 6
13	**Grievance Redressal and Policyholders Protection** **Protection of Policyholder's Interest:** We're 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 Process:** If you have a concern, click- https://www.icicilombard.com/grievance-redressal to understand our grievance redressal process. If the issue persists, contact our Grievance Redressal Officer https://service.icicilombard.com/GrievanceRedressal/GrievanceRedressalStep3 If the issue remains unresolved, you can approach the Insurance Ombudsman https://cioins.co.in/ombudsman or visit the Bima Bharosa Portal at https://bimabharosa.irdai.gov.in/	Chapter 9 & 10
14	**Obligations of the Policyholder:** **Disclosure of Information:** Please ensure all details provided in your proposal form are accurate and inform us promptly of any changes, as not doing so could affect your coverage and claims. Please make sure to share key details like a valid driver's license, PUC certificate, vehicle registration, correct no-claim bonus and any past claims or accidents. For the complete list of disclosures, please check your policy wording.	Policy Schedule

IRDA Reg. No. 115
Mailing Address:
601 & 602, 6th Floor, Interface 16,
New Linking Road, Malad (West)
Mumbai - 400 064

CIN: L67200MH2000PLC129408
Registered Office Address:
ICICI Lombard House, 414, P Balu Marg,
Off Veer Savarkar Road, Nr Siddhi Vinayak Temple,
Prabhadevi, Mumbai 400 025

UIN: IRDAN115RP0014V01200102
Toll free no: 1800 2666
E-mail: customersupport@icicilombard.com
Website : www.icicilombard.com

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.*

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