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BAJAJ ALLIANZ GENERAL INSURANCE COMPANY LTD.

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

IRDAI Registration No.113

Corporate Identity Number: U66010PN2000PLC015329

Policy Issuing,correspondence address for communication by policy [or certificate of insurance] holder,policy/claim servicing, notices and or summons	Bajaj Allianz General Insurance Company Limited., Unit No.301 and 302,3rd Floor,, Silver point, Plot No.17/18, CTS No.501/1,, New Maneklal Estate, Ghatkopar (W), MUMBAI-400086 PH:022-67443100		
Insured Name	SATISH B DHAWALE	Policy Number	OG-23-1907-1870-00000160

Welcome to Bajaj Allianz Family

SATISH B DHAWALE

ROOM NO 402 A WING SANKALP SIDDHI SOCIETY MARATHON COMPLEX , KARVE NAGAR MUMBAI , BHANDUP EAST, MUMBAI, MAHARASHTRA-400059

Customer ID : 285062157

Dear Customer,

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

We request you to kindly go through the contents of the policy schedule and the terms and conditions. In case of any clarification or disagreement, please write to us at **bagichelp@bajajallianz.co.in** within fifteen days of receipt of this policy.

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

For & on the behalf

Bajaj Allianz General Insurance Company Ltd.

Authorized Signatory

For help and more information:

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

Corporate Identification Number U66010PN2000PLC015329



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

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Transcript of Proposal for Standalone Own Damage Cover for Private Car

Dear SATISH B DHAWALE,

We wish to inform you that the contract under policy number 'OG-23-1907-1870-00000160' has been finalized based on the proposal / information and declaration given by you, the transcript whereof is mentioned below. You are requested to reconfirm the same. In case of any disagreement or objection or any changes with respect to information mentioned below, we request you to please revert back within a period of 15 days from date of your receipt of this transcript along with Policy failing which it will be deemed that you have positively confirmed/ are satisfied with the correctness of the details mentioned below. Kindly note that as the contents and declarations contained in this transcript is the basis on which we have issued the policy to you, we advise you to please ensure that you have provided/disclosed and or not withheld any material facts/information and declarations, as Policy becomes Void ab initio if material facts are not provided/disclosed and or withheld and in such case no claim, if any, will be considered by us apart from forfeiture of the premium.

Details provided by you:

A. Proposer details

1. Proposer Name : SATISH B DHAWALE
2. Proposer Address : ROOM NO 402 A WING SANKALP SIDDHI SOCIETY MARATHON COMPLEX ,
KARVE NAGAR MUMBAI
, BHANDUP EAST, MUMBAI, MAHARASHTRA-400059
3. Proposer Mobile Number : 9702899701
4. Proposer Residential Number : NA
5. Proposer e-mail id : NAVNATHSHIRSAT5@GMAIL.COM
6. Proposer Profession : NA

B. Vehicle Details

Registration Number	Month / Year of Regn	Vehicle Make	Vehicle Model	Vehicle Sub Type	Cubic Capacity	Fuel Type	Year of Manufacture	Seating Capacity
MH03DU673 3	OCT/2021	TATA	NEXON	1.2 PETROL XZA PLUS DT (S) 1199 CC	1199	Petrol	2021	5

Engine Number	Chassis Number	Vehicle IDV (in Rs.)	Electrical Accessories IDV (in Rs.)	Non-Electrical Accessories IDV (in Rs.)	CNG/LPG Unit (Extra fitted) IDV (in Rs.)	Total IDV (in Rs.)
REVTRN11JYX K89171	MAT627235ML K73579	850000	0	0	0	8,50,000.00

C. Coverage opted

1.	Own Damage Standalone Cover	Period of Insurance	From : 28-OCT-2022 00:01 (Hrs) To : 27-OCT-2023 Midnight
2.	Details of Active Third Party Liability Policy	Period of Insurance	From : 28-OCT-2021 To : 27-OCT-2024
		Name of Insurance Company	Future Generali India Insurance Company Limited.
		Policy Number	TMA70464

3. Is your vehicle fitted with external LPG/CNG kit : No.
 4. Electrical Accessories cover Opted (If Applicable) : No.
 5. Non - Electrical Accessories cover Opted (If Applicable): : No.
 6. Is Voluntary Excess opted : No.
 Amount of voluntary excess opted : Rs.NA.
 7. Is any additional compulsory deductible imposed and agreed upon : No.
 Amount of additional compulsory deductible imposed : NA.
 8. Whether geographical area extension is opted : No.
 Details of Countries to which geographical area extension cover is given : NA.
 9. Pre Existing damages in the vehicle : NA.
 10. Total Premium (excluding GST) for OD coverages, quoted and agreed upon is :
 11. Do you have valid PUC certificate of the vehicle : NA
 12. NCB (No Claim Bonus) claimed by you and granted by us based on your declaration of no claim during your previous policy : -20 %.
 13. Previous Own Damage Policy Detail
 (i) Insurer Name Future Generali India Insurance Company Limited..
 (ii) Previous Policy No. TMA70464, Previous Policy Expiry Date :27-OCT-2022
 14. Whether your vehicle is Hypothecated and if so the details of Pledgee whose name is registered by us : Yes.
 Name of Pledgee : CANARA BANK MUMBAI.
 15. Whether PA cover is opted for owner-driver : No.
 16. Add on Cover(s) opted : Yes
 Plan Name:Consumable Expeness And Drive Assure - Economy Plan Description: 24x7 spot assistance , consumable expenses , depreciation shield , engine protector ,
 Please call us on 1800 103 5858 for any emergency.
 17. To support our Go Green initiative, send policy copy link on registered mobile number / email id: YES

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

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

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

Contact our policy servicing branch at: Bajaj Allianz General Insurance Company Limited,, Unit No.301 and 302,3rd Floor,, Silver point, Plot No.17/18, CTS No.501/1,, New Maneklal Estate, Ghatkopar (W), MUMBAI-400086 PH:022-67443100.

INSURANCE ACT, 1938 SECTION 41 - PROHIBITION OF REBATES

No person shall allow or offer to allow either directly or indirectly, as an inducement to any person to take out or renew or

continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectus or tables of the insurer. **ANY PERSON IN BREACH OF COMPLYING WITH THE PROVISIONS OF THIS SECTION SHALL BE PUNISHABLE WITH FINE WHICH MAY EXTEND TO RUPEES TEN LAKH.** Bajaj Allianz General Insurance Co Ltd



Caringly yours
BAJAJ | Allianz

BAJAJ ALLIANZ GENERAL INSURANCE COMPANY LIMITED
Regd. Office & Head Office: GE Plaza, Airport Road, Yerwada, Pune-411006(India)

IRDAI Registration No. 113

Corporate Identity Number: U66010PN2000PLC015329

STANDALONE OWN DAMAGE COVER FOR PRIVATE CAR

Certificate of Insurance

Certificate of Insurance (STANDALONE OWN DAMAGE COVER FOR PRIVATE CAR)

UIN : IRDAN113RP0001V01201920

Policy issuing office and correspondence address for communication by holder of Certificate of Insurance for claim, service request, notice, summons, etc:		Bajaj Allianz General Insurance Company Limited, Unit No.301 and 302, 3rd Floor, Silver point, Plot No.17/18, CTS No.501/1, New Maneklal Estate, Ghatkopar (W), MUMBAI-400086 PH:022-67443100	
Insured Name	SATISH B DHAWALE	Policy Number	OG-23-1907-1870-00000160
		Certificate No.	NA

INSURED DETAILS		POLICY DETAILS		
Insured Address	ROOM NO 402 A WING SANKALP SIDDHI SOCIETY MARATHON COMPLEX, KARVE NAGAR MUMBAI, BHANDUP EAST, MUMBAI, MAHARASHTRA-400059	Policy Issued on	15-OCT-2022	
		Period of Insurance	For Own Damage Section From : 28-OCT-2022 00:01 (Hrs) To : 27-OCT-2023 Midnight	For Third Party Liability Section From : 28-OCT-2021 To : 27-OCT-2024
		Third Party Liability Section	Name of Insurance Co Future Generali India Insurance Company Limited.	Policy Number TMA70464
Customer ID	285062157	Policy Status	ISSUED	
GSTIN / UIN	NA	Cover Note Details	/	
Place of Supply/State Code/Name	27 - Maharashtra	Previous Policy No	TMA70464 / Future Generali India Insurance Company Limited.	

Particulars of Vehicle Insured:

Registration Number	Place of Registration	Engine Number	Chassis Number	Make & Model
MH03DU6733	MUMBAI	RE-VTRN11JYXK89171	MAT627235MLK735 79	TATA - NEXON

Sub Type	Year of Mfg	NCB %	CC	Seating Capacity
1.2 PETROL XZA PLUS DT (S) 1199 CC	2021	-20	1199	5

Name of Registration Authority

: MUMBAI

Name and Address of Insured

: SATISH B DHAWALE

: ROOM NO 402 A WING SANKALP SIDDHI SOCIETY MARATHON COMPLEX, KARVE NAGAR MUMBAI, BHANDUP EAST, MUMBAI, MAHARASHTRA-400059

Geographical Area

: India

Business or Profession

: NA

Persons or Class of Persons entitled to drive:

Any person including the insured:

a) Provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from

For help and more information:

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Corporate Identification Number U66010PN2000PLC015329

Latest Schedule - 15-Oct-2022 11:15:55 AM- Silent Printing (Web) (BG35748)

holding or obtaining such a license.

b) Provided also that the person holding an effective learner's license may also drive the vehicle and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989.

IMT-Endorsements/Add on Package

22, 7, & Plan Name: Consumable Expenses And Drive Assure - Economy & Plan Description: 24x7 spot assistance , consumable expenses , depreciation shield , engine protector ,

Limitations as to Use:

The Policy covers use for any purpose other than

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

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

For & On Behalf of

Bajaj Allianz General Insurance Company Ltd.

Now carry your m-policy on your mobile. Click here to download. <https://bagic.page.link/7mDvJJ>



Authorized Signatory



BAJAJ ALLIANZ GENERAL INSURANCE COMPANY LIMITED
 Regd. Office & Head Office: GE Plaza, Airport Road, Yerwada, Pune-411006(India)
 IRDAI Registration No. 113
 Corporate Identity Number: U66010PN2000PLC015329

STANDALONE OWN DAMAGE COVER FOR PRIVATE CAR
POLICY SCHEDULE
IRDAN113RP0001V01201920

Policy issuing office and Correspondence address for communication by policyholder for claim, service request, notice, summons, etc:
 Bajaj Allianz General Insurance Company Limited, Unit No.301 and 302,3rd Floor,, Silver point, Plot No.17/18, CTS No.501/1,, New Maneklal Estate, Ghatkopar (W), MUMBAI-400086 PH:022-67443100

Note:-

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

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

INSURED DETAILS	
Insured Name	SATISH B DHAWALE
Insured Address	ROOM NO 402 A WING SANKALP SIDDHI SOCIETY MARATHON COMPLEX , KARVE NAGAR MUMBAI , BHANDUP EAST, MUMBAI, MAHA-RASHTRA-400059
Geographical Area	India
Customer ID	285062157
Bank Reference No 1	
GSTIN / UIN	NA
Place of Supply/ State Code/Name	27 - Maharashtra
Company GSTIN	27AABCB5730G1ZX
Company PAN	AABCB5730G
Invoice No	363176891/1

POLICY DETAILS		
Policy Number	OG-23-1907-1870-00000160	
Policy Issued on	15-OCT-2022 11:13 AM	
Details of Own Damage Standalone Cover	Policy Period	From :28-OCT-2022 00:01 (Hrs) To :27-OCT-2023 Midnight
Details of Active Third Party Liability Policy	Policy Period	From : 28-OCT-2021 To : 27-OCT-2024
	Name of Insurance Co.	Future Generali India Insurance Company Limited.
	Policy Number	TMA70464
Cover Note Details	/	
Previous Policy No	TMA70464 / Future Generali India Insurance Company Limited.	

Registration Number	Place of Registration	Engine Number	Chassis Number	Make & Model	SubType
MH03DU6733	MUMBAI	RE-VTRN11JYXK89171	MAT627235MLK7 3579	TATA - NEXON	1.2 PETROL XZA PLUS DT (S) 1199 CC
NCB %	CC/KW	Seating Capacity	Year Of Manufacturing	Hypothecation Details	
-20	1199	5	2021	CANARA BANK MUMBAI	
Vehicle IDV	Value For Side Car	Non electrical accessories	Electrical/Electronic accessories	Value of CNG/LPG kit	Total Value
850000	0	0	0	0	8,50,000.00

For help and more information:

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Own Damage Premium(Rs.)		Final Premium(In Words): Rupees Eighteen Thousand Two Hundred Ninety One Only
Own Damage Premium	15502	
State GST (9%)	1395	
Central GST (9%)	1395	
Final Premium Rs.	18291	

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

As per the GST regulations, the amount of GST will not be refunded if the policy / endorsement is cancelled after 30th September of the next financial year

Limitation as to Use	The Policy covers use of the vehicle for any purpose other than : Hire or reward, Carriage of goods(other than samples or personal luggage),Organised racing,Pace making, Speed testing, Reliability trials. Any purpose in connection with Motor Trade.
Driver	Any person including the insured provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided also that the person holding an effective Learner's license may also drive the vehicle when not used for the transport of goods/passengers at the time of the accident and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicle Rules, 1989.
No Claim Bonus	The insured is entitled for a No Claim Bonus (NCB) on the Own Damage section of the policy, if no claim is made or pending during the preceding year (s), as per the following: 1. The preceding year: 20% , 2. Preceding Two consecutive years: 25% , 3. Preceding Three consecutive years: 35%, 4. Preceding Four consecutive years: 45% , 5. Preceding Five consecutive years: 50% No Claim Bonus will only be allowed provided the policy is renewed within 90 days of the expiry date of the previous policy.
Existing Damage Details	NA
Nominee Details	Name :NA - Relationship :NA
Subject to Warranties/ IMT-Endorsements/ Add on Package	22, 7, & Plan Name:Consumable Expeness And Drive Assure - Economy & Plan Description: 24x7 spot assistance , consumable expenses , depreciation shield , engine protector ,
Additional Details	Coincurrence Details: - . Transaction Id: -
Premium Details	Receipt No. 1907-00607067, Date 15-OCT-22 ** If Premium paid through Cheque, the Policy is void ab-initio in case of dishonour of Cheque.
Excess Details	Compulsory Excess: Rs.1,000.00 Additional Excess: Rs.0 Voluntary Excess: Rs..00

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

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

For & On Behalf of

Bajaj Allianz General Insurance Company Ltd.




Authorized Signatory





This document is digitally signed, hence counter signature / stamp is not required.

Consolidated Stamp Duty of Rs.0.5/- paid towards Insurance Stamps vide Challan No. MH002405964202122M Defaced No. 0001482221202122 dated 05-JUL-21 timing 12:58:03 of General Stamp Office, Mumbai, India.

Principal Location : Bajaj Allianz House, Airport Road, Yerwada, Pune - 411006 PH:66026666 | Services Accounting Code : 997134 - Motor vehicle insurance services. No reverse charge is payable on these services.

For help and more information:

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

Corporate Identification Number U66010PN2000PLC015329

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Bajaj Allianz General Insurance Company Ltd.

Bajaj Allianz General Insurance Company Limited, Unit No.301 and 302, 3rd Floor, Silver point, Plot No.17/18, CTS No.501/1, New Maneklal Estate, Ghatkopar (W), MUMBAI - 400086
Contact No:Contact No: 022-67443100; Fax No: 022-25832256

RECEIPT

Receipt Number 1907-00607067

Receipt Date 15/10/2022

Business Channel DM

Received with thanks from SATISH B DHAWALE

(Customer ID : 285062157) a total sum of Rupees Eighteen Thousand Two Hundred Ninety One Only by,

Instrument Type	Instrument No.	Instrument Date	Bank Name	Branch Name	Amount
Credit Card	95480149	15/10/2022	NA	NA	18,291

Total Amount **Rs. 18,291.00**

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

* Cheque/DD/PO receipt is valid subject to realisation of the instrument.

For & on behalf of

Bajaj Allianz General Insurance Company Ltd.



Authorised Signatory

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

PRIVATE CAR STANDALONE OD POLICY: ADD ON COVERS(Plan Name:Consumable Expensis And Drive Assurance - Economy): POLICY WORDINGS

S1 - 24x7 SPOT ASSISTANCE

(UIN No. IRDAN113RP0001V01201920/A0009V01201920)

A. Endorsement Wordings

In consideration of the payment of additional premium, it is hereby agreed and declared that **You** shall be entitled to one or more of the below mentioned benefits depending on the plan opted by **You** and as shown on the **Schedule** :

(A) Flat Battery: In the event of the **Insured Vehicle** being immobilized due to a flat battery, **We** will make alternative arrangements to make the **Insured Vehicle** mobile again provided the event has occurred within 100 kilometers from the center point of the city of **Your** residence and the **Insured Vehicle** has not reached a workshop/repairer. **(B) Spare Keys:** In the event of **You** losing keys of the **Insured Vehicle**, **We** will arrange for the pick up and delivery of spare keys to the spot where the **Insured Vehicle** is located provided the event has occurred within 100 kilometers from the center point of the city of **Your** residence and the **Insured Vehicle** has not reached a workshop/repairer. **(C) Flat Tyre:** In the event of the **Insured Vehicle** being immobilized due to flat tyres, **We** will arrange for the refill of the flat tyres and/or replacement of the flat tyres with a usable spare tyre to make the **Insured Vehicle** mobile again provided the event has occurred within 100 kilometers from the center point of the city of **Your** residence and the **Insured Vehicle** has not reached a workshop/repairer. **(D) Minor Repairs:** In the event of the **Insured Vehicle** being immobilized due to mechanical and/or electrical breakdown, **We** will arrange for minor mechanical and/or electrical repairs to make the **Insured Vehicle** mobile again provided the event has occurred within 100 kilometers from the center point of the city of **Your** residence and the **Insured Vehicle** has not reached a workshop/repairer. **(E) Towing Facility:** In the event of the **Insured Vehicle** getting immobilized as a result of Accident and/or breakdown, **We** shall arrange for towing away of the **Insured Vehicle** from the spot of immobilization to Our nearest preferred workshop provided the event has occurred within 100 kilometers from the center point of the city of **Your** residence. **(F) Urgent Message Relays:** In the event of the **Insured Vehicle** getting immobilized as a result of Accident and/or breakdown, **We** will send urgent message on **Your** request to the specified persons through available means of communication **(G) Medical Co-ordination:** In the event of the **Insured Vehicle** meeting with an Accident, **You** can call Us on our Toll Free Number, mentioned on the **Schedule**, to obtain details regarding the nearest medical center that can provide emergency relief services. **(H) Fuel Assistance:** In the event of the **Insured Vehicle** being immobilized due to an empty fuel tank and/or contaminated fuel, **We** will either arrange for supply of 3 litres of petrol or diesel on chargeable basis and/or towing of the **Insured Vehicle** to Our nearest preferred workshop provided the event has occurred within 100 kilometers from the center point of the city of **Your** residence and the **Insured Vehicle** has not reached a workshop/repairer. **(I) Taxi Benefits:** In the event of the **Insured Vehicle** meeting with an Accident/breakdown, **We** will arrange for a free travel of the occupants of the **Insured Vehicle** to a single destination within a vicinity of 50 kilometers from the spot of immobilization through a taxi or any other transportation service provided the event has occurred within 100 kilometers from the center point of the city of **Your** residence and the **Insured Vehicle** has to be towed away to Our nearest preferred workshop. Any travel beyond 50 kilometers can be covered on payment of additional amount as specified by Us. In the unlikely event of **We** being unable to arrange for this service, **We** may request **You** to arrange for a taxi to transfer the occupants of the **Insured Vehicle** on **Your** own and submit the bills for a pre-communicated amount for re-imbursement to Us. **(J) Accommodation Benefits:** In the event of the **Insured Vehicle** meeting with an Accident/breakdown, **We** will provide occupants of the **Insured Vehicle** with a hotel accommodation for one day provided the event has occurred beyond 100 kilometers from the center point of the city of **Your** residence but within 100 kilometers of another covered city and the time to repair the **Insured Vehicle** will exceed 12 hours from the time of reporting the incident.

The accommodation benefits would be offered subject to a per day limit of Rs. 2,000 per occupant and a maximum total limit of Rs. 16,000 for all the occupants of the **Insured Vehicle** through out the Policy Period. In the unlikely event of **We** being unable to arrange for this service, **We** may request **You** to arrange for a hotel accommodation for the occupants of the **Insured Vehicle** on **Your** own and submit the bills for a pre-communicated amount for re-imbursement to Us. **(K) Legal Advice:** In the event of the **Insured Vehicle** meeting with an Accident, **You** shall be entitled for a free legal advice from a legal advisor over the phone for a maximum duration of 30 minutes. Subsequent to the expiry of the specified period of 30 minutes, **You** may continue with the same legal advisor on direct payment basis

B. Conditions

- (1) . In case of transfer of ownership of the **Insured Vehicle**, the cover under '24x7 Spot Assistance' shall expire.
- (2) The benefits under '24x7 Spot Assistance' can be utilized for a maximum of 4 times during the Policy Period except for 'Fuel Assistance', 'Taxi Benefits', 'Accommodation Benefits' and 'Legal Advice' for which the aggregate utilization limit is 2 times during the Policy Period

C. Exclusions

- (1) Where the **Insured Vehicle** can be safely transferred on its own power to nearest dealer/workshop.
- (2) Any Accident, loss, damage and/or liability caused, sustained or incurred whilst the **Insured Vehicle** is being used otherwise than in accordance with the limitations as to use.
- (3) 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 purpose of this exception, combustion shall include any self-sustaining process of nuclear fission.
- (4) Any Accident, loss, damage and/or liability directly or indirectly or proximately or remotely occasioned by 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.
- (5) Any loss or damage caused due to riots, strikes and Act of

PRIVATE CAR STANDALONE OD POLICY: ADD ON COVERS(Plan Name:Consumable Expences And Drive Assurance - Economy): POLICY WORDINGS

God perils like flood, earthquake etc. (6) Claims pertaining to theft losses. (7) Any consequential loss arising out of claims lodged under '24x7 Spot Assistance'. (8) Where a loss is covered under **Motor Insurance Policy** or any other type of insurance policy with any other insurer or manufacturer's warranty or recall campaign or under any other such packages at the same time. (9) Replacement cost of battery and/or any associated repair cost. (10) Cost of supply of parts or replacements elements or consumables. (11) Repair cost of tyre and/or parts or replacement cost of any part of consumable at a third party workshop/repairer. (12) Any taxes, levy and expenses incurred in excess of the limit described under the plan opted by **You**. (13) Loss of valuables and personal belongings kept in the **Insured Vehicle**. (14) Any loss or damage to the **Insured Vehicle** arising out of participation in a motor racing competition or trial runs. (15) Where it is proved that **You** have abused the benefits under '24x7 Spot Assistance'. (16) Any loss or damage caused due to pre-existing damages. (17) Any loss or damage arising out of intervention of Government Authorized Agencies, Police Authorities or Law Enforcing Agencies. (18) Any loss or damage resulting from the use of **Insured Vehicle** against the recommendations of the owners manual and/or manufacturer's manual. (19) Any loss resulting from **Your** deliberate or intentional and/or unlawful or criminal act. (20) Benefits under 'Taxi Benefits' and 'Accommodation Benefits' for occupants in excess of the seating capacity as per the registration certificate of the **Insured Vehicle**. (21) Additional cost incurred in towing the **Insured Vehicle** to a dealer/workshop as specified by **You** instead to Our specified nearest authorized workshop. (22) Services organized without Our prior consent for the various assistance services. (23) If **You** or **Your** personal representative is already at a garage for delivery of the **Insured Vehicle** or at the place of recovery in case of theft. (24) Mechanical and/or electrical breakdowns that require replacement of spare parts and/or specialized tools/ equipments that are usually available only in automotive workshops

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

D. Definitions

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

(1) **You, Your, Yourself:** The person or persons **We** insure as set out in the **Schedule**. (2) **We**, Our, Us: Bajaj Allianz General Insurance Company Limited and/or the Service Provider with whom Bajaj Allianz General Insurance Company Limited has entered into a contract to provide the benefits under this cover to **You**. (3) **Accident, Accidental:** A sudden, unintended and fortuitous external and visible event. (4) **Policy/Motor Insurance Policy:** Private Car Package Policy issued by Us to which this cover is extended. (5) **Insured Vehicle**: The vehicle insured by Us under the **Motor Insurance Policy**. (6) **Policy Period:** The period between and including the commencement date and expiry date as shown in the **Motor Insurance Policy Schedule**. (7) **Schedule**: The **Schedule** and any Annexure or Endorsement to it which sets out **Your** personal details and the type of insurance cover in force

S3 - DEPRECIATION SHIELD

(UIN No. IRDAN113RP0001V01201920/A0003V01201920)

A. Endorsement Wordings

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

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

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

B. Conditions

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

C. Exclusions

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

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

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

D. Definitions

PRIVATE CAR STANDALONE OD POLICY: ADD ON COVERS(Plan Name:Consumable Expensis And Drive Assurance - Economy): POLICY WORDINGS

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

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

S4 - ENGINE PROTECTOR

(UIN No. IRDAN113RP0001V01201920/A0007V01201920)

A. Endorsement Wordings

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

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

B. Conditions

(A) Claims made by **You** against Us under 'Engine Protector' are subject to the conditions set forth under the Motor Insurance Policy. **(B)** Claims made by **You** against Us under 'Engine Protector' would be admissible if:

- There is evidence that the **Insured Vehicle** stopped in water logged area resulting into damage to the internal parts of the engine due to water ingress
- There is evidence of under carriage damage to engine and/ or gear box leading to oil leakage and resulting into damage to internal parts of the engine and/ or gear box
- The loss or damage is not payable under Motor Insurance Policy

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

C. Your Obligations

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

D. Exclusions

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

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

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

E. Definitions

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

(1) You,Your,Yourself: The person or persons **We** insure as set out in the **Schedule** . **(2) We, Our, Us:** Bajaj Allianz General Insurance Company Limited. **(3) Accident, Accidental:** A sudden, unintended and fortuitous external and visible event. **(4) Policy/Motor Insurance Policy:** Private Car Package Policy issued by Us to which this cover is extended. **(5) Insured Vehicle :** The vehicle insured by Us under the **Motor Insurance Policy** . **(6) IDV:** Insured's Declared Value (Sum Insured) of the **Insured Vehicle** under the **Motor Insurance Policy** . **(7) Total Loss/ Constructive Total Loss:** A loss under the **Motor Insurance Policy** where the aggregate cost of retrieval and/ or repair of the **Insured Vehicle** , subject to terms and conditions of the Policy, exceeds 75% of the IDV of the **Insured Vehicle** . **(8) Policy Period:** The period between and including the commencement date and

PRIVATE CAR STANDALONE OD POLICY: ADD ON COVERS(Plan Name:Consumable Expenss And Drive Assure - Economy): POLICY WORDINGS

expiry date as shown in the **Motor Insurance Policy Schedule** .**(9) Schedule** : The **Schedule** and any Annexure or Endorsement to it which sets out **Your** personal details and the type of insurance cover in force .**(10)Own Damage Claim**: The claims raised by **You** against Us for loss or damage to the **Insured Vehicle** due to the perils mentioned under Section 1 of **Motor Insurance Policy**

S17:CONSUMABLE EXPENSES

(UIN No. IRDAN113RP0001V01201920/A0011V01201920)

A. Endorsement Wordings

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

B. Conditions

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

C. Exclusions

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

D. Definitions

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

(1)**Authorized workshop / garage / service station** - A motor vehicle repair workshop / garage / service station authorized by us. (2)**Insured Vehicle**: The vehicle insured by Us under the Motor Insurance Policy and as shown on the Schedule. (3)**Policy/ Motor Insurance Policy**: Motor Package Policy issued by Us to which this cover is extended. (4)**Schedule**: The Schedule and any Annexure or Endorsement to it which sets out Your personal details and the insurance cover in force. (5)**We, Our, Us**: Bajaj Allianz General Insurance Company Limited. (6)**You, Your, Yourself**: The person or persons We insure as set out in the Schedule.