

CUSTOMER INFORMATION SHEET

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

SI No	Title	Description	Policy /Clause Number
1	Product Name	Employees Compensation Insurance Policy	
2	Unique Identification Number(UIN) allotted by IRDAI	IRDAN144RP0015V01201112	
3	Structure	Basis of Sum Insured: Indemnity	-
4	Interests Insured	1. All claims arising out of all accidents for any number of Employees during the Period of Insurance. 2. As specified in the policy schedule.	-
5	Sum Insured	As specified in policy schedule.	Reference Schedule
6	Policy Coverage	<ul style="list-style-type: none"> Injury sustained to employees of an organization by any accident arising out of and in the course of their employment in the Business, for which the Insured is liable to pay compensation under any Law(s) specified in the Schedule, then the Company shall indemnify the Insured up to the Limit of Indemnity against all sums for which the Insured shall be so liable. Including costs and expenses for defending any such claim incurred with the Company's consent. As specified in the policy schedule. 	Reference-Base Coverage
7	Add-on Cover	As specified in policy schedule.	-
8	Loss Participation	Not applicable	-
9	Exclusions	The company is not liable with respect to - <ol style="list-style-type: none"> For Occupational Diseases contracted by an Employee For interest and/or penalty imposed on the Insured under any law or otherwise. Under any Law for medical expenses in connection with treatment of any Injury sustained by an Employee For persons employed in Business under a Contractor or Sub-Contractor of the Insured unless specifically covered in the Schedule For Injury sustained by person whilst in the employ of the Insured otherwise than in the Business and/or who has is not declared for insurance under this Policy. Assumed by agreement which would not have attached in the absence 	Reference – Exclusions

		<p>of such agreement</p> <p>7. For any sum which the Insured would have been entitled to recover from any party but for an agreement between the Insured and such party.</p> <p>8. For any accident occurring whilst the Employee is under the influence of intoxicating liquor or drugs.</p> <p>9. For any incapacity or death of an Employee resulting from his/her deliberate self-injury or the deliberate aggravation of an accidental Injury.</p> <p>Kindly refer policy wordings for the complete list of exclusions.</p>																									
10	Special Conditions and Warranties	As specified in policy schedule.	-																								
11	Admissibility of Claim	<p>Admissibility/Denial:</p> <ul style="list-style-type: none">Admissibility/Denial of claim depends on the document submitted for the damaged item claimed by the insured in reference to event /peril / term and condition of the policy.Surveyor will verify the document and assess the loss as per policy term / condition and coverage mentioned in the policy.Submitted Report to the insurer. It also depends on investigation report (if any), the claim would not be acceptable if it falls under specific warranty or General exclusion/condition mentioned in the Policy Wordings. <p>Below mentioned in the sample process on claim calculation</p> <table><tr><th>Description</th><th>Amount (Rs)</th></tr><tr><td>DEATH</td><td>50%</td></tr><tr><td>Age Factor</td><td>As per WC ACT</td></tr><tr><td>Wage</td><td>(MAX 15000 or Actual Wage Or SI opted by Employer - Which ever lower</td></tr><tr><td>Loss of earning cap</td><td>100%</td></tr><tr><td>A:- Compensation Amount</td><td>(Wages X WC Age factor X Loss Of Earning X 50%)</td></tr><tr><td>B:- Add the Add on Cover, as opted in the policy</td><td></td></tr><tr><td>Claim Payable</td><td>Addition of A+B</td></tr></table> <table><tr><th>Description</th><th>Amount (Rs)</th></tr><tr><td>PERMANENT TOTAL DISABLEMENT</td><td>60%</td></tr><tr><td>Age Factor</td><td>As per WC ACT</td></tr><tr><td>Wage</td><td>(MAX 15000 or Actual Wage Or SI opted by Employer) - Which ever lower</td></tr></table>	Description	Amount (Rs)	DEATH	50%	Age Factor	As per WC ACT	Wage	(MAX 15000 or Actual Wage Or SI opted by Employer - Which ever lower	Loss of earning cap	100%	A:- Compensation Amount	(Wages X WC Age factor X Loss Of Earning X 50%)	B:- Add the Add on Cover, as opted in the policy		Claim Payable	Addition of A+B	Description	Amount (Rs)	PERMANENT TOTAL DISABLEMENT	60%	Age Factor	As per WC ACT	Wage	(MAX 15000 or Actual Wage Or SI opted by Employer) - Which ever lower	-
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12	Policy Servicing - Claim Intimation and Processing	For Policy/Claims Servicing, reach out to us at: 1. Toll Free No:1800 22 1111 / 1800 102 1111. (24/7) 2. Email Id: customer.care@sbigeneral.in 3. Reimbursement Process as mentioned below <ul style="list-style-type: none">Once the claim is registered to SBIG.Claim SPOC will get in touch with You for a surveyor appointment.Survey of the damaged property will be done physically / virtually.Documents list will be shared by surveyor /investigator /insurance company.Submission of Documents to surveyor/ investigator/ insurance company.The surveyor will submit his report to the insurance company.Offer for Settlement.Claim remittance. 4.Turn Around Time (TAT) for Claim Settlement: Within a period of 7 days from the Intimation of claim or receipt of the final survey report. 5. Refer below to the Escalation Matrix when TAT is not satisfied: <table><tr><td>Zone</td><td>Escalation Level</td><td>Email ID</td></tr><tr><td>All Zone</td><td>First Level</td><td>customer.care@sbigeneral.in</td></tr><tr><td>All Zone</td><td>Second Level</td><td>gro@sbigeneral.in</td></tr></table>			Zone	Escalation Level	Email ID	All Zone	First Level	customer.care@sbigeneral.in	All Zone	Second Level	gro@sbigeneral.in	-
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13	Grievance Redressal and Policyholders Protection	In accordance with PPHI Regulations, the Company has adopted Grievance Redressal Policy, wherein the Grievance Redressal Procedure, details of GRO, Ombudsman details and link to Bima Bharosa Portal is displayed. • 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. • 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 Toll free number 1800 102 1111 (Available 24/7) For agents and intermediaries 1800 22 1111 (Available 24/7). Grievance Redressal and Policyholders Protection			-									

		https://content.sbigeneral.in/uploads/0449cac1bcd144bbb160d3f6b714fbbd.pdf/ <ul style="list-style-type: none"> • 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 • 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) 	
14	Obligations of the Policyholder	<ul style="list-style-type: none"> • To disclose all material information at time of filing the proposal form. • In case of any change / modification / addition to the already declared information the same shall be brought to the notice of the insurer immediately. • Non-disclosure of material information about the insured Asset like Addition/Deletion of contents, Addition/Deletion/Change of Hypothecation, Change in Nominee Name, Address or asset details etc. may affect the claim settlement. 	

Declaration by the Policyholder:

I have read the above and confirm having noted the details.

Place:

Date:

(Signature of the Policyholder)

Note:

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