



LIBERTY GENERAL INSURANCE LIMITED  
PRIVATE CAR PACKAGE POLICY  
CERTIFICATE OF INSURANCE CUM POLICY SCHEDULE

IMPORTANT - 1) The Validity of this Certificate of Insurance cum Schedule is subject to realization of the premium cheque.

2) No Claim Bonus will only be allowed provided the Policy is renewed within 90 days of the expiry date of the previous policy.

3) In the event of misrepresentation, fraud or non-disclosure of material facts, the company reserves the right to cancel the policy from inception.

|   |  |  |            |
|---|--|--|------------|
| Policy Issuing Office   | Unit 1501 & 1502, 15th Floor, Tower 2, One International Center, Senapati Bapat Marg, Prabhadevi, Mumbai-400013, Maharashtra PH: +91 22 67001313 |  |            |
| Policy Servicing Office   | 2ND Floor, A-7, A-53, Second Avenue, South Wing, Shriram House, Anna Nagar East, Chennai CHENNAI TAMIL NADU 600102 PH: +91 8655914097            |  |            |
|  |  |  |            |
|   | Policy No  | 2011-500401-25-1000003-03-000  |            |
|   | Geographical Area  | India  |            |
|   | Insured Address  | MR VINOD ANBALAGAN<br>PLOT NO 223 MADURAI MEENACHIPURAM IYANCHERRY<br>URAPAKKAMCHENGALPATTU<br>KANCHIPURAM TAMIL NADU 603210 |            |
| Contact Number  | (M) +917845340202/ +7345340202   | Customer ID  | 4109268930 |
| GSTIN No/State Name   | NA/TAMIL NADU  |  |            |
| Period Of Insurance   | From   | 00:00Hrs of 19/04/2025   |            |
|   | To   | Midnight of 18/04/2026   |            |
| (Section III - PA OWNER-DRIVER)   | From   | 00:00Hrs of 19/04/2025   |            |
|   | To   | Midnight of 18/04/2026   |            |
| Policy Issued On  | 25/03/2025   |  |            |
| Covernote No/Ecovernote No  |  |  |            |
| Covernote Date  |  |  |            |
| RTO Location  | CHENGALPATTU   | Zone   | Zone-B     |
| UIN CODES   | IRDAN150RP0035V02201213  |  |            |
| Customer UIN  |  |  |            |

|            |                                     |                  |            |
|------------|-------------------------------------|------------------|------------|
| Agent Name | TATA MOTORS INS BRO AND ADV SER LTD |                  |            |
| Agent Code | IMD1096362                          | Agent Contact No | 7259587519 |

INSURED MOTOR VEHICLE DETAILS AND PREMIUM COMPUTATION

| Registration Mark & No. | Year of Manufacture/Date Of Registration/Invoice date | Engine No.        | Chassis No.       | Make/Model/Type of Body             | CC/HP/GVW/KW | Licensed Carrying capacity including Driver | Trailer Registration No. | Trailer Chassis No. | Trailer IDV |
|-------------------------|---|-------------------|-------------------|-------------------------------------|--------------|---|--------------------------|---------------------|-------------|
| TN 19 AS 4955           | 2022/19-04-2022/19-04-2022                            | REVTRN11CXXK39132 | MAT627243NLC33065 | TATA MOTORS/NEXON XM (S) PETROL/Suv | 1199         | 5   |                          |                     |             |

IDV (INSURED'S DECLARED VALUE)

| Year | IDV of Vehicle( ) | Trailers( ) | Side Car( ) | Non Electrical Accessories ( ) | Electrical/Electronic Accessories( ) | Bi Fuel kit (CNG/LPG)( ) | Total Value ( ) |
|------|-------------------|-------------|-------------|--------------------------------|--------------------------------------|--------------------------|-----------------|
| 1    | 620,000.00        | 0.00        | 0.00        | 0.00                           | 0.00                                 | 0.00 / 0.00              | 620,000.00      |

Section I - OWN DAMAGE (A)

Section II - LIABILITY (B)

|   |          |                                    |          |
|---|----------|------------------------------------|----------|
| Own Damage Premium on vehicle and accessories                               |          | Third Party Premium                |          |
| Basic Cover   |          | Basic Cover                        |          |
| Basic - OD  | 7,122.31 | Basic - TP                         | 3,416.00 |
| TOTAL OWN-DAMAGE PREMIUM (A)  |          | Legal Liability                    |          |
| 7,122.00  |          | LL to Paid Driver IMT 28           |          |
| Section I - ADD ON COVERS (C)   |          | TOTAL LIABILITY PREMIUM (B)        |          |
| Passenger Assist IRDAN150RP0035V01201213/A0020V01201213                     | 250.00   | 3,466.00                           |          |
| Consumables Cover IRDAN150RP0035V01201213/A0015V02201213                    | 1,116.00 | Section III- PA OWNER-DRIVER (D)   |          |
| Depreciation Cover IRDAN150RP0035V01201213/A0012V01201213                   | 4,123.00 | PA Owner Driver                    |          |
| Liberty Complete Assistance (Plan A) IRDAN150RP0035V01201213/A0008V02202223 | 249.00   | Net Premium(A+B+C+D) Taxable Value |          |
| TOTAL ADD-ON COVER PREMIUM (C)  |          | 5,738.00                           |          |
|   |          | CGST(9% - TAMIL NADU)              |          |
|   |          | 1,503.09                           |          |
|   |          | SGST(9% - TAMIL NADU)              |          |
|   |          | 1,503.09                           |          |
|   |          | TOTAL POLICY PREMIUM               |          |
|   |          | 19,707.00                          |          |

Hire Purchase/ Lease /Hypothecated with STATE BANK OF INDIA-  
LIMITATION AS TO USE : The Policy covers use of vehicle for any purpose other than: a) Hire or Reward b) Carriage of goods(other than sample of personal luggage) c) Organized racing d) Pace Making e) Speed Testing f) Reliability Trial g) Use in connection with motor trade.

DRIVERS CLAUSE

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

LIMITS OF LIABILITY

|                              |  |   |   |  |            |  |         |
|------------------------------|--|---|---|--|------------|--|---------|
| Deductible under section - I | Compulsory Deductible: Rs 1000/-,<br>Voluntary Deductible: Rs 0/-,<br>Imposed Excess : Rs 0/-,<br>Additional excess : Rs -/<br>Theft excess : Rs -/<br>EV Secure-Damage to Charger Deductible : Rs 0/-<br>EV Secure-Damage to Property Deductible : Rs 0/- | Under Section II-I (i) of the policy (Death of or bodily injury): | such amount necessary to meet the requirements of motor vehicle Act, 1988 | Under Section II-I (ii) of the policy (Damage to third party property) | 750,000.00 | P.A. cover for owner- Driver under section III : CSI | 1500000 |
|------------------------------|--|---|---|--|------------|--|---------|

Subject to I.M.T Endorsement Nos. AD01,AD02,AD04,IMT 7,AD21,IMT 22,IMT 28

Passenger assist cover details:-Hospital Cash: Rs 1500 per day for 30 days (per Pax.), Medical Expenses: Rs 10,000 (per Pax.), Ambulance Charges: Rs. 5000

NOMINATION DETAILS

| Name of the Nominee | Relationship with Insured | Name of Appointee (if nominee is minor) | Relationship with the Nominee |
|---------------------|---------------------------|---|-------------------------------|
|---------------------|---------------------------|---|-------------------------------|

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.

In witness whereof this Policy has been signed at Mumbai on 25/03/2025

Receipt No: 10250040124101460969

In case of Claims, Please contact us at : Toll Free No - 18002665844,  
email id - [care@libertyinsurance.in](mailto:care@libertyinsurance.in)

Date of Issue : 25/03/2025  
Place : Mumbai



For Liberty General Insurance Limited

Authorised Signatory

Stamp Duty of Rs.0.5/- is paid as provided under Article (47.B.ii) of Indian Stamp Act, 1899 and included in Consolidated Stamp Duty Paid to the Government of Maharashtra Treasury vide Order of Addl. Controller of Stamps, Mumbai at General Stamp Office, Fort, Mumbai - 400001., vide this Order No (LOA/ENF-2/CSD/128/2024/(Validity Period Dt. 30/12/2024 to 29/12/2025)/OW.NO.5591/ Dated 24/12/2024).

Invoice No. 3324011000509131  
Branch GSTIN No : 33AABCL9950A1ZS  
SAC Code : 997134; Description of Service : General Insurance  
Service; Place of Supply : TAMIL NADU/33  
IRDA Regn. No. 150  
CIN No. U66000MH2010PLC209656  
Tax is not payable under reverse charge by the recipient  
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

**IMPORTANT NOTICE**

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

| CUSTOMER INFORMATION SHEET   |   |  |                 |     |                  |                       |            |  |   |              |   |     |  |      |
|--|---|--|-----------------|-----|------------------|-----------------------|------------|--|---|--------------|---|-----|--|------|
| This document provides only key information about your policy No 2011-500401-25-1000003-03-000. Please refer to the policy document for detail terms and conditions. |   |  |                 |     |                  |                       |            |  |   |              |   |     |  |      |
| SI No  | Title   | Description  | Policy / Clause |     |                  |                       |            |  |   |              |   |     |  |      |
| 1  | Product Name  | Private Car Package Policy   | NA              |     |                  |                       |            |  |   |              |   |     |  |      |
| 2  | Unique Identification Number(UIN) allotted by IRDAI | IRDAN150RP0035V02201213  | NA              |     |                  |                       |            |  |   |              |   |     |  |      |
| 3  | Structure   | Indemnity  | NA              |     |                  |                       |            |  |   |              |   |     |  |      |
| 4  | Intrests Insured                                    | Interest of insured is Own Damage & third party liability arising out of insured vehicle   | NA              |     |                  |                       |            |  |   |              |   |     |  |      |
| 5  | Sum Insured / Motor Insured Declared Value Scope    | 620,000.00/-   | NA              |     |                  |                       |            |  |   |              |   |     |  |      |
| 6  | Policy Coverage                                     | <b>SECTION I - LOSS OF OR DAMAGE TO THE VEHICLE INSURED :</b> The Company will indemnify the insured against loss or damage to the vehicle insured hereunder and/or its accessories whilst thereon:<br>i. by fire explosion self ignition or lightning;<br>ii. by burglary housebreaking or theft;<br>iii. by riot and strike;<br>iv. by earthquake (fire and shock damage);<br>v. by flood typhoon hurricane storm tempest inundation cyclone hailstorm frost;<br>vi. by accidental external means;<br>vii. by malicious act;<br>viii. by terrorist activity;<br>ix. whilst in transit by road rail inland waterway lift elevator or air;<br>x. by landslide rockslide.   |                 |     |                  |                       |            |  |   |              |   |     |  |      |
|  |   | <b>SECTION II - LIABILITY TO THIRD PARTIES :</b> Subject to the limits of liability as laid down in the Schedule hereto the Company will indemnify the insured in the event of an accident caused by or arising out of the use of the vehicle against all sums including claimant's cost and expenses which the insured shall become legally liable to pay in respect of<br>i. Death of or bodily injury to any person caused by or arising out of the use (including the loading and/or unloading) of the vehicle.<br>ii. Damage to property caused by the use (including the loading and/or unloading) of the vehicle.   |                 |     |                  |                       |            |  |   |              |   |     |  |      |
|  |   | <b>SECTION III - The Company undertakes to pay compensation as per the following scale for bodily injury/ death sustained by the Insured, in direct connection with any of the vehicle of which he / she is registered owner or whilst driving or mounting into/dismounting from such vehicle or whilst travelling in it as a co-driver, caused by violent accidental external and visible means which independent of any other cause shall within six calendar months of such injury result in:</b>   |                 |     |                  |                       |            |  |   |              |   |     |  |      |
|  |   | <table><thead><tr><th>Nature of Injury</th><th>Scale of Compensation</th></tr></thead><tbody><tr><td>i) Death</td><td>100%</td></tr><tr><td>ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye</td><td>100%</td></tr><tr><td>iii) Loss of one limb or sight of one eye</td><td>50%</td></tr><tr><td>iv) Permanent total disablement from injuries other than named above</td><td>100%</td></tr></tbody></table>   |                 |     | Nature of Injury | Scale of Compensation | i) Death   | 100%                                   | ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye   | 100%         | iii) Loss of one limb or sight of one eye | 50% | iv) Permanent total disablement from injuries other than named above   | 100% |
| Nature of Injury   | Scale of Compensation                               |  |                 |     |                  |                       |            |  |   |              |   |     |  |      |
| i) Death   | 100%  |  |                 |     |                  |                       |            |  |   |              |   |     |  |      |
| ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye  | 100%  |  |                 |     |                  |                       |            |  |   |              |   |     |  |      |
| iii) Loss of one limb or sight of one eye  | 50%   |  |                 |     |                  |                       |            |  |   |              |   |     |  |      |
| iv) Permanent total disablement from injuries other than named above   | 100%  |  |                 |     |                  |                       |            |  |   |              |   |     |  |      |
|  |   | <table><thead><tr><th>Add-on Name</th><th>UIN</th><th>Description</th><th>Sum Insured</th></tr></thead><tbody><tr><td>Consumable</td><td>IRDAN150RP0035V01201213/A0015V02201213</td><td><p>In consideration of the payment of extra premium paid by the insured as mentioned in the policy schedule it is hereby understood and agreed subject to the terms, conditions exclusions and limitations that the Company agrees to cover expenses incurred towards "those items or substances of specific use which at the time of loss are either totally consumed or deemed unfit for further use in the vehicle" arising out of damage to the vehicle insured and/or to its accessories caused by insured peril under the basic Private Car Policy.</p><p>Consumables shall mean those items or substances which have specific use and when applied to their respective uses are deemed to be consumed completely and/or are deemed to be unfit for future use. These items include grease, lubricants clip, air conditioner's gas, bearings, engine oil, oil filter, fuel filter, break oil, nut and bolt, screw, washers and the like.</p><p>Subject otherwise to the terms, conditions, exceptions and limitations of the policy</p><p>Special Conditions applicable:</p><p>a) The cover under this add-on will be available only for vehicles upto the maximum age of --- years.</p><p>b) For any claim to become payable under this add-on, it should be admitted under Own Damage Section of the Policy.</p><p>c) All such costs to be supported with proper bills/invoices only from Garages authorized by the company.</p><p>d) Such repairs to be undertaken within three (3) days of date of loss.</p></td><td>620,000.00/-</td></tr><tr><td></td><td></td><td><p>In consideration of the payment of extra premium paid by the insured as mentioned in the policy schedule it</p></td><td></td></tr></tbody></table> | Add-on Name     | UIN | Description      | Sum Insured           | Consumable | IRDAN150RP0035V01201213/A0015V02201213 | <p>In consideration of the payment of extra premium paid by the insured as mentioned in the policy schedule it is hereby understood and agreed subject to the terms, conditions exclusions and limitations that the Company agrees to cover expenses incurred towards "those items or substances of specific use which at the time of loss are either totally consumed or deemed unfit for further use in the vehicle" arising out of damage to the vehicle insured and/or to its accessories caused by insured peril under the basic Private Car Policy.</p> <p>Consumables shall mean those items or substances which have specific use and when applied to their respective uses are deemed to be consumed completely and/or are deemed to be unfit for future use. These items include grease, lubricants clip, air conditioner's gas, bearings, engine oil, oil filter, fuel filter, break oil, nut and bolt, screw, washers and the like.</p> <p>Subject otherwise to the terms, conditions, exceptions and limitations of the policy</p> <p>Special Conditions applicable:</p> <p>a) The cover under this add-on will be available only for vehicles upto the maximum age of --- years.</p> <p>b) For any claim to become payable under this add-on, it should be admitted under Own Damage Section of the Policy.</p> <p>c) All such costs to be supported with proper bills/invoices only from Garages authorized by the company.</p> <p>d) Such repairs to be undertaken within three (3) days of date of loss.</p> | 620,000.00/- |   |     | <p>In consideration of the payment of extra premium paid by the insured as mentioned in the policy schedule it</p> |      |
| Add-on Name  | UIN   | Description  | Sum Insured     |     |                  |                       |            |  |   |              |   |     |  |      |
| Consumable   | IRDAN150RP0035V01201213/A0015V02201213              | <p>In consideration of the payment of extra premium paid by the insured as mentioned in the policy schedule it is hereby understood and agreed subject to the terms, conditions exclusions and limitations that the Company agrees to cover expenses incurred towards "those items or substances of specific use which at the time of loss are either totally consumed or deemed unfit for further use in the vehicle" arising out of damage to the vehicle insured and/or to its accessories caused by insured peril under the basic Private Car Policy.</p> <p>Consumables shall mean those items or substances which have specific use and when applied to their respective uses are deemed to be consumed completely and/or are deemed to be unfit for future use. These items include grease, lubricants clip, air conditioner's gas, bearings, engine oil, oil filter, fuel filter, break oil, nut and bolt, screw, washers and the like.</p> <p>Subject otherwise to the terms, conditions, exceptions and limitations of the policy</p> <p>Special Conditions applicable:</p> <p>a) The cover under this add-on will be available only for vehicles upto the maximum age of --- years.</p> <p>b) For any claim to become payable under this add-on, it should be admitted under Own Damage Section of the Policy.</p> <p>c) All such costs to be supported with proper bills/invoices only from Garages authorized by the company.</p> <p>d) Such repairs to be undertaken within three (3) days of date of loss.</p>  | 620,000.00/-    |     |                  |                       |            |  |   |              |   |     |  |      |
|  |   | <p>In consideration of the payment of extra premium paid by the insured as mentioned in the policy schedule it</p>   |                 |     |                  |                       |            |  |   |              |   |     |  |      |

|  |  |                    |  |   |              |
|--|--|--------------------|--|---|--------------|
|  |  | Depreciation Cover | IRDAN150RP0035V01201213/A0012V01201213 | <p>is hereby understood and agreed subject to the terms, conditions exclusions and limitations that the Company shall bear the Depreciation amount deducted on the value of the parts replaced as a result of admissible claim under Own Damage Section.</p> <p>Conditions:-</p> <p>a) Insured Vehicle should be repaired at any of Company's authorized Garage.</p> <p>* For the purpose of this Cover the expression 'admissible claim' shall mean an event or series of events arising out of one cause in connection with the vehicle insured in respect of which indemnity is provided under this policy.</p>  | 620,000.00/- |
|  |  |                    |  | <p>In consideration of the payment of extra premium paid by the insured as mentioned in the policy schedule it is hereby understood and agreed subject to the terms, conditions exclusions and limitations that the Company agrees to provide the Insured, upon his request, to any one or more of the following assistance services to the insured vehicle during the Policy Period, through the network of the service providers as per the plan opted by the Insured and mentioned on the policy schedule :</p> <p>A. Electric Vehicle :</p> <ol style="list-style-type: none"> <li>1. Vehicle relocation to the nearest Repair centre in case of Major breakdown - In the event of a break down of insured vehicle due to a mechanical or electrical fault which cannot be repaired on the spot, the Service Provider will assist in making arrangement for the insured vehicle to be towed to the nearest Authorized Service Center. Any costs and expenses pertaining to towing of the Insured vehicle over and above the Covered Distance shall be directly borne by the Insured and shall be paid to the Repair centre .</li> <li>2. Vehicle relocation to the nearest Battery Charging Station in case of vehicle run out of charge - In the event that a Insured vehicle runs out of charge and is immobilized while on a trip, the Service Provider will assist in making arrangement for the insured vehicle to be towed to the nearest Battery Charging Station or Repair Center whichever is nearest. Any costs and expenses pertaining to towing of the Insured vehicle over and above the Covered Distance shall be directly borne by the Insured and shall be paid to the Repair centre.</li> <li>3. Emergency DC Charging - In the event where Insured vehicle runs out of charge and is immobilized while on a trip, the Service Provider will assist in arranging the technician to provide emergency charging for upto 20 minutes to the Insured Vehicle on best effort basis. The cost of charging &amp; labor will be borne by the Insured.</li> <li>4. Onsite Repair Services - In the event of a breakdown of insured vehicle due to a minor mechanical or electrical fault and immediate repair on the spot is deemed possible, the Service Provider shall assist the Insured by arranging a technician to reach the breakdown location. The cost of material &amp; Spare Parts if required to repair the insured vehicle on the spot and any other incidental conveyance to obtain such material &amp; spare parts will be borne by the Insured. This service will be provided when the Insured vehicle is not in a position to be driven to the nearest repair centre.</li> <li>5. Changing of Flat tyre - In the event Insured vehicle is immobilized due to a flat tyre, Service Provider will assist the Insured by organizing for a technician to get the punctured tyre fixed. Service Provider will bear the labour cost and round-trip conveyance costs of the technician. Material/spare parts if required to repair the Vehicle (including repair of flat spare stepney tyre) will be borne by the Insured. In case the spare tyre is not available in the Insured vehicle, the flat tyre will be taken to the nearest flat tyre repair shop for repairs &amp; re-attached to the Vehicle. All incidental charges for the same shall be borne by the Insured.</li> <li>6. Assistance in case of Lockout/ lost keys - If the keys of the Insured vehicle is broken, lost, or misplaced, Service Provider (upon the request of the Insured) will arrange for the forwarding of another set from insured's place of residence or office by courier to the location of the Insured vehicle after receiving the requisite authorizations from the Insured with regards to the person designated to hand over the same to Service Provider. The Insured will be requested to submit an identity proof at the time of delivery of the keys.</li> <li>7. Hydra Support - If the Insured vehicle is stuck in a</li> </ol> |              |

ditch, mud or snow, but is accessible through normal roadways, Service Provider will arrange service by either towing (through hydra) or the best alternatives available depending on the situation. The Service Provider shall not be liable for any third Party expense incurred for facilitation of this service. The same shall be payable to the third Party directly by the Insured.

8. Hotel Accommodation - In the event that the Insured vehicle is immobilized at a place, at least 100 Kilometers away from the address of the Insured as appearing in the Policy Schedule and on-the-spot repairs could not be carried out, the Insured vehicle had to be towed away to a Repair shop/Garage for repairs and the vehicle is not delivered back on the same day within close of business hours of the Repair shop/Garage, the Service Provider shall arrange for hotel accommodation for the occupants of the vehicle (subject to the maximum of licensed carrying capacity of the Insured vehicle), for the period the vehicle is under repair in the Repair Shop/ Garage but not exceeding 2(Two) days.

9. Local Taxi - In the event that the Insured vehicle is immobilized at a place, at least 100 Kilometers away from the address of the insured as appearing in the Policy Schedule, and the vehicle is under Repair, the Service Provider shall arrange for an alternate hired car on best availability basis in that area for the period the vehicle is under Repair but not exceeding 2 (two) days on 8 (Eight) hours / 80 (Eighty) kilometers basis, to provide for the local travel of the Insured.

10. Refreshment - When the Insured vehicle is immobilized due to breakdown and insured is stranded on road, the insured shall be offered a refresher kit comprising of water bottle and wet tissue paper. The cost of refreshment would be borne by Service Provider & limited to water bottle & wet tissue paper.

11. Journey Continuation By Taxi - In the event the Insured vehicle is immobilized due to a breakdown, while travelling within Insured's city as mentioned in the policy schedule, Service Provider will assist the Insured by arranging Taxi to continue the journey or return to insured's home. Service Provider will bear cost in all such cases provided vehicle is towed to the workshop.

12. Pick up & Drop - On request of the insured, vehicle pickup & drop service for insured vehicle servicing would be provided to the Insured. The Service Provider would only act as a facilitator and services would be arranged on best effort basis. Any cost for servicing of the insured vehicle shall be directly borne by the Insured.

13. Free Custody - To release the Insured, custody for breakdown vehicle would be arranged by the Service Provider. This service would be available free of cost to the Insured on best effort basis.

14. Assistance on call :

a) Facilitate Finding nearest repairer/workshop - Upon receipt of a call from the Insured for specific issues with the Insured vehicle requiring the contact details of the nearest repairer/workshop , the Service Provider will provide the same based on the updated information in the system.

b) Medical Assistance - In the event the Insured vehicle meets with an accident and any of the occupants are injured, the Service Provider may provide for a conference call with nearest Medical Service Provider including an Ambulance Service Providers. The cost of such Service Providers shall be borne by the Insured. The role of Service Provider shall be limited to sharing of the contact details of medical professionals with the Insured. If such services are not available at the location of Breakdown, Service Provider shall not be held responsible for the same.

c) Legal Advice - In the event the Insured vehicle meets with an accident and needs legal assistance, the Service Provider may provide for a conference call with the legal Service Providers or provide their contact details. The cost of such Legal Service Providers shall be borne by the Insured. Service Provider shall merely be a facilitator and shall not be held responsible for quality of services provided by the legal professionals. The role of Service Provider shall be limited to sharing of the contact details of legal professionals with the Insured. If such services are not available at the location of Breakdown, Service Provider shall not be held responsible for the same.

d) Hospital Admission - If the Insured / Occupants in Insured vehicle suffers from any medical problem arising due to a Breakdown or an Accident of the

Insured vehicle, the Service Provider shall assist Insured / Occupants for admission to nearby hospital, in order to provide convenience to the Insured. The Service Provider shall merely be a facilitator and shall not be held responsible for quality of services provided by the hospital.

e) SMS Alerts - On the request of Assistance service, the Service Provider will share the confirmation SMS to Insured mobile number for activation of the service and will share technician contact details and final closure SMS.

f) Message Relay - Service Provider will take charge of relaying urgent messages of the Insured relating to the breakdown of Insured vehicle to a designated person of their choice and the Company.

Conditions:

- 1) All additional expenses regarding replacement of a part, additional Fuel and any other service which does not form a part of the standard services mentioned above would be on chargeable basis by the Service provider
- 2) These services for "Emergency DC Charging" can be availed maximum at two times during the policy period. Further, the service/s shall get initiated only based on a specific request by the insured to the Company. Exclusions:

The company shall not be liable for any claims under this section directly or indirectly arising out of:

- 1) providing the above-mentioned services under conditions of earthquake, war, invasion, rebellion, revolt, riot, civil commotion, civil war, exceptional adverse weather conditions, acts of terrorism, nuclear fission, strike, act(s) of government(s)/government agencies/judicial/ quasi-judicial authorities.
- 2) any claims where the Insured's vehicle is being used for the purpose of racing, rallying, motorsports, or is not being used/driven in accordance with applicable laws and regulations
- 3) Situation where breakdown is caused by deliberately inflicted damage, vandalism or participation in a criminal act or offence
- 4) any claim where the Insured's vehicle can be safely transferred on its own power to the nearest repairer/workshop.
- 5) any claims triggered by theft; any kind of consequential losses.
- 6) any loss which is covered under any other insurance policy or manufacturer's warranty or recall campaign or under any other such packages at the same time
- 7) any expenses for supply or replacement of parts/consumables
- 8) any loss/damage caused to the Insured's vehicle when it is being used/driven against the recommendations of the owner's/manufacturer's manual
- 9) any claims where services have been availed of without the prior consent of the Company

**B. Other than Electric Vehicles**

1. Vehicle relocation to the nearest Repair Centre in case of Major breakdown - In the event of a breakdown of insured vehicle due to a mechanical or electrical fault which cannot be repaired on the spot, the Service Provider will assist in making arrangement for the insured vehicle to be towed to the nearest repair centre. Any costs and expenses pertaining to towing of the Insured vehicle over and above the Covered Distance shall be directly borne by the Insured and shall be paid to the Repair centre.
2. Onsite Repair Services - In the event of a breakdown of insured vehicle due to a minor mechanical or electrical fault and immediate repair on the spot is deemed possible, the Service Provider shall assist the Insured by arranging for a technician to reach the breakdown location. The cost of material & Spare Parts if required to repair the insured vehicle on the spot and any other incidental conveyance to obtain such material & spare parts will be borne by the Insured. This service will be provided when the Insured vehicle is not in a position to be driven to the nearest repairer/workshop.
3. Battery Jump Start - In the event that the Insured vehicle is immobilized, due to rundown battery, Service Provider will assist the Insured for a Vehicle technician to jump start the Insured vehicle with appropriate means. If the run-down battery has to be replaced with a new battery, the cost of such battery

|   |              |                             |  |   |    |
|---|--------------|-----------------------------|--|---|----|
| 7 | Add-on Cover | Liberty Complete Assistance | IRDAN150RP0035V01201213/A0008V02202223 | <p>replacement and any costs to obtain the battery will be borne by the Insured.</p> <p>4. Changing of Flat tyre - In the event Insured vehicle is immobilized due to a flat tyre, Service Provider will assist the Insured by organizing for a technician to get the punctured tyre fixed. Service Provider will bear the labour cost and round-trip conveyance costs of the technician. Material/spare parts if required to repair the Vehicle (including repair of flat spare stepney tyre) will be borne by the Insured. In case the spare tyre is not available in the Insured vehicle, the flat tyre will be taken to the nearest flat tyre repair shop for repairs &amp; re-attached to the Vehicle. All incidental charges for the same shall be borne by the Insured.</p> <p>5. Assistance in case of Lockout/ lost keys - If the keys of the Insured vehicle is broken, lost, or misplaced, Service Provider (upon the request of the Insured) will arrange for the forwarding of another set from insured's place of residence or office by courier to the location of the Insured vehicle after receiving the requisite authorizations from the Insured with regards to the person designated to hand over the same to Service Provider. The Insured will be requested to submit an identity proof at the time of delivery of the keys.</p> <p>6. Arrangement of emergency fuel in case the vehicle runs out of fuel - In the event that the Insured vehicle runs out of fuel and is immobilized while on a trip, the Service Provider will assist the Insured by organizing a Vehicle technician to supply emergency fuel at the location of the breakdown. The cost of fuel will be borne by the Insured. Service Provider will bear the labour and conveyance costs.</p> <p>7. Hydra Support - If the Insured vehicle is stuck in a ditch, mud, or snow, but is accessible through normal roadways, the Service Provider will arrange service by either towing (through hydra) or the best alternatives available depending on the situation. The Service Provider shall not be liable for any third Party expense incurred for facilitation of this service. The same shall be payable to the third Party directly by the Insured.</p> <p>8. Hotel Accommodation - In the event that the Insured vehicle is immobilized at a place, at least 100 Kilometers away from the address of the Insured as appearing in the Policy Schedule and on-the-spot repairs could not be carried out, the Insured vehicle had to be towed away to a Repair shop/Garage for repairs and the vehicle is not delivered back on the same day within close of business hours of the Repair shop/Garage, the Service Provider shall arrange for hotel accommodation for the occupants of the vehicle (subject to the maximum of licensed carrying capacity of the Insured vehicle), for the period the vehicle is under repair in the Repairer/Workshop but not exceeding 2(Two) days.</p> <p>9. Local Taxi - In the event that the Insured vehicle is immobilized at a place, at least 100 Kilometers away from the address of the insured as appearing in the Policy Schedule, and the vehicle is in a Repairer/Workshop for repairs, the Service Provider shall arrange for an alternate hired car on best availability basis in that area. for the period the insured vehicle is under Repair but not exceeding 2 (two) days on 8 (Eight) hours / 80 (Eighty) kilometers basis, to provide for the local travel of the Insured.</p> <p>10. Refreshment - When the Insured vehicle is immobilized due to breakdown and insured is stranded on road, the insured shall be offered a refresher kit comprising of water bottle and wet tissue paper. The cost of refreshment would be borne by Service Provider &amp; limited to water bottle &amp; wet tissue paper.</p> <p>11. Journey Continuation By Taxi - In the event the Insured vehicle is immobilized due to a breakdown, while travelling within Insured's city as mentioned in the policy schedule, Service Provider will assist the Insured by Taxi to continue the journey or return to insured's home. Service Provider will bear cost in all such cases provided insured vehicle is towed to the repairer/workshop.</p> <p>12. Pick up &amp; Drop - On request of the insured, vehicle pickup &amp; drop service for insured vehicle servicing would be referred to Insured. The Service Provider would only act as a facilitator and services would be arranged on best effort basis. Any cost for servicing of the insured vehicle shall be directly borne by Insured.</p> <p>13. Wrong Fueling - In the event of the Insured vehicle is immobilized due to incorrect fuelling, the Service Provider will assist in making arrangement for the Insured vehicle to be towed to the nearest repairer/workshop provided the Insured agrees to pay</p> | NA |
|---|--------------|-----------------------------|--|---|----|



directly the charges and expenses for such services to the repairer/workshop.

14. Free Custody - To release the Insured, custody for breakdown vehicle would be arranged by the Service Provider. This service would be available free of cost to the Insured on best effort basis.

15. Assistance on call :

a) Facilitate Finding nearest repairer/workshop - Upon receipt of a call from the Insured for specific issues with the Insured vehicle requiring the contact details of the nearest repairer/workshop, the Service Provider will provide the same based on the updated information in the system.

b) Medical Assistance - In the event the Insured vehicle meets with an accident and any of the occupants are injured, the Service Provider may provide for a conference call with nearest Medical Service Provider including an Ambulance Service Providers. The cost of such Service Providers shall be borne by the Insured. The role of Service Provider shall be limited to sharing of the contact details of medical professionals with the Insured. If such services are not available at the location of Breakdown, Service Provider shall not be held responsible for the same.

c) Legal Advice - In the event the Insured vehicle meets with an accident and needs legal assistance, the Service Provider may provide for a conference call with the legal Service Providers or their contact details. The cost of such legal Service Providers shall be borne by the Insured. Service Provider shall merely be a facilitator and shall not be held responsible for quality of services provided by the legal professionals. The role of Service Provider shall be limited to sharing of the contact details of legal professionals with the Insured. If such services are not available at the location of Breakdown, Service Provider shall not be held responsible for the same.

d) Hospital Admission - If the Insured/Occupants in Insured vehicle suffers from any medical problem arising due to a Breakdown or an Accident of the Insured vehicle, Service Provider shall assist Insured/occupants for nearby hospital admission, in order to provide convenience to the Insured. The Service Provider shall merely be a facilitator and shall not be held responsible for quality of services provided by the hospital.

e) SMS Alerts - On the request of Assistance service, the Service Provider will share the confirmation SMS to Insured mobile number for activation of the service and will share technician contact details and final closure SMS.

f) Message Relay - Service Provider will take charge of relaying urgent messages of the Insured relating to the breakdown of Insured vehicle to a designated person of their choice and the Company.

Conditions:

1) All additional expenses regarding replacement of a part, additional Fuel and any other service which does not form a part of the standard services mentioned above would be on chargeable basis by the Service Provider.

2) These services for "Arrangement of emergency fuel" can be availed maximum at two times during the policy period. Further, the service/s shall get initiated only based on a specific request by the insured to the Company.

Exclusions:

The company shall not be liable for any claims under this section directly or indirectly arising out of:

1) providing the above-mentioned services under conditions of earthquake, war, invasion, rebellion, revolt, riot, civil commotion, civil war, exceptional adverse weather conditions, acts of terrorism, nuclear fission, strike, act(s) of government(s)/government agencies/judicial/ quasi-judicial authorities.

2) any claims where the Insured's vehicle is being used for the purpose of racing, rallying, motorsports, or is not being used/driven in accordance with applicable laws and regulations

3) Situation where breakdown is caused by deliberately inflicted damage, vandalism or participation in a criminal act or offence

4) any claim where the Insured's vehicle can be safely transferred on its own power to the nearest repairer/workshop.

5) any claims triggered by theft; any kind of



consequential losses.  
 6) any loss which is covered under any other insurance policy or manufacturer's warranty or recall campaign or under any other such packages at the same time  
 7) any expenses for supply or replacement of parts/consumables  
 8) any loss/damage caused to the Insured's vehicle when it is being used/driven against the recommendations of the owner's/manufacturer's manual  
 9) any claims where services have been availed of without the prior consent of the Company  
 Covered Distance & Territorial Scope: The above Assistance Services provided will be within a radius of 100 Kms from the place of breakdown to nearest available vendor / repairer within the Republic of India excluding islands. Cost of Services beyond the coverage as mentioned shall be borne by the insured.

**Add-on Plans: The above-mentioned Assistance services will be allowed in the below mentioned combinations of Plans only.**

**a. Electric Vehicle**

| Sr. No.             | Featured Benefits   | Plan A | Plan B | Plan C |
|---------------------|---|--------|--------|--------|
| 1                   | Vehicle relocation to the nearest Repair centre in case of Major breakdown                      | Yes    | Yes    | Yes    |
| 2                   | Vehicle relocation to the nearest battery charging station in case of vehicle run out of charge | Yes    | Yes    | Yes    |
| 3                   | Emergency DC Charging   | Yes    | No     | No     |
| 4                   | Onsite Repair Services  | Yes    | Yes    | Yes    |
| 5                   | Changing of Flat tyre   | Yes    | Yes    | Yes    |
| 6                   | Assistance in case of Lockout/lost keys   | Yes    | No     | No     |
| 7                   | Hydra Support   | Yes    | No     | No     |
| 8                   | Refreshment   | Yes    | No     | No     |
| 9                   | Hotel Accommodation   | Yes    | No     | No     |
| 10                  | Local Taxi  | Yes    | No     | No     |
| 11                  | Journey Contribution By Taxi  | Yes    | No     | No     |
| 12                  | Pick up & Drop  | Yes    | No     | No     |
| 13                  | Free Custody  | Yes    | No     | No     |
| Assistance on call: |   |        |        |        |
| 14 a)               | Facilitate Finding nearest repairer/workshop  | Yes    | Yes    | No     |
| 14 b)               | Medical Assistance  | Yes    | Yes    | No     |
| 14 c)               | Legal Advice  | Yes    | Yes    | No     |
| 14 d)               | Hospital Admission  | Yes    | Yes    | No     |
| 14 e)               | SMS Alert   | Yes    | Yes    | No     |
| 14 f)               | Message Relay   | Yes    | Yes    | No     |

**b. Other than Electric Vehicle :**

| Sr. No. | Featured Benefits  | Plan A | Plan B | Plan C |
|---------|--|--------|--------|--------|
| 1       | Vehicle relocation to the nearest Repair centre in case of Major breakdown | Yes    | Yes    | Yes    |
| 2       | Onsite Repair Services   | Yes    | Yes    | Yes    |
| 3       | Changing of Flat tyre  | Yes    | Yes    | Yes    |
| 4       | Battery Jump Start   | Yes    | Yes    | No     |
| 5       | Arrangement of emergency fuel in case the vehicle runs out of fuel         | Yes    | Yes    | No     |
| 6       | Assistance in case of Lockout/lost keys                                    | Yes    | No     | No     |
| 7       | Hydra Support  | Yes    | No     | No     |
| 8       | Refreshment  | Yes    | No     | No     |
| 9       | Hotel Accommodation  | Yes    | No     | No     |
| 10      | Local Taxi   | Yes    | No     | No     |
| 11      | Journey Contribution By Taxi   | Yes    | No     | No     |

|                     |  |  |   |                              |                |     |    |    |    |               |     |    |    |    |              |     |    |    |                     |  |  |  |  |       |  |     |     |    |       |                    |     |     |    |       |              |     |     |    |       |                    |     |     |    |       |            |     |     |    |       |               |     |     |    |  |
|---------------------|--|--|---|------------------------------|----------------|-----|----|----|----|---------------|-----|----|----|----|--------------|-----|----|----|---------------------|--|--|--|--|-------|--|-----|-----|----|-------|--------------------|-----|-----|----|-------|--------------|-----|-----|----|-------|--------------------|-----|-----|----|-------|------------|-----|-----|----|-------|---------------|-----|-----|----|--|
|                     |  |  | <table border="1"> <tr> <td>12</td><td>Pick up &amp; Drop</td><td>Yes</td><td>No</td><td>No</td></tr> <tr> <td>13</td><td>Wrong Fueling</td><td>Yes</td><td>No</td><td>No</td></tr> <tr> <td>14</td><td>Free Custody</td><td>Yes</td><td>No</td><td>No</td></tr> <tr> <td colspan="5">Assistance on call:</td></tr> <tr> <td>15 a)</td><td>Facilitate Finding nearest repairer/workshop</td><td>Yes</td><td>Yes</td><td>No</td></tr> <tr> <td>15 b)</td><td>Medical Assistance</td><td>Yes</td><td>Yes</td><td>No</td></tr> <tr> <td>15 c)</td><td>Legal Advice</td><td>Yes</td><td>Yes</td><td>No</td></tr> <tr> <td>15 d)</td><td>Hospital Admission</td><td>Yes</td><td>Yes</td><td>No</td></tr> <tr> <td>15 e)</td><td>SMS Alerts</td><td>Yes</td><td>Yes</td><td>No</td></tr> <tr> <td>15 f)</td><td>Message Relay</td><td>Yes</td><td>Yes</td><td>No</td></tr> </table>   | 12                           | Pick up & Drop | Yes | No | No | 13 | Wrong Fueling | Yes | No | No | 14 | Free Custody | Yes | No | No | Assistance on call: |  |  |  |  | 15 a) | Facilitate Finding nearest repairer/workshop | Yes | Yes | No | 15 b) | Medical Assistance | Yes | Yes | No | 15 c) | Legal Advice | Yes | Yes | No | 15 d) | Hospital Admission | Yes | Yes | No | 15 e) | SMS Alerts | Yes | Yes | No | 15 f) | Message Relay | Yes | Yes | No |  |
| 12                  | Pick up & Drop                               | Yes  | No  | No                           |                |     |    |    |    |               |     |    |    |    |              |     |    |    |                     |  |  |  |  |       |  |     |     |    |       |                    |     |     |    |       |              |     |     |    |       |                    |     |     |    |       |            |     |     |    |       |               |     |     |    |  |
| 13                  | Wrong Fueling                                | Yes  | No  | No                           |                |     |    |    |    |               |     |    |    |    |              |     |    |    |                     |  |  |  |  |       |  |     |     |    |       |                    |     |     |    |       |              |     |     |    |       |                    |     |     |    |       |            |     |     |    |       |               |     |     |    |  |
| 14                  | Free Custody                                 | Yes  | No  | No                           |                |     |    |    |    |               |     |    |    |    |              |     |    |    |                     |  |  |  |  |       |  |     |     |    |       |                    |     |     |    |       |              |     |     |    |       |                    |     |     |    |       |            |     |     |    |       |               |     |     |    |  |
| Assistance on call: |  |  |   |                              |                |     |    |    |    |               |     |    |    |    |              |     |    |    |                     |  |  |  |  |       |  |     |     |    |       |                    |     |     |    |       |              |     |     |    |       |                    |     |     |    |       |            |     |     |    |       |               |     |     |    |  |
| 15 a)               | Facilitate Finding nearest repairer/workshop | Yes  | Yes   | No                           |                |     |    |    |    |               |     |    |    |    |              |     |    |    |                     |  |  |  |  |       |  |     |     |    |       |                    |     |     |    |       |              |     |     |    |       |                    |     |     |    |       |            |     |     |    |       |               |     |     |    |  |
| 15 b)               | Medical Assistance                           | Yes  | Yes   | No                           |                |     |    |    |    |               |     |    |    |    |              |     |    |    |                     |  |  |  |  |       |  |     |     |    |       |                    |     |     |    |       |              |     |     |    |       |                    |     |     |    |       |            |     |     |    |       |               |     |     |    |  |
| 15 c)               | Legal Advice                                 | Yes  | Yes   | No                           |                |     |    |    |    |               |     |    |    |    |              |     |    |    |                     |  |  |  |  |       |  |     |     |    |       |                    |     |     |    |       |              |     |     |    |       |                    |     |     |    |       |            |     |     |    |       |               |     |     |    |  |
| 15 d)               | Hospital Admission                           | Yes  | Yes   | No                           |                |     |    |    |    |               |     |    |    |    |              |     |    |    |                     |  |  |  |  |       |  |     |     |    |       |                    |     |     |    |       |              |     |     |    |       |                    |     |     |    |       |            |     |     |    |       |               |     |     |    |  |
| 15 e)               | SMS Alerts                                   | Yes  | Yes   | No                           |                |     |    |    |    |               |     |    |    |    |              |     |    |    |                     |  |  |  |  |       |  |     |     |    |       |                    |     |     |    |       |              |     |     |    |       |                    |     |     |    |       |            |     |     |    |       |               |     |     |    |  |
| 15 f)               | Message Relay                                | Yes  | Yes   | No                           |                |     |    |    |    |               |     |    |    |    |              |     |    |    |                     |  |  |  |  |       |  |     |     |    |       |                    |     |     |    |       |              |     |     |    |       |                    |     |     |    |       |            |     |     |    |       |               |     |     |    |  |
|                     | Passenger Assist Cover                       | IRDAN150RP0035V01201213/A0020V01201213   | <p>In consideration of the payment of extra premium paid by the insured as mentioned in the policy schedule it is hereby understood and agreed subject to the terms, conditions exclusions and limitations that the Company stands to pay the insured as is provided below:-</p> <p>Hospital Allowance: the Company agrees to pay the amount mentioned in the policy schedule per insured with maximum number of insured limited to the seating capacity of the vehicle for per day of hospitalisation caused due to bodily injury caused by accidental, external, violent and visible means while traveling in, embarking or disembarking from the insured vehicle during the policy period as mentioned in the schedule for which a valid claim under the Policy is admissible.</p> <p>Medical Expenses: Company undertakes to reimburse Medical Expenses per Insured person with maximum number of insured limited to the seating capacity of the vehicle up to the Sum Insured as specified in the Schedule, following treatment of bodily injury caused by accidental, external, violent and visible means while traveling in, embarking or disembarking from the insured vehicle during the policy period as mentioned in the schedule for which a valid claim under the Policy is admissible.</p> <p>Special Conditions applicable to Medical expenses Coverage:<br/>The Company stands to cover medical expenses for treatment taken from only registered Medical Practitioners under respective medical councils.</p> <p>Medical Transport Assistance: The Company agrees to pay amount as mentioned in the policy schedule incurred by the insured towards transportation of the insured/ insured person(s) to the Hospital post suffering bodily injury caused by accidental, external, violent and visible means while traveling in, embarking or disembarking from the insured vehicle during the policy period as mentioned in the schedule for which a valid claim under the Policy is admissible.</p> | Refer as per Policy Schedule |                |     |    |    |    |               |     |    |    |    |              |     |    |    |                     |  |  |  |  |       |  |     |     |    |       |                    |     |     |    |       |              |     |     |    |       |                    |     |     |    |       |            |     |     |    |       |               |     |     |    |  |
| 8                   | Loss Participation                           | Compulsary deductible will be applied in each and every claim intimated under Own Damage section of the policy. Deductible : 1000.00/-   |   | NA                           |                |     |    |    |    |               |     |    |    |    |              |     |    |    |                     |  |  |  |  |       |  |     |     |    |       |                    |     |     |    |       |              |     |     |    |       |                    |     |     |    |       |            |     |     |    |       |               |     |     |    |  |
| 9                   | Exclusions                                   | <p>The Company shall not be liable in respect of:</p> <ol style="list-style-type: none"> <li>any accidental loss damage and/or liability caused sustained or incurred outside the Geographical Area.</li> <li>any claim arising out of any contractual liability.</li> <li>any accidental loss damage and/or liability caused sustained or incurred whilst the vehicle insured herein is:               <ol style="list-style-type: none"> <li>being used otherwise than in accordance with the Limitations as to Use or</li> <li>being driven by or is for the purpose of being driven by him/her in the charge of any person other than a Driver as stated in the Driver's clause.</li> </ol> </li> <li>i) any accident loss or damage to any property whatsoever or any loss or expense whatsoever resulting or arising there from or any consequential loss<br/>ii) any liability of whatsoever nature directly or indirectly caused by or contributed to by or arising from ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. For the purposes of this exception combustion shall include any self-sustaining process of nuclear fission.</li> <li>any accidental loss or damage or liability directly or indirectly caused by or contributed to by or arising from nuclear weapons material</li> <li>any accidental loss damage and/or liability directly or indirectly or proximately or remotely occasioned by or contributed to by or traceable to or arising out of or in connection with war, invasion, the act of foreign enemies, hostilities or warlike operations (whether before or after declaration of war), civil war, mutiny rebellion, military or usurped power or by any direct or indirect consequences of any of the said occurrences and in the event of any claim hereunder the Insured shall prove that the accidental loss damage and/or liability arose independently of and was in no way connected with or occasioned by or contributed to by or traceable to any of the said occurrences or any consequences thereof and in default of such proof the Company shall not be liable to make</li> </ol> |   | NA                           |                |     |    |    |    |               |     |    |    |    |              |     |    |    |                     |  |  |  |  |       |  |     |     |    |       |                    |     |     |    |       |              |     |     |    |       |                    |     |     |    |       |            |     |     |    |       |               |     |     |    |  |

|                           |  | any payment in respect of such a claim.  |                       |                   |                             |                       |      |       |       |       |        |       |       |       |                |      |     |      |              |      |      |      |                  |  |  |       |                       |  |  |      |                           |  |  |              |    |
|---------------------------|--|--|-----------------------|-------------------|-----------------------------|-----------------------|------|-------|-------|-------|--------|-------|-------|-------|----------------|------|-----|------|--------------|------|------|------|------------------|--|--|-------|-----------------------|--|--|------|---------------------------|--|--|--------------|----|
| 10                        | Special Conditions and Warranties (if any)         | The Company may cancel the Policy on grounds of mis-representation, fraud, non-disclosure of material facts or non-cooperation of the insured by sending seven days notice by recorded delivery to the insured at insured's last known address and in such event will return to the insured the premium paid less the pro rata portion thereof for the period the Policy has been in force or the Policy may be cancelled at any time by the insured on seven days notice by recorded delivery and provided no claim has arisen during the currency of the Policy, the insured shall be entitled to a return of premium less premium at the Company's Short Period rates for the period the Policy has been in force. Return of the premium by the company will be subject to retention of the minimum premium of Rs.100/- (or Rs.25/- in respect of vehicles specifically designed/modified for use by blind/handicapped/mentally challenged persons). Where the ownership of the vehicle is transferred, the Policy cannot be cancelled unless evidence that the vehicle is insured elsewhere is produced.   | NA                    |                   |                             |                       |      |       |       |       |        |       |       |       |                |      |     |      |              |      |      |      |                  |  |  |       |                       |  |  |      |                           |  |  |              |    |
| 11                        | Admissibility of Claim                             | <p>1. Notice shall be given in writing to the Company immediately upon the occurrence of any accident or loss or damage and in the event of any claim and thereafter the insured shall give all such information and assistance as the Company shall require. Every letter claim writ summons and/or process or copy thereof shall be forwarded to the Company immediately on receipt by the insured. Notice shall also be given in writing to the Company immediately the insured shall have knowledge of any impending prosecution inquest or fatal injury in respect of any occurrence which may give rise to a claim under this Policy. In case of theft or other criminal act which may be the subject of a claim under this Policy the insured shall give immediate notice to the police and co-operate with the Company in securing the conviction of the offender.</p> <p>2. No admission offer promise payment or indemnity shall be made or given by or on behalf of the Insured without the written consent of the Company which shall be entitled if it so desires to take over and conduct in the name of the Insured the defence or settlement of any claim or to prosecute in the name of the Insured for its own benefit any claim for indemnity or damages or otherwise and shall have full discretion in the conduct of any proceedings or in the settlement of any claim and the Insured shall give all such information and assistance as the Company may require.</p> <p>3. The Company may at its own option repair reinstate or replace the vehicle or part thereof and/or its accessories or may pay in cash the amount of the loss or damage and the liability of the Company shall not exceed:</p> <p>(a) for total loss / constructive total loss of the vehicle - the Insured's Declared Value (IDV) of the vehicle (including accessories thereon) as specified in the Schedule less the value of the wreck.</p> <p>(b) for partial losses, i.e. losses other than Total Loss/Constructive Total Loss of the vehicle - actual and reasonable costs of repair and/or replacement of parts lost/damaged subject to depreciation as per limits specified.</p> <p>4. The Insured shall take all reasonable steps to safeguard the vehicle from loss or damage and to maintain it in efficient condition and the Company shall have at all times free and full access to examine the vehicle or any part thereof or any driver or employee of the insured. In the event of any accident or breakdown, the vehicle shall not be left unattended without proper precautions being taken to prevent further damage or loss and if the vehicle be driven before the necessary repairs are effected any extension of the damage or any further damage to the vehicle shall be entirely at the insured's own risk.</p> <p>5. If at the time of occurrence of an event that gives rise to any claim under this Policy there is in existence any other insurance covering the same liability, the Company shall not be liable to pay or contribute more than its rateable proportion of any compensation, cost or expense.</p> <p>6. The due observance and fulfillment of the terms, conditions and endorsements of this Policy in so far as they relate to anything to be done or complied with by the insured and the truth of the statements and answers in the said proposal shall be conditions precedent to any liability of the Company to make any payment under this Policy.</p> <p>7. In the event of the death of the sole insured, this Policy will not immediately lapse but will remain valid for a period of three months from the date of the death of insured or until the expiry of this Policy (whichever is earlier). During the said period, legal heir(s) of the insured to whom the custody and use of the Motor Vehicle passes may apply to have this Policy transferred to the name(s) of the heir(s) or obtain a new insurance policy for the Motor Vehicle. Where such legal heir(s) desire(s) to apply for transfer of this Policy or obtain a new policy for the vehicle such heir(s) should make an application to the Company accordingly within the aforesaid period. All such applications should be accompanied by:- a) Death Certificate in respect of the insured b) Proof of title to the vehicle c) Original Policy</p> <p><b>Sample Calculation:</b></p> <table border="1"> <thead> <tr> <th>Particulars</th><th>Admissible Amount</th><th>Amount net off depreciation</th><th>Final amount inc. Tax</th></tr> </thead> <tbody> <tr> <td>Part</td><td>40000</td><td>20000</td><td>23600</td></tr> <tr> <td>Labour</td><td>20000</td><td>20000</td><td>23600</td></tr> <tr> <td>Paint Material</td><td>1800</td><td>900</td><td>1062</td></tr> <tr> <td>Paint Labour</td><td>1800</td><td>1800</td><td>2124</td></tr> <tr> <td colspan="3">Final Amount (+)</td><td>50386</td></tr> <tr> <td colspan="3">Compulsory Excess (-)</td><td>1000</td></tr> <tr> <td colspan="3"><b>Final Claim amount</b></td><td><b>49386</b></td></tr> </tbody> </table> | Particulars           | Admissible Amount | Amount net off depreciation | Final amount inc. Tax | Part | 40000 | 20000 | 23600 | Labour | 20000 | 20000 | 23600 | Paint Material | 1800 | 900 | 1062 | Paint Labour | 1800 | 1800 | 2124 | Final Amount (+) |  |  | 50386 | Compulsory Excess (-) |  |  | 1000 | <b>Final Claim amount</b> |  |  | <b>49386</b> | NA |
| Particulars               | Admissible Amount                                  | Amount net off depreciation  | Final amount inc. Tax |                   |                             |                       |      |       |       |       |        |       |       |       |                |      |     |      |              |      |      |      |                  |  |  |       |                       |  |  |      |                           |  |  |              |    |
| Part                      | 40000  | 20000  | 23600                 |                   |                             |                       |      |       |       |       |        |       |       |       |                |      |     |      |              |      |      |      |                  |  |  |       |                       |  |  |      |                           |  |  |              |    |
| Labour                    | 20000  | 20000  | 23600                 |                   |                             |                       |      |       |       |       |        |       |       |       |                |      |     |      |              |      |      |      |                  |  |  |       |                       |  |  |      |                           |  |  |              |    |
| Paint Material            | 1800   | 900  | 1062                  |                   |                             |                       |      |       |       |       |        |       |       |       |                |      |     |      |              |      |      |      |                  |  |  |       |                       |  |  |      |                           |  |  |              |    |
| Paint Labour              | 1800   | 1800   | 2124                  |                   |                             |                       |      |       |       |       |        |       |       |       |                |      |     |      |              |      |      |      |                  |  |  |       |                       |  |  |      |                           |  |  |              |    |
| Final Amount (+)          |  |  | 50386                 |                   |                             |                       |      |       |       |       |        |       |       |       |                |      |     |      |              |      |      |      |                  |  |  |       |                       |  |  |      |                           |  |  |              |    |
| Compulsory Excess (-)     |  |  | 1000                  |                   |                             |                       |      |       |       |       |        |       |       |       |                |      |     |      |              |      |      |      |                  |  |  |       |                       |  |  |      |                           |  |  |              |    |
| <b>Final Claim amount</b> |  |  | <b>49386</b>          |                   |                             |                       |      |       |       |       |        |       |       |       |                |      |     |      |              |      |      |      |                  |  |  |       |                       |  |  |      |                           |  |  |              |    |
| 12                        | Policy Servicing - Claim Intimation and Processing | <p>Toll free / IVRS number of the Insurer - <b>1800-266-5844</b></p> <p>Website / Email - <b>care@libertyinsurance.in</b></p> <p>Details of designated company officials to be contacted in time of claim - <b>1800-266-5844</b></p> <p>Customer can call our customer care number @1800-266-5844 or mail to care@libertyinsurance.in or visit website/Liv Mobile app or directly walk-in to any of our offices and can get his/her claim registered with us</p> <p>For Cashless Service: You may call to our Customer care number@1800-266-5844 or may visit to our Company website www.libertyinsurance.in to know the list of cashless workshops.</p> <p>Surveyor appointment shall be within 72 hours of claim registration.</p> <p>The following basic minimum Claim documents are to be submitted by the insured</p> <p>Motor Claim Form</p> <p>Copy of Registration Certificate</p> <p>Copy of Driving License</p> <p>- Copy Estimate and invoice</p> <p>FIR in case of TP Injury/Death Case</p> <p>we or our surveyors may call for any additional documents/ information depending upon the nature and type of loss.</p> <p>The Company shall settle or reject a claim, as the case may be, within 30 days from the date of receipt of last necessary document.</p> <p>Call us on Toll free number: +91 22 6700 1313 (8:00 AM to 8:00 PM, 7 days of the week) or Email us at: care@libertyinsurance.in or Write to us at: Unit 1501 &amp; 1502, 15th Floor, Tower 2, One International Center, Senapati Bapat Marg, Prabhadevi, MUMBAI 400013, MAHARASHTRA FAX: +91 22 6700 1606</p>  | NA                    |                   |                             |                       |      |       |       |       |        |       |       |       |                |      |     |      |              |      |      |      |                  |  |  |       |                       |  |  |      |                           |  |  |              |    |
|                           |  | <p>Grievance Redressal Officer : Sameer Malgundkar</p> <p>Email ID : gro@libertyinsurance.in</p> <p>IRDAI Integrated Grievance Management System - <a href="https://igms.irda.gov.in">https://igms.irda.gov.in</a></p> <p>Insurance Ombudsman The contact details of the Insurance Ombudsman offices have been provided as AnneNoure-B of Policy document.</p>   |                       |                   |                             |                       |      |       |       |       |        |       |       |       |                |      |     |      |              |      |      |      |                  |  |  |       |                       |  |  |      |                           |  |  |              |    |

|    |  | OMBUDSMAN'S OFFICE   | CONTACT DETAILS  | JURISDICTION   |
|----|--|--|--|--|
| 13 | Grievance Redressal and Policyholders Protection | Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor, Tilak Marg, Relief Road, Ahmedabad - 380 001.                                       | Tel.: 079 - 25501201/02/05/06<br>bimalokpal.ahmedabad@cioins.co.in   | Gujarat, Dadra & Nagar Haveli, Daman and Diu.  |
|    |  | 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<br>bimalokpal.bengaluru@cioins.co.in   | Karnataka  |
|    |  | Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp. Airtel Office, Near New Market, Bhopal 462 003.                  | Tel.: 0755 - 2769201 / 2769202<br>Fax: 0755 - 2769203<br>bimalokpal.bhopal@cioins.co.in                      | Madhya Pradesh and Chhattisgarh  |
|    |  | Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar 751 009.   | Tel.: 0674 - 2596461 / 2596455<br>Fax: 0674 - 2596429<br>bimalokpal.bhubaneswar@cioins.co.in                 | Orissa   |
|    |  | Office of the Insurance Ombudsman, Jeevan Deep Building SCO 20-27, Ground Floor Sector- 17 A, Chandigarh - 160017  | Tel.: 0172 - 2706196 / 2706468<br>Fax: 0172 - 2708274<br>bimalokpal.chandigarh@cioins.co.in                  | Punjab, Haryana(excluding Gurugram, Faridabad, Sonapat and Bahadurgarh) Himachal Pradesh, Union Territories of Jammu & Kashmir, Ladakh & Chandigarh. |
|    |  | Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI 600 018.  | Tel.: 044 - 24333668 / 24335284<br>Fax: 044 - 24333664<br>bimalokpal.chennai@cioins.co.in                    | Tamil Nadu, Puducherry Town and Karaikal (which are part of Puducherry).   |
|    |  | Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi 110 002.  | Tel.: 011 - 23232481/23213504<br>bimalokpal.delhi@cioins.co.in   | Delhi & Following Districts of Haryana - Gurugram, Faridabad, Sonapat & Bahadurgarh.   |
|    |  | OFFICE OF THE INSURANCE OMBUDSMAN LIC OF INDIA 10TH FLOOR, JEEVAN PRAKASH, DIVISIONAL OFFICE M G ROAD, ERNAKULAM KOCHI - 682011                            | Tel.: - 0484-2358759/2359338<br>Fax:- 0484-2359336<br>bimalokpal.ernakulam@cioins.co.in                      | Kerala, Lakshadweep, Mahe-a part of Union Territory of Puducherry.   |
|    |  | Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati - 781001 (ASSAM).                               | Tel.: 0361 - 2632204 / 2602205<br>bimalokpal.guwahati@cioins.co.in   | Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.   |
|    |  | 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 - 23312122<br>Fax: 040 - 23376599<br>bimalokpal.hyderabad@cioins.co.in                             | Andhra Pradesh, Telangana, Yanam and part of Union Territory of Puducherry.  |
|    |  | Office of the Insurance Ombudsman, Jeevan Nidhi II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005.   | Tel.: 0141 - 2740363<br>bimalokpal.jaipur@cioins.co.in   | Rajasthan  |
|    |  | Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue, KOLKATA - 700 072.   | Tel.: 033 - 22124339 / 22124340<br>Fax : 033 - 22124341<br>M : 8009693830<br>bimalokpal.kolkata@cioins.co.in | West Bengal, Sikkim, Andaman & Nicobar Islands.  |
|    |  |  |  | Districts of Uttar Pradesh : Lalitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur,                        |

|    |                                 |  |  |   |  |
|----|---------------------------------|--|--|---|--|
|    |                                 | Office of the Insurance Ombudsman,<br>6th Floor, Jeevan Bhawan, Phase-II,<br>Nawal Kishore Road,<br>Hazratganj,<br>Lucknow - 226 001.  | Tel.: 0522 - 2231330 / 2231331<br>Fax: 0522 - 2231310<br>bimalokpal.lucknow@cioins.co.in           | Pratapgarh, Jaunpur, Varanasi,<br>Gazipur, Jalaun,<br>Kanpur, Lucknow, Unnao, Sitapur,<br>Lakhimpur, Bahraich, Barabanki,<br>Raebareilly,<br>Sravasti, Gonda, Faizabad, Amethi,<br>Kaushambi, Balrampur, Basti,<br>Ambedkarnagar,<br>Sultanpur, Maharajgang,<br>Santkabirnagar, Azamgarh,<br>Kushinagar,<br>Gorkhpur, Deoria, Mau, Ghazipur,<br>Chandauli, Ballia, Sidharathnagar.  |  |
|    |                                 | Office of the Insurance Ombudsman,<br>3rd Floor, Jeevan Seva Annexe,<br>S. V. Road, Santacruz (W),<br>Mumbai - 400 054.  | Tel.: 69038821/23/24/25/26/27/28/29/30/31<br>Fax: 022 - 26106052<br>bimalokpal.mumbai@cioins.co.in | Goa,<br>Mumbai Metropolitan Region<br>excluding Navi Mumbai & Thane.  |  |
|    |                                 | Office of the Insurance Ombudsman,<br>Bhagwan Sahai Palace<br>4th Floor, Main Road,<br>Naya Bans, Sector 15,<br>Distt: Gautam Buddh Nagar,<br>U.P-201301.  | Tel.: 0120-2514252 / 2514253<br>bimalokpal.noida@cioins.co.in<br>bimalokpal.mumbai@cioins.co.in    | State of Uttaranchal and the following<br>Districts of Uttar Pradesh:<br>Agra, Aligarh, Bagpat, Bareilly, Bijnor,<br>Budaun, Bulandshahr, Etah, Kanooj,<br>Mainpuri,<br>Mathura, Meerut, Moradabad,<br>Muzaffarnagar, Oraiyya,<br>Pilibhit, Etawah, Farrukhabad,<br>Firozbad, Gautambodhanagar,<br>Ghaziabad, Hardoi, Shahjahanpur,<br>Hapur, Shamli, Rampur,<br>Kashganj, Sambhal, Amroha, Hathras,<br>Kanshiramnagar, Saharanpur. |  |
|    |                                 | Office of the Insurance Ombudsman,<br>2nd Floor, Lalit Bhawan,<br>Bailey Road,<br>Patna 800 001.   | Tel.: 0612-2547068<br>bimalokpal.patna@cioins.co.in  | Bihar, Jharkhand.   |  |
|    |                                 | Office of the Insurance Ombudsman,<br>Jeevan Darshan Bldg.,<br>3rd Floor,<br>C.T.S. No.s. 195 to 198,<br>N.C. Kelkar Road,<br>Narayan Peth, Pune 411 030.  | Tel.: 020-41312555<br>bimalokpal.pune@cioins.co.in   | Maharashtra,<br>Area of Navi Mumbai and Thane<br>excluding Mumbai Metropolitan<br>Region.   |  |
| 14 | Obligations of the Policyholder | To disclose all information correctly sought by the insurer at time of filling the proposal form<br>In case of any change / modification / addition to the already declared information the same shall be brought to the notice of the Insurer immediately<br>Non-disclosure of material information may affect the claim settlement.<br>(Disclosure of other material information during the policy period.)<br>Insurer to specify the material information |  |   |  |

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|---|--|
| Declaration by the Policyholder:                            |  |
| I have read the above and confirm having noted the details. |  |
| Place   |  |
| Date  |  |
| (Signature of the PolicyHolder)                             |  |