

MOTOR- COMPULSORY PERSONAL ACCIDENT (OWNER-DRIVER) INSURANCE

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.

Sl. No.	Title	Description (Please refer to applicable policy clause number in next column)	Policy Clause Number
1.	Name of Insurance Product/ Policy	Motor- Compulsory Personal Accident (Owner-Driver) Insurance	
2.	Unique Identification Number allotted by IRDAI	IRDAN144RP0038V02201819	
3.	Structure	Limit of liability - Indemnity	2.Coverage
4.	Interests Insured	Interest insured is bodily injury sustained by the insured person during the period of insurance in direct connection with the vehicle insured or whilst mounting and dismounting from or traveling in the vehicle insured as a co-driver, caused by violent accidental external and visible means which independently of any other cause shall within six calendar months of the occurrence	2. Coverage
5.	Sum Insured / Motor Insured Declared Value	Upto INR 15 Lakhs	
6.	Policy Coverage (What the policy covers?)	This policy covers: Personal accident covers up to Rs 15 lakh for individual owners while driving. For complete details on the coverage, limits, exclusions, terms & conditions, refer policy wording on www.sbigeneral.in	2. Coverage
7.	Add on Cover	Not applicable	
8.	Loss participation	Not applicable	

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9.	Exclusions (What the policy does not cover)	<p>The Insurer shall not be liable with respect to</p> <ul style="list-style-type: none"> Intentional self-injury, suicide or attempted suicide physical defect or infirmity or Any accident/loss arising out of War, civil war, invasion, insurrection, revolution, act of foreign enemy, hostilities (whether War be declared or not), rebellion, mutiny, use of military power or usurpation of government or military power; Any bodily injury caused by, contributed to, by or arising from nuclear ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste or from the combustion of nuclear fuel (including any self-sustaining process of nuclear fission) or nuclear weapons material or nuclear equipment or any part of that equipment The dispersal or application of pathogenic or poisonous biological or chemical materials; The release of pathogenic or poisonous biological or chemical materials, or Congenital anomalies or any complications or conditions arising there from Committing breach of law with criminal intent. Loss caused directly or indirectly, wholly or partly by infections (except pyogenic infections which shall occur through an Accidental cut or wound) or any other kind of Disease; Participation in an actual or attempted felony, riot, crime, misdemeanor, or civil commotion An accident while being under the influence or abuse of drugs, alcohol, or other intoxicants or hallucinogens unless properly prescribed by a physician and taken as prescribed. <p>For complete details on the exclusions, refer policy wording</p>	3. Exclusions
10.	Special Conditions and Warranties (if any)	<ul style="list-style-type: none"> The Compulsory Personal Accident Cover can only be provided to the Registered owner who is named as the insured under the policy of the vehicle insured herein, where he/she holds a valid driving license , in accordance with the provisions of Rule 3 of the Central Motor Vehicles Rules, 1989 (as amended), at the time of the accident. The Compulsory Personal Accident Cover cannot be granted where a vehicle is owned by a company, a partnership firm or a similar body corporate or where the owner-driver does not hold a valid driving license. 	4. Special Conditions
11.	Admissibility of Claim	<p>Admissibility: Admissibility of claim can be done by filing the FIR with the police immediately after the accident and file a compensation claim case in the Motor Accident Claims Tribunal. The claim would not be acceptable if it falls under General exclusion/condition mentioned in the Policy Wordings.</p>	5. General Conditions

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		<p>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.</p> <table><tr><th>Details of bodily Injury</th><th>Scale Of Compensation</th></tr><tr><td>i) Death</td><td>100%</td></tr><tr><td>ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye</td><td>100%</td></tr><tr><td>iii) Loss of one limb or sight of one eye</td><td>50%</td></tr><tr><td>iv) Permanent Total Disablement from injuries other than named above</td><td>100%</td></tr></table> <p>Claim calculation will be done basis details of bodily injury and the scale of compensation.</p>	Details of bodily Injury	Scale Of Compensation	i) Death	100%	ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye	100%	iii) Loss of one limb or sight of one eye	50%	iv) Permanent Total Disablement from injuries other than named above	100%	
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12.	Policy Servicing - Claim Intimation and Processing	<p>1. 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</p> <p>2. Turnaround Time (TAT) for claim settlement Settlement/rejection of Claim - 22 days after receiving last document</p> <p>3. 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</p>											
13.	Grievance Redressal and Policy-holders Protection	<p>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.</p> <p>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</p> <p>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</p>	7. Grievance Redressal Process										

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		<p>Address: Grievance Redressal Officer, 9th Floor, A & B Wing, Fulcrum Building, Sahar Road, Andheri (East), Mumbai 400099.</p> <p>List of Grievance Redressal Officers at Branch: https://content.sbigeneral.in/uploads/0449-cac1bcd144bbb160d3f6b714fbbd.pdf/</p> <p>Stage 3</p> <p>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</p> <p>Stage 4</p> <p>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.</p> <p>If Your issue remains unresolved You may approach IRDAI by calling on the Toll-Free no. 155255</p> <p>List of Ombudsman offices with contact details are attached as an Annexure-1. For updated status, please refer to website www.irdaindia.gov.in</p>	
14.	Obligations of prospective Policyholder / Customer	<p>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.</p> <p>Disclosure of other material information during the policy period:</p> <ol style="list-style-type: none"> 1. Change in insured name 2. 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. 	

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