

Royal Sundaram General Insurance Co. Limited

Vishranthi Melaram Towers, No. 2/319, Rajiv Gandhi Salai (OMR)
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Regd. Office: 21, Patullos Road, Chennai - 600002.
IRDAI Registration No. 102 | CIN:U67200TN2000PLC045611

OPTIONAL TRAVEL INSURANCE COVER FOR E-TICKET PASSENGERS OF IRCTC Certificate of Insurance

Certificate Number 8921120741-2505-01

Name and Address of the Group Organizer/Group Policy holder **Indian Railway Catering and Tourism Corporation**

11th floor, B-148 IRCTC Corporate Office Statesman House,

Barakhamba Road, New Delhi

Pin 110001

Name of the Insured

HARI V NAIR

Trip: From 11/05/2025 06:30:00

To 11/05/2025 13:05:00

Originating Station: KARMALI Destination Station: MANGALURU JN

INSURED DETAILS								
PNR No. 8921120741								
Name	Age		Gender					
Hari V Nair	25		М					
PREMIUM								
Premium	Rs.	0.3814						
SGST		0.0343						
CGST		0.0343	_					
Total		0.45						

Trip means the actual departure of train from the originating station to actual arrival of train at the destination station as mentioned in booked ticket through which insurance cover has been opted and premium paid, including 'process of entraining' and 'process of detraining' the train

	9	SUM INSURED DETAILS				
Death	Permanent total disability	Permanent partial disability	Hospitalisation expenses for Injury	Transportation of mortal remains		
Rs.10,00,000/-	Rs.10,00,000/-	Rs.7,50,000/-	Rs.2,00,000/-	Rs.10,000/-		
Table of Benefits						

As per Optional Travel Insurance Cover for E-ticket Passengers of IRCTC Policy Terms and Conditions attached to the Policy No. IRCTC02324

The premium for this Policy is received from the Group Policy Holder - Indian Railway Catering and Tourism Corporation

Encl : Annexure 1 - Claims procedure & documentation and Important Exclusions under the Policy Please quote the Certificate Number in all your correspondence.

IN WITNESS WHEREOF, this Certificate of Insurance has been signed on 10/05/2025 09:54:33

Service Tax No. AABCR7106GST001 PAN Number : AABCR 7106G

For Royal Sundaram General Insurance Co. Limited

Duly Authorised Signatory

Annexure 1

Claims Procedure & Documentation

(i) The Insured or his nominee or legal heir shall deliver to the nearest office of the Company, not later than 4 months from the date of occurrence of the Insured Event, a detailed statement in writing as per the claim form and any other material particular, relevant to the making of such claim. The Insured or his nominee or legal heir shall tender to the Company all reasonable information, assistance and proofs in connection with any claim hereunder.

(ii)Proof as required in the Policy shall be furnished in connection with all matters upon which a claim is based.

(iii)If the Company requests that bills/ vouchers / Reports in a language, other than English /Hindi be accompanied by an appropriate translation then the costs of such translation must be borne by the Insured.

Claim Documentation

Death Claim:

Submit the duly filled in claim form signed by nominee/legal heir alongwith the NEFT mandate details and cancelled cheque with the following documents:

- · Report of the Railway Authority confirming the Accident of the train or Untoward incident
- · Report of the Railway Authority carrying the details of the passengers declared dead
- · Photo identity proof of nominee
- Claim will be settled only to the nominee declared at the time of buying this insurance through IRCTC portal
- Succession Order/legal heir certificate/legal documents to establish identification of legal heir in the absence of nomination under the policy

Disablement Claim:

- Submit the duly filled in Claim form signed by Insured/nominee with NEFT details and cancelled cheque of the beneficiary with the following documents
- Report of the Railway Authority confirming the Accident of the train or Untoward incident
- Report of the attending doctor confirming the extent of disability
- Attested copy of FIR
- Medical bills corresponding to doctor's prescription

Attested copy of disability certificate from Civil Surgeon of that Hospital in which the treatment has undergone stating percentage of disability

All X-Ray / Investigation reports and films supporting disablement

· Photograph before and after disability

Hospitalisation Expenses for Injury:

- 1. Report of the Railway Authority confirming the Accident of the train or Untoward incident
- 2. Discharge summary
- 3. Original Hospital Bills and medical bills corresponding to doctor's prescription
- 4. Advance and final receipts (All receipts to be numbered, signed and stamped)
- 5. Prescriptions for medicines
- 6. Diagnostic Test Reports, X-Ray, Scan, ECG, and others (including doctor's advice demanding such tests)
- 7. Cash memos/bills for medicines purchased from outside

The claim documents should be sent to the Claims department of the nearest Office of the Company through which this insurance is effected. List of addresses of offices to be obtained from the website of the Company.

Important Exclusions under the Policy:

The Company shall not be liable under this Policy for

- (1) Payment of Benefit in respect of accident, death, injury or disablement of the Insured
 - (a) from intentional self-injury, suicide or attempted suicide
 - (b) whilst under the influence of intoxicating liquor or drugs
 - (c) arising or resulting from the Insured committing any breach of law with criminal intent
 - (d) while crossing the railway tracks
 - (e) due to mental disorders or disturbance of conscious, strokes, fits or convulsions which affect the entire body and pathological disturbances caused by the mental reaction to the same and damage of health caused by curative measures, radiations, infection, poisoning except where arising from accident
 - (f) Whilst engaging in any sort or form of adventurous sport
 - (g) Directly or indirectly caused or contributed by congenital anomaly, venereal disease, sexually transmitted disease, AIDS or insanity
- (2) Any payment in respect of death or disablement resulting directly or indirectly from, caused by, contributed to or aggravated or prolonged by child birth or pregnancy or in consequence thereof.
- (3) Any natural cause or disease or medical or surgical treatment unless such treatment becomes necessary due to injury caused by the said Untoward incident.
- (4) Persons whilst engaged in Hazardous sports or Hazardous Activities.
- (5) Claim on account of injury due to Accident or Untoward incident prior to the date and time of journey and post the date and time of journey would be excluded from the scope of the policy, however any delay in the time of departure and arrival of the respective train would be taken into consideration
- (6) Claim in instances wherein ticket was booked by the Insured; however the train was not boarded. This is irrespective of whether the train ticket was cancelled or not.
- (7) Claim in instances wherein ticket was booked by the Insured; however the ticket was not confirmed but still the passenger boarded the train.
- (8) The treatment of any illness even if caused by the Accident or Untoward incident suffered by the Insured except any caused by Accident or Untoward incident and requiring immediate medical treatment in order to maintain life or relieve immediate pain or distress.
- (9) Any medical treatment which was not medically necessary.
- (10) Plastic or cosmetic surgery unless this is certified by the attending Medical Practitioner to be medically necessary for reconstruction following an Accident or Untoward incident.
- (11) Dental treatment or surgery of any kind, unless to sound natural teeth and necessitated by an Accident or Untoward incident.
- (12) Any health check-ups or examinations or measures primarily carried out for diagnostic or investigative reasons for any purpose other than treatment related to an Accident or Untoward incident.
- (13) Any costs relating to physiotherapy unless undertaken while the Insured is hospitalized.
- (14) Any costs or periods of residence incurred in connection with rest cures or recuperation at spas or health resorts, sanatorium, convalescence homes or any similar institution.
- (15) Any costs in any way related to psychiatric or mental disorders.
- (16) Any costs relating to the Insured's pregnancy, childbirth or the consequences of either.
- (17) Any congenital internal or external diseases, defects or anomalies.