

Name:	TRAVELSURE-GROUP
	Policy/Certificate No.:
Address:	Policy Issue Date:
	Customer Id:
Contact No.:	
Email ID:	
Dear Mr / Mrs / Miss	f the most precious thing we possess. So we are glad to see that
	ir home and secure your mental peace through SBI General's
•	ts pertaining to your policy that outline the details of risk and
Policy schedule Policy Wording	9
Customer Information sheet	vice & Grievance Procedure
Proposal Form Claim Form	
	ese documents are in order. Please ensure safety of these n you. For all your future correspondence with us, kindly quote
3	o not hesitate to get in touch with us. You can contact us at omer Care Number 1800-22-1111 (MTNL/BSNL user) and
We look forward to a continuing and mutually be	neficial relationship.
Yours sincerely,	
Authorized Signatory	



TRAVELSURE-GROUP

POLICY SCHEDULE				
Master Policy No.: Issue Date: Servicing Branch Office:				
ı	INTERMEDIARY DETAILS			
Intermediary Name: Intermediary Code: Contact Details: Mobile No.: Landline No.: Address.:	Landmark:			
INSURED DETAILS				
News of the Deliver Helden				
Name of the Policy Holder Address of the Policy Holder				
Address Proof	(Officially)/alid Decourses the large			
	(Officially Valid Document Name)			
Type of trip	Single Multi-trip Opted Man days			
If Multi Trip Policy, then Maximum Duration of each trip chosen	15 Days 30 Days 45 Days			
Duration of each trip chosen	60 Days 90 Days 180 Days			
If Single Trip Policy, then duration of trip chosen				
Opted Man days duration	days			
Purpose of Visit	Business/ Official Leisure			
Period of Insurance	From DD/MM/YYYY (XX:XX Hrs) to Midnight of DD/MM/YYYY			
Geographical Boundaries	Worldwide including USA and Canada/ Worldwide excluding USA and Canada			
Co-Insurance applicable	Yes No No			
NOMINEE DETAILS				
Nominee Name*				
Nominee Relationship				
Nominee Age	Nominee Contact Number			

Where Nominee is a minor, Appointee details:

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.

^{*}Applicable in the event of death of the proposer. For all other persons covered under the policy, the proposer will be the nominee.



Name of the Appointee	Relationship	Address of the Appointee	Appointee Contact details

COINSURANCE DETAILS

Co-Insurer	Share type	Amount received
1	Lead/ Follower	
2	Lead/ Follower	
3	Lead/ Follower	
4	Lead/ Follower	

CONTACT DETAILS	POLICY SERVICING	CLAIMS SERVICING	
Email	customer.care@sbigeneral.in	sbig.health@sbigeneral.in	
Toll-Free number	1800221111, 18001021111 (Monday to Saturday (8 am - 8 pm).	1800 210 3366, 1800 210 6366	
Website	www.sbigeneral.in		
Fax No	1800227244, 18001027244	+91 20 49334525	

TPA DETAILS

Across Assist Private Limited,

(formerly known as Axa Assistance India/Bharti Assist Global Private Limited)

The centre for Social Research ,Plot number- 98, Sector 44, Gurugram, Haryana - 122003

Contact Number: +91 120-4670711 / 0120-4501411

Dedicated International toll free numbers for US & Canada:

844-691-8882 - Canada

844-691-8884-US

For Rest of the world:

SBI dedicated Hotline - '+91 120-4670711 (Call Back Facility) Reverse call back.

Alarm Centre FAX - +91 0120-4344847

REDRESSAL OF GRIEVANCE



If you are dissatisfied with the resolution provided above or for lack of response, you may write to head.customercare@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)





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/



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



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 is 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 are as per standard Policy wordings attached with this Schedule

ANNEXURE

POLICY COVERAGE

S. No	Cover Name	Sum Insured/ Limits	Deductible
1	Medical Expenses- Accident & Sickness	<< As per limit chosen >>	<< As per limit chosen >>
2	Emergency Medical Evacuation and Transportation	<< As per limit chosen >>	<< As per limit chosen >>
3	Repatriation of Mortal Remains	<< As per limit chosen >>	<< As per limit chosen >>
4	Dental Expense	<< As per limit chosen >>	<< As per limit chosen >>
5	PED Cover (In-patient Hospitalization and Day Care Treatment)	<< As per limit chosen >>	<< As per limit chosen >>
6	Hospital Daily Cash	<< As per limit chosen >>	<< As per limit chosen >>



7	Personal Accident including Disappearance	<< As per limit chosen >>	<< As per limit chosen >>
8	Accidental Death & Dismemberment (Common Carrier)	<< As per limit chosen >>	<< As per limit chosen >>
9	Adventure Sports Coverage	<< As per limit chosen >>	<< As per limit chosen >>
10	Reinstatement of SI in case of Accidental Hospitalisation	<< As per limit chosen >>	<< As per limit chosen >>
11	Delay of Checked in Baggage	<< As per limit chosen >>	<< As per limit chosen >>
12	Loss of Checked in Baggage	<< As per limit chosen >>	<< As per limit chosen >>
13	Trip Delay	<< As per limit chosen >>	<< As per limit chosen >>
14	Missed Connection	<< As per limit chosen >>	<< As per limit chosen >>
15	Trip Cancellation due to Hospitalization	<< As per limit chosen >>	<< As per limit chosen >>
16	Trip Cancellation for any reason	<< As per limit chosen >>	<< As per limit chosen >>
17	Trip Interruption	<< As per limit chosen >>	<< As per limit chosen >>
18	Bounced Bookings of Airlines and Hotel	<< As per limit chosen >>	<< As per limit chosen >>
19	Hijack Distress Allowance	<< As per limit chosen >>	<< As per limit chosen >>
20	Loss of Passport	<< As per limit chosen >>	<< As per limit chosen >>
21	Loss of International Driving License	<< As per limit chosen >>	<< As per limit chosen >>
22	Up-gradation to Business Class	<< As per limit chosen >>	<< As per limit chosen >>
23	Compassionate Visit	<< As per limit chosen >>	<< As per limit chosen >>
24	Return of Minor Child	<< As per limit chosen >>	<< As per limit chosen >>
25	Political Risk and Catastrophe Evacuation	<< As per limit chosen >>	<< As per limit chosen >>
26	Personal Liability	<< As per limit chosen >>	<< As per limit chosen >>
27	Bail Bond Insurance	<< As per limit chosen >>	<< As per limit chosen >>
28	Home Burglary (Home in India) (in INR)	<< As per limit chosen >>	<< As per limit chosen >>
29	Fire Cover for Building (Home in India) (in INR)	<< As per limit chosen >>	<< As per limit chosen >>
30	Fire Cover for Contents (Home in India) (in INR)	<< As per limit chosen >>	<< As per limit chosen >>
31	Emergency Cash Assistance	<< As per limit chosen >>	<< As per limit chosen >>
32	Maternity Cover	<< As per limit chosen >>	<< As per limit chosen >>
33	Loss of Portable Equipment	<< As per limit chosen >>	<< As per limit chosen >>
34	Travel Loan Secure	<< As per limit chosen >>	<< As per limit chosen >>
	Visa Fees Protection	A 11 12 1	<< As per limit chosen >>