

## PRADHAN MANTRI SURAKSHA BIMA YOJANA

### CUSTOMER INFORMATION SHEET

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	Pradhan Mantri Suraksha Bima Yojana													
2.	Policy Number	XXXXXXXXXXXXXXXXXXXXXXX													
3.	Type of Insurance Product/ Policy	Benefit													
4.	Sum Insured (Basis)	<div>Individual Sum Insured<table><tr><td>Sr. No.</td><td>Insured Name</td><td>Base Sum Insured</td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr></table><p><b>Note:</b> This is the base Sum Insured for policy. Please refer the policy schedule for cover wise limits.</p></div>	Sr. No.	Insured Name	Base Sum Insured										
Sr. No.	Insured Name	Base Sum Insured													
5.	Policy Coverage (What the Policy Covers)	<div><div>1. <b>Death (AD)</b> – We shall pay ₹2,00,000/- on Death of the Insured Person, due to an Injury sustained in an Accident during the Policy Period.</div><div>2. <b>Permanent Disability</b> -<div><div>a. We shall pay ₹2,00,000/-, if an Insured Person suffers Total and irrecoverable loss of both eyes or loss of use of both hands or feet or loss of sight of one eye and loss of use of hand or foot, during the Policy Period.</div><div>b. We shall pay ₹1,00,000/-, if an Insured Person suffers Total and irrecoverable loss of sight of one eye or loss of use of one hand or foot, during the Policy Period.</div></div></div></div>	Section 3												
6.	Exclusions (What the Policy does not Cover)	<div>Following is a partial list of the policy exclusions. Please refer to the policy document for the complete list of exclusions:<div><div>1. Any payment exceeding Sum Insured, as mentioned under cover Death and Total and irrecoverable loss of both eyes or loss of use of both hands or feet or loss of sight of one eye and loss of use of hand or foot, during any one Policy Period for the Insured Person.</div></div></div>	Section 4												

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		<p>2. Any payment in case of more than one claim, during any one Policy Period, by which Our liability in that period would exceed ₹2,00,000/-.</p> <p>3. Any other payment after a claim under any of the benefits under cover Death and Total and irrecoverable loss of both eyes or loss of use of both hands or feet or loss of sight of one eye and loss of use of hand or foot has been admitted and becomes payable.</p> <p>4. Any claim of the Insured Person, directly or indirectly due to War (whether declared or not) and war like occurrence or invasion, acts of foreign enemies, hostilities, civil war, rebellion, revolutions, insurrections, mutiny, military or usurped power, seizure, capture, arrest, restraints and detainment of all kinds.</p> <p>5. Any Accidental Bodily Injury that Insured Person meet with:</p> <p>a. From intentional self-injury (unless in self-defence or to save life), suicide or attempted suicide;</p> <p>b. Whilst under the influence of intoxicating liquor or drugs or other intoxicants except where the insured is not directly responsible for the injury / accident though under influence of intoxication.</p> <p>c. Arising or resulting from the Insured Person committing any breach of law with criminal intent.</p> <p>d. Arising out of any existing disability.</p> <p>6. Any claim resulting or arising from or any consequential loss directly or indirectly caused by or contributed to or arising from:</p> <p>a. Ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel or from any nuclear waste from combustion (including any self-sustaining process of nuclear fission) of nuclear fuel.</p> <p>b. Nuclear weapons material.</p> <p>c. The radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.</p> <p>d. Nuclear, chemical and biological terrorism.</p>	
7.	Waiting period	Not Applicable	
8.	Financial Limits of the Coverage	Not Applicable	

Sl. No.	Title	Description (Please refer to applicable policy clause number in next column)	Policy Clause Number						
9.	Claims/ Claims Procedure	<p><b>a. For Reimbursement of Claim:</b> For reimbursement of claims the Insured Person may submit the necessary documents to TPA/Company within the prescribed time limit as specified hereunder.</p> <table><tr><th>Procedures</th><th>Reimbursement Claims</th></tr><tr><td>Claim Intimation</td><td><p>a. Immediately after the occurrence of an Accident which may give rise to a claim under the Policy, the Insured or the Nominee (in case of death of the Insured) shall contact the bank branch where the Insured Person held the underlying Bank Account from which the premium for the Policy was auto debited and submit a duly completed claim form.</p><p>b. The claim form may be obtained from the above bank branch or any other designated source like SBI General Insurance Company branches, hospitals, PHCs, BCs, insurance agents etc., including from designated websites.</p></td></tr><tr><td>Claim Intimation timelines</td><td>The Claim form shall be completed by the Insured or, as the case may be, by the Nominee and submitted to the above bank branch preferably within 30 days of the occurrence of the Accident giving rise to the claim under the Policy.</td></tr></table> <p>• Claim forms can be downloaded from below link: <a href="https://www.sbigeneral.in/claim/claims-form-download">https://www.sbigeneral.in/claim/claims-form-download</a> Note: Please refer to the Policy Wordings for the detailed claim procedure.</p>	Procedures	Reimbursement Claims	Claim Intimation	<p>a. Immediately after the occurrence of an Accident which may give rise to a claim under the Policy, the Insured or the Nominee (in case of death of the Insured) shall contact the bank branch where the Insured Person held the underlying Bank Account from which the premium for the Policy was auto debited and submit a duly completed claim form.</p> <p>b. The claim form may be obtained from the above bank branch or any other designated source like SBI General Insurance Company branches, hospitals, PHCs, BCs, insurance agents etc., including from designated websites.</p>	Claim Intimation timelines	The Claim form shall be completed by the Insured or, as the case may be, by the Nominee and submitted to the above bank branch preferably within 30 days of the occurrence of the Accident giving rise to the claim under the Policy.	Section 5.3.18.
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10.	Policy Servicing	<p><b>Email:</b> customer.care@sbigeneral.in</p> <p><b>Toll-Free number</b> 18001021111 (24*7)</p> <p><b>Website:</b> www.sbigeneral.in</p>							
11.	Grievances/ Complaints	<p><b>Stage 1: Bima Bharosa</b> You can register your grievances with the regulator using the following link: <a href="https://bimabharosa.irdai.gov.in/Home/Home">https://bimabharosa.irdai.gov.in/Home/Home</a></p> <p><b>Stage 2: Head – Customer Care</b> 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</p>	Section 5.6.22.						

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		<p>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)</p> <p><b>Stage 3: Grievance Redressal Officer (GRO)</b>  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.</p> <p><b>Stage 4: Escalation to Insurance Ombudsman</b>  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:  <a href="https://www.cioins.co.in/Ombudsman">https://www.cioins.co.in/Ombudsman</a></p>	
12.	Things to remember	<p><b>1. Policy Renewal:</b></p> <p>a. The Policy shall ordinarily be renewable by mutual consent and as per the rates, terms and conditions of the Pradhan Mantri Suraksha Bima Yojana prevalent at the time of renewal. The renewal premium shall be paid to Us on or before the date of expiry of the Policy or subsequent renewal thereof. The Policy shall be renewed on annual basis.</p> <p>b. The Policy shall ordinarily be renewable up to the age of 70 years except on grounds of fraud, misrepresentation by the Master Policyholder/ Insured Person.</p>	Section 5.4.19.
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><b>Disclosure of Information:</b>  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>	Section 5.1.1.

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		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: <a href="https://www.sbigeneral.in/downloads">https://www.sbigeneral.in/downloads</a>	
		b) In case of any conflict, the terms and conditions mentioned in the policy document shall prevail	