Insurance Details

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Health Insurance

1. Medi Plus

What is Medi Plus?

The Medi Plus Health Insurance plan covers a range of health insurance needs at an affordable price and comes with a special no claim bonus, which increases the sum insured for every claim-free year. You can also enjoy our cashless claim settlement procedure, which gives you even greater convenience. You can choose your best suited Medi Plus Health Insurance Plan from 4 packages based on your financial investment.

Benefits of Medi Plus

• Hospitalization Benefits - Private Hospitals

Hospitalization benefits inclusive of room charges, medical practitioner fees, theatre charges, ambulance charges, maternity benefits, etc.

• Hospitalization Benefits - Government Hospitals

Hospitalization benefits are inclusive of daily allowance, Cost of Drugs and tests from outside while in Government hospitals and Allowance for Childbirth.

Additional Benefits

Benefits applicable for treatments for cataract, hernia, hysterectomy, all types of cardiac surgeries, cancer treatments, and more.

• Epidemic and pandemic cover (Covid 19)

Hospital daily allowance for government hospitals and hospitalization charges for private hospitals/intermediary care centers managed by health ministry approved private hospitals.

Eligibility for Medi Plus

- The policy can be obtained by adults between the ages of 18 to 60 years with the cover ceasing at the age of 69.
- The policy can be obtained for children between the ages of 180 days to 17 years with the cover ceasing at the age of 21.

Coverage Details for Medi Plus Health Insurance

Hospitalization Benefits:

Coverage for room charges, medical practitioner fees, theatre charges, ambulance charges, and maternity benefits in private hospitals.

Daily allowance, cost of drugs and tests from outside, and allowance for childbirth in government hospitals.

Additional Benefits:

Coverage for specific treatments such as cataract, hernia, hysterectomy, cardiac surgeries, cancer treatments, etc.

Epidemic and Pandemic Cover (Covid-19):

Hospital daily allowance for government hospitals and hospitalization charges for private hospitals or intermediary care centers approved by the health ministry.

Surgery Expenses:

Coverage for day care surgery expenses.

No Claim Bonus (NCB):

NCB increases the basic sum assured by 5% for every claim-free year, up to a maximum of 50%.

Claiming Process for Medi Plus Health Insurance

Notification: In the event of hospitalization or any covered medical treatment, the policyholder or

their representative must notify the insurance company immediately. This can be done through our

customer service hotline, website portal, or mobile app.

Claim Form Submission: The policyholder needs to fill out a claim form provided by the

insurance company. This form typically includes details such as personal information, policy

number, nature of illness or injury, and treatment details.

Document Submission: Along with the claim form, certain documents need to be submitted.

These include,

• Hospitalization bills and receipts

• Doctor's consultation reports

• Diagnostic test reports

• Prescription receipts for medicines

• Any other relevant medical documents

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Approval Process: The insurance company will review the submitted claim and documents to ensure they meet the policy's coverage criteria. This process may involve verification of the medical treatment and expenses incurred.

Claim Settlement:

If the claim is approved, the insurance company will settle the claim directly with the hospital (for cashless claims) or reimburse the policyholder for the covered expenses (for reimbursement claims).

The settlement covers expenses such as room charges, medical practitioner fees, surgical expenses, ambulance charges, etc., as per the policy terms.

Applying Process for Medi Plus Health Insurance

Application Form Submission: The applicant needs to fill out an application form provided by the insurance company. This form requires details such as personal information, contact details, medical history (if any), and coverage requirements.

Documentation: Along with the application form, certain documents need to be submitted as per the relevant requirements. These include:

- Proof of identity (e.g., Aadhar card, passport)
- Proof of address
- Age proof
- Income proof (if required)
- Any other documents

Medical Check-up (if applicable): Depending on the applicant's age and medical history, a medical check-up may be required. However, as per the policy details, medical reports are not required up to the age limit of 55 years.

Policy Issuance: Once the application and documents are submitted, and the premium is paid, the insurance company will issue the policy document. This document outlines the coverage details, terms and conditions, premium payment schedule, and other relevant information.

2. Surgical Plan

What is a Surgical Plan?

For financial coverage in the event of an unexpected surgery, the SLIC Surgery Plan provides you with a comprehensive policy that covers surgery costs up to a pre-specified maximum limit. The policy covers you, your spouse and 5 dependent children, and must be purchased together with an SLIC life insurance policy.

Benefits of Surgical Plan

• Maximum of LKR 1,000,000

Maximum of LKR 1,000,000 in the event of a surgery performed under medical necessity, or a pre-specified percentage from the maximum limit depending on the nature of the surgery and selected benefits.

• 360 plus listed surgeries

More than 360 listed surgeries and many non-listed surgeries are covered.

• SLIC Surgical Plan

Under the SLIC Surgical Plan you can claim a percentage of your SLIC surgical Plan sum assured between 10% - 100% depending on the type of surgery.

• Up to five times of the insured value

You get up to five times of the insured value for the total policy period.

• Surgeries performed abroad

Valid for surgeries done in Singapore, India, Malaysia and Sri Lanka.

Cover period

Cover period from 5 - 30 years.

Eligibility for Surgical Plan

- The policy can be obtained by adults between the ages of 18 to 60 years with the cover ceasing at the age of 70, while the children need to be under the age of 3 months to 20 years, and they will be covered until the age of 25 years.
- Must be obtained with a SLIC life insurance policy.

Coverage Details of Surgical Plan

Maximum Coverage: The SLIC Surgery Plan provides coverage up to a maximum limit of LKR 1,000,000.

Types of Surgeries Covered: Over 360 listed surgeries are covered, along with many non-listed surgeries performed under medical necessity.

Claim Percentage: You can claim a percentage of your SLIC Surgery Plan sum assured between 10% - 100% depending on the type of surgery.

Coverage Period: The cover period ranges from 5 to 30 years.

Coverage Extension: The policy ceases at the age of 70 for adults and at the age of 25 for children.

International Coverage: Valid for surgeries done in Singapore, India, Malaysia, and Sri Lanka.

Travel Insurance

Claiming Process of Surgical Plan

Notify SLIC: In the event of a surgery covered under the SLIC Surgery Plan, notify SLIC as soon

as possible. You can do this by contacting their customer service hotline or visiting their nearest

branch.

Submission of Documents: Submit the required documents to SLIC. These include medical

reports, surgical bills, and any other relevant documents as specified by SLIC.

Assessment: SLIC will assess the claim based on the provided documents and the terms of the

policy.

Approval and Payment: If the claim is approved, SLIC will process the payment according to

the coverage details outlined in the policy.

Applying Process of Surgical Plan

Eligibility Check: Ensure that you meet the eligibility criteria for the SLIC Surgery Plan. You

must be between the ages of 18 to 60 years to apply, and children must be under the age of 20 years

to be covered.

Purchase SLIC Life Insurance Policy: The SLIC Surgery Plan must be purchased together with

an SLIC life insurance policy.

Application Submission: Submit your application for the SLIC Surgery Plan along with the

necessary documents to SLIC. These documents may include identification proof, medical history,

and any other documents required by SLIC.

Underwriting Process: SLIC will evaluate your application and determine the premium based on

factors such as age, medical history, and coverage amount.

Policy Issuance: Upon approval, SLIC will issue the SLIC Surgery Plan policy.

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Required Documents for Surgical Plan

Identification Proof: Copy of national identification card or passport.

Medical Reports: Reports related to your health and any pre-existing conditions.

Surgical Bills: Invoices and bills related to the surgery.

Other Relevant Documents: Any additional documents requested by SLIC for the claim or

application process.

3. Comprehensive Health Plus

What is Comprehensive Health Plus?

A comprehensive health policy that covers surgical, medical and hospitalization expenses in Sri

Lanka as well as overseas. The SLIC Comprehensive Health Plus plan provides financial support

not only for you but also for your spouse and up to 5 dependent children. The cover must be

obtained together with mandatory SLIC life insurance.

Policyholders can choose from 3 available packages depending on the required geographical

coverage and/ or medical requirement:

• Category A: Sri Lanka Only

• Category B: Sri Lanka, India, Singapore, Thailand and Malaysia

• Category C: Worldwide (excluding USA and Canada)

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Benefits of Comprehensive Health Plus

Policy period

Policy period available from 5 - 40 years.

• Variety of policy covers

Policy covers starting from LKR 100,000 for Category A, LKR 2,500,000 for category B and LKR 15,000,000 for Category C

Flexibility

Highly flexible range of premium payment options (monthly, quarterly, bi-annually or annually).

• Include your children

Children are entitled to be included in the cover up to the age of 18, with the option of extending the cover up to the age of 23.

• Hospitalization benefits

Hospitalization benefits inclusive of room charges, medical practitioner fees, theatre charges, ambulance charges, maternity benefits, etc. for both within and outside Sri Lanka.

No Claim Bonus

No Claim Bonus from 25% up to 100% of the sum assured for every claim-free year

Additional covers

Expandable with additional covers apart from life insurance options for enhanced protection such as Retirement Plans, Children's Investment Plans and more.

Cashless card method

The cashless card method is applicable for this cover.

Eligibility for Comprehensive Health Plus

- The policy can be obtained by adults between the ages of 18 to 60 years with the cover ceasing at the age of 70.
- Must be obtained with a mandatory SLIC life insurance policy.

Coverage Details of Comprehensive Health Plus

Medical Expenses Coverage: Covers surgical, medical, and hospitalization expenses incurred both in Sri Lanka and overseas.

Geographical Coverage: Choose from three packages: Sri Lanka only (Category A), Sri Lanka, India, Singapore, Thailand, and Malaysia (Category B), or worldwide excluding USA and Canada (Category C).

Policy Period and Sum Assured: Policy period ranges from 5 to 40 years, with coverage starting from LKR 100,000 for Category A, LKR 2,500,000 for Category B, and LKR 15,000,000 for Category C.

Flexibility in Premium Payment: Multiple premium payment options available: monthly, quarterly, bi-annually, or annually.

Inclusion of Dependents: Children can be included in the cover up to the age of 18, with the option to extend coverage up to the age of 23.

Hospitalization Benefits: Comprehensive hospitalization benefits including room charges, medical practitioner fees, theatre charges, ambulance charges, maternity benefits, etc., within and outside Sri Lanka.

No Claim Bonus: Earn a No Claim Bonus from 25% up to 100% of the sum assured for every claim-free year.

Additional Covers: Expand coverage with additional options such as Retirement Plans, Children's Investment Plans, and more.

Cashless Card Method: Cashless card method applicable for hassle-free claims processing.

Claiming Process for Comprehensive Health Plus

Notification of Claim: Inform SLIC (Sri Lanka Insurance Corporation) about the claim as soon as possible. This can be done through their customer service hotline, email, or by visiting their nearest branch office.

Submission of Required Documents: Prepare the necessary documents required for the claim. These typically include,

- Duly filled claim form
- Original medical bills, receipts, and invoices
- Hospitalization discharge summary
- Diagnostic reports and prescriptions
- Any other relevant medical documents

Claim Verification: SLIC will verify the submitted documents to ensure they meet the policy terms and conditions. This may involve assessing the medical necessity of the expenses incurred.

Approval and Payment: Once the claim is verified and approved, SLIC will process the payment. Depending on the nature of the claim, payment may be made directly to the insured or to the healthcare provider.

Application Process of Comprehensive Health Plus

Documentation:

Prepare the necessary documents for applying for the SLIC Comprehensive Health Plus policy. These typically include,

- Completed application form
- Copy of National Identity Card (NIC) or Passport
- Proof of income
- Other documents as required by SLIC

Selecting Coverage Package: Choose from the available coverage packages (Category A, B, or C) based on geographical coverage and medical requirements.

Selection of Policy Period and Sum Assured: Decide on the policy period ranging from 5 to 40 years and select the sum assured based on your needs and affordability.

Premium Payment Options: Select the premium payment frequency from options including monthly, quarterly, bi-annually, or annually.

Inclusion of Dependents: Include your spouse and up to 5 dependent children in the policy, with the option to extend coverage for children up to the age of 23.

Mandatory Life Insurance: Remember that the SLIC Comprehensive Health Plus policy must be obtained together with a mandatory SLIC life insurance policy.

4. Hospital Cash Plan

What is a Hospital Cash Plan?

A unique and innovative health plan that provides a fixed amount as cover for each day you are hospitalized, irrespective of the actual bills or expenses. This affords the policyholder blanket cover for additional expenses with the fixed daily cash benefit.

Benefits of Hospital Cash Plan

• LKR 20,000 on a daily basis

Up to LKR 20,000 on a daily basis to cover medical expenses.

• Double the cash benefit

Double the cash benefit of LKR 40,000 if admitted to the ICU.

• 4 days' cash benefit

Added 4 days' cash benefit if hospital stay extends beyond 10 days.

• Hospital Cash benefit

Annually the SLIC Hospital Cash benefit will be paid up to 180 days.

• Up to 5 times the annual limit

Up to 5 times the annual limit for the total policy period.

Eligibility for Hospital Cash Plan

• The policy can be obtained by adults between the ages of 18 to 60 years with the cover

ceasing at the age of 70, while the children need to be under the age of 3 months to 20

years, and they will be covered until the age of 25 years.

• Must be obtained with a SLIC life insurance policy.

Coverage Details of Hospital Cash Plan

Daily Cash Benefit: LKR 20,000 provided on a daily basis to cover medical expenses during

hospitalization.

ICU Benefit: Double the cash benefit of LKR 40,000 if admitted to the ICU.

Extended Stay Benefit: Additional 4 days' cash benefit if the hospital stay extends beyond 10 days.

Annual Limit: SLIC Hospital Cash benefit is annually paid up to 180 days.

Total Policy Period: Up to 5 times the annual limit for the total policy period.

Eligibility: Adults aged 18 to 60 years can obtain the policy, with coverage ceasing at the age of

70. Children aged 3 months to 20 years are eligible, with coverage until the age of 25 years.

Claiming Process of Hospital Cash Plan

Hospitalization: The insured individual is admitted to a hospital due to illness or injury.

Notification: The insured or their representative must inform the insurance company, SLIC (Sri

Lanka Insurance Corporation), about the hospitalization within a specified timeframe, usually

within 24 to 48 hours of admission.

Claim Form Submission: The insured or their representative submits the duly filled in claim form

along with the necessary documents to SLIC.

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Verification: SLIC verifies the claim and assesses the eligibility of the insured for the Hospital Cash benefit.

Approval: Once the claim is verified and approved, SLIC disburses the fixed daily cash benefit directly to the insured or their nominated bank account.

Additional Benefits: If applicable, such as ICU admission or extended hospital stay beyond 10 days, the additional benefits are calculated and disbursed accordingly.

Policy Renewal: The insured's policy is reviewed for renewal, ensuring continuous coverage for future hospitalizations.

Application Process of Hospital Cash Plan

Eligibility Check: Ensure the applicant meets the eligibility criteria, including age requirements and the necessity of having a SLIC life insurance policy.

Application Submission: Complete the application form for the Hospital Cash Plan along with the required documents.

Medical Examination (if required): Undergo a medical examination as per SLIC's guidelines, if necessary.

Premium Payment: Pay the applicable premium for the selected coverage amount and policy duration.

Policy Issuance: Upon successful verification and approval of the application, SLIC issues the Hospital Cash Plan policy document to the insured.

Required Documents for Hospital Cash Plan

- Application Form: Duly filled and signed application form for the Hospital Cash Plan.
- **Proof of Age:** Valid identification document indicating the age of the insured.
- SLIC Life Insurance Policy: Proof of an existing SLIC life insurance policy, if applicable.
- **Medical Records:** Relevant medical documents supporting the hospitalization, such as admission/discharge summaries, medical reports, and prescriptions.
- Bank Account Details: Nominated bank account details for the direct disbursement of the cash benefit.

Home Insurance

1. Burglary Insurance

What is Burglary Insurance?

Safeguard your home and family against loss or damage to your property caused by break-ins with our Burglary Insurance policy ideal for single households. With this comprehensive policy, the safety of your home and the security of your valuables will no longer add any distress to your demanding lifestyle.

Terms & Conditions for Burglary Insurance

- The building should be used exclusively as a private dwelling / home and not for other purposes or domestic industries.
- The premises should bein a good state of repair.
- The structure should be walled with bricks/ concrete/ cement blocks and roofed.

Benefits of Burglary Insurance

Covers loss of property

Covers loss of property such as furniture, electrical and electronic items, valuables, paintings, antiques, etc. due to burglary / break-ins and theft

• Covers damage to property

Covers damage to property (locks, doors and windows etc.) due to forcible entry or exit or any attempt there at

Easy settlement

Convenient claim settlement process.

Eligibility for Burglary Insurance

- Policyholder should have an insurable interest on the asset.
- Policyholder should be eligible to sign an insurance agreement as per the legislation framework of Sri Lanka
- Insuring property / assets should be within the geographical limits of Sri Lanka.

Coverage Details of Burglary Insurance

Loss of Property: The burglary insurance policy covers the loss of property such as furniture, electrical and electronic items, valuables, paintings, antiques, etc., due to burglary, break-ins, or theft.

Damage to Property: It also provides coverage for damage to property, including locks, doors, and windows, resulting from forcible entry or exit or any attempt thereof during a burglary.

Exclusions: The policy may have certain exclusions, such as damage caused by natural disasters (e.g., earthquakes, floods), wear and tear, or negligence. Review the policy documents carefully to understand the exclusions.

Claim Settlement: In the event of a covered loss, the insurance company will facilitate a convenient claim settlement process, providing compensation for the stolen or damaged items as per the terms and conditions of the policy.

Claiming Process of Burglary Insurance

Report the Incident: In the unfortunate event of a burglary or break-in, immediately report the incident to the nearest police station. Obtain a copy of the First Information Report (FIR) from the police.

Notify the Insurance Company: Contact the insurance company as soon as possible to inform them about the burglary. Provide them with details such as policy number, date and time of the incident, and a brief description of the items stolen or damaged.

Documentation Submission: Prepare and submit the necessary documents required by the insurance company. This includes,

- Copy of the FIR from the police
- Duly filled claim form provided by the insurance company.
- Inventory list of stolen or damaged items, including their value and proof of ownership (receipts, invoices, photographs, etc.)
- Any other documents requested by insurance the company.

Assessment Process: The insurance company will assign a claims adjuster to assess the damage or loss. They may visit your property to inspect the damage and validate your claim.

Claim Settlement: Once the assessment is completed and the claim is verified, the insurance company will proceed with the claim settlement. You will receive compensation as per the terms and conditions of your policy.

Application Process of Burglary Insurance

Eligibility Check: Ensure that you meet the eligibility criteria mentioned in the policy terms and conditions, such as having insurable interest on the asset, eligibility to sign an insurance agreement as per Sri Lankan legislation, and the property/assets being within the geographical limits of Sri Lanka.

Documentation Submission: Provide the necessary documents required for applying for the burglary insurance policy. This includes,

- Completed application form.
- Proof of ownership or occupancy of the property
- Any other documents requested by the insurance company.

Underwriting Process: The insurance company will review your application and assess the risk associated with insuring your property against burglary. This may involve evaluating factors such as the location of the property, security measures in place, and previous claims history.

Policy Issuance: If your application is approved, the insurance company will issue the burglary insurance policy. Review the policy documents carefully to understand the coverage details, terms, and conditions.

2. Fire Insurance for Dwelling Houses

What is Fire Insurance for Dwelling Houses?

Our basic Fire Insurance policy insures your house, either completed, dwelling, or under construction against a number of fire or fire related perils. This enables homeowners to curtail financial losses due to accidental fires or related perils to your home and ensures the restoration or reconstruction of the home can be carried out immediately.

Terms & Conditions for Fire Insurance for Dwelling Houses

- The building should be used exclusively as a private dwelling / home and not for other purposes or domestic industries.
- The premises should be in a good state of repair (If completed and dwelling)
- The structure should be constructed with recognized standard construction.

Benefits of Fire Insurance for Dwelling Houses

The Fire Insurance Policy covers the following fire and related perils:

- Fire and lightning
- Riots and strikes
- Malicious damage
- Explosions
- Cyclone/Storm/Tempest and Flood
- Earthquake
- Natural disasters
- Impact
- Electrical extra
- Aircraft damage
- Bursting and overflowing of water tanks
- Convenient claim settlement process guaranteed.

Eligibility for Fire Insurance for Dwelling Houses

- Policyholder should have an insurable interest on the asset
- Policyholder should be eligible to sign an insurance agreement as per the legislation framework of Sri Lanka
- Insuring property / assets should be within the geographical limits of Sri Lanka

Coverage Details for Fire Insurance for Dwelling Houses

The Fire Insurance Policy for Dwelling Houses typically covers the following fire and related perils:

Fire and Lightning: Damage caused by fire or lightning striking the insured property.

Riots and Strikes: Damage resulting from riots, civil commotion, or strikes.

Malicious Damage: Intentional damage caused by malicious acts of individuals.

Explosions: Damage caused by explosions, whether accidental or intentional.

Cyclone/Storm/Tempest and Flood: Damage caused by cyclones, storms, tempests, or floods.

Earthquake: Damage resulting from earthquakes or tremors.

Natural Disasters: Coverage for other natural disasters, such as tsunamis or volcanic eruptions.

Impact: Damage caused by the impact of vehicles or falling objects.

Electrical Extra: Coverage for damage caused by electrical malfunctions or short circuits.

Aircraft Damage: Damage caused by aircraft or aerial devices.

Bursting and Overflowing of Water Tanks: Damage caused by bursting or overflowing of water tanks or pipes.

Claiming Process for Fire Insurance for Dwelling Houses

Notification: In the event of a fire or related peril damaging your dwelling house, immediately notify the insurance company via hotlines or online portals for reporting claims.

Documentation: Prepare necessary documents to support your claim. This typically includes:

- Policy details: Have your insurance policy number and details ready.
- Incident details: Provide information about the incident, including date, time, and cause of the fire or related peril.
- Proof of ownership: Provide documents proving your ownership of the dwelling house, such as property deeds or purchase agreements.
- Police report: If applicable, obtain a copy of the police report filed for the incident.
- Damage assessment: Provide evidence of the extent of damage, such as photographs, videos, or assessments from qualified professionals.

Claim Submission: Submit your claim along with the required documents to insurance company through online portal or email. Ensure all information provided is accurate and complete to expedite the processing of your claim.

Claim Evaluation: The insurance company will evaluate your claim based on the provided documentation and policy coverage. They may conduct investigations or inspections if necessary to assess the validity of the claim.

Settlement: Once the claim is approved, the insurance company will proceed with the settlement. The settlement amount will be determined based on the terms and conditions of your policy, including coverage limits and deductibles.

Applying Process for Fire Insurance for Dwelling Houses

Enquiry: Contact insurance providers to inquire about fire insurance policies for dwelling houses. You can do this through their website, offices, or authorized agents.

Application Submission: Complete the application form provided by the insurance company. You will need to provide information about the dwelling house to be insured, such as its location, construction details, and estimated value.

Documentation: Prepare necessary documents for the application, including proof of ownership, property details, and identification documents as required by the insurance company.

Underwriting: The insurance company will assess the risk associated with insuring your dwelling house. This may involve evaluating factors such as the property's location, construction quality, and past claims history.

Policy Issuance: If your application is approved, the insurance company will issue the fire insurance policy for your dwelling house. Review the policy documents carefully to understand the coverage, terms, and conditions.

Requirements Documents for Fire Insurance for Dwelling Houses

Proof of Ownership: Documents proving your ownership of the dwelling house, such as property deeds, purchase agreements, or lease agreements.

Identification Documents: Valid identification documents of the policyholder, such as national identity card, passport, or driver's license.

Property Details: Information about the dwelling house to be insured, including its address, construction type, usage, and estimated value.

Policy Application Form: Completed application form provided by the insurance company, containing details about the insured property and the policyholder.

Other Supporting Documents: Any additional documents required by the insurance company, such as inspection reports, photographs of the property, or declarations of previous claims history.

3. Home Protect Insurance

What is Home Protect Insurance?

A comprehensive home insurance policy, Home Protect, is the ideal cover to protect your most valued asset against unexpected and unavoidable risks and liabilities. Home Protect covers your home, your family and your valuables and your domestic staff in the event of a disaster.

Terms & Conditions for Home Protect Insurance

- The building should be used exclusively as a private dwelling / home and not for other purposes or domestic industries.
- The premises should be in a good state of repair.
- The structure should be walled with bricks / concrete / cement blocks and roofed.

Benefits of Home Protect Insurance

Home Protect provide protection to your house against following perils:

- Fire and lightning
- Terrorism, riot, strike and civil commotion
- Malicious damage
- Explosions
- Earthquakes
- Cyclone / Storm / Tempest and Flood
- Natural disasters
- Impact damage
- Falling trees, telephone posts and light posts
- Aircraft damage
- Burglary, housebreaking or any attempt at theft.
- Accidental breakage of mirrors other than hand mirrors etc.
- Accidental damage to fixed and plate glass.
- Public liability cover

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You can protect your house insuring:

- Buildings, gates, swimming pool, Boundary walls etc.
- Contents include furniture, electricals, and electronics.
- Valuables and personal effects such as Jewelry, Personal Cash at premises, precious stones,
 Electronic Equipment (Laptops, Phones, Personal Cameras, Tablet PCs etc), Musical instruments
- Paintings and antiques

Following costs will be reimbursed in the event of covered risks:

- Removal of debris
- Expenses for alternative accommodation during the rebuilding period
- Damage to services lines within the premises (Electricity, Water, Gas supplies, etc.)
- Professional fees (Engineer, Surveyor and Architect expense)
- Reproduction cost of documents and deeds

Under mentioned benefits are also available:

- Personal accident cover for named family members (age limit 70 years)
- Accidental death or total permanent disability of domestic staff hospitalization allowance due to injuries sustained at work (age limit 60 years)
- Personal Accident Cover (age limit 70 years) and Natural Death Cover (age limit 60 years) for the insured

Eligibility for Home Protect Insurance

- Policyholder should have an insurable interest on the asset
- Policyholder should be eligible to sign an insurance agreement as per the legislation framework of Sri Lanka
- Insuring property / assets should be within the geographical limits of Sri Lanka

Requirements and Coverage Details for Home Protect Insurance

Eligibility: To be eligible for Home Protect Insurance, you must have an insurable interest in the property and comply with the legislation framework of Sri Lanka. The property to be insured must be within the geographical limits of Sri Lanka.

Coverage Details: Home Protect Insurance provides comprehensive coverage against various perils, including fire, lightning, terrorism, riot, malicious damage, earthquakes, cyclones, burglary, accidental breakage, and more. Coverage extends to buildings, contents, valuables, personal effects, and liability protection.

Benefit Reimbursements: In the event of covered risks, Home Protect Insurance reimburses costs such as debris removal, alternative accommodation expenses, damages to service lines, professional fees, and reproduction costs of documents.

Additional Benefits: Additional benefits include personal accident cover for named family members, coverage for domestic staff injuries, personal accident cover, and natural death cover for the insured within specified age limits.

Claiming Process of Home Protect Insurance

Contact the Insurance Company: In the event of a covered peril or damage, immediately contact your insurance company to initiate the claims process. This can usually be done through a dedicated claims hotline, email, or online portal.

Provide Information: Be prepared to provide details about the incident, including the date, time, and cause of damage. You may also need to provide your policy number and personal information for verification.

Documentation: Submit all required documentation to support your claim. This may include photographs of the damage, police reports (in the case of theft or vandalism), receipts for repairs or replacements, and any other relevant evidence.

Assessment: An insurance adjuster may visit your property to assess the extent of the damage and determine the coverage applicable under your policy.

Claim Settlement: Once the assessment is complete and your claim is approved, the insurance company will proceed with the settlement. This may involve repair, replacement, or reimbursement for the covered losses.

Applying Process of Home Protect Insurance

Evaluate Your Needs: Determine the coverage you require based on the value of your property, belongings, and potential risks. Consider the benefits offered by Home Protect Insurance and choose a plan that suits your needs.

Contact an Insurance Agent: Reach out to a licensed insurance agent or broker who offers Home Protect Insurance. They will guide you through the application process, explain the policy terms and conditions, and help you choose the appropriate coverage options.

Submit Application: Complete the insurance application form provided by the agent or insurer. Ensure that you accurately disclose all relevant information about your property, including its condition, location, and any additional coverage requirements.

Provide Documentation: Depending on the requirements, you may need to submit supporting documents such as property ownership proof, identification documents, and other relevant paperwork.

Underwriting Process: The insurance provider will assess your application, including factors such as eligibility, insurable interest, and compliance with Sri Lankan legislation. They may also conduct inspections or surveys of the property.

Policy Issuance: Upon approval, the insurer will issue your Home Protect Insurance policy. Carefully review the policy documents to ensure that they accurately reflect the coverage and terms agreed upon during the application process.

4. Home Protect Lite Insurance

What is a Home Protect Lite insurance?

Sri Lanka Insurance presents "Home Protect Lite," a 1st Loss basis home insurance policy designed to meet your specific needs. With Home Protect Lite, you can choose from a range of

five specified packages, providing coverage from 1 million to 5 million, all at an affordable premium.

Our trusted home insurance policy offers you the peace of mind of protecting not only your home but also your valuable belongings. We understand the importance of safeguarding your investment, and that is why we have tailored our "Home Protect Lite" policy to provide comprehensive coverage at a price that suits your budget.

Insurance Packages

Option	Option	Option	Option	Option
01	02	03	04	05
1Mn	2Mn	3Mn	4Mn	5Mn
1,900/-	2,500/-	3,400/-	4,300/-	5,300/-
	01 1Mn	01 02 1Mn 2Mn	01 02 03 1Mn 2Mn 3Mn	01 02 03 04 1Mn 2Mn 3Mn 4Mn

Benefits of Home Protect Lite insurance

Home Protect Lite provide protection to your house and its content against following perils.

- Fire/Lightning
- Malicious damage by any person(s)
- Explosion
- Natural Perils including Cyclone/Storm/Tempest/Flood/ Earthquake, Tsunami etc.
- Electrical short circuiting(Electrical damage) for electrical and electronic contents only
- Bursting & overflowing of water tanks, Apparatus and pipes.

- Aircraft damage
- Impact Damage
- Burglary involving forcible and violent entry/exit (for contents only) Damage to the building caused by burglary of house breaking.

Key Features

- Online Purchase Facility
- Convenient claim settlement process
- No declaration of list of items insured at the beginning of the insurance.
- Ability to purchase the policy instantly.
- Affordable premiums
- Less documentation and speedy service delivery

Eligibility for Home Protect Lite insurance

- Policyholders should have an insurable interest in the asset.
- Policyholder should be eligible to sign an insurance agreement as per the legislation framework of Sri Lanka
- Insuring property / assets should be within the geographical limits of Sri Lanka
- The policy holder must make accurate disclosure of the risks particulars which shall be the basis of this insurance.

Coverages of Home Protect Lite insurance

- Protection against specified perils including fire/lightning, malicious damage, explosion, natural perils (cyclone/storm/tempest/flood/earthquake/tsunami), electrical damage, bursting/overflowing of water tanks, aircraft damage, impact damage, and burglary.
- Coverage extends to both the building and its contents, with options ranging from 1 million to 5 million LKR.

• Convenient claim settlement process with no declaration of listed items insured at the beginning of the insurance.

• Coverage is applicable within the geographical limits of Sri Lanka.

• Affordable premiums with less documentation and speedy service delivery.

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Claiming Process of Home Protect Lite insurance

Report the Incident: In case of any covered incident (e.g., fire, burglary, natural calamity), immediately report the incident to Sri Lanka Insurance. This can usually be done through their hotline or online portal.

Provide Necessary Information: When reporting the incident, provide all necessary information such as policy details, location of the insured property, nature of the incident, and any other relevant details requested by the insurer.

Documentation: Prepare and submit any required documentation to support your claim. This may include incident reports, police reports (in case of burglary), photographs of the damage, receipts or invoices for damaged items, and any other documents specified by the insurer.

Assessment: Sri Lanka Insurance will assess the claim based on the provided information and documentation. They may conduct on-site inspections or investigations as necessary to evaluate the extent of the damage and determine the eligibility for coverage.

Claim Settlement: Upon completion of the assessment, Sri Lanka Insurance will process the claim settlement. If the claim is approved, they will proceed with the settlement as per the terms and conditions of the policy.

Applying Process of Home Protect Lite insurance

Choose Coverage: Select the desired coverage package from the available options, ranging from 1 million to 5 million LKR.

Fill in Details: Provide all necessary personal and property details as required during the online application process.

Review and Confirm: Review the policy details, coverage, and premium amount before confirming the purchase.

Payment: Make the payment for the premium online through the available payment methods.

Policy Issuance: Upon successful payment, the policy documents will be issued electronically, and coverage will be effective as per the terms of the policy.

Required Documents for Home Protect Lite insurance

- Personal Identification: Valid identification documents of the policyholder.
- Property Details: Information regarding the insured property, including address, type of property, and any other relevant details.
- Declaration of Risks: Accurate disclosure of the risks associated with the insured property, as per the insurer's requirements.
- Incident Documentation: In case of a claim, documents such as incident reports, police reports, photographs, receipts, etc., may be required to support the claim.

Personal Accident Insurance

1. Jana Rekuma Individual Personal Accident Cover

Jana Rekuma Personal Accident cover offers comprehensive coverage against accident injuries that may occur anywhere at any time. Affordable premiums and multiple benefits offered to individuals are the unique features of this cover that makes Jana Rekuma stand out from other similar products available in the market.

This cover includes,

- Personal accident cover
- Hospital Allowance cover due to accident.
- Funeral expense cover
- 24x7 worldwide coverage
- Motorcycle cover (whether as a driver or pillion rider)

Jana Rekuma Product Details

Policy period	12 months			
Age at entry	Minimum age of entry-18			
	Maximum age of entry-60 (before 60th			
	birthday)			
Cover ceasing age	70 years			
Type of Plan	Individual			
Premium type	Annual premium			

Benefits of Jana Rekuma

	Option I	Option II	Option III
Sum Insured	Rs. 250,000/-	Rs. 500,000/-	Rs. 1,000,000/-
Premium (with	Rs. 700/-	Rs. 1,250/-	Rs. 2,100/-
taxes)			
*Hospital allowance	Rs. 3,500/-	Rs. 7,000/-	Rs. 10,500/-
cover due to accident	(Rs. 250/- Per day x 14	(Rs. 500/- Per day x	(Rs. 750/- Per day x
(Maximum 14 days	days Max)	14 days Max)	14 days Max)
only per annum)			

**Funeral	Expe	nse	Rs. 10,000/-	Rs. 15,000/-	Rs. 20,000/-
Cover	due	to			
Accidental &		&			
Natural Death					

^{*}Minimum two days hospitalization required to obtain this benefit

Claiming Process of Jana Rekuma

Report the Accident: In case of an accident, the insured individual or their representative should report the incident to Jana Rekuma's claims department as soon as possible.

Submit Claim Form: The insured individual needs to fill out a claim form provided by Jana Rekuma. This form will require details such as the policy number, date, time, and location of the accident, nature of injuries sustained, medical treatment received, etc.

Provide Supporting Documents: Along with the claim form, certain supporting documents may be required, such as medical reports, hospital bills, police reports (if applicable), death certificate (for funeral expense cover), etc.

Claim Assessment: Jana Rekuma's claims department will assess the claim based on the provided information and documentation. They may conduct further investigation if necessary.

Claim Settlement: Once the claim is approved, Jana Rekuma will provide compensation according to the coverage details mentioned in the policy.

^{**}Subject to no liability due to suicide, self-inflicted injuries, insanity, alcoholism, drug addiction, aids, and other sexually transmitted diseases.

Application Process of Jana Rekuma

Application Form: The individual needs to fill out an application form, providing personal details and selecting the desired coverage options.

Medical Examination (if required): Depending on the age and health condition of the applicant, a medical examination may be required to determine the premium and coverage eligibility.

Premium Payment: The applicant needs to pay the premium amount as per the selected coverage and payment frequency.

Policy Issuance: Once the application is processed and approved, Jana Rekuma will issue the policy document to the insured individual.

Required Documents for Jana Rekuma

- Completed claim form
- Policy number
- Details of the accident (date, time, location)
- Medical reports and bills
- Police report (if applicable)
- Death certificate (for funeral expense cover)
- Any other relevant documents related to the accident and injuries.

Children Insurance

1. Minimuthu Dayada

What is Minimuthu Dayada?

Set a strong foundation for your child's future today with the Minimuthu Dayada insurance policy. Specially designed to ensure your child receives highly beneficial returns at an affordable premium, Minimuthu Dayada guarantees an attractive 125% sum assured on maturity, strategically spread over a payment period of 5 years from the date of maturity.

Benefits of Minimuthu Dayada

- Maturity benefit of 125%: Maturity benefit of 125% of the sum assured spread over a payment period of 5 years from maturity, along with the cumulative bonus calculated from the first year of policy commencement.
- **Investment for your child:** An investment to start when your child reaches 18 years of age.
- **Policy terms:** Policy terms from 5 18 years depending on child's age.
- **Flexibility:** Flexible range of premium payment modes (monthly, quarterly, bi-annually or annually).
- LKR 1,000 per day for hospitalization: LKR 1,000 per day hospitalization cash benefit cover for the child in case of hospitalization due to an accident or sickness.

- Compensation on death: Natural death of a parent during the premium paying term immediately entitles the child to 3 times the sum assured with cumulative bonuses, and a waive off of all further premiums. The child will also receive triple the installment sums on maturity.
- Compensation on death: Accidental death of a parent during the premium paying term immediately entitles the child to 5 times the sum assured with cumulative bonuses, and a waive off of all further premiums. On death of the parents the child will also receive. 3 times the bonus sum assured at maturity.
- Compensation on death: Accidental death of a parent during the benefit paying term immediately entitles the child to 5 times the sum assured with cumulative bonuses, with all future installment sums tripled.
- **Disability of a parent:** Total and permanent disability of a parent (life assured) during the premium paying term immediately entitles the child to a waive off of all further premiums. An amount equal to the sum assured will be paid in 5 equal installments, with the child receiving triple the installment sums on maturity. Cumulative bonuses will be paid together with the final installment.
- Additional covers: Expandable with additional covers for enhanced protection such as Critical Illness Cover, Health Cover, Funeral Expense Cover and many more.

Eligibility for Minimuthu Dayada

- The policy can be obtained by parents between the ages of 20 to 65 years on behalf of children between the ages of 1 to 13 years.
- The child should not exceed 18 years of age before the policy matures.
- The minimum sum assured should be LKR 100,000.

Claiming Process of Minimuthu Dayada

Notify Insurance Provider: In the event of a claimable incident (such as death, disability, or hospitalization), the policyholder or beneficiary should inform the insurance company as soon as possible.

Submit Claim Form: The policyholder or beneficiary must fill out the appropriate claim form provided by the insurance company. This form typically includes details of the incident, policy information, and beneficiary details.

Provide Supporting Documents: Along with the claim form, certain supporting documents may be required depending on the nature of the claim. These documents may include medical certificates, death certificates, accident reports, and any other relevant paperwork.

Claim Verification: The insurance company will review the claim application and supporting documents to verify the validity of the claim.

Processing: Once the claim is verified and approved, the insurance company will proceed with the processing of the claim.

Disbursement: Upon completion of processing, the insurance company will disburse the claim amount according to the terms and conditions of the policy.

Application Process of Minimuthu Dayada

Eligibility Check: Ensure that both the parent(s) and child meet the eligibility criteria specified by the insurance provider.

Select Policy Term and Sum Assured: Choose the desired policy term (between 5 to 18 years) based on the child's age and select a sum assured amount (minimum LKR 100,000).

Choose Premium Payment Mode: Select the preferred premium payment mode from the available options (monthly, quarterly, bi-annually, or annually).

Fill Application Form: Complete the application form provided by the insurance company with accurate personal and contact details.

Provide Required Documents: Submit necessary documents such as proof of identity, age proof for the child, and income proof (if required).

Medical Examination (if applicable): Depending on the age and sum assured amount, a medical examination of the parent(s) may be required.

Payment of Premium: Pay the initial premium amount as per the selected payment mode.

Policy Issuance: Upon completion of the application process and payment of the premium, the insurance company will issue the policy document.

Required Documents for Minimuthu Dayada

- Application Form: Completed and signed application form.
- **Proof of Identity:** Valid identification documents for the parent(s) applying for the policy.
- Age Proof for Child: Birth certificate or any other document verifying the age of the child.
- **Income Proof (if required):** Documents demonstrating the income of the parent(s), if necessary.
- Medical Reports (if applicable): Medical examination reports, if required by the insurance company.

2. School Fee Protector

Protect your child's future even in your absence.

Don't let tragedy disrupt your child's education. School Fee Protector from Sri lanka Insurance ensures your child's uninterrupted education for children studying in International Schools by paying all remaining school fees in case of an untimely demise or total permanent disability of a parent.

Benefits of School Fee Protector

- The policy will cover the duration of your child's education in an International School in Sri Lanka.
- Choose a policy term and cover according to the remaining number of school years and fees for your child.
- In case of your untimely demise or total permanent disability, we will pay the remaining school fees to ensure uninterrupted education for your child.
- Commence the policy with a single premium payment for the entire term.
- Cover can be taken out at any time, not just at the beginning of the school year.

Eligibility for School Fee Protector

• For parents aged between 18 - 65 years

Coverage Details for School Fee Protector

Duration: The policy will cover the duration of the child's education in an International School in Sri Lanka.

Coverage Amount: In the event of the policyholder's untimely demise or total permanent disability, Sri Lanka Insurance will pay the remaining school fees directly to the educational institution.

Policy Term: Parents can choose a policy term and cover according to the remaining number of school years and fees for their child.

Premium Payment: The policy can be commenced with a single premium payment for the entire term.

Eligibility: Parents aged between 18 - 65 years are eligible to apply for School Fee Protector coverage.

Claiming Process of School Fee Protector

Notification: The beneficiary (usually the surviving parent or legal guardian) must notify Sri Lanka Insurance of the policyholder's untimely demise or total permanent disability as soon as possible.

Claim Form Submission: The beneficiary must complete and submit the claim form provided by Sri Lanka Insurance. This form typically includes details such as the policyholder's name, policy number, date of incident, and details of the beneficiary.

Document Submission: Along with the claim form, the beneficiary must submit supporting documents, such as a death certificate (in case of demise) or medical evidence (in case of disability), to validate the claim.

Claim Processing: Sri Lanka Insurance will review the submitted claim and documents to assess its validity and determine the coverage amount.

Payment: Once the claim is approved, Sri Lanka Insurance will make the necessary arrangements to pay the remaining school fees directly to the educational institution to ensure the uninterrupted education of the child.

Application Process of School Fee Protector

Policy Selection: Parents interested in obtaining School Fee Protector coverage need to select a suitable policy term and coverage according to the remaining number of school years and fees for their child.

Application Submission: The parent must submit a completed application form along with any required documents to Sri Lanka Insurance. The application form typically includes personal information about the policyholder, such as age, contact details, and educational details of the child.

Premium Payment: The policyholder needs to make a single premium payment for the entire term of the policy to commence coverage.

Underwriting: Sri Lanka Insurance will assess the application and underwrite the policy based on factors such as the parent's age and health status.

Policy Issuance: Upon approval, Sri Lanka Insurance will issue the policy documents to the policyholder, outlining the coverage details, terms, and conditions.

Required Documents for School Fee Protector

- Completed application form.
- Proof of identity and age of the policyholder (e.g., passport, national ID).
- Educational details of the child, including school enrollment documents.
- Any additional documents required by Sri Lanka Insurance for underwriting purposes.

3. Minimuthu Parithyaga

What is Minimuthu Parithyaga?

Don't let exorbitant premiums stop you from safeguarding your child's future. With the Minimuthu Parithyaga Children's Plan, we support your responsibility in securing total protection for your child with a low, highly affordable premium. Now you too can gift your child their dream for a brighter future with the Minimuthu Parithyaga Children's Plan.

Benefits of Minimuthu Parithyaga

- Policy terms
 Policy period available from 10 24 years depending on the child's age.
- Flexibility
 Highly flexible range of premium payment modes (monthly, quarterly, bi-annually or annually).

Financial assistance

Parents can decide a period between 18 - 25 years during which the child will require financial assistance for higher education.

• Compensation on death

Loss of a parent during the premium paying term immediately entitles the child to the total sum assured and a waive off of all further premiums. The child or guardian will also receive an additional 15% of the total sum assured each year until the end of the policy period and cumulative bonuses will be paid at the maturity.

Additional covers

Expandable with additional covers for enhanced protection such as Permanent Disability Benefit, Funeral Expense Cover, Spouse Cover and many more.

Eligibility for Minimuthu Parithyaga

- The policy can be obtained by parents between the ages of 18 to 60 years on behalf of children between the ages of 1 month to 15 years.
- The minimum sum assured should be LKR 50,000.
- Your child is eligible for the Arogya Hospitalization Cover and Jeewaka Critical Illness Cover at the age of 1 month onwards at a normal cost.

Coverage Details of Minimuthu Parithyaga

Policy Terms: Available for a period of 10 to 24 years depending on the child's age.

Flexibility: Various premium payment modes including monthly, quarterly, bi-annually, or annually.

Financial Assistance: Parents can decide a period between 18 - 24 years during which the child will require financial assistance for higher education.

Compensation on Death: Total sum assured provided immediately on the loss of a parent during the premium paying term, along with a waiver of further premiums. An additional 15% of the total sum assured provided annually until the end of the policy period, along with cumulative bonuses at maturity.

Additional Covers: Optional covers available for enhanced protection such as Permanent Disability Benefit, Funeral Expense Cover, and Spouse Cover.

Claiming Process of Minimuthu Parithyaga

Notification: In the event of the policyholder's death during the premium paying term, the beneficiary or guardian should immediately notify the insurance company.

Submission of Claim: The beneficiary or guardian should submit a claim form to the insurance company along with necessary supporting documents.

Verification and Processing: The insurance company will verify the claim and assess its validity based on the policy terms and conditions.

Settlement: Upon approval, the insurance company will settle the claim by providing the total sum assured to the child, along with a waiver of further premiums. Additionally, the child or guardian will receive an additional 15% of the total sum assured each year until the end of the policy period.

Application Process of Minimuthu Parithyaga

Application Submission: Parents should fill out an application form with accurate details about themselves and their child, along with selecting desired coverage options.

Documentation: Along with the application form, parents need to submit necessary documents such as proof of identity, age, and income, as per the insurance company's requirements.

Underwriting: The insurance company will assess the application and determine the premium amount based on factors like the parent's age, child's age, and chosen coverage options.

Policy Issuance: Upon approval, the insurance company will issue the policy documents to the parents.

Required Documents for Minimuthu Parithyaga

- Proof of Identity (e.g., National Identity Card, Passport)
- Proof of Age for the Child (e.g., Birth Certificate)
- Proof of Age for the Parent (e.g., Birth Certificate, National Identity Card)
- Proof of Income (e.g., Salary Slip, Income Tax Returns)