

To,

Date: 13/05/2024

Mr PANKAJ KUMAR
FLAT NO 703 ATULLAYAM, APARTMENT , AGRA,
Civil Court, Agra,
Uttar Pradesh-282002,
India
6393334026

Subject: Policy Number: **P221305241596263** (Please use this when making any enquiries)

Dear Customer,

Welcome to SBI General. Thank you for choosing SBI General's "**Bundled Private Car Insurance Policy**" policy. We are delighted to have you as our esteemed customer. We enclose the following documents pertaining to your policy:

- Policy Schedule
- Policy clauses & wordings
- Premium Receipt
- Grievance redressal letter
- Product specific attachment

Please ensure the safety of these documents as they form part of our contract with you.

We have taken care that the documents reflect details of risk and cover as proposed by you. Some of the most important facts that we have relied on in issuing your policy are:

Make of vehicle	HYUNDAI
Model	CRETA
Variant	1.5 MPI MT EX
Year of Manufacture	2024
No Claims Bonus (NCB)	0%
Night Parking Pincode	282001
Age of Driver	39
Insured Declared Value	1160000

If any of the above captured information is incorrect, we request you to get in touch with our customer care team so that it may be changed.

We recommend that you read the policy documentation carefully and contact us if there is anything you would like to discuss. It is important to us that we have all of your personal and other details recorded accurately so that we can provide you with fast and efficient service. Please contact us to update these details as necessary.

SBI General is ready to assist you in relation to this product and all your general insurance needs. For your convenience, you are able to choose how to contact SBI in several convenient ways:

By email: customer.care@sbigeneral.in

By phone: **1800-22-1111 (For MTNL/BSNL users) or 1800-102-1111 (for other users)**

Or visit us to the SBI General Branch that is nearest to you:

SBI General Insurance Company Limited

9th Floor, A & B Wing, Fulcrum Business Centre, Sahar Road, Ashok Nagar,
Andheri (East), Mumbai
Maharashtra-400099,
India

We thank you for your business and the trust you have placed in us purchasing this general insurance policy.

Yours Sincerely,



Authorized Signatory

SBI General Insurance Company Limited

Registered and Corporate office: 9th Floor, A & B Wing, Fulcrum Business Centre, Sahar Road, Ashok Nagar, Andheri (East), Mumbai -400 099.

BUNDLED PRIVATE CAR CERTIFICATE OF INSURANCE CUM POLICY SCHEDULE

Important Note: 1) The Validity of this Certificate of Insurance cum Schedule is subject to realization of the premium cheque. 2) This Insurance Policy cover is valid subject to availability of Complete and Correct Registration Number within 15 days from the Date of Commencement of this Policy.

Policy Issuing Office	: 9th Floor, A & B Wing, Fulcrum Business Centre, Sahar Road, Ashok Nagar, Andheri (East), Mumbai - 400 099.		
Policy Number	: P221305241596263	Policy Servicing Branch	: 00038-Agra
Insured Name	: Mr PANKAJ KUMAR		
Address	: FLAT NO 703 ATULLAYAM, APARTMENT ,AGRA, Civil Court, Agra, Uttar Pradesh-282002		
Customer Contact Details	: 6393334026		
Period of Insurance OD	: From: 13/05/2024 17:09:57 hrs to: 12/05/2025 Midnight		
Period of Insurance TP	: From: 13/05/2024 17:09:57 hrs to: 12/05/2027 Midnight		
Geographical Area	: India		

INSURED MOTOR VEHICLE DETAILS		INSURED'S DECLARED VALUE(IDV) (in Rs.)	
Make	HYUNDAI	Vehicle	1160000
Model & Variant	CRETA&1.5 MPI MT EX	Trailer	
Year of Manufacturing	2024	Non Electrical Accessories	0
Registration Number	NEW	Electrical Accessories	0
Engine Number	G4FLRV750986	CNG / LPG Kit	0
Chassis Number	MALPA812LRM757375	Total IDV	1160000
Cubic Capacity	1497		
Seating Capacity (Including Driver)	5		
Type of Body	SUV		
RTO Location Name	AGRA UP		

LIMITATION AS TO USE : As per Motor Vehicle Rules, 1989, The Policy covers use of the vehicle for any purpose other than : a) Hire or Reward, b) Carriage of Goods (other than samples or personal luggage), c) Organized racing, d) Pace Making, e) Speed testing f) Reliability Trials, g) Any purpose in connection with Motor Trade.

DRIVERS CLAUSE: Any Person including the Insured Provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license; provided also that the person holding an effective learner's license may also drive the vehicle and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicle Rules, 1989.

LIMITS OF LIABILITY: a. Under Section II-1(i) of the Policy-Death of or bodily injury to any person so far as it is necessary to meet the requirements of the Motor Vehicle Act, 1988. b. Under Section II (1)(ii) of the Policy-Damage to property other than property belonging to the insured or held in trust or in the custody or control of the insured up to the limits specified Upto Rs.750000/- . c. PA Cover for owner-driver under Section-III CSI - Rs. 1500000/-

Deductible under Section-I: (i) Compulsory deductible Rs.1000/- (ii) Voluntary deductible Rs.0/- (iii) Additional Compulsory deductible Rs. /-.

Special Conditions: Warranted all damages existing prior to inception of risk are excluded from the scope of policy.

Warranty: Warranted that the insured named herein/owner of the vehicle holds a valid Pollution Under Control (PUC) Certificate and/or valid fitness certificate, as applicable, on the date of commencement of the Policy and undertakes to renew and maintain a valid and effective PUC and/or fitness Certificate, as applicable, during the subsistence of the Policy. Further, the Company reserves the right to take appropriate action in case of any discrepancy in the PUC or fitness certificate.

NO CLAIM BONUS:

The Insured is entitled for a No Claim Bonus (NCB) on the Own Damage section of the Policy, if no claim is made or pending during the preceding year(s), as follows: The preceding year – 20%; Preceding two consecutive years – 25%; Preceding three consecutive years – 35%; Preceding four consecutive years – 45%; Preceding five consecutive years – 50%. **The No Claim Bonus will only be allowed provided the Policy is renewed within 90 days of the expiry date of the previous policy.**

INTERMEDIARY DETAILS

Intermediary Name	: Sbi Sanjay Placeagra 15446	Intermediary Code	: 0023582
Contact Details	: Mobile No : -7534002186	Landline No	:

NOMINATION DETAILS

Name of the Nominee	Date of Birth	Relationship with Proposer	Name of Appointee (if Nominee is Minor)
ISHA SINGH	28/12/1988	Wife	

PREMIUM COMPUTATION TABLE

OWN DAMAGE SECTION				LIABILITY SECTION				
Policy Period: From: 13/05/2024 17:09:57 hrs to: 12/05/2025 Midnight				Policy Period: From: 13/05/2024 17:09:57 hrs to: 12/05/2027 Midnight				
Cover	Sum Insured	No. of persons	PREMIUM (Rs.)	Cover	Sum Insured	No. of persons	PREMIUM (Rs.)	
Own Damage Premium for Vehicle & Accessories (Amount will be including all tariff covers & discounts & Other Loading / Discount)	1160000		14806.00	Basic Third Party Liability Premium			10640.00	
SBIG Add on Covers				Additional Covers				
Depreciation Reimbursement			4640.00	PA for Owner driver	1500000		909.00	
Basic road side assistance			130.00	PA for Unnamed Passenger	100000		750.00	
Return to Invoice			1740.00	PA cover for paid driver	100000		150.00	
Engine Guard			1740.00					
Cover for consumables			1160.00					
Key Replacement			400.00					
Total Own Damage Premium (A)			24616.00	Total Third Party Liability Premium (B)			12449.00	
Subject to I.M.T Endorsement Nos. : IMT-22 IMT-17 IMT-7				TOTAL POLICY PREMIUM (A+B)				37065.00
Subject to SBIG Add-On Endorsement Nos.:				Kerala Flood Cess @ 1%				0.00
				GST Taxes				6672.00
				Total Premium Collected				43737.00
Hire Purchase/ Lease /Hypothecated with :		Hypothecation		SBI		SANJAYPLACE15446		

Premium Collection details: Receipt No.:C1305244120798,Receipt Date:13/05/2024

For claims, Please contact us at Toll Free number
MTNL/BSNL users - 1800-22-1111
Other users - 1800-102-1111

For Roadside Assistance Service,
Name -MyTVS-1800-266-6800

I/We hereby certify that the Policy to which this Certificate relates as well as this Certificate of Insurance are issued in accordance with the provisions of chapter X and Chapter XI of M.V. Act, 1988.

For and on behalf of SBI General Insurance Co. Ltd




Authorized Signatory

Consolidated Stamp Duty Rs. 0.5 paid towards Insurance Policy Stamps vide Order No. CSD/42/2018/2144/18 Dated 2017-09-06 15:18:58.425 of General Stamp Office, Mumbai

IMPORTANT NOTICE: The Insured is not indemnified if the vehicle is used or driven otherwise than in accordance with this schedule. Any payment made by the Company by reason of wider terms appearing in the certificate in order to comply with the Motor Vehicle Act,1988 is recoverable from the Insured. See the clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY". For legal interpretation English version will be good.

Policy printed by: 0023582 on Date: 13 May 2024 Time 17:23:30

Disclaimer: Please examine this Policy including attached Schedules / Annexure if any. In the event of any discrepancy please contact the office of the Company immediately, it being noted that this Policy shall be otherwise considered as being entirely in order. Please find claims settlement & grievance redressal procedure document attached herein for ready references.

Branch Office Address: 9th Floor, A & B Wing, Fulcrum Business Centre, Sahar Road, Ashok Nagar, Andheri (East), Mumbai Mumbai-400099, India, Maharashtra - 400069	Reference No:		
	OF Receipt No:	C1305244120798	
	Date:	13/05/2024	
	Branch Code:	00038	
	Party/Depositor ID:		
RECEIPT			
Received with thanks from PANKAJ KUMAR an amount of Rs43737 (Rupees And forty-three thousand seven hundred and thirty-seven) by online No: ACD Acc No: ACD TransactionNo/InstrumentNo : Dated : 13/05/2024 Drawn on Bank : Branch: ,			
Party ID	Quote/Policy/Claim No.	Name of Party	Amount(Rs.)
	P221305241596263	PANKAJ KUMAR	43737
		TOTAL	43737

Disclaimer

- 1)Receipt subject to realisation of instrument submitted
- 2)Kindly refer to the policy document for time of commencement of cover

For and on behalf of
SBI General Insurance Co. Ltd.



Authorized Signatory

SBI General Insurance Company Limited

Registered and Corporate office: 9th Floor, A & B Wing, Fulcrum Business Centre, Sahar Road, Ashok Nagar, Andheri (East), Mumbai - 400 099."SBI General Insurance Products are not a Product of SBI".

Bundled Private Car Insurance Policy

ENDORSEMENT WORDINGS

Attached to and forming part of the Schedule to the Policy No: P221305241596263

ENDORSEMENT DESCRIPTION

IMT-22 - Compulsory Deductible

Notwithstanding anything to the contrary contained in the policy it is hereby understood and agreed that the insured shall bear under Section 1 of the policy in respect of each and every event (including event giving rise to a total loss/constructive total loss) the first Rs.....* (or any less expenditure which may be incurred) of any expenditure for which provision has been made under this policy and/or of any expenditure by the insurer in the exercise of his discretion under Condition no ...** of this policy

If the expenditure incurred by the insurer shall include any amount for which the insured is responsible hereunder such amount shall be repaid by the insured to the insurer forthwith.

For the purpose of this Endorsement the expression "event" shall mean an event or series of events arising out of one cause in connection with the vehicle insured in respect of which indemnity is provided under this policy.

Subject otherwise to the terms conditions limitations and exceptions of this Policy.

* (i) to insert amount as appropriate to the class of vehicle insured as per GR.40 of the tariff.

(ii) in respect of a vehicle rated under the Tariff for Private Car and in respect of a motorised two wheeler not carrying passengers for hire or reward, if any deductible in addition to the compulsory deductible provided in this endorsement is voluntarily borne by the insured, the sum representing the aggregate of the compulsory and the voluntary deductibles is to be inserted.

** to insert Condition no 3 in respect of a vehicle rated under Tariff for Private Car/Two wheelers or Condition no 4 in respect of a vehicle rated under the Tariff for Commercial Vehicles.

IMT-7 - Hypothecation

Vehicles subject to Hypothecation Agreement It is hereby declared and agreed that the vehicle insured is pledged to / hypothecated with SBI (hereinafter referred to as the Pledgee) and it is further understood and agreed that the Pledgee is interested in any monies which but for this Endorsement would be payable to the insured under this policy in respect of such loss or damage to the vehicle insured as cannot be made good by repair and / or replacement of parts and such monies shall be paid to the Pledgee as long as they are the Pledgee of the vehicle insured and their receipt shall be a full and final discharge to the insurer in respect of such loss or damage. It is further declared and agreed that for the purpose of the Personal Accident Cover for the owner-driver granted under this policy, the insured named in the policy will continue to be deemed as the owner-driver subject to compliance of provisions of the policy relating to this cover. Save as by this Endorsement expressly agreed that nothing herein shall modify or affect the rights or liabilities of the Insured or the Insurer respectively under or in connection with this Policy or any term, provision or condition thereof. Subject otherwise to the terms exceptions conditions and limitations of this policy.

IMT-17 - PA to Paid Drivers

In consideration of the payment of an additional premium, it is hereby understood and agreed that the insurer undertakes to pay compensation on the scale provided below for bodily injury as hereinafter defined sustained by the paid driver/cleaner/conductor in the employ of the insured in direct connection with the vehicle insured whilst mounting into dismounting from or travelling in the insured vehicle and caused by violent accidental external and visible means which independently of any other cause shall within six calendar months of the occurrence of such injury result in :

Details of Injury Scale of Compensation

- i) Death 100%
- ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye 100%
- iii) Loss of one limb or sight of one eye 50%
- iv) Permanent Total Disablement from injuries other than named above 100%


Provided always that

- (1) compensation shall be payable under only one of the items (i) to (iv) above in respect of any such person arising out of any one occurrence and total liability of the insurer shall not in the aggregate exceed the sum of Rs 100000* during any one period of insurance in respect of any such person.
- (2) no compensation shall be payable in respect of death or injury directly or indirectly wholly or in part arising or resulting from or traceable to (a) intentional self injury suicide or attempted suicide physical defect or infirmity or (b) an accident happening whilst such person is under the influence of intoxicating liquor or drugs.
- (3) such compensation shall be payable only with the approval of the insured named in the policy and directly to the injured person or his/her legal representative (s) whose receipt shall be a full discharge in respect of the injury of such person.

Subject otherwise to the terms exceptions conditions and limitations of this policy.

* The Capital Sum Insured (CSI) per person is to be inserted.

EME - Emergency Medical Expense

<p>This cover is applicable if it is shown in your policy schedule.</p> <p style="text-align: center;">GST TAX INVOICE</p> <p>What is covered? We will pay emergency medical expenses incurred by you upto the sum insured mentioned in the policy schedule due to for treatment of bodily injury/ies sustained by You or any occupant of the vehicle in direct connection with vehicle insured or whilst mounting and dismounting from or driving or travelling in the insured vehicle and caused by violent, accidental external and visible means and required treatment is taken in a Hospital / Nursing Home. Ambulance Charges incurred by you for hiring an Ambulance for shifting you or occupant from the site of accident to the Hospital / Nursing Home is also covered up to the limit of Rs.2500.</p>								
<p>What is not covered? Any expenses related to sickness, disease or medical disorder not directly caused by accident. Any expenses towards psychosomatic disorders of any kind, whether caused or accentuated by accident or otherwise. Any physiotherapy treatment.</p>		<p>GSTIN/ Unique No: 27AACC3885L1Z0</p>		<p>Policy Number</p>		<p>Maharashtra</p>		
<p>SBI General Insurance Company Limited Any expense not supported by an original and valid bill / receipt and related prescription of the attending Medical Practitioner / Hospital / Nursing Home. 9th Floor, A & B Wing, Fulcrum Business Centre, Sahar Road, Ashok Nagar, Andheri (East), Mumbai, Maharashtra-400099. Expenses, if the treatment is started after 5 days from the date of Accident • Not more than the sum insured as mentioned in the schedule during any one year of policy. • Any expense arising or resulting from or traceable to intentional self-injury, suicide or attempted suicide physical defect or infirmity. • Any expense arising or resulting from or traceable to an accident happening whilst You are under the influence of intoxicating liquor or drugs.</p>								
Details of Policy Holder:								
Name:		Mr PANKAJ KUMAR Subject otherwise to the terms exceptions condition & limitations of the policy						
Address:		FLAT NO 703 ATULLAYAM APARTMENT AGRA,Civil Court,Agra,Uttar Pradesh-282002,India						
Policy Holder State		Uttar Pradesh						
GSTIN/ Unique No:				Policy Number		P221305241596263		
Insurance Product Name	HSN Code	Premium (without Taxes)	CGST		SGST/UTGST		IGST	
			Rate	Amount	Rate	Amount	Rate	Amount
Private Motor 4 wheeler	-	37065.00	-	-	-	-	-	-
Total Invoice Value (In Figures)		43737.00		 Authorized Signatory				
Taxes Applicable		6672.00						
SBI General Receipt No:		C1305244120798		Receipt Date:		13/05/2024		

Bundled Private Car Insurance Policy

POLICY WORDINGS

Where as the Insured by a proposed declaration dated as stated in the Schedule which shall be the basis of this contract and is deemed to be incorporated herein has applied to SBI GENERAL INSURANCE COMPANY LIMITED (hereinafter called "the Company") for the insurance hereinafter contained and has paid the premium mentioned in the Schedule as consideration for such insurance in respect of accidental loss or damage occurring during the period of insurance.

NOW THIS POLICY WITNESSETH:

That subject to the Terms Exceptions and Conditions contained herein or endorsed or expressed hereon

SECTION I – LOSS OF OR DAMAGE TO THE VEHICLE INSURED

- 1) The Company will indemnify the Insured against loss or damage to the vehicle insured hereunder and / or its accessories whilst thereon
- I. by fire explosion self-ignition or lightning ;
 - II. burglary housebreaking or theft ;
 - III. by riot and strike;
 - IV. by earthquake (fire and shock damage);
 - V. by flood typhoon hurricane storm tempest inundation cyclone hailstorm frost;
 - VI. by accidental external means;
 - VII. by malicious act;
 - VIII. by terrorist activity;
 - IX. whilst in transit by road rail inland-waterway lift elevator or air;
 - X. by landslide rockslide.

Subject to a deduction for depreciation at the rates mentioned below in respect of parts replaced:

- (1) For all rubber/ nylon / plastic parts, tyres , tubes, batteries and air bags - 50%
- (2) For fibre glass components – 30%
- (3) For all parts made of glass - Nil
- (4) Rate of depreciation for all other parts including wooden parts will be as per the following schedule.

AGE OF THE VEHICLE	% OF DEPRECIATION
Not exceeding 6 months	NIL
Exceeding 6 months but not exceeding 1 year	5%
Exceeding 1 year but not exceeding 2 years	10%
Exceeding 2 years but not exceeding 3 years	15%
Exceeding 3 years but not exceeding 4 years	25%
Exceeding 4 years but not exceeding 5 years	35%
Exceeding 5 years but not exceeding 10 years	40%
Exceeding 10 years	50%

- (5) Rate of Depreciation for Painting: In the case of painting, the depreciation rate of 50% shall be applied only on the material cost of total painting charges. In case of a consolidated bill for painting charges, the material component shall be considered as 25% of total painting charges for the purpose of applying the depreciation.

- 2) The Company shall not be liable to make any payment in respect of
- a) consequential loss, depreciation, wear and tear, mechanical or electrical breakdown, failures or breakages
 - b) damage to Tyres and Tubes unless the vehicle is damaged at the same time in which case the liability of the Company shall be limited to 50% of the cost of replacement.
 - c) any accidental loss or damage suffered whilst the Insured or any person driving the vehicle with the knowledge and consent of the Insured is under the influence of intoxicating liquor or drugs.
- 3) In the event of the vehicle being disabled by reason of loss or damage covered under this Policy, the Company will bear the reasonable cost of protection and removal to the nearest repairer and re-delivery to the Insured but not exceeding in all, Rs.1500/- in respect of any one accident.
- 4) The Insured may authorise the repair of the vehicle necessitated by damage for which the Company may be liable under this Policy provided that:
- a) the estimated cost of such repair including replacements, if any, does not exceed Rs.500/-;
 - b) the Company is furnished forthwith with a detailed estimate of the cost of repairs; and
 - c) the Insured shall give the Company every assistance to see that such repair is necessary and the charges are reasonable.

SUM INSURED – INSURED’S DECLARED VALUE (IDV)

The Insured’s Declared Value (IDV) of the vehicle will be deemed to be the ‘SUM INSURED’ for the purpose of this Policy which is fixed at the commencement of each Policy period for the insured vehicle.

The IDV of the vehicle (and accessories if any fitted to the vehicle) is to be fixed on the basis of the manufacturer’s listed selling price of the brand and model as the vehicle insured at the commencement of insurance/renewal and adjusted for depreciation (as per schedule below). The schedule of age-wise depreciation as shown below is applicable for the purpose of Total Loss/Constructive Total Loss (TL/CTL) claims only.

THE SCHEDULE OF DEPRECIATION FOR FIXING IDV OF THE VEHICLE

AGE OF THE VEHICLE	% OF DEPRECIATION FOR FIXING IDV
Not exceeding 6 months	5%
Exceeding 6 months but not exceeding 1 year	15%
Exceeding 1 year but not exceeding 2 years	20%
Exceeding 2 years but not exceeding 3 years	30%
Exceeding 3 years but not exceeding 4 years	40%

Exceeding 4 years but not exceeding 5 years	50%
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IDV of vehicles beyond 5 years of age and of obsolete models of the vehicles (i.e. models which the manufacturers have discontinued to manufacture) is to be determined on the basis of an understanding between the Company and the Insured.
IDV shall be treated as the 'Market Value' through out the policy period without any further depreciation for the purpose of Total Loss(TL)/Constructive Total Loss (CTL) claims.
The insured vehicle shall be treated as a CTL if the aggregate cost of retrieval and / or repair of the vehicle, subject to terms and conditions of the Policy, exceeds 75% of the IDV of the vehicle.

SECTION II – LIABILITY TO THIRD PARTIES

1) Subject to the limits of liability as laid down in the Schedule here to the Company will indemnify the Insured in the event of an accident caused by arising out of the use of the vehicle against all sums which the Insured shall become legally liable to pay in respect of :

i) death of or bodily injury to any person including occupants carried in the vehicle (provided such occupants are not carried for hire or reward) but except so far as it is necessary to meet the requirements of Motor Vehicles Act, the Company shall not be liable where such death or injury arises out of and in course of employment of such person by the Insured.

ii) damage to property other than property belonging to the Insured or held in trust or in the custody or control of the Insured.

2) The Company will pay all costs and expenses incurred with its written consent.

3) In terms of and subject to the limitations of the indemnity granted by this Section to the Insured, the Company will indemnify any driver who is driving the vehicle on the Insured's order or with Insured's permission provided that such driver shall as though he/she was the Insured observe fulfill and be subject to the terms exceptions and conditions of this Policy in so far as they apply.

4) In the event of the death of any person entitled to indemnity under this Policy the Company will in respect of the liability incurred by such person in indemnify his/her personal representative in terms of and subject to the limitations of this Policy provided that such personal representative shall as though such representative was the Insured observe fulfill and be subject to the terms exceptions and conditions of this Policy in so far as they apply.

5) The Company may at its own option

a. arrange for representation at any Inquest or Fatal Inquiry in respect of any death which may be the subject of indemnity under this Policy and

b. undertake the defence of proceedings in any Court of Law in respect of any act or alleged offence causing or relating to any event which may be the subject of indemnity under this policy

AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY

Nothing in this Policy or any endorsement hereon shall affect the right of any person indemnified by this Policy or any other person to recover an amount under or by virtue of the provisions of the Motor Vehicles Act, 1988.

But the Insured shall repay to the Company all sums paid by the Company which the Company would not have been liable to pay but for the said provisions.

APPLICATION OF LIMITS OF INDEMNITY

In the event of any accident involving indemnity to more than one person, any limitation by the terms of this Policy and/ or of any Endorsement there on of the amount of any indemnity shall apply to the aggregate amount of indemnity to all persons indemnified and such indemnity shall apply in priority to the Insured.

SECTION III – PERSONAL ACCIDENT COVER FOR OWNER-DRIVER

The Company undertakes to pay compensation as per the following scale for bodily injury/ death sustained by the owner-driver of the vehicle in direct connection with the vehicle insured or whilst driving or whilst mounting into/dismounting from the insured vehicle or whilst traveling in it as a co-driver, caused by violent accidental external and visible means which independent of any other cause shall within six calendar months of such injury result in:

Nature of injury	Scale of compensation
(i) Death	100%
(ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye	100%
(iii) Loss of one limb or sight of one eye	100%
(iv) Permanent total disablement from injuries other than named above	100%

Provided Always that:

A) Compensation shall be payable under only one of the items (i) to (iv) above in respect of the owner-driver arising out of any one occurrence and the total liability of the Company shall not in the aggregate exceed the sum of Rs. 2 lakhs during any one period of insurance.

B) No compensation shall be payable in respect of death or bodily injury directly or indirectly wholly or in part arising or resulting from or traceable to (1) intentional self injury suicide or attempted suicide physical defect or infirmity or (2) an accident happening whilst such person is under the influence of intoxicating liquor or drugs.

C) Such compensation shall be payable directly to the insured or to his/her legal representatives whose receipt shall be the full discharge in respect of the injury to the Insured.

This cover is subject to

(a) the owner-driver is the registered owner of the vehicle insured herein;

(b) the owner-driver is the Insured named in this Policy.

(c) the owner-driver holds an effective driving license, in accordance with the provisions of Rule 3 of the Central Motor Vehicles Rules, 1989, at the time of the accident.

GENERAL EXCEPTIONS (Applicable to all Sections of the Policy)

The Company shall not be liable under this Policy in respect of

1) any accidental loss or damage and/or liability caused sustained or incurred outside the geographical area;

2) any claim arising out of any contractual liability;

3) any accidental loss damage and/or liability caused sustained or incurred whilst the vehicle insured herein is being used otherwise than in accordance with the 'Limitations as to Use' or being driven by or is for the purpose of being driven by him/her in the charge of any person other than a Driver as stated in the Driver's Clause.

4) (a) any accidental loss or damage to any property whatsoever or any loss or expense whatsoever resulting or arising there from or any consequential loss
b) any liability of whatsoever nature directly or indirectly caused by or contributed to by or arising from ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. For the purpose of this exception combustion shall include any self-sustaining process of nuclear fission.

5) Any accidental loss or damage or liability directly or indirectly caused by or contributed to by or arising from nuclear weapons material.

6) Any accidental loss damage and/or liability directly or indirectly or proximately or remotely occasioned by contributed to by or traceable to or arising out of or in connection with war, invasion, the act of foreign enemies, hostilities or warlike operations (whether before or after declaration of war) civil war, mutiny rebellion, military or usurped power or by any direct or indirect consequence of any of the said occurrences and in the event of any claim hereunder the Insured shall prove that the accidental loss damage and/or liability arose independently of and was in no way connected with or occasioned by or contributed to by or traceable to any of the said occurrences or any consequences thereof and in default of such proof, the Company shall not be liable to make any payment in respect of such a claim.

DEDUCTIBLE

The Company shall not be liable for each and every claim under Section - I (loss of or damage to the vehicle insured) of this Policy in respect of the deductible stated in the Schedule.

CONDITIONS

This Policy and the Schedule shall be read together and any word or expression to which a specific meaning has been attached in any part of this Policy or of the Schedule shall bear the same meaning wherever it may appear.

1) Notice shall be given in writing to the Company immediately upon the occurrence of any accidental loss or damage in the event of any claim and thereafter the insured shall give all such information and assistance as the Company shall require. Every letter claim writ summons and/or process or copy thereof shall be forwarded to the Company immediately on receipt by the Insured. Notice shall also be given in writing to the Company immediately the Insured shall have knowledge of any impending prosecution, inquest or fatal inquiry in respect of any occurrence which may give rise to a claim under this Policy. In case of theft or criminal act which may be the subject of a claim under this Policy the Insured shall give immediate notice to the police and cooperate with the Company in securing the conviction of the offender.

2) No admission offer promise payment or indemnity shall be made or given by or on behalf of the Insured without the written consent of the Company which shall be entitled if it so desires to take over and conduct in the name of the Insured the defence or settlement of any claim or to prosecute in the name of the insured for its own benefit any claim for indemnity or otherwise and shall have full discretion in the conduct of any proceedings or in the settlement of any claim and the insured shall give all such information and assistance as the Company may require.

3) The Company may at its own option repair reinstate or replace the vehicle or part thereof and/or its accessories or may pay in cash the amount of the loss or damage and the liability of the Company shall not exceed:

(a) For total loss/constructive total loss of the vehicle-the Insured's Declared Value (IDV) of the vehicle (including accessories thereon) as specified in the Schedule less the value of the wreck.

(b) For partial losses, i.e. losses other than Total Loss/Constructive Total Loss of the vehicle - actual and reasonable costs of repair and/or replacement of parts lost/damaged subject to depreciation as per limits specified.

4) The Insured shall take all reasonable steps to safeguard the vehicle from loss or damage and to maintain it in efficient condition and the Company shall have at all times free and full access to examine the vehicle or any part thereof or any driver or employee of the insured. In the event of any accident or breakdown, the vehicle shall not be left unattended without proper precautions being taken to prevent further damage or loss and if the vehicle be driven before the necessary repairs are effected any extension of the damage or any further damage to the vehicle shall be entirely at the Insured's own risk. The Company may cancel the Policy by sending seven days notice by recorded delivery to the Insured at Insured's last known address and in such event will return to the Insured the premium paid less the pro rata portion thereof for the period the Policy has been in force or the Policy may be cancelled at any time by the Insured on seven days' notice by recorded delivery and provided no claim has arisen during the currency of the Policy, the Insured shall be entitled to return of premiumless premium at the Company's Short Period rates for the period the Policy has been in force. Return of the premium by the Company will be subject to retention of the minimum premium of Rs.100/- (or Rs.25/- in respect of vehicles specifically designed/modified for use by blind/handicapped/mentally challenged persons). Where the ownership of the vehicle is transferred, the Policy cannot be cancelled unless evidence that the vehicle is insured elsewhere is produced.

5) If at the time of occurrence of an event that gives rise to any claim under this Policy there is in existence any other insurance covering the same liability, the Company shall not be liable to pay or contribute more than its ratable proportion of any compensation, cost or expense.

6) The due observance and fulfillment of the terms, conditions and endorsements of this Policy in so far as they relate to anything to be done or complied with by the Insured and the truth of the statements and answers in the said proposal shall be conditions precedent to any liability of the Company to make any payment under this Policy.

7) In the event of the death of the sole insured, this Policy will not immediately lapse but will remain valid for a period of three months from the date of the death of insured or until the expiry of this policy (whichever is earlier). During the said period, legal heir(s) of the Insured to whom the custody and use of the motor vehicle passes may apply to have this Policy transferred to the name(s) of the heir(s) or obtain a new insurance policy for the Motor Vehicle. Where such legal heir(s) desire(s) to apply for transfer of this Policy or obtain a new policy for the vehicle such heir(s) should make an application to the Company accordingly within the aforesaid period. All such applications should be accompanied by:

- a) Death Certificate in respect of the Insured
- b) Proof of title to the vehicle
- c) Original Policy.

CLAIM SETTLEMENT

The Company will settle the claim under this Policy within 30 days from the date of receipt of necessary documents required for assessing the claim. In the event that the Company decides to reject a claim made under this Policy, the Company shall do so within a period of thirty days of the Survey Report or the additional Survey Report, as the case may be, in accordance with the provisions of Protection of Policyholders' Interest Regulations 2002.

GRIEVANCE REDRESSAL PROCEDURE

Dear Customer

We value your relationship and are committed to offer you best in class customer service.

However if you are dissatisfied with the services rendered by us during any of your interactions with us or on resolution provided by us on your service request or complaint, we request you to register your concern with our Customer Care Team by following the steps mentioned below.

We will acknowledge receipt of your concerns within next 72 working hours & will respond to you as soon as possible upon completion of the investigation.

Step 1:

Call us at Toll free nos: 1800 - 102- 1111 & 1800-22-1111 from Monday to Saturday (08.00 am - 8.00 pm) or write to us at customer.care@sbigeneral.in. If you don't hear from us within 48 hrs please follow step 2

Step 2:

If you are dissatisfied with the resolution provided, please Email to

Head-customer care at head.customer.care@sbigeneral.in If after having followed Steps 1 & Step 2

your issue remains unresolved for more than 30 days from the date of filing your first complaint, you

may approach the Insurance Ombudsman for Redressal of your Grievance. The list of Insurance

Ombudsman offices along with their area of jurisdiction is attached here with.

Ombudsman Offices	
Areas of Jurisdiction	Addresses of the Ombudsman Offices
State of Gujarat and Union Territories of Dadra & Nagar Haveli and Daman and Diu.	AHMEDABAD 2nd Floor, Shree Jayshree Ambica Chambers, Nr. C U Shah College, 5, Navyug Colony, Ashram Road, AHMEDABAD-380014 Tel: 27546150, Fax: 079-27546142 Email: insombalhd@rediffmail.com
States of Madhya Pradesh and Chhattisgarh.	BHOPAL JanakVihar Complex, 2nd Floor, 6, Malviya Nagar, Opp. Airtel, Bhopal – 462 011. Tel.:- 0755-2769200/201/202 Fax:- 0755-2769203 Email:- bimalokpalbhopal@airtelmail.in
State of Orissa.	BHUBANESWAR 62, Forest Park, BHUBANESWAR-751 009. Tel: 2535220, Fax: 0674-2531607 Email: susantamishra@yahoo.com , ioobbsr@vsnl.net
States of Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir and Union territory of Chandigarh.	CHANDIGARH S.C.O No.101,102 & 103, 2nd Floor, Batra Building, Sector 17 D, CHANDIGARH-160 017 Tel: 2706196 EPBX:0172-2706468 Fax: 0172-2708274 Email: ombchd@yahoo.co.in
State of Tamil Nadu and Union Territories - Pondicherry Town and Karaikal (which are part of Union Territory of Pondicherry).	CHENNAI Fatima Akhtar Court , 4th Floor, 453 (Old 312) Anna Salai, Teynampet, CHENNAI-600 018 Tel: 24333678, 24333668, 24335284 Fax: 044-24333664 Email: insombud@md4.vsnl.net.in
States of Delhi and Rajasthan.	DELHI 2/2 A, Universal Insurance Bldg, Asaf Ali Road, NEW DELHI-110 002 Tel: 23239611, Fax: 011-23230858 Email: nsombudsmandel@netcracker.com
States of Andhra Pradesh, Karnataka and Union Territory of Yanam - a part of the Union Territory of Pondicherry.	HYDERABAD 6-2-46, Yeturu Towers Lane Opp. Saleem Function Palace, A C Guards, Lakdi-Ka-Pool, HYDERABAD-500 004 Tel: 55574325, Fax: 040-23376599 Email: insombud@hd2.vsnl.net.in

State of Kerela and Union Territory of (a) Lakshadweep (b) Mahe-a part of Union Territory of Pondicherry.	KOCHI 2nd Floor, CC 27/2603 PulinatBldg, Opp. Cochin Shipyard, M G Road, ERNAKULAM-682 015 Tel: 2373334, 2350959, Fax:0484-2373336 Email:insuranceombudsmankochi@hclinfinet.com
States of West Bengal, Bihar, Sikkim, Jharkhand and Union Territories of Andaman and Nicobar Islands.	KOLKATA Hindustan Bldg. Annexe, 4, C.R. Avenue, 4th Floor, KOLKATA - 700 072. TEL : 033-22124346/22124339 Fax : 033-22124341 Email:- insombudsmankolkata@gmail.com
States of Uttar Pradesh and Uttaranchal.	LUCKNOW JeevanBhavan, Phase 2, 6th floor, Nawal Kishore Road, Hazaratganj, LUCKNOW-226001 Tel: 0522-2201188, 2231330, 2231331 Fax:0522-2231310 E-mail: ioblko@sancharnet.in
States of Maharashtra and Goa.	MUMBAI 3rd Floor, JeevanSevaAnnexe (above MTNL), S V Road, Santacruz (W),Mumbai-400 054 Tel: 26106889, EPBX:022-26106889 Fax:022-26106052, 26106980 Email:ombudsman.i@hclinfinet.com
States of Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.	GUWAHATI 'JeevanNivesh', 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati – 781001(ASSAM). Tel.:- 0361-2132204/2131307/2132205 Fax:- 0361-2732937 Email:- ombudsmanghy@rediffmail.com

Address and contact number of Governing Body of Insurance Council

Secretary General
Governing Body of Insurance Council
JeevanSevaAnnexe, 3rd Floor (Above MTNL)
S. V. Road, Santacruz (W),Mumbai – 400 054
Tel: 022-6106889
Fax: 022-6106980, 6106052
Email:inscoun@vsnl.net

Integrated Grievance Management System

IRDA has launched the Integrated Grievance Management System (IGMS). IGMS is a grievance redress monitoring tool for IRDA. Policyholders who have grievances should register their complaints with the Grievance Redress Channel of the Insurance Company first. If policyholders are not able to access the insurance company directly for any reason, IGMS provides a gateway to register complaints with insurance companies.

Complaints shall be registered with insurance companies first and only if need be, be escalated them to IRDA (Consumer Affairs Department).

Website:http://www.policyholder.gov.in/Integrated_Grievance_Management.aspx

Toll Free Number of IRDA Grievance Call Centre: 155255

Timings: 8 AM to 8 PM -- (Monday to Saturday)

