

**Warranty and Indemnity Insurance Policy
FIRST EXCESS TAX LIABILITY INSURANCE**

DECLARATIONS

- Item 1. **Named Insured:** [.]
 Item 2. **Insurer:** [●]
 Policy no. [●]
 Item 3. **Followed Policy:**

Insurer/Policy No.	Limit of Liability	Retention	Policy Term
Policy No: [●] Policy No: [●]	in the aggregate for the Policy Term.	in the aggregate for the Policy Term for Audit Expenses only.	From [□] (the Inception Date) to the date falling 7 years from [end of financial year in which completion occurs] (the Expiry Date), both days inclusive.

- Item 4. **Total Underlying Limit:** in the aggregate for the Policy Term.
 For the avoidance of doubt, the Total Underlying Limit is above the Retention (limited to Audit expenses only) as set out in the Followed Policy.
- Item 5. **Policy Term:** From [●] (the **Inception Date**) to the date falling _____ (the **Expiry Date**); and both days inclusive.
- Item 6. **Limit of Liability:** in the aggregate. The Limit of Liability under this Policy is part of and not in addition to the Limit of Liability under the Buyer Policy.
- Item 7. **Premium payable:**
IPT: Insurance premium taxes and other taxes to be borne by the Insured at the prevailing rates in the Insured's jurisdiction.
Total Premium payable: The Total Premium is inclusive of Broker Commission and any applicable IPT.
- Item 8. **Insurance Broker**
 Item 9. **Insurance Broker Commission:**
- Item 10. **Claim Filing/Notice Provisions:** With respect to any Claim Notice (and all information relating thereto) under this Policy, the relevant Insured shall deliver such notice to the Insurer at the following address:
 with copy to (which shall not constitute service):
 By post:
 Name: HDFC ERGO General Insurance Co. Ltd.
 Address: 6th Floor, Leela Business Park, Andheri-Kurla Road, Andheri (East), Mumbai – 400 059
 Attention: [●]
 Email: [●]
 All other notifications required under this policy shall be sent to: [●]
 And a copy, not constituting notice to the Insurance Broker at

Warranty and Indemnity Insurance Policy

FIRST EXCESS TAX LIABILITY INSURANCE

This First Excess Tax Liability Insurance Policy is issued by the Insurer to the Insured and represents the complete agreement between the Insurer and the Insured concerning the coverage provided hereunder.

WHEREAS, the Insured have purchased primary insurance coverage from the Primary Insurer pursuant to the Followed Policy.

WHEREAS, the Insured desires to purchase further excess insurance coverage to insure themselves against Loss in excess of the coverage provided by the Followed Policy and the Insurer desires to provide such excess insurance, subject to the terms and conditions of this Policy.

THEREFORE, in consideration of the payment of the Total Premium, the Insurer and the Insured agree as follows:

SECTION 1 DEFINITIONS

All capitalised terms which are not otherwise defined in this Policy shall have the respective meanings given to them in the Followed Policy at the Inception of this Policy.

The following capitalised terms shall have the meanings set out next to them below:

- (a) **“Seller”** means, a company incorporated under the laws of (registered number [●]) whose registered office
- (b) **“Seller First Excess Policy”** means the first excess tax liability insurance policy issued by HDFC ERGO GIC with policy number [●] to the Seller including any Declarations, exhibits, attachments or endorsement attached hereto.
- (c) **“Claim Notice”** has the meaning ascribed to this term in SECTION 6A of this Policy.
- (d) **“Declarations”** means the Declarations of this Policy.
- (e) **“Followed Policy”** means the primary tax liability insurance policy set forth in Item 3 of the Declarations.
- (f) **“Inception”** means the date set forth in Item 5 of the Declarations.
- (g) **“Insolvency”** means, in relation to any entity, that entity entering into receivership, administration, formal insolvency, liquidation, dissolution, rehabilitation or any similar proceeding, or such entity being taken over by any regulatory authority as a result of being unable to pay its debts.
- (h) **“Insolvent”** means being in a state of Insolvency.
- (i) **“Insurance Broker”** means the insurance broker as set forth in Item 8 of the Declarations.
- (j) **“Insurer”** means the insurers set forth in Item 2 of the Declarations.
- (k) **“IPT”** means Insurance Premium Tax
- (l) **“Limit of Liability”** means the amount set forth in Item 6 of the Declarations.
- (m) **“Policy”** means this first excess tax liability insurance policy including any Declarations, exhibits, attachments or endorsement attached hereto.
- (n) **“Policy Term”** means the period of time as set forth in Item 5 of the Declarations.
- (o) **“Premium”** means the amount set forth in Item 7 of the Declarations.
- (p) **“Primary Insurer”** means the insurer under the Followed Policy, as set forth in Item 3 of the Declarations of this Policy.
- (q) **“Programme of Insurance”** means the programme of insurance policies put in place for the Insured, including the Followed Policy and this Policy.
- (r) **“Total Premium”** means the amount set forth in Item 7 of the Declarations.

¹ Relevant details to be filled as per proposal.

- (s) **"Total Underlying Limit"** means the amount set forth in Item 4 of the Declarations, which is the total limit of liability of the Followed Policy.
- (t) **"Underlying Insurers"** means the Primary Insurers.
- (u) **"Underlying Policies"** means the Followed Policies.

SECTION 2 INSURING AGREEMENT

- A. Subject to the terms and conditions of this Policy, the Insurer shall, in excess of the Total Underlying Limit, provide the Insured with coverage for Loss, in accordance with the same terms, conditions, exclusions and limitations of the Followed Policy as were in existence at the date of Inception of this Policy, except as regards the Premium, the Limit of Liability, the Total Underlying Limit (subject to the provisions of SECTION 4 below) and any other provisions expressly stated in this Policy (noting that for the avoidance of doubt, no retention shall apply to this Policy).
- B. Notwithstanding anything herein to the contrary, in no event shall this Policy provide coverage broader than that provided by the Followed Policy, except with respect to the Limit of Liability.

SECTION 3 LIMIT OF LIABILITY

- A. The Limit of Liability is the limit of the Insurers' aggregate liability for all payments made by the Insurer in connection with this Policy. It is expressly agreed that liability for any Loss shall attach to and be payable by the Insurer only after:
 - (i) the Underlying Insurers have either: (a) paid; (b) agreed in writing to pay; or (c) been found liable to pay (pursuant to a final determination in accordance with the respective dispute resolution provisions governing the Followed Policies) the full amount of the Total Underlying Limit, in accordance with the terms of the Underlying Policies; or
 - (ii) if a payment in respect of any Loss is made by the Underlying Insurers of an aggregate amount which is less than the Total Underlying Limit (including due to uncollectability), but the relevant Loss exceeds the Total Underlying Limit, then such payment will, for the purposes of determining the application of this Policy to such Loss, be deemed to exhaust the Total Underlying Limit (provided that: (a) to the extent permissible under applicable law, details of such payment and its terms, including (without limitation) its quantum and the basis for non-payment of the Total Underlying Limit, have been provided to the Insurer (so as to allow it a reasonable period of time to consider the same) in advance whether or not such payment is made pursuant to a settlement agreement or otherwise and the Underlying Insurers acting reasonably, have consented in writing to such payment being made for the purposes of this Section 3(A)(ii); and (b) the Insurer will be liable to pay only that part of Loss which exceeds the Total Underlying Limit); or
 - (iii) any or all of the Underlying Insurers have become Insolvent and is/are unable to pay amounts in respect of the Total Underlying Limit and the Insureds have suffered Loss up to the full amount of the Total Underlying Limit, that such Underlying Insurers would have been liable for, but for such Insolvency and inability to pay (provided that the Insurer will be liable to pay only that part of Loss which exceeds the Total Underlying Limit).
- B. In the event of cancellation of any Underlying Policy or any Underlying Policy otherwise ceasing to be in effect, this Policy will continue in effect (subject to and in accordance with its terms) provided that the Insurer shall only be liable for Loss to the extent that it would have been liable had such Underlying Policy not been cancelled or otherwise ceasing to be in effect and for the purposes of this Policy, the Underlying Insurer shall be deemed to have paid in full the amount of any loss that it would have paid under such Underlying Policy had it not been cancelled.
- C. After the Total Underlying Limit has been exhausted or deemed to be exhausted by the reasons set out in SECTION 3A or SECTION 3B above:
 - (i) the Insurer shall pay the Loss in excess of the Total Underlying Limit; and
 - (ii) this Policy shall "drop down" and continue in force as the primary insurance.

This Policy shall not drop down for any other reason, including (without limitation) any inability or refusal of the Underlying Insurers to pay any Loss or the uncollectability (in whole or in part) of any amounts under the Underlying Policies.

- D. Audit expenses are not payable by the Insurer over and above the Limit of Liability. Such Audit expenses are part of Loss and are subject to the Limit of Liability, which will be reduced by any such Audit expenses the Insurer pays.

SECTION 4 EROSION OF THE TOTAL UNDERLYING LIMIT

Subject to SECTION 3A(ii) and SECTION 3A(iii), the Total Underlying Limit shall be eroded by all Loss that the Underlying Insurers have either: (a) paid; (b) agreed in writing to pay; or (c) been found liable to pay (pursuant to a final determination in accordance with the respective dispute resolution provisions governing the Followed Policies).

SECTION 5 TOTAL UNDERLYING LIMIT

- A. If a notification is made under SECTION 6B of this Policy, then this Policy shall continue in effect, but:
- (i) the Insured, or an insurer or insurers providing replacement coverage for the Primary Insurer (if such replacement coverage is obtained), shall be liable for the amount of the Total Underlying Limit; and
 - (ii) the Insurer shall be liable only to the extent that it would have been liable had the relevant circumstance leading to such notification not arisen.
- B. The risk of uncollectability (in whole or in part) of any part of the Total Underlying Limit, whether because of financial impairment or Insolvency of the Primary Insurer or for any other reason whatsoever, is expressly retained by the Insured and is not in any way or under any circumstances insured or assumed by the Insurer.
- C. If the terms, conditions, exclusions and/or limitations of the Followed Policy are changed in any manner, as soon as reasonably practicable, the Insured shall give to the Insurer written notice of the full particulars of such change. This Policy shall become subject to any such change only if the Insurer, in its sole and absolute discretion, and the Insured agree to follow such changes by way of a written endorsement signed by, or email confirmation sent by, an authorised representative of the Insurer and the Insured. Unless and until the Insurer gives such written endorsement or sends such email confirmation, the Insurer's obligations and liability under this Policy shall not be increased, expanded or otherwise changed due to any changes made to the Followed Policy and the Total Underlying Limit shall not be treated as exhausted to the extent that the Primary Insurer would not have been liable to pay any Loss (or part of it) if such changes had not been made.

SECTION 6 CLAIM FILING, NOTICE PROVISIONS AND AUTHORISATION

- A. With respect to any breach, circumstance or event which is a claim, the Insured shall deliver a notice of such claim (a "**Claim Notice**") to the Insurer at the address set out in Item 10 of the Declarations. Such Claim Notice shall be provided in the same manner, on the same basis and containing the same information as required by the Followed Policy.
- B. As soon as reasonably practicable after a director or other executive officer of any Insured becomes aware of any of the following events, such Insured shall give written notice thereof to the Insurer:
- (i) the cancellation of any Followed Policy, any Followed Policy otherwise ceasing to be in effect, or the Total Underlying Limit (or any portion of it) being uncollectable under the Followed Policy (in whole or in part); provided, however, that failure for whatever reason to give notice shall not prejudice any Insured's ability to bring a claim or deliver a Claim Notice under this Policy; or
 - (ii) any Insolvency of any of the Primary Insurer.
- C. A copy of each notice sent by the relevant Insured to the Primary Insurer shall be provided to the Insurer as far as is reasonably practicable at the same time as it is sent to the Primary Insurer (save for those notices which Sections 6(A) and 6(B) above apply to and govern).

- D. Any notice or communication:
- (i) to the Insured shall be delivered in the manner set out in the Followed Policy; and
 - (ii) to the Insurer shall be delivered at its address or email address as set out in Item 10 of the Declarations.

SECTION 7 CLAIM PARTICIPATION

- A. The Insurer does not assume any duty to defend the Insured.
- B. The Insurer shall, at its own expense, be entitled to participate in the defence, negotiation and settlement of any matter that is reasonably likely to involve the Insurer and this Policy, to the extent and in the manner contemplated under the Followed Policy. With respect to any such matter, the relevant Insured shall give the Insurer co-operation and such information as the Insurer may reasonably request, in accordance with and solely to the extent and in the manner contemplated under the Followed Policy.
- C. If any disagreement and/or dispute arises between the Insurer and: (a) any Insured; or (b) any other insurer participating in the Programme of Insurance, in relation to any matter in connection with this Programme of Insurance, including but not limited to, conduct of a claim, settlement, coverage or quantum of payment to be made, the Insurer shall make reasonable endeavours to settle such disagreement and/or dispute, with the intended outcome that all insurers participating on the Programme of Insurance take a consistent approach to responding to a Claim. The Insurer agrees to act reasonably and in good faith in respect of the conduct and settlement of the disagreement and/or dispute.
- D. The Insurer shall bear its own legal and other costs and expenses of preparing for and attending any such dispute resolution process.

SECTION 8 FOLLOWED POLICY

Except as otherwise provided in this Policy, the Insurer shall be entitled to all of the rights, privileges and protections which the Followed Policy affords to the Primary Insurer. Except as otherwise provided in this Policy, the Insured shall be entitled to all of the rights, privileges and protections which the Followed Policy affords to the Insured.

SECTION 9 RELIANCE

In entering into this Policy, the Insurer is relying upon the Representations Letter provided by the Insured to the Primary Insurer pursuant to the Followed Policy. For the avoidance of doubt, this Policy is subject to the same exclusions as listed under Section 6 of the Followed Policy.

SECTION 10 PREMIUM PAYMENT

The Insurers' obligations under this Policy shall be conditional upon payment of the Total Premium to the Insurer (or the Insurance Broker at the direction of the Insurer) in accordance with the terms of the Followed Policy. The Premium shall be fully earned at Inception.

SECTION 11 CONDITIONS OF COVER

- A. The Insurer's obligations under this Policy shall be conditional upon:
 - (i) the inception of the Followed Policy (an electronic copy of each of the executed Followed Policy and executed Representations Letter (as set out under Exhibit A of the Followed Policy) will be provided to the Insurer); and
 - (ii) payment of the Total Premium to the Insurer in cleared funds before the Inception Date (unless an extension is consented to by the Insurer in writing).

B. Failure to meet Conditions

This Policy is non-cancellable and non-renewable, and the Premium hereunder is earned fully on Inception and is non-refundable; provided, however, that this Policy shall be deemed cancelled and void ab initio, and the Insurer shall have no liability in respect of any Loss under this Policy if the conditions contained in Section 11A above have not been satisfied in which case:

- (i) if the condition in SECTION 11A(ii) of this Policy has been satisfied, the Insurer shall refund the Premium to the Insured; or
- (ii) if the condition in SECTION 11A(ii) of this Policy has not been satisfied, the Insured shall not be liable for the Premium.

If the conditions under this SECTION 11 are not satisfied or waived, the Insurer will give the relevant Insured the opportunity to cure the failure to meet these conditions within 15 Business Days of the Insurer's written notice.

SECTION 12 OTHER MATTERS

- A. The descriptions in the headings of this Policy are solely for convenience, and form no part of the interpretation or the terms and conditions of coverage.
- B. This Policy constitutes the entire agreement and understanding concerning the subject matter of this Policy and supersedes the terms and conditions of any prior oral or written agreements, discussions or other communications entered into between the Insurer and/or its Affiliates (including their respective representatives), on the one hand, and each Insured and/or their respective Affiliates (including their respective representatives), on the other hand, concerning the subject matter of this Policy.
- C. The Insurer shall act on its own behalf with respect to all matters concerning this Policy, and neither the Primary Insurer nor any other insurer in the Programme of Insurance nor any other person whatsoever may act on behalf of or bind the Insurer with respect to the Policy terms or any matter concerning the Policy.
- D. The Insurer shall not be responsible for any liability or obligation of the Primary Insurer.
- E. For the avoidance of doubt, no Insurers' obligations under this Policy shall be increased, expanded or otherwise changed due to the insolvency, inability, refusal or failure for any other reason of any other insurer to pay any Loss.

SECTION 13 CHOICE OF LAW AND DISPUTE RESOLUTION

This Policy shall be governed by and construed in accordance with the governing law stated in Section 13 of the Followed Policy and any dispute arising out of or in connection with this Policy which cannot be otherwise resolved by the Insurer and each Insured shall be dealt with in accordance with Section 11 of the Followed Policy.

SECTION 14 SANCTIONS SUSPENSION

It is a condition under this Policy that the provision of cover, the payment of any claim and the provision of any benefit will be suspended, to the extent that the provision of the cover, payment of the claim or provision of the benefit would exposes the Insurers to any sanction, prohibition or restriction under the United Nations resolutions or the trade or economic sanctions, laws or regulations of Australia, Canada, the European Union, United Kingdom or United States of America. The suspension will continue until such time the Insurers would no longer be exposed to the sanction, prohibition or restriction.

SIGNATURE PAGE

Date: [] 2025

For and on behalf of HDFC ERGO General Insurance of Co. Ltd

Name:

Title:

GREIVANCE REDRESSAL PROCEDURE

If you have a grievance that you wish us to redress, you may contact us with the details of your grievance through:

Our Grievance Redressal Officer

- Call Centre – 022 6158 2020 / 022-6234 6234
- Emails – grievance@hdfcergo.com
- Contact Details for Senior Citizens: 022 6242 6226 | Email ID: seniorcitizen@hdfcergo.com
- Designated Grievance Officer in each branch.
- Company Website – www.hdfcergo.com
- Courier - Any of our Branch office or corporate office

You may also approach the Complaint & Grievance (C&G) Redressal Cell at any of our branches with the details of your grievance during our working hours from Monday to Friday.

If you are not satisfied with our redressal of your grievance through one of the above methods, you may contact our Head of Customer Service at

The Complaint & Grievance Redressal Cell

HDFC ERGO General Insurance Company Ltd.

D-301, 3rd Floor, Eastern Business District (Magnet Mall),

LBS Marg, Bhandup (West),

Mumbai – 400078, Maharashtra

In case you are not satisfied with the response / resolution given / offered by the C&G cell, then you can write to the Chief Grievance Officer of the Company at the following address

To the Chief Grievance Officer

HDFC ERGO General Insurance Company Limited

D-301, 3rd Floor, Eastern Business District (Magnet Mall),

LBS Marg, Bhandup (West),

Mumbai - 400078, Maharashtra

e-mail: cgo@hdfcergo.com

Grievance may also be lodged at IRDAI Integrated Grievance Management system- <https://bimabharosa.irdai.gov.in>

You may also approach the nearest Insurance Ombudsman for resolution, if your grievance is not redressed by the Company. The contact details of Ombudsman offices are below if your grievance pertains to:

- Insurance claim that has been rejected or dispute of a claim on legal construction of the policy
- Delay in settlement of claim
- Dispute with regard to premium
- Non-receipt of your insurance document

You may also refer Our website www.hdfcergo.com <https://www.hdfcergo.com/customer-voice/grievances> for detailed grievance redressal procedure.

Names of Ombudsman and Addresses of Ombudsmen Centers

Office Details	Jurisdiction of Office Union Territory, District
AHMEDABAD Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor, Tilak Marg, Relief Road, Ahmedabad – 380 001. Tel.: 079 - 25501201/02 Email: oio.ahmedabad@cioins.co.in	Gujarat, Dadra & Nagar Haveli, Daman and Diu
BENGALURU Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No. 57-27-N-19 Ground Floor, 19/19, 24th Main Road, JP Nagar, 1st Phase, Bengaluru – 560 078. Tel.: 080 - 26652048 / 26652049 Email: oio.bengaluru@cioins.co.in	Karnataka
BHOPAL Office of the Insurance Ombudsman, LIC of India, Zonal Office Bldg. 1st Floor, “Jeevan Shikha”, 60-B, Hoshangabad Road, Opp. Gayatri Mandir, Bhopal – 462 011. Tel.: 0755 - 2769201 / 2769202/ 2769203 / 2769200 Email: oio.bhopal@cioins.co.in	Madhya Pradesh, Chattisgarh
BHUBANESHWAR Office of the Insurance Ombudsman, 62, Forest Park, Bhubneshwar – 751 009. Tel.: 0674 - 2596461/2596455/ 2596003/ 2596429 Fax: 0674 - 2596429 Email: oio.bhubaneswar@cioins.co.in	Orissa
CHANDIGARH Office of the Insurance Ombudsman, Jeevan Deep Building SCO 20-27, Ground Floor Sector - 17 A, Chandigarh – 160 017. Tel.: 0172-2706468/ 2773101 Email: oio.chandigarh@cioins.co.in	State of Punjab, Haryana (excluding 4 districts viz Gurugram, Faridabad, Sonepat and Bahadurgarh), Himachal Pradesh, Union Territories of Jammu & Kashmir, Ladakh and Chandigarh.
CHENNAI Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018. Tel.: 044 - 24333668 / 24333678 Fax: 044 - 24333664 Email: oio.chennai@cioins.co.in	Tamil Nadu Puducherry Town and Karaikal (which are part of Puducherry).
DELHI Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel.: 011-46013992 Email: oio.delhi@cioins.co.in	Delhi, 4 districts of Haryana viz Gurugram, Faridabad, Sonepat and Bahadurgarh)

Office Details	Jurisdiction of Office Union Territory, District
GUWAHATI Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati – 781 001 (ASSAM). Tel.: 0361 - 2632204 / 2632205 Email: oio.guwahati@cioins.co.in	Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura
HYDERABAD Office of the Insurance Ombudsman, 6-2-46, 1st floor, "Moin Court", Lane Opp. Saleem Function Palace, A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004. Tel.: 040 – 23376991/ 23376599 Email: oio.hyderabad@cioins.co.in	State of Andhra Pradesh, Telangana and Yanam – a part of Union Territory of Puducherry
JAIPUR Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141 – 2740363/2740798 Email: oio.jaipur@cioins.co.in	Rajasthan
KOCHI Office of the Insurance Ombudsman, 10th Floor, Jeevan Prakash, LIC Building, Opp to Maharaja's College Ground, M. G. Road, Kochi - 682 011. Tel.: 0484 – 2358759/ 2358734 Email: oio.ernakulam@cioins.co.in	Kerala Lakshadweep, Mahe - a part of Union territory of Puducherry
KOLKATA Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 Fax : 033 - 22124341 Email: oio.kolkata@cioins.co.in	States of West Bengal, Sikkim and Union Territories of Andaman & Nicobar Islands
LUCKNOW Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, Lucknow - 226 001. Tel.: 4002082 / 3500613 Email: oio.lucknow@cioins.co.in	Districts of Uttar Pradesh :Laitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur,Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar
MUMBAI Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 022 - 69038800/27/29/31/32/33 Email: oio.mumbai@cioins.co.in	List of wards under Mumbai Metropolitan Region excluding wards in Mumbai – i.e M/E, M/W, N, S and T covered under Office of Insurance Ombudsman Thane and areas of Navi Mumbai.

Office Details	Jurisdiction of Office Union Territory, District
NOIDA Office of the Insurance Ombudsman, Bhagwan Sahai Palace, 4th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddh Nagar, U.P. - 201 301. Tel.: 0120 - 2514252 / 2514253 Email: oio.noida@cioins.co.in	State of Uttarakhand and the Dis-tricts of Uttar Pradesh: Agra, Ali-garh, Bagpat, Bareilly, Bijnor, Bu-daun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Mora-dabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farukkabad, Fi-rozbad, Gautambodhanagar, Gha-ziabad, Hardoi, Shahjahanpur, Ha-pur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kan-shiramnagar, Saharanpur.
PATNA Office of the Insurance Ombudsman, 2nd Floor, Lalit Bhawan, Bailey Road, Patna - 800 001. Tel.: 0612-2547068 Email: oio.patna@cioins.co.in	Bihar, Jharkhand
PUNE Office of the Insurance Ombudsman, Jeevan Darshan LIC Bldg., 3rd Floor, C.T.S. Nos. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune – 411 030. Tel.: 020- 24471175 Email: oio.pune@cioins.co.in	State of Goa and State of Maha-rashtra excluding areas of Navi Mumbai, Thane district, Palghar District, Raigad district & Mumbai Metropolitan Region
THANE Office of the Insurance Ombudsman, 2nd Floor, Jeevan Chintamani Building, Vasantrao Naik Mahamarg, Thane (West), Thane – 400604 Tel.: 022-20812868/69 Email: oio.thane@cioins.co.in	Area of Navi Mumbai, Thane Dis-trict, Raigad District, Palghar Dis-trict and wards of Mumbai, M/East, M/West, N, S and T.