

Group Loan Insurance Policy

Customer Information Sheet

Sr No	Title	Description	Clause Number
1	Product Name	Group Loan Insurance Policy	
2	What am I Covered For?	<p>Section I: Personal Accident (Mandatory)</p> <p>Section I.a and I.b Accidental death and Permanent Total Disablement defined in Policy. (as per table of benefits mentioned in the policy wordings)</p> <p>Section I.c. Funeral Expenses Funeral Expenses for maximum of Rs. 20,000 in case of Accidental death of the Insured Person.</p> <p>Section II . Critical Illness (Optional) This section provides the coverage against the following 15 Critical Illnesses and Procedures(Refer the wordings for definitions):</p> <ol style="list-style-type: none"> 1. Cancer of specific severity 2. Myocardial Infarction (First Heart Attack of Specific Severity) 3. Open Chest CABG 4. Open Heart Replacement or Repair of Heart Valves 5. Coma of Specified Severity 6. Kidney Failure Requiring Regular Dialysis 7. Stroke Resulting in Permanent Symptoms 8. Major Organ/ Bone Marrow Transplant 9. Permanent Paralysis of Limbs 10. Multiple Sclerosis with Persisting Symptoms 11. Blindness 12. Primary (Idiopathic) Pulmonary Hypertension 13. Aorta Graft Surgery 14. Benign Brain Tumor 15. Motor Neurone Disease with Permanent Symptoms <p>Section II B. Incidental Expenses (Optional Cover) Lumpsum amount of Rs. 1 Lakh or admissible claim amount under Critical Illness, whichever is lower is paid on diagnosis of named critical illnesses.</p> <p>Section III. Admission Benefit - Accidental Hospitalization 3 EMI Amount(s) falling due in respect of the Loan as a fixed benefit in case of Accidental Hospitalization for a minimum period 48 Hours.</p>	<p>Section C – I.a / I.b / I.c</p> <p>Section C – II</p> <p>Section C – II.i</p> <p>Section C – III</p>
3	What are the major exclusions in the policy	<ol style="list-style-type: none"> 1. Any Pre-existing condition, or its related conditions arising from it 2. Any psychiatric disorder 3. Any sexually transmitted diseases. Acquired Immune Deficiency Syndrome (AIDS), AIDS related complex syndrome (ARCS) and all diseases caused by and/ or related to the HIV. 	Section D

		<ol style="list-style-type: none"> 4. Arising or resulting from the Insured Person committing any breach of the law with criminal intent. 5. Arising out of or as a result of any act of self-destruction or self-inflicted injury, attempted suicide or suicide. 6. Arising out of or resulting directly or indirectly due to or as a consequence of pregnancy or treatment traceable to pregnancy and childbirth, abortion, Miscarriage and its consequences, tests and treatment relating to infertility and invitro fertilization. 7. Directly or indirectly caused by or contributed to by or arising from ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste or from the combustion of nuclear fuel. For the purpose of this exclusion, combustion shall include any self-sustaining process of nuclear fission. 8. Directly or indirectly caused by or contributed to by or arising from nuclear weapon materials. 9. Directly or indirectly caused by or contributed to by or arising out of usage, consumption or abuse of alcohol and/or drugs, or other intoxicants or hallucinogens unless properly prescribed by a Physician and taken as prescribed 10. Due to, or arising out of, or directly or indirectly connected with or traceable to, war, invasion, act of foreign enemy, hostilities (whether war be declared or not) civil war, rebellion, revolution, insurrection, mutiny, military or usurped power, seizure, capture, arrests, restraints and detainment of all Heads of State and citizens of whatever nation. 11. External congenital anomalies/defects (known or unknown) or any complications or conditions arising there from 12. Loss due to Terrorism arising in connection with Nuclear and /or chemical and /or biological events. 13. Participation in an actual or attempted felony, riot, crime, misdemeanour, or civil commotion 14. Payment of compensation in respect of death, injury or disablement of Insured person (a) from engaging in or participation in adventure sports including but not limited to winter sports, skydiving/parachuting, hang gliding, bungee jumping, scuba diving, mountain climbing (where ropes or guides are customarily used), riding or driving in races or rallies using a motorized vehicle or bicycle, caving or pot-holing, hunting or equestrian activities, skin diving or other underwater activity, rafting or canoeing involving white water rapids, yachting or boating outside coastal waters, participation in any Professional Sports, any bodily contact sport or any other hazardous or potentially dangerous sport for which the Insured is untrained. <p>(Note: The above is a partial listing of the policy exclusions. Please refer to the policy clauses for the full listing)</p>	
4	Waiting Period	<p>Waiting Periods & Survival Period Applicable To Critical Illness Benefit Section and Optional Benefits Under The Critical Illness Benefit Section:</p> <p>1. First 90 days Waiting Period</p> <p>We shall not be liable to make any payment in respect of any Critical Illness whose signs or symptoms first occur within 90 days of the Inception Date of the first Policy.</p>	Section II

		<p>2. Survival Period</p> <p>The benefit payment shall be subject to survival of the Insured Person for at least 28 days following the first diagnosis of the Critical Illness/ undergoing the Surgical Procedure for the first time.</p>																																											
5	Payment Basis	Under all the sections of the policy payment is made on benefit basis.																																											
6	Loss Sharing	Not Applicable																																											
7	Renewal Conditions	<ul style="list-style-type: none"> The Policy is ordinarily renewable lifelong renewable unless You or any one acting on behalf of You has acted in a fraudulent manner or any misrepresentation under or in relation to this policy or renewal of the Policy poses a moral hazard. The Policy and Certificate of Insurance may be renewed by upfront payment of the total premium specified by Us, which premium shall be at Our premium rate in force at the time of renewal. Premium rates are subject to revision at the time of renewal depending upon overall performance of the product and / or the claim experience under the policy. Your premium will also change if you move into a higher age group, change in Sum Insured, change the term or change the plan. Grace Period of 30 days for renewing the Policy is provided under this Policy. If the renewal is made within the 30 days period the continuity of benefits will be allowed. However, coverage is not available for the period for which no premium is received. We, however, are not bound to give notice that it is due for 	Section E.3																																										
8	Renewal Benefits	NOT APPLICABLE																																											
9	Cancellation	<ul style="list-style-type: none"> A. Cancellation by you <ul style="list-style-type: none"> i) You can choose to cancel the policy, giving us a 15-day notice period by recorded delivery. This, provided there is no claim under the policy. The insured shall be entitled for premium refund at the company's Short Period Scale provided in table below. <p>For Annual Policies:</p> <table border="1"> <thead> <tr> <th>Length of time Policy in force</th> <th>Refund of Premium (% of A</th> </tr> </thead> <tbody> <tr> <td>Up to 1 month</td> <td>75%</td> </tr> <tr> <td>Up to 3 months</td> <td>50%</td> </tr> <tr> <td>Up to 6 months</td> <td>25%</td> </tr> <tr> <td>Exceeding 6 Months</td> <td>0%</td> </tr> </tbody> </table> <p>Refund grid for policies with term longer than 1 year – Fixed Sum Insured:</p> <table border="1"> <thead> <tr> <th>Loan Period</th> <th>2</th> <th>3</th> <th>4</th> </tr> </thead> <tbody> <tr> <td>Policy Period</td> <td>2</td> <td>3</td> <td>4</td> </tr> </tbody> </table> <p>Return Premium Factors</p> <table border="1"> <thead> <tr> <th>Year of Cancellation</th> <th colspan="3">% return premium</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>25%</td> <td>45%</td> <td>57%</td> </tr> <tr> <td>2</td> <td>Nil</td> <td>11%</td> <td>26%</td> </tr> <tr> <td>3</td> <td>-</td> <td>Nil</td> <td>6%</td> </tr> <tr> <td>4</td> <td>-</td> <td>-</td> <td>Nil</td> </tr> <tr> <td>5</td> <td>-</td> <td>-</td> <td>-</td> </tr> </tbody> </table> <p>Refund grid for policies with term longer than 1 year – Reducing Sum Insured:</p>	Length of time Policy in force	Refund of Premium (% of A	Up to 1 month	75%	Up to 3 months	50%	Up to 6 months	25%	Exceeding 6 Months	0%	Loan Period	2	3	4	Policy Period	2	3	4	Year of Cancellation	% return premium			1	25%	45%	57%	2	Nil	11%	26%	3	-	Nil	6%	4	-	-	Nil	5	-	-	-	Section E.2-2
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Year 1	25%	45%	57%	65%	70%	73%	74%	75%	76%	77%	77%	78%	78%	78%	
Year 2	-	11%	26%	37%	45%	49%	51%	53%	54%	55%	56%	56%	57%	57%	
Year 3	-	-	6%	17%	24%	28%	31%	33%	34%	35%	36%	36%	37%	37%	
Year 4	-	-	-	4%	9%	12%	14%	15%	16%	16%	17%	17%	18%	18%	
5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5
16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	
78%	79%	79%	79%	79%	79%	79%	79%	79%	79%	79%	79%	80%	80%	80%	
57%	58%	58%	58%	58%	59%	59%	59%	59%	59%	59%	59%	59%	59%	59%	
37%	38%	38%	38%	38%	39%	39%	39%	39%	39%	39%	39%	39%	39%	39%	
18%	18%	19%	19%	19%	19%	19%	19%	19%	19%	19%	19%	19%	19%	20%	20%

ii). Free Look Period

We shall give You a Free Look Period at the inception of the first policy and:

- You will be allowed a period of at least 15 days from the date of receipt of the policy to review the terms and conditions of the policy and to return the same if not acceptable.
- If you have not made any claim during the Free Look period, you shall be entitled to
 - A refund of the premium paid less any expenses incurred by us on your medical examination and the stamp duty charges or;
 - Where the risk has already commenced and the option of return of the policy is exercised by you, a deduction towards the proportionate risk premium for period on cover or;
 - Where only a part of the risk has commenced, such proportionate risk premium commensurate with the risk covered during such period.
 - Free Look Period is not applicable for renewals.

B. Cancellation by Us

Policy may be cancelled by us on the grounds of misrepresentation, fraud or non-disclosure of material facts by sending to you 15 days notice by recorded delivery at last known address/e-mail ID without refund of premium.

Please note KYC documents (Photo ID card) shall be required at the premium refund to the Insured Member exceeds a threshold limit of Rs. 1 Lakhs per premium refund.

10	Claims	<p>Claim Intimation</p> <p>Upon the discovery or occurrence of an event or Hospitalisation that may give rise to a claim under this Policy, Insured Person or the Nominee as the case may be shall undertake the following:</p> <p>In case of Hospitalisation, notify Us either at Our call centre or in writing within 48 hours of the Hospitalization but not later than discharge from the Hospital.</p> <p>In case of diagnosis or actual undergoing of procedure, notify Us either at the call centre or in writing, within 10 days from the date of occurrence of such event. The following details are to be provided to Us at the time of intimation of Claim:</p> <p>Policy Number</p>	Section E.4
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		<p>Name of the Policyholder Date and Time of Loss Location of Accident Name of the Insured Person in whose relation the claim is being lodged Nature of claims, Accidental death, Accidental Hospitalisation, Critical Illness Name and address of the attending Medical Practitioner and Hospital (if admission has taken place) Date of admission if applicable Any other information, documentation as requested by Us Intimation about an event or occurrence that may give rise to a claim under this Policy must be given within 30 days of its happening. We will examine and relax this time limit mentioned herein depending upon the merits of the case.</p> <p>Claim Notification It is a condition precedent to Our liability hereunder that written notice of claim must be given by You Us within seven (7) days after an actual or potential loss begins or as soon as reasonably possible and in any event no later than (30) Days after an actual or potential loss begins. Failure to furnish such evidence within the time required shall not invalidate nor reduce any claim if you can satisfy us that it was not reasonably possible for you to give proof within such time. We may accept claims where documents have been provided after a delayed interval only in special circumstances and for the reasons beyond the control of the Insured Person.</p> <p>Contact Details:</p> <ul style="list-style-type: none"> • Call us on our Toll Free for any queries that you may have @ 1800221111, 18001021111 • Email your queries to. customer.care@sbigeneral.in 	
9	Policy Servicing/ Grievances/Complaints	<p>If You/Insured Person may have a grievance that requires to be redressed, You/Insured Person may contact Us with the details of the grievance through:</p> <ul style="list-style-type: none"> • Level 1 Call us on our Toll Free for any queries that you may have @ 1800221111, 18001021111 Email your queries to customer.care@sbigeneral.in Visit our website www.sbigeneral.in to register for your queries Please walk in to any of our branch office or corporate office during business hours You may also fax us your queries at _1800227244, 18001027244 • Level 2 If you still are not happy about the resolution provided then you may please write to our head.customercare@sbigeneral.in • Level 3 If you are dissatisfied with the resolution provided in the Steps as indicated above on your Complaint, you may send your 'Appeal' addressed to the Chairman of the Grievance Redressal Committee. The Committee will look into the appeal and decide the same expeditiously on merits. You can write to Head – Compliance, Legal & CS on the id - gro@sbigeneral.in 	Grievances Redressal Procedure

		<ul style="list-style-type: none"> Level 4 If your issue remains unresolved you may approach IRDA by calling on the Toll Free no. 155255 or you can register an online complaint on the website http://igms.irda.gov.in Senior Citizens: Senior Citizens can also write to seniorcitizengrievances@sbigeneral.in If after having followed the above steps you are not happy with the resolution and your issue remains unresolved, you may approach the Insurance Ombudsman for Redressal. 	
10	Insured's Rights	<p>Portability and Continuity Benefits</p> <p>We will grant continuity of benefits which were available to the insured members under a health insurance policy which provides similar indemnity benefits in the immediately preceding cover year provided that:</p> <ul style="list-style-type: none"> We shall be liable to provide continuity of only those benefits (for e.g.: initial wait period, wait period of specific diseases pre-existing disease etc) which are applicable under this policy. Any other wait period that is applicable specific to this policy but was permanently excluded in the previous policy will not be given any credit. Insured members covered under this policy shall have the right to migrate from this policy to an individual health insurance policy or a family floater policy offered by our company. The credit for wait periods would be given in the opted individual health insurance policy or a family floater policy offered by our company. Application for this policy is made within 45 days before, but not earlier than 60 days from the expiry of that group insurance policy. 	Section E.3-2
11	Insured's Obligations	<ul style="list-style-type: none"> Please disclose all pre-existing disease/s or condition/s before buying a policy. <p>Non-disclosure may result in claim not being paid.</p> <ul style="list-style-type: none"> Disclosure of Material Information during the policy period such as change in occupation 	
		<p>Legal Disclaimer Note: The information must be read in conjunction with the product brochure and policy document. In case of any conflict between the CIS and the policy document, the terms and conditions mentioned in the policy document shall prevail.</p>	