

MICRO INSURANCE

POLICY SCHEDULE

Policy No:	Servicing Branch Office:	Issue Date:
------------	--------------------------	-------------

INTERMEDIARY DETAILS

Intermediary Name	xxxxxxxx	Intermediary Code	xxxxxxxx
Intermediary Contact Details	Mobile No. - xxxxxxxx	Email Id:	xxxxxxxx
Address			

PROPOSER DETAILS

Name of Proposer			
Present Address (Current Residing Address)	City:		State:
	Gram Panchayat:		Village:
	Pincode:		Landmark:
Permanent Address	City:		State:
	Gram Panchayat:		Village:
	Pincode:		Landmark:
Contact number		Alternate contact number	
Email			
Period of Insurance	From Date and Time: <<DD / MM / YYYY hrs >>	To Date and Time: <<DD / MM / YYYY midnight>>	
Policy Type:	Group/Retail		
Business Type:	New/ Renewal/ Migration/ Portability		
Cover Opted:	Individual / With Family		
Policy Duration:	1 Year / 3 Years		
Hospital Daily Cash Per Day Benefit Amount:	Rs.250		
Hospital Daily Cash Plan Type:	60 Days / 90 Days		
Critical Illness Sum Insured:			
Personal Accident Sum Insured:			
Renewal Policy Number, If Any:			
Details Of Other Policies Declared In The Proposal:			

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.

COVERED ASSET DETAILS

Dwelling location and address	Dwelling value in Rs.	Value of stocks of farm produce in Rs.	Value of Farm implements and tools in Rs.

ADDITIONAL CONDITIONS

Subject to the following additional Conditions and attached
1.
2.

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 being 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 cancelled 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 as per standard Policy wordings attached with this schedule.

CONTACT DETAILS:

Contact Details	Policy Servicing	Claims Servicing
Email	customer.care@sbigeneral.in, seniorcitizengrievances@sbigeneral.in (for Senior Citizens)	sbig.health@sbigeneral.in
Toll-Free number	1800 102 1111 (Available 24/7) For agents and intermediaries 1800 22 1111 (Available 24/7)	1800 210 3366, 1800 210 6366
Website	www.sbigeneral.in	
Fax No	1800227244, 18001027244	+91 20 49334525

GRIEVANCE REDRESSAL PROCESS

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 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>