

SBI GENERAL SURETY BOND BIMA (UNCONDITIONAL)

CUSTOMER INFORMATION SHEET

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

Sl. No.	Title	Description	Policy Clause Number																		
1.	Product Name	SBI General Surety Bond Bima (Unconditional)																			
2.	Unique Identification Number(UIN) allotted by IRDAI	IRDAN144RP0002V01202324																			
3.	Structure	Fixed Benefit	Reference 12																		
4.	Interests Insured	The policy provides protection against breach of terms & conditions by the contractors either during the bidding stage or during the performance stage of a project.																			
5.	Sum Insured	Advance Payment <table><tr><th colspan="3">Bidding Details</th></tr><tr><td>Contract Date:</td><td>From : DD:MM:YY Hrs: XX</td><td>To : DD:MM:YY Hrs: XX</td></tr><tr><td colspan="3">A contract [dated the day of] bearing Contract Number: _____ and bearing reference to the Tender Number: _____ [to be entered into] between the Beneficiary and the Contractor in the form known as _____ for the construction of works comprising _____ for the original contract sum of _____ Indian Rupee (INR _____)</td></tr><tr><td>The Advance Payment</td><td colspan="2">The sum of _____ Indian Rupee (INR _____)</td></tr><tr><td>The Advance Payment Bond Amount:</td><td colspan="2">The sum of _____ Indian Rupee (INR _____) which shall reduce in accordance with Clause 2</td></tr><tr><td>Expiry</td><td colspan="2">[Insert details of the event agreed between the parties] which shall be conclusive for the purposes of this Advance Payment Bond.</td></tr></table>	Bidding Details			Contract Date:	From : DD:MM:YY Hrs: XX	To : DD:MM:YY Hrs: XX	A contract [dated the day of] bearing Contract Number: _____ and bearing reference to the Tender Number: _____ [to be entered into] between the Beneficiary and the Contractor in the form known as _____ for the construction of works comprising _____ for the original contract sum of _____ Indian Rupee (INR _____)			The Advance Payment	The sum of _____ Indian Rupee (INR _____)		The Advance Payment Bond Amount:	The sum of _____ Indian Rupee (INR _____) which shall reduce in accordance with Clause 2		Expiry	[Insert details of the event agreed between the parties] which shall be conclusive for the purposes of this Advance Payment Bond.		
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Expiry	[Insert details of the event agreed between the parties] which shall be conclusive for the purposes of this Performance Bond.																	
6.	Policy Coverage	There are 4 options available under this Policy and it is mandatory to opt one of them, which provides protection against breach of terms & conditions by the contractors either during the bidding stage or during the performance stage of a project. Cover options as below: 1. Bid Bond 2. Advance Payment Bond 3. Performance Bond 4. Retention Money Bond	Reference 3/4															
7.	Add-on Cover	No add – ons available for this product																
8.	Loss Participation	No applicable																
9.	Exclusions	The company is not liable when: 1. Contract termination between principal & beneficiary prior to insurance Changing terms of contract without the knowledge of the Surety insurer 2. Gross Negligence, illegal /criminal acts by both principal & beneficiary 3. War/Act of God/Nuclear Perils	Reference 5															

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		4. Fraud/Collusion 5. Non-performance or non-fulfilment of terms /conditions of the contract Any third party loss not part of the contract 6. Any third party loss not part of the contract 7. Any price fluctuation in execution of the project For complete list, please refer policy wordings.					
10.	Special Conditions and Warranties (if any)	1. xxx 2. Xxx 3. Xxx	Reference 13				
11.	Admissibility of Claim	This is not applicable for Surety bond insurance. For unconditional Bond, Beneficiary in whose favour Surety Bond is issued, need to send notice of invocation in writing to lodge a claim. Admissibility/Denial of claim Depends as mentioned below The beneficiary shall serve notice of invocation upon insurer. Notice must be signed by Authorized Signatory of Beneficiary The beneficiary shall submit the original Surety Bond to Insurer. The insurer, after completing their internal process shall make the payment of the bond amount. The Claim will be settled as per below working: - <table><tr><th>Description</th><th>Amount ₹</th></tr><tr><td>Bond Value</td><td></td></tr></table>	Description	Amount ₹	Bond Value		Reference 11
Description	Amount ₹						
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12.	Policy Servicing - Claim Intimation and Processing	For Policy/Claims Servicing, reach out to us at: 1. Toll Free No:1800 22 1111 / 1800 102 1111. 2. Email Id: customer.care@sbigeneral.in 3. Reimbursement Process as mentioned below The beneficiary shall intimate the claim to the insurer. The intimation may be given at insurer’s registered office or any nearest office of the insurer or at the above given options. 4. Turn Around Time (TAT) for Claim Settlement: The Company will settle the claim within a period of 7 days from the receipt of the final survey report, as the case may be. Where the Company has failed to receive the report of surveyor within the stipulated time (15 days from allocation),					

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		in such case, the claim shall be settled within 22 days in compliance with section 64UM of Insurance Act, 1938. (This timeline is not applicable for policies issued on (building/property) on reinstatement basis). Refer below to the Escalation Matrix when TAT is not satisfied <table><tr><th>Escalation Level</th><th>Email ID</th></tr><tr><td>First Level</td><td>specialityclaims@sbigeneral.in</td></tr><tr><td>Second Level</td><td>customer.care@sbigeneral.in</td></tr><tr><td>Third Level</td><td>gro@sbigeneral.in</td></tr></table>	Escalation Level	Email ID	First Level	specialityclaims@sbigeneral.in	Second Level	customer.care@sbigeneral.in	Third Level	gro@sbigeneral.in	
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13.	Grievance Redressal and Policy holders Protection	If You have a grievance about any matter relating to the Policy, or Our decision on any matter, or the claim, You can address Your grievance as follows: Stage 1: If you wish to register your grievances directly with us, you may write to us at head.customercare@sbigeneral.in or gro@sbigeneral.in or call our toll free number- 1800 102 1111. After examining the matter, final response would be conveyed within a period of 14 days from the date of receipt of your complaint. In our initial acknowledgement of receipt letter, we will provide the name and title of the person who is handling your Grievance. This person will have the authority necessary to investigate and resolve the Grievance. Details of our Grievance Redressal Officer is mentioned on our website at https://www.sbigeneral.in/grievance-redressal Note: The Company shall endeavour to maintain the regulatory TAT of 14 days in resolving your grievances. Alternatively, you may Register your grievance with the regulator through Bima Bharosa which is a grievance redressal platform provided by the Insurance Regulatory and Development Authority of India (IRDAI). You may access the Bima Bharosa Portal using the following link: https://bimabharosa.irdai.gov.in/Home/Home Stage 2: 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	Reference 15								

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14.	Obligations of prospective Policyholder / Customer	- To disclose all material information at time of filing the proposal form. - In case of any change / modification / addition to the already declared information the same shall be brought to the notice of the insurer immediately. - Non-disclosure of material information about the insured Asset like Addition/Deletion of contents, Addition/ Deletion/ Change of Hypothecation, Change in Nominee Name, Address or asset details etc. may affect the claim settlement.	Reference 12

Declaration by the Policy Holder: I have read the above and confirm having noted the details

Place:

Date:/...../.....

Signature of the Policyholder

Note:

- For product related documents including Customer Information Sheet, kindly refer to the below link: <https://www.sbigeneral.in/downloads>
- In case of any conflict, the terms and conditions mentioned in the policy document shall prevail