



Acko International Travel Insurance Policy Wordings

Contents

Section 1:	Preamble	3
Section 2:	Definitions	3
2.1	Standard Definitions	3
2.2	Specific Definitions	5
Section 3:	Benefits	9
3.1	Accidental and Medical Benefits	9
3.1.1	Accidental Medical Expense Reimbursement	9
3.1.2	Illness Medical Expenses Reimbursement	10
3.1.3	Pre-existing Disease Cover	10
3.1.4	Adventure Sports Injury	11
3.1.5	Hospital Daily Allowance	11
3.1.6	Physiotherapy	11
3.1.7	OPD Treatment	11
3.1.8	Compassionate Visit	12
3.1.9	Return of Minor Child	12
3.1.10	Emergency Stay and Extension	13
3.1.11	Evacuation (Medical & Catastrophe)	13
3.1.12	Accidental Death	14
3.1.13	Permanent Total Disability	14
3.1.14	Permanent Partial Disability	15
3.1.15	Repatriation of Mortal Remains	16
3.2	Flight-related Benefits	16
3.2.1	Flight Delay	16
3.2.2	Delayed Departure	16
3.2.3	Delayed Arrival	16
3.2.4	Missed Flight	16
3.2.5	Missed Connection	17
3.2.6	Personal Accident (Common Carrier)	17
3.2.7	Total Loss of Checked-in Baggage	17
3.2.8	Partial Loss of Checked-in Baggage	17
3.2.9	Delay of Checked-in Baggage	18
3.2.10	Delay of Sports Equipment	18
3.3	Other Trip Benefits	18
3.3.1	Kidnap / Hijack Coverage	18
3.3.2	Trip Rescheduling	19
3.3.3	Trip Cancellation and Interruption	19
3.3.4	Trip Cancellation due to Covid-19	19
3.3.5	Loss of Passport	19



3.3.6	Financial Emergency Cash	20
3.3.7	Electronic Equipment Cover	20
3.3.8	Bounced Booking	21
3.3.9	Personal Liability & Bail Bond	21
3.3.10	Pet Cover	22
3.3.11	Fire and Allied Perils (Home Building & Contents)	22
3.3.12	Home Insurance Cover	28
Section 4:	General Exclusions	29
Section 5:	Claims Procedure & Requirements	30
Section 6:	General Terms & Conditions	31
Section 7:	Grievance Redressal	32

Section 1: Preamble

This Policy Wording, together with the Schedule of Benefits, is an insurance contract between You and Us. On receipt of premium as specified in the Schedule, we promise to provide you insurance for the covers specified in the Schedule, subject to terms and conditions explained in this document.

We promise to cover you on basis of the statements made in the proposal form, by you or on your behalf, which is incorporated into the Policy as a copy of the duly completed proposal form. In case such statements and/or information are incorrect, in complete or inaccurate in any way, we shall have the right to re-evaluate the terms of the Benefits for the remainder of the Policy Period. Please do review these details for accuracy completeness and reach out to Us for any amendments required.

Some keywords related to and used in the Policy have been defined in Section 2 (Definitions). This document explains the following details related to Your Policy:

- General conditions applicable to Benefits
- Basic Benefits
- Exclusions
- Claim process
- Other terms and conditions.

Section 2: Definitions

2.1 Standard Definitions

1. **Accident:** An accident means sudden, unforeseen and involuntary event caused by external, visible and violent means.
2. **Cashless Facility:** Cashless facility means a facility extended by the insurer to the insured where the payments, of the costs of treatment undergone by the insured in accordance with the policy terms and conditions, are directly made to the network provider by the insurer to the extent pre-authorization is approved.
3. **Condition Precedent** means a policy term or condition upon which the Insurer's liability under the policy is conditional upon.
4. **Congenital Anomaly** means a condition which is present since birth, and which is abnormal with reference to form, structure or position.
 - i. Internal Congenital Anomaly Congenital anomaly which is not in the visible and accessible parts of the body.
 - ii. External Congenital Anomaly Congenital anomaly which is in the visible and accessible parts of the body.
5. **Day Care Treatment:** Day care treatment means medical treatment, and/or *surgical procedure* which is:
 - i. undertaken under General or Local Anesthesia in a hospital/day care centre in less than 24 hrs because of technological advancement, and
 - ii. which would have otherwise required hospitalization of more than 24 hours.

Treatment normally taken on an out-patient basis is not included in the scope of this definition.

6. **Day Care Centre:** A day care centre means any institution established for day care treatment of illness and/or injuries or a medical setup with a hospital and which has been registered with the

local authorities, wherever applicable, and is under supervision of a registered and qualified medical practitioner AND must comply with all minimum criterion as under –

- i) has qualified nursing staff under its employment;
- ii) has qualified medical practitioner/s in charge;
- iii) has fully equipped operation theatre of its own where surgical procedures are carried out;
- iv) maintains daily records of patients and will make these accessible to the insurance company's authorized personnel.

7. **Dental Treatment:** Dental treatment means a treatment related to teeth or structures supporting teeth including examinations, fillings (where appropriate), crowns, extractions and surgery.
8. **Disclosure to information norm:** The policy shall be void and all premium paid thereon shall be forfeited to the Company in the event of misrepresentation, mis-description or non-disclosure of any material fact.
9. **Emergency Care:** Emergency care means management for an illness or injury which results in symptoms which occur suddenly and unexpectedly and requires immediate care by a medical practitioner to prevent death or serious long term impairment of the insured person's health.
10. **Illness:** Illness means a sickness, or a disease or pathological condition leading to the impairment of normal physiological function and requires medical treatment.
 - i. **Acute condition** - Acute condition is a disease, illness or injury that is likely to respond quickly to treatment which aims to return the person to his or her state of health immediately before suffering the disease/ illness/ injury which leads to full recovery.
 - ii. **Chronic condition** - A chronic condition is defined as a disease, illness, or injury that has one or more of the following characteristics:
 1. it needs ongoing or long-term monitoring through consultations, examinations, check-ups, and /or tests
 2. it needs ongoing or long-term control or relief of symptoms
 3. it requires rehabilitation for the patient or for the patient to be specially trained to cope with it
 4. it continues indefinitely
 5. it recurs or is likely to recur
11. **Injury:** Injury means accidental physical bodily harm excluding illness or disease solely and directly caused by external, violent, visible and evident means which is verified and certified by a Medical Practitioner.
12. **Intensive Care Unit:** Intensive care unit means an identified section, ward or wing of a Hospital which is under the constant supervision of a dedicated Medical Practitioner(s), and which is specially equipped for the continuous monitoring and treatment of patients who are in a critical condition or require life support facilities and where the level of care and supervision is considerably more sophisticated and intensive than in the ordinary and other wards.
13. **ICU Charges:** ICU (Intensive Care Unit) Charges means the amount charged by a Hospital towards ICU expenses which shall include the expenses for ICU bed, general medical support services provided to any ICU patient including monitoring devices, critical care nursing and intensivist charges.
14. **Medical Advice:** Medical Advice means any consultation or advice from a Medical Practitioner including the issuance of any prescription or follow-up prescription.

15. **Medical Expenses:** Medical Expenses means those expenses that an Insured Person has necessarily and actually incurred for medical treatment on account of Illness or Accident on the advice of a Medical Practitioner, as long as these are no more than would have been payable if the Insured Person had not been insured and no more than other hospitals or doctors in the same locality would have charged for the same medical treatment.
16. **Notification of Claim:** Notification of claim means the process of intimating a claim to the insurer or TPA through any of the recognized modes of communication.
17. **OPD Treatment:** OPD treatment means the one in which the Insured visits a clinic / hospital or associated facility like a consultation room for diagnosis and treatment based on the advice of a Medical Practitioner. The Insured is not admitted as a day care or in-patient.
18. **Post-hospitalisation Medical Expenses:** Post-hospitalization Medical Expenses means medical expenses incurred during predefined number of days immediately after the insured person is discharged from the hospital provided that:
 - i. Such Medical Expenses are for the same condition for which the insured person's hospitalization was required, and
 - ii. The inpatient hospitalization claim for such hospitalization is admissible by the insurance company.

2.2 Specific Definitions

1. **Adventure Sports:** Adventure Sports means any sport or activity, which is potentially dangerous to the Insured Person whether he is trained or not. Such sport/activity includes racing and competitions, stunt activities of any kind, adventure racing, base jumping, biathlon, big game hunting, black water rafting, BMX stunt/ obstacle riding, bobsleighbing/ using skeletons, bouldering, boxing, canyoning, caving/ pot holing, cave tubing, rock climbing/ trekking/ mountaineering, cycle racing, cyclocross, drag racing, endurance testing, hand gliding, harness racing, hell skiing, high diving (above 5 meters), hunting, ice hockey, ice speedway, jousting, judo, karate, kendo, lugging, risky manual labour, marathon running, martial arts, micro – lighting, modern pentathlon, motor cycle racing, motor rallying, parachuting, paragliding/ parapenting, piloting aircraft, polo, power lifting, power boat racing, quad biking, river boarding, scuba diving, river bugging, rodeo, roller hockey, rugby, ski acrobatics, ski doo ski jumping, ski racing, sky diving, small bore target shooting, speed trials/ time trials, triathlon, water ski jumping, weight lifting, wrestling and activities of similar nature.
2. **Non-Allopathic Treatment:** Non-Allopathic Treatment refers to forms of treatments other than treatment "Allopathy" or "modern medicine" and includes AYUSH Treatment given under Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homeopathy systems, in the Indian context.
3. **Age or Aged:** Age or Aged means completed years as at the Commencement Date.
4. **Ambulance:** Ambulance means a road vehicle operated by a licenced/authorised service provider and equipped for the transport and paramedical treatment of a person requiring medical attention.
5. **Annual Multi Trip Cover:** Annual Multi Trip Cover means a Policy Schedule under which there can be more than one Coverage Period during the Policy Period, subject to the maximum period of time per trip specified in the Policy Schedule. The Policy Schedule will specify if Annual Multi Trip Cover applies to the Insured Person.
6. **Assistance Service Provider:** Assistance Service Provider means the service provider specified in the Policy Schedule, appointed by Us from time to time.
7. **Burglary** shall mean any theft following upon actual, forcible and violent entry of and/ or exit from the premises of the Insured with intent to commit a felony and includes housebreaking.

- 8. Catastrophe:** Catastrophe is an unexpected natural event, such as an earthquake, tsunami or flood which causes widespread loss, damage, or disruption in travel schedules.
- 9. Checked-In Baggage:** Checked-In Baggage means the baggage entrusted by the Insured Person and accepted by a Common Carrier for transportation for which a baggage receipt is issued to the Insured Person by the Common Carrier, excluding all items that are carried/ transported under a Contract of Affreightment.
- 10. City of Residence:** City of Residence means the city, town or village in India in which the Insured Person is currently residing as specified in the Insured Person's correspondence address in the Policy Schedule.
- 11. Commencement Date:** Commencement Date means the start date of the Policy as specified in the Policy Schedule.
- 12. Common Carrier:** Common Carrier means any public civilian road, rail or water conveyance or scheduled public aircraft, which is operating under a valid license from the relevant authority for the transportation of fare paying passengers under a valid ticket. If the Policy Schedule specifies that Personal Vehicles will also be covered, then for the purposes of that Insured Person only, Common Carrier will also include automobiles owned or used by the Insured Person.
- 13. Country of Residence:** Country of Residence means the country in which the Insured Person is currently residing as specified in the Insured Person's correspondence address in Policy Schedule.
- 14. Coverage Period:** Coverage Period means the period specified in the Policy Schedule which commences on the coverage commencement date specified in the Policy Schedule and ends on the coverage expiry date specified in the Policy Schedule.
- 15. Crisis Consultant:** The Crisis Consultant is the organization identified in the Policy Schedule, or any alternative organization which We/Our Assistance Service Provider and You agree in writing to act in place of or in addition to such organization, whether in respect of the Policy in its entirety or in respect of a particular claim.
- 16. Defence Costs:** Defence Costs are reasonable costs necessarily incurred in defending the Insured Person against any civil proceeding initiated against him/her during the Travel Period.
- 17. EMI(s) or EMI Amount(s):** EMI(s) or EMI Amount(s) means and includes the amount of monthly payment required to repay the Principal Outstanding Amount and any applicable interest by the Insured Person, as set forth in the amortization chart referred to in the relevant Loan agreement (or any amendments thereto) between the bank/financial institution and the Insured Person as on the date of any occurrence or event which gives rise to a claim under this Policy.
- 18. Event:** Event means any official sporting occasion, music concert, exhibition, educational / cultural tour, cinema, theatre, theme park or military display, or a visit to any other tourist attraction where admission is only by way of tickets sold in advance.
- 19. Geographical Scope:** Geographical Scope means the countries or geographical boundaries in which the coverage of the Insured Person under the Policy Schedule is valid. The Policy Schedule will specify whether the Geographical Scope for the Insured Person is Overseas, or Domestic, or Overseas + Domestic.
- 20. Hazardous Activities:** Hazardous Activities means any sport or activity, which is potentially dangerous to the Insured Person whether he is trained in such sport or activity or not. Such sport/activity includes stunt activities of any kind, adventure racing, base jumping, biathlon, big game hunting, black water rafting, BMX stunt/obstacle riding, bobsleighbing/using skeletons, bouldering, boxing, canyoning, caving/pot holing, cave tubing, rock climbing/trekking/mountaineering, cycle racing, cyclocross, drag racing, endurance testing, hand gliding, harness racing, hell skiing, high diving (above 5 meters), hunting, ice hockey, ice speedway, jousting, judo, karate, kendo, lugging, risky manual labour, marathon running, martial arts, micro-lighting, modern pentathlon, motor cycle racing, motor rallying, parachuting,

paragliding/parapenting, piloting aircraft, polo, power lifting, power boat racing, quad biking, river boarding, scuba diving, river bugging, rodeo, roller hockey, rugby, ski acrobatics, ski doo riding, ski jumping, ski racing, sky diving, small bore target shooting, speed trials/ time trials, triathlon, water ski jumping, weight lifting or wrestling any type and other activities of similar kind.

21. Hospital: A hospital means any institution established for in-patient care and day care treatment of illness and/or injuries and which has been registered as a hospital with the local authorities under Clinical Establishments (Registration and Regulation) Act 2010 or under enactments specified under the Policy Schedule of Section 56(1) and the said act Or complies with all minimum criteria as under:

- i. has qualified nursing staff under its employment round the clock;
- ii. has at least 10 in-patient beds in towns having a population of less than 10,00,000 and at least 15 in-patient beds in all other places;
- iii. has qualified medical practitioner(s) in charge round the clock;
- iv. has a fully equipped operation theatre of its own where surgical procedures are carried out;
- v. maintains daily records of patients and makes these accessible to the insurance company's authorized personnel.

22. Hospitalization: Hospitalization means admission in a Hospital for a minimum period of 24 consecutive 'In-patient Care' hours except for specified procedures/ treatments, where such admission could be for a period of less than 24 consecutive hours.

23. Immediate Relative: Immediate Relative means the Insured Person's spouse, children, grandchildren, siblings, parents, grandparents, or in-laws.

24. Life Threatening Medical Condition: Life Threatening Medical Condition means medical condition suffered by the Insured Person which has the following characteristics:

- i. Markedly unstable vital parameters (blood pressure, pulse, temperature and respiratory rate); or
- ii. Acute impairment of one or more vital organ systems (involving brain, heart, lungs, liver, kidneys and pancreas); or
- iii. Critical care being provided, which involves high complexity decision making to assess, manipulate and support vital system functions to treat single or multiple vital organ failures and requires interpretation of multiple physiological parameters and application of advanced technology; or
- iv. Critical care being provided in critical care area such as coronary care unit, Intensive Care Unit, respiratory care unit, or the emergency department;

And certified by the attending Medical Practitioner as a Life Threatening Medical Condition.

25. Loan: Loan means the sum of money lent at an interest or otherwise to the Insured Person by any bank/financial institution as identified by the Loan Account Number specified in the Policy Schedule or certified in writing and provided to Us by the bank/financial institution.

26. Loss of Independent Living: Loss of Independent Living means inability to perform one or more of the following activities of daily living:

- i. Washing: the ability to wash in the bath or shower (including getting into and out of the shower) or wash satisfactorily by other means and maintain an adequate level of cleanliness and personal hygiene.
- ii. Dressing: the ability to put on, take off, secure and unfasten all garments and, as appropriate, any braces, artificial limbs or other surgical appliances.
- iii. Transferring: The ability to move from a lying position in a bed to a sitting position in an upright chair or wheelchair and vice versa.
- iv. Toileting: the ability to use the lavatory or otherwise manage bowel and bladder functions so as to maintain a satisfactory level of personal hygiene.
- v. Feeding: the ability to feed oneself, food from a plate or bowl to the mouth once food has been prepared and made available.

- vi. **Mobility:** The ability to move indoors from room to room on level surfaces at the normal place of residence.
- 27. Medical Practitioner:** Medical Practitioner means a person who holds a valid registration from the medical council of any State and is thereby entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of license. The term Medical Practitioner includes a physician and / or surgeon.
- 28. Medically Necessary Treatment:** Medically necessary treatment means any treatment, tests, medication, or stay in hospital or part of a stay in hospital which:
- is required for the medical management of the illness or injury suffered by the insured;
 - must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration, or intensity;
 - must have been prescribed by a medical practitioner;
 - must conform to the professional standards widely accepted in international medical practice or by the medical community in India.
- 29. Money:** Money means cash, bank drafts, current coins, bank and currency notes, treasury notes, cheques, traveller's cheques, postal orders and current postage stamps not forming part of a collection.
- 30. Nominee:** Nominee means the person named in the Policy Schedule to receive the benefits due under the Policy on the death of the Insured Person.
- 31. Policy:** Policy means the statements in the proposal form/personal statement, these terms and conditions, endorsements (if any), annexures to the Policy and the Policy Schedule issued to the Insured Persons.
- 32. Policy Period:** Policy Period means the period between the Commencement Date and the expiry date of the Policy as specified in the Policy Schedule.
- 33. Pre-Existing Disease:** Pre-Existing Disease means any condition, ailment or injury or related condition(s) for which there were signs or symptoms, and / or were diagnosed, and / or for which medical advice / treatment was received within 48 months prior to the first policy issued by the insurer and renewed continuously thereafter.
- 34. Qualified Nurse** means a person who holds a valid registration of nursing in the country of treatment, or from the Nursing Council of India or the Nursing Council of any state in India.
- 35. Reasonable and Customary Charges:** Reasonable and Customary charges means the charges for services or supplies, which are the standard charges for the specific provider and consistent with the prevailing charges in the geographical area for identical or similar services, taking into account the nature of the illness / injury involved.
- 36. Single Trip Cover** means a Policy Schedule under which there cannot be more than one Travel Period during the Policy Period. The Policy Schedule will specify if Single Trip Cover applies to the Insured Person.
- 37. Strike** means stoppage of work (a) announced, organized and sanctioned by a labour union and (b) which interferes with the normal departure and arrival of a common carrier inclusive of work slowdowns, lockouts and sickouts
- 38. Sum Insured:** Sum Insured means the amount specified in the Policy Schedule against a Benefit or set of Benefits respectively that represents Our maximum, total and cumulative liability for any and all claims.
- 39. Travel Period:** Travel Period means a period of time within the Coverage Period commencing from when (i) the Insured Person crosses the international border of the Country of Residence to leave that country on a Common Carrier if the Geographical Scope specified in the Policy

Schedule is Overseas OR (ii) the Insured Person departs from the City of Residence to leave that city on a on a Common Carrier if the Geographical Scope specified in the Policy Schedule is Domestic; OR (iii) the Insured Person departs from the City of Residence on a Common Carrier and immediately thereafter as part of the same trip crosses the international border of the Country of Residence to leave that country on a Common Carrier if the Geographical Scope specified in the Policy Schedule is Overseas + Domestic,

AND expires automatically on the earliest of the following:

- (a) The Insured Person crosses the international border to return to the Country of Residence on a Common Carrier if the Geographical Scope specified in the Policy Schedule is Overseas OR returns to the City of Residence on a Common Carrier if the Geographical Scope specified in the Policy Schedule is Domestic OR returns to the City of Residence on a Common Carrier immediately after crossing the international border of the Country of Residence on a Common Carrier as part of the same trip if the Geographical Scope specified in the Policy Schedule is Overseas + Domestic; OR
- (b) the coverage expiry date specified in the Policy Schedule; OR
- (c) the expiry of the maximum period of time per trip specified in the Policy Schedule.

40. Trip: A trip is a period in which the insured is outside the Republic of India, either by being in a foreign country or by travelling through an International Flight. The trip will however be extended to the length of domestic connecting flight in Republic of India in case the connection is with an International Flight.

41. Valuables: Valuables means and includes photographic, audio, video, computer and any other electronic and electrical equipment, cellular phones, data, business goods, telecommunications and electrical equipment, motor vehicles and any accessories, telescopes, lenses, binoculars, antiques, art, watches, jewellery and gems, furs and articles made of precious stones and metals.

42. We/Our/Us: We/Our/Us means Acko General Insurance Limited.

43. You/Your: You/Your means the individual(s) or insured(s) named in the Policy Schedule who has concluded this Policy with Us.

Section 3: Benefits

All the Benefits under this Section are available to the Insured Person(s). The Sum Insured limits and Exclusions applicable are as opted by You in the proposal form and as specified in the Schedule.

Our maximum, total, and cumulative liability for all claims made with respect to the Insured Person will be up to the Sum Insured for the Benefits specified to be in force for the Insured Person.

All claims must be made in accordance with the procedure set out in Section 5.

3.1 Accidental and Medical Benefits

3.1.1 Accidental Medical Expense Reimbursement

If an Insured Person suffers an Injury due to an Accident that occurs during the Travel Period and that Injury solely and directly requires the Insured Person to be Hospitalized or undergo Day Care Treatment, then We will reimburse the costs incurred on Medical Expenses up to limit specified in Policy Schedule.

If We have accepted a claim under this benefit, We will also reimburse Post-hospitalisation Medical Expenses incurred for up to 90 days immediately following the Insured Person's discharge from Hospital.

Any injury occurring due to involvement in any Adventure Sports is not covered under this benefit unless the Benefit 3.1.4 (Adventure Sports Injury) is opted for.

This Benefit will be payable provided that:

- a. The Hospitalization or Day Care Treatment is for Medically Necessary Treatment and is commenced and continued on the written advice of the treating Medical Practitioner;
- b. The Insured Person is admitted to Hospital or undergoes Day Care Treatment due to an accident which had occurred within the travel period.
- c. We will reimburse only those Medical Expenses and Post-hospitalisation Medical Expenses that are Reasonable and Customary Charges.

3.1.2 Illness Medical Expenses Reimbursement

If an Insured Person suffers an Illness during the Travel Period and that Illness solely and directly requires the Insured Person to be Hospitalized during the Travel Period, then We will reimburse the costs incurred on Medical Expenses up to limit specified in the Policy Schedule.

If We accept a claim under this Benefit, then We will also consider claims made under Benefit 3.1.1 (Accidental Medical Expenses Reimbursement) for the Insured Person which would have been applicable if the Insured Person had suffered an Injury due to an Accident during the Travel Period.

This Benefit will be payable provided that:

- a. The Hospitalization is for Medically Necessary Treatment and is commenced and continued on the written advice of the treating Medical Practitioner.
- b. We will reimburse only those Medical Expenses that are Reasonable and Customary Charges.
- c. We shall not be liable to make any payment in respect of Medical Expenses incurred on the treatment of any Pre-Existing Disease unless the Benefit 3.1.3 (Pre-existing Disease Cover) is opted for..

3.1.3 Pre-existing Disease Cover

We will reimburse the Medical Expenses incurred in respect of the Medically Necessary Treatment rendered on the Insured Person during the Travel Period on an emergency basis for a Life-Threatening Condition only for any sudden, unexpected or unforeseen development which is attributable to a Pre-Existing Disease, up to limit as specified under Benefit 3.1.2 (Illness Medical Expenses Reimbursement).

For the purpose of this Benefit, Life Threatening Condition shall mean a medical condition suffered by the Insured Person, which is certified in writing by the attending Medical Practitioner as a Life-Threatening Condition, and which has the following characteristics:

- i. Markedly unstable vital parameters (blood pressure, pulse, temperature and respiratory rate).
- ii. Acute impairment of one or more vital organ systems (involving brain, heart, lungs, Liver, Kidneys and pancreas) including ectopic pregnancy.
- iii. Critical care being provided, which involves high complexity decision making to assess, manipulate and support vital system function(s) to treat single or multiple vital organ failure(s) and requires interpretation of multiple physiological parameters and application of advanced technology.
- iv. Critical care being provided in critical care area such as coronary care unit, intensive care unit, respiratory care unit, or the emergency department.

This Benefit will be payable provided that:

- a. We will make payment under this Benefit only for immediate treatment rendered as a life saving measure and not for any further Hospitalisation/Medical Expenses incurred thereafter;
- b. We will be liable to make payment under this Benefit only if the treatment pertains to any of the

following Illnesses:

1. Hypertension;
2. Diabetes;
3. Heart ailments;
4. Cerebral Nervous System diseases;
5. Chronic Obstructive Pulmonary diseases, including asthma;
6. Oncological diseases;
7. Pregnancy related complications.

c. We will reimburse only those Medical Expenses that are Reasonable and Customary Charges.

3.1.4 Adventure Sports Injury

If an Insured Person suffers an Injury while engaged in Adventure Sports during the Travel Period which requires Hospitalization, then We shall indemnify the costs incurred on Medical Expenses as specified under Benefit 3.1.1 (Accidental Medical Expenses Reimbursement).

This Benefit will be payable provided that:

- a. Our or Our Assistance Service Provider's approval is obtained within 48 hours of the commencement of the Insured Person's Hospitalization.
- b. The Hospitalization is for Medically Necessary Treatment and is commenced and continued on the written advice of the treating Medical Practitioner.
- c. We will reimburse only those Medical Expenses that are Reasonable and Customary Charges.
- d. The sport or event undertaken by the Insured person must complete within 12 hours from beginning of the sport/event.
- e. Exclusion under section 4(h) and 4(j) shall not apply only to the extent of cover under this Benefit.

3.1.5 Hospital Daily Allowance

If this Benefit is in force, in case a claim is admitted under Benefit 3.1.1 (Accidental Medical Expenses Reimbursement) or Benefit 3.1.2 (Illness Medical Expenses Reimbursement), We will pay the daily allowance amount specified against this Benefit in the Schedule, for each continuous and completed period of 24 hours of Hospitalisation for up to a maximum of 10 days.

3.1.6 Physiotherapy

If an Insured Person suffers an Injury due to an Accident that occurs during the Travel Period and that Injury solely and directly requires the Insured Person to undergo physiotherapy, then We will reimburse the costs up to the limit specified in the Policy Schedule incurred on physiotherapy.

This Benefit will be payable provided that:

- a. The physiotherapy undertaken is for Medically Necessary Treatment and is commenced and continued on the written advice of the treating Medical Practitioner.
- b. We will reimburse only those costs that are Reasonable and Customary Charges.

3.1.7 OPD Treatment

If an Insured Person requires OPD Treatment for any of the treatments / tests / consultations specified in the Policy Schedule, due to Injury or Illness, as specified in the Policy Schedule, suffered or contracted during the Travel Period, then We will reimburse the costs incurred on Medical Expenses.

The Sum Insured will be subject to sub-limits as agreed in the proposal form and specified in the Policy Schedule.

This Benefit will be payable provided that:

- a. The medical treatment undertaken is Medically Necessary Treatment and is commenced and continued on the written advice of the treating Medical Practitioner.
- b. We shall not be liable to make any payment in respect of Medical Expenses incurred on the treatment of any Illness which relate to any Pre-Existing Disease.

3.1.8 Compassionate Visit

If an Insured Person requires Hospitalization due to an Injury or Illness specified in the Policy Schedule, suffered or contracted during the Travel Period, then We will reimburse the amount incurred for direct route two-way tickets up to Economy Class for an Immediate Relative of the Insured Person, to travel from the City of Residence to the place of Hospitalization of the Insured Person up to the limit specified in the Policy Schedule.

This Benefit will be payable provided that:

- a. Our liability to make any payment under this Benefit shall commence only after 48 hours of Hospitalization of the Insured Person as specified in the Policy Schedule for each claim.
- b. The Hospitalization is for Medically Necessary Treatment and is commenced and continued on the written advice of the treating Medical Practitioner.
- c. The Insured Person is Hospitalized in a Country which he/she had declared to travel at the time of purchase of Insurance.
- d. No Day Care Treatment will be covered under this Benefit.
- e. We will reimburse only those expenses that are Reasonable and Customary Charges.
- f. We shall not accept more than one claim under this Benefit in respect of the Insured Person following from the same Incident.
- g. The Immediate Relative of the Insured Person's return to the City of Residence shall commence not later than the date of the Insured Person's return.

3.1.9 Return of Minor Child

If the Insured Person suffers an Illness or Injury during the Travel Period which requires the Insured Person to be Hospitalized during the Travel Period, then We will indemnify the costs up to the amount specified in the Policy Schedule of a direct route economy class airfare for the Insured Person's children to return to the City of Residence from the place of Hospitalization of the Insured Person.

This Benefit will be payable provided that:

- a. The Hospitalization is for Medically Necessary Treatment and is commenced and continued on the written advice of the treating Medical Practitioner.
- b. The Insured Person's children are less than Age of 18, are accompanying the Insured Person during the Travel Period and are unattended in the place of Hospitalization.
- c. The treating Medical Practitioner certifies that the Insured Person is required to be hospitalized for at least 48 hours or as specified in the Policy Schedule.
- d. The Insured Person's children's return travel to the City of Residence shall commence not later than 10 days from the commencement of the Insured Person's Hospitalization.

3.1.10 Emergency Stay and Extension

We will reimburse the costs up to the amount specified in the Policy Schedule towards the following due to the Insured Person or any co-traveller suffering Injury in an Accident or suffering an Illness or undergoing Hospitalization during the Travel Period:

- a. Stay of the Insured Person in a hotel up to 7 days beyond the existing booking.
- b. Additional expenses incurred on rescheduling an Insured Person's booking on the Common Carrier for return journey

This Benefit will be payable provided that:

- a. The Injury or Illness caused to the Insured Person or any co-traveler must be so disabling as to reasonably require an extension of the stay.
- b. We shall not accept more than one claim under this Benefit during the Coverage Period.

We shall not be liable to reimburse any expenses under this Benefit for:

- a. Any facts or matters of which the Insured Person was aware or should have been aware might result in a claim being made under this Benefit.
- b. Any extension opted in furtherance of business or personal reasons.

3.1.11 Evacuation (Medical & Catastrophe)

We will reimburse the costs up to the amount specified in the Policy Schedule incurred for the air, surface or water transportation of the Insured Person during the Travel Period, including costs incurred for medical care during such transportation, in any of the following circumstances:

- a. The Insured Person needs to be evacuated due to a Catastrophe which has occurred in the place where the Insured Person is located during the Travel Period.
- b. The Insured Person needs to be transferred from the place of contracting or sustaining such Illness or Injury to the nearest Hospital for medical treatment during the Travel Period.
- c. The Insured Person needs to be transported from the Hospital where the Insured Person is being treated during the Travel Period to the nearest Hospital if such medical treatment cannot be provided at the Hospital where the Insured Person is situated.

This Benefit will be payable provided that:

- a. The treating Medical Practitioner certifies in writing that the transportation of the Insured Person was required for Medically Necessary Treatment to be rendered.
- b. We or Our Assistance Service Provider have agreed to the reimbursement of such costs of transportation in writing in advance of the transportation.
- c. The Hospital to which the Insured Person is proposed to be transported is the nearest Hospital capable of providing the Medically Necessary Treatment required by the Insured Person.
- d. If the Insured Person is transported to a Hospital which is not the nearest Hospital capable of providing the Medically Necessary Treatment required by the Insured Person then Our liability under this Benefit shall be limited to the amount that would otherwise have been payable to transport the Insured Person to the nearest Hospital.
- e. We will reimburse only those expenses that are Reasonable and Customary Charges.
- f. We shall not accept more than one claim under this Benefit in respect of the Insured Person following from the same Illness or Injury.

3.1.12 Accidental Death

If an Insured Person suffers an Injury due to an Accident that occurs during the Travel Period and that Injury solely and directly results in the Insured Person's death within 365 days from the date of the Accident, We will pay the amount specified in the Policy Schedule.

If a claim is accepted under this Benefit in respect of an Insured Person and the amount due under this Benefit and claims already admitted under Benefit 3.1.1.12 (Accidental Death Benefit), Benefit 3.1.1.13 (Permanent Total Disability) and Benefit 3.1.1.14 (Permanent Partial Disability) in respect of the Insured Person will cumulatively exceed the Common Death or Disability Sum Insured, then Our maximum, total and cumulative liability under any and all such claims will be limited to the Common Death or Disability Sum Insured.

On the acceptance of a claim under this Benefit and payment being made under any applicable Cover Options, all cover under this Policy shall immediately and automatically cease in respect of that Insured Person.

3.1.13 Permanent Total Disability

If an Insured Person suffers an Injury due to an Accident that occurs during the Travel Period and that Injury solely and directly results in the Permanent Total Disability of the Insured Person which is of the nature specified in the table below, within 365 days from the date of the Accident, We will pay the Sum Insured:

Nature of Permanent Total Disability
Total and irrecoverable loss of sight in both eyes
Loss by physical separation or total and permanent loss of use of both hands or both feet
Loss by physical separation or total and permanent loss of use of one hand and one foot
Total and irrecoverable loss of sight in one eye and loss of a Limb
Total and irrecoverable loss of hearing in both ears and loss of one Limb/ loss of sight in one eye
Total and irrecoverable loss of hearing in both ears and loss of speech
Total and irrecoverable loss of speech and loss of one Limb/ loss of sight in one eye
Permanent, total and absolute disability (not falling under any one the above) which results in the Insured Person being unable to engage in any employment or occupation or business for remuneration or profit, of any description whatsoever which results in Loss of Independent Living

For the purpose of this Benefit:

1. **Limb** means a hand at or above the wrist or a foot above the ankle;
2. **Physical separation of one hand or foot** means separation at or above wrist and/or at or above ankle, respectively.

This Benefit will be payable provided that:

- a. The Permanent Total Disability continues for a period of at least 180 days from the commencement of the Permanent Total Disability, and the Disability Certificate issued by the treating Medical Practitioner at the expiry of the 180 days confirms that there is no reasonable medical hope of improvement.
- b. If the Insured Person suffers Injuries resulting in more than one of the Permanent Total Disabilities specified in the table above, then Our maximum, total and cumulative liability under this Benefit shall be limited to the Sum Insured specified against this Benefit in the Policy Schedule.
- c. If a claim is accepted under this Benefit in respect of an Insured Person and the amount due under this Benefit and claims already admitted under Benefit 3.1.12(Accidental Death Benefit), Benefit 3.1.13 (Permanent Total Disability) and Benefit 3.1.14 (Permanent Partial Disability) in respect of the Insured Person will cumulatively exceed the Common Death or Disability Sum Insured then Our maximum, total and cumulative liability under any and all such claims will be limited to the Common Death or Disability Sum Insured.

- d. If We have admitted a claim for Permanent Total Disability in accordance with this Benefit, then We shall not be liable to make any payment under the Policy on the death of the Insured Person, if the Insured Person subsequently dies.

3.1.14 Permanent Partial Disability

If an Insured Person suffers an Injury due to an Accident that occurs during the Travel Period and that Injury solely and directly results in the Permanent Partial Disability of the Insured Person which is of the nature specified in the table below within 365 days from the date of the Accident, we will pay the amount specified in the table below:

Nature of Permanent Partial Disability	Percentage of the Sum Insured payable
i. Total and irrecoverable loss of sight in one eye	50%
ii. Loss of one hand or one foot	50%
iii. Loss of all toes - any one foot	10%
iv. Loss of toe great - any one foot	5%
v. Loss of toes other than great, if more than one toe lost, each	2%
vi. Total and irrecoverable loss of hearing in both ears	50%
vii. Total and irrecoverable loss of hearing in one ear	15%
viii. Total and irrecoverable loss of speech	50%
ix. Loss of four fingers and thumb of one hand	40%
x. Loss of four fingers	35%
xi. Loss of thumb- both phalanges	25%
xii. Loss of thumb- one phalanx	10%
xiii. Loss of index finger-three phalanges	10%
xiv. Loss of index finger-two phalanges	8%
xv. Loss of index finger-one phalanx	4%
xvi. Loss of middle/ring/little finger-three phalanges	6%
xvii. Loss of middle/ring/little finger-two phalanges	4%
xviii. Loss of middle/ring/little finger-one phalanx	2%

This Benefit will be payable provided that:

- The Permanent Partial Disability continues for a period of at least 180 days from the commencement of the Permanent Partial Disability and the Disability Certificate issued by the treating Medical Practitioner at the expiry of the 180 days confirms that there is no reasonable medical hope of improvement.
- If the Insured Person suffers a loss that is not of the nature of Permanent Partial Disability specified in the table above, then the independent medical advisors will determine the degree and percentage of such disability.
- We will not make any payment under this Benefit if We have already paid or accepted any claims under the Policy in respect of the Insured Person and the total amount paid or payable under the claims is cumulatively greater than or equal to the Sum Insured for that Insured Person.
- If a claim is accepted under this Benefit in respect of an Insured Person and the amount due under this benefit and claims already admitted under Benefit 3.1.12 (Accidental Death Benefit), Benefit 3.1.13 (Permanent Total Disability) and Benefit 3.1.14 (Permanent Partial Disability) in respect of the Insured Person will cumulatively exceed the Common Death or Disability Sum Insured then Our maximum, total and cumulative liability under any and all such claims will be limited to the Common Death or Disability Sum Insured.
- On the acceptance of a claim under this Benefit, the Insured Person's insurance cover under this Policy shall continue, subject to the availability of the Sum Insured and the Common Death or Disability Sum Insured.

3.1.15 Repatriation of Mortal Remains

We will pay the expenses incurred up to the Sum Insured as specified in the Policy Schedule for transportation of mortal remains from the place of death of the Insured Person during the Travel Period to the residence of the Insured Person in the City of Residence, in case of death due to Injury or Illness suffered or contracted during the Travel Period.

This Benefit will be payable provided that the death of the Insured Person occurred in a location that is not the City of Residence of the Insured Person.

3.2 Flight-related Benefits

3.2.1 Flight Delay

We will pay the amount specified in the Policy Schedule, if an Insured Person's journey on a booked flight is delayed beyond the number of hours specified in the Policy Schedule of its scheduled departure or arrival time, during the Travel Period.

This Benefit will be payable provided that:

- a. The Insured Person provides Us with a written proof from the Common Carrier of the length of the delay unless this proof is available to Us directly from a reliable source in the public domain.
- b. The delay is not due to the late arrival of the Insured Person.

Rescheduling of flight by the Common Carrier is not covered under this benefit.

If You have opted for this benefit, We will not offer You Benefit 3.2.2 (Delayed Departure) and Benefit 3.2.3 (Delayed Arrival) and only one claim will be payable per flight under this benefit

3.2.2 Delayed Departure

We will pay the amount specified in the Policy Schedule, if an Insured Person's journey on a booked flight is delayed beyond the number of hours specified in the Policy Schedule of its scheduled "departure" time, during the Travel Period.

This Benefit will be payable provided that:

- a. The Insured Person provides Us with a written proof from the Common Carrier of the length of the delay unless this proof is available to Us directly from a reliable source in the public domain.
- b. The delay is not due to the late arrival of the Insured Person.

Rescheduling of flight by the Common Carrier is not covered under this benefit.

3.2.3 Delayed Arrival

We will pay the amount specified in the Policy Schedule, if an Insured Person's journey on a booked flight is delayed beyond the number of hours specified in the Policy Schedule of its scheduled "arrival" time, during the Travel Period.

This Benefit will be payable provided that:

- a. The Insured Person provides Us with a written proof from the Common Carrier of the length of the delay unless this proof is available to Us directly from a reliable source in the public domain.
- b. The delay is not due to the late arrival of the Insured Person.

Rescheduling of flight by the Common Carrier is not covered under this benefit.

3.2.4 Missed Flight

We will pay the amount specified in the policy schedule due to the Insured Person's failure to reach the original departure point of the booked journey.

This Benefit will be payable provided that:

- a. The Insured Person provides Us with a written proof from the Flight operator of the missed departure.
- b. Insured Person needs to book a new flight from the same origin to the same destination as the original missed flight.
- c. The new flight's scheduled departure time should be within 48 hours from the scheduled departure time of the original flight.

3.2.5 Missed Connection

We will reimburse the cost of additional travel and accommodation expenses up to the limit as specified in the policy schedule incurred due to the Insured Person's failure to reach the original departure point of the booked and confirmed journey owing to a delay beyond 6 Hours in the arrival of the flight which was connecting to the booked journey onwards.

We shall not be liable to reimburse any expenses under this Benefit for:

- a. Any loss which will be paid or refunded by the flight operator, agent or any other provider of travel and/or accommodation.
- b. Any such delay caused due to, arising out of or in consequence of any acts or omissions of the Insured Person.

3.2.6 Personal Accident (Common Carrier)

If an Insured Person suffers an Injury due to an Accident that occurs during the Travel Period while the Insured Person is travelling as a passenger on a Common Carrier and that Injury solely and directly results in the Insured Person's death or permanent total disability within 365 days from the date of the Accident, We will pay the amount specified in the Policy Schedule.

This Benefit will be payable provided that:

- a. We have accepted a claim under Benefit 3.1.1.12 (Accidental Death Benefit) or Benefit 3.1.1.13 (Permanent Total Disability) in respect of the Insured Person;
- b. The amount payable under this Benefit shall be in addition to any other amounts payable under the Policy in respect of the Insured Person.

3.2.7 Total Loss of Checked-in Baggage

We will pay the amount specified in Policy Schedule towards the permanent and total loss of the Insured Person's Checked-in Baggage, by the Flight operator on which the Insured Person was travelling as a passenger, during the Travel Period.

This Benefit will be payable provided that the Insured Person provides Us with written proof from the Flight operator confirming the loss of Checked-in Baggage.

We shall not be liable to reimburse any expenses under this Benefit for:

- a. Any loss which will be paid or refunded by the Common Carrier.
- b. Any loss of Checked-in Baggage amounting to a partial loss or not amounting to a permanent and total loss.
- c. Any actual or alleged loss or destruction arising from detention, confiscation or distribution by customs, police or other public authorities.

3.2.8 Partial Loss of Checked-in Baggage

We will pay the amount specified in policy schedule towards the occurrence of the following events by the Flight operator on which the Insured Person was travelling as a passenger during the Travel Period:

- a. Damages of the Insured Person's Checked-in Baggage requiring repairs.
- b. Loss of contents from Insured Person's Checked-in Baggage.

This Benefit will be payable provided that the Insured Person provides Us with written proof from the Flight operator confirming the loss.

We shall not be liable to reimburse any expenses under this Benefit for:

- a. Misplacement or any other event resulting in total loss of baggage.
- b. Any actual or alleged loss or destruction arising from detention, confiscation or distribution by customs, police or other public authorities.

3.2.9 Delay of Checked-in Baggage

We will pay the amount specified in the Policy Schedule if the delivery of the Insured Person's accompanying Checked-in Baggage is delayed for more than 3 hours by the Flight operator on which the Insured Person was travelling as a passenger, during the Travel Period.

This Benefit will be payable provided that the delay is in excess from the final arrival time of the Flight.

We shall not be liable to reimburse any expenses under this Benefit for:

- a. Any checked-in baggage delay on the in-bound sector to the Republic of India
- b. Any actual or alleged delay arising from detention, confiscation or distribution by customs, police or other public authorities.

3.2.10 Delay of Sports Equipment

We will pay the amount specified in the Policy Schedule if the delivery of the Insured Person's accompanying Checked-in Sports Equipment is delayed for more than 3 hours by the Flight operator on which the Insured Person was travelling as a passenger, during the Travel Period.

This Benefit will be payable provided that the delay is in excess from the final arrival time of the Flight.

We shall not be liable to reimburse any expenses under this Benefit for:

- a. Any checked-in baggage delay on the in-bound sector to the Republic of India.
- b. Any actual or alleged delay arising from detention, confiscation or distribution by customs, police or other public authorities.

3.3 Other Trip Benefits

3.3.1 Kidnap / Hijack Coverage

If an Insured Person is subject to Kidnapping or Hijack during the Travel Period which continues in excess of 24 hours, then We will pay a daily benefit as specified in policy schedule for each completed day of such kidnap / hijack or a maximum as specified in the policy schedule, whichever is lower.

For the purpose of this Benefit:

- a. **Kidnap** shall mean any actual event of seizing or detaining an Insured Person by force or fraud for the purpose of demanding ransom.
- b. **Extortion** shall mean making of illegal threats, either directly or indirectly, to the Insured Person to cause Injury or death for the purpose of demanding ransom.
- c. **Hijack** shall mean the attempted or actual illegal holding under duress of an Insured Person while traveling in a Common Carrier for the purpose of demanding ransom.

This Benefit will be payable provided that We and/or Our Crisis Consultant are provided with complete details of all communication received in relation to the Kidnapping or Hijack.

3.3.2 Trip Rescheduling

We will reimburse the additional expenses incurred on rescheduling as specified in the policy schedule if an Insured Person postpones and reschedules the Common Carrier specified in policy schedule due to unavoidable reasons.

The coverage is provided for rescheduling due to one of the following circumstances occurring not more than 20 days before the scheduled departure date of booked carrier:

- a. Insured Person or co-traveller or any of insured's immediate relative is hospitalised for 48 hours for any medically necessary treatment due to any illness / injury
- b. Death due to accident/illness of the insured person any of insured's immediate relative.
- c. On the occurrence of a Catastrophe during the Coverage Period.

This Benefit will be payable provided that:

- a. The event giving rise to a claim under this Benefit must be such as to reasonably cause a journey to be rescheduled.
- b. The death or hospitalisation should occur before the scheduled departure date of the original booked flight.

3.3.3 Trip Cancellation and Interruption

We will reimburse the unrecoverable costs up to the limit specified in the policy schedule if an Insured Person cancels the Common Carrier specified in policy schedule due to unavoidable reasons.

The coverage is provided for cancellation due to one of the following circumstances occurring not more than 20 days before the scheduled departure date of booked carrier:

- a. Insured Person or co-traveller or any of insured's immediate relative is hospitalised for 48 hours for any medically necessary treatment due to any illness / injury
- b. Death due to accident/illness of the insured person any of insured's immediate relative.
- c. On the occurrence of a Catastrophe during the Coverage Period.

This Benefit will be payable provided that:

- a. The event giving rise to a claim under this Benefit must be such as to reasonably cause a journey to be cancelled or interrupted.
- b. The death or hospitalisation should occur before the scheduled departure date and time of the original booked flight.

3.3.4 Trip Cancellation due to Covid-19

We will reimburse the unrecoverable costs up to the limit specified in the policy schedule if an Insured Person's Common Carrier specified in policy schedule is unavoidably cancelled due to Insured Person being detected with Covid-19. The coverage for cancellation is provided only if the trip start date falls within the number of days specified for Home Quarantine by Government of India or any other body acting on behalf in its latest guidelines for Covid-19 protocols.

3.3.5 Loss of Passport

If the Insured Person loses his/her original passport during the Travel Period, We will indemnify the following costs as specified in the policy schedule incurred by the Insured Person towards obtaining a duplicate or new passport during the Travel Period:

- a. Passport application fees for duplicate or new passport.
- b. Documentation or photography expenses incurred for passport application.
- c. Travel expenses incurred to and from the consulate office on a common carrier.

We will require a copy of police complaint filed within 24 hours of such loss confirming that the loss was not caused due to passport being left unattended or forgotten by insured person in a public place or a common carrier.

3.3.6 Financial Emergency Cash

We will pay a fixed amount, as specified in the Policy Schedule in relation to the permanent and total loss of the Insured Person's travel funds due to any pilferage, theft, loss, robbery or dacoity during the Travel Period.

This Benefit will be payable provided that the Insured Person provides Us with a copy of a police complaint reporting the incident.

We shall not be liable to pay any expenses under this Benefit for:

- a. Any loss which will be paid or refunded by the Common Carrier, hotel, agent or any other provider of travel and/or accommodation, wherever applicable;
- b. Any loss of Valuables, any kinds of securities or tickets;
- c. Any loss of travel funds contained in Checked-in Baggage.

3.3.7 Electronic Equipment Cover

We will reimburse the actual loss incurred up to the amount specified in the Policy Schedule in relation to any Accidental damage, loss or theft of the Insured Person's Portable Electronic Equipment during the Travel Period.

For the purpose of this Benefit,

- (i) Portable Electronic Equipment shall mean any electronic equipment or communication devices carried by the Insured Person.

This Benefit will be payable provided that:

- a. The Insured Person provides Us with a written proof of ownership or care, custody and control of the Portable Electronic Equipment.
- b. The Insured Person provides Us with a certified copy of the police report filed.
- c. Any amount payable under this Benefit shall be adjusted for depreciation as per the percentage specified below:

Age of Equipment	Depreciation Percentage (on invoice value)
i. Not exceeding 1 year	20%
ii. Exceeding 1 year but not exceeding 2 years	40%
iii. Exceeding 2 years but not exceeding 3 years	50%
iv. Exceeding 3 years but not exceeding 4 years	60%
v. Exceeding 4 years	80%

We shall not be liable to reimburse any expenses for:

- a. Any loss or destruction which will be paid or refunded by a Common Carrier, hotel, agent or any other provider of travel and/or accommodation.

- b. Any loss of stored data or re-creation of such stored data.
- c. Any loss of accessories like chargers, adapters etc. accompanied with the lost equipment.
- d. Any damage of Portable Electronic Equipment caused due to the Insured Person's fault.
- e. Any actual or alleged loss or destruction arising from detention, confiscation or distribution by customs, police or other public authorities.

3.3.8 Bounced Booking

We will reimburse the amount up to the amount specified in the Policy Schedule incurred in rebooking due to following:

- a. If an Insured Person is denied boarding on a booked flight journey by a Common Carrier during the Travel Period.
- b. If an Insured Person is denied hotel accommodation on a paid booking by a Service Provider during the Travel Period and the Insured Person has made a new booking in the same city of same dates as original booking.

This Benefit will be payable provided that:

- a. The Insured Person provides Us with a written proof from the Common Carrier / Service Provider of the reasons for denial of booking.
- b. The Insured Person posed no health, safety or security risk in boarding the Common Carrier.
- c. Insured Person is adherent to the rules and/or any internal policy of the provider of accommodation.
- d. The Insured Person had a confirmed booking, all requisite documentation required, and was in compliance with security and boarding protocols.
- e. We shall not accept more than one claim under this Benefit during the Coverage Period.

3.3.9 Personal Liability & Bail Bond

We will reimburse any actual legal liability, including costs as specified in the Policy Schedule incurred towards defence of such litigation and Bail Bond, incurred by the Insured Person in his/her private capacity to pay damages to a third party arising out of the third party's death, Injury or property being damaged during the Travel Period.

This Benefit will be payable provided that:

- a. We are given written notice, as soon as practicable, but in any event within 7 days from the occurrence of the event that gives rise or may give rise to a claim under this Benefit.
- b. The Insured Person does not incur any Defence Costs or expenses, admit liability or settle or attempt to settle, make any admission or offer any payment or otherwise assume any contractual obligation with respect to such claim without Our prior written consent.
- c. The Insured Person is obligated to defend himself/herself in any ensuing civil proceedings. We shall be entitled, but not obligated to, at any time to take over and conduct the defence and/or settlement of any action or claim in the name of the Insured Person and shall be entitled at all times to receive the Insured Person's cooperation and assistance.
- d. We shall not settle any claim without the express consent of the Insured Person, but if the Insured Person refuses an available settlement recommended by Us, then Our liability shall be restricted to the amount by which such claim could have been settled.

We shall not be liable to reimburse any expenses under this Benefit for claims arising out of:

- a. Any wilful, malicious, criminal or unlawful act, error, or omission.

- b. Any liability incurred towards a relative, a travelling companion or work colleague of the Insured Person.
- c. Participation in any Hazardous Activities.
- d. The Insured Person's business or occupation.
- e. Livestock belonging to the Insured Person, or in his/her care, custody or control.

3.3.10 Pet Cover

If the Insured Person is travelling with his/her pet as detailed in the Policy Schedule during the Travel Period, We will provide the following:

- a. We will reimburse the expenses incurred on the medical treatment of the Insured Person's pet if the pet suffers an Injury due to an Accident during the Travel Period.
- b. We will reimburse the costs incurred on additional travel and accommodation expenses by the Insured Person if the Insured Person's journey is cancelled or rescheduled due to the Insured Person's pet suffering death or an Injury due to an Accident, during the Coverage Period.

This Benefit will be payable provided that:

- a. The Injury caused to the Insured Person's pet must be so disabling as to reasonably cause a journey to be cancelled or curtailed.
- b. We will reimburse only those expenses that are Reasonable and Customary Charges, which are evidenced by a report issued by any practicing veterinarian.
- c. The Insured Person's pet has been validly transported and accommodated in accordance with the rules of the Common Carrier, hotel or other provider of accommodation.
- d. The Insured Person's pet is maintained by the Insured Person exclusively for company, protection, or entertainment, and not for the purposes of commerce or research.
- e. We shall not be liable to make any payment in respect of expenses incurred on the treatment of any Illness contracted by the pet, including those which relate to any Pre-Existing Disease.

We shall not be liable to reimburse any expenses under this Benefit for:

- a. Any facts or matters of which the Insured Person was aware or should have been aware might result in the curtailment of the journey.
- b. Costs for transportation of mortal remains of the Insured Person's pet from the place of death to the residence of the Insured Person.
- c. Any loss which will be paid or refunded by any hotel, agent or other provider of accommodation.

3.3.11 Fire and Allied Perils (Home Building & Contents)

In consideration of the Insured Person named in the Policy Schedule hereto having paid to us, the full premium mentioned in the said Policy Schedule, we, (Subject to the Conditions and Exclusions contained herein or endorsed or otherwise expressed hereon) that if after payment of the premium the Property Insured described in the said Policy Schedule or any part of such Property be destroyed or damaged by any of the perils specified hereunder during the period of insurance named in the said Policy Schedule or of any subsequent period in respect of which the Insured shall have paid and the We shall have accepted the premium required for the policy, We shall pay to the Insured the value of the Property at the time of the happening of its destruction or the amount of such damage or at its option reinstate or replace such property or any part thereof:

- a. Fire:

Excluding destruction or damage caused to the property Insured by:

- i. Its own fermentation, natural heating or spontaneous combustion.
 - ii. Its undergoing any heating or drying process.
 - iii. Burning of property Insured by order of any Public Authority.
- b. Lightning,
- c. Explosion/Implosion:

Excluding loss, destruction of or damage:

- i. To boilers (other than domestic boilers), economizers or other vessels, machinery or apparatus (in which steam is generated) or their contents resulting from their own explosion/implosion,
 - ii. Caused by centrifugal forces.
- d. Aircraft Damage:

Loss, Destruction or damage caused by Aircraft, other aerial or space devices and articles dropped therefrom excluding those caused by pressure waves.

- e. Riot, Strike and Malicious Damage:

Loss of or visible physical damage or destruction by external violent means directly caused to the property Insured but excluding those caused by:

- i. Total or partial cessation of work or the retardation or interruption or cessation of any process or operations or omissions of any kind.
- ii. Permanent or temporary dispossession resulting from confiscation, commandeering, requisition or destruction by order of the Government or any lawfully constituted Authority.
- iii. Permanent or temporary dispossession of any building or plant or unit of machinery resulting from the unlawful occupation by any person of such building or plant or unit or machinery or prevention of access to the same.
- iv. Burglary, housebreaking, theft, larceny or any such attempt or any omission of any kind of any person (whether or not such act is committed in the course of a disturbance of public peace) in any malicious act.
- v. If the Company alleges that the loss/damage is not caused by any malicious act, the burden of proving the contrary shall be upon the Insured.

Notwithstanding any provision to the contrary within this insurance it is agreed that this insurance excludes loss, damage cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any act of terrorism regardless of any other cause or event contributing concurrently or in any other sequence to the loss. For the purpose of this endorsement an act of terrorism means an act, including but not limited to the use of force or violence and / or the threat thereof, of any person or group(s) of persons whether acting alone or on behalf of or in connection with any organisation(s) or government(s), committed for political, religious, ideological or similar purpose including the intention to influence any government and/or to put the public, or any section of the public in fear. The warranty also excludes loss, damage, cost or expenses of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to action taken in respect of any act of terrorism. If we alleges that by reason of this exclusion, any loss, damage, cost or expenses is not covered by this insurance the burden of proving the contrary shall be upon the Insured. In the event any portion of this endorsement is found to be invalid or unenforceable, the remainder shall remain in full force and effect.

- f. Storm, Cyclone, Typhoon, Tempest, Hurricane, Tornado, Flood and Inundation:

Loss, destruction or damage directly caused by Storm, Cyclone, Typhoon, Tempest, Hurricane, Tornado, Flood or Inundation excluding those resulting from earthquake, Volcanic eruption or other convulsions of nature. (Wherever earthquake cover is given as an add on cover, the words excluding those resulting from earthquake shall stand deleted).

g. Impact Damage:

Loss of or visible physical damage or destruction caused to the property Insured due to impact by any Rail/ Road vehicle or animal by direct contact not belonging to or owned by:

- i. The Insured or any occupier of the premises or
- ii. Their employees while acting in the course of their employment

h. Subsidence and Landslide including Rock slide:

Loss, destruction or damage directly caused by Subsidence of part of the site on which the property stands or Land slide/ Rock slide excluding:

- i. The normal cracking, settlement or bedding down of new structures
- ii. The settlement or movement of made up ground
- iii. Coastal or river erosion
- iv. Defective design or workmanship or use of defective materials
- v. Demolition, construction, structural alterations or repair of any property of ground works or excavations.

i. Bursting and/or overflowing of Water Tanks, Apparatus and Pipes.

j. Missile Testing operations.

k. Leakage from Automatic Sprinkler Installations.

Excluding loss, destruction or damage caused by:

- i. Repairs or alterations to the buildings or premises.
- ii. Repairs, Removal or Extension of the Sprinkler Installation.
- iii. Defects in construction known to the Insured.

l. Bush Fire:

Excluding loss destruction or damage caused by Forest Fire. provided that our liability shall in no case exceed in respect of each item the Sum Insured expressed in the said Policy Schedule to be Insured thereon or in the whole the total Sum Insured hereby or such other Sum or sums as may be substituted therefor by memorandum hereon or attached hereto signed by or on behalf of us.

m. Earthquake (Fire and Shock) Earthquake (Fire and Shock) Endorsement:

It is hereby agreed and declared that notwithstanding anything stated in the printed exclusions of this policy to the contrary, this Insurance is extended to cover loss or damage (including loss or damage by fire) to any of the property insured by this policy, occasioned by or through or in consequence of earthquake including flood or overflow of the sea, lakes, reservoirs and rivers and/or landslide / rockslide resulting therefrom. Provided always that all the conditions of this policy shall apply (except in so far as they may be hereby expressly varied) and that any reference therein to loss or damage by fire shall be deemed to apply also to loss or damage directly caused by any of the perils which this insurance extends to include by virtue of this endorsement.

General Exclusion of this Benefit:

- a. This Policy does not cover (not applicable to policies covering dwellings)

- i. The first 5% of each and every claim subject to a minimum of Rs.10,000 in respect of each and every loss arising out of —Act of God perils such as Lightning, STFI, Subsidence, Landslide and Rock slide covered under the policy
 - ii. The first Rs.10,000 for each and every loss arising out of other perils in respect of which the Insured is indemnified by this policy
- b. The Excess shall apply per event per Insured Person.
- c. Loss, destruction or damage caused by war, invasion, act of foreign enemy hostilities or war like operations (whether war be declared or not), civil war, mutiny, civil commotion assuming the proportions of or amounting to a popular rising, military rising, rebellion, revolution, insurrection or military or usurped power.
- d. Loss, destruction or damage directly or indirectly caused to the property Insured Person by
 - i. Ionizing radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel
 - ii. The radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof
- e. Loss, destruction or damage caused to the Insured Person property by pollution or contamination excluding
 - i. Pollution or contamination which itself results from a peril hereby Insured against.
 - ii. Any peril hereby Insured against which itself results from pollution or contamination
- f. Loss, destruction or damage to bullion or unset precious stones, any curios or works of art for an amount exceeding Rs. 10000/-, manuscripts, plans, drawings, securities, obligations or documents of any kind, stamps, coins or paper Money, cheques, books of accounts or other business books, computer systems records, explosives unless otherwise expressly stated in the policy.
- g. Loss, destruction or damage to the stocks in Cold Storage premises caused by change of temperature.
- h. Loss, destruction or damage to any electrical machine, apparatus, fixture, or fitting arising from or occasioned by over-running, excessive pressure, short circuiting, arcing, self heating or leakage of electricity from whatever cause (lightning included) provided that this exclusion shall apply only to the particular electrical machine, apparatus, fixture or fitting so affected and not to other machines, apparatus, fixtures or fittings which may be destroyed or damaged by fire so set up.
- i. Expenses necessarily incurred on
 - i. Architects, Surveyors and Consulting Engineer's Fees and
 - ii. Debris Removal by the Insured following a loss, destruction or damage to the Property Insured by an Insured peril in excess of 3% and 1% of the claim amount respectively.
- j. Loss of earnings, loss by delay, loss of market or other consequential or indirect loss or damage of any kind or description whatsoever.
- k. Loss or damage by spoilage resulting from the retardation or interruption or cessation of any process or operation caused by operation of any of the perils covered.
- l. Loss by theft during or after the occurrence of any Insured peril except as provided under Riot, Strike, Malicious and Terrorism Damage cover.
- m. Any Loss or damage occasioned by or through or in consequence directly or indirectly due to Volcanic eruption or other convulsions of nature.

- n. Loss or damage to property Insured if removed to any building or place other than in which it is herein stated to be Insured, except machinery and equipment temporarily removed for repairs, cleaning, renovation or other similar purposes for a period not exceeding 60 days.

General Conditions:

- a. This Policy shall be voidable in the event of mis-representation, mis-description or non-disclosure of any material particular.
- b. All insurances under this policy shall cease on expiry of seven days from the date of fall or displacement of any building or part thereof or of the whole or any part of any range of buildings or of any structure of which such building forms part.

Provided such a fall or displacement is not caused by Insured perils, loss or damage by which is covered by this policy or would be covered if such building, range of buildings or structure were Insured under this policy. Notwithstanding the above, We, subject to an express notice being given as soon as possible but not later than seven days of any such fall or displacement may agree to continue the insurance subject to revised rates, terms and conditions as may be decided by it and confirmed in writing to this effect.

- c. Under any of the following circumstances the insurance ceases to attach as regards the property affected unless the Insured, before the occurrence of any loss or damage, obtains our sanction signified by endorsement upon the policy by or on behalf of us:-
- i. If the trade or manufacture carried on be altered, or if the nature of the occupation of or other circumstances affecting the building Insured or containing the Insured property be changed in such a way as to increase the risk of loss or damage by Insured Perils.
 - ii. If the interest in the property passes from the Insured otherwise than by will or operation of law.
- d. This insurance does not cover any loss or damage to property which, at the time of the happening of such loss or damage, is Insured by or would, but for the existence of this policy, be Insured by any marine policy or policies except in respect of any excess beyond the amount which would have been payable under the marine policy or policies had this insurance not been effected.
- e. This insurance may be terminated at any time at the request of the Insured Person, in which case we will retain the premium at customary short period rate for the time the policy has been in force. This insurance may also at any time be terminated at our option, on 15 days' notice to that effect being given to the Insured, in which we shall be liable to repay on demand a rateable proportion of the premium for the unexpired term from the date of the cancellation.
- f. On the happening of any loss or damage the Insured shall forthwith give notice thereof to the Us and shall within 15 days after the loss or damage, or such further time as We may in writing allow in that behalf, deliver to Us:
- i. A claim in writing for the loss or damage containing as particular an account as may be reasonably practicable of all the several articles or items or property damaged or destroyed, and of the amount of the loss or damage thereto respectively, having regard to their value at the time of the loss or damage not including profit of any kind.

- ii. Particulars of all other insurances, if any

The Insured Person shall also at all times at his/her own expense produce, procure and give to us all such further particulars, plans, specification books, vouchers, invoices, duplicates or copies thereof, documents, investigation reports (internal/external), proofs and information with respect to the claim and the origin and cause of the loss and the circumstances under which the loss or damage occurred, and any matter touching the liability or the amount of our liability as may be reasonably required by or on our behalf together with a declaration on oath or in other legal form

of the truth of the claim and of any matters connected therewith. No claim under this policy shall be payable unless (i) the terms of this condition have been complied with (ii) In no case whatsoever shall we be liable for any loss or damage after the expiration of 12 months from the happening of the loss or damage unless the claim is the subject of pending action or arbitration; it being expressly agreed and declared that if we shall disclaim liability for any claim hereunder and such claim shall not within 12 calendar months from the date of the disclaimer have been made the subject matter of a suit in a court of law then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable hereunder.

- g. On the happening of loss or damage to any of the property Insured by this policy, We may:
- i. Enter and take and keep possession of the building or premises where the loss or damage has happened.
 - ii. Take possession of or require to be delivered to it any property of the Insured in the building or on the premises at the time of the loss or damage.
 - iii. Keep possession of any such property and examine, sort, arrange, remove or otherwise deal with the same.
 - iv. Sell any such property or dispose of the same for account of whom it may concern.

The powers conferred by this condition shall be exercisable by the us at any time until notice in writing is given by the Insured that he makes no claim under the policy, or if any claim is made, until such claim is finally determined or withdrawn, and we shall not by any act done in the exercise or purported exercise of its powers hereunder, incur any liability to the Insured or diminish its rights to rely upon any of the conditions of this policy in answer to any claim. If the Insured Person or any person on his/her behalf shall not comply with our requirements or shall hinder or obstruct us, in the exercise of its powers hereunder, all benefits under this policy shall be forfeited. The Insured shall not in any case be entitled to abandon any property to us whether taken possession of by us or not.

- h. If the claim be in any respect fraudulent, or if any false declaration be made or used in support thereof or if any fraudulent means or devices are used by the Insured or any one acting on his/her behalf to obtain any benefit under the policy or if the loss or damage be occasioned by the willful act, or with the connivance of the Insured, all benefits under this policy shall be forfeited.
- i. We at Our option, reinstate or replace the property damaged or destroyed, or any part thereof, instead of paying the amount of the loss or damage, or join with any other Company or Insurer(s) in so doing, We shall not be bound to reinstate exactly or completely but only as circumstances permit and in reasonably sufficient manner, and in no case shall We be bound to expend more in reinstatement than it would have cost to reinstate such property as it was at the time of the occurrence of such loss or damage nor more than the Sum Insured by Us thereon. If We so elect to reinstate or replace any property the Insured Person shall at his/her own expense furnish Us with such plans, specifications, measurements, quantities and such other particulars as We may require, and no acts done, or caused to be done, by Us with a view to reinstate or replace shall be deemed an election by Us to reinstate or replace.

If in any case We shall be unable to reinstate or repair the property hereby Insured, because of any municipal or other regulations in force affecting the alignment of streets or the construction of buildings or otherwise, We shall, in every such case, only be liable to pay such sum as would be requisite to reinstate or repair such property if the same could lawfully be reinstated to its former condition.

- j. If the property hereby Insured shall at the breaking out of any fire or at the commencement of any destruction of or damage to the property by any other peril hereby Insured against be collectively of greater value than the Sum Insured thereon, then the Insured Person shall be considered as being his/her own insurer for the difference and shall bear a rateable proportion of the loss accordingly. Every item, if more than one, of the policy shall be separately subject to this condition.

- k. If at the time of any loss or damage happening to any property hereby Insured there be any other subsisting insurance or insurances, whether effected by the Insured or by any other person or persons covering the same property, we shall not be liable to pay or contribute more than its rateable proportion of such loss or damage.
- l. The Insured Person shall at the expense of us do and concur in doing, and permit to be done, all such acts and things as may be necessary or reasonably required by us for the purpose of enforcing any rights and remedies or of obtaining relief or indemnity from other parties to which the we shall be or would become entitled or subrogated, upon its paying for or making good any loss or damage under this policy, whether such acts and things shall be or become necessary or required before or after his/her indemnification by Us.
- m. Every notice and other communication to us required by these conditions must be written or printed.
- n. At all times during the period of insurance of this policy the insurance cover will be maintained to the full extent of the respective Sum Insured in consideration of which upon the settlement of any loss under this policy, pro-rata premium for the unexpired period from the date of such loss to the expiry of period of insurance for the amount of such loss shall be payable by the Insured to us.

The additional premium referred above shall be deducted from the net claim amount payable under the policy. This continuous cover to the full extent will be available notwithstanding any previous loss for which we may have paid hereunder and irrespective of the fact whether the additional premium as mentioned above has been actually paid or not following such loss. The intention of this condition is to ensure continuity of the cover to the Insured Person subject only to the right of the Insurance Company for deduction from the claim amount, when settled, of pro-rata premium to be calculated from the date of loss till expiry of the policy. Notwithstanding what is stated above, the Sum Insured shall stand reduced by the amount of loss in case the Insured Person immediately on occurrence of the loss exercises his/her option not to reinstate the Sum Insured as above.

3.3.12 Home Insurance Cover

We will reimburse any actual loss incurred during the Travel Period towards any theft of personal possessions or property stored within the Insured Person's usual place of residence that was left vacant for the duration of the Travel Period.

This Benefit will be payable provided that:

- a. The Insured Person provides Us with a copy of the police complaint reporting the incident.
- b. The Insured Person provides Us with a written proof of ownership for any item stolen valued at more than the amount specified in the Policy Schedule.

We shall not be liable to reimburse any expenses under this Benefit for:

- a. Any loss which is recovered subsequently.
- b. Any loss of Valuables, Money, any kinds of securities or tickets.
- c. Any loss due to any wilful act or omission of the Insured Person.
- d. Any consequential loss or damage of any kind.
- e. Any actual or alleged loss or destruction arising from detention, confiscation or distribution by customs, police or other public authorities.

Section 4: General Exclusions

We shall not be liable to make any payment for any claim under the Policy in respect of an Insured Person, arising from or caused by any of the following, except where provided to the contrary under any Benefit within the Policy:

- a. Suicide or attempted suicide, intentional self-inflicted Injury or acts of self-destruction, whether the Insured Person is medically sane or insane.
- b. Any Pre-Existing Disease, or any Injury, disability, or complication arising out of a Pre-Existing Disease unless disclosed to Us in advance, and coverage for such Pre-Existing Disease is expressly extended and endorsed by Us on the Policy Schedule.
- c. Any event arising from or caused due to use, abuse or a consequence or influence of an abuse of any substance, intoxicant, drug, alcohol or hallucinogen by the Insured Person.
- d. Any breach of law or participation of the Insured Person in an actual or attempted felony, riot, crime, misdemeanour or civil commotion with criminal intent.
- e. Certification of disability by a Medical Practitioner who shares the same residence as the Insured Person or who is a member of the Insured Person's family.
- f. Childbirth or from pregnancy or a consequence thereof including ectopic pregnancy unless specifically arising due to Accident.
- g. Participation of the Insured Person in any flying activity, except as a bona fide passenger on a public aircraft, which is operating under a valid license from the relevant authority for the transportation of passengers.
- h. Any change of profession after inception of the Policy which results in the enhancement of Our risk under the Policy, if not accepted and endorsed by Us on the Policy Schedule.
- i. Engaging in any Hazardous Activities, testing of any kind of Common Carrier, engaging in manual work during a journey, engaging in any offshore work activity, mining, tunnelling or any work involving electrical installation with high tension supply, aerial photography, ammunition, explosives, firearms or flight duty, except as a fare-paying passenger.
- j. Any act of foreign invasion, act of foreign enemies, hostilities and participation of the Insured Person in any naval, military or air-force operation, civil war, public defence, rebellion, revolution, insurrection, military or usurped power.
- k. Ionizing radiation or contamination by radioactivity from any nuclear fuel (explosive or hazardous form) or from any nuclear waste from the combustion of nuclear fuel.
- l. Nuclear, chemical or biological attack or weapons, where chemical attack or weapons means the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous chemical compound which, when suitably distributed, is capable of causing any Illness, incapacitating disability or death, and biological attack or weapons means the emission, discharge, dispersal, release or escape of any pathogenic (disease producing) microorganisms and/or biologically produced toxins (including genetically modified organisms and chemically synthesized toxins) which are capable of causing any Illness, incapacitating disability or death.
- m. Any physical or medical condition, or treatment, or service that is specifically excluded in the Policy Schedule under special conditions.
- n. Any form of non-allopathic treatment.
- o. Any loss of eye-glasses or power lenses in respect of any Insured Person.
- p. Any loss of Valuables, Money, any kinds of securities or tickets.
- q. Any journey where the Insured Person is travelling as a commercial driver, operator or crew member in, or carrying out any testing or repairs on a Common Carrier.
- r. Any intentional illegal or unlawful act or confiscation, detention, destruction by customs or other authorities or any breach of government regulation.
- s. Any failure to take reasonable precautions to avoid a claim under the Policy following a mass media or government issued warning.
- t. Any journey commenced with the Insured Person:
 - i. Not being fit to travel or traveling against the advice of a Medical Practitioner; or
 - ii. Receiving, or is supposed to receive, medical treatment; or
 - iii. Having received terminal prognosis for a medical condition; or
 - iv. Travelling for the purpose of obtaining medical care, treatment or advice of any kind whether this is the sole purpose of the journey or not; or
 - v. Traveling to any country for which his/her visa is not allotted.

Section 5: Claims Procedure & Requirements

The fulfillment of the terms and conditions of this Policy (including payment of premium by the due dates mentioned in the Policy Schedule) insofar as they relate to anything to be done or complied with by You or any Insured Person, including complying with the procedures and requirements in relation to claims, shall be Conditions Precedent to Our liability under this Policy.

For details on the claims procedures and requirements or any assistance during the process, We or Our Assistance Service Provider may be contacted at Our call centre on the toll-free number specified in the Policy Schedule or through Our website or on the contact details specified for Our Assistance Service Provider.

- a. **Claims Procedure:** On the occurrence of or discovery of any event which may give rise to a claim under this Policy, We or Our Assistance Service Provider shall be provided with the necessary information and documentation as indicated below, in respect of the claim as soon as reasonably practicable and in any event, within 30 days of the occurrence of the event giving rise to a claim under the Policy:

Claim Documentation

- i. Travel Tickets
- ii. Copies of valid KYC documents of the Nominee/ claimant (such as Passport/ PAN Card/ Driving License);
- iii. Duly completed and signed Claim Form: We/Assistance Service Provider shall upon receipt of a notice of claim, furnish You with a Claim Form, as required for filing a proof of loss.
- iv. Legal heir certificate, in the event of death where the Nominee is also deceased
- v. Copy of FIR/ MLC (if MLC is done) - where applicable- Attested by issuing authority
- vi. Death/ Disability Certificate attested by issuing/ appropriate authority.
- vii. Leave certificate from the employer (Hospitalization claims)
- viii. Name and address of the attending Medical Practitioner
- ix. Medical reports, case histories, investigation reports, treatment papers as applicable
- x. Discharge summary/ certificate
- xi. Proof of Loss/ Inconvenience provided by the travel organizer/ service provider
- xii. Ownership proof/ invoice of lost item
- xiii. Additional documents required with respect to other coverages will be requested as and when required (if applicable).

b. Cashless Facility

- i. Where Cashless Facility is available, the You/Insured Person shall contact Us or Our Assistance Service Provider as soon as possible, but in any event, before completion of the treatment or services availed. Where any service under a Benefit is only covered on a Cashless Facility basis, it shall not be covered by this Policy unless You/Insured Person consults with Us or Our Assistance Service Provider and the cost for such services are authorized in advance by Us or Our Assistance Service Provider.
- ii. To avail of Cashless facility at any Medical Practitioner, Hospital, or other service provider, the Insured Person's health card along with a valid photo ID proof (Voter ID card / Driving License / Passport / PAN Card / any other identity proof as approved by Us) should be provided, or a pre-authorization may be sought from Us or Our Assistance Service Provider by providing the Policy Schedule number and a valid photo ID proof to the service provider, who can co-ordinate with Us to provide Cashless facility for the Insured Person's treatment or services.
- iii. We or Our Assistance Service Provider shall process the request for pre-authorization after having obtained accurate and complete information in respect of the claim for which Cashless Facility is sought to be availed. We or Our Assistance Service Provider shall confirm in writing authorization or rejection of authorization to avail Cashless Facility.

- iv. Where such pre-authorization is confirmed, We or Our Assistance Service Provider shall contact the service provider for communicating the confirmation and extent of such coverage. If pre-authorization as per Cashless Facility is denied by Us, or is unavailable at such service provider, then You/Insured Person may still subsequently write to Us seeking reimbursement of the expenses covered under the Policy.
- v. Cashless facility is only available at specific service providers, and updated list of which shall be available at Our website or can be confirmed through a phone call made to Us or Our Assistance Service Provider.

c. Other Claims Requirements:

- i. If any claim is not made within the time period set out above, then We will condone such delay on merits only where the delay has been proved to be for reasons beyond the claimant's control.
- ii. We / Our representatives must be given all reasonable co-operation in investigating the claim in order to assess Our liability and quantum in respect of such claim.
- iii. If requested by Us and at Our cost, the Insured Person must submit to medical examination by Independent Medical Practitioner.
- iv. We/Our representatives must be permitted to inspect the medical and Hospitalization records pertaining to the Insured Person's Injury and treatment and to investigate the facts surrounding the claim.

d. Claims Payment:

- i. We shall be under no obligation to make any payment under this Policy unless We have received all premium payments in full and on time in respect of the Insured Person's cover under the Benefit and all payments have been realised.
- ii. We shall settle or reject a claim, as may be the case, within 30 days of the receipt of the last necessary document.
- iii. All claims will be investigated (as required) and settled in accordance with the applicable regulatory guidelines, including the IRDAI (Protection of Policyholders Interests) Regulations, 2017.
- iv. In case of delay in payment of any claim that has been admitted as payable by Us under the Policy, beyond the time period as prescribed under IRDAI (Protection of Policyholders Interests) Regulations, 2017, We shall pay interest at a rate which is 2% above the bank rate where "bank rate" shall mean the bank rate fixed by the Reserve Bank of India at the beginning of the financial year in which claim has fallen due.

Section 6: General Terms & Conditions

1. **Disclosure to Information Norm:** This Policy has been issued on the basis of the Disclosure to Information Norm, including the information provided in respect of the Insured Persons in the Proposal Form, personal statement and any other details submitted in relation to the Proposal Form/personal statement. If at the time of issuance of Policy or during continuation of the Policy, any material fact in the information provided to Us in the Proposal Form or otherwise, by You or the Insured Person, or anyone acting on behalf of You or an Insured Person is found to be incorrect, incomplete, suppressed or not disclosed, wilfully or otherwise, the Policy shall be void and no benefit will be payable thereunder.
2. **Dishonest & Fraudulent Claims:** If any claim is in any manner dishonest or fraudulent, or is supported by any dishonest or fraudulent means or devices, whether by You or any Insured Person or anyone acting on behalf of You or an Insured Person, then this Policy will be void and all benefits otherwise payable under it will be forfeited.

3. **Material Information:** Material information to be disclosed includes every matter that You are aware of, or could reasonably be expected to know, that relates to questions in the Proposal Form/personal statement, and which is relevant to Us in order to accept the risk of insurance. You must exercise the same duty to disclose those matters to Us before the extension, variation, endorsement of the contract We may, adjust the scope of cover and / or premium, if necessary, accordingly.
4. **Alterations in the Policy:** This Policy constitutes the complete contract of insurance. No change or alteration will be effective or valid unless approved in writing which will be evidenced by a written endorsement, signed and stamped by Us.
5. **Geography & Policy Currency:** This Policy applies to events or occurrences taking place in the Geographical Scope specified in the Policy Schedule. All payments under this Policy will only be made in the currency specified in the Policy Schedule.
6. **Cancellation/Termination of the Policy (other than cancellation in the Free Look Period):**
 - i. You may terminate this Policy at any time before the travel start date by giving Us written notice, and the Policy will terminate when such written notice is received. If no claim has been made under the Policy, then We will refund premium after deducting ₹100 (Including applicable taxes) per member in the policy.
 - ii. We may at any time terminate this Policy on grounds of misrepresentation, fraud or non-disclosure of material facts by You or any Insured Person upon 30 days' notice by sending an endorsement to Your address shown in the Policy Schedule without refund of premium.
7. **Governing Law & Dispute Resolution:** Any and all disputes or differences under or in relation to this Policy will be determined by the Indian Courts and subject to Indian law.
8. **Notices & Communications:** Any notice or communication in relation to this Policy will be in writing and if it is to:
 - i. You or any Insured Person, then it will be sent to You at Your address specified in the Policy Schedule and You will act for all Insured Persons for these purposes.
 - ii. Us, it will be delivered to Our address specified in the Policy Schedule. No insurance agents, insurance intermediaries or other person or entity is authorised to receive any notice or communication on Our behalf.
9. **Electronic Transactions:** You agree to comply with all the terms and conditions of electronic transactions as We shall prescribe from time to time, and confirm that all transactions effected facilities for conducting remote transactions such as the Internet, World Wide Web, electronic data interchange, call centres, tele-service operations (whether voice, video, data or combination thereof) or by means of electronic, computer, automated machines network or through other means of telecommunication, in respect of this Policy and claim related details, shall constitute legally binding when done in compliance with Our terms for such facilities.
10. **Assignment:** The Policy and the benefits under this Policy can be assigned in only in accordance with applicable law.

Section 7: Grievance Redressal

For resolution of any query or grievance, insured may contact the company on toll free number **1800 266 2256** or may write an e- mail at grievance@acko.com. In case the insured is not satisfied with the response of the office, insured may contact the Grievance Officer of the Company at the following address:

Grievance Redressal Officer
Acko General Insurance Limited



3rd Floor, F-wing,
Lotus corporate park, Goregaon East,
Mumbai – 400063
grievance@acko.com

In the event of unsatisfactory response from the Grievance Officer, he/she may, register a complaint in the Integrated Grievance Management System (IGMS) of the IRDAI.

Where the grievance is not resolved, the insured may, subject to vested jurisdiction, approach the Insurance Ombudsman for the redressal of grievance. The details of the Insurance Ombudsman are available below:

AHMEDABAD - Office of the Insurance Ombudsman, 6th Floor, Jeevan Prakash Bldg, Tilak Marg, Relief Road, Ahmedabad-380 001. Tel.:- 079-25501201/02/05/06 Email: bimalokpal.ahmedabad@ecoi.co.in. (State of Gujarat and Union Territories of Dadra & Nagar Haveli and Daman and Diu.)

BENGALURU - Office of the Insurance Ombudsman, 24th Main Road, Jeevan Soudha Bldg., JP Nagar, 1st Phase, Ground Floor Bengaluru – 560 078. Tel.:- 080- 26652049/26652048 Email: bimalokpal.bengaluru@ecoi.co.in. (State of Karnataka.)

BHOPAL - Office of the Insurance Ombudsman, 2nd Floor, Janak Vihar Complex, 6, Malviya Nagar, Bhopal(M.P.)-462 003. Tel.:- 0755-2769201/9202 Fax: 0755-2769203

Email: bimalokpal.bhopal@ecoi.co.in (States of Madhya Pradesh and Chattisgarh.)

BHUBANESHWAR - Office of the Insurance Ombudsman, 62, Forest Park, Bhubaneswar-751 009. Tel.:- 0674-2596455/2596003/2596461 Fax: 0674-2596429 Email: bimalokpal.bhubaneswar@ecoi.co.in (State of Orissa.)

CHANDIGARH - Office of the Insurance Ombudsman, S.C.O. No.101-103,2nd Floor, Batra Building, Sector 17-D, Chandigarh-160017. Tel.:- 0172-2706468/2706196 Fax: 0172-2708274 Email: bimalokpal.chandigarh@ecoi.co.in (States of Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir and Union territory of Chandigarh.)

CHENNAI - Office of the Insurance Ombudsman, Fathima Akhtar Court, 4th Floor, 453 (old 312), Anna Salai, Teynampet, Chennai-600 018. Tel.:- 044-24333668 /24335284 Fax: 044-24333664 Email: bimalokpal.chennai@ecoi.co.in [State of Tamil Nadu and Union Territories - Pondicherry Town and Karaikal (which are part of Union Territory of Pondicherry).]

DELHI - Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi-110 002. Tel.:- 011-011-23232481/23213504 Fax: 011-23230858 Email: bimalokpal.delhi@ecoi.co.in (States of Delhi.)

GUWAHATI - Office of the Insurance Ombudsman, “Jeevan Nivesh”, 5th Floor, S.S. Road, Guwahati-781 001 Tel.:- 0361-2132204/5 Email: bimalokpal.guwahati@ecoi.co.in (States of Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.)

HYDERABAD - Office of the Insurance Ombudsman, 6-2-46, 1st Floor, Moin Court, A.C. Guards, Lakdi-Ka-Pool, Hyderabad-500 004. Tel: 040-61504123/23312122 Fax: 040- 23376599 Email: bimalokpal.hyderabad@ecoi.co.in (States of Andhra Pradesh and Union Territory of Yanam – a part of the Union Territory of Pondicherry.)

JAIPUR - Office of the Insurance Ombudsman, Ground Floor, Jeevan Nidhi II, Bhawani Singh Road, Jaipur – 302005 Tel: 0141-2740363 Email: bimalokpal.jaipur@ecoi.co.in (State of Rajasthan.)

ERNAKULAM - Office of the Insurance Ombudsman, 2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard, M.G. Road, Ernakulam-682 015. Tel: 0484-2358759/2359338 Fax: 0484-2359336 Email: bimalokpal.ernakulam@ecoi.co.in [State of Kerala and Union Territory of (a) Lakshadweep (b) Mahe-a part of Union Territory of Pondicherry.]



KOLKATA - Office of the Insurance Ombudsman, Hindustan Building. Annexe, 4th Floor, C.R. Avenue, Kolkata-700 072. Tel: 033-22124339/22124346/22124340 Fax: 033-22124341 Email: bimalokpal.kolkata@ecoi.co.in (States of West Bengal, Bihar, Sikkim, Jharkhand and Union Territories of Andaman and Nicobar Islands.)

LUCKNOW - Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-2, Nawal Kishore Road, Hazaratganj, Lucknow-226 001. Tel: 0522 -2231331/2231330 Fax: 0522-2231310 Email: bimalokpal.lucknow@ecoi.co.in (States of Uttar Pradesh and Uttaranchal.)

MUMBAI - Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S.V. Road, Santacruz(W), Mumbai 400054. Tel: 022-26106960/26106552 Fax: 022-26106052

Email: bimalokpal.mumbai@ecoi.co.in (State of Goa and Mumbai Metropolitan Region excluding Navi Mumbai and Thane.)

PUNE - Office of the Insurance Ombudsman, 3rd Floor, Jeevan Darshan Bldg, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayanpeth, Pune – 411030. Tel: 020-41312555 Email: bimalokpal.pune@ecoi.co.in (State of Maharashtra including Navi Mumbai and Thane and excluding Mumbai Metropolitan Region.)

NOIDA - Office of the Insurance Ombudsman, 4th Floor, Bhagwan Sahai Palace, Main Road, Naya Bans, Sector-15, Distt: Gautam Buddh Nagar – 201301. Tel: 0120- 2514250/52/53 Email: bimalokpal.noida@ecoi.co.in (State of Uttaranchal and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshahr, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.)

PATNA - Office of the Insurance Ombudsman, 1st Floor, Kalpana Arcade Building, Bazar Samiti Road, Bahadurpur, Patna – 800006. Tel No: 06122680952 Email: bimalokpal.patna@ecoi.co.in (Bihar, Jharkhand.)

The updated details of Insurance Ombudsman offices are also available at the IRDAI website www.irda.gov.in, or on the website of Governing Body of Insurance Council www.ecoi.co.in or on the Company's website at www.acko.com.