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** Professional Indemnity – Insurance Broker/Corporate Agent/Web Aggregator/IMF	
2	**Unique Identification Number (UIN) allotted by IRDAI** IRDAN115CP0002V01202223	
3	**Structure** Indemnity Based Policy	
4	**Interests Insured** This Product offers indemnity to the Insured against liability arising out of any Breach of Duty, Fraud/Dishonesty of an employee and defense cost incurred in defending such claims	
5	**Sum Insured / Scope** Rs. XX,XX,XXX	Policy Schedule
6	**Policy Coverage** This policy will cover Loss arising from: 1. any Breach of Duty of the Insured 2. Fraud/Dishonesty of any Employee. 3. Defense Costs incurred in defending such Claim Loss will be admissible only if Wrongful Act: (i) first takes place on or after the Retroactive Date; and (ii) is committed solely in the performance of or failure to perform Professional Services as per IRDAI (Insurance Brokers) Regulations, 2018, IRDAI (Registration of Corporate Agents) Regulations, 2015, IRDAI (Insurance Web Aggregator) Regulations, 2017 and IRDAI (Insurance Marketing Firm) Regulations, 2015 respectively.	Part II of the schedule INSURING AGREEMENTS
7	**Add-on Cover** As per Endorsement in policy schedule. And extensions as per policy wordings mentioned below:	Extensions

	1. Court Attendance fees, No Retention shall apply to this Extension 2. Extended Reporting Period 3. Lost Documents	
8	**Loss Participation** As per Section Retention (Each and Every Claim)of the Policy Schedule	Retention (Each and Every Claim)
9	**Exclusions** The insurer will not be liable for claim related with: 1. Antitrust, violation, restraint of trade or unfair competition 2. bodily injury property damage (other than failure to achieve legally required care, diligence and expertise in performing contractual liability) 3. Costs Assessment arising out of failure of insured to make accurate pre-assessment of the cost of performing Professional Services 4. Employment/Discrimination 5. Insolvency 6. Infrastructure including mechanical failure, electrical failure, including any electrical power interruption, surge, brown out or black out; or 7. telecommunications or satellite systems failure 8. Misdeeds 9. Patent/Trade Secret 10. Pollution 11. Prior Claims/Circumstance 12. Trade debts 13. made or pending within; or to enforce a judgment obtained in, the United States of America, Canada, or any of their territories or possessions; or 14. War/Terrorism Detailed exclusions refer to exclusions mentioned under policy schedule Section Exclusions.	Part II Section- Exclusions
10.	**Special Conditions and Warranties (if any)** As per General Provisions of the Policy Schedule.	Part II Section- *General Provisions*
11.	**Admissibility of Claim** Principle of admissibility of claims – All terms and conditions of the policy to be complied (such as Insuring clause and all conditions complied and no exclusion trigger) Principle of denial of claims – (Any exclusion trigger or conditions of the policy not complied with (including duty of care & loss minimization & exclusion w.r.t willful negligence)	Section: Claims

	Below is the **sample claim calculation** for reference**:** | Gross Loss Claimed | 6,29,38,711 | | --- | --- | | Gross Loss Assessed | 3,53,99,452 | | Less Excess | 0 | | **Loss Adjusted** | **3,53,99,452** | .	
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 **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. **Cancellation Clause:**	Section: General Provisions: Notice of Claim

	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. ▪ For policies longer than one year, we will refund the premium for the remaining portion if coverage has not started. **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	Refer Grievance Redressal
14.	**Obligations of the Policyholder** Here are a few important things to keep in mind: • 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.	Part II

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.*