**Royal Sundaram General Insurance Co. Limited**
Corp. Office : Vishranthi Melaram Towers, No. 2 / 319,
Rajiv Gandhi Salai (OMR) Karapakkam, Chennai - 600097.
Regd. Office : 21, Patullos Road, Chennai - 600 002

**Part II- Policy Document**
**Policy Terms and Conditions**

**B PREAMBLE**

Royal Sundaram General Insurance Co. Limited ("the Company"),having received a Proposal and the premium from the Proposer and the said Proposal, Declaration and Annexure thereto together with any statement, report or other document leading to the issue of this Policy, which form the basis of this contract, do, by this Policy agree, subject to the terms and conditions as set out in the Schedule with all its Parts, that on proof to the satisfaction of the Company, of the compensation having become payable, as set out in the Schedule, upon the happening of an event, to pay the Sum Insured/ appropriate Benefit.

**C DEFINITIONS**

In this Policy, the following words and expressions, wherever appears, shall have the following meanings, as set forth, unless thecontext otherwiserequires:

**C.1 Standard Definitions**

C.1.1 **Accident** means a sudden, unforeseen and involuntary event caused by external, visible and violent means.

C.1.2 **Condition Precedent** means a policy term or condition uponwhich the Insurer's liability under the policy is conditional upon.

C.1.3 **Congenital Anomaly** means a condition(s) which is present since birth, and which is abnormal with reference to form, structure or position.

**Internal Congenital Anomaly**

Congenital anomaly which is not in the visible and accessible partsof the body.

**External Congenital Anomaly**

Congenital anomaly which is in the visible and accessible parts of the body.

C.1.4 **Deductible** means a cost-sharing requirement under a health insurance policy that provides that the insurer will not be liable for a specified rupee amount in case of indemnity policies and for a specified number of days/hours in case of hospital cash policies which will apply before any benefits are payable by the insurer. A deductible does not reduce the Sum Insured.

C.1.5 **Dental treatment** means a treatment related to teeth or structures supporting teeth including examinations, fillings (where appropriate), crowns, extractions and surgery.

C.1.6 **Illness** means a sickness or a disease or pathological condition leading to the impairment of normal physiological function and requires medical treatment.

a. **Acute condition** - Acute condition is a disease, illness or injury that is likely to respond quickly to treatment which aims to return the person to his or her state of health immediately before suffering the disease/illness/injury which leads to fullrecovery.

b. **Chronic condition** - A chronic condition is defined as a disease, illness, or injury that has one or more of the following characteristics:

- it needs ongoing or long-term monitoring through consultations, examinations, check-ups, and / ortests
- it needs ongoing or long-term control or relief of symptoms.
- it requires your rehabilitation or for you to be speciallytrained to cope withit.
- it continuesindefinitely.
- it recurs or is likely to recur.

C.1.7 **Injury** means accidental physical bodily harm excluding illness or disease solely and directly caused by external, violent and visible and evident means which is verified and certified by a Medical Practitioner.

C.1.8 **Intensive Care Unit** means an identified section, ward or wing of a hospital which is under the constant

supervision of a dedicated

medical practitioner(s), and which is specially equipped for the continuous monitoring and treatment of patients who are in a critical condition, or require life support facilities and where the level of care and supervision is considerably more sophisticated and intensive than in the ordinary and other wards.

C.1.9 **Medical Advise** means any consultation or advice from a Medical Practitioner including the issue of any prescription or repeat prescription.

C.1.10 **Medical Expenses** means those expenses that an Insured Person hasnecessarily and actually incurred for medical treatment on accountof Illness or Accident on the advice of a Medical Practitioner, as long as these are no more than would have been payable if the Insured Person had not been insured and no more than other hospitalsor doctors in the same locality would have charged for the same medical treatment.

C.1.11 **Notification of Claim** means the process of notifying a claim to the insurer or TPA by specifying the timelines as well as the address/ telephone number to which it should be notified.

C.1.12 **OPD treatment** means the one in which the Insured visits a clinic / hospital or associated facility like a consultation room for diagnosis and treatment based on the advice of a Medical Practitioner. The Insured is not admitted as a day care or in-patient.

C.1.13 **Subrogation** shall mean the right of the insurer to assume the rights of the insured person to recover expenses paid out under the policythat may be recovered from any other source.

C.1.14 **Surgery or Surgical Procedure** means manual and / or operative procedure (s) required for treatment of an illness or injury, correctionof deformities and defects, diagnosis and cure of diseases, relief ofsuffering or prolongation of life, performed in a hospital or day care centre by a medical practitioner.

**C.2 Specific Definitions**

C.2.1 **Accidental** An accident is a sudden, unforeseen and involuntary event caused by external, visible and violent means.

C.2.2 **Acquired Immune Deficiency Syndrome** means the meaning assigned to it by the World Health Organization and shall include Human Immune deficiency Virus (HIV), Encephalopathy (dementia) HIV Wasting Syndrome and ARC (AIDS Related Condition).

C.2.3 **Acts of God** means Lightning, Storm, Tempest, Flood and Inundation, Earthquake, Tsunami, Subsidence, Landslide and Rockslide, Avalanche.

C.2.4 **Act of Terrorism** means any actual or threatened use of force or violence directed at or causing damage, injury, harm or disruptionor commission of an act dangerous to human life or property against any individual property or government with the stated or unstated objective of pursuing economic ethnic nationalistic political racialor religious interests whether such interests are declared or not. Robberies or other criminal acts primarily committed for personalgain and acts arising primarily from prior personal relationships between perpetrators and victims shall not be considered TerroristsActs. Terrorism also shall include any act, which is verified or recognized by the relevant Government as an act of Terrorism.

C.2.5 **Age** means the age of the Insured Person on his/her most recent birthday as per the English Calendar regardless of the actual time ofbirth, at the time of commencement of Period of Insurance.

C.2.6 **Air Travel** means the act of boarding an aircraft for the purpose of flying therein or alighting there from following a flight.

C.2.7 **Checked-In Baggage** means the baggage handed over by the Insured Person and accepted by the Common Carrier, (airline/coachoperator/ferry company) for transportation in the same carrier in which the Insured Person is going to travel and for which the carrierhas issued a baggage receipt to the Insured Person (excluding goods carried under contract of affreightment).

C.2.8 **Company** means the Royal Sundaram General Insurance Co.Limited Fornerly (Royal Sundaram Alliance Insurance Company Limited.)

C.2.9 **Contracted Departure Date** means the date on which the Insured Person originally scheduled to leave on the Trip as specified in theTravel Documents.

C.2.10 **Contracted Return Date** means the date on which the Insured Person originally scheduled to return from the Trip as specified inthe Travel documents.

C.2.11 **Common Carrier** means any civilian water conveyance or aircraft, in each case operated under a valid license for transportation of passengers for hire.

C.2.12 **Covered Medical Expenses** means reasonable charges which are usual and Customary, incurred for services and supplies for anysickness/illness or covered Accident to the Insured Person.

C.2.13 **Covered Occurrence** means delay of a Common Carrier a) caused by inclement weather or b) due to strike or job action by employeesof a Common Carrier scheduled to be used during the Insured Tripor c) due to industrial action or d) caused by Equipment failure of a Common Carrier.

C.2.14 **Contribution** is essentially the right of an insurer to call upon otherinsurers liable to the same insured to share the cost of an indemnityclaim on a rateable proportion of Sum Insured. This clause shall notapply to any Benefit offered on fixed benefit basis.

C.2.15 **Disease** means an illness which a Medical Practitioner or Surgeonwill certify that the Insured Person is suffering from.

C.2.16 **Emergency Medical Evacuation**: means (a) the medical condition of the Insured Person warrant immediate transportation from theplace of Accident/sickness to the nearest hospital where appropriate medical treatment can be obtained (b) after being treated at the local hospital the medical condition of the Insured Person warrant transportation to the country where the Trip commenced to obtain further medical treatment or to recover or both (a) and (b) above.

C.2.17 **Expiry Date**: means a) The date of expiry as shown in the Certificatefor each Insured Person OR b) the Completion of each Insured Journey OR c) the date of termination of the Policy OR d) e) atthe expiration of the period for which the premium has been paid whichever is earlier.

C.2.18 **Family** means Insured Person, Insured Person's spouse, Insured Persons children, Insured Person's parents who continue to be normally resident with the Insured Person.

C.2.19 **Fire And Allied Perils means** Fire, Lightning, Explosion /Implosion, Aircraft Damage, Riot Strike & Malicious Damage, Earthquake, Storm Cyclone Typhoon Tempest Hurricane Tornado Flood and Inundation (excluding volcanic Eruptions and other Convulsions of Nature) Impact Damage by Rail / Road vehicles (other than Insured Person's Vehicles) & animals, Subsidence Landslide & Rockslide, Bursting and/or overflowing of water tanks, Apparatusand pipelines, Missile Testing Operations, Leakage from Automatic Sprinkler installation and BushFire.

C.2.20 **Hazardous Sport / Hazardous Activities** means any sport or activity, which is potentially dangerous to the Insured Person whether he/she is trained, or not. Such Sport/Activity includes butnot limited to Winter sports, Skydiving, Parachuting, Scuba Diving, Bungee Jumping, Mountain Climbing, Riding or Driving in Races or Rallies, caving or potholing, hunting or equestrian activities, divingor under-water activity, rafting or canoeing involving rapid waters, yachting or boating outside coastal waters, participation in any Professional Sports.

C.2.21 **Hospital means** any institution established for in-patient care andday care treatment of illness and/or injuries and which has been registered as a hospital with the local authorities under the ClinicalEstablishments (Registration and Regulation) Act, 2010 or under the enactments specified under the Schedule of Section 56(1) of the said Act OR complies with all minimum criteria as under:

- has qualified nursing staff under its employment round the clock;
- has at least 10 in-patient beds in towns having a populationof less than 10,00,000 and at least 15 in- patient beds in all otherplaces;
- has qualified medical practitioner(s) in charge round the clock;
- has a fully equipped operation theatre of its own where surgical procedures are carried out;
- maintains daily records of patients and makes these accessibleto the insurance company's authorized personnel.

C.2.22 **House breaking** means an act involving the unauthorized entry toor exit from Your Home or attempted threat by unexpected, forcible, visible and violent means, with the intent to commit an act of Theft.

C.2.23 **In-Patient Care** means treatment for which the insured person has to stay in a hospital for more than 24 hours for a covered event.

C.2.24 **Insured Journey** means the time period between the date the InsuredPerson boards the conveyance to leave for onward overseas journeyor the Contracted Departure Date as per the Policy whichever is later and the date when the Insured Person first disembarks on returnto India or the Contracted Return Date or the date of expiry of insurance whichever is earlier.

C.2.25 **Insured** means the Corporate shown in the Schedule of the Policy.

C.2.26 **Insured Person** means the employees whose name specifically appears in the Certificate to this Policy.

C.2.27 **Medical Practitioner** is a person who holds a valid registration from the Medical Council of any State or Medical Council of Indiaor Council for Indian Medicine or for Homeopathy set up by the Government of India

or a State Government and is thereby entitledto practice medicine within its jurisdiction; and is acting within thescope and jurisdiction of licence. The registered practitioner shouldnot be the insured or close family members.

C.2.28 **Medically necessary** treatment is defined as any treatment, tests, medication, or stay in hospital or part of a stay in hospital which

- is required for the medical management of the illness or injurysuffered by theinsured;
- must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration,orintensity;
- must have been prescribed by a medicalpractitioner,
- must conform to the professional standards widely accepted in international medical practice or by the medical community inIndia.

C.2.29 **Kutcha construction** means buildings having walls and/or roofsof wooden planks thatched leaves and/or bamboo, plastic cloth asphalt canvas tarpaulin or the like.

C.2.30 **Period of insurance** The period commencing from the first day of insurance mentioned in the Certificate or from the date of departureof each Insured Person from the Republic of India for each Trip, whichever is later and terminates on the Expiry Date.

Provided however where the outward travel of the Insured Person commences during the policy period but the date of return extends beyond the date of expiry of the Policy then the period of insurance stands automatically extended until the Insured Person's return to Republic ofIndia

C.2.31 **Physician** means a person legally qualified to practice in medicineor perform surgery duly licensed by his/her respective jurisdiction,provided that this person is not a member of the Insured Person's Family.

C.2.32 **Policy means** the insurance contract, the Part I, Part II & Part III of the Policy Schedule, Certificates and any other endorsements, riders and any other attached enrollment forms.

C.2.33 **Pre-Existing Disease means** any condition, ailment or injury or related condition(s) for which you had signs or symptoms, and/or were diagnosed, and/or received medical advice/treatment within 36 months to prior to the first policy issued by the insurer.

C.2.34 **Reasonable and Customary Charges** means the charges for services or supplies, which are the standard charges for the specific provider and consistent with the prevailing charges in the geographical areafor identical or similar services, taking into account the nature of the illness / injury involved.

C.2.35 **Relative(s)** shall mean the Insured Person's legal spouse, parent, children, brother, sister, who live in India.

C.2.36 **Sound Natural Teeth** means natural teeth that are either unaltered or are fully restored to their normal function and are Disease-free,have no decay and are not more susceptible to injury than unaltered naturalteeth.

C.2.37 **Sum Insured** means the maximum amount of coverage per benefit, as specified in the Schedule to this Policy/Certificate, that the Insured Person is entitled to in respect of each Benefit.

C.2.38 **Third Party Administrator (TPA)** means any person or entity that,is licensed by the Insurance Regulatory and Development Authority as a TPA on the Date of Commencement of Risk and is engaged for afee or remuneration by the Company for the provision of renderinghealth administration services as per the terms and conditions of this Policy.

C.2.39 **Travel Companion** means up to 2 named persons who is/are booked to accompany the Insured Person on the Trip.

C.2.40 **Trip** means booked and planned travel out of, and back to, the Republic of India.

C.2.41 **Valuables** means but not limited to photographic, audio, video, computer and any other electronic equipment( including software and data recorded on tapes and accessories) telecommunications and electrical equipment, musical instruments telescopes, binoculars, spectacles(contact lenses), Sunglasses, antiques, watches, jewellery, furs and articles made of precious stones and metals, money securities ,credit and debit cards cheques and Travellers cheques, travel tickets, currency notes curios paintings and business samples.

## D BENEFITS COVERED UNDER THE POLICY

The Company hereby agrees, subject to the terms, conditions and exclusions herein contained or otherwise expressed herein, to pay to the Insured Person a sum as compensation for any loss or damage occurring during the Period of Insurance as described under different Benefits hereunder, and as specified in the Schedule to the Policy, but

not exceeding the Sum Insured.

D.1.1 BENEFIT 1 (a) - OVERSEAS HEALTH COVER

The Company shall compensate the Insured Person for expenses incurred for availing immediate medical assistance required asa consequence of such Insured Person falling ill or sustaining an

Accident whilst on a Trip abroad, but not exceeding the Sum Insured. The Coverage is not a general health insurance policy and is only for the use of the Insured Person in the event of a sudden and unexpected sickness or Accident arising when the terms aforementioned are fulfilled.

The deductible excess in respect of this benefit, if any, shall be an amount as specified in the Schedule to this Policy.

**Terms and Conditions**:

If the Insured Person falls ill or contracts any Disease or sustains an Accident whilst on a Trip abroad during the Period of Insurance, then the Company will pay or arrange to pay for the following costs:

1. Reasonable and Customary Charges, subject to the deductible excess shown in the Policy Schedule, for Covered Medical Expenses incurred overseas by the Insured Person which are not due to a Pre-Existing Condition up to the Sum insuredfor the treatment of an injury or sickness sustained by the Insured Person while the Policy is in effect. Any medical servicesor series of services with a cost greater than USD 100 shall not becovered by the Policy unless the Insured Person consult with the TPA and the cost for such services are authorized in advance by TPA and it's assistance cooperation partners. Costs would be those incurred for medically necessary treatment undertaken during a Trip abroad less the Excess stated in the Schedule. For the purpose of this Benefit, 'treatment' shall be deemed to include only the following:
   (a) Out patient treatment (except where stated otherwise) provided the same cannot be deferred till the Insured Person's return to the Republic of India.
   (b) In patient treatment in a local hospital at the place the Insured is staying at the time of occurrence of an insurableevent or at the nearest suitablehospital.
   (c) Medical aid that is prescribed by a physician as necessary part of the treatment for broken limbs or injuries (e.g. plaster casts, bandages and walkingaids).
   (d) Radiotherapy, heat therapy or phototherapy and other suchtreatment prescribed by aphysician.
   (e) X-Ray, diagnostic test, provided these pertain to the diagnosed diseases due to which hospitalization was deemednecessary.
   (f) Cost of transportation, including necessary medical care en-route, by recognized emergency service providers for medical attention at the nearest hospital or at the nearest available Physician.
   (g) Cost of being transferred to a special clinic if this is medicallynecessary and prescribed as such by aPhysician.
   (h) Life saving unforeseen emergency measures, or measures solely designed to relieve acute pain, provided to the Insured Person by medical practitioners for Disease/ Accident arising out of a Pre-Existing Condition.

   In no event will benefits continue to be provided by the Company for any Covered Medical Expenses incurred after the expiry date of the Policy or Insured Person's return to India whichever is earlier.

D.1.2 BENEFIT 1 (b) EMERGENCY DENTAL TREATMENT

The Company shall compensate the Insured Person for expenses resulting from Injury sustained to Sound Natural Teeth during a Trip abroad but not exceeding the Sum Insured.

Only dental services for the immediate relief of dental pain are covered.

The Excess in respect of this benefit, if any, shall be of an amount as specified in the Schedule to this Policy.

D.1.3 BENEFIT 1 (c) EMERGENCY EVACUATION

The Company shall compensate the Insured Person for expenses in relation to Emergency Evacuation during a Trip abroad but not exceeding the Sum Insured as stated under Benefit1(a).

This medical benefit would include the following:

I. Any extra costs of medically necessary and prescribed transportation from the foreign country to the Republic of India or to the nearest hospital in the event that it is not possibleto guarantee medical treatment within a reasonable distance ofInsured Person's current location provided that–

- Extra costs in the event of transportation are the additionalcosts arising as a consequence of the insured event for thereturn journeyhome.
- In the event that the Insured Person is capable of being transported from a medical point of view, it is the decisionof TPA and it's assistance cooperation partners whether the Insured Person is repatriated to India ornot.

II. Balance Period of Policy + 30days:

- If the by TPA and it's assistance cooperation partners advises that the continued treatment in the Republic of India is appropriate, then the Company will pay the Reasonable and Customary Charges, subject to the deductible excess shown in the Policy Schedule, for medical expenses incurred in India for the same illness/bodily injury contracted abroad following the transportation home, for a maximum period of 30 days from date of return, provided the disease/injury/illness is contracted within the Period of Insurance during the Tripabroad.

D.1.4 BENEFIT 1(d) – REPATRIATION OF MORTAL REMAINS

In the event of the death of the Insured Person during the Tripdue to illness/ injuries, which are insured events in terms of this Policy, the Company shall compensate for the transportation expenses reasonably incurred to return the mortal remains of the Insured Person to the place of residence in the Republic of India, the expenses for local burial or cremation in the country where thedeath occurred, subject to the SumInsured.

The Excess in respect of this benefit, if any, shall be of an amount as specified in the Schedule to this Policy.

D.1.5 BENEFIT 1(e) – HOSPITAL DAILY ALLOWANCE

In case the Insured Person is hospitalized for a period of more than 72 hours and where the Company has accepted liability under Over- seas Health Cover aforementioned, then the Company will pay a lump sum benefit for each consecutive 24 hours of hospitalizationexceeding the first 72 hours subject to Sum Insured.

The daily limit and the maximum limit are mentioned in theSchedule hereto.

Exclusions Applicable to BENEFIT 1 (a-e):

The Company shall not be liable to make any payment under this Benefit in connection with or in respect of any expenses whatsoever incurred by the Insured Person, towards:

(a) Medical treatment abroad if that is the sole reason or one of thereasons for temporary stayabroad.

(b) Medical expenses/ services, the need for which arises out of a Pre-Existing Condition, but for 1(h) above of the Terms and Conditions.

(c) Treatment that could reasonably be delayed until the Insured Person's return to the Republic of India. The question of what can or what cannot be reasonably delayed will be decided jointly by the treating physicians and qualified personnel from TPA and it's assistance cooperation partners as the case maybe.

(d) Service, supplies or treatment including the period of hospitalisation confinement determined as excess of Reasonable and Customary charges by TPA and it's assistance cooperationpartners.

(e) Treatments relating to the removal of physical flaws or anomalies (cosmetic treatment or 'plastic' surgery in any form or manner) unless necessitated by anAccident.

(f) Any costs incurred in connection with rest cures or recuperation at a spa or health resort, sanatorium, convalescence home or similar institution whether forming part of treatment or not.

(g) Any costs related to mental or psychiatricdisorders.

(h) Routine physicals or examinations where there are no objectiveindications or impairment in normalhealth.

(i) Pregnancy of the Insured Person including child birth mis-carriage abortion or complication of any of these including diagnosis and treatment of infertility or other problems related to inability to conceive a child, birth control including surgicalprocedures anddevices.

(j) Medical treatment of typical symptoms suffered during pregnancy and their consequences, including changes in otherchronic conditions as a result ofpregnancy.

(k) Any medical check-ups during pregnancy or treatment of the pregnancy.

(l) Expenses incurred in connection with weak strained or flat feetcorns calluses or toenails.

(m) Diagnosis and treatment ofacne.

(n) Organ transplants which are considered experimental in nature.

(o) Well child care including exams andimmunizations.
(p) Expenses which are not exclusively medical innature.
(q) Congenital (external or internal) anomalies or any complications or conditions arisingtherefrom.
(r) Any expenses incurred in India unless authorized and approvedby the TPA and it's assistance cooperation partners inadvance.
(s) Rehabilitation and/or physiotherapy or the costs of prostheses/ prosthetics (artificial limbs, eye glasses, contact lenses, hearing aids)etc.
(t) Medical expenses covered under Workman's Compensation orsimilarpolicy.
(u) Medical expenses incurred as a result of alcohol and/or drug abuse, addiction oroverdose.
(v) Treatment byRelatives.
(w) Dental crowns andbridges.
(x) Expenses recoverable from any medical or hospital benefit fund.
(y) Any exclusion mentioned in the General Exclusions section ofthisPolicy.

## D.2 BENEFIT 2 - ACCIDENTAL DEATH & DISMEMBERMENT

### D.2.1 BENEFIT 2 (a) - ACCIDENTAL DEATH & DISMEMBERMENT (24 HOURS)

If at any time during the Trip the Insured Person shall sustain any bodily injury resulting solely and directly from Accident caused byexternal violent and visible means, then the insured person or his/ her legal representative (s), as the case may be, will be paid the Sum Insured mentioned in the Schedule of this policy, against Accident Death and Dismemberment, if such injury shall within 12 Calendarmonths of occurrence be the sole and direct cause of Death/ Disablement as given in the table of benefits below:

Provided always that the policy will not pay under more than one of the following sub clauses in respect of the same Accident

Terms & Conditions:

If the Insured Person meets with an Accident, which leads to death or subsequent disablement, the Company will provide insurance coverage to the Insured Person in the following manner:

1. **Death of Insured Person:** If following an Accident that causes death of the Insured Person within 12 Calendar months from the date of Accident, the Company will pay to the person nominated by the Insured Person, an amount as compensation subject to the SumInsured.
2. **Permanent disablement of the Insured Person**: If following an Accident which caused permanent impairment of the Insured Person's physical capabilities, the Company will pay the benefits

   as provided in the Table of Benefits below depending upon thedegree of disablement providedthat:

   a) The disablement occurs within 12 Calendar months from the date of the Accident.
   b) The disablement must be confirmed and claimed for prior to the expiry of a period of 3 months since occurrence of the disablement.

**Table of Benefits**

| **Benefits** | **Percentag e ofSum Insured** |
|---|---|
| 1. Death | 100% |
| 2. Permanent Total Disablement | |
| Total and irrevocable loss* of | |
| (i) Both Hands or both feet | 100% |
| (ii) sight of both eyes | 100% |
| (iii) one entire hand and one entire foot | 100% |
| (iv) Loss of either hand or foot and sight of one eye | 100% |
| (v) Speech and hearing in both ears | 100% |

| | |
|---|---|
| (vi) Either hand or foot | 50% |
| (vii) Sight of One eye | 50% |
| (viii) Speech | 50% |
| (ix) Hearing in both ears | 50% |
| (x) Thumb and index finger of the same hand | 25% |
| (xi) Quadriplegia | 100% |
| (xii) Paraplegia | 50% |
| (xiii) Hemiplegia | 50% |
| (xiv) Uniplegia | 25% |

Loss of feet/hand means total severance through or above the ankle/ wrist joints respectively. Eye means entire and irrevocable loss of sight. Thumb and index finger means actual severance through or above the joint that meets the hand at the palm. Speech or hearing means entire and irrecoverable loss of speech or hearing of both ears. Quadraplegia means the complete and irreversible paralysis ofboth upper and both lower limbs. Paraplegia means the complete and irreversible paralysis of both lower limbs. Hemiplegia means the complete and irreversible paralysis of upper and lower limbs of the same side of the body. Uniplegia means the complete and irreversible paralysis of one Limb. Limb means entire arm or leg.

**Special Conditions**:

1. If the Accident affects any physical function, which was already impaired beforehand, a deduction will be made equal in amount for this prior disablement.
2. If the accident impairs a number of physical functions, the degree of disablement given in the Table of Benefits will be added together, but not exceeding 100% of the Sum Insured.
3. In the event of Permanent Disablement, the Insured Person willbe under obligation:
   a) To have himself/herself examined by doctors appointed by the Company/ TPA and it's assistance cooperation partnersand the Company will pay the costs involved thereof.
   b) To authorize doctors providing treatments or giving expert opinion and any other authority to supply the Company any information that may berequired.

   If the obligations are not met with due to whatsoever reason, the Company may be relieved of its liability to pay.

**Exclusions:**

The Company shall not be liable to make any payment under this Benefit in connection with:

(a) Accidents due to mental disorders or disturbances of consciousness, strokes, fits or convulsions which affect the entirebody and pathological disturbances caused by the mental reaction to the same.

(b) Damage to health caused by curative measures, radiation, infection, poisoning except where these arise from an Accident.

(c) Any payment under this Benefit whereby the Company's liability would exceed the sum payable in the event ofdeath.

(d) Any other claim after a claim for death has been admitted by the Company and becomespayable.

(e) Any claim which arises out of an Accident whilst engaging in aviation or ballooning, whilst mounting into or dismounting from or travelling in any balloon or aircraft or which occurs during parachuting except when the Insured Person is flying as a fare paying passenger on a multi engine, commercialaircraft.

(f) Any claim arising out of an Accident related to pregnancy or childbirth, venereal disease or infirmity, whether directly orindirectly.

(g) Any claim for death or Disablement of the Insured Personfrom

(a) intentional self-injury, suicide or attempted suicide

(b) whilst under the influence of intoxicating liquor or drugs

(c) self- endangerment unless in self-defense or to save life.

(h) Physically and mentally challenged persons, unless specificallyagreed and endorsed in thePolicy.

(i) Any exclusion mentioned in the "General Exclusions" sectionof this Policy.

D.2.2 BENEFIT 2(b) - ACCIDENTAL DEATH AND DISMEMBERMENT (COMMON CARRIER)

If at any time during the Trip the Insured Person shall sustain any bodily injury while travelling as a passenger in or whilst boarding or alighting from a Common Carrier resulting solely and directly from Accident caused by external violent and visible means, then the insured person or his/her legal representative (s), as the case may be, will be paid the Sum Insured mentioned in the Schedule of this policy, against Accidental Death and Dismemberment (Common Carrier), if such injury shall within 12 Calendar months of occurrence be the sole and direct cause of Death/Disablement asgiven in the table of benefitsbelow:

Provided always that the policy will not pay under more than one of the following sub clauses in respect of the same Accident.

**Terms & Conditions:**

If the Insured Person meets with an Accident, which leads to death or subsequent disablement, the Company will provide insurance coverage to the Insured in the following manner:

a. **Death of Insured Person**: If following an Accident that causes death of the Insured Person within 12 Calendar months from the date of Accident, the Company will pay to the person nominated by the Insured Person, an amount as compensation subject to the SumInsured

b. **Permanent disablement of the Insured Person:** If followingan Accident which caused permanent impairment of the Insured Person's physical capabilities, the Company will pay the benefits as provided in the Table of Benefits below depending upon the degree of disablement providedthat:

   a) The disablement occurs within 12 Calendar months from the date of theAccident.

   b) The disablement must be confirmed and claimed for prior to the expiry of a period of 3 months since occurrence of the disablement.

Table of Benefits

| **Benefits** | **Percentag e ofSum Insured** |
|---|---|
| 1. Death | 100% |
| 2. Permanent Total Disablement | |
| Total and irrevocable loss* of | |
| (i) Both Hands or both feet | 100% |
| (ii) sight of both eyes | 100% |
| (iii) one entire hand and one entire foot | 100% |
| (iv) Loss of either hand or foot and sightof one eye | 100% |
| (v) Speech and hearing in both ears | 100% |
| (vi) Either hand or foot | 50% |
| (vii) Sight of One eye | 50% |
| (viii) Speech | 50% |
| (ix) Hearing in both ears | 50% |
| (x) Thumb and index finger of thesame hand | 25% |
| (xi) Quadriplegia | 100% |
| (xii) Paraplegia | 50% |
| (xiii) Hemiplegia | 50% |
| (xiv) Uniplegia | 25% |

Loss of feet/hand means total severance through or above the ankle/ wrist joints respectively. Eye means entire and irrevocable loss of sight. Thumb and index finger means actual severance through or above the joint that meets the

hand at the palm. Speech or hearing means entire and irrecoverable loss of speech or hearing of both ears. Quadraplegia means the complete and irreversible paralysis ofboth upper and both lower limbs. Paraplegia means the complete and irreversible paralysis of both lower limbs. Hemiplegia means the complete and irreversible paralysis of upper and lower limbs of the same side of the body. Uniplegia means the complete and irreversible paralysis of one Limb. Limb means entire arm or leg.

Special Conditions:

1. If the Accident affects any physical function, which was already impaired beforehand, a deduction will be made equal in amount for this prior disablement.
2. If the accident impairs a number of physical or mental functions, the degree of disablement given in the Table of Benefits will beadded together, but not exceeding 100% of the Sum Insured.
3. The Company will pay for loss of Life, if while on a Trip, the Insured Person's body cannot be located within 365 days after forced landing, stranding, sinking or wrecking of a conveyance, in which the Insured Person was a passenger or as a result ofany Acts of God, in which case, it shall be deemed subject to all other terms and conditions of the policy that the Insured Person has suffered loss of life within the meaning of thepolicy.
4. In the event of permanent disablement, the Insured Person willbe underobligation:
   a) To have himself/herself examined by doctors appointed by the Company/ TPA and it's assistance cooperation partnersand the Company will pay the costs involvedthereof.
   b) To authorize doctors providing treatments or giving expert opinion and any other authority to supply the Company any information that may berequired.

   If the obligations are not met with due to whatsoever reason, the Company may be relieved of its liability to pay.

Exclusions:

The Company shall not be liable to make any payment under this Benefit in connection with:

a. Accidents due to mental disorders or disturbances of consciousness, strokes, fits or convulsions which affect the entirebody and pathological disturbances caused by the mental reaction to thesame.
b. Damage to health caused by curative measures, radiation, infection, poisoning except where these arise from an Accident.
c. Any payment under this Benefit whereby the Company's liability would exceed the sum payable in the event of death.
d. Any other claim after a claim for death has been admitted by the Company and becomes payable.
e. Any claim which arises out of an Accident whilst engagingin aviation or ballooning, whilst mounting into or dismounting from or travelling in any balloon or aircraft or which occurs during parachuting except when the Insured Person is flying as a fare paying passenger on a multi engine, commercial aircraft.
f. Any claim arising out of an Accident related to pregnancy or childbirth, venereal disease or infirmity, whether directly orindirectly.
g. Any claim for death or Disablement of the Insured Person from (a) intentional self-injury, suicide or attempted suicide
   (b) whilst under the influence of intoxicating liquor or drugs
   (c) self- endangerment unless in self-defense or to save life. Physically and mentally challenged persons, unless specificallyagreed and endorsed in thePolicy.
h. Any exclusion mentioned in the "General Exclusions" sectionof this Policy.

**D.3 BENEFIT 3 - TRAVEL INCONVENIENCE BENEFIT 3(a) -LOSS OFCHECKED-INBAGGAGE**

The Company will reimburse up to the limits specified in the Schedule of the policy in the event of the Insured Person suffering Total Loss of entire piece of Checked in Baggage which is under the care control and custody of the Common Carrier, while the Insured Person is a ticketed passenger on the Common Carrier during the course of the InsuredJourney.

Terms & Conditions:

The Insured Person has to provide the following documents to TPA: event that the Insured Person suffers a delay of more than 12 hoursfrom the Scheduled Arrival time at the destination for delivery of Baggage that has been checked by a Common Carrier for an international outbound flight from the Republic of

India.

**Terms & Conditions:**

The Company will pay provided that

1. The Baggage is delayed on arrival in a country abroad (outwardflight).
2. The Insured Person has to provide the following documents to TPA:
   - Property Irregularity Report issued by the Common Carrier.
   - Certificate from airlines confirming duration ofdelay.
   - Any further documents requested by TPA to confirm delay ofbaggage and amount recovered fromairlines.
   - Property IrregularityReport.
   - Boarding pass (s) and baggage coupon(s)/tag(s) of InsuredPerson and above mentioned travel companion ifapplicable.
   - List of articles lost and theirvalue.
   - Proof of ownership for articles valued more than 100 USD.
   - Any further required documents requested by TPA toconfirm loss of baggage and amount recovered from airlines.

**Special Condition**:

(i) Benefits for Baggage Loss will be in excess of any amount paid or payable by the Carrier responsible for the loss and/or in excessof all other valid and collectibleinsurance.

(ii) The maximum amount reimbursable per bag is 50% of the Sum Insured and the maximum value per article contained in any bag is 10% the SumInsured.

Exclusions

The Company shall not be liable to make any payment under thisbenefit in connection with:

(a) Any non-compliance with the terms & conditions as statedabove.

(b) Any partial loss of items contained within abag.

(c) The Company will not be liable for any Valuables, perishablesand consumables

(d) Losses arising from any delay, detention, confiscation bycustoms officials or other public authorities.

(e) Loss due to complete or partial damage of the baggage

(f) Any amount recovered under Delayed Baggage cover of thepolicy from the same event

(g) Any exclusion mentioned in the "General Exclusions" sectionof this Policy.

D.3.1 BENEFIT 3(b) - DELAY OF CHECKED-IN BAGGAGE

The Company will reimburse up to the Sum Insured for necessary emergency purchase of essential clothes and toiletries in the eventthat the Insured Person suffers a delay of more than 12 hours fromthe Scheduled Arrival time at the destination for delivery of Baggage that has been checked by a Common Carrier for an international outbound flight from the Republic of India.

Special Condition:

Benefits for Baggage Loss will be in excess of any amount paid or payable by the Carrier responsible for the loss and/or in excess of all other valid and collectible insurance.

Exclusions:

The Company shall not be liable to make any payment under this benefit in connection with:

(a) Losses arising from any delay, detention, confiscation by customs officials or other publicauthorities.

(b) Any baggage delay on arrival in the Republic of India (inward flight)

(c) Benefits for Baggage Delay paid or payable by the Carrier, provided however this insurance shall apply in excess of the amount recoverable from carrier/ otherinsurers.

(d) Any exclusion mentioned in the "General Exclusions" sectionof this Policy.

D.3.2 BENEFIT 3(c) - LOSS OF PASSPORT, VISA

In the event that the passport, visa belonging to the Insured Personis lost, the Company will reimburse up to the limit mentionedin the Schedule to cover only the direct expenses necessarily and reasonably incurred in connection with obtaining emergency traveldocuments in lieu of passport /visa or duplicate or new passport.

Terms & Conditions:

The Company will pay provided that

- The loss of passport, visa was reported to police authority within 24 hours of the Insured Person becoming aware of such loss and an official Police report is provided toTPA.
- The proof of emergency travel documents is provided to TPA.
- Any further documents requested by TPA to confirm delay of baggage and amount recovered from airlines.

Exclusions:

The Company shall not be liable to make any payment under this Benefit in connection:

(a) Loss of the passport/visa due to delay or confiscation or detention by the Customs, Police or Public Authorities.

(b) Loss of the passport/visa due to theft unless it has been reported to the Police within 24 hours the Insured Person becoming aware of the theft and a written Police Report obtained.

(c) Loss of the passport/visa/ due to it being left unattended or forgotten by the Insured Person in a public place or public transport, hotel, apartment.

(d) Loss or theft of the passport/visa in a private place or in a private vehicle unless it was located in a locked hotel room or apartmentand forcible and violent entry was used to gain access to it.

(e) The applicable Excess as mentioned in the Schedule.

(f) Any exclusion mentioned in the "General Exclusions" sectionof this Policy.

D.3.3 BENEFIT 3(d) - HIJACK DISTRESS ALLOWANCE

In the event of any Common Carrier, in which the Insured Person is travelling being hijacked on the trip abroad and captivated for morethan 24 continuous hours, then the Company will pay a lump sum, for each consecutive 24 hours in captivity, in excess of the first 24hours, to each Insured Person, up to the maximum limit perpolicy.

The amount payable per 24 hours per Insured Person and the maximum limit per Insured Person is mentioned in Part I of the Schedule here to.

Terms and Conditions

The Company will pay provided that:

I. The proof of travel is provided tous.

II. Any further required documents requested by TPA to confirm loss of baggage and amount recovered fromairlines.

Exclusions:

The Company shall not be liable to make any payment under this benefit in connection with or in respect of any expenses whatsoeverincurred by the Insured Person in connection with or in respect of:

(a) Any claim where the Insured Person is considered as theprincipal or accessory in thehijacking.

(b) Any exclusion mentioned in the "General Exclusions" sectionof this Policy.

D.3.4 BENEFIT 3 (e) - TRIP DELAY

The Company will reimburse reasonable expenses towards food and beverages and emergency purchase of essential clothing, toiletries, if the Insured Person's Common Carrier commencement is delayed for more than 12 continuous hours while undertaking a Trip, due to any Covered Occurrence and when no alternative travel arrangement is available, up to the limit provided in the Schedule of the Policy.

Exclusions:

The Company shall not be liable to make any payment under this benefit in connection with or in respect of any expenses whatsoever incurred by the Insured Person in connection with or inrespect of:

a) Failure to check in ontime

b) Negligence of fault of the travelagent.

Subject to exclusions mentioned in the "General Exclusions" section of this Policy.

D.3.5 BENEFIT 3(f) - TRIP CANCELLATION:

The Company will pay losses up to the maximum amount statedin the policy Schedule and subject to the Excess, if prior to the Contracted Date of Departure the Trip is cancelled and the Insured Person is prevented from under

taking the Trip due to death

(a) of the Insured Personor

(b) Traveling Companionor

(c) the Relative of the Insured Person.

The Company will reimburse for the unused and non-refundable portion of the pre-paid lodging cost and/or the ticket cancellation charges of the Common Carrier provided these were booked prior to the occurrence.

Special Condition:

The insured Person should notify to the Company as soon as reasonably possible in the event of Trip Cancellation. The Insured Person / his representatives should also take all necessary steps to obtain maximum refund from applicable channels.

**Exclusions:**

The Company shall not be liable to make any payment under this Benefit in connection with:

1) the Insured Person and /or Travel Companion changing his/hermind about undertaking the Trip.
2) negligence or fault of the travelagent.
3) the Insured Person/his or her travel companion is/are aware ofthe possible cancellation prior to commencement of the Trip.
4) suspension of services by the Common Carrier whether voluntarily or pursuant to any order from any authority.
5) additional penalty charges incurred that would not have been imposed, had the Insured notified as soon as reasonably possible.
6) any exclusion mentioned in the "General Exclusions" section of this Policy.

D.3.6 BENEFIT 3(g) - TRIP CURTAILMENT:

The Company will pay benefits up to the limits given in the Schedule of the policy for Covered Expenses reasonably incurred by the Insured Person not being able to continue and complete his/her tripdue to

a) Death of a Travelling Companion or

b) Emergency Medical Evacuation of the self as per the terms ofthe policy

"Covered Expenses" would mean proportionate expenses pre- paid but are not refundable including tickets for the return journey to Republic of India.

**Expenses payable are:**

additional expenses for travel less amounts recoverable on unused travel vouchers or tickets or tours.

1. Additional expenses for accommodation less amounts recoverable on unused pre-paidaccommodation.

Special Condition:

The Insured Person should notify to the Company as soon as reasonably possible in the event of Trip Curtailment. The Insured Person should also take all necessary steps to obtain maximum refund from applicable channels. The Company will not be liable for additional penalty charges incurred that would not have been imposed, had the Insured Person notified as soon as reasonably possible.

Exclusions:

The Company shall not be liable to make any payment under this Benefit in connection with:

a. Additional expenses incurred while travelling in higher class/ category than the original travel ticket booked for Insured Person's return journey.

b. Exclusion mentioned in the "General Exclusions" section of this Policy.

**D.4 BENEFIT 4- HOME INSURANCE:**

The Company will pay for the loss and/or damage caused by Fire and Allied Perils, House breaking and /or attempted House breaking of Contents, whilst contained in the home of the Insured Person, stated as "Address of the Insured Person (in India)" under Part I ofthe policy, up to Sum insured.

The Company shall not pay more than 20% of the Sum Insured in respect of any one item.

This Benefit is applicable for the entire Family unit and not on Insured Person.

Contents means the following, not used for Business or Business Purposes, so long as they are owned by the Insured

Person and/or Insured Persons Family. are legally responsible for them:

i. Household goods, such as furnitures, fixtures, fittings, home appliances and interior decorations and items of likenature.

ii. Personal effects such as clothes and other articles of personal nature likely to be worn used or carried but excluding money, jewellery and valuables.

Market Value means the value at which property insured couldbe replaced with one of the same kind, type, age and condition.

Exclusions:

The Company shall not be liable to make any payment under this Benefit in connection with or in respect of any expenses whatsoever incurred by the Insured Person in connection with or in respect of:

1) the Insured Person and /or Travel Companion changing his/hermind about undertaking the Trip.
2) negligence or fault of the travel agent.
3) the Insured Person/his or her travel companion is/are aware ofthe possible cancellation prior to commencement of the Trip.
4) suspension of services by the Common Carrier whethervoluntarily or pursuant to any order from any authority.
5) additional penalty charges incurred that would not have been imposed, had the Insured notified as soon as reasonably possible.
6) any exclusion mentioned in the "General Exclusions" section ofthis Policy.

Basis of loss settlement:

1. In the event of a total loss or damage of an item, the Company will pay the Market Value of the item less any value for salvage. In the event of repairs of any item damaged, the Company will pay the repair expenses, up to the Market Value of the item damaged.
2. The Company may at its option repair reinstate or replace instead of paying the amount of loss or damage of the item.
3. No payment will be made for any cost of any improvements/ alterations enhancements additions effected by the InsuredPerson.
4. If there be any other insurance covering the same property, then this Policy will not pay more than the rate able proportion of theloss as the Sum Insured Person bears to the total sum insured under all such policies.

Duty of the Insured Person.

1. The Insured Person shall at all times take reasonable care of theproperty.
2. Notification of any changes in the location or any other factor affecting the Company's risk must be made by the Insured Person immediately to the Company.
3. If an event occurs giving rise to a claim under the policy the same must be notified in writing to the Company and also lodgea complaint with the police giving details of the items lost.
4. The Insured Person should protect the rights and remedies against others.

**D.5 BENEFIT 5- LEGAL BAIL BOND:**

The Company will pay for payment up to the Sum Insured towards the cost of bail bond, following false arrest or wrongful detention of the Insured Person as a result of false arrest or wrongful detention by any government or foreign power.

Subject to other exclusion mentioned in the "General Exclusions" section of this Policy.

**D.6 BENEFIT 6 - PERSONAL LIABILITY**

The Company will compensate the Insured Person, in the event of the Insured Person becoming legally liable to a third party (under statutory liability provisions or in common law for an incident which results in death, injury of such third party or damage tohis/ her properties), but not exceeding the Sum Insured, provided the incident occurs during the Period of Insurance and whilst on a Trip abroad and provided that the claim is reported to the Company immediately and subject to the Special conditions and the Exclusions below.

The Excess in respect of this benefit, if any, shall be of an amount as specified in the Schedule to this Policy.

Special Condition(s):

1. The Company shall be responsible for contesting unjustified claims against the Insured Person and providing indemnity for damages, which the Insured Person has to pay. For indemnity to be provided against damages, the damages must be payable under an acceptance of liability given or approved by the Company or under a judicial decision rendered by a Court of Law.
2. If there is a legal action in process against the Insured Person over a personal liability issue, the Company may conduct the legal action, including appointment of legal counsel, at the Company's expense in the name of the Insured Person at the Company's sole discretion.
3. The Company will have the right, but in no case the obligation,to take over and conduct in the name of the Insured Person thedefence of any claim and will have full discretion in the conduct of any proceedings and in the settlement of any claim and havingtaken over the defence of any claim, the Company may relinquish the same.
4. In the event the Company, in its sole discretion, chooses to exercise its right in pursuance of the above Special Condition 3, no action taken by the Company in the exercise of such rightwill serve to modify or expand in any manner, what the Company's liability or obligations under this Policy would have otherwise been had it not exercised its rights under this condition.

Exclusions:

The Company shall not be liable to make any payment under this benefit in connection with:

1. Any claim arising from Employer's liability or Insured Person's contractual liability.
2. Any claim of personal liability of the Insured Person towards his/ her Family, relations and travelling companions, friends orcolleagues whether personal or official.
3. Any claim resulting from transmission of an illness or disease bythe Insured Person.
4. Any claim or damage resulting from professional activities involving the Insured Person.
5. Any liability that is expected by or intended for the Insured Person.
6. Any claim for liability arising directly or indirectly from or due to:
   a) The possession of animals. Either own or under care control and custody of the Insured Person.
   b) The ownership or possession of vehicles, aircrafts, watercrafts, or activities of the Insured Person involving parachuting, hang- gliding, hot air ballooning or use offirearms.
   c) Legal costs and proceedings that result from any criminal or illegalact.
   d) Any willful, malicious or unlaw fulact.
   e) Insanity, the use of any alcohol/ drugs (except as medicallyprescribed) or drugaddiction.
   f) Any supply of goods or services on the part of the Insured Person arising out of the Insured Person's business.
   g) Any ownership or occupation of land or buildings other than the occupation of any temporary residence.
   h) Liability arising out of use sale manufacture delivery transfer or possession by any person of a controlled substance or contraband as defined by the appropriate Authorityor the Federal Food and Drug Agency or equivalent or similar organization.
   i) Any exclusion mentioned in the "General Exclusions" section of this Policy.

**D.7 BENEFIT 7 - DEPUTATION OF A SUBSTITUTE EMPLOYEE**

The Company will reimburse the Insured, the actual travel expenses, incurred by the Insured in deputing a substitute employee, in case, the Insured Person falls sick/meets with an accident abroad and his/her Emergency Evacuation is recommended by the attending physician and authorized by the Assistance Company, following a claim admissible under "Benefit 1( c)" Emergency MedicalEvacuation.

Exclusions:

The Company shall not be liable to make any payment under this benefit in connection with or in respect of any expenses whatsoeverincurred by the Insured Person in connection with or in respect of:

1. Additional expenses incurred while travelling in higher class/ category than the original travel ticket booked for Insured Person's return journey.
2. Any exclusion mentioned in the "General Exclusions" sectionof this Policy.

**E EXCLUSIONS**

**E.1 Specific Exclusions**

(APPLICABLE TO ALL BENEFITS UN- DER THEPOLICY):
Without prejudice to anything contained in this Policy, the Companyshall not be liable to make any payments in respect of:

1. Contracted Departure Date not within the Policy periodmentioned in theSchedule. Any claim in respect of Pre-existingconditions.
2. Any claim if the Insured Person-
   a) Is travelling against the advice of aphysician.
   b) Is receiving, or is on a waiting list to receive, specified medical treatment declared in a physician's report or certificate.
   c) Has received terminal prognosis for a medicalcondition.
   d) whilst taking part in a naval, military or air forceoperation.
3. Any claim arising out of illnesses or Accidents that the Insured Person has caused intentionally or by committing a crime or as a result of drunkenness or addiction(drugs,alcohol).
4. Any claim arising out of mental disorder, suicide or attempted suicide self inflicted injuries, or sexually transmitted conditionsanxiety, stress, depression, venereal disease or any loss directlyor indirectly attributable to HIV (Human Immunodeficiency Virus) and / or any HIV related illness including AIDS (Acquired Immunodeficiency Syndrome) and / or any mutant derivative or variations thereof how so ever caused.
5. Any claim arising from the Insured Person engaging in Air Travelunless he/she flies as a fare paying passenger on an aircraft properly licensed to carry passengers. For the purpose of this exclusion Air Travel means being in or on or boarding an aircraftfor the purpose of flying therein or alighting there from following aflight.
6. Any claim for any losses in whole or in part and/expenses directly or indirectly in respect of the Insured Person riding on a motor cycle or any other two-wheeled and two-wheeled motorized mode of conveyance as driver orpassenger.
7. Illness and Accidents that are results of war and warlike occurrence or invasion, acts of foreign enemies, hostilities, civil war, rebellion, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power, seizure capture arrest restraints detainments of all kings princes and people of whatever nation condition or quality what so ever.
8. Participation in riots, confiscation or nationalization orrequisition of or destruction of or damage to property by or under the order of any government or local authority.
9. Any Act of Terrorism.
10. Any claim arising from damage to any property or any loss or expense whatsoever resulting or arising from or any consequential loss directly or indirectly caused by or contributed to or arising from:
    a) Ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel or from any nuclear waste fromcombustion (including any self sustaining process of nuclear fission) of nuclear fuel.
    b) Nuclear weaponsmaterial
    c) The radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.
11. Any claim arising out of sporting activities in so far as they involve in training or participation in competitions of professional or semi-professional sports persons, unless declared beforehand and necessary additional premium paid.
12. Any claim for participation in Hazardous Sports/Hazardous Activities.
13. Any claim for self exposure to needless peril (except in an attempt to save humanlife).
14. Any loss of which a contributing cause was the Insured Person's actual or attempted commission of or willful participation in an illegal act or any violation or attempted violation of the law.
15. Any claim directly or indirectly arising from the Insured Person engaging in any manual work.
16. Any claim for/expenses incurred after the Expiry Date of the Policy or Insured Person's return to India whichever is earlier, except what is specifically provided.
17. Any claim arising out of consequential loss or contractual liability.

18. Any claim up to the Excess as shown in the Policy Schedule.

**F GENERAL TERMS AND CLAUSESSpecific Terms and Clauses**

(APPLICABLE TO ALL BENEFITS UNDER THIS POLICY)

The conditions below apply throughout this insurance. Failure to comply with them may be prejudicial to a claim:

F.1.1 Professional and semi-professional sportsmen are not eligible to be insured under this Policy unless specifically agreed to bythe Company.

F.1.2 ReasonablePrecautions:

The Insured Person shall take all reasonable and proper care to safeguard against Accident or illness or loss or damage to his/herproperty as if this insurance was not in force. Failure to do so will prejudice the Insured Person's claim under this insurance.

F.1.3 ClaimProcedure:

(a) The Insured Person shall immediately contact the Alarm Center of TPA and its assistance cooperation partners statingthe necessarydetails.

(b) TPA Alarm Center will verify the identity of the caller by asking him/her his/her mother's maiden name.

(c) In the event of an Accident or sudden illness where it is notpossible to do so before consulting a Physician or going to the Hospital, the Insured Person shall contact the Alarm Center as soon as possible. In either case, when being admitted as a patient, the Insured Person shall show the concerned Physician or personnel this Policy if requested.

F.1.4 ClaimsSettlement:

(a) Benefits payable under this policy will be paid within reasonable time upon receipt of due written evidence of such loss and any further documentation information and assistance that TPA and its assistance cooperation partnersmayrequire.

(b) Reimbursement of all claims by TPA will be in Indian Rupees at the exchange applicable on the date the amountis billed. If, however, it can be proved that the necessary

foreign currency to pay the bill was obtained at a less favourable rate, this will be taken as the applicable exchangerate.

The claim documents should be sent to:

**Health Claims Department**

M/s. Royal Sundaram General Insurance Co. Limited.

Corporate office,

Vishranthi Melaram Towers,

No.2/319, Rajiv Gandhi Salai(OMR), Karapakkam,Chennai 600 097.

(c) All admissible claims under this policy shall be offered for settlement within 15 days from the receipt of last necessary document. Wherever settlement offer has been made and accepted by Insured Person / Nominee / Legal heir as the casemay be, the company shall pay the offered claim amount within

7 days from the date of such acceptance, failing which the Company shall be liable to pay interest at 2% above the bank rate prevalent at the beginning of the financial year in which theclaim is reviewed.

(d) At the time of claim settlement, Company may insist on KYC documents of the Proposer as per the relevant AML guidelines inforce.

F.1.5 ClaimDocumentation:

i) The original bills and vouchers must be submitted along withall claims.

ii) Bills/ Prescriptions/vouchers/ reports/ discharge summary must contain the name of the person treated, the type of illness, detailsoftheindividualitemsofmedicaltreatmentprovidedand the dates of treatment. Prescriptions must clearly show the medicines prescribed, the price and the receipt stamp of the pharmacy. In the case of dental treatment, the bills/ vouchers/reports must give the details of the tooth treated and the treatment performed.

iii) For reimbursement of the extra costs of transporting the mortal remains to the Republic of India or of the costs of burial abroad, an official death certificate and a physician's statement givingthe cause of death. Medical statements from relations or spouseswill not be accepted.

iv) Forreimbursementofextraexpensesoftransportationof Insured Person to the Republic of India, a medical statement indicating the cause of illness and the necessity of the transportation. Medical statements from relations or spouses will not be accepted.

v) In case of loss of baggage, a Property Irregularity Report or other report usually issued by the carriers in the event of loss of baggage.

vi) For personal liability, proof of judicial decision rendered by acourt of law.

vii) For personal Accident, bills/ vouchers/ reports/ discharge summary, Death Certificate, First Information Report Post Mortem Report Legal Heir Certificate and such other documents as may be required must contain the name of the person treated, the cause of Accident, details of the individual items of medical treatment provided and the dates oftreatment.

viii) Any other document(s) that the Company requires from the Insured Person to process theclaim.

If TPA and its assistance cooperation partners or the Company requests that bills/ vouchers in a foreign language be accompanied by an appropriate translation then the costs of such translation must be borne by the Insured Person.

F.1.6 Obligations of the Insured Person:

(i) Claims for insurance benefits must be submitted to TPA or Assistance Company not later than one (1) month after the completion of the treatment or transportation home, or in the event of death, after transportation of the mortal remains/burial.

(ii) The Insured Person shall provide TPA or Assistance Company on demand any information that is required to determine the occurrence of the Insured Event or the Company's liability to pay the benefits. In particular, upon request, proof shall be furnished of the actual commencement dateof the Tripa broad.

(iii) If requested to do so by TPA or Assistance Company, the Insured Person is obliged to undergo a medical examination by a Physician designated by Assistance Company.

(iv) Assistance Company is authorized by the Insured Person to take all measures that are suitable for loss prevention and claim minimization, which includes the Insured Person's transportation back to the Republic of India.

(v) The Company shall be released from any obligation to pay insurance benefits if any of the aforementioned obligationsare breached.

F.1.7 Transfer and Set-off ofClaims:

(i) If the Insured Person has any outstanding claims against third parties covered under the Policy, such claims shall be transferred in writing to the Company up to the amount for which the Company in accordance with the terms makes the reimbursement of cost shereunder.

(ii) In so far as an Insured Person receives compensation for costs he/ she has incurred either from third parties liable for damages or as a result of other legal circumstances, the Company shall be entitled to set off this compensation against the insurance benefits payable, if any.

Claims to the insurance benefits may be neither encumbered nor transferred /assigned by the Insured Person, except indemnity for loss of life.

F.1.8 **Geographical Scope**: The insurance cover applies to all countries stated in the Policy Scheduleonly.

F.1.9 **Premium Refund Clause:** On expiry of the policy mentionedin the Schedule the Insured is eligible to get a pro-rata refundof premium for the unutilized Travel Days subject to retaining a minimum premium of Rs.1000/-.

F.1.10 Incontestability and Duty of Disclosure

The Policy shall be null and void and no benefit shall be payable in the event of untrue or incorrect statements, misrepresentation, mis-description or on non-disclosure in any material particular in the proposal form, personal statement, declarationand connected documents, or any material information havingbeen withheld, or a claim being fraudulent or any fraudulent means or devices being used by the Insured Person or any one acting on his behalf to obtain any benefit under this Policy.

F.1.11 Observance of terms andconditions

The due observance and fulfillment of the terms, conditions and endorsement of this Policy in so far as they relate to anything to be done or complied with by the Insured Person, shall be a condition precedent to any liability of the Company to make any payment under this Policy.

F.1.12 Materialchange

The Insured Person shall immediately notify the Company by faxand in writing of any material change in the risk and causeat his own expense such additional precautions to be taken as circumstances may require to ensure safe operation of the Insured items or trade or business practices thereby containing the circumstances that may give rise to the claim and the Company may, adjust the scope of cover and / or premium, if necessary,accordingly.

F.1.13 Records to bemaintained

The Insured Person shall keep an accurate record containing all relevant particulars and shall allow the Company to inspect

such record. The Insured Person shall within one month after the expiry of each Period of insurance furnish such information as the Company mayrequire.

F.1.14 Notice of charge etc.

The Company shall not be bound to notice or be affected by any notice of any trust, charge, lien, assignment or other dealing with or relating to this Policy but the receipt of the Insured Person or his legal personal representative shall in all cases be aneffectual discharge to the Company.

F.1.15 Automatic Termination of Insurance

This policy shall automatically terminate

- upon the Insured Person's death OR
- on the Expiry Date whichever isearlier.

F.1.16 Special Provisions

Any special provisions subject to which this Policy has been entered into and endorsed in the Policy or in any separate instrument shall be deemed to be part of this Policy and shall have effect accordingly.

F.1.17 Overriding effect of Part II of theSchedule

The terms and conditions contained herein and in Part II of the Schedule shall be deemed to form part of the Policy and shall be read as if they are specifically incorporated herein;

however in case of any inconsistency of any term and conditionwith the scope of cover contained in Part II of the Schedule, then the term(s) and condition(s) contained herein shall be read mutatis mutandis with the scope of cover/terms and conditions contained in Part II of the Schedule and shall be deemed to be modified accordingly or superseded in case ofinconsistency being irreconcilable.

F.1.18 ElectronicTransactions

The Insured Person agrees to adhere to and comply with all such terms and conditions as the Company may prescribe fromtime to time, and hereby agrees and confirms that all transactions effected by or through facilities for conducting remote transactions including the Internet, World Wide Web, electronic data interchange, call centers, teleservice operations (whether voice, video, data or combination thereof) or by means of electronic, computer, automated machines network or through other means of telecommunication, established by or on behalf of the Company, for and in respect of the Policy or its terms, or the Company's other products and services, shall constitute legally binding and valid transactions when done in adherence to and in compliance with the Company's terms and conditions for such facilities, as may be prescribed from time to time.

F.1.19 Duties of the Insured Person on occurrence of loss

On the occurrence of any loss, within the scope of cover under the Policy the Insured Person shall:

(i) Forthwithfile/submitaClaimForminaccordancewith"Claim Procedure" Clause as provided in Part II of theSchedule.

(ii) InnoeventshalltheTPAanditsassistancecooperationpartners be notified later than 30 days after the end of the Trip.

If the Insured Person does not comply with the provisions of this Clause or other obligations cast upon the InsuredPerson underthis Policy, in terms of the other clauses referred to herein or interms of the other clauses in any of the Policy documents, all benefits under the Policy shall be forfeited, at the option of theCompany.

F.1.20 Subrogation

In the event of payment under this Policy, the Company shall be subrogated to all the Insured Person's rights or recovery thereof against any person or organization, and the Insured Person shall execute and deliver instruments and papers necessary to secure such rights.

The Insured Person and any claimant under this Policy shall at the expense of the Company do and concur in doing and permit

to be done, all such acts and things as may be necessaryor required by the Company, before or after Insured Person's indemnification, in enforcing or endorsing any rights or remedies, or of obtaining relief or indemnity, to which the Company shall be or would become entitled or subrogated.

F.1.21 Contribution

If at the time of the happening of any loss or damage covered by this Policy, there shall be existing any other insurance of any nature whatsoever covering the same, whether effected by the Insured Person or not, the right of contribution apply.

This does not apply to Benefit-2, which the Company will pay infull.

F.1.22 Fraudulent claims

If any claim is in any respect fraudulent, or if any false statement, or declaration is made or used in support thereof, or if any fraudulent means or devices are used by the Insured Person or anyone acting on his behalf to obtain any benefit under this Policy, or if a claim is made and rejected and no court action or suit is commenced within twelve months after such rejection.

F.1.23 Cancellation/termination

The Company may at any time cancel the Policy on grounds of misrepresentation, fraud, non- disclosure of material fact relating to this insurance of the insured or non-cooperation by the insured by sending 7 days' notice in writing by Registered A/D to the insured at last known address in which case the Company shall not refund to the insured any portion of the premium Cancellation of policy by the Insured Person may be done only in the following cases:

a. where a journey is not undertaken and only on production of the Insured Person's passport as a proof that the journey has not been undertaken. Any request for cancellation will be entertained up to 7 days after the first day of insurance as indicated in the schedule of the policy

b. In case of an early return of the insured person under this policy prior to expiry of the policy period the company will refund premium on a proportionate basis. No refund of premium or part thereof will be allowed if any claim has been preferred or is intended to be preferred under the policy before invoking cancellation request.

The Insured Person has to produce the Passport as proof of the Trip Days undertaken during the Policy Period.

F.1.24 Currency forpayments

All claims payable in India shall be paid in Indian Rupees only.

F.1.25 Policy Disputes

Any dispute concerning the interpretation of the terms, conditions, limitations and/or exclusions contained herein is understood and agreed to by both the Insured Person and theCompany to be subject to Indian Law. Each party agrees to submit to the exclusive jurisdiction of the High Court of Chennai and to comply with all requirements necessary to give such Court the jurisdiction. All matters arising hereunder shall be determined in accordance with the law and practice of such Court.

F.1.26 Notices:

Any notice, direction or instruction given under this Policy shall be in writing and delivered by hand, post to

In case of the Insured Person, at the address specified inthe Schedule.

In case of the Company:

Royal Sundaram General Insurance Co. Limited

"Vishranthi Melaram Towers" No.2/319, Rajiv Gandhi Salai (OMR), Karappakkam, Chennai 600 097.

Notice and instructions will be deemed served 7 days after posting or immediately upon receipt in the case of hand delivery or e-mail.

F.1.27 Customer Service

If at any time the Insured Person requires any clarification or assistance, the Insured Person may contact the offices of the Company at the address specified, during normal business hours.

F.1.28 Grievances

**Grievances Redressal Procedure:**

We promise to provide the service you want, but sometimes mistakes can happen. If you're not satisfied with our service, we're here to make it right. Your satisfaction is our main concern, especially when things haven't gone as planned.

**Step 1: Raise a Complaint**
Please raise your concern with us through our Online form / Call us at: 1860 425 0000 / 1860 258 0000 / mail us at care@royalsundaram.in &

**write us at**
**Customer Services Team**
Royal Sundaram General Insurance Co. Limited
Vishranthi Melaram Towers
No.2/319, Rajiv Gandhi Salai(OMR) Karapakkam,
Chennai – 600097

Senior Citizen can mail us at: seniorcitizengrievances@royalsundaram.in

We will acknowledge your grievance immediately and provide a resolution.

**Step 2**: **Escalation 1**

If you are not satisfied with the resolution provided or require any further assistance, you may escalate the matter to: manager.care@royalsundaram.in

**Step 3**: **Escalation 2**

If you feel your grievance has not been resolved satisfactorily, you may escalate further to: head.cs@royalsundaram.in

**Step 4**: **Escalation to Grievance Redressal Officer - Final Internal Escalation**

If you need further resolution, you may escalate it to:

Grievance Redressal Officer: Mr. T M Shyamsunder, 9500413094
Senior Citizen Redressal: 9500413019
Email: gro@royalsundaram.in

For updated details of grievance officer, kindly refer the link http://www.royalsundaram.in.

lf you are not satisfied with the Redressal of grievance through above methods, you may also approach the office of Insurance Ombudsman of the respective area/region for Redressal of grievance as per insurance Ombudsman Rules 2017.

**Insurance Ombudsman addresses can be accessed at -** https://www.cioins.co.in/Ombudsman

F.1.29 Renewal Clause

The Company shall not be bound to accept any renewal premium nor give notice that such is due. Every renewal premium (which shall be paid and accepted in respect of this policy) shall be so paid and accepted upon the distinct understanding that noalteration has taken place in the facts contained in the proposalor declaration herein before mentioned and that nothing is known to the Insured Person that may result to enhance the risk of the Company under the insurer. Nothing herein or otherwise shall oblige the Company to offer renewal terms or restrict any renewal terms as to premium or otherwise.

F.1.30 Sanctions Limitation and Exclusion Clause :

No (re)insurer shall be deemed to provide cover and no (re)insurer shall be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose that (re)insurer to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, law or regulations of the European Union, United Kingdom or United States of America.

Exclusion Clause for Sanctioned Crude Oil

Notwithstanding anything to the contrary contained herein, the cover provided under this policy expressly excludes any loss of and / or damage to crude oil in stocks sourced or purchased from any country or entity which is a target of sanction, prohibition or restriction to which any (re) insurer may be subject pursuant to the Sanctions and Embargo Clause (hereby referred to as Sanctioned Crude Oil).

In the event of a recoverable loss emanating from an area storing Sanctioned Crude Oil, which spreads and/or impacts other areas of the plant/ stock, subject at all times to the Sanctions and Embargo Clause cover shall be provided for all such areas of the plant/stock including the storage tanks where Sanctioned Crude Oil is stored and the non-Sanctioned Crude Oil in stock that may be in the same storage tank(s) and only the Sanctioned Crude Oil in stock will be excluded.

Subject always to the terms, conditions and exclusions of the policy, any processed product that contains Sanctioned Crude Oil shall, to the extent permitted under the Sanctions and Embargo Clause be covered under this policy.

To the extent permitted under the Sanctions and Embargo Clause if any (re) insurer is not able to cover and/or pay claim due the Sanctions and Embargo Clause, only that amount not payable due to the Sanctions and Embargo Clause shall be excluded.

In the event of a loss hereunder to crude oil stocks, the indemnity amount shall, to the extent permitted under the Sanctions and Embargo Clause, be calculated by making an adjustment to exclude Sanctioned Crude Oil in accordance with the latest import / blending log as maintained by the Scheduling and Planning department (or equivalent) at the Refinery location of the incurred loss.

**Council for Insurance Ombudsmen**

Contact details:

Address:

Council for Insurance Ombudsmen,
3rd Floor, Jeevan Seva Annexe,
S. V. Road, Santacruz (W),
Mumbai - 400 054.

**INSURANCE OMBUDSMAN OFFICE LIST**
The contact details of **Insurance Ombudsman Office** details are as below:
https://www.cioins.co.in/ContactUs

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**WHAT IF I EVER NEED TO COMPLAIN?**

We hope, of course, that you will never feel the need to complain. Nevertheless, sometimes things do go wrong. When they do, we want to know straight away, so we can put them right as quickly as possible, and take steps to make sure they don't happen again.

In all instances, call our Customer Services at our Chennai office at 1860 258 0000 or e-mail at care@royalsundaram.in or write us to Royal Sundaram General Insurance Co. Limited, Vishranthi Melaram Towers, No. 2 / 319, Rajiv Gandhi Salai (OMR), Karapakkam, Chennai - 600097.

Royal Sundaram General Insurance Co. Limited

IRDAI Registration No.102. | CIN: U67200TN2000PLC045611