

Relationship Beyond Insurance

# Bajaj Allianz General Insurance Company Ltd.

Registered and Head Office: GE Plaza, Airport Road, Yerwada, Pune

# Transcript of Proposal for Private Car - Package Policy

#### Dear SUNIL TIWARI.

We wish to inform you that the contract under policy number 'OG-19-9906-1801-00027271' has been finalized based on the 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, failing which it will be deemed that you 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 : SUNIL TIWARI

: FLIPKART, TOWER A, EMBASSY TEC H VILLAGE, DEVARABISANAHALLI, BELLANDUR, BENGALURU, KARNATAKA 2. Proposer Address

, , , -560103

3. Proposer Mobile Number : 7675807450

: NA 4. Proposer Residential Number

5. Proposer e-mail id : jatintiwari11@gmail.com

6. Proposer Profession : NA

# **B.Vehicle Details**

| Registration | Month / Year | Vehicle | Vehicle | Vehicle Sub      | Cubic Capa- | Fuel Type | Year of Man- | Seating Ca- |
|--------------|--------------|---------|---------|------------------|-------------|-----------|--------------|-------------|
| Number       | of Regn      | Make    | Model   | Type             | city        |           | ufacture     | pacity      |
| PB65R8674    | JUL/2012     | HYUNDAI | i 20    | 1.2 MAGNA<br>(O) | 1197        | Petrol    | 2012         | 5           |

| Engine Number | Chassis Number        | Vehicle IDV (in Rs.) | Accessories  | Accessories  | CNG/LPG Unit<br>(Extra fitted) | Total IDV (in Rs.) |
|---------------|-----------------------|----------------------|--------------|--------------|--------------------------------|--------------------|
|               |                       |                      | IDV (in Rs.) | IDV (in Rs.) | IDV (in Rs.)                   |                    |
| G4LACM862068  | MALBB51BLC<br>M421931 | 281789               | 0            | 0            | 0                              | 281789             |

## C. Coverage opted

1. Period of Insurance : From 22-JUN-2018 (Hrs) To

21-JUN-2019 Midnight

: Yes.

2. Is your vehicle fitted with external LPG/CNG kit : No. 3. Electrical Accessories cover Opted (If Applicable) : No. 4. Non - Electrical Accessories cover Opted (If Applicable): : No. 5. 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. Is LL to person for Paid driver/Operation/Maintenance opted : No. 10. Whether PA cover is opted for paid driver other than owner driver : No.

: Rs.NA. Sum Insured for Paid Driver : No. 11. Whether PA cover is opted for passengers

Sum Insured per Passenger : Rs.NA. 12. Is TPPD restricted to statutory limit of Rs.6000? : No.

13. Pre Existing damages in the vehicle : NA.

14. Premium for Liability coverage, quoted and agreed upon is : Rs.2963. 15. Premium for OD coverage, quoted and agreed upon is : Rs.2313.

- 16. Total Premium (excluding Goods and Service Tax (GST)) for Liability and OD coverages, quoted and agreed upon is : Rs.5276
- 17. NCB (No Claim Bonus) claimed by you and granted by us based on your declaration of no claim during your previous previous policy: -45 %.
- 18. About the last insurance company

6. Whether PA cover is opted for owner-driver

- (i) Insurance Provider: The Oriental Insurance Company Limited.
- (ii) Previous Policy No: 943832, Previous Policy Expiry Date: 21-JUN-18
- 19. Whether your vehicle is Hypothecated and if so the details of Pledgee whose name is registered by us: Yes. Name of Pledgee: STATE BANK OF PATIALA.
- 20. Add on Cover(s) opted: Yes, Plan Name: Drive Assure Prime Plan Description: 24x7 spot assistance, keys and locks replacement cover with sum insured Rs:15000

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 : 1800-22-5858,1800-102-5858,1800-209-5858

Email address : customercare@bajajallianz.co.in

Website : www.bajajallianz.com

Contact our policy servicing branch at: Bajaj Finserv Building, 1st Floor, Behind Weikfield IT-Park, Viman Nagar, Pune-411014 PH:1800-209-0144.





#### BAJAJ ALLIANZ GENERAL INSURANCE COMPANY LIMITED

(A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDA] vide Reg No.113)

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

# **Certificate of Insurance (Private Car Package Policy)**

**Policy Number:** OG-19-9906-1801-00027271 **Customer ID:** 121594529

#### Particulars of Vehicle Insured:

| <b>Registration Number</b> | Place of Registration | Engine Number | Chassis Number        | Make & Model   |
|----------------------------|-----------------------|---------------|-----------------------|----------------|
| PB65R8674                  | MOHALI                | G4LACM862068  | MALBB51BLCM421<br>931 | HYUNDAI - i 20 |

| Sub Type      | Year of Mfg | NCB % | CC   | <b>Seating Capacity</b> | Final Premium |
|---------------|-------------|-------|------|-------------------------|---------------|
| 1.2 MAGNA (O) | 2012        | -45   | 1197 | 5                       | Rs.6226.      |

**Name of Registration Authority** : MOHALI

Name and Address of Insured : SUNIL TIWARI

: FLIPKART, TOWER A, EMBASSY TEC H VILLAGE, DEVARABISANAHALLI, BELLANDUR, BENGALURU, KARNATAKA, , , -560103

: India **Geographical Area Business or Profession** : NA

# Effective date of commencement of Insurance for the purpose of act:

Policy Inception Date: From O' Clock on 22-JUN-2018

Policy Expiry Date: Midnight on 21-JUN-2019

#### Persons or Class of Persons entitled to drive:

Any person including the insured:

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

# **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.

# Policy issuing office and correspondence address for communication by holder of Certificate of Insurance for claim, service request, notice, summons, etc:

Bajaj Finserv Building, 1st Floor, Behind Weikfield IT-Park, Viman Nagar, Pune-411014 PH:1800-209-0144

Date of issue: 20-JUN-2018

For & On Behalf of

Bajaj Allianz General Insurance Company Ltd.

Now carry your m-policy on your mobile. Click here to download. https://goo.gl/kiXHKi

**Authorized Signatory** 

For help and more information

Contact our 24 Hour Call Centre at 1800-102-5858, 1800-209-5858, 1800-22-5858, Toll Free: 30305858( chargeable, add area code before this number in case of mobile call) Email us at customercare@bajajallianz.co.in or Visit our Website www.bajajallianz.com

Corporate Identification Number U66010PN2000PLC015329





BAJAJ ALLIANZ GENERAL INSURANCE COMPANY LIMITED (A Company incorporated under Indian Companies Act, 1956 and licensed by Insurance Regulatory and Development Authority of India [IRDA] vide Reg No.113)
Regd. Office: GE Plaza, Airport Road, Yerwada, Pune-411006(India)

# PRIVATE CAR PACKAGE POLICY SCHEDULE

Policy issuing office and Correspondence address for communication by policyholder for claim, service request, notice, summons, etc: Bajaj Finserv Building, 1st Floor, Behind Weikfield IT-Park, Viman Nagar, Pune-411014 PH:1800-209-0144

|                        | INSURED DETAILS   |
|------------------------|---|
| Insured Name           | SUNIL TIWARI  |
| Insured<br>Address     | FLIPKART, TOWER A, EMBASSY TEC<br>H VILLAGE, DEVARABISANAHALLI,<br>BELLANDUR, BENGALURU,<br>KARNATAKA,,,-560103 |
| Geographical<br>Area   | India   |
| Customer ID            | 121594529   |
| Bank Reference<br>No 1 |   |
| GSTIN / UIN            | NA  |
| STATE CODE /<br>NAME   | 29 - Karnataka  |

| PC                     | POLICY DETAILS                                   |  |  |  |  |  |
|------------------------|--|--|--|--|--|--|
| Policy Number          | OG-19-9906-1801-00027271                         |  |  |  |  |  |
| Policy Issued<br>on    | 20-JUN-2018 22:13 PM                             |  |  |  |  |  |
| Period of<br>Insurance | From: 22-JUN-2018 (Hrs) To: 21-JUN-2019 Midnight |  |  |  |  |  |
| Cover Note<br>Details  | /  |  |  |  |  |  |
| Previous<br>Policy No  | 943832   |  |  |  |  |  |

| Registration Number   |            | Place of Registration   | En                         | gine Number Chassis Number |  | Chassis Number                    | Make & Mod-<br>el        | SubType     |
|---|------------|-------------------------|----------------------------|----------------------------|--|-----------------------------------|--------------------------|-------------|
| PB65R8674   |            | MOHALI                  | G4LACM862068               |                            | MALBB51BLCM4<br>21931                      | HYUNDAI - i<br>20                 | 1.2 MAGNA<br>(O)         |             |
| NCB % CC  |            | <b>Seating Capacity</b> | Year Of Manufactur-<br>ing |                            | Trailer Registra-<br>tion Number           | Hypothecat                        | Hypothecation Details    |             |
| -45   | 1197       | 5                       | 2012                       |                            | -,-  | STATE BANK                        | OF PATIALA               |             |
| Vehicle IDV   |            | Value For Trailers      | Non electrical accessories |                            |  | Electrical/Electronic accessories | Value of CNG/<br>LPG kit | Total Value |
| 281   | 789        | 0                       | 0                          |                            | 0  | 0                                 | 281789                   |             |
|   | Own l      | Damage Premium(Rs.)     |                            |                            |  | Liability 1                       | Premium(Rs.)             |             |
| •   | ge Premium |                         |                            |                            | Basic '                                    | 2863                              |                          |             |
| Special Disc  | count      |                         |                            | 0                          | PA Cover for Owner-Driver - SI - Rs.200000 |                                   |                          | 0 100       |
| Total OD Premium - A  |            |                         |                            | 2313                       | Total Act Premium - B 2                    |                                   |                          |             |
| Total Premium (Net Premium) (A+B)                                 |            |                         |                            | 5276                       |  |                                   |                          | ·           |
| Integrated GST (18%)  |            |                         |                            | 950                        |  |                                   |                          |             |
| Final Premium ( Rupees Six Thousand Two Hundred Twenty Six Only ) |            |                         |                            | 6226                       |  |                                   |                          |             |

<sup>\*\*</sup>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)

| 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.   |

Contact our 24 Hour Call Centre at 1800-102-5858, 1800-209-5858, 1800-22-5858, Toll Free: 30305858( chargeable, add area code before this number in case of mobile call) Email us at custom $ercare@\,bajajallianz.co.in\,\,or\,\,Visit\,\,our\,\,Website\,\,www.bajajallianz.com$ 





| Limits of Liability   | 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.  Under section II-I(i) of the policy -> Death of or bodily injury: Such amount is necessary to meet there requirements of the Motor Vehicles Act,1988. Under section II-I(ii) of the policy -> Damage to Third Party Property: Rs. 750000 |  |  |  |  |  |
|---|---|--|--|--|--|--|
| No Claim Bonus  |   |  |  |  |  |  |
| <b>Existing Damage Details</b>                                | NA  |  |  |  |  |  |
| Nominee Details   | null - null   |  |  |  |  |  |
| Subject to Warranties/<br>IMT-Endorsements/<br>Add on Package | 22, 7 & Plan Name: Drive Assure Prime & Plan Description: 24x7 spot assistance, ,keys and locks replacement cover with sum insured Rs:15000   |  |  |  |  |  |
| Additional Details  | Coinsurance Details: Transaction Id: -  |  |  |  |  |  |
| Premium Details   | Receipt No. 9906-01862600, Date 20-JUN-18 ** If Premium paid through Cheque, the Policy is void ab-initio in case of dishonour of Cheque.   |  |  |  |  |  |
| Excess Details  | Compulsory Excess: Rs.1000   Additional Excess: Rs.0   Voluntary Excess: Rs.0   |  |  |  |  |  |

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

Bajaj Allianz General Insurance Company Ltd.





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

 $Consolidated \ Stamp\ Duty\ of\ Rs. 0.5/-\ paid\ towards\ Insurance\ Stamp\ vide\ Challan\ No.\ MH001488162201819\ M\ Defaced\ No.\ 0000969824201819\ /Order\ no.\ CSD/33/2018/1747/18\ dated\ 21-MAY-18\ timing\ 15:30:01\ of\ General\ Stamp\ Office, Mumbai, India.$ 

Duty Rs.

BAGIC GST No: 27AABCB5730G1ZX | Principal Location: GE Plaza, Airport Road, Yerwada, Pune - 411006 PH:66026666 | Services Accounting Code: 997134 - Motor vehicle insurance services. No reverse charge is payable on these services. | Invoice No.: 98991815/1

# Bajaj Allianz General Insurance Company Ltd.

Bajaj Finserv Building, 1st Floor, Behind Weikfield IT-Park, Viman Nagar, Pune - 411014 Contact No: Contact No: 1800-209-0144

# **RECEIPT**

Receipt Number 9906-01862600

Receipt Date 20/06/2018

**Business Channel** WS

Received with thanks from SUNIL TIWARI

(Customer ID: 121594529) a total sum of Rupees Six Thousand Two Hundred Twenty Six Only by,

| Instrument<br>Type  | Instrument No. | Instrument<br>Date | Bank Name | Branch Name | Amount |
|---------------------|----------------|--------------------|-----------|-------------|--------|
| Online Pay-<br>ment | PBP2616650     | 20/06/2018         |           |             | 6,226  |

Total Amount Rs. 6,226.00

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

For & on behalf of

Bajaj Allianz General Insurance Company Ltd.

**Authorised Signatory** 

Regd.Office: GE Plaza, Airport Road, Yerwada, Pune - 411006

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



### PRIVATE CAR PACKAGE POLICY: ADD ON COVERS(Plan Name: Drive Assure Prime): POLICY WORDINGS

#### S1 - 24x7 SPOT ASSISTANCE

#### 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 has not reached a workshop/repairer 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 bain gimmobilized 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 bain son treached 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 bread workshop/repairer. (E) Towing Facility: In the event of the Insured Vehicle due to 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 from 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

The accommodation benefits would be offered subject to a per day limit of Rs. 2000 per occupant and a maximum total limit of Rs. 16000 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 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



# PRIVATE CAR PACKAGE POLICY: ADD ON COVERS(Plan Name: Drive Assure Prime): POLICY WORDINGS

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 variables and personal belongings kept in the Insured Vehicle. (14) Any loss or damage to the Insured Vehicle arising out of participation in a motor rational representation of the Insured Vehicle arising out of participation in a motor rational representation of the Insured Vehicle arising out of participation in a motor rational representation of the Insured Vehicle arising out of participation in a motor rational representation of the Insured Vehicle arising out of participation in a motor rational representation of the Insured Vehicle arising out of participation in a motor rational representation of the Insured Vehicle arising out of participation in a motor rational representation of the Insured Vehicle arising out of participation in a motor rational representation of the Insured Vehicle arising out of participation in a motor rational representation of the Insured Vehicle arising out of participation in a motor rational representation of the Insured Vehicle arising out of participation in a motor rational representation of the Insured Vehicle arising out of participation in a motor rational representation of the Insured Vehicle arising out of participation in a motor rational representation of the Insured Vehicle arising out of participation in a motor rational representation of the Insured Vehicle arising out of participation in a motor rational representation of the Insured Vehicle arising out of participation in a motor rational representation of the Insured Vehicle arising out of participation in a motor rational representation of the Insured Vehicle arising out of participation in a motor rationa cing 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 craiminal act 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

### **S13: KEYS AND LOCKS REPLACEMENT COVER**

# A. Endorsement Wordings

In consideration of payment of additional premium, it is hereby agreed and declared that in the event of irrecoverable loss of keys of the **Insured Vehicle**, we will indemnify You for the cost of replacement of keys of the **Insured Vehicle**, subject to the **Sum Insured** specified in the **Schedule**. In the event of a security risk arising out of the incidence of lost keys of the **Insured Vehicle**, We will indemnify **You** for the cost of installing new locks in the **Insured Vehicle**.

# **B.** Conditions

(1) In case of transfer of ownership of the **Insured Vehicle**, the cover under #Keys and Locks Replacement Cover# shall expire (2)The benefits under #Keys and Locks Replacement Cover# can be utilized only once during the **Policy Period** (3) **You**shall immediately lodge a complaint with the police detailing the loss of key of the **Insured Vehicle** and provide **Usa** copy of the F.I.R. (4) **You** shall immediately, and in any event within 2 days of occurrence of loss, report the incidence of loss to **Us** (5) No keys shall be deemed to be irrecoverably lost until a period of three (3) days, from the date of loss as mentioned in the F.I.R., has elapsed

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

(1) The first 10% of the claim amount or Rs. 500, whichever is higher (2) Where the replacement of keys is not carried out in manufacturer#s authorized dealership or **Our** authorized workshops (3)Any pre-existing damages (4) Where the replaced keys or locks are of higher standards or specifications as compared to the original keys or locks of the **Insured Vehicle** (5) Consequential losses of any kind, be they by way of loss of profit, loss of opportunity, loss of gain, business interruption, market loss or otherwise, or any claims arising out of loss of a pure financial nature such as loss of goodwill or any legal liability of any kind whatsoever.

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)Insured Vehicle: The vehicle insured by Us under the Motor Insurance Policy (2) Policy/Motor Insurance Policy: Private Car Package Policy issued by Us to which this cover is extended (3)



# PRIVATE CAR PACKAGE POLICY: ADD ON COVERS(Plan Name: Drive Assure Prime): POLICY WORDINGS

Policy Period: The period between and including the commencement date and expiry date as shown in the Motor Insurance Policy Schedule (4) Schedule: The Schedule and any Annexure or Endorsement to it which sets out Your personal details, the type of insurance cover in force and the Sum Insured (5) Sum Insured: The amount stated in the Schedule, which is the maximum amount We will pay for claims made by You, irrespective of the number of claims You make during the Policy Period (6) We, Our, Us: Bajaj Allianz General Insurance Company Limited (7) You, Your, Yourself: The person We insure as set out in the Schedule