

LOAN INSURANCE 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	Loan Insurance Policy													
2.	Policy Number	XXXXXXXXXXXXXXXXXXXXXXX													
3.	Type of Insurance Product/ Policy	Benefit													
4.	Sum Insured (Basis)	<p>Individual Sum Insured</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 15%;">Sr. No.</th> <th style="width: 45%;">Insured Name</th> <th style="width: 40%;">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													
5.	Policy Coverage (What the Policy Covers)	<p>The policy covers following:</p> <ul style="list-style-type: none"> I Critical Illness II Personal Accident III Loss of Job <p>I. Critical Illness:</p> <p>If you are diagnosed with any of the listed Critical Illnesses, the benefit shall be payable after completion of Survival Period of 28 days. The following Critical Illnesses are covered:</p> <p>A First diagnosis of the below-mentioned Illnesses more specifically described below:</p> <ul style="list-style-type: none"> 1. Cancer of Specified Severity 2. Kidney Failure Requiring Regular Dialysis 3. Primary Pulmonary Arterial Hypertension 4. Multiple Sclerosis with Persisting Symptoms 	Scope of Cover & Benefits												

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		<p>B. Undergoing for the first time of the following surgical procedures, more specifically described below:</p> <ol style="list-style-type: none"> 5. Major Organ/ Bone Marrow Transplant 6. Open Chest CABG 7. Aorta Graft Surgery 8. Open Heart Replacement or Repair of Heart Valves <p>C. Occurrence for the first time of the following medical events more specifically described below:</p> <ol style="list-style-type: none"> 9. Stroke Resulting in Permanent Symptoms 10. First Heart Attack of Specified Severity 11. Coma of Specified Severity 12. Total Blindness 13. Permanent Paralysis of Limbs <p>II. Personal Accident: Covers</p> <ol style="list-style-type: none"> 1. Death 2. Permanent Total Disablement <p>III. Loss of Job: We shall pay maximum of 3 EMI Amount(s) falling due in respect of the Loan due to termination from employment of the Insured Person or his dismissal, temporary suspension or retrenchment.</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. Breach of Law. 2. War, invasion, act of foreign enemy, hostilities (whether war be declared or not) civil war, all kinds and acts of terrorism, riots, strike, malicious acts etc. 3. Ionising radiation or contamination by radioactivity from any nuclear fuel. 4. Directly or indirectly caused by or contributed to by or arising from nuclear weapon materials. 5. Usage, consumption or abuse of alcohol and/or drugs. 6. Act of self-destruction or self-inflicted injury, attempted suicide or suicide. 7. Any sexually transmitted diseases. 	General Exclusions Applicable to the Policy

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7.	Waiting Period	Initial waiting period: 90 days for Critical Illness and Loss of Job	Scope of Cover & Benefits
8.	Financial Limits of the Coverage	Not Applicable	
9.	Claims/ Claims Procedure	<ul style="list-style-type: none"> For claims, the Insured Person may submit the necessary documents to TPA/ Company within the prescribed time limit as specified in the policy wordings. Turn Around Time (TAT) for claim settlement <ul 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. 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 <p>Note: For cover wise claims procedure, please refer to policy wordings.</p>	Scope of Cover & Benefits
10.	Policy Servicing	<p>Email: customer.care@sbigeneral.in</p> <p>Toll-Free number (24*7) 18001021111</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.customercare@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</p>	General Conditions Applicable to the Policy, Clause 23

Sl. No.	Title	Description (Please refer to applicable policy clause number in next column)	Policy Clause Number
		<p>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:</p> <p>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:</p> <p>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>	
12.	Things to remember	<ul style="list-style-type: none"> • Free Look Cancellation: The insured will be allowed a period of at least 30 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. For detailed conditions and refund summary, please refer to policy wordings. • 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 Applicable to the Policy, Clause 1, Clause 18
13.	Your Obligations	<p>Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may affect the claim settlement.</p> <p>Disclosure of Information:</p> <p>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 Policyholder.</p>	General Conditions Applicable to the Policy, Clause 6

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