



# BAJAJ ALLIANZ GENERAL INSURANCE COMPANY LTD.

Regd. Office & Head Office: Bajaj Allianz House, Airport Road, Yerawada, Pune-411006.

**IRDAI Registration No.113** 

Corporate Identity Number: U66010PN2000PLC015329

Insured Name	HARSH SINGH CHAUHAN	Policy Number	OG-25-1149-1871-00007758		
er,policy/claim servicing, notices and or summons					
on by policy [or certificate of insurance] hold-New Delhi, New Delhi, , , WEST DELHI-110015 PH:011-66278000					
Policy Issuing, correspondence address for communic-	-				

# Welcome to Bajaj Allianz Family

### HARSH SINGH CHAUHAN

H No-418, O Block, Jalvayu Vihar, Near Shivam, Hospital, Sec 31, Gurgaon, Gurgaon-122001, GURGAON, Haryana-122001

# Customer ID: 405718155

Dear Customer,

Thank you for choosing Bajaj Allianz General Insurer as your preferred insurer. Bajaj Allianz General Insurance Company Limited, a consistently profitable insurer enjoys a reputation of expertise, stability and strength. We are a customer focused market leader present in over 200 locations across India. As an organization we strive to understand the risk management needs of our consumers and translate it into affordable products and services of global quality that deliver value for money. Bajaj Allianz has an ISO Certified claims, Operations and Services processes and has received iAAA rating for the last three consecutive years from ICRA Limited, an associate of Moody's Investors Service, for claims paying ability. The rating indicates highest claims paying ability and a fundamentally strong position in the industry.

We request you to kindly go through the contents of the policy schedule and the terms and conditions. In case of any clarification or disagreement, please write to us at <a href="mailto:bagichelp@bajajallianz.co.in">bagichelp@bajajallianz.co.in</a> within fifteen days of receipt of this policy.

We assure you the best of our services and look forward to a continual patronage and association with you.

For & on the behalf

Bajaj Allianz General Insurance Company Ltd.

<u>Authorized Signatory</u>



# Bajaj Allianz General Insurance Company Ltd.

Regd. Office & Head Office: Bajaj Allianz House, Airport Road, Yerawada, Pune-411006 **IRDAI Registration No. 113** 

Corporate Identity Number: U66010PN2000PLC015329

Transcript of Proposal for Standalone Own Damage Cover for Two Wheeler

### Dear HARSH SINGH CHAUHAN,

We wish to inform you that the contract under policy number 'OG-25-1149-1871-00007758' has been finalized based on the proposal / information and declaration given by you, the transcript whereof is mentioned below. You are requested to reconfirm the same. In case of any disagreement or objection or any changes with respect to information mentioned below, we request you to please revert back within a period of 15 days from date of your receipt of this transcript along with Policy failing which it will be deemed that you have positively confirmed/ are satisfied with the correctness of the details mentioned below. Kindly note that as the contents and declarations contained in this transcript is the basis on which we have issued the policy to you, we advise you to please ensure that you have provided/disclosed and or not withheld any material facts/information and declarations, as Policy becomes Void ab initio if material facts are not provided/disclosed and or withheld and in such case no claim, if any, will be considered by us apart from forfeiture of the premium.

Details provided by you:

# A. Proposer details

1. Proposer Name : HARSH SINGH CHAUHAN

: H No-418, O Block, Jalvayu Vihar, Near Shivam, Hospital, Sec 31, Gurgaon, Gurgaon-122001 2. Proposer Address

, , GURGAON, Haryana-122001

3. Proposer Mobile Number : 6394880264

4. Proposer Residential Number : NA

5. Proposer e-mail id : HARSHCHAUHAN.GO@GMAIL.COM

6. Proposer Profession : NA

# **B.Vehicle Details**

Registration Number	Month / Year of Regn	Vehicle Make	Vehicle Model	Vehicle Sub Type	Cubic Capa- city	Fuel Type	Year of Man- ufacture	Seating Capacity
HR98M5876	OCT/2023	BAJAJ	PULSAR N	DUAL	165	Petrol	2023	2
			160	CHANNEL				
				ABS				

Engine Number	Chassis Number	Vehicle IDV (in	Electrical	Non-Electrical	CNG/LPG Unit	Total IDV (in
		Rs.)	Accessories	Accessories	(Extra fitted)	Rs.)
			IDV (in Rs.)	IDV (in Rs.)	IDV (in Rs.)	
PDXCPD51714	MD2B54DXXPC	107073	0	0	0	1,07,073.00
	D27990					

### C. Coverage opted

1.	Own Damage Standalone Cover	Period of Insurance	From: 27-OCT-2024 00:00 (Hrs) To: 26-OCT-2025 Midnight
	Database Asia Third Data	Period of Insurance	From: 08-OCT-23 To: 07-OCT-28
2.	2. Details of Active Third Party Liability Policy	Name of Insurance Company	Bajaj Allianz General Insurance Co Ltd.
		Policy Number	OG-24-1149-1826-00022121

3. Is your vehicle fitted with external LPG/CNG kit : No. 4. Electrical Accessories cover Opted (If Applicable) : No. 5. Non - Electrical Accessories cover Opted (If Applicable): : No. : No. 6. Is Voluntary Excess opted Amount of voluntary excess opted : Rs.NA. : Rs.100.00 7. compulsory deductible 8. Is any additional compulsory deductible imposed and agreed upon : No. Amount of additional compulsory deductible imposed : NA. 9. Whether geographical area extension is opted : No. Details of Countries to which geographical area extension cover is given : NA. 10. Pre Existing damages in the vehicle : NA. 11. Total Premium (excluding GST) for OD coverages, quoted and agreed upon is : Rs.2038 12. Do you have valid PUC certificate of the vehicle  $\cdot NA$ 13. NCB (No Claim Bonus) claimed by you and granted by us based on your : -20 %. declaration of no claim during your previous policy

- 14. Previous Own Damage Policy Detail
- (i) Insurer Name Bajaj Allianz General Insurance Co Ltd..
- (ii) Previous Policy No. OG-24-1149-1826-00022121, Previous Policy Expiry Date:07-OCT-2024
- 15. Whether your vehicle is Hypothecated and if so the details of Pledgee whose name is registered by us: No. Name of Pledgee: NA.
- 16. Add on Cover(s) opted: Yes

Plan Name: Drive Assure- Silver Plan Description: consumable expenses, depreciation shield, engine protector, Please call us on 1800 103 5858 for any emergency.

17. To support our Go Green initiative, send policy copy link on registered mobile number / email id:

Please note Cover Note No. / issued to you basing on the above information. In case of Disagreement or objection or any changes with respect to information and contents mentioned hereinabove, please contact our toll free number & register your objections/changes/disagreement to the contents of this transcript or you may also send us email or written correspondence at the following details within a period of 15 days from date of your receipt of this transcript along with Policy:

I/We hereby unconditionally allow the Company to share all my / our information being collected in this proposal form or through telephonic / email / web-inputs means or other means, as updated from time to time within group entities.

 $:\ 1800\hbox{-}102\hbox{-}5858,1800\hbox{-}209\hbox{-}5858$ Toll free Number : Bagichelp@bajajallianz.co.in Email address Website : www.bajajallianz.com

Contact our policy servicing branch at: New Delhi, New Delhi, , , WEST DELHI-110015 PH:011-66278000.

INSURANCE ACT, 1938 SECTION 41 - PROHIBITION OF REBATES

No person shall allow or offer to allow either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectus or tables of the insurer. ANY PERSON IN BREACH OF COMPLYING WITH THE PROVISIONS OF THIS SECTION SHALL BE PUNISHABLE WITH FINE WHICH MAY EXTEND TO RUPEES TEN LAKH.Bajaj Allianz General Insurance Co Ltd





# BAJAJ ALLIANZ GENERAL INSURANCE COMPANY LIMITED

Regd. Office & Head Office: GE Plaza, Airport Road, Yerwada, Pune-411006(India)

IRDAI Registration No. 113

Corporate Identity Number: U66010PN2000PLC015329

### STANDALONE OWN DAMAGE COVER FOR TWO WHEELER

# **Certificate of Insurance**

# UIN: IRDAN113RP0002V01201920

			ni, New Delhi, , , WEST 0015 PH:011-66278000
Insured Name	HARSH SINGH CHAUHAN Policy	Number	OG-25-1149-1871-00007758
	Certific	ate No.	NA

INSU	JRED DETAILS		POLICY DETAILS		
Insured Address	H No-418, O Block, Jalvayu	Policy Issued on	24-OCT-2024		
	31, Gurgaon, Gurgaon-122001, GURGAON, Haryana-122001	B1, Gurgaon,Gurgaon-122001 , ,	Period of Insurance	For Own Damage Section	For Third Party Liability Section
	Gerrori, Haryana 122001			From: 08-OCT-23 To: 07-OCT-28	
		Third Party Liability	Name of Insurance Co	Policy Number	
		Section	Bajaj Allianz General ( Insurance Co Ltd.	)G-24-1149-1826-00022121	
Customer ID	405718155	Policy Status	ISSUED		
GSTIN / UIN	NA	Cover Note Details	/		
Place of Supply/State Code/Name	06 - Haryana	Previous Policy No	OG-24-1149-1826-000221 Insurance Co Ltd.	21 / Bajaj Allianz General	

# **Particulars of Vehicle Insured:**

<b>Registration Number</b>	Place of Registration	Engine Number	Chassis Number	Make & Model
HR98M5876	GURGAON	PDXCPD51714	MD2B54DXXPCD27 990	BAJAJ - PULSAR N 160

Sub Type	Year of Mfg	NCB %	CC	Seating Capacity
DUAL CHANNEL ABS	2023	-20	165	2

: GURGAON **Name of Registration Authority** 

: HARSH SINGH CHAUHAN Name and Address of Insured

: H No-418, O Block, Jalvayu Vihar, Near Shivam, Hospital, Sec 31, Gurgaon, Gurgaon-122001, , GURGAON, Haryana-122001

Geographical Area : .00 **Business or Profession** : NA

# Persons or Class of Persons entitled to drive:

Any person including the insured:

- a) Provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license.
- b) Provided also that the person holding an effective learner's license may also drive the vehicle and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989.

# **IMT-Endorsements/Add on Package**

& Plan Name: Drive Assure- Silver & Plan Description: consumable expenses, depreciation shield, engine protector,

# **Beneficier Details:**

Contact our 24 Hour Call Centre at 1800-102-5858, 1800-209-5858, Toll Free: 30305858( chargeable, add area code before this number in case of mobile call) Email us at  ${\bf Bagichelp@\,bajajallianz.co.in\,or\,Visit\,our\,\,Website\,\,www.bajajallianz.com}$ 

Corporate Identification Number U66010PN2000PLC015329

Beneficier1	Beneficier2	Beneficier3	Beneficier4	Beneficier5

# **Limitations as to Use:**

The Policy covers use for any purpose other than

a) Hire or Reward, b) Carriage of goods (other than samples or personal luggage), c) Organized racing, d) Pace Making, e) Speed testing, f) Reliability Trials, g) Any purpose in connection with Motor Trade

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

For & On Behalf of

Bajaj Allianz General Insurance Company Ltd.

**Authorized Signatory** 





BAJAJ ALLIANZ GENERAL INSURANCE COMPANY LIMITED Regd. Office & Head Office: GE Plaza, Airport Road, Yerwada, Pune-411006(India) IRDAI Registration No. 113

Corporate Identity Number: U66010PN2000PLC015329

# STANDALONE OWN DAMAGE COVER FOR TWO WHEELER **POLICY SCHEDULE** IRDAN113RP0002V01201920

 $\begin{array}{c} \textbf{Policy issuing office and Correspondence address for communication by policyholder for claim, service request, notice, summons, etc: \\ \text{New Delhi, New Delhi, }, \text{ WEST DELHI-} 110015 \text{ PH:} 011-66278000 \end{array}$ 

The coverage under this policy is only for Own Damage and no other liability in connect with the vehicle.

Policy will be void ab initio in case of misrepresentation/ fraud or non-existence of valid Third party liability policy for the full Policy period of this Standalone own damage cover-Two Wheeler policy

INSURED DETAILS				
Insured Name	HARSH SINGH CHAUHAN			
Insured Address	H No-418, O Block, Jalvayu Vihar, Near Shivam, Hospital, Sec 31, Gur- gaon, Gurgaon-122001, GURGAON, Haryana-122001			
Geographical Area	.00			
Customer ID	405718155			
Bank Reference No 1				
GSTIN / UIN	NA			
Place of Supply/ State Code/Name	06 - Haryana			
Company GSTIN	07AABCB5730G1ZZ			
Company PAN	AABCB5730G			
Invoice No	437476416/2			

	POLICY DETAILS					
Policy Number	OG-25-1149-187	71-00007758				
Policy Issued on	24-OCT-2024 07	7:46 AM				
Details of Own Damage Stan- dalone Cover	Policy Period	From :27-OCT-2024 00:00 (Hrs) To :26-OCT-2025 Midnight				
	Policy Period	From: 08-OCT-23 To: 07-OCT-28				
Details of Active Third Party Liab-	Name of Insurance Co.	Bajaj Allianz General Insurance Co Ltd.				
ility Policy	Policy Number 24-1149-1826-000					
Cover Note Details	/					
Previous Policy No	OG-24-1149-1826-00022121 / Bajaj Al lianz General Insurance Co Ltd.					

Registratio	on Number	Place of Registration	Engine Number	Chassis Number	Make & Mod- el	SubType
HR98M	M5876	GURGAON	PDXCPD51714	MD2B54DXXPCD 27990	BAJAJ - PULSAR N 160	DUAL CHANNEL ABS
NCB %	CC/KW	Seating Capacity	Year Of Manufactur- ing	Trailer Registration Number Hypothecation De		ion Details
-20	165	2	2023	-,-	Not App	licable
Vehicl	le IDV	Value For Trailers	Non electrical accessories	Electrical/Electronic accessories	Value of CNG/ LPG kit	<b>Total Value</b>
1070	073	0	0	0	0	1,07,073.00

Contact our 24 Hour Call Centre at 1800-102-5858, 1800-209-5858, Toll Free: 30305858( chargeable, add area code before this number in case of mobile call) Email us at Ba $gichelp@\,bajajallianz.co.in\,\,or\,\,Visit\,\,our\,\,Website\,\,www.bajajallianz.com$ 





Own Damage Premium(Rs.)			
Own Damage Premium	2038		
Integrated GST (18%)	367		
Final Premium Rs.	2405		

Final Premium(In Words): Rupees Two Thousand Four Hundred Five Only

\*\*Note: The above Total OD Premium is inclusive of all applicable Loading /Discounts viz (Automobile association membership, Voluntary Excess, Anti Theft, Handicap Person, Driver Tuition, Fiber Glass, CNG/LPG Unit, Geographical Extension, Imported Vehicle Etc. wherever Applicable)

As per the GST regulations, the amount of GST will not be refunded if the policy / endorsement is cancelled after 30th September of the next financial year I/We hereby declare that though our aggregate turnover in any preceding financial year from 2017-18 onwards is more than the aggregate turnover notified under sub-rule (4) of rule 48, we are not required to prepare an invoice in terms of the provisions of the said sub-rule.

MISP Code	40002629	Contact No.	09555022222/01145877777			
MISP Name	JSB AUTO CARS PVT LTD					
E-Mail ID.	JSBBAJAJ@JSBGR	OUP.IN				

Limitation as to Use	The Policy covers use of the vehicle for any purpose other than: Hire or reward, Carriage of goods( other than samples or personal luggage), Organised racing, Pace making, Speed testing, Reliability trials. Any purpose in connection with Motor Trade.				
Driver	Any person including the insured provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided also that the person holding an effective Learner's license may also drive the vehicle when not used for the transport of goods/passengers at the time of the accident and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicle Rules, 1989.				
No Claim Bonus					
<b>Existing Damage Details</b>	NA				
Nominee Details	Name :NA - Relationship :NA				
Subject to Warranties/ IMT-Endorsements/ Add on Package	& Plan Name:Drive Assure- Silver & Plan Description: consumable expenses, depreciation shield, engine protector,				
Additional Details	Coinsurance Details: Transaction Id: -				
Premium Details	Receipt No. 1149-01692193, Date 24-OCT-24 ** If Premium paid through Cheque, the Policy is void ab-initio in case of dishonour of Cheque.				
Excess Details	Compulsory Excess: Rs.100.00 Additional Excess: Rs.0 Voluntary Excess: Rs00				
	Theft Excess: Rs.0				

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

Warranted that insured named herein or owner of the vehicle insured holds a valid Pollution Under Control (PUC) and / or Fitness Certificate on the date of commencement of the Policy. If the PUC and/or Fitness Certificate is not found to be valid on the date of commencement of the Policy, the Company reserves its right to consider the policy void ab initio.

It is mandatory to keep your policy with updated contact (Mobile No., Email ID and PAN Card) and bank account details, to process any of your service requests faster and hassle-free in future.

You can update the same through Caringly yours App {Link}, WhatsApp Service { Say Hi on WhatsApp - +91 75072 45858}, Contact our 24-Hour Call Center at 1800-209-5858, 1800-102-5858, Give a Missed Call on 8080945060, SMS WORRY to 575758, Email bagichelp@bajajallianz.co.in, website {http://www.bajajallianz.com}, contact your agent or nearest branch.

For & On Behalf of

Bajaj Allianz General Insurance Company Ltd.













# **Authorized Signatory**

This document is digitally signed, hence counter signature  $\slash\hspace{-0.5em}$  stamp is not required.

Consolidated Stamp Duty of Rs. 0.50/- paid for insurance policy stamps vide Order No. CSD/36/2024-25/2886 dated 01-AUG-24 of General Stamp Office, Mumbai, India.

Principal Location: Block No-4, 7th Floor, DLF Towers, 15, Shivaji Marg, -, New Delhi - 110015 PH:011-66278000 | Services Accounting Code: 997134 - Motor vehicle insurance services. No reverse charge is payable on these services.

# Bajaj Allianz General Insurance Company Ltd.

New Delhi, New Delhi, WEST DELHI - 110015 Contact No:Contact No: 011-66278000,011-66278000

# **RECEIPT**

Receipt Number 1149-01692193

**Receipt Date 24/10/2024** 

**Business Channel** MD

Received with thanks from HARSH SINGH CHAUHAN

(Customer ID: 405718155) a total sum of Rupees Two Thousand Four Hundred Five Only by,

Instrument Type	Instrument No.	Instrument Date	Bank Name	Branch Name	Amount
Online Pay- ment	106667967	24/10/2024	NA	NA	2,405

**Total Amount** 

Rs. 2,405.00

Issuance of this receipt does not amount to acceptance of the risk by Bajaj Allianz General Insurance Company Limited. The insurance cover for the risk shall be as per the terms and conditions of the Insurance Policy if and when issued.

For & on behalf of

Bajaj Allianz General Insurance Company Ltd.

**Authorised Signatory** 

Regd.Office: Bajaj Allianz House, Airport Road, Yerwada, Pune - 411006

<sup>\*</sup> Cheque/DD/PO receipt is valid subject to realisation of the instrument.



# $\frac{\text{TWO WHEELER STANDALONE OD POLICY: ADD ON COVERS(Plan Name: Drive Assure- Silver): POLICY}{\text{WORDINGS}}$

### S3 - DEPRECIATION SHIELD

# A. Endorsement Wordings

### (UIN No. IRDAN113RP0002V01201920/A0019V01201920)

In consideration of payment of additional premium, it is hereby agreed and declared that this Policy extends to cover the depreciation amount, partly or fully, on assessed damaged parts allowed for replacement during repairs in the event of a Partial Loss to the **Insured Vehicle** .

In the event **You** have opted for co-payment, **Your** contribution shall be to the extent agreed by **You** as shown in the **Schedule** for the depreciation amount on the assessed parts for each and every Partial Loss claim.

The benefits under 'Depreciation Shield' would be available only if the **Insured Vehicle** is repaired at Our authorized workshops. In case **You** have opted to repair the **Insured Vehicle** at a non-authorized workshop, Our liability will be restricted to 90% of the assessed total claim amount under this cover.

### B. Conditions

(1) Claims made by **You** against Us under 'Depreciation Shield' are subject to the terms and conditions set forth under the Motor Insurance Policy. (2) In case of transfer of ownership of the **Insured Vehicle**, the cover under 'Depreciation Shield' shall expire. (3) The benefits under 'Depreciation Shield' can be utilized for a maximum of two times during the Policy Period

### C. Exclusions

In addition to the exclusions mentioned under Motor Insurance Policy, We will not be liable to indemnify You for the following events:

(1) Where the Own Damage Claim made by **You** against Us under the Motor Insurance Policy is not payable (2) Depreciation pertaining to any part/ sub part/ accessories not approved for replacement by Us under Motor Insurance Policy. (3) Loss or damage to tyres and/or battery of the **Insured Vehicle**. (4) Consequential loss of any kind arising out of claims lodged under 'Depreciation Shield'. (5) Where a loss is covered under Motor Insurance Policy or any other type of insurance policy with any other insurer or manufacturer's warranty or recall campaign or under any other such packages at the same time

If **You** do not agree whether any of these exclusions apply to **Your** claim, **You** agree to accept the burden of proving that they do not apply.

### **D.** Definitions

The words and phrases listed have special meanings **We** have set below whenever they appear in bold type and initial capitals. Please note that references to the singular or to the masculine also include references to the plural or to the female the context permits and if appropriate.

(1) You, Your, Yourself: The person or persons We insure as set out in the Schedule .(2) We, Our, Us: Bajaj Allianz General Insurance Company Limited. (3) Accident, Accidental: A sudden, unintended and fortuitous external and visible event.(4) Policy/Motor Insurance Policy: Two Wheeler Package Policy issued by Us to which this cover is extended (5) Insured Vehicle: The vehicle insured by Us under the Motor Insurance Policy and as shown on the Schedule .(6) Policy Period: The period between and including the commencement date and expiry date as shown in the Motor Insurance Policy Schedule . (7) Schedule: The Schedule and any Annexure or Endorsement to it which sets out Your personal details and the insurance cover in force. (8) Own Damage Claim: The claims raised by You against Us for loss or damage to the Insured Vehicle due to the perils mentioned under Section 1 of Motor Insurance Policy. (9) Total Loss/ Constructive Total Loss: A loss under the Motor Insurance Policy where the aggregate cost of retrieval and/ or repair of the Insured Vehicle, subject to terms and conditions of the Policy, exceeds 75% of the IDV of the Insured Vehicle . (10) Partial Loss: Any loss falling into a category other than (A) the loss mentioned under Sr. No. 9 above and (B) theft of the Insured Vehicle

### **S4 - ENGINE PROTECTOR**

# (UIN No. IRDAN113RP0002V01201920/A0022V01201920)

# A. Endorsement Wordings

In consideration of payment of additional premium, it is hereby agreed and declared that this Policy extends to cover the consequential damage to the internal child parts of the engine of the **Insured Vehicle** arising out of water ingression/leakage of lubricating oil and/or damage to gear box of the **Insured Vehicle** arising out of leakage of lubricating oil due to Accidental means. Under this cover, **We** will compensate **You** for the following:

(A) Repair or replacement of the internal child parts of the engine such as pistons, connecting rods, crank shaft and cylinder head. (B) Repair or replacement of the internal parts of the gear box such as gears or shafts in the gear box housing. (C) Labour cost incurred by You to overhaul the damaged engine and gear box

### **B.** Conditions

- (A) Claims made by You against Us under 'Engine Protector' are subject to the conditions set forth under the Motor Insurance Policy. (B) Claims made by You against Us under 'Engine Protector' would be admissible if:
  - There is evidence that the Insured Vehicle stopped in water logged area resulting into damage to the internal parts of the engine due to water ingression
  - There is evidence of under carriage damage to engine and/or gear box leading to oil leakage and resulting into damage to internal parts of the engine and/or gear box
  - The loss or damage is not payable under Motor Insurance Policy



# TWO WHEELER STANDALONE OD POLICY: ADD ON COVERS(Plan Name: Drive Assure- Silver): POLICY WORDINGS

(C) In case of transfer of ownership of the Insured Vehicle, the cover under 'Engine Protector' shall expire

# C. Your Obligations

(A) You should avoid driving the Insured Vehicle through water logged area as far as possible. If it is unavoidable, the vehicle should be driven in low gear and/or high engine RPMs. (B) You should not try to crank or push start the engine once the Insured Vehicle had stopped in the water logged area or undercarriage damage had taken place. (C) You should intimate Our nearest office for spot survey and to obtain help from an expert technician

### D. Exclusions

We will not be liable to indemnify **You** for the following:

(1) Where a loss is covered under any other type of insurance policy with any other insurer or manufacturer's warranty or recall campaign or under any other such packages at the same time. (2) Any consequential loss apart from the damage to the internal child parts of the engine due to water ingression/ leakage of lubricating oil and/or damage to gear box arising out of leakage of lubricating oil due to Accidental means. (3) Cost of engine oil and consumables in case of flushing of engine. (4) Loss or damage including corrosion of engine due to delay in intimating Us or delay in retrieval of the **Insured Vehicle** from the water logged area. (5) Where reasonable care has not been taken by **You** to protect the loss or damage to the **Insured Vehicle** 

If **You** do not agree whether any of these exclusions apply to **Your** claim, **You** agree to accept the burden of proving that they do not apply.

### E. Definitions

The words and phrases listed have special meanings **We** have set below whenever they appear in bold type and initial capitals. Please note that references to the singular or to the masculine also include references to the plural or to the female the context permits and if appropriate.

(1) You, Your, Yourself: The person or persons We insure as set out in the Schedule . (2) We, Our, Us: Bajaj Allianz General Insurance Company Limited. (3) Accident, Accidental: A sudden, unintended and fortuitous external and visible event. (4) Policy/Motor Insurance Policy: Two Wheeler Package Policy issued by Us to which this cover is extended. (5) Insured Vehicle: The vehicle insured by Us under the Motor Insurance Policy. (6) IDV: Insured's Declared Value (Sum Insured) of the Insured Vehicle under the Motor Insurance Policy. (7) Total Loss/ Constructive Total Loss: A loss under the Motor Insurance Policy where the aggregate cost of retrieval and/ or repair of the Insured Vehicle, subject to terms and conditions of the Policy, exceeds 75% of the IDV of the Insured Vehicle. (8) Policy Period: The period between and including the commencement date and expiry date as shown in the Motor Insurance Policy Schedule .(9) Schedule: The Schedule and any Annexure or Endorsement to it which sets out Your personal details and the type of insurance cover in force .(10)Own Damage Claim: The claims raised by You against Us for loss or damage to the Insured Vehicle due to the perils mentioned under Section 1 of Motor Insurance Policy

# **S17:CONSUMABLE EXPENSES**

(UIN No. IRDAN113RP0002V01201920/A0026V01201920)

# A. Endorsement Wordings

In consideration of payment of additional premium, it is hereby agreed and declared that if the **Insured Vehicle** is damaged by a covered peril mentioned under the own damage section of the **Motor Insurance Policy** and needs to be repaired, We will cover cost of consumables required to be replaced/ replenished during the repair of the damaged vehicle. Consumable for the purpose of this cover shall include engine oil, gear box oil, power steering oil, coolant, AC gas oil, brake oil, AC refrigerant, battery electrolyte, windshield washer fluid, radiator coolant, nut & bolt, screw, oil filter, fuel filter, bearings, washers, clip, wheel balancing weights, and items of similar nature excluding fuel.

### B. Conditions

(a) This cover is applicable if it is shown on Your schedule. (b) Claims made by You against Usunder 'CONSUMABLE EXPENSES' are subject to the terms and conditions set forth under the Motor Insurance Policy. (c)In case of transfer of ownership of the Insured Vehicle, the cover under 'CONSUMABLE EXPENSES' shall expire. (d) The benefits under under 'CONSUMABLE EXPENSES' would be available only if the Insured Vehicle is repaired at Our authorized workshops.

### C. Exclusions

In addition to the exclusions mentioned under **Motor Insurance Policy**, **We** will not be liable to indemnify You for the following events: (1)Where the **Own Damage Claim** made by **You** against **Us** under the **Motor Insurance Policy** is not payable. (2) Consumables pertaining to any part/ sub part/ accessories not approved for replacement by Us under Motor Insurance Policy. (3)Where a loss is covered under **Motor Insurance Policy** or any other type of insurance policy with any other insurer or manufacturer's warranty or recall campaign or under any other such packages at the same time.

# **D. Definitions**

The words and phrases listed have special meanings **We** have set below whenever they appear in bold type and initial capitals. Please note that references to the singular or to the masculine also include references to the plural or to the female the context permits and if appropriate.

(1)Authorized workshop / garage / service station - A motor vehicle repair workshop / garage / service station authorized by us. (2)Insured Vehicle: The vehicle insured by Us under the Motor Insurance Policy and as shown on the Schedule. (3)Policy/ Motor Insurance Policy: Motor Package Policy issued by Us to which this cover is extended.



# $\frac{\text{TWO WHEELER STANDALONE OD POLICY: ADD ON COVERS(Plan Name: Drive Assure- Silver): POLICY}{\text{WORDINGS}}$

(4)Schedule: The Schedule and any Annexure or Endorsement to it which sets out Your personal details and the insurance cover in force. (5)We, Our, Us: Bajaj Allianz General Insurance Company Limited. (6)You, Your, Yourself: The person or persons We insure as set out in the Schedule.