

COMPREHENSIVE LOAN INSURANCE

POLICY SCHEDULE

Policy No.: _____ Issue Date: _____
 Servicing Branch Office: _____

INTERMEDIARY DETAILS

Intermediary Name: _____
 Intermediary Code: _____
 Contact Details: _____
 Mobile No.: _____
 Landline No.: _____
 Address.: _____

POLICY HOLDER DETAILS

Name of Policyholder		
Present Address (Current Residing Address)	City:	State:
	Village:	Gram Panchayat:
	Pin-code:	Landmark:
Permanent Address	City:	State:
	Village:	Gram Panchayat:
	Pin-code:	Landmark:
PAN No./Form 60/61		
GSTN No.		
Email		
Contact Details		
Previous Policy No	Sum Insured:	
Business Type	New/ Renewal/ Migration/ Portability	
Date of 1 st inception of Policy		
Period of Insurance	From Date and Time: <div> <div>D</div> <div>D</div> <div>M</div> <div>M</div> <div>Y</div> <div>Y</div> <div>Y</div> <div>Y</div> </div> _____hrs	To Date and Time: <div> <div>D</div> <div>D</div> <div>M</div> <div>M</div> <div>Y</div> <div>Y</div> <div>Y</div> <div>Y</div> </div> _____midnight
No of Employees / Applicants Covered:		

As part of our Go Green initiative, your policy will be issued digitally to your registered mobile number via WhatsApp, SMS, and email. By issuing an e-policy, we help conserve the environment by saving a tree. An electronic policy document holds the same legal validity as a physical copy. The date on which the policy document is delivered will be considered for determining the free look period.

However, if you would prefer to receive a physical copy of your policy document, simply send an SMS with the message "PRINT <Policy Number>" to 561612 from your registered mobile number.

SCHEDULE OF COVERAGE

Sections that are opted should be shown and rest should be hidden				
Section No	Section Name	Cover Name and Description	Opted / Not Opted	Sum Insured
I	Critical Illness Cover	<< Major Critical Illness Benefit / Critical Illness (CI) - Sachet >> (Any one plan can be opted)	<<Opted/Not Opted>>	<<sum insured>>
		Optional Cover - Early-Stage Critical Illness Conditions Cover	<<Opted/Not Opted>>	25% of Sum Insured subject to maximum of 5 Lacs (This will reduce the Critical Illness Sum Insured)
		Optional Cover - Incidental Expenses (Can be opted only if Major CI or Sachet CI is opted)	<<Opted/Not Opted>>	10% of Base SA subject to maximum of INR 100,000 (The Sum Insured is over and above the base)
II	Personal Accident Benefit	<< AD Only / AD + PTD / AD + PTD + PPD / PTD+PPD >> (Any one plan can be opted)	<<Opted/Not Opted>>	<< Sum Insured >>
		Optional Cover - Double Indemnity PA cover (Can be opted if AD Only / AD + PTD / AD + PTD + PPD / PTD+PPD is opted)	<<Opted/Not Opted>>	<< 2 Times of AD/ PTD >>
		Optional Cover - Funeral Benefit (Can be opted if AD Only / AD + PTD / AD + PTD + PPD is opted) (The Sum Insured is over and above the base sum insured) (Trigger will be AD)	<<Opted/Not Opted>>	INR 20000
III	<<Involuntary Loss of Job/Loss of Earnings for Self Employed>>	Can be opted only if Major CI or Sachet CI is opted OR one cover from PA is opted (The Sum Insured is over and above the base)	<<Opted/Not Opted>>	3EMIs
IV	Education Benefit	(Trigger will be CI/AD/PTD) (The Sum Insured is over and above the base) Can be opted only if Major CI or Sachet CI is opted OR one cover from PA is opted	<<Opted/Not Opted>>	10% of Base Sum Insured maximum of 5 Lacs

Waiting Period –

1. Initial Waiting Period* - <<90 days/60 Days/30 Days>> (excl Accident and Early stage CI)
2. Initial Waiting Period for Early stage CI – 180 Days
3. Survival period - << 28 Days / 14 Days / 7 Days / Zero Days >>

SPECIAL CONDITION

Coverage Subject to additional condition, time deductible, co-pay as below

- 1.
- 2.

CONTACT DETAILS IN CASE OF ANY CLAIM

Email	sbig.health@sbigeneral.in
Toll-Free number	1800 102 1111 (Available 24/7) For agents and intermediaries 1800 22 1111 (Available 24/7)
Website	www.sbigeneral.in
Fax No	1800227244, 18001027244

GRIEVANCE REDRESSAL PROCEDURE

Stage 1: Bima Bharosa

You can register your grievances with the regulator using the following link:

<https://bimabharosa.irdai.gov.in/Home/Home>

Stage 2: Head – Customer Care

Alternatively, if you wish to register your grievances directly with us, you may write to the Head – Customer Care. We aim to respond to all Grievances within 7 days. In our initial acknowledgement of receipt letter, we will provide the name and title of the person that is handling your Grievance. This individual will have the authority necessary to investigate and resolve the Grievance.

Email: head.customercare@sbigeneral.in

Phone: 1800 102 1111

For Senior Citizens:

Senior citizens can reach us through the following dedicated channels:

Email: Seniorcitizengrивences@sbigeneral.in

Toll-Free Number: 1800 102 1111 (Available 24/7)

Stage 3: Grievance Redressal Officer (GRO)

In case, you are still not satisfied with the decision/resolution communicated by the above officer or have not received any response within 5 Business days, you may escalate the matter to the Grievance Redressal Officer (GRO) which will undergo a detailed case investigation, and we aim to resolve the issue within 7 days from the date of receipt of your Grievance at GRO Desk

Email: gro@sbigeneral.in

Phone: 022-45138021

Note:- The Company shall endeavour to maintain the regulatory TAT of 14 days in resolving your grievances.

Stage 4: Escalation to Insurance Ombudsman

If you feel that the response to your Grievance was unsatisfactory, or if you believe your concerns have not been adequately addressed by the company, you may escalate the matter to the Insurance Ombudsman.

Submit your Grievance online: <https://www.cioins.co.in/Ombudsman>

IMPORTANT NOTE

Insurance is a contract of Utmost Good Faith requiring the Insured not only to disclose all information related to his health and which has a bearing on the acceptance or rejection of the Proposal by the Insurer and also not to suppress any factual information in response to the questions in the Proposal form.

Please examine this Policy including its attached Schedules/ Annexure if any. In the event of any discrepancy, contact the office of the Insurer immediately, it is noted that this Policy shall be otherwise considered as being entirely in order.

In case of payment by cheque, in the event of dishonor of cheque for any reason whatsoever, insurance provided under this document automatically stands canceled from the inception of the Policy irrespective of whether a separate communication is sent or not.

To verify your Policy details click/ visit www.sbigeneral.in

All terms, conditions, and exclusions are as per standard Policy wordings attached with this Schedule