

KUTUMB SWASTHYA BIMA- GROUP

POLICY SCHEDULE

Policy No.: Issue Date:
 Servicing Branch Office:

INTERMEDIARY DETAILS

Intermediary Name:
 Intermediary Code:
 Intermediary Contact Details:
 Mobile No.:
 Landline No.:
 Address.:
 Name of Insured
 Address.:

TABLE OF COVER

(Opted plan to be shown on the Policy Schedule):

Sr. No.	Cover Name	Cover Description	Base	Medium	Top
1	Tele-consultation Benefit	Tele Consultation (calls per family per annum)	Upto 4 calls per month, subject to maximum of 24 calls per annum	Upto 6 calls per month, subject to maximum of 36 calls per annum	Upto 10 calls per month, subject to maximum of 60 calls per annum
2	Hospitalization Benefit (per life) Deductible – 24 hours	a) Hospital Daily Cash	Not Covered	₹250 per day for maximum 30 days	₹250 per day for maximum 60 days
		b) Conveyance Allowance Benefit (lumpsum per claim paid)	Not Covered	₹400	₹400
3	Personal Accident (For Primary Insured Only)	a) Accidental Death	₹1,00,000	₹3,00,000	₹5,00,000
		b) Permanent Total Disablement			

Waiting Period -

No waiting period for Teleconsultation and Personal Accident Sections.

Hospitalization Benefit – a) 30 days, except for Accidental hospitalization, b) 90 Days; 1 year; 2 years & 3 Years

Waiting Period for specific diseases/illness c) 36 months for pre-existing diseases

The digital copy of your policy document in PDF format will be sent to the registered mobile number or registered email ID. However, if you need a physical copy of the policy document, please send SMS "PRINT <Policy Number>" to 561612 from your registered mobile number.

INSURED PERSON'S /GROUP DETAILS

Insured Name	Member ID	Gender	DOB	Age in completed years	Relationship with Primary Insured	Sum Insured Opted Per Year (in INR)

Plan type:- Base / Medium / Top

ENDORSEMENTS APPLICABLE IF ANY:

ADDITIONAL CONDITIONS, EXCLUSIONS, WARRANTIES

Coverage subject to the following additional Conditions and Clauses / Endorsements / Warranties with reference to the Section that it is applicable to

- 1.
- 2.

PREMIUM DETAILS

Premium:	
Add: Loading:	
Less: Discount:	
Net Premium:	
Add Taxes as applicable:	
Add Education Cess:	
Final Premium:	

INSTALMENT SCHEDULE

Instalment Frequency:	Quarterly <input type="checkbox"/>	Half Yearly <input type="checkbox"/>	Annually <input type="checkbox"/>
Instalment Due Date:	DD/MM/YYYY		

Collection Details: _____ Receipt no: _____ Receipt Date: DD/MM/YYYY

Signed at:
(RO/BO/DO – Details)

For SBI General Insurance Company Limited

Date & Place:

Authorized Signatory

Consolidated Stamp Duty paid towards Insurance Policy Stamps vide Order No. Dated
..... of General Stamp Office, Mumbai

Service Tax Reg. No.

CONTACT DETAILS IN CASE OF HOSPITALISATION AND PERSONAL ACCIDENT CLAIMS

Email	customer.care@sbigeneral.in ; seniorcitizengrievances@sbigeneral.in (for Senior Citizens)
Toll Free number	1800221111, 18001021111 (Monday to Saturday (8 am - 8 pm)).
Website	www.sbigeneral.in
Fax No	1800227244, 18001027244

CONTACT DETAILS IN CASE OF TELECONSULTATION BENEFIT CLAIMS

Name of Teleconsultation provider.	
Toll Free number	
Timings	

GRIEVANCE REDRESSAL PROCEDURE:

Stage 1:

If you are dissatisfied with the resolution provided above or for lack of response, you may write to head.customer.care@sbigeneral.in We will look into the matter and decide the same expeditiously within 14 days from the date of receipt of your complaint.

For Senior Citizens: Senior Citizens can reach us at seniorcitizengrievances@sbigeneral.in; Toll Free - 1800 22 1111 / 1800 102 1111 Monday to Saturday (8 am - 8 pm)

Stage 2:

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 send your Appeal addressed to the Grievance Redressal Officer at : gro@sbigeneral.in or contact at 022-45138021.

Address: Grievance Redressal Officer, 9th Floor, A & B Wing, Fulcrum Building, Sahar Road, Andheri (East), Mumbai 400 099. List of Grievance Redressal Officers at Branch:

<https://content.sbigeneral.in/uploads/0449cac1bcd144bbb160d3f6b714fbbd.pdf/>

Stage 3:

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>

Stage 4:

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>)

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.

All terms, conditions and exclusions as per standard Policy wordings attached with this schedule.