

GROUP DOMESTIC TRAVEL POLICY

CUSTOMER INFORMATION SHEET / KNOW YOUR POLICY

This document provides key information about your policy. You are also advised to go through your policy document.

Sl. No.	Title	Description (Please refer to applicable policy clause number in next column)	Policy Clause Number																								
1.	Name of Insurance Product/ Policy	Group Domestic Travel Policy																									
2.	Policy Number	XXXXXXXXXXXXXXXXXXXXXXX																									
3.	Type of Insurance Product/ Policy	Both Indemnity and Benefit																									
4.	Sum Insured (Basis)	<p>Group Individual Sum Insured</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-bottom: 10px;"> <thead> <tr> <th style="width: 10%;">Sr. No.</th> <th style="width: 40%;">Insured Name</th> <th style="width: 50%;">Base Sum Insured</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table> <p>Family Floater Sum Insured</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-bottom: 10px;"> <thead> <tr> <th style="width: 10%;">Sr. No.</th> <th style="width: 40%;">Insured Name</th> <th style="width: 50%;">Base Sum Insured</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table> <p>Note: This is the base Sum Insured for policy. Please refer the policy schedule for cover wise limits.</p>	Sr. No.	Insured Name	Base Sum Insured										Sr. No.	Insured Name	Base Sum Insured										
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5.	Policy Coverage (What the Policy Covers)	<p>Following are covered as basic cover up to the limit specified in the policy schedule</p> <p>Section 1. Accident: Medical Treatment, Assistance and Evacuation</p> <ol style="list-style-type: none"> 1. Medical Treatment - Medical Expenses incurred for Hospitalisation or Outpatient Treatment. 2. Medical Evacuation - Expense for transportation of the Insured Person and an attending Medical Practitioner and/or Immediate Family Members (maximum two 	Benefits																								

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		<p>members).</p> <p>3. Transportation of mortal remains - Reimbursement for transporting the mortal remains.</p> <p>4. Accidental Dental Injury - Coverage for natural sound teeth that requires immediate medical attention.</p> <p>Section 2. Personal Accident- Death, permanent impairment covered.</p> <p>Section 3. Hospital Daily Cash- Coverage for Daily Cash amount for each continuous and completed period of 24 hours</p> <p>Section 4. Travel Support (Air Travel)</p> <p>1. Loss of Checked-in Baggage- Coverage for Checked-in Baggage if permanently lost by a Carrier.</p> <p>2. Delay of Checked-in Baggage- Coverage for Checked-in Baggage if delayed by a Carrier.</p> <p>3. Flight Delay- Coverage for delay of flight for more than 6 hrs.</p> <p>Section 5. Travel Support (Rail Travel)</p> <p>1. Loss of accompanying baggage- Accidental loss of, destruction of or damage caused to personal Baggage.</p> <p>2. Train Delay- Coverage for delay of rail for more than 12 hrs.</p> <p>Section 6. Travel Inconvenience</p> <p>1. Trip Cancellation- If the carrier is unavoidably cancelled due to the reasons mentioned, this cover triggers.</p> <p>2. Trip Curtailment- Coverage for a trip on a Carrier if unavoidably curtailed before completion.</p> <p>3. Missed Departure- Coverage for the cost of actual Ticket (Common Carrier – Air/ Rail), if the insured cannot reach the original departure point because of stated reasons.</p> <p>4. Loss of Tickets- Coverage for cost of actual ticket (Common Carrier – Air/ Rail), which has been lost, and due to which insured could not continue intended Trip</p> <p>5. Emergency Travel- Coverage for actual cost of an economy return airfare or one way first class railway ticket in a Common Carrier, whichever is less, for one Immediate Family Member.</p> <p>6. Emergency Hotel- Reimbursement of reasonable costs of accommodation (boarding and lodging), of the Immediate Family Member for stated conditions.</p>	

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		<p>Section 7. Domestic Replacement and Rearrangement (cover available for Business Trips Only)- Payment up to the maximum amount stated for reasonable additional travel and accommodation expenses deputing a substitute employee from the same organization as a replacement.</p> <p>Section 8. Personal Liability- Payment by way of Compensation for, personal injury or property damage of third party</p> <p>Section 9. Home Burglary- Coverage for actual or attempted burglary and/ or robbery.</p> <p>Note: Insurer's Liability in respect of all claims admitted during the period of insurance shall not exceed the Sum Insured for the Insured person as mentioned in the schedule.</p>	
6.	Exclusions (What the policy does not cover)	<p>Following is a partial list of the policy exclusions. Please refer to the policy document for the complete list of exclusions:</p> <ol style="list-style-type: none"> 1. Any Pre-existing Condition declared or not declared or any complication arising from it. 2. Any person who has obtained cover and is under Age 90 days or above Age 80 years 3. If the Insured Person is travelling against the advice of a Medical Practitioner, or is receiving or on a waiting list for specified medical treatment, or is travelling for the purpose of obtaining medical treatment, or has received a terminal prognosis for a medical condition 4. Pregnancy (including voluntary termination), miscarriage (except as a result of an Accident or Illness), maternity or birth (including caesarean section) except in the case of ectopic pregnancy 5. The abuse or the consequences of the abuse of intoxicants or hallucinogenic substances such as drugs and alcohol, including smoking cessation programs and the treatment of nicotine addiction or any other substance abuse treatment or services, or supplies 6. Arising or resulting from the Insured Person(s) committing any breach of law with criminal intent, or intentional self-injury, suicide or attempted suicide while sane or insane 7. Experimental, investigational or unproven treatment 8. Venereal disease, sexually transmitted disease or illness; "AIDS" (Acquired Immune Deficiency Syndrome) and/or infection with HIV (Human immunodeficiency virus) 9. War or any act of war, invasion 10. Participation in Adventure Sports or Professional Sports 	General exclusions

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7.	Waiting period	Not Applicable	
8.	Financial Limits of the Coverage	<p>In case of a claim, this policy requires you to share the following costs:</p> <ol style="list-style-type: none"> 1. Hospital Daily Cash - First 24 Hours 2. Travel Support (Air Travel) <ul style="list-style-type: none"> - Loss of Checked Baggage - INR 250 - Delay of Checked Baggage - First 6 hours - Flight Delay - First 6 hours 3. Travel Support (Rail Travel) <ul style="list-style-type: none"> - Loss of accompanying baggage - INR 250 - Train Delay - First 12 hours 4. Travel Inconvenience <ul style="list-style-type: none"> - Trip Cancellation - INR 250 - Trip Curtailment - INR 250 - Missed Departure - NIL - Loss of Tickets - INR 250 - Emergency Hotel - 10% of claim amount 5. Home Burglary - INR 5000 	Benefits
9.	Claims/ Claims Procedure	<ol style="list-style-type: none"> a. For Cashless Service: Insured may refer Pre-Authorization form attached as Annexure-C to the Policy Wordings and for updated Hospital Network details refer the link https://www.sbigeneral.in/portal/contact-us/hospital b. For Reimbursement of Claim: For reimbursement of claims the Insured Person may submit the necessary documents to TPA/Company within the prescribed time limit as specified in the Policy Wordings. <p>Turn Around Time (TAT) for claim settlement</p> <ol style="list-style-type: none"> i. TAT for pre-authorization of cashless facility - within 1 hour from receipt of complete documents. ii. TAT for cashless final bill settlement - within 3 hours from receipt of complete documents. <ul style="list-style-type: none"> • Hospital Network details can be obtained from link: https://www.sbigeneral.in/portal/contact-us/hospital • Toll Free number: 1800 210 3366, 1800 210 6366 • List of Hospitals which are blacklisted or from where no claims will be accepted by the insurer is available in below link: https://www.sbigeneral.in/contact-us/hospital • Claim forms can be downloaded from below link: https://www.sbigeneral.in/claim/claims-form-download 	General conditions

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		<p>Note: For cover wise claims procedure, please refer to policy wordings.</p>	
10.	Policy Servicing	<p>Email: customer.care@sbigeneral.in</p> <p>Toll-Free number 1800102111 (Monday to Saturday) (8 am - 8 pm).</p> <p>Website: www.sbigeneral.in</p>	
11.	Grievances/ Complaints	<p>Stage 1: If you are dissatisfied with the resolution provided above or for lack of response, you may write to head.customer.care@sbigeneral.in We will look into the matter and decide the same expeditiously within 14 days from the date of receipt of your complaint.</p> <p>For Senior Citizens: Senior Citizens can reach us at seniorcitizengrievances@sbigeneral.in; Toll Free - 1800 22 1111 / 1800 102 1111 Monday to Saturday (8 am - 8 pm)</p> <p>Stage 2: In case, you are not satisfied with the decision/resolution communicated by the above office, or have not received any response within 14 days, you may send your Appeal addressed to the Grievance Redressal Officer at : gro@sbigeneral.in or contact at 022-45138021.</p> <p>Address: Grievance Redressal Officer, 9th Floor, A & B Wing, Fulcrum Building, Sahar Road, Andheri (East), Mumbai 400 099. List of Grievance Redressal Officers at Branch: https://content.sbigeneral.in/uploads/0449cac1bcd144bbb160d3f6b714fbbd.pdf/</p> <p>Stage 3: In case, you are not satisfied with the decision/resolution communicated by the above office, or have not received any response within 14 days, you may Register your complaint with IRDAI on the below given link https://bimabharosa.irdai.gov.in/Home/Home</p> <p>Stage 4: If your grievance remains unresolved from the date of filing your first complaint or is partially resolved, you may approach the Insurance Ombudsman falling in your jurisdiction for Redressal of your Grievance. The details of the Insurance Ombudsman can be accessed at (https://www.cioins.co.in/Ombudsman)</p>	Grievance

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12.	Things to remember	Policy renewal: The Policy shall ordinarily be renewable provided the product is not withdrawn, except on grounds of established fraud or non-disclosure or misrepresentation by the Insured Person.	General conditions
13.	Your Obligations	The Policy shall be void and all premiums paid thereon shall be forfeited to the Company in the event of misrepresentation, mis-description, or non-disclosure of any Material Fact by the Insured Person.	General conditions

Declaration by the Policy Holder: I have read the above and confirm having noted the details.

Place:

Date:/...../.....

Signature of the Policyholder

Note:

- a) For product related documents including Customer Information Sheet, kindly refer to the below link: <https://www.sbigeneral.in/downloads>
- b) In case of any conflict, the terms and conditions mentioned in the policy document shall prevail