

STAND-ALONE MOTOR DAMAGE COVER FOR TWO WHEELER

CUSTOMER INFORMATION SHEET / KNOW YOUR POLICY

This document provides only key information about your policy. Please refer to the policy document for detail terms and conditions.

SI. No.	Title		iption y clause number in next column)	Policy Clause Number
1.	Name of Insurance Product/ Policy	Stand-Alone Motor Damage Cover for Two Wheeler		
2.	Unique Identification Number allotted by IRDAI	IRDAN144RP0002V01201920		
3.	Structure	Basis of Sum Insured -Indemnity		2.Coverage
4.	Interests Insured	Interest insured is Damage to vehicle		2. Coverage
5.	Sum Insured / Motor Insured Declared Value	Total IDV of the vehicle insured- XXXX		3.Sum insured – insured's declared value (idv)
6.	Policy Coverage (What the policy covers?)	 Policy covers the following 1. Loss or damage to your insured vehicle due to fire, self-ignition, accidental damage, explosion, natural disasters like lightning, earthquake, hurricanes, cyclones, landslides, etc. For complete details on the coverage, limits, exclusions, terms & conditions, refer policy wording on www.sbigeneral.in 		2 Coverage. loss of or damage to the vehicle insured
7	Add on Cover	Add On Cover Name	Sum Insured/Limits	12 Add on
7.		Depreciation Reimbursement	Maximum upto IDV	12. Add on covers : Refer the Annexure III
		Return to invoice	Upto invoice value	
		Protection of NCB	NCB applied on the policy.	(Refer the add
		Inconvenience Allowance	As per limit opted in the policy	ons as opted by you and mention in the policy schedule)
		Loss of Personal Belongings	up to SI mention in add in policy schedule	
		Enhanced PA cover for Insured (Owner driver)	up to amount mention in Policy Schedule	

SI. No.	Title	Descr (Please refer to applicable polic	iption y clause number in next column)	Policy Clause Number
		Enhanced PA Cover for Unnamed Passengers	up to amount mention in Policy Schedule	
		Enhanced PA Cover for Paid Driver	up to amount mention in Policy Schedule	
		Hospital Cash Cover for Insured (Owner Driver)	up to amount mention in Policy Schedule	
		Hospital Cash Cover for Paid Driver	up to amount mention in Policy Schedule	
		Hospital Cash cover for Unnamed Passengers	up to amount mention in Policy Schedule	
		Basic Road Side Assistance	As per the benefits mentioned in add on wording	
		Additional Road Side Assistance	As per the benefits mentioned in add on wording	
		Engine Guard	As per the benefits mentioned in add on wording	
		Cover for Consumables	As per the benefits mentioned in add on wording	
		EMI Protector	maximum 2 months EMI or sum insured as mentioned in the schedule	
		Emergency Medical Expenses	upto the sum insured mentioned in the policy schedule	
		Go Smart – Flexi Cover	upto IDV for Kms opted in policy schedule	
		Wall charger and associated accessories	As per the benefits mentioned in add on wording	
		Professional Fees for App Restoration Cover	As per the benefits mentioned in add on wording	
		Battery Guard	As per the benefits mentioned in add on wording	
		Vehicle Replacement Edge	As per the benefits mentioned in add on wording	
		Tyre & Rim Secure	As per the benefits mentioned in add on wording	
8.	Loss parti- cipation	Compulsory deductible is a ma paid by you at the time of claim	ndatory deductible that must be	9. Endorsements, IMT 22 & 22A
		Compulsory Deductible applica	ble under this policy is – Rs xxxx	
			lar share of claim that you agree of claim because of which the ntly.	
		Voluntary Deductible of Rs XXX	K is opted by you	

SI. No.	Title	Description (Please refer to applicable policy clause number in next column)	Policy Clause Number
9.	Exclusions (What the policy does not cover)	 The Insurer shall not be liable with respect to 1. Damage, theft or loss due to incidents related to the war, invasion, foreign enemy acts, mutiny, rebellion, etc. 2. Driving without a valid licence 3. Driving under the influence of drugs and alcohol 4. Electrical/Mechanical Breakdowns For complete details on the exclusions, refer policy wording 	6.General Exceptions
10.	Special Conditions and Warranties (if any)	Warranted all damages existing prior to inception of risk are excluded from the scope of Policy.	
11.	Admissibi- lity of Claim	Admissibility: Admissibility of claim depends on the document submitted for the damaged vehicle 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 the Report to the insurer. The claim would not be acceptable if it falls under specific warranty or General exclusion/condition mentioned in the Policy Wordings. Denial: Denial of claim can be done by us & policy can be cancelled on the ground of mis-representation, mis-declaration, fraud, non-disclosure of material facts. The sample claim calculation process is mentioned below A. Gross Assessed Liability ₹20,000 B. Less: Depreciation (if applicable) (₹4,000) C. Net Assessed Liability (A-B) ₹16,000 D. Less: Compulsory Deductible (₹2,000) E. Net payable amount (C-D) ₹14,000	8. Conditions
12.	Policy Servicing - Claim Intimation and Processing	 Claim intimation & reaching to our designated officials please contact us at Email: customer.care@sbigeneral.in Toll-Free number: 1800102111 Website: www.sbigeneral.in Whatsapp: 7669800345 Mobile app: SMS: 561612 Procedure to be followed for cashless service A. For accidental damage: Contact us as above mention modes B. You will receive a text message with contact details of the surveyor appointed for your claim. C. Document Submission: Surveyor collect all relevant documents from you or documents may be submitted to branch digitally through whatsapp/Mobile app or link shared by us. 	

SI. No.	Title	Description (Please refer to applicable policy clause number in next column)	Policy Clause Number
		 D. Assessment: Loss will be assessed by surveyor as per policy terms and conditions. E. Delivery Order/Vehicle Delivery: On receipt of Pre-Invoice of repaired vehicle delivery order will be provided as per survey report and policy terms and conditions. F. Payment to garage: We will process the claim payment in favour of repairer post receipt of the Final document as per survey report and policy terms and conditions 3. Procedure to be followed for reimbursement service A. For accidental damage: Contact us as above mention modes B. You will receive a text message with contact details of the surveyor appointed for your claim C. Document Submission: Surveyor collect all relevant documents from you or documents may be submitted to branch digitally through whatsapp/Mobile app or link shared by us D. Assessment: Loss will be assessed by surveyor as per policy terms and conditions E. Repair invoice submission: You have to submit repair invoice to us F. Payment to insured: We will process the claim payment in favour of Insured post receipt of the Final document as per survey report and policy terms and conditions 4. Turnaround Time (TAT) for claim settlement A. Time limit for appointment of surveyors - 24 hours from date of intimation of claim B. Submission of survey report - 15 days from the date of appointment of surveyor C. Settlement/rejection of Claim - 7 days after receiving last document 5. Escalation matrix when TAT is not satisfied For Queries, Service Request and Non - Health claims Registration Call SBI General Insurance on Toll Free – 18001021111 Email us at : customer.care@sbigeneral.in 	
13.	Grievance Redressal and Policy- holders Protection	Details of protection of policyholder's interest-The Company has adopted Grievance Redressal Policy, wherein the Grievance Redressal Procedure, details of GRO, Ombudsman details and link to Bima Bharosa Portal is mentioned below. Stage 1 To raise the query, you may write to head.customercare@sbigeneral.in Toll Free - 1800 102 1111 Customer Care Toll-free number is available 24/7	8. Grievance Redressal Process

SI.		Description	Policy Clause
No.	Title	(Please refer to applicable policy clause number in next column)	Number
		Stage 2 If you are not satisfied with the decision communicated by the above office, or have not received any response within 14 days, send your appeal at : gro@sbigeneral.in. or contact at: 022-42412070 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/0449cac1bcd144bbb160 d3f6b714fbbd.pdf/ 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. If Your issue remains unresolved You may approach IRDAI by calling on the Toll-Free no. 155255 List of Ombudsman offices with contact details are attached as an Annexure-1. For updated status, please refer to website www.irdaindia.gov.in	
14.	Obligations of prospective Policyholder / Customer	 The Policy shall be void and all premium paid hereon shall be forfeited to the Insurer, in the event of misrepresentation, misdescription or non disclosure of any material fact by the policyholder pertaining to the proposal form, written declarations or any other communication exchanged for the sake of obtaining the insurance policy by the Insured. Disclosure of other material information during the policy period: Change in insured name Change in the vehicle details i.e make, model, cc, extra fitments, engine & chassis no, class of vehicle. In fact all (In fact, all relevant details are in the RC book/card and a copy of same may be handed over) Tax paid details; Certificate of fitness, license validity etc. Previous policy details (ie. Disclosure of NCB, previous claim details) 	

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