



Policy Wordings
Smart Traveller Insurance Policy (Group)

1. Preamble:

The insurance cover provided under this Policy to the Insured / Insured Person up to the Sum Insured is and shall be subject to (a) the terms and conditions of this Policy and (b) the receipt of premium and (c) Disclosure to Information Norm and (d) Schedule of Benefits.

2. Definitions:

Any word or expression to which a specific meaning has been assigned in any part of this Policy or the Schedule shall bear the same meaning wherever it appears. For purposes of this Policy, the terms specified below shall have the meaning set forth:

- 1 **“Accident”** means a sudden, unforeseen and involuntary event caused by external violent and visible means.
- 2 **“Air Travel”** means travel by an airline/aircraft for the purpose of flying therein as a Fare paying passenger.
- 3 **“Alternative Treatments”** means forms of treatments other than treatment "Allopathy"
- 4 **“Appliances”** shall mean and include electrical, mechanical and electronic appliances such as refrigerator, television, DVD player, videocassette recorder/player, washing machine, microwave oven, music system, personal computer, laptops and air-conditioner or fixed in the Insured's home for domestic use.
- 5 **“Adventure Sports”** skydiving/parachuting, parasailing, hang gliding, paragliding, ballooning bungee jumping, scuba diving, mountaineering or rock climbing (where ropes or guides are customarily used), Speed contest or racing of any kind, caving or pot-holing, absoiling, hunting or equestrian activities, deep sea diving, skin diving or other underwater activity, polo, snow and ice sports, rafting or canoeing involving white water rapids, yachting or boating, , Base Jumping, Ski Jumping, Trekking, Adventure racing on land and water, Snorkeling, Kayaking, Surfing, any bodily contact sport or any other hazardous or potentially dangerous sport
- 6 **“Aggregate Limit”** - Our maximum liability under the section as specified in the Policy Schedule in respect of all claims by or on behalf of all Insured Persons , if at any time the total value of unpaid claims would, if paid, result in this aggregate limit being exceeded, the individual benefits attributable to those outstanding claims shall be reduced pro rata as necessary to ensure that this maximum aggregate limit is not exceeded.
- 7 **“Any one illness”** means continuous Period of illness and it includes relapse within 45 days from the date of last consultation with the Hospital/Nursing Home where treatment may have been taken.
- 8 **“Bodily Injury / Injury”** means any accidental physical bodily harm, solely and directly caused by external, violent and visible means but does not include any disease or sickness. The injury must be verified and certified by a Medical Practitioner
- 9 **“Burglary”** means theft involving entry into or exit from the Insured's home by forcible and violent means or following assault or violence or threat thereof, to the Insured or to any member of Insured's family or any person residing lawfully in the Insured's home, with intent to commit a felony therein and includes housebreaking

- 10 **"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 approved
- 11 **"Checked-in Baggage"** means baggage handed over by the Insured/Insured Person and accepted by a common carrier for transportation in the same carrier in which the Insured/Insured Person is or would be travelling and for which the common carrier has issued a baggage receipt to the Insured/ Insured Person.
- 12 **"Company / Insurer"** means Bharti AXA General Insurance Company Limited.
- 13 **"Common Carrier"** means any commercial airline or ship or vessel operating under a license from the relevant authority for the transportation of passengers and cargo for hire.
- 14 **"Condition Precedent"** means a policy term or condition upon which the Insurer's liability under the policy is conditional upon
- 15 **"Congenital Anomaly"** means a condition which is present since birth, and which is abnormal with reference to form, structure or position
 - a) "Internal Congenital Anomaly" refers to the Congenital anomaly which is not in the visible and accessible parts of the body
 - b) "External Congenital Anomaly" refers to the Congenital anomaly which is in the visible and accessible parts of the body
- 16 **"Contents"** mean and include appliances, furniture, fixture, fittings, linen, clothing, kitchen items, cutlery /crockery contained in the Insured Person's home belonging to the Insured Person or his/her family members permanently residing with the Insured Person including items for which the Insured Person is responsible, and used for domestic use. However, this does not include deeds, bonds, bills of exchange, promissory notes, cheques, traveller's cheques, securities for money, documents of any kind, cash, currency notes.
- 17 **"Contribution"** is essentially the right of an insurer to call upon other insurers liable to the same insured to share the cost of an indemnity claim on a ratable proportion of Sum Insured. This clause shall not apply to any Benefit offered on fixed benefit basis.
- 18 **"Corporate"** means any organization, firm, society or body corporate on whose name the policy is issued.
- 19 **"Cruise"** means a trip involving a sea voyage of at least 24 hours of total duration, where transportation and accommodation is primarily on an ocean going passenger vessel.
- 20 **"Day care centre"** means any institution established for day care treatment of illness and/ or injuries or a medical set up within a hospital and which has been registered with the local authorities, wherever applicable, and is under the supervision of a registered and qualified medical practitioner AND must comply with all minimum criterion as under:-
 - a. has qualified nursing staff under its employment;
 - b. has qualified medical practitioner/s in charge;
 - c. has fully equipped operation theatre of its own where surgical procedures are carried out;



- d. maintains daily records of patients and will make these accessible to the Insurance company's authorized personnel.
- 21 **"Day Care Treatment"** means medical treatment, and/or surgical procedure which is:
- a. undertaken under General or Local Anesthesia in a hospital/day care centre in less than 24 hrs because of technological advancement, and
 - b. which would have otherwise required a hospitalization of more than 24 hours.
- Treatment normally taken on an out-patient basis is not included in the scope of this definition.
- 22 **"Deductible"** means a cost-sharing requirement under this policy, that provides that the insurer will not be liable for a specified amount or percentage of claim amount and number of days or number of hours for Daily allowances, as specified in the policy schedule and which will apply before any benefits are payable by the insurer. A deductible does not reduce the sum insured and is applicable per event, upto the specified limits mentioned.
- 23 **"Dependent Child"** refers to a child (natural or legally adopted), below the age of 30 years, who is financially dependent on the primary insured or proposer and does not have his / her independent sources of income.
- 24 **"Disclosure to information norm"** means the Policy shall be void and all premium paid hereon shall be forfeited to the Company, in the event of misrepresentation, mis-description or non-disclosure of any material fact.
- 25 **"Disease"** means an alteration in the state of the body or of some of its organs interrupting or disrupting the performance of the functions, and causing or threatening pain and weakness or physical or mental disorder and certified by a Medical Practitioner.
- 26 **"Emergency Assistance Service Provider"** means or any organization or institution appointed by the Company for providing services to the Insured/Insured Person for an insurable event.
- 27 **"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.
- 28 **"Emergency Hospitalization"** means any medical event requiring immediate medical assistance to sustain life of the insured or to repair injury sustained by him in an accident as an inpatient in a hospital for more than 24 hours.
- 29 **"Family"** means the Insured Person, his/her lawful spouse and maximum of any two (2) dependent children upto the age of 23 years.
- 30 **"Felony Assault"** means an act of violence against the Insured Person or a travelling companion requiring medical treatment.
- 31 **"Financial Emergency"** means a situation wherein the Insured Person loses all or a substantial amount of his/her travel funds due to theft, robbery, mugging or dacoity, which has detrimental effects on his/her travel plans.
- 32 **"Foreign Enemy"** means any group of individuals, entity or country, who intends to cause injury, or commissions an act dangerous to human life or property in the location where the Insured/Insured Person is travelling to, by the use of hostile force or violence

- 33 **“Grace Period”** means the specified period of time immediately following the premium due date during which a payment can be made to renew or continue a policy in force without loss of continuity benefits such as waiting periods and coverage of pre existing diseases. Coverage is not available for the period for which no premium is received
- 34 **“Hijack”** means any unlawful seizure or exercise of control, by force or violence or threat of force or violence and with wrongful intent, of the common carrier in which the Insured Person is travelling.
- 35 **“Hospital”** means an institution established for the treatment of patients which is under constant medical management, has adequate diagnostic and therapeutic facilities, keeps constant medical records, is recognized as a hospital in the country in which it is situated, and which is appropriately licensed, wherever required to be so, to operate as a hospital in that country.
- 36 **“Hospitalisation”** means admission in a Hospital for a minimum period of 24 In-patient Care consecutive hours except for day-care procedures/ treatments
- 37 **“Illness”** means sickness or a disease or pathological condition leading to the impairment of normal physiological function and requires medical treatment.
- 38 **“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
- 39 **“Chronic condition”**- A chronic condition is defined as a disease, illness, or injury that has one or more of the following characteristics:—
- it needs ongoing or long-term monitoring through consultations, examinations, check-ups, and / or tests
 - it needs ongoing or long-term control or relief of symptoms
 - it requires your rehabilitation for the patient or the patient to be specially trained to cope with it
 - it continues indefinitely
 - it recurs or is likely to recur.
- 40 **“Immediate family member”** shall mean any member of the Insured Person’s immediate family i.e the Insured Person’s spouse, child or, parent or sibling.
- 41 **“Intended Destination(s)”** means area(s) which appear on the travel itinerary of the insured for stay during the Trip.
- 42 **“Inclement Weather”** means any severe catastrophic weather conditions which delay the scheduled arrival or departure of a common carrier but not including normal, seasonal/climatic weather changes.
- 43 **“Injury”** means accidental physical bodily harm excluding illness or disease, solely and directly caused by external, violent and visible and evident means which is verified and certified by a Medical Practitioner.
- 44 **“Insured/Policyholder”** means and includes any organization, firm, society or body corporate on whose name the Policy is issued.

- 45 **“Insured Person”** means the person named in the Policy Schedule, who is an employee or member of the Insured having a permanent place of residence in India and for whom the insurance is proposed and appropriate premium paid.
- 46 **“Insured Event”** means an event, loss or damage for which the Insured/Insured Person is entitled to benefit/s under the Policy.
- 47 **Loss**” means loss or damage.
- 48 **“Life threatening condition / situation”** refers to a medical condition suffered by the Insured which has the following characteristics:
- Markedly unstable vital parameters (blood pressure, pulse, temperature and respiratory rate).
 - Acute impairment of one or more vital organ systems (involving brain, heart, lungs, Liver, Kidneys and pancreas).
 - 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.
 - Critical care being provided in critical care area such as coronary care unit, intensive care unit, respiratory care unit, or the emergency department.
- 49 **“Maternity expenses”** means —
- medical treatment expenses traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalization)
 - expenses towards lawful medical termination of pregnancy during the policy period
- 50 **“Medical Advice”** means any consultation or advice from a Medical Practitioner including the issuance of any prescription or follow-up prescriptions.
- 51 **“Medical Advisor”** are Medical Practitioners appointed by “Emergency Assistance Service Provider”
- 52 **“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.
- 53 **“Medical Practitioner”** means a person who holds a valid registration from the Medical Council or appropriate authority of the country where insured/ insured person is availing emergency treatment outside India 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, specialist and surgeon, provided that, this person is not a member of the Insured/Insured Person's family
54. **“Medically Necessary”** 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;



55. **“Multi trip”** means two or more trips to destinations out of Republic of India during the Policy period.
56. **“Non- Network”** means any hospital, day care centre or other provider that is not part of the network.
57. **“Notification of Claim”** means the process of intimating a claim to the insurer or Emergency Assistance Service Provider through any of the recognized modes of communication.
58. **“Out-Patient treatment”** means the one in which the Insured visits a clinic / hospital or associated facility like 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
59. **“Period of Insurance”** in respect of Single Trip Policy means the period from the commencement of the insurance cover to the end of the insurance cover as specified in the Policy Schedule.
60. **“Period of Insurance”** in respect of multi trip policy, this means the period from the commencement of insurance cover to the end of actual trip duration or full utilization of the maximum number of travel days per trip as mentioned in the Policy Schedule or expiry of the Policy or cancellation of the insurance, whichever is earlier
61. **“Policy”** means the Schedule, the Policy documents and any endorsements attaching to or forming part hereof either on the commencement date or during the Policy Period.
62. **“Policy Schedule”** means the document mentioning the name of the Insured / Insured persons, Policy Period, scope of cover, limits to which benefits are subject to and other relevant terms and conditions
63. **“Physician”** means a person legally qualified to practice in medicine or surgery including other legally qualified medical practitioner duly licensed by their respective jurisdiction and is not a member of the insured person’s family.
64. **“Permanent Partial Disablement”** means a bodily injury caused by accidental, external, violent and visible means, which as a direct consequence thereof, disables any part of the limbs or organs of the body of the Insured Person and which falls into one of the categories listed in the Table of Benefits.
65. **“Permanent Total Disablement”**: means a bodily injury caused by accidental, external, violent and visible means, which as a direct consequence thereof totally disables and prevents the Insured Person from attending to any business or occupation of any and every kind or if he/she has no business or occupation, from attending to his/her usual and normal duties that last for a continuous period of twelve calendar months from the date of the accident, with no hopes of improvement at the end of that period.
66. **Pre-existing Disease** - means any condition, ailment or injury or related condition(s) for which the Insured / Insured Person had signs or symptoms, and /or were diagnosed, and /or received medical advice/ treatment, within 48 months prior to the this policy
67. **“Professional Sportsperson”** means those sports persons who are in to full time sports and maintain their livelihood through earnings from their involvement in sports

68. **“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.
69. **“Reasonable Additional Expenses”** means any expenses for meals and lodging necessarily incurred by the Insured/Insured Person as a result of a trip interruption or trip delay but does not include meals and lodging provided by the common carrier or any other party free of charge.
70. **“Renewal”** means the terms on which the contract of insurance can be renewed on mutual consent with a provision of grace period for treating the renewal continuous for the purpose of gaining credit for pre-existing diseases, time-bound exclusions and for all waiting periods.
71. **“Schengen Countries”** are a group of countries that includes Austria, Belgium, Czech Republic , Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Iceland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Slovakia, Slovenia, Spain, Sweden, Switzerland. The list of these countries is subject to updating from time to time as and when necessitated.
72. **“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.
73. **“Subrogation”** means the right of the insurer to assume the rights of the insured person to recover expenses paid out under the policy that may be recovered from any other source.
74. **“Sum Insured”** means the maximum amount of coverage, as specified in the Policy Schedule, that the Insured/Insured Person is entitled to in respect of each benefit and as applicable under the Policy.
75. **“Surgery or Surgical Procedure”** means manual and / or operative procedure (s) required for treatment of an illness or injury, correction of deformities and defects, diagnosis and cure of diseases, relief of suffering or prolongation of life, performed in a hospital or day care centre by a medical practitioner
76. **“Schedule”** means Schedule attached to and forming part of this Policy mentioning the details of the Insured/ Insured Persons, the Sum Insured, the period, Coverage and the limits to which benefits under the Policy are subject to.
77. **“Semi-professional sports person”** shall mean those sports persons who participate in sports and get remuneration for participating remunerated for employment or self-employed and whose primary source of income is not from sports
78. **“Terrorism/Terrorist Incident”** means any actual or threatened use of force or violence directed at or causing damage, injury, harm or disruption, or the commission of an act dangerous to human life or property, against any individual, property or Government, with the stated or unstated objective of pursuing economic, ethnic, nationalistic, political, racial or religious interests, whether such interests are declared or not. Robberies or other criminal acts, primarily committed for personal gain and acts arising primarily from prior personal relationships between perpetrator(s) and victim(s) shall not be considered terrorist activity. Terrorism shall also include any act, which is verified or recognized by the relevant Government as an act of terrorism.

79. **“Travel Agent”** means the Travel Agent, tour operator or other entity from which the Insured / Insured Person purchases the insurance Policy or travel arrangements, and includes all officers, employees and affiliates of the Travel Agent, tour operator or other entity.
80. **“Travelling Companion”** means an individual or individuals travelling with the Insured Person, provided that, the Insured Person and such individual(s) are travelling to the same destination and on the same date and such individual(s) is/are also insured with the Insurer. For the purpose of this definition, any individual(s) forming part of a group travelling on a tour arranged by a Travel Agent or a tour operator shall not be considered as Travelling Companion, unless the individual(s) is/are part of the family of the Insured Person.
81. **“Trip”** means a journey originating from the residence of the Insured Person to out of the Republic of India and back to the residence of the Insured Person, the details of which are specified in the Policy Schedule.
82. **“Unproven/ Experimental treatment”** means the treatment including drug experimental therapy which is not based on established medical practice
83. **“Unattended”** A Vehicle, premises or personal belongings are unattended if there is no one able to observe or to prevent interference with it.
84. **“Valuables”** mean photographic, audio, video, computer and any other electronic equipment, telecommunications and electrical equipment, telescopes, binoculars, antiques, watches, perfumes, jewellery, furs and articles made of precious stones and metals.

2. Benefits under the Policy:

The Company hereby agrees, subject to the terms, exclusions and conditions herein contained or otherwise expressed herein, to compensate the Insured/Insured Person for any loss or damage sustained or incurred by such Insured and as described under different Benefits hereunder but not exceeding the Sum Insured as applicable to the respective Benefits as specified in the Policy Schedule.

Section I – Emergency Medical Expenses

The Company shall pay or reimburse to the Insured/ Insured Person expenses incurred for availing emergency medical assistance required on account of any **disease/ illness/ injury** sustained or contracted whilst on a **Trip** upto the limit of Sum Insured as specified in the Schedule of Policy.

The deductible in respect of this benefit will be applicable for each and every claim separately and shall be of an amount as specified in the Policy Schedule

1. Out-patient treatment, provided, the same is critical and cannot be deferred till the insured/ insured person's return to the Republic of India.
2. In-patient treatment in a local hospital at the place the Insured Person is staying at the time of occurrence of an insurable event.
3. Medical aid prescribed by a Medical Practitioner as Medically Necessary part of a treatment for broken limbs or injuries (e.g. plaster casts, bandages and walking aids).
4. Radiotherapy, heat therapy or photo therapy and other such treatment prescribed by a Medical Practitioner.
5. X-ray, diagnostic tests and all reasonable costs towards diagnostic methods and treatment of all disease/illness/injury provided these pertain to the disease/illness/injury due to which hospitalization was deemed Medically Necessary.

6. Cost of transportation, including necessary medical care, by recognized medical service providers for medical attention to the nearest hospital or to the nearest Medical Practitioner or to a special clinic if prescribed by a Medical Practitioner.
7. Life saving unforeseen emergency measures provided to the Insured Person by the Medical Practitioner for the disease/illness/injury arising out of a Pre-existing condition. The treatment for these emergency measures would be paid till the Insured Person becomes medically stable, as ascertained by the Panel Doctor of the Emergency Assistance Service Provider. All further medical costs to maintain medically stable state would have to be borne by the Insured/Insured Person.

Section II - Emergency Medical Evacuation:

The Company shall pay or reimburse reasonable cost of transportation charges upto the maximum of Sum Insured as specified in the Schedule of Policy,

1. Extra costs of Medically Necessary and prescribed transportation of the Insured Person from the foreign country to his/her permanent place of residence in India provided that -
 - a. Extra costs in the event of transportation home are the additional costs arising of the return journey home as a consequence of the insured event.
 - b. Additional costs for an accompanying person would be payable, if it is Medically Necessary in the opinion of Emergency Assistance Service Provider, that the Insured/ Insured Person needs to be accompanied by a Medical Practitioner, nurse, relative, friend or colleague;

The extra costs under “Transportation” are:

1. In the event of transportation home, the additional costs arising for the return journey home as a consequence of the insured event;
2. In the opinion of the Emergency Assistance Service Provider, the Insured/Insured Person is capable of being transported to India

Section III - Repatriation of Mortal Remains:

In the event of death of insured due to disease/ illness/ injury, the company shall compensate for the costs of transporting the remains of the deceased insured back to the Republic of India or, up to an equivalent amount, for a local burial or cremation in the country where the death occurred, subject to the maximum limit as specified in the Certificate of Insurance

Special Conditions

If any disease/ illness / injury during the period abroad necessitate curative treatment beyond duration of this insurance, the Company's liability to pay benefits within the scope of this Policy shall extend automatically for a further period of 30 days insofar as it can be proved that transportation home is not possible. Emergency Assistance Service Provider must be notified immediately as soon as it is known that Insured / Insured Person is unfit to return to India. If any new disease / illness/injury is contracted beyond duration of this Policy, treatment for the same will not be covered.

Further, in case of transportation home on the advice of Emergency Assistance Service Provider, appropriate continued treatment in India for the same disease/ illness/ injury will be covered for a maximum of 30 days beyond this Policy period automatically, provided the disease / illness/injury is contracted abroad within this Policy period. The transportation of the Insured/Insured person back to India shall be done only on agreement and confirmation from the attending medical practitioner/ panel doctor that the Insured/Insured Person is capable of being transported to India.



Extension of the period of insurance is automatic for a period not exceeding 7 days and without extra charge, if necessitated by delay of Common Carrier services beyond the control of the Insured/ Insured Person.

If Emergency Assistance Service Provider recommends that continued treatment in an Indian hospital is appropriate, this Policy shall be extended automatically to cover medical expenses incurred in India as specified in the Medical Expenses Cover in this Policy provided that such expenses will only be paid at the usual and customary level for such services, and further provided that expenses will only be paid for treatment incurred within the 90days period immediately following the first manifestation of the disease/ illness/ injury during the trip.

Exclusions:

1. Any pre-existing condition and /or any complications arising from it,.
2. Where the insured person is travelling against the advise of a physician or receiving or on a waiting list for specified medical treatment; or is travelling for the purpose of obtaining treatment or has received a terminal prognosis for a medical condition;or
3. Treatment of orthopaedic, degenerative, oncological diseases, unless the medical assistance provided abroad involves unforeseen emergency measures to save the Insured Person's life.
4. Treatment which could be reasonably delayed until the Insured Person's return to the Republic of India. The question of what can or what cannot be reasonably delayed will be decided jointly by the treating Medical Practitioner, Emergency Assistance Service Provider and the Company and shall be in accordance with accepted standards of medical care.
5. Charges in excess of reasonable and customary charges incurred for emergency treatment on account of an insured event.
6. Treatment relating to the removal of physical flaws or anomalies (cosmetic treatment or plastic surgery in any form or manner unless medically required as part of treatment for cancer, accidents and burns).
7. Expenses incurred in connection with rest or recuperation at a spa or health resort, Sanatorium, convalescence home or similar institution or related to treatment of alcoholism or drug dependency or similar,.
8. Maternity, child birth and any consequences, including changes in other chronic conditions as a result of pregnancy. However, this exclusion will not apply in following cases:
 - a) Ectopic Pregnancy proved by diagnostic means and certified to be life threatening condition / situation by the attending Medical Practitioner
 - b) If the medical assistance provided abroad involves unforeseen emergency measures to save the Insured Person's or the child's life in the event of acute complications, provided that the Insured Person has not completed the age of 38 years and the 30th week of the pregnancy is not yet completed.
 - c) if necessary additional premium is paid by insured for removal of this exclusion we will cover after a waiting period of 10 months from the commencement of the policy
9. Rehabilitation and/or physiotherapy or the costs of prostheses/ prosthetics (artificial limbs) etc.

Any exclusion mentioned in the 'General Exclusions' section of this Policy.

Section IV - Dental Treatment Expenses:

The Company shall pay or reimburse to the Insured/Insured Person expenses incurred in respect of acute anesthetic treatment of a natural tooth or teeth during a trip, but not exceeding the Sum Insured as specified in the Policy Schedule.

The deductible in respect of this benefit will be applicable for each and every claim separately and shall be of an amount as specified in the Schedule of benefits to this policy.

Exclusions

The Company shall not be liable to make any payment under this benefit in connection with or in respect of any expenses whatsoever incurred by the Insured / Insured Person for:

- 1 Medical treatment abroad if that is the sole reason or one of the reasons for temporary stay abroad.
- 2 2. Any pre-existing condition and or/any complications arising from it.
- 3 Treatment, which could reasonably be delayed until the Insured/ Insured Person's return to the Republic of India. The question of what can or what cannot be reasonably delayed will be decided jointly by the treating Dentist and the Emergency Assistance Service Provider.
- 4 Treatment of orthopaedic, degenerative or oncological diseases, unless the medical assistance provided abroad involves unforeseen emergency measures to save the Insured / Insured Person's life or measures solely designed to relieve acute pain in any case excluding chemotherapy or radiotherapy expenses
- 5 Charges in excess of reasonable and customary charges as per the determination by the Emergency Assistance Service Provider.
- 6 Expenses incurred in connection with cancer treatment, unless the medical assistance provided abroad involves unforeseen emergency measures to relieve acute pain.
- 7 Treatment relating to the removal of physical flaws or anomalies (cosmetic treatment or 'plastic' surgery in any form or manner).
- 8 Expenses incurred in connection with rest or recuperation at a spa or health resort, sanatorium, convalescence home or similar institution.
- 9 Any exclusion mentioned in the 'General Exclusions' section of this Policy.

Section V – Personal Accident

Accidental Death

The Company shall compensate the Insured/Insured Person or his/her nominees or the legal representatives, as the case may be, for accidental bodily injury (whilst on a trip covered by this Policy) solely and directly caused by accidental, violent, external and visible means resulting in death within twelve (12) calendar months of occurrence of such injury.

The Sum Insured as specified in the Policy Schedule shall be the limit per person per Policy period payable only in Indian Currency on the Insured Person's return to India. In case of the unfortunate accidental death of the Insured Person, the compensation shall be paid in Indian Currency in India to the nominee or the legal representative as set forth in the Table of Benefits below. The Sum Insured shall be the maximum liability of the Company under this benefit.

This also covers if the insured/insured person suffers Accidental Bodily Injury on the way from his residence to the International Airport in India to start his Overseas journey or back to his residence from the International Airport in India on his return from Overseas journey during Policy Period and if this is the sole and direct cause of his Death within 3 months from the date of such injury, then the Insurer will pay the Insured the percentage of the Sum Insured as mentioned in the table below. The Insurer's maximum liability however shall not be more than 100% of the Limit of Indemnity as stated in the schedule

Table of Benefits	Percentage of Sum Insured payable as compensation
1. Accident Death	100%

Permanent Total Disability (PTD):

The Company shall compensate the Insured/Insured Person or his/her nominees or the legal representatives, as the case may be, for accidental bodily injury (whilst on a trip covered by this Policy) solely and directly caused by accidental, violent, external and visible means resulting in one of the losses shown in the table below. The loss must occur within 365 Days from the date of the Accident which caused Injury.

If one or more than one loss results from any one accident, only one amount, the largest will be paid.

The Sum Insured as specified in the Policy Schedule shall be the limit per person per Policy period payable only in Indian Currency on the Insured Person's return to India. The Sum Insured shall be the maximum liability of the Company under this benefit.

Subject to the above, the Company shall pay to the Insured/Insured Person or his/her nominees or the legal representative, as the case may be, the sum or the sums as set forth in the Table of Benefits below. This also covers if the Insured suffers Accidental Bodily Injury on the way from his residence to the International Airport in India to start his Overseas journey or back to his residence from the International Airport in India on his return from Overseas journey during Policy Period and if this is the sole and direct cause of his Permanent Disability within 3 months from the date of such injury, then the Insurer will pay the Insured the percentage of the Sum Insured specified for each and every form of condition mentioned in the table below. The Insurer's maximum liability however shall not be more than 100% of the Limit of Indemnity as stated in the schedule

Table of Benefits	Percentage of Sum Insured payable as compensation
2. PTD – Total and irrecoverable loss of	
i) Sight of both eyes or of the actual loss by physical separation of two entire hands or two entire feet or one entire hand and one entire foot or of such loss of sight of one eye and such loss of one entire hand or one entire foot.	100%
ii) Use of two hands or of two feet or of one hand and one foot or of such loss of sight of one eye and such loss of use of one hand or one foot.	100%
iii) Total Paralysis	100%
iv) Loss of all fingers and both thumbs OR loss of arm – at shoulder; between shoulder and elbow; at and below elbow OR loss of leg – at hip; between knee and hip; below knee	100%
For the purpose of items 2 i) and 2 ii) above, physical separation of one entire hand shall mean separation at or above wrist and/or of the foot at or above ankle respectively.	
3. Permanent total and absolute disablement disabling the Insured/Insured Person from engaging in any employment or occupation of any description whatsoever which he or she was capable of doing earlier	100%

Permanent Partial Disablement (PPD):

The Company shall compensate the Insured/Insured Person or his/her nominees or the legal representatives, as the case may be, for accidental bodily injury (whilst on a trip covered by this Policy) solely and directly caused by accidental, violent, external and visible means resulting in one of the losses shown in the table below. The loss must occur within 365 Days from the date of the Accident which caused Injury.

If one or more than one loss results from any one accident, only one amount, the largest will be paid.

The Sum Insured as specified in the Policy Schedule shall be the limit per person per Policy period payable only in Indian Currency on the Insured Person's return to India. The Sum Insured shall be the maximum liability of the Company under this benefit.

Subject to the above, the Company shall pay to the Insured/Insured Person or his/her nominees or the legal representative, as the case may be, the sum or the sums as set forth in the Table of Benefits below

4. PPD - Total and irrecoverable loss of various parts as given below:	Percentage of Sum Insured
The sight of one eye or the actual loss by physical separation of one entire hand or one entire foot.	50%
Use of a hand or a foot without physical separation	50%
Loss of speech	50%
Loss of toes – all	20%
Loss of toes great - both phalanges	5%
Loss of toes great - one phalanx	2%
Loss of toes other than great, if more than one toe lost: each	2%
Loss of hearing - both ears	75%
Loss of hearing - one ear	30%
Loss of four fingers and thumb of one hand	50%
Loss of four fingers of one hand	40%
Loss of thumb - both phalanges	25%
Loss of thumb – one phalanx	10%
Loss of index finger – three phalanges	15%
Loss of index finger – two phalanges	10%
Loss of index finger - one phalanx	5%
Loss of middle finger or ring finger or little finger – three phalanges	10%
Loss of middle finger or ring finger or little finger – two phalanges	7%
Loss of middle finger or ring finger or little finger - one phalanx	3%
Loss of metacarpals – first or second (additional) or third, fourth or fifth (additional)	3%
Any other permanent partial disablement	Percentage as assessed by a Physician and / or panel doctor of the Company
The disablement occurs within one year of accident	
The disablement must be confirmed and claimed for prior to the expiry of a period of 3 months since occurrence of the disablement	

Special Conditions

1. In the event of partial loss or impairment of the function of one of the above parts of the body or senses, the appropriate proportion of the percentage stated in the "Table of Benefits" will be considered for payment.
2. If the accident impairs a number of physical or mental functions, the degree of disablement given in the Table of Benefits will be added together, but the amount payable shall not exceed 100% of the Sum Insured specified in the Policy Schedule.

3. If the accident affects parts of the body or senses whose loss or inability to function is not dealt with above, the governing factor in determining the benefit amount in such a case will be the degree to which the normal physical or mental capabilities are impaired, solely from a medical point of view, as ascertained by a panel of doctor by the Company or Emergency Assistance Service Provider.
4. In the event of permanent disablement, the Insured Person will be under obligation:
 - (a) To have himself/herself examined by the Panel Doctors appointed by the Company/Emergency Assistance Service Provider and the Company will pay the costs thereof.
 - (b) To authorize doctors providing treatment or giving expert opinion and any other authority to supply the Company any information that may be required on the condition of the Insured Person.
5. If the above obligations are not met with due to whatsoever reason, the Company shall be relieved of its liability to compensate under this benefit.
6. The benefit applicable under this Section shall be in addition to the benefits applicable under Section VI - Accidental Death (Common Carrier), **- Permanent Total Disablement - Common carrier, Permanent Partial Disablement - Common carrier**

Special Exclusions:

The Company shall not be liable to make any payment under this benefit in respect of the following:

- 1 Any existing physical disability.
- 2 Accidents due to mental disorders or disturbances of consciousness, strokes, fits or convulsions which affect the entire body and pathological disturbances caused by the mental reaction to the same.
- 3 Damage to health caused by curative measures, radiation, Infection, poisoning except where these arise from an accident.
- 4 Any payment under this benefit whereby the Company's liability would exceed the sum payable in the event of accidental death.
- 5 Any other claim after a claim for accidental death has been admitted by the Company and becomes payable.
- 6 Any claim which arises out of an accident connected with the operation of an aircraft or which occurs during parachuting except when the Insured/Insured Person is flying as a Fare Paying passenger in a multi-engine, commercial aircraft.
- 7 Payment of compensation in respect of accidental death, injury or disablement of the Insured/Insured Person from;
 - a. intentional self-injury, suicide, or attempted suicide.
 - b. whilst under the influence of intoxication, liquor or drugs.

- c. whilst engaging in aviation or ballooning whilst mounting into dismounting from or travelling in any aircraft or balloon other than as a Fare Paying Passenger in any duly licensed standard type of aircraft.
 - d. arising or resulting from the insured/insured person committing any breach of law with criminal intent or participating in an actual or attempted felony, riot, crime, misdemeanour or civil commotion.
 - e. whilst engaging in speed contest or racing of any kind, hunting, bungee jumping, parasailing, ballooning, skydiving, paragliding, hand gliding, mountaineering or rock climbing, potholing, abseiling, deep sea diving, polo, snow and ice sports, etc. unless specifically covered and duly mentioned in the Policy Schedule.
- 8 Any consequential loss or damage cost or expense of whatsoever nature.
- 9 Accidental Death or disablement resulting, directly or indirectly, caused by, contributed to or aggravated or prolonged by childbirth, maternity or pregnancy or in consequence thereof, venereal disease or infirmity.
- 10 Payment of compensation in respect of accidental death, injury or disablement of the Insured/Insured Person, due to or arising out of or directly or indirectly connected with or traceable to act of terrorism or terrorist activities.
- 11 Insured whilst flying or taking part in aerial activities (including cabin crew) except as a Fare Paying Passenger in a regular Scheduled Commercial airline or air Charter Company.
- 12 Any exclusion mentioned in the 'General Exclusions' section of this Policy.

Section VI – Accidental Death and Permanent Total Disablement – Common carrier Coverage **Accidental Death**

The Company will pay compensation upto the limit of the Sum Insured for this benefit as specified in the Policy Schedule if accidental injury to the Insured Person results in loss of life while riding as a passenger (but not as a pilot operator or member of the crew) in or on, boarding or alighting from any common carrier provided that, this benefit shall not apply while the Insured Person is riding in or on, or boarding or alighting from, and/or is piloted by a person who does not hold a current and valid certificate of competency of a rating authorizing him to pilot such aircraft.

Exclusion:

All the exclusions and Special Conditions applicable to Section V- Personal Accident shall be applicable to this Section also.

The benefit applicable under this Section shall be in addition to the benefits applicable under Section V- Accidental Death

Permanent Total Disablement - Common carrier Coverage

The Company will pay compensation upto the limit of the Sum Insured for this benefit as specified in the Policy Schedule if accidental injury to the Insured Person results in permanent total disablement while riding as a passenger (but not as a pilot operator or member of the crew) in or on, boarding or alighting from any common carrier provided that, this benefit shall not apply while the Insured Person is riding in or on, or boarding or alighting from, any civilian aircraft that does not hold a or is piloted by a person who does not hold a current and valid certificate of competency of a rating authorizing him to pilot such aircraft.



Exclusion:

All the exclusions and Special Conditions applicable to Section V - **Permanent Total Disability (PTD)** shall be applicable to this Section also.

The benefit applicable under this Section shall be in addition to the benefits applicable under Section V - **Permanent Total Disability (PTD)**

Permanent Partial Disablement - Common carrier coverage

The Company will pay compensation upto the limit of the Sum Insured for this benefit as specified in the Policy Schedule if accidental injury to the Insured Person results permanent partial disablement while riding as a passenger (but not as a pilot operator or member of the crew) in or on, boarding or alighting from any common carrier provided that, this benefit shall not apply while the Insured Person is riding in or on, or boarding or alighting from, any civilian aircraft that does not hold a current /or is piloted by a person who does not hold a current and valid certificate of competency of a rating authorizing him to pilot such aircraft.

Exclusion:

All the exclusions and Special Conditions applicable to **Section V- Permanent Partial Disablement (PPD)** shall be applicable to this Section also.

The benefit applicable under this Section shall be in addition to the benefits applicable under **Section V- Permanent Partial Disablement (PPD)**

Section VII- Daily Allowance in case of Hospitalization

The Company will pay a daily allowance, in the event of hospitalization of the Insured/ Insured Person beyond a specified number of days as mentioned in the Policy Schedule as deductible, for which a valid claim is admissible under the Policy whilst on trip abroad.

Exclusion:

All the exclusions and Special Conditions applicable to Section I, II, III shall be applicable to this Section also.

Section VIII - Compassionate Visit

In the event the Insured Person is hospitalized for more than seven (7) consecutive days for which a valid claim is admissible under Section I of this Policy and his/her medical condition forbids repatriation and no adult member of his/her immediate family is present, the Company / Service Provider after obtaining confirmation of need for a companion from the attending Medical Practitioner, will provide:

A return trip economy class air ticket , to allow one family member, to be at Insured Persons' bedside for the duration of stay in the Hospital; and expenses towards stay of the family member during such compassionate visit.

It also provides for reimbursement of the cost of return fare for the Insured Person to visit his/her place of residence in India from where the Trip originated, in the unfortunate event of the immediate family member (spouse, dependent children, parents) being hospitalized for more than seven consecutive days in India or in the event of death of the immediate family member (spouse, dependent children or parents).

The Company's liability for round trip ticket and the expenses relating to this benefit shall in no case exceed the Sum Insured as specified in the Policy Schedule.

Exclusion:

All the exclusions and Special Conditions applicable to Section I - Medical Expenses, inclusive of Repatriation and Emergency Medical Evacuation shall be applicable to this Section also.

Section IX - Loss of passport and documents

This Section provides that in the event the Passport belonging to the Insured Person is lost during a trip abroad, the Company will reimburse the actual expenses necessarily and reasonably incurred in connection with obtaining a duplicate or fresh passport but not exceeding the Sum Insured specified in the Policy Schedule.

This Section also provides for reimbursement of actual expenses necessarily and reasonably incurred in connection with obtaining/replacing the stolen travel documents/tickets and travelers cheques up to the limit of Sum Insured for this benefit, if such documents/tickets/ travelers cheques belonging to the Insured/ Insured Person be lost whilst on a trip.

The deductible in respect of this benefit will be applicable for each separate claim, and shall be of an amount as specified in the Policy Schedule.

Exclusion:

The Company shall not be liable to make any payment if the loss of passport is:

- 1 due to delay or confiscation or detention by the customs, police or public authorities.
- 2 due to theft unless it is reported to the police within 24 hours of the Insured/Insured Person becoming aware of the theft and a written police report being obtained in that regard.
- 3 due to its being left unattended or forgotten by the Insured/Insured Person in a public place or in a public transport.
- 4 Loss or theft of the passport from a private place or from a private vehicle, unless it was located in a locked hotel room, apartment or locked vehicle, and forcible and violent entry was used to gain access to it.
- 5 Any exclusion mentioned in the "General Exclusions" section of this Policy.

Section X - Total Loss of Checked-in Baggage

The Company shall pay the compensation to the Insured/Insured Person for the total and complete loss of checked-in baggage caused by a common carrier on a trip covered under this Policy, upto the limits specified in the Policy Schedule. The cover is limited to the travel destinations specified in the main travel ticket from the Republic of India, declared at the time of purchase of this Policy, and return trip back to India along with all halts and via destinations included in the travel ticket.

In the event of such a total and complete loss of checked-in baggage whilst in the custody of the Common Carrier, a Property Irregularity Report (PIR) must be obtained from the Common Carrier immediately upon discovery of the loss which must be submitted along with the claim.

The deductible in respect of this benefit will be applicable for each and every claim separately and shall be of an amount as specified in the Policy Schedule.

Special Conditions

1. The Company will compensate the Insured/Insured Person for the market value of the checked-in baggage in the event of total and complete loss of such checked-in baggage caused by a common carrier upto the limits specified in the Policy Schedule provided that:

- a) Maximum amount payable per checked-in baggage, in case more than one bag has been checked-in, is 50% of the applicable Sum Insured. In case of only one bag being checked-in, the amount payable is 100% of the applicable Sum Insured.
- b) Insured/Insured Person has provided all the documents, reports and other details concerning the loss.



- c) For the purpose of this benefit, "market value" refers to the sum required to purchase new items of the same kind and quality (which are lost) less an amount representing wear and tear, usage etc., at the time of loss.
2. If the Company makes any payment under this benefit, it is a condition that any recovery from any common carrier by the Insured/Insured Person, under the terms of the Convention for the Unification of Certain Rules Relating to International Carriage by Air, 1929 ("Warsaw Convention") shall become the property of the Company.
3. The amount payable in respect of any one article, pair or set is limited to the amount as specified in the Policy Schedule.
4. No partial loss or damage shall become payable. However, total loss or damage of individual unit(s) of baggage shall not be construed as falling within this Special Condition.
5. In the event that claims are submitted for total loss of checked-in baggage as well as temporary delay of checked-in baggage, the higher of the claims shall be payable by the Company in respect of the same item(s) of checked-in baggage during any one period of insurance

Exclusion:

The Company shall not be liable to make any payment under this benefit in connection with or in respect of any expenses whatsoever incurred by the Insured / Insured Person for:

- 1 Valuables and money, all kinds of securities and tickets/passes or any other item not declared to, and agreed to by the Company.
- 2 Loss of property unless a Property Irregularity Report or other report usually issued by common carriers in the event of loss of checked-in baggage has been procured and submitted to the Company.
- 3 Any partial loss of the items contained within the checked-in baggage.
- 4 Items contained within the checked-in baggage, which are valued in excess of US\$100 without appropriate proof of ownership.
- 5 Losses arising from any delay, detention, confiscation by the customs officials or other public authorities.
- 6 Any checked-in baggage loss in the Republic of India.
- 7 Any exclusion mentioned in the "General Exclusions" section of this Policy

Section XI - Delay of Checked-in Baggage

The Company shall pay or reimburse to the Insured/ Insured Person for costs of necessary emergency purchases of toiletries, medication and clothing in the event of the Insured/Insured Person for the delay in scheduled arrival of the checked-in baggage caused by a Common Carrier, on a trip up to the limits specified in the Policy Schedule. The cover is limited to the travel destinations specified in the main travel ticket from the Republic of India with all halts and via destinations included in the main travel ticket and declared at the time of purchase of this Policy.

Exclusion:

The Company shall not be liable to make any payment under this benefit in connection with or in respect of any expenses whatsoever incurred by the Insured / Insured Person for:

- 1 Valuables and money, all kinds of securities and tickets/passes or any other item not declared to, and agreed to by the Company.

- 2 Loss of property unless a Property Irregularity Report or other report usually issued by common carriers in the event of loss of checked-in baggage has been procured and submitted to the Company.
- 3 Any partial loss of the items contained within the checked-in baggage.
- 4 Losses arising from any delay, detention, confiscation by the customs officials or other public authorities.
- 5 Loss due to complete/partial damage of the checked-in baggage.
- 6 Any checked-in baggage delay on the in-bound sector to the Republic of India.
- 7 Any exclusion mentioned in the "General Exclusions" section of this Policy

Special Conditions:

1. The Company shall pay or reimburse costs of necessary emergency purchases of toiletries, medication and clothing in the event of the Insured/Insured Person suffering delay of his/her checked-in baggage while being transported during the trip, provided that:

- a) The delay of checked-in baggage is more than certain number of hours specified in the Policy Schedule as deductible which is calculated from the actual arrival time of the common carrier at the destination and relates to delivery of baggage that has been checked-in by the common carrier.
- b) Insured/ Insured Person provides the Company with written proof of delay from the common carrier.
- c) Insured/ Insured Person provides the Company with the receipts for the necessary emergency purchase of toiletries, medication and clothing that he/she needed to buy.

In the event that claims are submitted for total loss of checked-in baggage as well as temporary delay of checked-in baggage, the higher of the claims shall be payable by the Company in respect of the same item(s) of checked-in baggage during any one period of insurance.

2. If the Company makes any payment under this benefit, it is a condition that any recovery from any common carrier by the Insured/Insured Person, under the terms of the Convention for the Unification of Certain Rules Relating to International Carriage by Air, 1929 ("Warsaw Convention") shall become the property of the Company

Section XII - Trip Delay Coverage

The Company shall reimburse the reasonable additional expenses incurred by the Insured, if his or her trip, covered by this Policy, is delayed beyond a specified number of hours, as mentioned in the Policy Schedule, from the scheduled time only on account of the following unforeseen reasons. Delay will be covered under the following circumstances if specified on the certificate of insurance.

1. Adverse weather condition &/or Air Traffic Congestion.
2. Riot, Strike, Industrial Action at airport or that of Airlines,
3. Accidental or Mechanical Failure or Technical problem in the Aircraft, Provided always that
 - a. The insured has taken every reasonable step to complete the journey to the departure point on time, and
 - b. The insured shall submit to the Company sufficient proof to substantiate the cause of delay in support of his claim.

This section of policy is also subject to following Exclusions:

1. Any departure which is delayed as a result of the insured or any other person who have arranged to travel with failing to check in timely as required by the airlines.
2. Any delayed departure caused by strike or industrial action known to exist or was anticipated at the time the trip was booked

3. If the air craft is taken out of service on the instruction of the Civil Aviation Authority.
4. No claim shall be payable for delay of First 6 hrs. from the schedule time of departure of Flight

The deductible in respect of this benefit will be applicable for each separate claim. It is the responsibility of the insured to produce necessary proofs establishing the reason for Trip Delay along with the receipts.

Exclusions

This benefit does not cover any other loss other than those mentioned above under the head coverage, directly or indirectly, in whole or in part, including loss caused by or resulting from any exclusion mentioned in the 'General Exclusions' section of this Policy

Section XIII - Trip Cancellation and Interruption

In the event of cancellation / Interruption of trip due to necessary and unavoidable reasons as stated below, the Company will indemnify the insured subject to limits shown in the schedule, for loss of personal accommodation, visa charges, any sightseeing booked in advance, cruise ticket and travel charges paid or contracted to be paid by the insured, which are not recoverable from any other source,

1. Cancellation before the trip because of
 - (a) Death of Insured, Insured's spouse, children, parent or parent in-law's.
 - (b) Death of Brother or Sister of the insured 15 days prior to the departure date as stated in the policy.
 - (b) Serious injury, sudden sickness of Insured, insured's spouse or parent or parent in-law or child requiring hospitalization for more than 24 hrs.
 - (c) Compulsory quarantine or prevention of travel by Government of India
2. Curtailment (the cutting short by early return to India) of the trip because of:
 - (a) Death, serious injury or sudden major sickness of insured, insured's spouse, child, parents or parent in laws residing in India at the time of incident. (While the insured is on a trip abroad)
 - (b) The hijack of an aircraft in which Insured Person is traveling as a fare paying passenger.
 - (c) Death of Brother or Sister of the insured in India.

SECTION XIV-TRAVEL INCONVENIENCE COVER:

In the event of Trip cancellation or Interruption of a covered trip due to necessary and unavoidable reasons as stated below, the Company will indemnify the insured subject to the limits shown in the policy schedule, for loss of personal accommodation, any sightseeing booked in advance, cruise ticket and travel charges paid or contracted to be paid by the insured, which are not recoverable from any other source.

1. When Insured's Principal residence and/or his intended place of stay at destination is rendered uninhabitable due to Fire, flood, vandalism or natural disaster and also his place of business is rendered inoperative due to operation of said perils.
2. Termination of employment or layoff affecting the insured provided that the insured have been employed with the same employer for at least five continuous years without any break.
3. The Insured and/or his immediate family member have become victim of Felonious Assault 10 days prior to the departure date provided he/they are not principal or an accessory in such felonious assault.
4. Inclement weather / climatic condition in the city or primary place of departure and / or at intended destination.
5. Civil Unrest, Riot and Strike in the home city and/or at departing station and/or intended destination (as defined in the policy) of the Insured making the trip impossible, provided that
 - ☐ The Govt. of India issues a travel advisory.



- ☐ Airport is shut down forcing the Airline to delay the flight for more than 24 hours or to cancel the flight.
 - ☐ Curfew is imposed by the City Administration.
6. Terrorist Attack in the home city and/or at departing station and/or destination listed on the insured's itinerary 3 days prior to the Insured's departure date and resulting that the Insured is unable to move out consequent upon such terrorist attack.
- For the purpose of this benefit immediate family member shall mean any member of the Insured Person's immediate family i.e the Insured Person's spouse, child or parent. children-in-law; siblings; siblings-in-law; parents; parents-in-law; grandparents; grandchildren; legal guardian, ward; step or adopted children; step-parents; who reside in the same country as the Insured Person

BENEFITS UNDER THE POLICY:

1. **TRIP CANCELLATION BENEFITS:** When the insured risk occurs before departure, the policy provides payment of the entire non-refundable, cancelled portion of the travel arrangements (As per coverage's shown in the policy schedule) i.e. Flight and/or Hotel Booking and/or other incidental expenses for which the insured has or contracted to be paid prior to his departure and which are not recoverable from any source, subject otherwise to the terms, conditions, limitations, exclusions and limit of Sum Insured opted under the Policy.
2. **TRIP INTERRUPTION BENEFIT:** The Company will pay this benefit up to the Maximum Limit as specified in the Policy Schedule for the Trips that have been interrupted or delayed due to operation of Insured Peril as mentioned hereinabove. The company will reimburse for the forfeited, non-refundable unused prepaid expenses made prior to Insured's departure date and additional reasonable and necessary transportation expenses incurred by him / her plus accommodation expenses maximum up to \$100 per night for
 - ☐ Return to Republic of India
 - ☐ Rejoining the remaining trip after its interruption during the period of trip. Due to operation of any of the insured peril.

However the benefits payable under this clause shall not exceed the cost of economy airfare by the most direct route less any refunds paid or payable.

SPECIFIC EXCLUSION

- 1 Travel arrangements being cancelled or changed by any airline, cruise line or the tour operator beyond insured peril
- 2 Voluntary changes in travel plans by the Insured giving rise to a claim under this section.
- 3 Any business or contractual obligations of the Insured and/or any family member except for termination or lay off of employment as defined above provided insured is not the Owner, proprietor, Majority Shareholder and Director of the said company.
- 4 Termination of employment due to any unlawful act of the insured.
- 5 Default / insolvency by and of the person, agency or tour operator from whom the Insured had bought his Travel arrangements.
- 6 Any governmental regulations or prohibition imposed by any Administrative Authority at the time or before booking of insured's travel arrangement.
- 7 Booking of the trip is undertaken ignoring the adverse situation as published by the Mass Media, Union Government, State Government and/or any Administrative Authority for travel to particular country or part of the country which may give rise to a claim.
- 8 Loss of visa charges shall not be paid under this section.

SPECIFIC CONDITIONS

- 1 It is a condition precedent to liability hereunder that in the event of any occurrence likely to give rise to a claim under this Insurance, that the Insured Person must notify insurer immediately.

While notifying the occurrence, the insured person must quote as much as information concerning the occurrence as is available including policy number and its date of issue.

- 2 It shall be the responsibility of Insured to take appropriate action to avoid or minimize any potential claim under policy (e.g. avoid intentional delay during interruption or not to travel to the country or part thereof for which warning has been issued.)
- 3 The insured must not be aware of any reason (as stated in the list of covered risks) at the time of opting of this extension that may give rise to a claim under the policy.
- 4 The company's liability shall be restricted to the sum insured opted by the Insured or the sum of total non-refundable amount whichever is less.
- 5 In case of partial cancellation of the trip, i.e. if only one or two members' trip is cancelled on account of operation of Insured peril, the company's liability shall be restricted to the non-refundable portion of insured's travel tickets only and not for Hotel Charges unless exclusive booking was made for each member. No partial charges of Hotel Booking for reduction in number of members will be allowed in such cases.
- 6 If the situation becomes normal against the alert of Quarantine issued earlier by the Govt. of India or if the prevention of travel is withdrawn by Govt. of India before the departure date mention in the schedule of policy and this information is available for the knowledge of General Public through any communication, the company shall not be liable for any claim in respect of such perils.
- 7 Operation of any of insured peril shall be considered only at the time of travel for all practical purposes in settlement of claims.

Section XV – Missed Connection

Coverage

If the confirmed onward connecting flight is missed at the transfer point due to the late arrival of the incoming confirmed connecting scheduled flight and no onward transportation is made available within 3 hours of actual arrival time of the incoming flight, the Company will provide for payment of allowance as specified in the Policy Schedule, towards transportation costs to join the trip (must be of the same or lower class of original tickets purchased) together with

1. expenses incurred in respect of reasonable hotel accommodation, restaurant meals or refreshments, if not provided by the carrier or other third party, subject to production of bills/receipts;
2. non-refundable, unused portion of the pre-paid expenses as long as these expenses are supported by a proof of purchase and is not reimbursable by another source.
3. Such delay must be authenticated by the airline in writing

Exclusions

This benefit does not cover any other loss other than those mentioned above under the head "coverage", directly or indirectly, in whole or in part, including loss caused by or resulting from any exclusion mentioned in the 'General Exclusions' section of this Policy

Section XVI - Personal Liability

Coverage

The Company shall indemnify the Insured/ Insured Person towards legal liability of the Insured Person to a third party for an incident which results in accidental death, injury or damage to the health or property of such third party whilst on a trip abroad during the period of insurance covered by this Policy, up to the limits specified in the Policy Schedule. The incident leading to the legal liability of the Insured/Insured



Person should have occurred during the period of insurance and whilst on a trip abroad covered by this Policy.

The deductible in respect of this benefit will be applicable for each and every claim separately, and shall be of an amount as specified in the Policy Schedule

Exclusions

The Company shall not be liable to make any payment under this Section in respect of the following:

1. Any claim arising from Insured/Insured Person's personal contractual liability or through promises made by the Insured/Insured Person.
2. Any claim of personal liability of the Insured Person towards his/her family, relations and travelling companions, whether personal or official.
3. Any claim resulting from transmission of an illness or disease by the Insured Person.
4. Any claim for damage resulting from professional activities/sports involving the Insured/ Insured Person.
5. Any claim for liability, arising directly or indirectly, from or due to:
 - a) possession of animals, birds, reptiles, insects etc. and their by-products like skin, hair, feathers, horns, fur, ivory, bones, eggs, etc.
 - b) ownership or possession of vehicles, aircrafts, water crafts, or activities of the Insured/Insured Person involving parachuting, hand-gliding, hot air ballooning or use of fire arms.
 - c) Any wilful, negligent, malicious or unlawful act.
 - d) Insanity, the use of any alcohol/drugs (except as medically prescribed) or drug addiction.
 - e) Any supply of goods or services on the part of the Insured/Insured Person.
6. Any ownership or occupation of land or buildings other than the occupation of any temporary residence.
7. Any exclusion mentioned in the 'General Exclusions' section of this Policy.

Special Conditions

1. The Company shall be responsible for contesting unjustified claims against the insured and providing indemnity for the damages, which the Insured/Insured Person has to pay. For indemnity to be provided against damages, the damages must be payable under an acceptance of liability given or approved by the Company or under a judicial decision rendered by a Court of Law.
2. If there is a legal action in process against the Insured/Insured Person over a personal liability issue, the Company may conduct the legal action, including appointment of legal counsel, at the Company's expense in the name of the Insured/Insured Person.
3. The Company will have the right, but in no case the obligation, to take over and conduct in the name of the insured/ insured person the defense of any claim and will have full discretion in the conduct of any proceedings and in the settlement of any claim and having taken over the defence of any claim, the Company may relinquish the same.
4. In the event the Company, in its sole discretion, chooses to exercise its right in pursuance of this condition, no action taken by the Company in the exercise of such right will serve to modify or expand in any manner, what the Company's liability or obligations under this Policy would have otherwise been had it not exercised its rights under these Special Conditions.

Section XVII- Financial Emergency Assistance

Coverage

In the event you require financial emergency Assistance following incidents like burglary/ theft of luggage/ money or hold up. The Service provider shall co-ordinate with your relatives in India to provide emergency cash assistance to Insured as per his/her requirement, up to the limit specified in the Policy Schedule.

Section XVIII - Hijack Distress Allowance

Coverage

This Section provides for payment of an allowance in the event of hijack of a common carrier in which the Insured/ Insured Person is traveling on a trip covered under this Policy as specified in the Policy Schedule.

The deductible in respect of this benefit will be applicable for each and every claim separately and shall be of the number of hours the common carrier has been under hijack, as specified in the Policy Schedule.
Exclusions

The Company shall not be liable to make any payment under this benefit in respect of the following:

1. Any incident where the Insured/Insured Person is suspected to be either principal or an accessory in the hijacking. Trip delay
- 2.
3. Any claim as a consequence of a change in the regular routes of travel/journey of the common carrier due to traffic, weather, fuel shortage, technical snag or security reasons.
4. Any exclusion mentioned in the 'General Exclusions' section of this Policy.

Section XIX - Home Fire Insurance (Contents)

Coverage

This Section provides for indemnity, against any loss, destruction or damage to the contents of the Insured Person's home in India caused by any of the fire and related perils specified hereunder whilst the Insured Person is on a trip abroad covered by the Policy.

I. Fire

Excluding destruction or damage caused to the property insured by

- (a) (i) Its own fermentation, natural heating or spontaneous combustion
(ii) Its undergoing any heating or drying process.
- (b) Burning of property insured by order of any Public Authority.

II. Lightning

III. Explosion/ Implosion

Excluding destruction or damage caused to the boilers (other than domestic boilers), economisers or other vessels in which steam is generated, machinery or apparatus subject to centrifugal force by its own explosion/implosion.

IV. Aircraft Damage

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

V. Riot, Strike, 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:

- a) Total or partial cessation of work or the retarding or interruption or cessation of any process or operations or omissions of any kind;
- b) Permanent or temporary dispossession resulting from confiscation, commandeering, requisition or destruction by order of the Government or any lawfully constituted authority;
- c) Permanent or temporary dispossession of any building or plant or unit or 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;
- d) 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 or public peace) in any malicious act.

Terrorism Damage Exclusion Warranty

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 of 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 expense 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 the Company 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/Insured Person.

In the event any portion of this endorsement is found to be invalid or unenforceable, the remainder shall remain in full force and effect

VI. Storm, Cyclone, Typhoon, Tempest, Hurricane, Tornado, Flood and Inundation (STFI)

VII. Impact Damage

Impact by any Rail/Road vehicle or animal by direct contact not belonging to or owned by

- (a) The Insured/Insured Person or any occupier of the premises or
- (b) Their employees while acting in the course of their employment.

VIII. Subsidence and Landslide including Rock Slide

Destruction or damage caused by Subsidence of part of the site on which the property stands or Land slide/Rock slide excluding:

- (a) The normal cracking, settlement or bedding down of new structures
- (b) The settlement or movement of made up ground
- (c) Coastal or river erosion
- (d) Defective design or workmanship or use of defective materials
- (e) Demolition, construction, structural alterations or repair of any property or groundworks or excavations.

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

X. Missile Testing operations

XI. Leakage from Automatic Sprinkler Installations

Excluding destruction or damage caused by

- (a) Repairs or alterations to the buildings or premises
- (b) Repairs, Removal or Extension of the Sprinkler Installation
- (c) Defects in construction known to the Insured/Insured Person.

XII. Bush Fire

Excluding destruction or damage caused by Forest Fire.

PROVIDED that the liability of the Company shall in no case exceed in respect of each item the sum expressed in the said Schedule to be insured thereon or in the whole the total Sum Insured hereby or such other sum or sums as may be substituted therefore by memorandum hereon or attached hereto signed by or on behalf of the Company.

Exclusions

This Section of the Policy does not cover

- 1 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.
- 2 Loss, destruction or damage directly or indirectly caused to the property insured by
 - a) Ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel;
 - b) The radioactive toxic, explosives or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.
- 3 Loss, destruction or damage caused to the insured property by pollution or contamination excluding
 - a) Pollution or contamination which itself results from a peril hereby insured against;
 - b) Any peril hereby insured against which itself results from pollution or contamination.
- 4 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.
- 5 Loss, destruction or damage to the stocks in Cold Storage premises caused by change of temperature.
- 6 Loss, destruction or damage to any electrical and/or electronic machine, apparatus, fixture or fitting (excluding fans and electrical wiring in dwellings) arising from or occasioned by over-running, excessive pressure, short circuiting, arcing, self-heating, or leakage of electricity, from whatever cause (lightning included).
- 7 Expenses necessarily incurred on
 - i. Architects, Surveyors and Consulting Engineer's Fees and
 - ii. Debris Removal by the Insured/Insured Person
 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.
- 8 Loss of earnings, loss by delay, loss of market or other consequential or indirect loss or damage of any kind or description whatsoever.
- 9 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.
- 10 Loss by theft during or after the occurrence of any insured peril except as provided under Riot, Strike and Malicious Damage cover.
- 11 Any Loss or damage occasioned by or through or in consequence directly or indirectly due to earthquake, volcanic eruption or other convulsions of nature.
- 12 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
- 13 Any exclusion mentioned in the 'General Exclusions' section of this Policy.

Special Conditions

1. This benefit 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.
2. 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, the Company 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.

3. If the interest in the property passes from the Insured otherwise than by will or operation of law, the insurance shall cease to attach as regards the property affected unless the Insured shall have before the occurrence of any loss or damage, obtained the sanction of the Company signified by endorsement upon the Policy by or on behalf of the Company
4. (i) On the happening of any loss or damage the Insured/Insured Person shall forthwith give notice thereof to the Company and shall within 15 days after the loss or damage, or such further time as the Company may in writing allow in that behalf, deliver to the Company
 - (a) 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.
 - (b) Particulars of all other insurance, if any.

The Insured shall also at all times at his own expense produce, procure and give to the Company 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 the liability of the Company as may be reasonably required by or on behalf of the Company 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 the terms of this condition have been complied with.

- (ii) In no case whatsoever shall the Company be liable for any loss or damage after the expiry 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 the Company 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.
5. On the happening of loss or damage to any of the property insured by this Policy, the Company may
 - (a) Enter and take and keep possession of the building or premises where the loss or damage has happened;
 - (b) 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;
 - (c) Keep possession of any such property and examine, sort, arrange, remove or otherwise deal with the same;
 - (d) 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 Company at any time until notice in writing is given by the Insured/Insured Person that he makes no claim under the Policy, or if any claim is made, until such claim is finally determined or withdrawn, and the Company shall not by any act done in the exercise or purported exercise of its powers hereunder, incur any liability to the Insured/Insured Person or diminish its rights to rely upon any of the conditions of this policy in answer to any claim.



If the Insured/Insured Person or any person on his behalf shall not comply with the requirements of the Company or shall hinder or obstruct the Company, in the exercise of its powers hereunder, all benefits under this policy shall be forfeited.

The Insured/Insured Person shall not in any case be entitled to abandon any property to the Company whether taken possession of by the Company or not.

6. If the Company at its option, reinstates or replaces 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, the Company shall not be bound to reinstate exactly or completely but only as circumstances permit and in reasonably sufficient manner, and in no case shall the Company 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 the Company thereon. If the Company so elects to reinstate or replace any property the Insured/Insured Person shall at his own expense furnish the Company with such plans, specifications, measurements, quantities and such other particulars as the Company may require, and no acts done, or caused to be done, by the Company with a view to reinstatement or replacement shall be deemed an election by the Company to reinstate or replace.

If in any case the Company 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, the Company 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.

7. 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 shall be considered as being his own insurer for the difference and shall bear a ratable proportion of the loss accordingly. Every item, if more than one, of the Policy shall be separately subject to this condition.
8. 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/Insured Person or by any other person or persons covering the same property, this Company shall not be liable to pay or contribute more than its ratable proportion of such loss or damage.
9. The Insured Person shall at the expense of the Company do and concur in doing, and permit to be done, all such acts and things as may be necessary or reasonably required by the Company for the purpose of enforcing any rights and remedies or of obtaining relief or indemnity from other parties to which the Company 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 indemnification by the Company.
10. 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 the Company.

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 the Company 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.



Notwithstanding what is stated above, the Sum Insured shall stand reduced by the amount of loss in case the Insured immediately on occurrence of the loss exercises his option not to reinstate the sum insured as above.

Section XX – Home Burglary Insurance (Contents)

Coverage

This Section provides for indemnity, against any loss, destruction or damage to the contents of the Insured Persons' unattended home in India caused by burglary and/or housebreaking specified hereunder whilst the Insured Person is on a trip abroad covered by the Policy.

The maximum amount payable under this Section as indemnity is limited to the Sum Insured as specified in the Policy Schedule in any one period of insurance irrespective of the number of such incidents or occurrences arising out of such incidents.

Jewellery kept in safe will be covered under this benefit as part of contents up to 20% of the Sum Insured as specified in the Policy Schedule or actuals whichever is less.

Exclusions

The Company shall not be liable to make any payment under this Policy for:

- 1 Loss or damage caused by the Insured/Insured Person's and/or Insured/Insured Person's employee(s) or agents and / or Insured/Insured Person's family member's direct or indirect involvement in the actual or attempted burglary;
- 2 Any loss or damage to, or on account of loss of, livestock, motor vehicles, pedal cycles, money, securities for money, stamp, bullion, deeds, bonds, bills of exchange, promissory notes, stock or share certificates, business books, manuscripts, documents of any kind, ATM debit or credit cards, precious stones that are not part of jewellery or ornaments, gold bullion (unless previously specifically declared to, and accepted by, the Company in writing
- 3 Loss or damage to any property/item illegally acquired, kept, stored or property subject to forfeiture in any manner whatsoever.
- 4 Loss or damage which is recoverable under Fire or Plate Glass Insurance Policy or any other policy.
- 5 Loss or damage directly or indirectly, proximately or remotely occasioned by or which arises out of or in connection with riot and strike, civil commotion, terrorist activities, earthquake, flood, storm, volcanic eruption, typhoon, hurricane, tornado, cyclone or other convulsions of nature or atmospheric disturbances.
- 6 Consequential loss or legal liability of any kind.
- 7 Loss of money and/or other property abstracted from safe following the use of the key to the said safe or any duplicate thereof belonging to the Insured Person, unless such key has been obtained by assault or violence or any threat thereof.
- 8 Loss of or damage to any property insured under this policy due to any misfeasance, malfeasance or nonfeasance or breach of trust in relation thereto by the Insured.
- 9 Any exclusion mentioned in the 'General Exclusions' section of this Policy.

Terrorism Damage Exclusion Warranty

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 of 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 expense 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 the Company 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/Insured Person.

In the event any portion of this endorsement is found to be invalid or unenforceable, the remainder shall remain in full force and effect

Section XXI - Loss of Deposit or Cancellation (Hotel & Airline)

Coverage

This Section provides that in the event of necessary and unavoidable cancellation of Hotel and Airline booking arrangement which is beyond the control of the Insured/Insured Person after this insurance has been effected, the Company will compensate the Insured/Insured Person against the loss of irrevocable deposits or charges paid in advance or contracted to be paid.

The Company will reimburse for the forfeited, non-refundable prepaid payments, made prior to the Insured/Insured Person's departure date after adjusting the proceeds of canceling or preponing of the arrangement, if any

Exclusions

The Company shall not be liable to make any payment under this Policy for:

- 1 Common carrier-caused delays, including an announced, organized sanctioned union labour strike that affects public transportation, unless the commencement of the period of insurance is prior to a date when the strike is foreseeable. A strike is foreseeable on the date the labour union members vote to approve a strike.
- 2 Travel arrangements cancelled or changed by an airline, cruise line, or tour operator, unless the cancellation is the result of inclement weather.
- 3 Changes in plans by the Insured/Insured Person, an immediate family member, or travelling companion for any reason.
- 4 Adverse change in financial circumstances of the Insured/ Insured Person, any family member, or a traveling companion.
- 5 Any business or contractual obligations of the Insured/Insured Person, any family member, or a traveling companion
- 6 Default by the person, agency, or tour operator from whom the Insured / Insured Person bought this Policy and/or made travel arrangements.
- 7 Any government regulation or prohibition.
- 8 An event or circumstance, which occurs prior to the commencement of the period of insurance.
- 9 On account of a felonious assault, where the Insured/Insured Person, any family member of the Insured/Insured Person, the traveling companion or traveling companion's family member has been a principal or accessory in the assault committed
- 10 Any exclusion mentioned in the 'General Exclusions' section of this Policy

Section XXII – Overbooked Flight

Coverage

If the Insured/Insured Person is denied boarding of an aircraft on a commercial scheduled flight due to over-booking, and no alternative transportation is made available within 12 hours of the scheduled



departure time of such flight, the Company will indemnify the Insured/Insured Person for expenses incurred, by evidence of bills/receipts in respect of hotel accommodation if not provided by the Carrier or any other third party and purchase of a new ticket, less refund, if any, obtained from the Carrier, subject to the Sum Insured specified against this Section in the Schedule to the Policy. The over-booked flight details to be obtained by the Insured/Insured Person must be verified in writing by the operators of the airline or their handling agents.

Exclusions

This benefit does not cover any other loss other than those mentioned above under the head “coverage”, directly or indirectly, in whole or in part, including loss caused by or resulting from any exclusion mentioned in the 'General Exclusions' section of this Policy.

Section XXIII – Bail Bond

Coverage

The Company shall provide the payment of bail amount to the appropriate authority/court on behalf of the Insured/ Insured Person if the Insured/ Insured Person is arrested or detained by Police or Judicial authorities, for any bailable offence whilst on a trip abroad covered by this Policy upto the limits specified in the Policy Schedule.

The deductible in respect of this benefit will be applicable for each and every claim separately, and shall be of an amount as specified in the Policy Schedule.

Exclusions

The Company shall not be liable to make any payment under this benefit in connection with or in respect of any expenses whatsoever incurred by the Insured/ Insured Person for:

1. All non-bailable offences as per the local law of the country in which the incident has taken place whilst the Insured is on a trip abroad
2. Any exclusion mentioned in the “General Exclusions” section of this Policy

Special Conditions

The Company will pay or arrange to pay through Emergency Assistance Service Provider to the Judicial Authority / Court directly on behalf of the Insured/Insured Person, the bail amount. This benefit would be for bailable offences only. The Insured shall appear in the Court on the date specified by the Court for trial and judgment. If the bail bond is forfeited due to the misconduct or negligence or any wrongful act of the Insured/Insured Person or otherwise for breach of the terms of such bail bond, then the amount of the bail bond will require to be repaid by the Insured to the Company within 1 month after the bail bond is forfeited and if the Company so deems necessary (whether on expiry of such 1 month or otherwise), the Insured will be liable to repay the bail amount together with interest thereon at 10% p.a. from the date of payment by the Company to the Court until receipt thereof from the Insured/ Insured Person, and all costs reasonably incurred by the Company in such behalf.

In case of death of the Insured Person, at the first instance, the immediate family member, and in case, where there is no immediate family member, the Insured Sponsor, if any, will be liable to produce the death certificate or the necessary documents, as per the local law, in the Court within 1 month (of such death) for the release of the bail amount to Emergency Service Provider. In case the Insured fails to do so, it is hereby agreed that the Company would have full right and authority to recover the bail amount from the Insured.

The amount will be refunded to the Company or Emergency Assistance Service Provider by the Court with which it was deposited as soon as the Court releases the bail amount with which the deposit was made. In no case the amount will be paid out to the Insured/Insured Person.



In the event the Court releases the bail amount to the Company/Emergency Assistance Service Provider and the bail amount has already been recovered from the estate of the Insured, it shall be paid back to the Insured's legal heir.

The judgment shall have no bearing on the refund of the deposit to the Company or Emergency Assistance Service Provider. If the Court imposes any penalty or fine on the Insured/Insured Person at the time of interim order or final judgment, then in that case the Insured Person will not be at the liberty to get the fine deducted or adjusted from the bail amount which was deposited by the Company or Emergency Assistance Service Provider.

Section XXIV – Legal Expenses

Coverage

The Company shall pay the legal costs and expenses incurred by the Insured/ Insured Person or the legal representative of the Insured Person, as the case may be, towards claims for from third parties for compensation for accidental death or disablement arising due to an injury whilst on a trip abroad up to the limits specified in the Policy Schedule.

The benefit under the Section is limited to the Sum Insured as specified in the Schedule to the Policy.

Exclusions

- 1 All the exclusions applicable to the Section III and IV- Personal Accident section and the Accidental Death and Permanent Total Disablement - Common Carrier will also be applicable to this Section in so far as the accidental death or disablement is concerned.
- 2 All exclusions mentioned in the 'General Exclusions' section of this Policy shall also apply to this Section

Section XXV– Pet Care

Coverage

This Section provides for payment of medical expenses including fees for the Veterinary Doctor's towards the medical care and treatment of the pet animal (limited to three either cats or dogs) of the Insured Person arising due to an injury sustained whilst under the care of a friend, relative, house servant, other family members of the house or a Professional Carrier in India during the Insured Person's trip abroad, covered under this Policy.

The benefit under the Section is limited to the Sum Insured as specified in the Schedule to the Policy

Exclusion

This benefit does not cover any other loss other than those mentioned above under the head "coverage", directly or indirectly, in whole or in part, including loss caused by or resulting from any exclusion mentioned in the 'General Exclusions' section of this Policy

Section XXVI – Emergency Accommodation

Coverage

This Section provides for payment of compensation for the additional cost of emergency accommodation if the Insured Person could not stay in the accommodation originally booked due to fire, flood, earthquake, storm, hurricane, explosion, outbreak of major infectious diseases.

Exclusion

This benefit does not cover any other loss other than those mentioned above under the head "coverage", directly or indirectly, in whole or in part, including loss caused by or resulting from any exclusion mentioned in the 'General Exclusions' section of this Policy.

Section XXVII - Alternate Employee/Substitute Employee Expenses

Coverage

This Section provides for reimbursement of cost of economy return fare incurred by the Insured towards sending an alternate employee for an uncompleted assignment abroad, in case the original employee of the Insured who has been sent on an assignment abroad and covered under this Policy, has to be transported back/repatriated to his place in India, due to illness, injury or in the event of his/her unfortunate accidental death arising due to an injury whilst abroad. The substitute employee must assume duties within 30 days from the date when the original employee could not attend to his duties.

Exclusion

All the exclusions and Special Conditions applicable to the Personal Accident section shall be applicable to this Section also as far as the accidental death due to injury of the original employee is concerned who is covered under the Policy as the Insured Person.

Section XXVIII – Loss of Laptop

Coverage

This Section provides indemnity to the Insured/Insured Person for the physical loss or damage to Laptop, carried under personal baggage on a trip abroad, due to any cause other than those excluded.

Exclusions

- a. The Excess stated in the Schedule to be borne by the Insured in any one occurrence. If, however, more than one property is lost or damaged in any one occurrence then the Insured shall not be called upon to bear more than the highest single excess applicable to such properties.
- b. Loss or damage caused by any defects existing at the time of commencement of the present insurance within the knowledge of the Insured/Insured Person, whether such defects were known to the Company or not.
- c. Loss or damage as a direct consequence of wear and tear or of gradual deterioration due to atmospheric conditions.
- d. Any costs incurred in connection with the elimination of functional failures unless such failures were caused by an indemnifiable loss of or damage to the insured properties.
- e. Any costs incurred in connection with the maintenance of the insured properties, such exclusion also applying to parts exchanged in the course of such maintenance operations.
- f. Loss or damage for which the manufacturer or supplier of the insured properties is responsible either by law or under contract.
- g. Loss of or damage to rented or hired property for which the owner is responsible either by law or under lease and/ or maintenance agreement.
- h. Consequential loss or liability of any kind or description.
- i. Loss of or damage to bulbs, ribbons, fuses, seals, belts, wires, chains, rubber belts, exchangeable parts, engraved cylinders, objects made of glass, porcelain or ceramics, sieves of fabrics, or any operating media (e.g. lubricating oil, fuel, chemicals).
- j. Aesthetic defects, such as scratches on painted polished or enamelled surfaces.

In respect of the parts mentioned under (i) and (j) above, the Company shall be liable to provide compensation in the event such parts are affected by an indemnifiable loss of or damage to the insured properties.

- k. Wilful misconduct/ negligence on the part of the Insured/Insured Person.
- l. Theft from car except from car of fully enclosed saloon type having all the doors, windows and other openings securely locked.

- m. Loss/damage while kept in a secure hotel room unless forcible entry was used to gain access to it.
- n. Loss/damage not reported to Police within 24 hours of the discovery of loss and a report obtained.
- o. Loss/damage due to confiscation or detention by Customs or any other public authority.
- p. Loss/damage while left unattended at a public place or in a public conveyance.
- q. Loss/damage while sent under contract of affreightment.

Section XXIX - Travel Loan Secure

This Section provides indemnity to the Insured Person in case the Insured Person has borrowed, for the purpose of this Trip, from an NBFC/Bank or any other entity authorized by relevant authorities in India. Indemnity will be provided for the following perils:

Accidental Death or Permanent Total Disablement of the Insured Person within 180 days from the date of such bodily injury and such bodily injury is the sole and direct cause of his death or permanent total disablement

Proceeds will be paid to the lending entity provided that the Insured Person has assigned benefits under this section of the policy in favor of the entity

Indemnity is provided to the extent of principal outstanding amount at the time of loss or Sum Insured as specified under this section in the Policy Schedule whichever is lower

SPECIFIC CONDITIONS:

This section does not cover the loan taken from any individual / firm / non-financial institution (including his/her own firm / company) other than Commercial Bank /licensed financial institutions. **EXCLUSION:**

No claim under this section would be paid if the death is due to or caused by

1. Directly or indirectly caused by contributed to related to or aggravated or prolonged by childbirth or pregnancy or in consequence thereof,
2. Due to participation in winter sports, skydiving, parachuting, hang gliding, bungee jumping, scuba diving, mountain climbing, riding or driving in races or rallies using a motorized vehicle or bicycle, caving or pot holing, hunting or equestrian activities, skiing, diving or other underwater activity, rafting or canoeing involving white water rapids, yachting or boating outside coastal waters (2 miles), participation in any Professional Sports, any bodily contact sport or any other hazardous or potentially dangerous sports.
3. Any loss falling under general exclusion of the policy

Section XXX - Mugging benefits

The Company shall pay or reimburse this as a benefit to the Insured/ Insured Person upto the limit of sum Insured as specified in the Schedule of Policy,

- If Insured / Insured person is hospitalized overseas as an inpatient for more than 24 hours due to an injury caused as a result of mugging.
- Such injury sustained by the insured shall be whilst on a Trip outside the Republic of India.
- Such incident shall be reported to the local police within 24 hours of the assault and shall be produce the report obtained from police during the claim.

The limit specified for this benefit shall be over and above the benefit received under Section I of Medical Expenses.



Mugging: A mugging is a violent, unprovoked attack by someone not insured on this policy which results in physical bodily injury, as shown in the police report

Section XXXI – Child Escort

The Company shall pay or reimburse for the travelling expenses of Insured / Insured person minor children aged below 17 years for return to India upto the limit of sum Insured as specified in the Schedule of Policy

- If the Insured / Insured person whilst on a Trip outside the Republic of India accompanied with his minor children, dies due to illness or accident covered under the policy.
- Such minor children/s is covered under this travel along with Insured / Insured Person
- Such minor children/s is not accompanied by any other adult family member.

Section XXXII - Overseas Travel Service Supplier Insolvency

This benefit shall pay or reimburse the below stated expenses incurred by the insured in case of pre booked tour by paying an advance with an Overseas Travel Service Provider located at the intended destination(s), provided an Overseas Travel Service Provider turns insolvent and the insured/insured person does not get intended service. This benefit is limited upto the limit of sum Insured as specified in the Schedule of Policy,

- The company will pay the reasonable cost of such rearrangement but not exceeding the cost that the insured has already incurred for intended journey and should be for the same standard of transportation and accommodation as was originally booked by the Insured for intended journey.
- In case of cancellation of journey because of non-rearrangement of Scheduled journey, the company shall be liable only up to the extent of non-refundable cost of unused travels for which the Insured has already paid, including agent's fee for such cancellation but limited to the amount of commission the agent had earned on pre-paid refundable amount of cancelled travel arrangements.
- Any additional expenses necessarily incurred on returning to Insured's home including reasonable hotel accommodation and transport expenses

The Company shall not be liable for:

1. If insolvency of any travel agent, tour wholesaler, tour operator or booking agent in India.
2. If Insolvency of a travel services provider if at the relevant time, the travel services provider was insolvent or a reasonable person would have reason to expect the travel services provider might become insolvent.
3. Claims arising directly or indirectly from war, acts of foreign enemies, hostilities or warlike operations (whether war be declared or not), civil war, rebellion, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power;
4. Accommodation expenses incurred after the pre-decided return date of the trip to insured's town.
5. Any other loss falling under the General Exclusions of the Policy

Section XXXIII - Loss of International driving License

The Company shall pay or reimburse to the Insured/ Insured Person upto the limit of sum Insured as specified in the Schedule of Policy incurred for obtaining a duplicate or fresh International Driving License either overseas or within 30 days upon the return to India, in the event of loss of Insured's International



Driving License Overseas during covered trip. The Insurer's liability to make payment is only in excess of the Deductible.

Exclusions

The Company shall not be liable for any claim under this Cover that is caused by or is attributable to or arises out of or is howsoever connected to any of the following:

- a) Any loss not reported to the police having jurisdiction at the place of loss within 24 hours of the incident and a written report is obtained from the police.
- b) Any loss arising from any delay, detention or confiscation by customs officials, police or other public authorities.
- c) Any loss arising from due to International Driving License left unattended or forgotten by the Insured in the public place or public transport, hotel or apartment.
- d) Any loss falling under the General Exclusions of this policy.

Procedure for making a Claim under Loss of International Driving License:

It is a condition precedent to the Insurer's liability that the Proposer and/or the Insured shall immediately:

- a) Give immediate notice of loss to the Indian Administration as also expeditiously give or arrange for the Indian.
- b) Administrator to be provided with any and all information and documentation in respect of the claim and/or the Insurer's liability for it that may be requested by the Insurer or by the Indian Administrator.
- c) Report the loss to the local police authorities and obtain a written report from them in relation to the loss and send it to the Indian Administrator.
- d) Furnish all documents mentioned in the Claim Documentation of this policy.

Section XXXIV - Bounced Hotel booking

This benefit shall pay or reimburse the below stated expenses, if the Insured / Insured Person has booked the hotel at destination points(s) with suppliers/agents outside Republic of India which is confirmed and could not obtained such hotel accommodation by the Insured/Insured person due to non-supply of services,

- a) Reasonable cost of Transportation expenses to the alternative hotel.
- b) The difference of cost in up gradation to a superior class of accommodation, wherever alternate accommodation is not available on the cost of pre-booked hotel. For this benefit the Insured shall be required to furnish proof that the alternate accommodation on the cost of pre-booked hotel is not available in the form of a certificate issued by the Alternate Accommodation Service Provider.

Section XXXV - Cruise cover

1. Missed Port Departure

In the event where the insured / Insured person fails to arrive at the international departure point in time to board the ship on which he has booked to travel on the initial international journey of his trip as a result of:

- a) The failure of scheduled public transport;
- b) An accident to or breakdown of the vehicle in which he is travelling;
- c) An accident or breakdown occurring ahead of him on a motorway or dual carriageway which causes an unexpected delay to the vehicle in which Insured is travelling; or Strike, industrial action or adverse weather conditions,

The company shall pay or reimburse the Insured / Insured Person reasonable additional reasonable accommodation (room only) and travel expenses necessarily incurred in joining the cruise ship journey at the next docking port upto the limit specified

2. UNUSED EXCURSIONS

The Company agrees to pay up to the amount shown in the table of benefits of policy schedule for the cost of pre-booked excursions, which insured / insured person were unable to use and which are not refundable from any other source as a direct result of being confined by the medical officer on the ship to insured/insured person own cabin due to an accident or illness which is covered under Medical section I and other expenses.

3. CRUISE INTERRUPTION

In the event of Insured/Insured person requiring hospital treatment on dry land due to temporary illness, the Company will pay or reimburse the amount specified in the schedule of the policy, the travel expenses incurred to reach the next port in order to re-join the cruise. The insured / Insured person has to submit a certificate from the medical practitioner in attendance to confirm the insured/ insured persons unforeseen illness or injury.

Specific exclusions

- a) Claims where less than 25% of the trip duration remains.
- b) Any claim arising directly or indirectly from a known medical condition prior to departure
- c) Anything mentioned in the General Exclusion

EXCLUSIONS for point 1

1. Claims arising directly or indirectly from:
 - a) Strike or industrial action or air traffic control delay existing or publicly declared by the date this insurance is purchased by insured/insured person or the date insured/insured trip was booked whichever is the later;
 - b) An accident to or breakdown of the vehicle in which insured/insured are travelling for which a professional repairers report is not provided;
 - c) Breakdown of any vehicle in which insured/insured person are travelling if the vehicle is owned by insured/insured and has not been serviced properly and maintained in accordance with manufacturer's instructions; or
 - d) Withdrawal from service (temporary or otherwise) of an aircraft or sea vessel on the recommendation of the Civil Aviation Authority or a Port Authority or any such regulatory body in a country to/from which Insured/insured person are travelling.
2. Additional expenses where the scheduled public transport operator has offered reasonable alternative travel arrangements.
3. Additional expenses where insured/insured person planned arrival time at the port is less than 3 hours in advance of the sail departure time if insured/insured person are travelling independently and not part of an integrated cruise package.
4. Anything mentioned in the General exclusions

Specific Condition

1. In the event of a claim arising from any delay arising out of traffic congestion obtain written confirmation from the Police or emergency breakdown services of the location, reason for and duration of the delay.
2. Allow sufficient time for the scheduled public transport or other transport to arrive on schedule time and to deliver insured/insured person to the departure point.

Section XXXVI - Debit / Credit Card Fraud/ FOREX CARD



The Company shall pay or reimburse to the Insured/ Insured Person upto the limit of sum Insured as specified in the Schedule of Policy incurred in respect of financial loss, arising out of fraudulent utilization of lost or stolen credit card of the Insured Person from the date such debit /credit card is reported lost till the date of lot listing provided

- The loss occurs during the period of Insurance
- The loss occurs during the Insured person is on foreign trip

Specific Conditions:

1. All claim under this section shall be payable in India and in Indian Rupees only.
2. Any suit or legal proceedings against the Company under this section shall be filed and instituted in the court having jurisdiction in India only.
3. Each insured person must take all reasonable steps to avoid any loss, damage or expense.

Exclusions

1. Any financial loss up to the amount of deductible as shown in the Policy Schedule.
2. Claims where Insured can or could have recovered his losses from any other source.
3. Claims where the card's reporting of loss procedures have not been followed immediately of its knowledge.
4. Any costs incurred in procurement of new card.
5. Any claim, arising out of any contractual liability
6. Any claim arising out of a loss where the Insured and/or Insured Person and/or his family member and/or business staff is involved as principal/accomplice.
7. Any loss falling under the general exclusions of Policy.
8. Any consequential loss of whatsoever nature.
9. Any liability due to misuse of card occurring after date of intimation to the merchant establishment by the Insured through the Hot Card Bulletin.
10. Any claim where loss is not notified to the local police immediately of its knowledge.
11. The Company shall not be liable to make any payment under this Policy in respect of any claim, if such claim be in any manner
Fraudulent or supported by any fraudulent statement or device, whether by the Insured Person or by any person acting on behalf of the Insured Person.

Section XXXVII - Car rental excess insurance

The Company shall reimburse to the Insured/ Insured Person upto the limit of sum Insured as specified in the Schedule of Policy (or equivalent in local currency), the "Excess Amount" that the Insured is obliged to pay arising from physical loss of or damage to the rental car whilst in the Insured's control and custody during the covered trip. This policy covers the Excess Charge following the theft or damage to Rental car including the undercarriage, windows and tyres.

The insurers will also reimburse to the Insured for the costs of followings for which the Insured is liable in case of insured event:

- CAR RENTAL KEY COVER: Replacing a lost or stolen rental car key, including replacement of locks and locksmith charges up to 20% of limit of indemnity under this section
- MISFUELING COVER: Cleaning out the engine and fuel system and associated towing costs up to 20% of the limit of indemnity as mentioned in the schedule, in case the Insured put wrong type of fuel in its rented vehicle,
- TOWING COSTS COVER: Towing or recovery costs following an accident or breakdown involving the Rental Vehicle, up to a maximum of 20% of the limit of indemnity under this section.



UNDER NO CIRCUMSTANCES THE TOTAL PAYMENT FOR ALL ABOVE CONTINGENCIES SHALL EXCEED THE LIMIT AS SHOWN IN THE SCHEDULE OF POLICY UNDER THIS SECTION

Specific Conditions:

1. All insured drivers must hold a valid and effective driving license, or hold a full internationally recognized license which must be effective at the time of incident.
2. Except with the written consent of the insurers, no person is entitled to admit liability on their behalf or to give any representations or other undertakings binding upon them. The insurer shall be entitled to the absolute conduct, control and settlement of all proceedings arising out of or in connection with claims in the name of the insured person.
3. The insurers may at their option take proceedings in the name of the insured person to recover compensation from any Third party in respect of any indemnity provided under this insurance and any amounts so recovered shall belong to the insurers and the insured person shall render all reasonable assistance to the insurers.
4. The cover under this section will incept from the time the Insured Person takes legal control of Rental Car and will cease at the time Rental Agency assumes back control of rented car, subject always to the condition that the custody of such rental car with the Insured Person is during the period of his covered Trip only.

Exclusions

The Company shall not be liable in respect of any claim made of:

1. Loss or destruction of or damage to any property whatsoever, or any liability, loss or exposure whatsoever resulting or arising there from or any consequential loss directly or indirectly caused by or contributed to or arising from
 - (a) ionizing radiation or contamination by radioactivity from any Nuclear fuel or any waste and the combustion of nuclear fuel or
 - (b) the radioactive toxic explosive or other hazardous properties or any explosive nuclear assembly or nuclear component thereof.
2. Operation of the vehicle in violation of the terms of the rental agreement.
3. Automobiles, or other vehicles, which are not rental vehicles and not rented from a licensed rental agency.
4. The rental of certain vehicles namely, motor homes, trailers or caravans, vans, trucks, non-passenger carrying vehicles, vehicles that carry more than 9 people including the driver, motorcycles, mopeds, motorbikes, off-road vehicles and recreational vehicles.
5. Expenses reimbursed by the insured person's employers' Insurer.
6. Applicable to car rental key cover – replacement of locks when only the parts need to be changed.
7. Applicable to misfueling cover – repair or replacement of any mechanical part or damage to engine arising from the use of the incorrect fuel, i.e. only cleaning charges are payable under this section.

Section XXXVIII - Golf Equipment Cover

In the event of Insured / Insured person's own or hired Golf Equipment and / or its accessories are lost due to theft or damaged during the entire trip, the Company shall reimburse to the Insured/ Insured Person upto the limit of sum Insured as specified in the Schedule of Policy, the market value of such lost or damaged equipment.

Market Value means replacement cost less appropriate depreciation as per the age of equipment

Exclusions

1. Following losses are not covered under the policy:
 - a. Any loss due to theft or damage to insured/insured person golfing equipment and accessories during insured's entire journey if he does not get a written PIR (Property Irregularity Report) issued by the airline. For the purpose he shall be required to lodge the complaint with the airline immediately.
 - b. Loss to golfing equipment and accessories at any other time if insured does not report the loss or theft to the local police within 24hrs of discovering it and get a written police report from them.
 - c. Loss or damage caused by delay, wear and tear, moths, vermin, weather and atmospheric conditions or mechanical failure.
 - d. Loss or damage to golfing equipment and accessories left unattended at any place.
 - e. Any loss or damage to the property due to confiscation or detention by any authority other than airline.
 - f. Any loss falling under the General Exclusions of the Policy
2. Any amount of loss which is refundable from any other source whatsoever it may be.

Conditions applying for the claim:

- a) The Insured must keep the damaged property for inspection of the insurer or its authorized representative at any time after the loss is reported to the insurer.
- b) The Insured shall be required to surrender the said damaged property to the insurer on demand by them at the time of final settlement of the claim or shall agree to deduct an appropriate salvage value from the claim amount admissible at the option of the insurers.
- c) If the claim involves a part of a set of Property, the insurer liability shall be limited to the value of that part which has been damaged or lost during the trip.
- d) Receipts for items lost, stolen or damaged or proof of ownership should be preserved properly so as to the Insured to substantiate his claim.
- e) The insured shall preserve all his recovery rights against the Third Party and shall be required to subrogate the same to the insurer at the time of settlement of claim.

4. GENERAL EXCLUSIONS (APPLICABLE TO ALL BENEFITS UNDER THE POLICY):

In addition to the exclusions that are applicable for the specific sections of the Policy as mentioned above in this Policy, the following exclusions apply to benefits under all Sections of the Policy

Without prejudice to anything contained in this Policy, the Company shall not be liable to make any payment in respect of, unless specifically stated otherwise in the Schedule to the Policy:

1. Any claim relating to events occurring before the commencement of the cover or otherwise outside of the period of insurance.
2. Any Pre-existing Condition and / or any complication arising from it
 - a) This policy is not designed to provide an indemnity with respect to medical services, the need for which arises out of a pre-existing condition as defined herein, in normal course of treatment. However in any of the threatening situation this exclusion shall not be applied and also that the cover will up to the limit shown under Life threatening condition / situation as defined in this policy.
3. Treatment abroad if that is the sole reason or one of the reasons for the Insured/Insured Person's temporary stay abroad
4. Any claim if the Insured Person –
 - a. Is travelling against the advice of a Physician;
 - b. Is receiving, or is on a waiting list to receive, specified medical treatment declared in the Physician's report or certificate;
 - c. Has received terminal prognosis for a medical condition;

- d. Is taking part in a naval, military or air force operation.
5. Deductibles as specified in the Policy Schedule.
6. No claim will be paid arising from suicide, attempted suicide or willfully self inflicted injury or illness, mental disorder, anxiety, stress or depression, venereal disease, alcoholism, drunkenness or the abuse of the drugs, or any loss arising directly or indirectly from any injury, illness, death, loss, expenses, or other liability attributable to HIV (Human Immunodeficiency Virus) and/or any HIV related illness Including AIDS (Acquired Immune Deficiency Syndrome) and/or any mutant derivative or variation thereof however caused
7. Congenital internal or external diseases, defects or anomalies, genetic disorders
8. Diseases, illness and accidents that are results of war and warlike occurrence or invasion, acts of foreign enemies, hostilities (whether war be declared or not), civil war, rebellion, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power, active participation in riots, confiscation or nationalisation or requisition of or destruction of or damage to property by or under the order of any government or local authority.
9. Any claim resulting or arising from or any consequential loss, directly or indirectly, caused by or contributed to or arising from:
 - a. Ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel or
 - b. The radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.
10. Any claim arising out of sporting activities in so far as they involve the training or participation in competitions of professional or semi-professional sports persons, Adventure Sports unless declared beforehand and necessary additional premium paid
11. No claim will be paid which arises from the insured Person engaging in Air Travel unless he or she flies as a passenger on an aircraft properly licensed to carry passengers. For the purpose of this exclusion, Air Travel means being in or on, or boarding an aircraft for the purpose of flying therein or alighting there from following a flight
12. Medical Expenses in respect of Experimental, investigational or unproven treatments or treatments which are not consistent with or incidental to the diagnosis and treatment of the positive existence or presence of any Illness for which confinement is required at a Hospital. Any Illness or treatment which is a result or a consequence of undergoing such experimental or unproven treatment
13. Any claim arising out of diseases, illnesses or accidents that the Insured/Insured Person has caused intentionally or by committing a crime or as a result of drunkenness or addiction (drugs, alcohol). However, treatment of mental and nervous disorders, including alcohol and drug dependency, will be covered subject to the limits specified in the Policy Schedule, if specifically agreed for and mentioned in the Policy Schedule. The payment for such medical expenses shall be limited to inpatient hospitalization in a Hospital/Nursing Home for a period more than 24 hours.
14. Any claim arising out of any act of terrorism which 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 organization(s) or government(s), committed for political, religious, ideological, or ethnic purposes or reasons including the intention to influence any government and/or to put the public, or any section of the public, in fear. This shall not apply in respect of Section **XVI** - Hijack Distress Allowance.
15. Naturopathy treatment
16. No claim will be paid for losses arising from accidents on two wheeled motorized vehicles unless at the time of the accident the driver is duly qualified, is in possession of a current full international Driving License and the Insured Person is wearing a safety crash helmet, or losses arising from accidents on two wheeled motorized vehicles over 50 cc.
17. No claims will be paid for losses arising directly or indirectly from manual work or hazardous occupation, self exposure to needless peril (except in an attempt to save human life) or if engaging in any criminal or illegal act.

GENERAL CONDITIONS OR PROVISIONS UNDER THE POLICY (APPLICABLE TO ALL BENEFITS UNDER THIS POLICY)

1. Policies covering single trips can be issued upto single trip not exceeding 365 days.
2. Of the covers indicated in this policy wording coverage available to the insured will be indicated in the Certificate of Insurance along with Sum Insured and Deductibles
3. Policies covering annual multi trips can be issued for annual period of one year covering multiple single trips within the annual period of insurance with each and every single trip not exceeding a specified number of days as mentioned in the Policy Schedule.
4. The Policy start date shall be on or before the trip start date.
5. Extension of the Period of Insurance of the Policy during the duration of the trip can be done only at the sole discretion of the Company depending upon the risk factors.
6. If the Insured /Insured Person does not declare the full current facts or declare wrong facts while requesting for extension of the Policy, any extension of such a Policy if granted shall be deemed to be invalid. No refund of premium will be given in case of extensions so invalidated. The Company will also not be liable to pay any claim filed under the extended Policy.
7. Termination of the Policy at a date earlier than the end date can be done only if the Insured Person returns back to the Republic of India earlier than the end date of the Period of Insurance of the Policy. Refund of premium for the days between the return date to the Republic of India and the end date of the Period of Insurance as mentioned in the Policy Schedule will only be given if the same are a minimum of 10 days. A cancellation charge will be deducted from the refund premium. Premium refunded will be equal to the amount of premium to be paid for the original Policy duration minus the premium to be paid by taking the return date as the new end date of Period of Insurance. No refunds will be given on policies with claims.
8. The premium payable for the extension of the Policy during the trip duration shall be the premium payable for the overall trip duration (including the extension) less the initial premium already paid.
9. Policy is applicable for one-way travel also, including immigration travel with a condition for maximum duration of coverage limited to specified number of days as mentioned in the Policy Schedule.
10. The Insured Person shall take all reasonable precautions in the normal course, to stay healthy and prevent disease, illness and injury. Failure to do so will prejudice the Insured/Insured Person's claim under this Policy.
11. The Insured / Insured Person shall provide the Company with the details of the trip and other information as may be required by the Company from time to time.
12. Deductible will be charged for each separate incident reported for claims payment, even though the claim may be registered under the same benefit more than once.
13. Claim Procedure – The procedure to be followed by the Insured / Insured person in case of any event that may give rise to a claim under this Policy, the claim documentation required to be submitted by the Insured / Insured Person at the time lodging claims as well as the claim settlement process are enumerated in the enclosed Claim Procedure attached to this Policy. Any failure on the part of the Insured / Insured Person in complying with the procedure or submission of required documents in support of his/her claim may prejudice the claim of the Insured/Insured Person.
14. Obligations of the Insured /Insured Person:
 - a. Insured / Insured Person shall provide to the Company or the Emergency Service Provider appointed by the Company, on demand any information that is required to determine the occurrence of the insurable event or the Company's liability to pay the benefits.
 - b. If requested to do so by the Company or the Emergency Service Provider appointed by the Company, the Insured / Insured Person is obliged to undergo a medical examination by a Medical Practitioner designated by the Emergency Service Provider for the purpose of settlement of claims only.. The cost towards the medical examination shall be borne by the Company
 - c. The Company or the Emergency Service Provider appointed by the Company is authorized to take all measures that are suitable for loss prevention and claim minimization which includes the Insured / Insured Person's transportation back to the Republic of India. The transportation of the Insured/Insured person back to India shall be done only on agreement and confirmation from the

attending medical practitioner/ panel doctor that the Insured/Insured Person is capable of being transported to India

- d. The Company shall be released from any obligation to pay benefits under this Policy, if any, of the aforementioned obligations are breached by the Insured/ Insured Person.

15. Transfer and Set-off of Claims:

- If the Insured / Insured Person have any outstanding claims against third parties, such claims shall be transferred in writing to the Company up to the amount for which the reimbursement of costs is made by the Company in accordance with the terms hereunder.
- In so far as an Insured / Insured Person receives compensation for costs he/she has incurred either from third parties liable for damages or as a result of other legal circumstances, the Company shall be entitled to set off this compensation against the insurance benefits payable.
- Claims to the insurance benefits may be neither pledged nor transferred by the Insured/ Insured Person.

16. The premium charged shall be based on the number of man days insured in each category at the commencement of the Policy Period, as declared by the Insured Person. Depending on the actual number of man days covered in the Policy Period in each category as at the last day of such Policy period, if the premium calculated on the actual number of man days shall differ from the premium charged at the commencement of the Policy, then such difference shall be paid to the Company or refunded by the Company as the case may be

17. Multiple Claims: In the event a claim is payable in multiple sections under this policy the Company's liability will be restricted to the highest amount payable per section.

18. In case a covered insured event, as described in the Benefit Section, occurs before date of purchase of this policy or advance warning is issued by the relevant authorities of the likelihood of such an event happening before date of purchase of this policy the Company shall not be liable to pay a claim.

GENERAL TERMS AND CONDITIONS (APPLICABLE TO ALL SECTIONS OF THIS POLICY)

1. Duty of Disclosure or Disclosure to information norm

The Policy shall be null and void and no benefit shall be payable in the event of untrue or incorrect statements, misrepresentation, mis-description or non-disclosure of any material particulars in the personal statement, declaration and connected documents, or any material information having been withheld, or a claim being fraudulent or any fraudulent means or device being used by the Insured/Insured Person or any one acting on his/their behalf to obtain a benefit under this Policy.

2. Observance of terms and conditions

The due observance and fulfilment of the terms, conditions and endorsement of this Policy in so far as they relate to anything to be done or complied with by the Insured / Insured Person, shall be a condition precedent to any liability of the Company to make any payment under this Policy.

3. Insured Person

Only those persons named as an Insured Person in the Schedule shall be covered under this Policy. Any person may be added as an Insured Person during the Policy Period after his application has been accepted by Us, additional premium to be paid and We have issued an endorsement confirming the addition of such person as an Insured Person

4. Alterations and Endorsements to the Policy

This Policy constitutes the complete contract of insurance. This Policy cannot be changed or varied by anyone (including an insurance agent or broker) except Us, and any change We make will be evidenced by a written endorsement signed and stamped by Us.

The following endorsement requests can be accepted by Us:

Sno	Scenarios	Before Policy Start Date	After Policy Start Date
1	Name Change	Allowed	Allowed

2	Address Change	Allowed	Allowed
3	DOB Change	Allowed	Allowed, subject to change in premium and company's guidelines
4	Change of Email	Allowed	Allowed
5	Change of Contact number	Allowed	Allowed
6	Change of Risk Start and/or End Date	Allowed	Not Allowed
7	Trip Extension	Not Allowed	Allowed
8	Change of Nominee	Allowed	Allowed
9	Change of Passport Details	Allowed	Not Allowed
10	Policy Cancellation	Allowed, only if request is received before 24 hours	Not Allowed
11	Plan Change	Allowed	Not Allowed
12	Geography Change	Allowed	Not Allowed

5. Loadings and / or exclusion

On change of your Occupation and / or risk profile, the coverage may cease, unless specifically agreed by Us. However in such case We may charge an additional loading or apply exclusion or both depending upon the risk profile

6. Reasonable Care

The Insured/ Insured Person shall take all reasonable steps to safeguard the health, travel and other aspects related to the Insured/ Insured Person against loss or damage that may give rise to a claim.

7. Material change

The Insured/ Insured Person shall immediately notify the Company in writing of any material change in the risk such as change in occupation, trip duration, country and location of travel, correction in age, nature of job and cause at his own expense such additional precautions to be taken as circumstances may require to ensure safety and containing the circumstances that may give rise to the claim, and the Company may adjust the scope of cover and / or premium if necessary, accordingly. The liability of Company shall continue only if there is a written acceptance on the part of the Insurance through endorsement

8. Fraudulent Claims

If any claim is in any respect fraudulent, or if any false statement, or declaration is made or used in support thereof, or if any fraudulent means or devices are used by the Insured/Insured Person or anyone acting on his/her behalf to obtain any benefit under this Policy all benefits and the premium paid under this Policy shall be forfeited.

The Company will have the right to reclaim all benefits paid in respect of a claim which is fraudulent as mentioned above under this Condition as well as under Condition No 1 of this Policy

9. No constructive Notice

Any knowledge or information of any circumstance or condition in connection with the Insured/Insured Person in possession of any official of the Company shall not be notice to or be held to bind or prejudicially affect the Company notwithstanding subsequent acceptance of any premium.

10. Notice of charge



The Company shall not be bound to take notice or be affected by any notice of any trust, charge, lien, assignment or other dealing with or relating to this Policy, but the payment by the Company to the Insured /Insured Person or his/her nominees or the legal representative, as the case may be, of any compensation or benefit under the Policy shall in all cases be an effectual discharge to the Company. In the cases of delay in the payment, the Company shall be liable to pay interest in line with the Protection of Policyholders' Interests) Regulations, 2002. The said act is available for reference in the website of the Insurance Development Regulatory Authority of India (IRDAI)

11. Overriding effect

The terms and conditions contained herein and in the Schedule shall be deemed to form part of the Policy and shall be read as if they are specifically incorporated herein.

12. Electronic Transaction:

The Insured/ Insured Person agrees to adhere to and comply with all such terms and conditions as the Company may prescribe from time to time and hereby agrees and confirms that all transactions effected by or through facilities for conducting remote transactions including the internet, world wide web, Electronic data interchange, call centres, teleservice operations (whether voice, video, data or combination thereof) or by means of electronic, computer, automated machines network or through other means of telecommunication established by or on behalf of the Company for and in respect of the Policy or its terms or the Company's other products and services, shall constitute legally binding and valid transactions when done in adherence to and in compliance with the Company's terms and conditions for such facilities, as may be prescribed from time to time. However, the terms of this condition shall not override provisions of any law(s) or statutory regulations including provisions of IRDAI regulations for protection of policyholder's interests. All conditions of section 41 prescribed necessary disclosures on terms, conditions and major exclusions shall be made known to the Insured/Insured Person; Any voice transaction shall be duly recorded, with the consent of the Insured/Insured Person and the recordings shall be maintained by or on behalf of the Company and shall be made available to the Insured/Insured Person for subsequent validation/confirmation of the Insured/Insured Person, if so required.

13. Duties of the Insured/ Insured Person on occurrence of loss

On the occurrence of any loss, within the scope of this Policy the Insured /Insured Person shall:

- a) Forthwith inform the Company and file/submit a Claim Form in accordance with 'Claim Procedure'.
- b) Allow the Medical Practitioner or the Surveyor or any agent of the Company to inspect the lost/damaged properties premises /goods as well as examine the Insured / Insured Person.
- c) Assist and not hinder or prevent the Company or any of its agents in pursuance of their duties.
- d) Not to abandon the insured property/items in the premises, nor take any steps to rectify/remedy the damage before the same has been approved by the Company or any of its agents or the Surveyor.

If the Insured/ Insured Person does not comply with this provision of this Clause, all benefits under this Policy shall be forfeited, at the option of the Company.

14. Right to inspect

If required by the Company, an agent/representative of the Company including a loss assessor or a Surveyor appointed in that behalf shall in case of any loss or any circumstances that have given rise to a claim to the Insured/Insured Person be permitted at all reasonable times to examine into the circumstances of such loss. The Insured /Insured Person shall on being required so to do by the Company produce all relevant documents relating to or containing reference relating to the loss or such circumstance in his possession including presenting himself for examination and furnish copies of or extracts from such of them as may be required by the Company so far as they relate to such claims or will in any way assist the Company to ascertain the correctness thereof or the liability of the Company under this Policy.

15. Position after a claim



The Insured/ Insured Person shall not be entitled to abandon any insured property whether the Company has taken possession of the same or not. As from the day of receipt of the claim amount by the Insured/ Insured Person, the Sum Insured for the remainder of the period of insurance shall stand reduced by the amount of the compensation.

In case of claims under Fire and Home Burglary Sections, the sum insured can be reinstated by payment of 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.

16. Condition of Average (applicable to Sections XVII and XVIII only)

If the property hereby insured shall at the time of loss 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 shall be considered as being his own insurer for the difference and shall bear a ratable proportion of the loss accordingly. Every item, if more than one, of the Policy shall be separately subject to this condition

17. Indemnity

The Company may at its option, if applicable reinstate, replace or repair the property or premises lost or damaged or any part thereof instead of paying the amount of loss or damage or may join with any other insurer in so doing. The Company shall not be bound to reinstate exactly or completely but only as circumstances permit and in reasonably sufficient manner. In no case shall the Company 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 and in any event not more than the sum Insured Person thereon.

If in any case the Company shall be unable to reinstate or repair the insured property/item, because of any law or other regulations in force affecting insured property or otherwise, the Company shall, in every such case, only be liable to pay such sum as would be requisite under this Policy. However, this condition shall not be applicable to Personal Accident, Accidental Death and Permanent Total Disablement – Common Carrier Sections

18. Subrogation

In the event of payment under this Policy, the Company shall be subrogated to all the Insured /Insured Person's rights or recovery thereof against any person or Organisation, and the Insured/Insured Person shall execute and deliver instruments and papers necessary to secure such rights. The Insured/Insured Person and any claimant under this Policy shall at the expense of the Company do and concur in doing and permit to be done, all such acts and things as may be necessary or required by the Company, before or after Insured /Insured Person's indemnification, in enforcing or endorsing any rights or remedies, or of obtaining relief or indemnity, to which the Company shall be or would become entitled or subrogated. However, this condition shall not be applicable to Personal Accident, Accidental Death and Permanent Total Disablement – Common Carrier Sections

19. Contribution

If at the time of the happening of any loss or damage covered by this Policy, there shall be existing any other insurance of any nature whatsoever covering the same, whether effected by the Insured/ Insured Person or not, then the Company shall not be liable to pay or contribute more than its rateable proportion of any loss or damage. However, this Section shall not be applicable to Personal Accident, Accidental Death and Permanent Total Disablement Sections.

20. Two Policy Period (Applicable for Annual policies only)

If the claim event falls within two policy periods, the claims will be paid taking into consideration the available sum insured in the two policy periods, including the deductibles for each policy period. Such eligible claim amount to be payable to the insured shall be reduced to the extent of premium to be received for the renewal or due date of premium of travel insurance policy, if not received earlier.

21. Forfeiture of claims

If any claim is made and rejected and no court action or suit commenced within 12 months after such rejection or, in case of arbitration taking place as provided therein, within 12 calendar months after the Arbitrator or Arbitrators have made their award, all benefits under this Policy shall be forfeited.

22. Free Look Period

The insured/ insured persons have a period of 15 days from the date of receipt of the Policy document to review the terms and conditions of this Policy.

If insured/ insured persons have any objections to any of the terms and conditions, they have the option of canceling the Policy stating the reasons for cancellation and the premium paid will be refunded, after adjusting the amounts spent on stamp duty charges and proportionate risk premium.

1. Insured(s) can cancel the Policy before the commencement of the Risk Period, or
2. Insured(s) may also cancel the policy after the commencement of the Risk Period (in case of annual risk policies only) subject to no claim under the policy, in which case the premium will be returned on pro-rata basis.

All the rights under this Policy shall immediately stand extinguished on the free look cancellation of the Policy.

Free look provision is not applicable and available at the time of renewal and/or at the time of subsequent trips for Annual Multi Trip Policy.

23. Termination / Cancellation

In case of Annual Policies, the Company may at any time, cancel this Policy, by giving 30 days notice in writing by Registered Post Acknowledgment Due to the Insured/Insured Person at his last known address. The company shall exercise its right to cancel only in case of mis-representation, non-disclosure of material facts and/or non-cooperation of the Insured / Insured Person in implementing the terms and conditions of this Policy. In such cases, policy shall be void and all premium paid thereon shall be forfeited to the Company as per the disclosure to information norm. The Insured /Insured Person may also give 30 days notice in writing, to the Company, for the cancellation of this Policy, in which case the Company shall from the date of receipt of notice cancel the Policy and retain the premium for the period this Policy has been in force at the Company's short period scales, provided that, no refund of premium shall be made if any claim has been made under this Policy by or on behalf of the Insured/Insured Person upto the date of cancellation of this Policy.

Policy Period	Rate Of Premium to be retained
Up to 15% of Policy Period	25% of premium paid
Up to 25% of Policy Period	50% of premium paid
Upto 50% of Policy Period	75% of premium paid
Exceeding 50% of Policy Period	100% of premium paid

In case of single trip policies, termination of the Policy at a date earlier than the end date can be done only if the Insured Person returns back to the Republic of India earlier than the end date of the Period of Insurance of the Policy. Refund of premium for the days between the return date to the Republic of India and the end date of the Period of Insurance as mentioned in the Policy Schedule will only be given if the same are a minimum of 10 days. A cancellation charge will be deducted from the refund premium. Premium refunded will be equal to the amount of premium to be paid for the original Policy duration minus the premium to be paid by taking the return date as the new end date of Period of Insurance, provided that, no refund of premium shall be made if any claim has been made under this Policy by or on behalf of the Insured/Insured Person.



24. Cause of Action

No claim shall be payable under this Policy where the cause of action arises in India, unless otherwise specifically provided in the Policy Schedule.

25. Policy Disputes

The parties to this Policy expressly agree that the laws of the Republic of India shall govern the validity, construction, interpretation and effect of this Policy. Any dispute concerning the interpretation of the terms and conditions, limitations and/or exclusions contained herein is understood and agreed to by both the insured and the Company to be subject to Indian law and in Indian Court.

26. Arbitration clause

If any dispute or difference shall arise as to the quantum to be paid under this Policy (liability being otherwise admitted) such difference shall independently of all other questions be referred to the decision of a sole arbitrator to be appointed in writing by the parties thereto or if they cannot agree upon a single arbitrator within 30 days of any party invoking arbitration, the same shall be referred to a panel of three arbitrators, comprising of two arbitrators, one to be appointed by each of the parties to the dispute/difference and the third arbitrator to be appointed by such two arbitrators and arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996.

It is clearly agreed and understood that no dispute or difference shall be referable to arbitration, as hereinbefore provided, if the Company has disputed or not accepted liability under or in respect of this Policy.

It is hereby expressly stipulated and declared that it shall be a condition precedent to any right of action or suit upon this Policy that the award by such arbitrator/arbitrators of the amount of the loss or damage shall be first obtained.

27. Renewability

The Company shall give notice for renewal of the Annual Multi Trip policies and accept renewal premium in all cases except in case of fraud, misrepresentation or non-cooperation of the Insured / Insured Person in implementing the terms and conditions of this Policy or if the renewal of Policy poses a moral hazard. Every renewal premium (which shall be paid and accepted in respect of this Policy) shall be so paid and accepted upon the distinct understanding that no alteration has taken place in the facts contained in the declaration herein before mentioned and that nothing is known to the Insured / Insured Person that may result to enhance the risk of the Company. No renewal receipt shall be valid unless it is on the printed form of the Company and signed by an authorized official of the Company.

This Policy provides 30 days Grace Period for renewing the Policy. However, there is no coverage for injury sustained or disease contacted during this (grace) period under this Policy. Renewal premium are subject to change with prior approval of IRDAI.

The Company may vary the renewal premium and/or benefits payable subject to approval from IRDAI and inform the same to the Insured at least 3 months prior to the date of revision and/ or modification

In the likelihood of this policy being withdrawn in future, the Company will inform the same to the Insured at least 3 months prior to expiry of the policy

Insured will have the option to migrate to other plan under similar travel insurance policy at the time of renewal (in case of Annual policies), provided the policy has been maintained without a break.

During currency of the policy, no change of plan or Sum Insured is allowed. The Company offer assured renewal of same plan / Sum Insured for lifelong. However in renewal of annual policies, insured can



enhance up to next available sum insured slab, subject to no claim in the previous policy and Good Health Declaration

28. Extension

The Company may in its sole and absolute discretion extend the Policy once during the Risk Period, provided that:

- 1) We receive the request for extension of the Policy and the applicable premium before the expiry date of the Policy Period.
- 2) We have received a good health and no claim declaration during the Risk Period.
- 3) The insured persons has not made a claim just before we receive the request for extension of the policy

The Company is under no obligation to extend the Policy or to extend the Policy on the same terms and conditions whether as to premium or otherwise.

29. Notices

Any notice, direction or instruction given under this Policy shall be in writing and delivered by hand, post, or facsimile to -

- a) In case of the Insured/Insured Person, at the address specified in the Policy Schedule.
- b) In case of the Company, to the Policy issuing office of the Company.

30. Customer Service

If at any time the Insured /Insured Person require any clarification or assistance, the Insured/Insured Person may contact either the Emergency Assistance Service Provider or the Policy issuing office of the Company at its address during normal office hours.

In respect of Senior Citizens, both the Company and Emergency Service Provider have established a separate channel to address the grievances. Any concerns may be directly addressed to the Senior Citizen's channel

31. Multiple Policies

If two or more policies are taken by an insured during a period from one or more insurers to indemnify treatment costs, there will not be any contribution clause (Clause 20 mentioned above) and the insured can seek settlement of claim from any insurer.

However if the amount claimed is in excess of Sum Insured under a single policy, after considering the deductible and/or co-pay, insured can seek settlement of claim as per his/ her choice but company shall settle the claim with contribution clause

GRIEVANCES REDRESSAL PROCEDURE

We are committed to extend the best possible services to its customers. However, If Insured/ Insured Person have a grievance that insured/insured person wish us to redress, insured/insured person may contact us with the details of his/her grievance through:

- Our website : www.bharti-axa.co.in
- Email : customerservice@bharti-axa.co.in
- Phone : 080 - 49123900
- Courier : Any of Our Branch office or corporate office

Insured/ Insured Person may also approach the grievance cell at any of Our branches with the details of the grievance during Our working hours from Monday to Friday.

Escalation Level 1

For lack of a response or if the resolution still does not meet the expectations through one of the above methods, Insured/ Insured Person may contact Our Head of Customer Service at

Bharti AXA General Insurance Co. Ltd.,
First Floor, The Ferns Icon,
Survey No. 28 Next to Akme Ballet, Doddanekundi,
Off Outer Ring Road, Bangalore – 560037

Escalation Level 2

In case the Insured/Insured Person has not got his/her grievances redressed by Us within 14 days, Or, If Insured/Insured Person is not satisfied with Our redressal of the grievance through one of the above methods, they may approach the nearest Insurance Ombudsman for resolution of their grievance. The contact details of Ombudsman offices are mentioned below

LIST OF INSURANCE OMBUDSMEN

Office of the Ombudsman	Areas of Jurisdiction	Name of the Ombudsman and Office Address
AHMEDABAD	Gujarat, Dadra & Nagar Haveli, Daman and Diu.	Office of the Insurance Ombudsman, 2nd floor, Ambica House, Near C.U. Shah College, 5, Navyug Colony, Ashram Road, Ahmedabad – 380 014. Tel.: 079 - 27546150 / 27546139 Fax: 079 - 27546142 Email: bimalokpal.ahmedabad@gbic.co.in
BENGALURU	Karnataka.	Shri. M. Parshad (Ombudsman) 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: bimalokpal.bengaluru@gbic.co.in
BHOPAL	Madhya Pradesh & Chhattisgarh	Shri. R K Srivastava (Ombudsman) Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp. Airtel, Near New Market, BHOPAL (M.P.)-462023 Tel.: 0755-2569201, Fax : 0755-2769203 Email: bimalokpalbhupal@airtelmail.in
BHUBANESHWAR	Orissa	Shri. B. N. Mishra (ombudsman) Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar – 751 009. Tel.: 0674 - 2596461 /2596455 Fax: 0674 - 2596429 Email: bimalokpal.bhubaneswar@gbic.co.in
CHANDIGARH	Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir, Chandigarh.	Shri Manik Sonawane (Ombudsman) Office of the Insurance Ombudsman, S.C.O. No. 101, 102 & 103, 2nd Floor, Batra Building, Sector 17 – D, Chandigarh – 160 017. Tel.: 0172 - 2706196 / 2706468 Fax: 0172 - 2708274 Email: bimalokpal.chandigarh@gbic.co.in

CHENNAI	Tamil Nadu, Pondicherry Town and Karaikal (which are part of Pondicherry).	Shri Virander Kumar Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018. Tel.: 044 - 24333668 / 24335284 Fax: 044 - 24333664 Email: bimalokpal.chennai@gbic.co.in
NEW DELHI	Delhi	Smt. Sandhya Baliga (Ombudsman) Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel.: 011 - 23239633 / 23237539 Fax: 011 - 23230858 Email: bimalokpal.delhi@gbic.co.in
GUWAHATI	Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura	Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati – 781001(ASSAM). Tel.: 0361 - 2132204 / 2132205 Fax: 0361 - 2732937 Email: bimalokpal.guwahati@gbic.co.in
HYDERABAD	Andhra Pradesh, Karnataka and UT of Yanam – a part of the UT of Pondicherry	Shri. G. Rajeswara Rao (Ombudsman) 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 - 65504123 / 23312122 Fax: 040 - 23376599 Email: bimalokpal.hyderabad@gbic.co.in
JAIPUR	Rajasthan.	Shri. Ashok K. Jain (Ombudsman) Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141 - 2740363 Email: bimalokpal.jaipur@gbic.co.in
ERNAKULAM	Kerala, Lakshadweep, Mahe-a part of Pondicherry.	Shri. P. K. Vijayakumar 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@gbic.co.in
KOLKATA	West Bengal, Bihar, Sikkim, Jharkhand, Andaman & Nicobar Islands.	Shri. K. B. Saha Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 / 22124340

		Fax : 033 - 22124341 Email: bimalokpal.kolkata@gbic.co.in
LUCKNOW	Uttar Pradesh and Uttaranchal	Shri. N. P. Bhagat Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, Lucknow - 226 001. Tel.: 0522 - 2231330 / 2231331 Fax: 0522 - 2231310 Email: bimalokpal.lucknow@gbic.co.in
MUMBAI	Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane.	Shri. A. K. Dasgupta Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 022 - 26106552 / 26106960 Fax: 022 - 26106052 Email: bimalokpal.mumbai@gbic.co.in
PUNE	Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region.	Shri. A. K. Sahoo Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 2nd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune – 411 030. Tel.: 020 - 32341320 Email: bimalokpal.pune@gbic.co.in

IRDAI REGULATION NO 5: This Policy is subject to regulation 5 of IRDAI (Protection of Policyholder's Interests) Regulation

Claims Procedure

1. In the event of an accident or sudden illness which is likely to give rise to a claim under this Policy, the Insured Person shall immediately contact the Emergency Assistance Service Provider giving details of the Policy issued to him/her. The details of phone numbers and Help Line are given in the Schedule attached to this Policy.
2. The first call will have to be made by the Insured Person giving his/ her contact number and subsequent calls will be made by the Service Provider at the contact number given by the Insured Person.
3. The Insured Person or his representative shall provide to the Emergency Assistance Service Provider maximum information about the illness, accident or occurrence as is available, as well as other information such as the Policy number etc. Emergency Assistance Service Provider shall assist the Insured Person in getting admitted in to a hospital / getting treatment from a Medical Practitioner as an outpatient.
4. Where it is not possible to make an emergency call before consulting a Medical Practitioner or going into hospital, the Insured Person shall contact the Emergency Assistance Service Provider as soon as possible. In either case, when being admitted as a patient, the Insured Person shall inform the Medical Practitioner or personnel at the hospital, the details of his/her policy coverage and shall state the details of the Emergency Assistance Service Provider and request them to contact them.
5. Failure to comply with the claims procedure stated above may prejudice the claim of the Insured Person as the liability of the Company will attach, in the case of Medical Expenses, only if the same are incurred with the concurrence of Emergency Assistance Service Provider. Any delay on the part

of Insured in submitting the claim papers may be condoned up to maximum of additional one month, subject to justifiable ground being there

6. If proper intimation is given, the Emergency Assistance Service Provider shall give a benefit guarantee (cash less in-patient hospitalisation as well as outpatient treatment) to the hospital / other providers for the costs of hospitalization, transportation by emergency services, emergency evacuation, transportation home, repatriation or transportation of mortal remains and burial listed under Scope of Coverage under the Policy. These costs will be settled directly by the Emergency Assistance Service Provider on behalf of and for the account of the Company. The Insured Person shall release Medical Practitioners/hospital contacted by Emergency Assistance Service Provider from their duty not to disclose information about his/her case.
7. In such cases, the Insured Person before his discharge from the Hospital, shall fill up and sign the claim form and hand over the same to the Hospital authorities to be handed over to Emergency Assistance Service Provider. Please send the duly signed claim form along with all the documents to designated TPA within 14 days of the occurrence of the Incident. We may accept the documents upto 30 days from the date of discharge, if insured/insured person would be able to provide sufficient cause for the delay in submission of the documents
8. Where no information is given to Emergency Assistance Service Provider and the payment for hospital treatment / outpatient treatment has been made by the Insured Person, the reasons therefore shall have to be given by the Insured / Insured Person along with the claim form giving details of treatment and bills for expenditure to the Company OR Emergency Assistance Service Provider. After examining the facts and establishing the liability, in consultation and with the approval of the Company Emergency Assistance Service Provider will reimburse to the Insured Person the costs incurred within the Scope of Coverage of the Policy on behalf of and for the account of the Company.
9. Besides where Insured or Insured Person and Emergency Assistance Service Provider agree that even though the procedure under Claims Procedure is complied with, the claim should be settled on a reimbursement basis (in consultation and with the approval of the Company), then it will be done so accordingly.
10. With respect to Emergency evacuation or repatriation, the following services shall be arranged by the Company through the Emergency Assistance Service Provider:
 - a) Transferring the Insured/Insured by air ambulance, regular airline or any other method of transport that is ascertained as being appropriate by the Emergency Assistance Service Provider and/or the Company. The method of transport and the date and time shall be decided by the Emergency Assistance Service Provider and/or Company
 - b) If the Insured/Insured Person is admitted to a Hospital then and if in the opinion of the appointed Medical Practitioner, the medical facilities in the hospital are not suitable or adequate, the Insured/Insured Person will be evacuated to the nearest place where appropriate services are available or to his/her permanent place of residence in India
 - c) Arrangement of reasonable and necessary transport and additional accommodation costs for another person to accompany the Insured/Insured Person if it is Medically Necessary that the Insured/Insured Person be accompanied in this way; this might be a Medical Practitioner, nurse, relative, friend or colleague
 - d) In the event of death of the Insured/Insured Person due to an insured event in terms of this policy, arrangements for bringing transporting the mortal remains of the deceased back to the Republic of India or reimbursement of cost of local burial or cremation in the country where the death occurred. An official death certificate and a physician's statement giving the cause of death needs to be submitted.

The Company will not be liable in respect of the emergency evacuation or repatriation service for:

- a) Any failure to provide the emergency evacuation or repatriation service or for any delays in providing it, unless the failure or delay is caused by the negligence of the Company and/or the Emergency Assistance Service Provider
- b) Failure or delay in providing the emergency evacuation or repatriation service if:
 - a. By law the overseas evacuation or repatriation service cannot be provided in the country in which it is needed; or



- b. The failure or delay is caused by any reason beyond our control including, but not limited to, strikes and flight conditions.
- c) Injury or death caused while the Insured/Insured Person is being moved unless it is caused by the negligence of the Company/Emergency Assistance Service Provider or the negligence of anyone acting on the behalf of the Company/Emergency Assistance Service Provider

11. Quick turnaround time shall be ensured in case the Emergency Assistance Service Provider arranges the emergency evacuation. The Company shall review and monitor the promptness and quality of the service, turnaround time and accessibility provided by the Emergency Assistance Service Provider in the interest of the policyholder and shall take due course of action based on the results of the review.

12. Claims, if any, for Total Loss of Checked Baggage, Personal Accident and Loss of Passport will be settled in Indian Rupees in consultation and with approval of the Company, on return of the Insured Person to India. In such cases, the claim form with details is to be submitted to the Company OR Emergency Assistance Service Provider

13. Claims, if any, for Total Loss of Checked Baggage, Personal Accident and Loss of Passport will be settled in Indian Rupees in consultation and with approval of the Company, on return of the Insured Person to India. In such cases, the claim form with details is to be submitted to the Company OR Emergency Assistance Service Provider.

14. Reimbursement of all claims by the Emergency Assistance Service Provider will be in India, in Indian Rupees at the exchange rate specified by the Reserve Bank of India, as applicable on the date the amount is billed.

15. The Company shall only be liable to indemnify if, besides proof of insurance cover, the documentary proofs required as per the claims procedure stated in the Policy, is also submitted



16. The total loss of checked baggage caused by an international carrier (airlines) must be reported to the International Carriers (airlines) and a Property Irregularity Report (P.I.R) shall be obtained from them. Original report together with the ticket(s), baggage tag(s) and the claim form are to be submitted in support of a claim by the Insured Person to the Company OR Emergency Assistance Service Provider.

17. A loss of passport must be reported to the police authorities within 24 hours of discovery of such loss and an official report obtained from the Police authorities. The original official report of the Police authorities should also be submitted along with the claim form to the Company OR Emergency Assistance Service Provider

18. Failure to comply with the claims procedure stated above in respect of Total Loss of Checked Baggage and Loss of Passport, may prejudice the claim of the Insured Person.

19. Claims for reimbursement shall be submitted to the Company OR Emergency Assistance Service Provider within one month after completion of the treatment or transportation home. In the event of accidental death, the same shall be submitted within one month after transportation of mortal remains/burial.

20. The Insured and the Insured Person shall provide Emergency Assistance Service Provider / the Company on demand with any information that is required to determine the occurrence of the insured event or the scope of the Company's liability. In particular, at the request of Emergency Assistance Service Provider / the Company proof shall be furnished of the actual commencement of the trip abroad.

21. If requested to do so by Emergency Assistance Service Provider / the Company, the Insured Person and/or the Insured shall authorise Emergency Assistance Service Provider / the Company to obtain all the information considered necessary from third parties (Medical Practitioners, dentists, alternative practitioners, medical institutions of any kind, insurance carriers, health or pension offices) and release these parties from their obligation not to disclose information.

22. If requested to do so by Emergency Assistance Service Provider / the Company, the Insured Person is obliged to undergo a medical examination by a Medical Practitioner designated by Emergency Assistance Service Provider / the Company.

23. In case of any claim under Personal Liability, Legal Expenses or Bail Bond proof of judicial decision rendered by a Court of Law may be required.

24. In case of any accident giving rise to a claim under the Personal Accident section of the Policy, the Insured/ Insured Person, his/her nominee or legal representatives, as the case may be, shall provide complete information and details about the Insured Person in the claim form along with the following documents to the Company OR Emergency Assistance Service Provider. Such a claim will be settled only in India in Indian rupees.

25. Upon receipt of all required documents, the offer of settlement will be made within 30 days. Settlement (payment) of claim will be made within 7 days of receipt of acceptance in response to offer of settlement, failing which penal interest (in compliance with applicable regulations) at a rate 2% higher than bank rate prevailing as on the date of beginning of financial year in which the claim is reviewed

List of documents required for Claims processing:

Medical Emergency	<ul style="list-style-type: none"> claim form duly filled and signed along with attending Medical Practitioner statement
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		<ul style="list-style-type: none"> • Policy Copy • Medical reports and discharge summary issued by the hospital or prescriptions and medical records from the medical practitioner furnishing the name of the insured ,period of treatment and details of treatment rendered i.e. line of treatment and final diagnosis. • Original hospital bills with proper description of services rendered and payment receipts towards expenses incurred • Attending Surgeon's/Medical Practitioner's Prescription advising hospitalization • Name, Address and Phone number of the local medical officer/family physician in India. • Copy of Air tickets and boarding passes for the sector travelled • Copy of passport, visa with entry and exit stamp • And any other document as may be appropriately applicable for the claims preferred under this section of the Policy
Emergency Evacuation	Medical	<ul style="list-style-type: none"> • Medical reports (Presenting complain, Diagnosis, Treatment given, Discharge condition etc.) and transportation details issued by the evacuation agency, prescriptions and medical report by the attending Medical Practitioner furnishing the name of the Insured Person and details of treatment rendered along with the statement confirming the necessity of evacuation; • Documentary proof for all expenses incurred towards the Medical Evacuation. • Claim Form duly filled in and signed • Copy of policy Certificate • Original Air Ticket / Boarding passes or copy of passport with visa entry and exit stamp.
Repatriation of Mortal Remains		<ul style="list-style-type: none"> • Copy of the death certificate, Clearance from the Indian Consulate. (Also providing details of the place, date, time, and the circumstances and cause of death;) • Copy of the postmortem certificate, if conducted; • Documentary proof for expenses incurred towards disposal of the mortal remains including the name of the airlines, burial details, expenses incurred, other incidental cost with bifurcation of expenses. • In case of transportation of the body of the deceased to the Country of Residence or Place of Residence, the receipt for expenses incurred towards preparation and packing of the mortal remains of the deceased and also for the transportation of the mortal remains of the deceased. • Quotation or estimate of repatriation cost • Claim Form dully filled and signed by nominee. • Copy of policy Certificate • Original Air Ticket/Boarding passes or copy of passport with visa entry and exit stamp • Invoices (Itemized) and money receipts in original for the amount claimed. • Copy of Cancelled Passport
Dental Expenses		<ul style="list-style-type: none"> • Original Claim form duly filled and signed • Dental Records (Presenting complain, diagnosis, treatment given,

	<p>discharge condition etc.)</p> <ul style="list-style-type: none"> • All the test and X-ray reports • Prescription from the doctor • Copy of policy Certificate • Name, address, contact no, fax no, e-mail id of the Local Medical Officer (LMO)/ Dentist in India • Invoices (itemized) and Money receipts in original for the amount claimed • Copy of Air tickets and Copy of boarding pass and copy of passport with visa entry and exit stamp.
Personal Accident- Accidental Death	<ul style="list-style-type: none"> • Police report in original if the accident shall have taken in the public place or premises • Death Certificate clearly stating the reason of death • Post Mortem Report (In case of death) • Detailed Sequence of events • Medical records giving the details of accident, nature of injury(in case of hospital visit) • Certificate of disability from civil surgeon in India or any other equivalent recognized doctor authorized by state government. • Medical report from the attending doctor • Letter from the Airline confirming the same.(• Valid ticket or certificate from the Common Carrier establishing the Insured Person's bonafide travel in the affected Common Carrier at the time of the Accident. • Claim Form duly filled in and signed • Copy of policy Certificate • Depending upon the peculiarity of the case, additional documents/information's will be asked for
Permanent Disability (PTD)& Permanent Partial Disablement (PPD)	<ul style="list-style-type: none"> • Police report in original if the accident shall have taken in the public place or premises • Detailed Sequence of events • Medical records giving the details of accident, nature of injury(in case of hospital visit) • Certificate of disability from civil surgeon in India or any other equivalent recognized doctor authorized by state government. • Valid ticket or certificate from the Common Carrier establishing the Insured Person's bonafide travel in the affected Common Carrier at the time of the Accident. • Claim Form duly filled in and signed • Copy of policy Certificate • Depending upon the peculiarity of the case, additional documents/information's will be asked for

Total Loss of Checked in Baggage	<ul style="list-style-type: none"> • Duly filled and completed claim form • Policy copy • Air tickets along with boarding passes • Copy of passport with exit and entry stamps • Copy of baggage tag's • Property Irregularity Report issued by the common carrier mentioning the number of baggage's checked-in. • Original Certificate from airline authorities stating that baggage has been lost along with compensation details • Adequate proof of ownership of items contained within checked-in baggage valued in excess of Indian rupee equivalent of US\$100
Delay of Checked in Baggage	<ul style="list-style-type: none"> • Duly filled and completed claim form • Policy Copy • Copy of passport, visa with entry and exit stamp • Air tickets and boarding pass • Property Irregularity Report issued by the common carrier. • Certificate from airline authorities clearly stating the date and time of delay and delivery of the baggage. • Original bills towards toiletries, medication and clothing during the delay period • Letter/communication clearly stating the compensation details offered by the Airlines/Third Party
Compassionate Visit	<ul style="list-style-type: none"> • Claim Form duly filled in and signed • Copy of policy Certificate • Travel Details: Air Ticket and Boarding passes or copy of passport with visa entry and exit stamp • Medical record of the patient. Discharge Summary, Presenting complain, diagnosis, treatment given, etc.) • Certificate from the Treating Medical Officer mentioning the need for a companion (If no adult member from the family is available) • Money receipts in original for expenses incurred towards air tickets and stay of the insured/Immediate Family Member • Depending upon the peculiarity of the case, additional documents/information's will be asked for
Home Insurance Burglary	<ul style="list-style-type: none"> • Duly filled and completed claim form • Copy of first information report/policy report. • Copy of final investigator report/non-detectable certificate issued by the police authorities/magisterial order.Original Air Ticket/Boarding passes or copy of passport with visa entry and exit stampOriginal receipts for all items claimed. If not available, provide description of items and the date, place and price of purchasePanchnama • Depending upon the peculiarity of the case, additional documents/information's will be asked for • Letter of undertaking/subrogation form obtained from the insured.
Loss of Passport	<ul style="list-style-type: none"> • Duly filled and completed claim form

	<ul style="list-style-type: none"> • Policy Copy • FIR/Copy of police report mentioning the reason of loss • Bills/receipts of expenses incurred in obtaining a fresh/duplicate passport and other related expenses • Copy of new passport and previous passport (if available). • Air Ticket, Boarding passes and copy of passport with visa entry and exit stamp
Trip cancellation and interruption	<ul style="list-style-type: none"> • Duly signed claim form • Policy Copy • Proof of death or hospitalization of insured person or of spouse, parents & children.(if applicable) • Medical reports and doctors statement if trip is cancelled or interrupted due to medical reasons. (if applicable) • Termination letter from the company if trip is cancelled due to employments.(if applicable) • Letter from the airlines clearly mentioning the reason of cancellation and interruption of flight(if applicable) • Proof of material loss or damage to the property (eg police report, media coverage) (if applicable) • Copy of complete schedule itinerary for all the sectors • Copy of new itinerary in case trip got reschedule along with boarding passes • Copy of Passport with visa entry and exit stamp • Copies of reimbursement statements issued by an airline carrier, airport facility, car rental agency, travel agent, hotel/ motel or other similar establishment or any other insurance company providing reimbursement to you for the loss • All original bills and receipts for expenses which got forfeited, non-refundable in nature. All original bills and receipts for additional reasonable and necessary transportation expenses and accommodation charges due to interruption of schedule flight
Missed connection	<ul style="list-style-type: none"> • Duly signed claim form • Policy Copy • Copy of complete schedule itinerary for all the sectors • Copy of new itinerary in case trip got reschedule along with boarding passes • Copy of Passport with visa entry and exit stamp • Copies of reimbursement statements issued by an airline carrier, airport facility, car rental agency, travel agent, hotel/ motel or other similar establishment or any other insurance company providing reimbursement to you for the loss • All original bills and receipts for expenses which got forfeited, non-refundable in nature. • All original bills and receipts for additional reasonable and necessary transportation expenses and accommodation charges due to interruption of schedule flight
Trip Delay	<ul style="list-style-type: none"> • Policy Copy • Orig Original bills and receipts towards reasonable additional expenses during the delay i.e. meals and lodging • Copy of passport/visa with entry and exit stamp • Letter from the airline clearly stating the period of delay

	<ul style="list-style-type: none"> • Copy of boarding pass for the schedule trip and actual trip • Dully filled and signed claim form • Covering Letter with sequence of events
Personal Liability	<ul style="list-style-type: none"> • Claim Form duly filled in and signed • Copy of policy Certificate • Original Air Ticket/Boarding passes or copy of passport with visa entry and exit stamp • FIR/Police Report • Sequence of the events leading to Personal Liability • Witness Statement • Copy of policy report(in case of legal case) • Copy of the court award- Notice from the Third party claiming the amount • Depending upon the peculiarity of the case, additional documents/information's will be asked for
Personal Accident- Accidental Death and Total Disablement and partial Disablement- Common Carrier	<ul style="list-style-type: none"> • Duly filled and signed claim form. • Policy Copy • Discharge summary. • Death certificate mentioning the cause of death(in case of death) • Original treating doctor certificate describing disablement • Disability Certificate issued by Civil Surgeon or equivalent as authorized by State Government, medical reports, case histories, investigation reports, treatment papers as applicable. • Original photograph of the injured reflecting the disablement. • Leave certificate from the employer. • Copy of air ticket and boarding pass. • Copy of cancelled passport(in case of death) Copy of all the documents proving transport of the insured in the carrier (in case of common carrier accident)
Hijack Daily Allowance	<ul style="list-style-type: none"> • Policy Copy. • Dully filled and signed claim form • A police report confirming the incident. It should contain the passport number of the insured and period of hijacking • Letter from the airline clearly stating period of hijack and media coverage details.(e.g photograph, videos, newspaper cutting • Copy of passport/visa with entry and exit stamp • Copy of the air ticket and boarding pass
Substitute Employee/Alternative Employee	<ul style="list-style-type: none"> • Dully filled and Signed claim form • Policy copy • Medical records • Medical certificate from the attending physician establishing illness/accident • Original air ticket and boarding pass of the substitute employee • Copy of passport with visa entry and exit stamp • Proof towards obtaining a new ticket for alternative employee
Mugging Benefit	<ul style="list-style-type: none"> • Dully filled and signed claim form • A police report confirming the incident • Medical reports from the hospital clearly mentioning the treatment details along with date and time of admission and discharge • Hospital Bill

Financial Emergency Assistance	<ul style="list-style-type: none"> • Copy of passport with visa entry and exit stamp • Claim Form duly filled in and signed • Copy of policy Certificate • Travel Details: Original Air Ticket/Boarding passes or copy of passport with visa entry and exit stamp • FIR/Police report lodged at the place of loss within 24 hours. • Details of items robbed -Details of funds (Cash, credit/debit cards, travelers cheque available) available with you • Sequence of events • Please confirm if you are staying alone or with any friends, family, relatives. • Copy of foreign exchange slip for the lost cash • Details of travel history for past 5 years • Details of travel insurance taken in past 3 years prior to this policy • - Depending upon the peculiarity of the case, additional documents/information's will be asked for
Home Fire Insurance	<ul style="list-style-type: none"> • Claim Form duly filled in and signed • Copy of policy Certificate • Original Air Ticket/Boarding passes or copy of passport with visa entry and exit stamp • Fire Department report/Police report. • Original receipts for all items claimed. If not available, provide description of items and the date, place and price of purchase • Panchnama • Newspaper cutting/Media report - Depending upon the peculiarity of the case, additional documents/information's will be asked for
Loss of Deposit or Cancellation(Hotel & Airline)	<ul style="list-style-type: none"> • Claim Form – completed and signed by the Insured. • Copy of policy Certificate • Copy of passport, visa with entry and exit stamp. • Copies of boarding pass, ticket, baggage tags. • Original letter from the concern authority mentioning the amount paid to them or contracted to be paid due to the booking. Also confirming the cancellation and refund details If any • Original Air ticket/itinerary, where you were originally supposed to travel • Medical record (If the cancellation was due to any medical reason) • Money receipt in advance for the amount paid or contracted to be paid due to the booking. • Depending upon the peculiarity of the case, additional documents/information's will be asked for •
Overbooked Flight	<ul style="list-style-type: none"> • Claim Form – completed and signed by the Insured. • Copy of policy Certificate • Copy of passport, visa with entry and exit stamp. • Copies of boarding pass, ticket, baggage tags. • Original letter from the concerned Airline confirming the overbooked flight & when the next alternative transportation is available with refund or compensation amount if any. • Money receipt in original for the expenses made towards reasonable

	<p>additional cost incurred for staying in a similar hotel or purchasing a new ticket</p> <ul style="list-style-type: none"> • Original Air ticket/itinerary, where you were originally supposed to travel • Depending upon the peculiarity of the case, additional documents/information's will be asked for
Bail Bond	<ul style="list-style-type: none"> • Claim Form duly filled in and signed • Copy of policy Certificate • Original Air Ticket/Boarding passes or copy of passport with visa entry and exit stamp • A written confirmation from the appropriate authority/court, mentioning the offence committed and if it is bail able or not. • Sequence of events • Money receipt in original from the appropriate authority/court for the amount paid towards the bail
Legal Expenses	<ul style="list-style-type: none"> • Claim Form duly filled in and signed • Copy of policy Certificate • Original Air Ticket/Boarding passes or copy of passport with visa entry and exit stamp • Medical report from the attending doctor abroad. • Death Certificate (For Death Case) • Post Mortem Report (For Death Case) • Copy of FIR / Police Report • Sequence of events • Certificate of disability from civil surgeon in India or any other equivalent recognized doctor authorized by state government. • Original invoices and receipts of legal expenses • Depending upon the peculiarity of the case, additional documents/information's will be asked for
Pet Care	<ul style="list-style-type: none"> • Claim Form • Copy of policy Certificate • Travel Details: Original Air Ticket/Boarding passes or copy of passport with visa entry and exit stamp • Medical Record • Prescription from the Veterinary Doctor • Invoices (itemized) and Money receipts in original for the amount claimed • A confirmation letter from the person, who was taking care of your pet during your trip abroad • Depending upon the peculiarity of the case, additional documents/information's will be asked for
Emergency Accommodation	<ul style="list-style-type: none"> • Claim Form duly filled in and signed • Copy of policy Certificate • Travel Details: Original Air Ticket/Boarding passes or copy of passport with visa entry and exit stamp • Letter in original mentioning the reason with refund details (If any) from the hotel or concern authority where you were originally supposed to stay but could not stay due to fire, flood, earthquake,

	<p>storm, hurricane, explosion, outbreak of major infectious diseases</p> <ul style="list-style-type: none">• Booking confirmation• Money receipt in original for the expenses made towards the extra cost of travel and accommodation• Depending upon the peculiarity of the case, additional documents/information's will be asked for
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