

TRAVEL ACE (INTERNATIONAL)

SECTION A) PREAMBLE

Whereas as the Insured (hereinafter Insured is also called "You") has made to Bajaj Allianz General Insurance Company Limited (hereinafter called "We" or "Company") a Proposal which is hereby agreed to be the basis of this Policy and has paid the premium specified in the Policy Schedule and the Company agrees, subject always to the following terms, conditions, exclusions, and limitations, to indemnify the Insured in excess of the amount of the Deductible and subject always to the Sum Insured against such loss as is herein provided. This Policy records the entire agreement between us and sets out what We insure, how We insure it, and what We expect of You.

Please Note – Any information mentioned under pin-up "What it means" is to be considered as simplification of the benefit explained for understanding of a non-insurance expert person. In case of any claim or details, please refer the conditioned detailed on this policy document for the benefits applicable to You as per coverage opted.

OPERRATIVE -

Insured has to opt for any one or more of the below Covers so as to opt for the product and if the Insured has opted for any of the listed benefits, respective terms, conditions, exclusions, and limitations will be applicable.

Section/Extension	Cover	Section/Extension	Cover
I. Accidental Contingencies			
Section 1	Personal Accident	Section 2	Accidental Death & Disability- Common Carrier (AD&D)
Extension 1 for Section 1	Lifestyle Modification Benefit	Section 3	Personal Accident Cover in India
Extension 2 for Section 1	Child Education Benefit	Section 4	Disability Benefit Cover
II. Medical Contingencies			
Section 5	Sickness Medical Exigencies	Section 8	Hospitalization Daily Allowance
Section 6	Accidental Medical Exigencies	Section 9	Compassionate Visit
Extension 3 for Section 5/6	Pre- Existing Illness and Injury Cover	Section 10	Compassionate Stay
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Extension 5 for Section 1/6	Sporting Activities Cover	Section 12	Replacement and Rearrangement of Staff
Section 7	Emergency Dental Pain Relief		
III. Trip Contingencies			
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Section 14	Trip Interruption	Section 18	Loss of Checked-in Baggage
Section 15	Missed Connection	Section 19	Delay of Checked-in Baggage
Section 16	Trip Extension		
IV. Miscellaneous Contingencies			
Section 20	Loss of Personal Belonging	Section 26	Pre-Booked Meal Cover
Section 21	Personal Liability	Section 27	Weather Guarantee
Section 22	Loss of Passport and Driving License	Section 28	Golfers Hole-in-one
Section 23	Car Hire Excess Insurance	Section 29	Bounced Hotel
Section 24	Alternative Transport Expenses	Section 30	Hijack Cover
Section 25	Legal Expenses	Section 31	Emergency Cash Assistance Service
V. Domestic Contingencies			

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Section 32	Extended Pet Stay	Section 34	Standard Fire And Special Perils Cover
Section 33	Home Burglary and Robbery Insurance		
VI. Additional Covers for Student Plan only			
Section 35	Cancer Screening and Mammography Cover	Section 39	Tuition Fees
Section 36	Alcohol and Substance Abuse	Section 40	Contingency to Sponsor
Section 37	Maternity and Baby Cover		
Section 38	Bail Bond Insurance		
VII. All Risk Covers			
Section 41	Trip Delay Delight	Section 42	All Risk Trip and Event Cancellation

SECTION B) DEFINITION- STANDARD

The following words or terms shall have the meaning ascribed to them wherever they appear in this Policy, and references to the singular or to the masculine shall include references to the plural and to the female wherever the context so permits:

1. An **Accident** means a sudden, unforeseen and involuntary event caused by external, visible and violent means.
2. **"Cashless Facility"** Cashless Facility means a facility extended by the insurer to You where the payments, of the costs of treatment undergone by You in accordance with the policy terms and conditions, are directly made to the network provider by the insurer to the extend pre authorization approved.
3. **Condition Precedent-** Condition Precedent shall mean a policy term or condition upon which the Insurer's liability under the policy is conditional upon.
4. **Congenital Anomaly-** Congenital Anomaly refers to a condition(s) which is present since birth, and which is abnormal with reference to form, structure or position.
 - i) Internal Congenital Anomaly which is not visible and accessible parts of the body is called Internal Congenital Anomaly
 - ii) External Congenital Anomaly which is in the visible and accessible parts of the body is called External Congenital Anomaly.
5. **Co-payment-**
Co-payment means a cost sharing requirement under a health insurance policy that provides that the policyholder/insured will bear a specified percentage of the admissible claims amount. A co-payment does not reduce the Sum Insured.
6. **Day Care Centre-** means any institution established for day care treatment of illness and / or injuries or a medical setup within a hospital and which has been registered with the local authorities, wherever applicable, and is under the supervision of a registered and qualified medical practitioner AND must comply with all minimum criteria as under:
 - has qualified nursing staff under its employment
 - has qualified medical practitioner (s) in charge
 - has a fully equipped operation theatre of its own where surgical procedures are carried out
 - maintains daily records of patients and will make these accessible to the Insurance company's authorized personnel.
7. **Day Care Treatment/ Procedure-** refers to medical treatment, and/or surgical procedure which is:
 - i) undertaken under General or Local Anesthesia in a hospital/day care centre in less than 24 hrs because of technological advancement, and
 - ii) Which would have otherwise required a hospitalization of more than 24 hours. Treatment normally taken on an out-patient basis is not included in the scope of this definition.

A detailed list of procedures considered under Day Care is attached with the policy wordings (refer annexure 1). For an updated list of Day Care Procedures kindly visit our website
8. **Deductible"** Deductible is a cost-sharing requirement under a travel insurance policy that provides that the insurer will not be liable for a specified rupee amount and for a specified number of days/hours which will apply before any benefits are payable by the insurer. A deductible does not reduce the Sum Insured.
9. **Dental Treatment-** Dental Treatment is treatment carried out by a dental practitioner including examinations, fillings (where appropriate), crowns extractions and surgery excluding any form of cosmetic surgery / implants.
10. **Disclosure to Information Norm-** The policy shall be void and all premium paid hereon shall be forfeited to the Company, in the event of misrepresentation, mis- description or non-disclosure of any material fact.

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11. **Emergency, Emergency Care/treatment-** means management for a severe illness or injury which results in symptoms which occur suddenly and unexpectedly, and requires immediate care by a medical practitioner to prevent death or serious long term impairment of the Your health.
12. **"Hospitalization"** Hospitalization means admission in a Hospital for a minimum period of 24 consecutive hours In Patient Care except for specified procedures/ treatments, where such admission could be for a period of less than 24 consecutive hours.
13. **Illness-** Illness means a sickness or a disease or pathological condition leading to the impairment of normal physiological function and requires medical treatment.
 - (a) Acute condition - Acute condition is a disease, illness or injury that is likely to respond quickly to treatment which aims to return the person to his or her state of health immediately before suffering the disease/ illness/ injury which leads to full recovery
 - (b) Chronic condition - A chronic condition is defined as a disease, illness, or injury that has one or more of the following characteristics:
 - a. it needs ongoing or long-term monitoring through consultations, examinations, check-ups, and /or tests
 - b. it needs ongoing or long-term control or relief of symptoms
 - c. it requires rehabilitation for the patient or for the patient to be specially trained to cope with it
 - d. it continues indefinitely
 - e. it recurs or is likely to recur
14. **Injury/ Bodily Injury-** Injury means accidental physical bodily harm excluding illness or disease solely and directly caused by external, violent and visible and evident means which is verified and certified by a Medical Practitioner.
15. **Intensive Care Unit-** Intensive care unit means an identified section, ward or wing of a hospital which is under the constant supervision of dedicated medical practitioner(s), and which is specially equipped for the continuous monitoring and treatment of patients who are in a critical condition, or require life support facilities and where the level of care and supervision is considerably more sophisticated and intensive than in the ordinary and other wards.
16. **Medical Expenses** means those expenses that an Insured Person has necessarily and actually incurred for medical treatment on account of Illness or Accident on the advice of a medical Practitioner, as long as these are no more than would have been payable if the Insured/Insured Person had not been Insured and no more than other hospitals or doctors in the same locality would have charged for the same medical treatment. List of non-medical expenses is attached with the policy wordings (refer annexure 2). For an updated list of Day Care Procedures kindly visit our website or (refer annexure 1).
17. **Medically Necessary Treatment** - Medically necessary treatment is defined as any treatment, tests, medications, or stay in hospital or part of a stay in hospital which-
 - a. is required for the medical management of the illness or injury suffered by the Insured /Insured Person;
 - b. must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration, or intensity;
 - c. must have been prescribed by a medical practitioner,
 - d. Must conform to the professional standards widely accepted in international medical practice or by the medical community in India.
18. **Notification of Claim-** Notification of claim means the process of intimating a claim to the insurer or TPA through any of the recognized modes of communication.
19. **Notification of Claim:**
Notification of claim means the process of intimating a claim to the insurer or TPA through any of the recognized modes of communication.
20. **"OPD Treatment"** OPD treatment is one in which the Insured visits a clinic/ hospital or associated facility like a consultation room for diagnosis and treatment based on the advice of a Medical Practitioner. The Insured is not admitted as a Day care or in patient.
21. **Surgery-** Surgery or Surgical Procedure means manual and / or operative procedure (s) required for treatment of an illness or injury, correction of deformities and defects, diagnosis, and cure of diseases, relief of suffering or prolongation of life, performed in a hospital or day care center by a medical practitioner.
22. **Unproven/ Experimental treatment-** Unproven/ Experimental treatment is treatment, including drug experimental therapy, which is based on established medical practice in India, is treatment experimental or unproven.

SECTION B) DEFINITIONS- SPECIFIC

1. **Act of Terrorism or "Terrorism" or "Terrorist Activity":-**
Means an act or thing by any person or group(s) of persons, whether acting alone or on behalf of or in connection with or in connivance with or at the instance or instigation of any person or group(s) or organisation(s) or

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associations(s), who are committed or proclaimed to be committed for political, religious or ideological purposes, whether such person or group(s) of persons or organisation(s) or association(s) or are not banned any law, in such a manner or with intent to threaten the unity, integrity, security or sovereignty of India or to strike terror in the people or any section of the people by using bombs, dynamite or other explosive substances or inflammable substances or firearms or other lethal weapons or poisons or noxious gases or other chemicals or by any other substances (whether biological or otherwise) of a hazardous nature or by any other means whatsoever, with intent to cause, or likely to cause, death or, or injuries to any person or persons or loss of, or damage to, or destruction of, property or disruption of any supplies or services essential to the life of the community or causes damage or destruction of any property or equipment used or intended to be used for the defence of India or in connection with any other purposes of the Government of India, any State Government or any of their agencies, or detains any person and threatens to kill or injure such person in order to compel the Government or any other person to do or abstain from doing any act. Provided further that for the above acts appropriate criminal prosecution has been initiated by police and charge sheet has been filed in competent court of criminal jurisdiction, either under special law or under general law.

2. **Adventure Sports-** Adventure sports (also called action sports, aggro sports, and Extreme sports) are a popular term for certain activities perceived as having a high level of inherent danger. These activities often involve speed, height, a high level of physical exertion, and highly specialized gear such as racing on wheels or horseback, big game hunting, mountaineering, winter sports, Skydiving, Parachuting, Scuba Diving, Riding or Driving in Races or Rallies, Mountain Climbing, hunting or equestrian activities, rock climbing, pot holing, bungee jumping, skiing, ice hockey, ballooning, hand gliding, diving or under-water activity river rafting, canoeing involving rapid waters, polo, yachting or boating outside coastal waters.
3. **Alternative treatments-** Alternative treatments are forms of treatments other than treatment of "Allopathy" or "modern medicine" and includes Ayurveda, Unani, Sidha and Homeopathy in the Indian context.
4. **"Aircraft"** means any machine which can derive support in the atmosphere from reactions of the air, [other than reactions of the air against the earth's surface] but excluding balloons, whether fixed or free, airships, kites, gliders and flying machines.
5. **"Airline"** means a public airline that holds a proper license for the jurisdiction in which it operates and that operates scheduled flights, through Aircraft, for passengers and cargo.
6. **Assistance/ Medical Emergency Assistance/ overseas assistance partners** means such person(s) or entity as may be appointed by the Company from time to time to provide assistance to the Insured in terms of this Policy.
7. **Policy Schedule** means the document issued by the Company to You as per these terms and conditions detailing the commencement date and expiry date of the cover, Insured Person(s) name, address, age, coverage, sums insured, Deductible, condition(s), exclusions and or endorsement(s) as fully mentioned in the respective Policy Period.
8. **"Checked Baggage"** means the baggage offered by You and accepted by an Airline for international transportation in the same Aircraft as boarded by You and for which the airline has provided a baggage receipt, and the contents of the baggage checked in by You so long as such contents do not violate any Airline policy or rule restricting the nature of items that may be carried on board its Aircraft.
9. **"Claim"** means a Claim under an operative part of this Policy in respect of an insured event that has taken place or is likely to take place. All Claims resulting from one and the same event or circumstance shall jointly constitute one Claim under this Policy and as having been made at the time when the first Claim was made in writing and the Deductible shall be applicable to each section independently.
10. **Common Carrier-** means a person/entity/Airline, engaged in the business of transporting passengers or property from place to place, by land or water or by Air for all persons indiscriminately, through motor vehicle, seaworthy ships or Aircraft, in each case operated under a valid license/registration for the transportation of passengers for hire from India to outside India and or outside India to India and or from place to place outside India other than motor vehicles, ships or Aircrafts belonging to the military.
11. **Contents** means the household goods such as furniture, fixtures, fittings, home appliances, interior decorations and items of like nature; personal effects such as cloths and other articles of personal nature likely to be worn, used or carried but excluding money, jewellery and valuables.
Contents should be owned or legally responsible by the Insured or family members residing with him and not used for Business or Business purpose
12. **Country of Residence** of the Insured shall mean the country, Insured is normally residing in currently, and declared as the Residential Address of the Insured in the Policy Schedule. It need not be the same as the country of origin of the Insured or the country whose citizen the Insured is.
13. **Date of Loss/ Date of Incident** - Date on which the Accidental Bodily Injury and/or Sickness and/or Disease resulting physical and or Financial loss occurred or first manifested itself during the policy period whichever is earlier
14. **"Damages"** means monetary sums payable pursuant to judgments or awards but shall not include fines, penalties, punitive damages, exemplary damages, any non-pecuniary relief, or any other amount for which You

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are not financially liable, or which is without legal recourse to the You, or any matter that may be deemed to be uninsurable under Indian Law.

15. **Daily Allowance:** Means the amount and period specified in the Policy Schedule.
16. **Dependent Child(ren)-** means unmarried child(ren) is still a full time student in an educational institution; and is unemployed;
17. **Disease** means an affliction of the bodily organs having a defined and recognized pattern of symptoms that first manifests itself during the Policy Period and for which immediate treatment by a Physician is necessary.
18. **Exempted Substances**
Means the Substances which are legal as per local legislation and regulated under local act by local, State or Federal law and consumption of which will not attract any penalties and Sentencing.
19. **Hospital/Medical Facility (For treatment outside of India)**
Any establishment which is licensed as a medical or surgical hospital in the country where it operates and which is recognised by us and it meets all the following requirements:
 - it operates primarily for the reception, care and treatment of sick, ailing or injured persons;
 - it provides twenty-four (24) hours a day nursing service by registered nurses or qualified nurses;
 - it has a staff of one or more licensed medical practitioners available at all times;
 - it provides organised facilities for diagnosis and major surgical facilities;
 - it is not primarily a nursing home, rest home or convalescent home or similar establishment, retreat Center, spa, geriatric ward, it is not institution for treatment of substance abuse, such as but not limited to a place for alcoholics or drug addicts rehabilitation or for any similar purpose.
20. **"Home Burglary"** Home burglary means any act of actual, forcible and violent entry and or exit from Your premises with intent to commit an act of crime or theft.
21. **"Insurance Company / Claims Administrator"** means the person or organization named in the Policy Schedule.
22. **"Inpatient Care"** Inpatient care means treatment for which You have to stay in a hospital for more than 24 hours for a covered event.
23. **Insured/ Insured Member** means the person(s) named in the Policy Schedule.
24. **"Insured Journey"** means a single journey to a destination outside of India (departure and arrival), which is undertaken during the Policy Period.
In case of annual multi-trip policy It means multiple journeys where stay to a destination outside of India is confined maximum up to the plan chosen during the Policy Period
25. **"Family"** means the Insured Person, his/her spouse, children, parents, parent in laws and siblings.
26. **Limit of Indemnity**-Limit of Indemnity represents Our maximum liability to make payment for each and every claim per person and collectively for all persons mentioned in the Policy Schedule during the policy period and in the aggregate for the person(s) named in the Policy Schedule during the policy period, and means the amount stated in the Policy Schedule against each Cover and subject to the limits specified.
In annual multi-trip policy,
limit of Indemnity will be up to Sum Insured for Sections Personal Accident, Sickness Medical Exigencies, and Accidental Medical Exigencies irrespective of number of trips taken.
If Sum insured is partly utilized for Sections Personal Accident, Sickness Medical Exigencies and Accidental Medical Exigencies, balance Sum Insured will be applicable for rest of the Policy Period.
In case Sum Insured is exhausted in full, Insurer have no further liability towards the mentioned Sections i.e Personal Accident, Sickness Medical Exigencies, and Accidental Medical Exigencies.
For rest of the covers opted Sum Insured will be reinstated for every trip.
27. **"Emergency Medical Evacuation"** means the removal of the Insured Person for Emergency Care from abroad to a hospital within India where necessary medical care can be accorded to him, including medical care required en route.
28. **Medical Practitioner/Doctor/ Physician** is a person who holds a valid registration from the medical council of any state or Medical Council of India or Council for Indian Medicine set up by the Government of India or a State Government and acceptable to Us and is thereby entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of his license and acceptable to Us. A Doctor/Physician/Medical Practitioner shall not include any member of the Insured Person's family.
29. **"Mental healthcare"** includes analysis and diagnosis of a person's mental condition and treatment as well as care and rehabilitation of such person for his Mental Illness or suspected Mental illness;
30. **"Mental health establishment"** means any health establishment, including Ayurveda, Yoga and Naturopathy, Unani, Siddha and Homoeopathy establishment, by whatever name called, either wholly or partly, meant for the care of persons with Mental illness, established, owned, controlled or maintained by the appropriate Government, local authority, trust, whether private or public, corporation, co-operative society, organisation or any other entity or person, where persons with Mental illness are admitted and reside at, or kept in, for care, treatment, convalescence and rehabilitation, either temporarily or otherwise; and includes any general hospital or general nursing home established or maintained by the appropriate Government, local authority, trust,

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whether private or public, corporation, co-operative society, organization or any other entity or person; but does not include a family residential place where a person with Mental illness resides with his relatives or friends;

31. **"Mental illness"** means a substantial disorder of thinking, mood, perception, orientation or memory that grossly impairs judgment, behaviour, capacity to recognize reality or ability to meet the ordinary demands of life, mental conditions associated with the abuse of alcohol and drugs, but does not include mental retardation.
32. **Mental retardation-** a condition of arrested or incomplete development of mind of a person, specially characterised by subnormality of intelligence.
33. **New Born Baby-** Newborn baby means baby born during the Policy Period and is aged between 1 day and 90 days, both days inclusive.
34. **Policy** means the proposal, the Policy Schedule, Terms and Conditions and any endorsements attaching to or forming part hereof either on the commencement date or during the Policy Period.

35. **Policy Period/ Cover Period-**

I. Annual Multi Trip Policy

- i Annual Multi Trip Policy will be issued for one year.
- ii Policy Period for annual multi-trip policy will be utilization of the entire cover period in one or in aggregate of all trip(s) up to the limit specified in Policy Schedule or the actual date on which Insured returns to the Country of Residence, whichever is earlier
- iii In case of individual journey during the Insured Period, the policy shall not pay for any contingency occurring beyond the maximum trip duration specified (30/60/90/120 or 180 days) in Policy Schedule.
- iv Policy will be active only during Your trip abroad.

II. Single Trip, the period between

- i. Date of Commencement of Insurance cover mentioned in the Policy Schedule, being the date on which the Insured first boards the mode of transportation by which he finally leaves the Country of Residence for the insured Trip, and
Note - In case the Insured has availed of the cover Personal Accident Cover in India The commencement date of the policy shall be the date on which the Insured travels from his Country of residence to the Airport, to board the mode of transportation for his overseas departure from India provided the domestic travel within India takes place within 24 hours prior to the time of the boarding of the mode of transport for his overseas departure.
- ii. Date of expiry of insurance cover as mentioned in the Policy Schedule or the actual date on which Insured returns to the Country of Residence, whichever is earlier.

Note - In case the Insured has availed of Personal Accident Cover in India the expiry date specified in the policy or shall be the date on which the Insured has reached his place of residence in India by rail or road or air after disembarkation from the mode of transportation by which he has returned to India, Provided the domestic travel has occurred within 24 hours of his/her disembarkation.

36. **Pre- Existing Illness and Injury for-**

Single Trip-

Means

- i. any injury, ailment, condition or related condition/symptom for which treatment, or medication, or advise, or diagnosis, has been sought or received by You prior to the commencement of the Policy, or
- ii. Any ailment or injury and related conditions for which You were diagnosed and/or received/ sought medical advice / treatment and / or had first signs or symptoms and / or had known existence thereof prior to the issuance of Policy Period by Us, whether declared by You or not.

Annual Multi-trip policy-

Means

- i. any injury, ailment, condition or related condition/symptom for which treatment, or medication, or advise, or diagnosis, has been sought or received by You prior to the commencement of Your Policy Period or initiation journey/trip during Policy Period, or
- ii Any ailment or injury and related conditions for which You were diagnosed and/or received/ sought medical advice / treatment and / or had first signs or symptoms and / or had known existence thereof prior to the issuance of Policy Period or initiation journey/trip during Policy Period by Us, whether declared by You or not.

37. **"Property Damage"** means actual physical damage to tangible material property belonging to a third party.

38. **"Psychiatrist"** means a medical practitioner possessing a post-graduate degree or diploma in psychiatry awarded by an university recognized by the University Grants Commission established under the University Grants Commission Act, 1956, or awarded or recognized by the National Board of Examinations and included in the First

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schedule to the Indian Medical Council Act, 1956, or recognized by the Medical Council of India, constituted under the Indian Medical Council Act, 1956, and includes, in relation to any State, any medical officer who having regard to his knowledge and experience in psychiatry, has been declared by the Government of that State to be a

psychiatrist for the purposes of Mental Healthcare Act, 2017;

39. **"Psychoactive Substance"** means any substance, natural or synthetic, or any natural material or any salt or preparation of such substance or material included in the list of Psychoactive Substance, but excluding the omitted list of item from Psychotropic Substance.
40. **Schedule** means the Policy Schedule and any annexure to it read with respective Policy Period.
41. **Sickness** means a condition or an ailment affecting the general soundness and health of the Insured Person's body that first manifests itself during the Policy Period and for which immediate treatment by a Physician is necessary.
42. **Sum Assured** means the amount stated in the Policy Schedule against each relevant Section, which shall be Our maximum liability.
43. **Suicide** means an act of self-killing. For Suicide, a person must commit it by himself, irrespective of the means employed by him in achieving his object of killing himself.
44. **"Theft"** means whoever intending to take dishonestly any moveable property out of the possession of the Insured without his/her consent, moves that property in order to such taking is said to commit theft.
45. **Trip** a holiday or journey which is a round Trip, starting from when You leave Your Home Country, and which ends on Your return to Your Home Country, and includes an overnight Stay.
46. **Single Trip** shall mean and include one Trip undertaken by the Insured during the Period of Insurance from the Country of Residence of the Insured on or after the date of commencement of the cover and returning to the Country of Residence of the Insured on or before the expiry of the cover.
47. **Substance abuse** refers to use of a Psychoactive Substance for other than medicinal purposes which impairs the physical, mental, emotional, or social well-being of the user.
48. **Annual Multi Trip Policy** shall mean policy allowing Insured to undertake one or more Trip(s) during the Policy Period from his/her Country of Residence to overseas destinations and back, subject to aggregate trip duration as specified in the Policy Schedule.
49. **Valuables** means:
 - Electronic and electrical equipment including, but not limited to, photographic equipment, Audio equipment, video and/or televisual equipment, computers and/or organizers; Binoculars, spectacles, sunglasses, or the like;
 - watches or jewellery or precious stones or models or coins or curios, sculptures, manuscripts, stamps, collections of stamps, rare books, medals, molds, designs or any other collectibles; Gold or silver or any precious metals or articles made from any precious metals; deeds, ATM Cards, credit cards, charge cards, bonds, bills of exchange, bank treasury or promissory notes, cheques, money, securities or any other negotiable instrument.
50. **"Usual, Reasonable and Customary expenses"** means medical charges that:
 - a. Do not exceed the usual levy of charges for similar treatment or allied services, in the locality where such treatment or allied services have been obtained; and
 - b. Do not include charges that would not have been made if no insurance existed.
51. **You, Your, Yourself/ Your Family, Insured, Insured Person**, named in the Policy Schedule that We insure as set out in the Schedule.
52. **We, Our, Ours, the Company** means the Bajaj Allianz General Insurance Company Limited.

SECTION C) COVERAGE**I. ACCIDENTAL CONTINGENCIES****SECTION 1: PERSONAL ACCIDENT**

What it means: - Personal Accident provides compensation in the event of defined disability or death caused solely by Accident.
 This section does not apply to trips within India.

What are You covered for:**A. DEATH**

If during the Policy Period, You sustain Accidental Bodily Injury which directly and independently of all other causes

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results in immediate Death or within twelve (12) months from the Date of Incident, then the Company agrees to pay the Sum Insured stated in the Section 1 of the Policy Schedule, to Your Nominee or legal representative.

Disappearance: In the event of Your disappearance, following a forced landing, stranding, sinking or wrecking of a conveyance in which You were known to have been travelling as an occupant, Your disappearance shall be deemed as death after eighty-four (84) months. If at any time after the payment, it is discovered that You are still alive, all payments shall be reimbursed in full to Us by the recipient of such benefit.

B. PERMANENT TOTAL DISABILITY

What it means: - An individual is considered 'totally and permanently disabled', if the individual becomes completely disabled due to accidental bodily injury.

If during the Policy Period, You sustain Accidental Bodily Injury which directly and independently of all other causes results in permanent total disability within twelve (12) months from the Date of Incident, then the Company agrees to pay the Sum Insured stated in the Section 1 of the Policy Schedule, to You or Your Nominee or legal representative in case of.

- loss of the sight of both eyes
- physical separation of or the loss of ability to use both hands or both feet
- physical separation of or the loss of ability to use one hand and one foot
- loss of sight of one eye and the physical separation of or the loss of ability to use either one hand or one foot

C. PERMANENT PARTIAL DISABILITY

What it means: - This benefit is paid to Insured who are not totally disabled but who have some type of lasting impairment

If during the Policy Period, You sustain Accidental Bodily Injury which directly and independently of all other causes results in Permanent Partial Disability within twelve (12) months from the Date of Incident, then We agree to pay the percentage of Sum Insured as per Table given in “**Conditions applicable to I. Accidental Contingencies**” to You or Your Nominee or legal representative.

EXTENSIONS AVAILABLE FOR SECTION 1 “PERSONAL ACCIDENT”

On Payment of Additional premium, You can opt for “Lifestyle Modification Benefit” and “Children Education Benefit” as extension to Section 1 “Personal Accident”

EXTENSION 1: LIFESTYLE MODIFICATION BENEFIT:

On Payment of additional premium to Us, We hereby agree and declare that this Policy is extended to indemnify You for lump sum Benefit as mentioned in Policy Schedule towards lifestyle modifications caused due to “Permanent Total Disability” and “Permanent Partial Disability”.

EXTENSION 2: CHILDREN EDUCATION BENEFIT

On Payment of additional premium to Us, We hereby agree and declare that this Policy is extended to indemnify You for lump sum Benefit as mentioned in Policy Schedule towards the cost of education of Your dependent children subject to below Specific Conditions:

- The dependent child or children must be studying at an accredited educational institution on the date You met with an Accidental Bodily Injury resulting in Death/ Permanent Total Disability.
- The Sum Insured mentioned in the Policy Schedule is the total amount payable for Dependent Child or Children collectively

SECTION 2: ACCIDENTAL DEATH & DISABILITY- COMMON CARRIER (AD&D)

What it means: - this cover provides additional compensation in the event of Permanent Total Disability, Permanent Partial Disability or Death of Insured caused solely by Accidental Injury while travelling in Common Carrier.

This section is not applicable for trips within India.

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We will pay the Sum Insured specified in the Policy Schedule to You or Your Nominee or legal representative if You sustain Accidental Bodily Injury during the course of Insured Journey while travelling in a common carrier provided such bodily injury is within 12 months of the date of Incident and is the sole and direct cause of the Death or Permanent Total Disablement or Permanent Partial Disability.

SECTION 3: PERSONAL ACCIDENT COVER IN INDIA

What it means- this cover provides compensation in the event of injuries, disability or death caused solely by violent, accidental, external and visible events incurred in Indian Territory.

If during the Policy Period, You sustain Accidental Bodily Injury which directly and independently of all other causes results in Death or Permanent Total Disability or Permanent Partial Disability within twelve (12) months from the Date of Incident, then We agree to pay the Sum Insured stated in the Policy Schedule to You or Your Nominee or legal representative.

We shall pay the agreed Sum Insured if You sustain Accidental Bodily Injury during Your travel from:

- Place of Stay to airport provided the domestic travel takes place within 24 hours from time of boarding the overseas transport, or
- Airport to Place of Stay provided the domestic travel has occurred within 24 hours of Your arrival back to India.

SECTION 4- DISABILITY BENEFIT COVER

What it means: - this cover pays a weekly benefit if You meet with an accident leading to temporary total disablement.

This section is not applicable for trips within India.

We will pay You weekly benefit as specified in the Policy Schedule from the Date of Incident, if during Your Insured Journey You suffer an accidental injury leading to Temporary Total Disablement, provided the disablement period is certified by treating medical practitioner.

SPECIFIC CONDITIONS APPLICABLE TO I. ACCIDENTAL CONTINGENCIES:

- If We become liable to make payment under Death / Permanent Total Disability due to accidental bodily injury, then this insurance will cease as far as the Insured is concerned.
- For Permanent Partial Disability listed in the below table, the disability certified by the treating doctor would be considered for the claim process, up to the maximum percentage defined for each disability.
- If the Permanent Partial Disability is not listed in the table, then the disability percentage certified by the Government Civil Surgeon in India would be considered for the claim process.
- Any claim triggered under "Permanent Partial Disability" will reduce the Section 1 : Personal Accident and Section 2: Accidental Death & Disability- Common Carrier (AD&D) Sum Insured.
- Total benefit paid under one or more of the events described under Section I Accidental Contingencies due to accidental bodily injury, would be limited to the Sum Insured as specified under Section 1 or Section 2 whichever is applicable.

Table 2 -

Permanent Partial Disability	% of Sum Insured	Permanent Partial Disability	% of Sum Insured
Hearing of both ears	75%	A foot at the ankle	40%
An arm at the shoulder joint	70%	Hearing of one ear	30%
A leg above mid-thigh	70%	A thumb	20%
An arm above the elbow joint	65%	An index finger	10%
An arm beneath the elbow joint	60%	Sense of smell	10%
A leg up to mid-thigh	60%	Sense of taste	5%
A hand at the wrist	55%	Any other finger	5%
A leg up to beneath the knee	50%	A large toe	5%
An eye	50%	Any other toe	2%
A leg up to mid-calf	45%		

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II. MEDICAL CONTINGENCIES

What it means: -

1. **Medical Expenses**- are any costs incurred in treatment of injury or disease.
2. **Medical Evacuation** - provides for medically necessary evacuation to a medical facility in India,
3. **Repatriation of Mortal Remains**- provides for transportation necessary to return the deceased body/remains to his or her Place of Stay or to a nearby funeral or cremation facility.

SECTION 5: SICKNESS MEDICAL EXIGENCIES

We will indemnify You, for Usual, Reasonable and Customary expenses up to Sum Insured shown in the Policy Schedule in the event of medically admissible sickness /illness/disease first sustained or contracted while on Your Insured Trip within the Policy Period.

SECTION 6: ACCIDENTAL MEDICAL EXIGENCIES

What it means:

In this coverage You can claim medical cost incurred from any admissible accidental injury

We will indemnify You, for Usual, Reasonable and Customary expenses up to Sum Insured shown in the Policy Schedule in the event of medically admissible accidental injury first sustained or contracted while on Insured Trip within the Policy Period.

II A. What will be covered under “Section 5: Sickness Medical Exigencies” and “Section 6: Accidental Medical Exigencies”

We will indemnify You for necessary Medical Expenses incurred under the advice of a qualified Doctor for Medical treatment, Medical Evacuation and Repatriation of Mortal Remains and personal belongings of the deceased.

The deductible as specified in the Policy Schedule in respect of Medical Sickness/ Accident will apply for each and every claim which You will have to self-pay and this amount cannot be claimed.

1. **Medical Expenses:** We will pay You for Medical expenses incurred by You for treatment outside India for following services but not limited to:
 - Hospital Room, boarding and nursing
 - Use of Operation Theatre, emergency room and Ambulatory Medical Facility
 - Doctors' Fees, physicians' services including chiropractitioner, psychiatrist
 - Medical expenses including but not limited to laboratory tests, therapeutics, anesthetics (Including procedure administration), transfusion,
 - X-rays, CT/ MRI Scans etc.
 - Day care expenses
 - Out Patient Department expenses (OPD)
 - Local emergency medical transportation including ambulance services
 - Pharmacy bills for prescribed medicines and drugs.
 - One time reimbursement of hearing aids, crutches, and external appliances and/or devices necessitated as part of treatment and prescribed by Doctor/Physician.
2. **Emergency Medical Evacuation:** We will indemnify You for medically eligible and necessary expenses incurred
 - to evacuate You from overseas medical facility to a medical facility in India, and
 - to continue medical treatment commenced by You outside of India up to a period of 90 days from Date of Incident.
3. **Repatriation of Mortal Remains-** In any unfortunate event leading to death, eligible expenses shall be paid for:
 - Transportation of a deceased body/mortal remains and personal belongings back to India,
 - Reasonable preparation of the body for transportation with minimally necessary container appropriate for transportation or cremation or embalming,
 - Other permissions and paperwork associated with it.

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II B. Conditions applicable Subject to admissibility for “Sickness Medical Exigencies” and “Accidental Medical Exigencies”

1. We shall arrange the evacuation within the Policy Period when in the opinion of our medical panel, it is judged medically appropriate to evacuate You to a medical facility in India. The means of transportation to final destination will be decided by Us.
2. Emergency Medical evacuation must be ordered by overseas treating physician with severity and nature of Your Sickness/ Injury and approved by Us
3. We shall after judging the medical conditions on the basis of severity and nature of Your Sickness/ Injury detailed by Physician, intimate about acceptance of Emergency Medical Evacuation within 48 hour after Your written intimation to Us via email or call at the call Centre mentioned on the Policy Schedule.
Mental Rehabilitation Expenses will be covered up to 25% of “Sickness Medical Exigencies” Sum Insured or USD 50,000 whichever is lower.
4. If You are hospitalized continuously beyond Expiration Date of the Policy Period then the expenses incurred under this Sections will be paid up to a maximum of 75 days overseas from date of expiry of the policy or utilization of Sum Insured specified in the Policy Schedule whichever is earlier. Insurer shall have no further liability beyond the specified period of 75 days.
5. Sub limits as shown below will be applicable for the ages above 50 years. The sub-limits will apply per hospitalization/ OPD

Benefits	Sum Insured =< USD 50000	Sum Insured from USD 50000 =< 2 Lakhs USD	Sum Insured from USD 2 Lakhs =< 5 Lakhs USD	Sum Insured from USD 5 Lakhs =< 7.5 Lakhs USD	Sum Insured above 7.5 Lakhs USD
Hospital Room, Emergency Room, Board and hospital miscellaneous	1200 USD/ day	1500 USD/ day	1700 USD/ day	2000 USD/ day	2300 USD/ day
Intensive Care Unit	2000 USD/ day	2500 USD/ day	2750 USD/ day	3000 USD/ day	3200 USD/ day
Surgical Treatment	8000 USD	9000 USD	11500 USD	15000 USD	20000 USD
Anesthetist Services	25%of Surgical treatment	25%of Surgical treatment	25%of Surgical treatment	25%of Surgical treatment	25%of Surgical treatment
Consultation Charges	150 USD/ Visit	200 USD/ Visit	250 USD/ Visit	300 USD/ Visit	350 USD/ Visit
Diagnostic and Testing	1000 USD	1250 USD	1500 USD	1875 USD	2500 USD
Ambulance Services	300 USD	400 USD	500 USD	600 USD	1000 USD

EXTENSIONS AVAILABLE FOR “SICKNESS MEDICAL EXIGENCIES” AND “ACCIDENTAL MEDICAL EXIGENCIES”**EXTENSION 3: PRE- EXISTING ILLNESS AND INJURY COVER**

On Payment of additional premium to Us, We hereby agree and declare that this Policy is extended to indemnify You for Section “Sickness Medical Exigencies” and “Accidental Medical Exigencies” indemnifying Pre-existing illness/injury and its related complications up to limit specified in Policy Schedule.

Note:

1. In case You opt for Pre- Existing Illness and Injury Cover and You are above the age of 50 years, sub-limits as mentioned in II B 5) “Conditions applicable Subject to admissibility for “Sickness Medical Exigencies” and “Accidental Medical Exigencies” will apply.
2. Any claim(s) paid under Extension “Pre-existing illness and injury cover” will reduce the Sum Insured under respective section(s) “Sickness Medical Exigencies” and “Accidental Medical Exigencies”...

EXTENSION 4: WAIVER OF SUB-LIMITS

On Payment of additional premium to Us, We hereby agree and declare that this Policy shall provide a waiver of sub-limits for age above 50 years mentioned in II B 5): Conditions “Sickness Medical Exigencies” and “Accidental Medical Exigencies” can be provided.

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Note-

In case You opt for both options viz. "Pre- Existing Illness and Injury Cover" and "Waiver of Sub-limits", You can claim for "Pre- Existing Illness and Injury" medical expenses up to the Sum Insured specified for Pre- Existing Illness and Injury Cover without any sublimit.

EXTENSION 5: SPORTING ACTIVITIES COVER

We shall indemnify You as per terms of the applicable section mentioned below in case You engage in any sporting activity for training or participation in professional or semi-professional sports competitions outside of India provided this being declared beforehand in the proposal form and agreed by the Company subject to additional premium.

Coverage extended under scope of this benefit within Sum Insured specified under Sporting Activities Cover

Section 1 Personal Accident

Section 6 Accidental Medical Exigencies

SECTION 7: EMERGENCY DENTAL PAIN RELIEF



What it means: In this coverage You can claim for medical cost incurred for treatment of any covered dental treatment.

We will indemnify You, in respect of the necessary Dental Expenses incurred overseas due to sudden acute pain to one or more teeth, first sustained or contracted whilst on Insured trip and requires immediate medical attention for getting relief from such pain.

SECTION 8: HOSPITALIZATION DAILY ALLOWANCE



What it means: Daily allowance is a per day compensation paid to the Insured in the event of hospitalization

In the event of Accidental Injury or Sickness requiring Your hospitalisation, We will pay You Daily Allowance as stated in the Policy Schedule, for each continuous and completed period of 24 hours of Hospitalisation subject to a maximum of days mentioned in the Policy Schedule provided You have consulted for such illness and injury to Overseas doctor and is advised hospitalization for further treatment.

SECTION 9: COMPASSIONATE VISIT



What it means: This cover pays for the transportation expenses of one family member to meet You when You are hospitalised while travelling.

In the event of Accidental Injury or Sickness requiring Your hospitalisation, We will reimburse You, up to the Sum Insured shown in the Policy Schedule for the actual cost of to and fro economy class cost of ticket for one of the family member or friend or relative of Yours via Common Carrier, provided no family member or relative or friend is there to attend to Your medical emergency during Your visit overseas.

Conditions:

1. This coverage shall be provided only if treating physician has advised necessity of the attendance of a family Member or relative or friend and upon our satisfaction on the reason provided.
2. This benefit will be extended in following scenarios:
 - a. If You are hospitalized continuously beyond Expiration Date of the Policy Period: In this case we will pay for travel expenses incurred within 75 days from Expiration Date of the Policy Period.
 - b. If one or more family member is travelling with You but none of them is able to take care of You due to their hospitalization within the "Policy Period": we will pay for Compassionate Visit of one family member or friend or relative.
3. You can claim for Compassionate Visit once in entire Policy Period.

SECTION 10: COMPASSIONATE STAY

TRAVEL ACE (INTERNATIONAL)

What it means: This cover pays for the accommodation expenses of one family member, who travelled to take care of You when You are hospitalised while travelling.

In the event of Accidental Injury or Sickness requiring Your hospitalisation, We will reimburse You up to the Sum Insured shown in the Policy Schedule, the actual cost of accommodation for one of the family member or friend or relative of Yours for his/her stay including extended stay subject to the following conditions-

Conditions:

1. This coverage shall be provided only if treating physician has advised necessity of the attendance of a family Member or relative and up on our satisfaction on the reason provided.
2. This benefit will be extended in following scenarios:
 - a. If You are hospitalized continuously beyond Expiration Date of the Policy Period: In this case we will pay for accommodation expenses incurred within 75 days overseas from Expiry Date of the Policy Period maximum up to the Coverage Sum Insured.
 - b. You can claim for Compassionate Stay once in entire Policy Period.

SECTION 11: RETURN OF MINOR CHILDREN

What it means: -This cover pays travel expense incurred to return Your child/ children to India if You are hospitalized abroad.

In the event of Accidental Injury or Sickness requiring Your hospitalisation, We will reimburse You up to the Sum Insured shown in the Policy Schedule for

1. the actual travel expenses excluding refund received on scheduled departure tickets to return Your minor child(or children) to India

In addition to this the policy will also reimburse:

2. the actual to and fro travel expenses for a relative/ friend to accompany Your minor children to India or
3. Services of escort to accompany Your minor child(or children) to India.

Conditions:

1. We will pay for Economy class travel expenses by the most economic route via Common Carrier for a maximum two minor children aged up to 15 years.
2. This coverage shall be provided if You are the only companion of the minor child (or children),
3. The minor child (or children) is/ are not able to return on the scheduled date due to Your hospitalization
4. This benefit will be extended up to 75 days from Expiry Date of Policy Period if You continue to be hospitalised as In-Patient beyond Expiry Date of Policy Period.
5. You can claim for Return of Minor Child once in entire Policy Period.

SECTION 12: REPLACEMENT AND REARRANGEMENT OF STAFF

What it means: -This cover pays for transportation and accommodation expenses for replacing You with a substitute so as to carry forward Your work.

If You are unable to carry out Your occupational duties for a period of more than 10 days as a result of following contingencies:

- Accidental Injury or Sickness requiring Your hospitalisation, or
- Accidental Injury or Sickness rendering You disable, or
- Death of a Spouse, child, brother, sister, parent, parent-in-law, or
- Compulsory quarantine at the foreign location, or
- Your presence being required by the police following burglary or jury service or witness call in India

It is agreed and declared that We will reimburse You, up to the Sum Insured shown in the Policy Schedule, for following expenses necessarily incurred to replace You by an employee or staff of Your firm:

- Economy class to and fro travel expenses by the most economical route via Common Carrier
- The reasonable expenses incurred for the accommodation of Your replacement , which shall cease immediately on Your resumption of occupational duties or utilisation of sum insured whichever is earlier.

Conditions:

1. You must be on a business trip when above contingency arose.

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2. We will reimburse differential accommodation costs for accommodation of replaced staff.
3. This benefit will be extended up to 75 days from Expiry Date of Policy Period if You continue to be hospitalised as In-Patient beyond Expiry Date of Policy Period.
4. You can claim for Replacement and Rearrangement of Staff once in entire Policy Period.

III. TRIP CONTINGENCIES

SECTION 13: TRIP AND EVENT CANCELLATION



What it means: This cover will compensate You for costs that have been paid or are payable and cannot be recovered if Your trip is completely cancelled.

What is covered:

In case of necessary and unavoidable cancellation of Your insured trip from India prior to its commencement, We will indemnify You for the financial losses arising out of following:

- cancellation of accommodation,
- cancellation of pre-booked events, tours, excursions and activities,
- International SIM card charges,
- Travel charges

Which are paid or contracted to be paid by You and are not recoverable from any source, subject to limits shown in the Policy Schedule.

We shall indemnify You only if Your Trip is cancelled due to the following conditions:

1. Death or Serious injury or sudden sickness of You or Your family member or Travel Companion requiring minimum two days of hospitalization or Day care procedure listed in Annexure 1.
2. Inclement Weather conditions like Storm, Flood, Hurricanes, or Natural Disaster which is not publicly known before policy issuance date.
3. You are called as a witness at a Court of Law or for jury service attendance.
4. Involuntary loss of Job and or retrenchment

Note- Loss incurred due to above listed Insured Perils (i.e 1,2,3,4) must not have arisen before 45 days prior to Policy inception date

5. Loss of Passport and Visa within 15 days before departure date.
6. Political disturbance, Travel prohibition declared by Government and or Airline Authorities which is not publicly known before policy issuance date.

SECTION 14: TRIP INTERRUPTION



What it means: This cover will compensate You for costs that have been paid or are payable and cannot be recovered in case You had to change travel plans.

In case of necessary and unavoidable change of plans after commencement of the journey, We will indemnify You for the financial losses incurred within the policy period arisen due to Your early return towards following expenses

- cancellation of accommodation,
- cancellation of events, tours, excursions and activities,
- Travel charges including early flight for difference in air fare.
- En-route emergency accommodation extension

-which are paid or payable by You and are not recoverable from any source, subject to limits shown in the Policy Schedule.

We shall indemnify You only if Your Trip is interrupted due to the following conditions:

1. Death or Serious injury or sudden sickness of You or Your family member or Travel Companion requiring minimum two days of hospitalization or quarantine condition detected or Day care procedure listed in Annexure 1.
2. Inclement Weather conditions like Storm, Flood, Hurricanes, or Natural Disaster which is not publicly known before policy issuance date.
3. You are called as a witness at a Court of Law or for jury service attendance.
4. Involuntary loss of Job and or retrenchment occurring after commencement of outbound journey.

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5. Political disturbance, Travel prohibition declared by Government and or Airline Authorities which is not publicly known before policy issuance date.
6. Loss of passport/Visa

SECTION 15 - MISSED CONNECTION



What it means: To compensate expenses related to missing of a connecting flight.

We shall pay a fixed amount to You as mentioned in Policy Schedule in case of Your failure to board the connecting flight as per itinerary, any time during the Trip within the Policy Period, arising out of and consequent upon the delayed arrival of the earlier flight caused by reasons beyond Your control.

Our liability shall not exceed the Sum Insured stated in the Policy Schedule against Missed connection section.

Condition Applicable to Missed Connection:

1. We will pay under this section only if the scheduled time difference between the two flights is more than 4 hours.
2. In case of Missed Connection where liability of the missing connecting leg has been accepted by Airlines and arranged a alternate transport, Our liability in such case will be restricted to 10% of Sum Insured opted for Section "Missed Connection".

SECTION 16 – TRIP EXTENSION



What it means- This cover will compensate You in case Your trip is extended beyond original schedule due to listed reason incurred for accommodation and transportation.

We shall indemnify You for the costs of Hotel accommodation and difference in Airfare between original return ticket and new ticket of economy class for You and Your travelling companion insured with us up to the limits mentioned in the Policy Schedule if Your trip is extended due to following:

1. Death or serious injury or sudden sickness of You or Your family or travelling companion requiring minimum two days of hospitalization or Day care procedure listed in Annexure 1.
2. Inclement Weather conditions like Storm, Flood, Hurricanes, or Natural Disaster which is not publicly known before policy issuance date.
3. Political disturbance, Travel prohibition declared by Government and or Airline Authorities which is not publicly known before policy issuance date.

SECTION 17– TICKET OVERBOOKING



What it means- Lump Sum amount is paid in case of ticket is overbooked (Bumping seats) by airlines.

We shall pay You the Sum Assured mentioned in the Policy Schedule in case of ticket overbooking resulting in You being denied to board the scheduled flight.

Condition:

1. The overbooking needs to be confirmed by respective airlines authority in writing.

SECTION 18 – LOSS OF CHECKED-IN BAGGAGE



What it means- This cover will compensate if the airline loses Your checked in bag

We will pay You Sum Insured specified in the Policy Schedule in respect of the complete and permanent loss of Your Checked-In Baggage including contents therein.

Conditions

1. On discovering the loss of Checked-in Baggage, You must obtain a relevant property irregularity report (PIR) from the Airline and submit the same to Us / Claims Administrator in the event of a Claim.

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- Our liability shall not arise until liability is admitted by the Airline and supported by documentary proof issued by Airline.

SECTION 19: DELAY OF CHECKED-IN BAGGAGE

What it means- This cover will provide You a fixed benefit in case the airline delays Your checked-in baggage.

We shall pay You the Sum Insured mentioned in the Policy Schedule in case Your checked-in baggage is delayed beyond the deductible hour mentioned in the Policy Schedule. .

Conditions applicable to Delay of Checked-in Baggage -

In the event of a claim:

- On discovering the Delay of Checked-in Baggage, You must obtain a relevant confirmation from the Airline and submit the same to Us / Claims Administrator in the event of a Claim.

IV. MISCELLANEOUS CONTINGENCIES**SECTION 20: LOSS OF PERSONAL BELONGING**

(INCLUDING DEVICES OF PERSONAL USE VIZ MOBILE, LAPTOP, IPAD, I-POD, E-READER CAMERA ETC)



What it means- This cover will compensate for the replacement cost in case of theft/ robbery of Your baggage during Your overseas trip.

We shall indemnify You for the loss or damage to Personal Belongings due to theft, larceny, robbery or hold up at international airport and or anywhere outside India during the Policy Period.

Conditions Applicable to Section Loss of Personal Belonging -

- You need to submit documents evidencing Your ownership of the item(s) to Us/ Claims Administrator.
- In the absence of supporting bills, the maximum liability will not individually or in the aggregate exceed the 10% the Sum Insured or the amount claimed by You whichever is lower.
- We shall indemnify You for replacing the item(s) with value of the insured items as new less allowance for betterment, wear and tear and depreciation as per scale of depreciation shown below or the value which can be realized from the market for such insured item immediately before occurrence of damage whichever is lower.

Age of the item	Depreciation Percentage
Up to 180 days	15%
181 days to 1 year	25%
> 1 Year <= 2 Years	40%
> 2 Year <= 3 Years	50%
> 3 Year <= 4 Years	60%
> 4 Year <= 5 Years	70%
Above 5 Years	75%

- In cases where the lost item has become obsolete, all costs necessary to replace lost item with a follow-up item of similar type and similar quality will be reimbursed subject to a maximum of 50% of the cost of the follow up model.
- Our maximum liability shall not exceed the Sum Insured stated in the Policy Schedule

SECTION 21 - PERSONAL LIABILITY

What it means- The policy covers the costs incurred for which You are legally liable if You cause a loss or damage to property of third party.

We shall indemnify You, subject to Sum Insured specified in Policy Schedule against any claim of legal liability incurred by You in Your private capacity to pay damages for third party Civil Claims arising out of Accidental Bodily Injury or Accidental Property Damage occurring during an Insured Journey in the Policy Period.

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Conditions Applicable to Personal Liability

1. Our liability towards You will be determined by a foreign court of law or otherwise as mutually agreed between You and Us in advance.
2. In the event of any legal action taken against You, You shall:
 - Give immediate written notice to the Us, and
 - Not incur any defense costs or expenses, admit liability for or settle or attempt to settle, make any admission or offer any payment or otherwise assume any contractual obligation with respect to any claim or claimant without the prior written consent from Us. Once the written consent is provided We shall be entitled (but in no case obligated) at any time:
 - to take over and conduct in Your name the defense and/or settlement of any action or claim,
 - to receive Your co-operation and assistance and
 - to appoint lawyers on Your behalf.

Any and all costs and expenses incurred by Us or the lawyers appointed by Us shall be a first charge on the Sum Assured.
3. We shall not settle any claim without Your express consent, but if You refuse an available settlement recommended by Us then Our liability shall thereafter be restricted to the amount by which the claim could have been settled.

SECTION 22: LOSS OF PASSPORT/ DRIVING LICENSE



Necessary and reasonable cost of replacing Your passport and or Driving License costs You incur in getting a replacement passport/Driving Licence/temporary permit (this would include travel costs to respective Government Office incurred to obtain for Passport/ Driving License)).

In the event of loss of Your passport / Driving License/ temporary permit, We will pay You expenses necessarily incurred by You in obtaining a duplicate passport/ Driving License/ temporary permit subject to maximum of Sum insured specified in Policy Schedule.

Conditions:

1. You must provide receipts for all related costs incurred by You.

SECTION 23 – CAR HIRE EXCESS INSURANCE



What it means- If You hire a car and it gets damaged or stolen, this cover can compensate You for excess charges imposed by the car rental company.

We will pay You up to the Sum Insured specified for the excess / deductible, You may have to pay under a car rental agreement and or b) additional costs You may be liable to pay over and above the amount. You should be covered under the terms of Your car rental agreement in the event of an Accident or theft which is further covered by the rental car insurance policy provided-

- i You are named as the lead driver on the car rental agreement
- ii You hold an international driving license which is effective at the time of incident.
- iii You have taken possession of the rental car
- iv Insurance is included in the total price of the car rental agreement;

SECTION 24- ALTERNATIVE TRANSPORT EXPENSES

We will pay Sum Insured stated in Policy Schedule for alternate accommodation and transport taken because of cancelled, delayed, shortened or diverted Scheduled Transport Arrangement You had booked to travel to reach on time to any event or prepaid travel/tour arrangements.

Here Scheduled Transport Arrangement means the air or sea transport arrangement booked and confirmed by the respective provider before inception of Journey from the India.



What it means- This cover pays for alternate transportation taken to reach to Your destination for and due to listed Insured perils.

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SECTION 25- LEGAL EXPENSES



What it means- This cover pays prosecution cost for claiming damages or compensation against third party.

We shall indemnify You / Your legal heir for prosecution cost incurred on claiming damages or compensation against third party responsible for Your death, illness or injury.

We will indemnify You/Your legal heir up to amount stated in Your Policy Schedule for-

1. Nominating an appointed advisor
2. Prosecution costs for legal action on behalf of You / Your legal heir.

Conditions applicable to Legal Expenses -

1. You/ Your legal heir must keep us and the appointed advisor fully aware of all the facts and correspondence including any claim settlement offers made to You / Your legal heir.
2. We will not be bound by any promises or undertakings which You / Your legal heir give to the appointed advisor, or which You / Your legal heir give to any person about payment of fees or expenses, without our consent.

SECTION 26 – PRE BOOKED MEAL COVER

In case of You not getting any Meal or receiving a different meal category from the one, which was Pre-booked on confirmed basis with the airlines, the Company will pay You the Sum Insured specified in the Schedule.

SECTION 27 - WEATHER GUARANTEE

In case of unavoidable cancellation of Your day(s) itinerary in Your Insured trip overseas due to adverse and unpredicted weather conditions which lead to contingency like and not limited to

- public transport failing,
- roads being blocked off en route

and hence mandated You to stay in the Hotel for complete day, the Company will pay the Sum Insured specified in the Policy Schedule.

SECTION 28 – GOLFER'S HOLE-IN-ONE

Subject to all other terms and conditions, it is hereby agreed that the insurer shall pay the Sum Insured shown in the Policy Schedule for celebration of achieving a hole-in-one in a United States Golfers' Association (USGA) recognized golf course, anywhere in the world excluding India.

SECTION 29- BOUNCED HOTEL

In case of You not getting hotel stay booked on confirmed basis with the suppliers, We will reimburse You for the cost of, expenses relating to transportation to the alternative hotel, Cost of difference in booking alternate hotel stay or one level upgrade in case of non-availability of the equivalent accommodation type, up to the Sum Insured stated on the Policy Schedule.

SECTION 30 – HIJACK COVER

If You are detained by hijackers following hijacking of any Aircraft in which You were travelling, We will pay the Sum Insured specified in the Policy Schedule.

This need to confirmed and declared by government and or airlines authority.

SECTION 31- EMERGENCY CASH ASSISTANCE SERVICE

This is only an assistance service provided when You require emergency cash flow following incidents like theft/burglary of luggage/money or hold up. We ourselves or through our Claims Administrator shall co-ordinate with Your relatives in India to provide emergency cash to You or collect the amount & arrange for the transfers up to the limit specified in the Policy Schedule.

Our liability to arrange for cash shall not arise until the FIR registered with the local police authority is made available to us or our Claims Administrator and verified/confirmed that the loss was due to theft/burglary of luggage/money.

Admissibility of claim under this section will be subject to following conditions:

1. As soon as the theft/burglary of luggage/money occurs, You should first register FIR with the local police authority
2. You may then intimate The Company itself or through Claims Administrator of the Company on Email or contact on telephone number indicated in the Policy Schedule.

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3. The company shall verify Your details and ascertain the amount of cash required not exceeding the amount specified under this section
4. We Shall arrange for transfer of funds to You through a variety of sources, including but not limited to credit cards, hotels, banks, consulates and Western Union. Credit Card Transactions performed by The Company are subjected to the confirmed Credit.
5. Administrative cost incurred if any for the transfer of funds shall be deducted from the collected amount

V. DOMESTIC CONTINGENCIES

SECTION 32 – EXTENDED PET STAY



What it means- This cover pays for extension of Your pet's stay in pet house in India due to listed covered perils.

Scope of Cover

We will reimburse You against expenses incurred for extended stay of Your pet in the pet house in India as a result of Your final booked return journey to India is delayed for more than 24 hrs due to

1. inclement weather,
2. strike, Political Disturbance, Compulsory quarantine by Government
3. Airline's acts of omission / commission or mechanical breakdown of the aircraft on which You were scheduled to travel on.
4. You or Your travelling companion's (insured with us) Hospitalization in overseas facility or death due to Sickness / Accidental injury due to which You were not able to return back on scheduled arrival date.

Under such circumstances the You need to obtain written confirmation from appropriate transport authority stating the reason for delay & how long the delay lasted except for Your Sickness/ Accident for which You have to submit medical documents for Your Hospitalization

You must keep all receipts for fees paid to Pet house on account of such delay.

SECTION 33 – HOME BURGLARY AND ROBBERY INSURANCE

Scope of Cover

The Company will indemnify the Insured in respect of the loss of or damage to the Insured Property belonging to the Insured Beneficiary stored or lying in the Insured Premises caused by actual or attempted Burglary and/or Robbery during the Policy Period.

Provided that the liability of the Company shall in no case exceed in respect of each Insured Property the Sum Insured mentioned in the Policy Schedule.

Sum Insured

Sum Insured Under this section shall be the invoice value of the Insured Property.

SECTION 34- STANDARD FIRE AND SPECIAL PERILS COVER

Coverage under this Section shall be as per Bajaj Allianz General Insurance Company Ltd. Bharat Griha Raksha Policy annexure attached.

Notwithstanding what is mentioned in these Policy Wordings, for the purposes of this Section, in case of contradiction of these Policy Wordings with the provisions of Bajaj Allianz General Insurance Company Ltd Bharat Griha Raksha Policy Wordings annexed hereto, then the Bajaj Allianz General Insurance Company Ltd Bharat Griha Raksha Policy Wordings annexed hereto shall prevail over these Policy Wordings.

Waiver of Condition of Average for "Home Burglary and Robbery Insurance"

Condition of average shall be waived off for this cover since in such case there would be no specific declaration from the Proposer towards the value at risk of the respective assets to be insured.

VI. ADDITIONAL COVERS FOR STUDENT PLAN ONLY

SECTION 35 CANCER SCREENING AND MAMMOGRAPHY COVER

We will reimburse You against reasonable charges incurred during the policy period towards Cancer Screening and Mammography as advised by Doctor up to the Sum Insured mentioned on the Policy Schedule. We can cover

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the expenses incurred under this cover for services if availed in India also.

We shall not be liable under this Cover for any medical expenses related to treatment of Cancer, You may claim this under "Sickness Medical Exigencies" as per coverage terms and conditions.

SECTION 36 ALCOHOL AND SUBSTANCE ABUSE

We will pay You against reasonable expenses, up to the Sum Insured mentioned on the Policy Schedule, incurred during the Policy Period towards treatment including counselling and Rehabilitation for medical complications, emergencies and self-inflicted injuries sustained due to use of Alcohol and Psychoactive Substances, provided, the first diagnosis and the Hospitalization has occurred during the policy period and treatment is medically necessary.

SECTION 37 MATERNITY AND BABY COVER

We will pay You against reasonable charges incurred during the policy period towards maternity expenses except pre-natal expenses and post-natal expenses incurred by the Insured in a Hospital outside India provided the Hospitalization of the Insured for Maternity and Child Birth has occurred during the policy period and provided that the maximum liability of the Company will be limited to the amount specified in the Policy Schedule.

The Company will also pay for the medical and related expenses incurred for the medically necessary treatment of the new born baby of the Insured for a maximum period of 30 days from the date of birth of the new born baby of the Insured and up to the amount specified in the Policy Schedule.

For the purpose of this cover "Newborn Baby" means baby born during the Policy Period and is aged between 1 day and 30 days, both days inclusive.

We can cover the expenses incurred under this cover for services if availed in India also.

SECTION 38 - BAIL BOND INSURANCE

If You are arrested for any inadvertent law breaking during Your travel overseas, We will pay the amount as mentioned in the Policy Schedule towards the bail amount for release.

However, the Company will not pay,

1. for any bail amount where You have been charged for breaking the law with Criminal Intent
2. for any bail amount where You have been charged for over speeding in a vehicle.

SECTION 39 - TUITION FEE

In the event of You being unable to continue the school/college/Universities semester due to any of the following reasons arising during the policy period, the Company shall pay You the Sum Insured shown in the Policy Schedule:

1. Your serious medical condition requiring hospitalization
2. Death or serious injury requiring hospitalization of either of Your parents and Your Siblings.

SECTION 40- CONTINGENCY TO SPONSOR

In the event of the named sponsor meets with accident or fall sick during the Policy Period, which results in his death or permanent total disability during the policy period, the Company shall reimburse the remaining school fee subject to the maximum limit shown in the Policy Schedule.

VI. ALL RISK COVERS**SECTION 41- TRIP DELAY DELIGHT****Plan I: Flight Delay for International Travel**

In consideration of the payment of additional premium for below mentioned Plan(s) opted by you, it is hereby agreed and declared that terms and conditions of respective Plan will be applicable for Covers displayed on your Policy Schedule:

Plan I: Flight Delay for International Travel

Plan II: Flight Delay for Domestic Travel (Within India Only)

If Public Aircraft on which Insured/ Insured Person/Beneficiary is travelling from/to Republic of India and or his/her connecting flight(s) during Insured Journey is delayed beyond the time deductible opted by the Insured from original scheduled departure time for whatsoever reason within policy period, the Company will pay the sum as per the below table.

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This cover is not extended to pay for any domestic journey i.e travel within India except from the airport where the Insured/ Insured Person/ Beneficiary finally leaves India for international destination and in case of "Round Trip Journey" the cover will cease on his / her arrival in India

e.g

- **One Way Journey:** In case of Insured Journey from Pune to Delhi to Dubai, if flight delay occurs from Pune to Delhi will not be covered under the Rider .However if the flight originating from Delhi to Dubai is delayed beyond the opted time deductible from the original scheduled departure time, same shall be covered.
- **Round Trip Journey:** In case of Insured Journey from Dubai to Delhi to Pune, if flight delay occurs from Delhi to Pune will not be covered under the Rider. However if the flight originating from Dubai to Delhi is delayed beyond the opted time deductible from the original scheduled departure time, same shall be covered

Options available under flight delay for International Travel (Not available for annual multi-trip plan)

1. One way Journey-
 - i. Insured/ Insured Person/Beneficiary can opt for "Trip Delay Delight" for his/her one way journey only.
 - ii. We shall pay maximum one claim i.e claim arising out of first delay, during his/her one way trip irrespective of number of connecting flights till his final destination.
2. Round trip Journey
 - i. Insured/ Insured Person/Beneficiary can opt for "Trip Delay Delight" for his/her round trip
 - ii. We shall pay maximum first two claims ie. claims arising out of first two delays, during his/her complete trip irrespective of number of connecting flights till his arrival in country of origin.
3. Multi-trip-
For annual multi-trip policy, we shall pay maximum first two flight delay claims per trip ie. claims arising out of first two delays per trip, irrespective of number of trips and connecting flights delays incurred within Policy Period.

Flight Delay for International Travel <Insured/Insured Person can opt any time slab(s) from below mentioned options>	
Time Deductible (Delay exceeding from Schedule departure)	Sum Insured
0.5 hour	Insured can opt Sum Insured from \$ 1 to \$ 1000 per slab.
1 hour	
1.5 Hours	
2 Hours	
2.5 Hours	
3 Hours	
3.5 Hours	
4 Hours	
4.5 Hours	
5 Hours	
5.5 Hours	
6 Hours	

Plan II: Flight Delay for Domestic Travel (Within India Only)

If Public Aircraft on which Insured/ Insured Person/Beneficiary is travelling within India and or his/her connecting flight(s) during Insured Journey is delayed beyond the time deductible opted by the Insured from the original scheduled departure time for whatsoever reason within policy period, the Company will pay the sum as per the below table.

Options available under flight delay for Domestic Travel

1. One way Journey-
 - i. Insured/ Insured Person/Beneficiary can opt for "Trip Delay Delight" for his/her one way journey only.
 - ii. We shall pay maximum one claim i.e claim arising out of first delay, during his/her one way trip irrespective of number of connecting flights till his final destination.
2. Round trip Journey

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- i. Insured/ Insured Person/Beneficiary can opt for "Trip Delay Delight" for his/her round trip
- ii. We shall pay maximum first two claims ie claim arising out of first two delays, during his/her complete trip irrespective of number of connecting flights till his arrival.

Flight Delay for Domestic Travel	
<Insured/Insured Person can opt any time slab(s) from below mentioned options>	
Time Deductible (Delay exceeding from Schedule departure)	Sum Insured
0.5 hour	Insured can opt Sum Insured from ₹ 100 to ₹ 50,000 per slab.
1 hour	
1.5 Hours	
2 Hours	
2.5 Hours	
3 Hours	
3.5 Hours	
4 Hours	
4.5 Hours	
5 Hours	
5.5 Hours	
6 Hours	

Conditions applicable to Plan I and Plan II-

1. These Covers need to be opted in addition to Base travel Insurance policy from Us.
2. Private Aircraft, private air vehicles is excluded from the scope of this Product.
3. In family floater policies, this benefit will be triggered to one person only i.e proposer, for Insured Journey of complete family.

Conditions applicable for Claim Payments -

1. One way Journey-
 - i. First Trip Delay while Your onward journey from India will be payable irrespective of any connecting flight from India where flight is booked to travel to any international destination till your final destination as per ticket itinerary.
 - ii. Only one claim during the Policy Period will be payable as per Sum Insured slab mentioned in Your Policy Schedule.
2. Round trip Journey
 - i. First two Trip Delay while Your complete to and fro journey from India will be payable as per ticket itinerary.
 - ii. Sum Insured will be restored to full for second claim for payable delay as per Rider terms.
 - iii. We shall pay maximum two claims during his/her complete trip irrespective of number of connecting flights till his arrival.
3. Multi-trip-
 - i. For annual multi-trip policy, we shall pay maximum first two flight delay claims per trip up to any number of trips taken within Policy Period within Policy Period.
 - ii. Sum Insured will be restored to full at every payable delay as per Rider terms.

Sum Insured Restoration – Applicable only for Trip Delay Delight

The Sum Insured provided under the rider will be restored to 100% of the Sum Insured on complete or partial utilization of Your Plan Sum Insured.

- For "One Way Journey" – No Sum Insured restoration benefit
- For "Round Trip Journey" - Sum Insured will be restored to full for second claim.
- For "Multi Trip" - Sum Insured will be restored to full for second claim per trip.

SECTION 42: ALL RISK TRIP AND EVENT CANCELLATION

What is covered:

In case of necessary and unavoidable cancellation of Your insured trip from India prior to its commencement due to events which are sudden and unpredicted, We will indemnify You for the financial losses arising out of following:

- cancellation of accommodation,

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- cancellation of pre-booked events, tours, excursions and activities,
- International SIM card charges,
- Travel charges

Which are paid or contracted to be paid by You and are not recoverable from any source, subject to limits and co-payment shown in the Policy Schedule.

What is not covered:

1. Cancellation because of Voluntary loss of Job or Involuntary loss of Job due to any criminal activity, moral hazards, disciplinary action, -and retirement.
2. Cancellation triggered if You failed to check in within stipulated time unless the situation was beyond the control of the Insured Person
3. Cancellation initiated by Travel Agent unless he/she is authorized by Insured in writing to do so.
4. Cancellation due to VISA Refusal

SECTION D) EXCLUSION- STANDARD**A. General Exclusions Applicable to All Sections**

The Company shall be under no liability to make payment hereunder in respect of any Claim directly or indirectly caused by, based on, arising out of or howsoever attributable to any of the following:

1. The Insured Person's participation in any naval, military or air force operations whether in the form of military exercises or war games or actual engagement with the enemy, whether foreign or domestic.
2. War, invasion, acts of foreign enemy, hostilities (whether war be declared or not), civil war, civil unrest, rebellion, revolution, insurrection, military or usurped power or confiscation or nationalization or requisition of or destruction of or damage to property by or under the order of any government or local authority.
3. The loss or destruction or damage to any property whatsoever or any loss or expenses whatsoever resulting or arising there from or any consequential loss directly or indirectly caused by or contributed to or arising from:
 Ionising radiation or contamination by radioactivity from any nuclear waste from combustion of nuclear fuel;
 or
 The radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof, or Asbestosis or any related Sickness or Disease resulting from the existence, production, handling, processing, manufacture, sale, distribution, deposit or use of asbestos, or products thereof.
4. The Insured Person's actual or attempted engagement in any criminal or other unlawful act.
5. Any consequential losses.
6. In respect of travel by the Insured Person to any country against whom the Republic of India has imposed general or special travel restrictions, or against whom it may impose such restrictions, or any country which has imposed or may impose subsequently, such restrictions against travel by a citizen of the Republic of India to such country.
7. The Insured Person engaging in air travel unless he flies as a passenger on an Airline. For the purpose of this exclusion, air travel means being in or on, or boarding an Aircraft for the purpose of flying therein or alighting there from following a flight.

SECTION D) EXCLUSION- SPECIFIC**I. ACCIDENTAL CONTINGENCIES**

1. Accidental bodily injury arising on account of alcoholism, drunkenness or the abuse of drugs.
2. Your participation in riding or driving in races or rallies unless opted for "Sporting Activities Cover
3. Losses arising directly or indirectly on account of engagement in any criminal or illegal act.
4. Whilst You are engaged in adventure sports in a non-professional capacity unless under the supervision of a trained professional.
5. Your participation in any sport activities in a professional capacity unless opted for "Sporting Activities Cover
6. Suicide, attempted suicide or willfully Self-inflicted injury or Illness
7. Expenses incurred due to Accidents as while driver/rider on motorized vehicles unless at the time of the Accident he/she is in possession of a current full international driving license and while riding a two wheeler You are wearing a safety crash helmet if this is required by local regulations.

II. SECTION 5: "SICKNESS MEDICAL EXIGENCIES" AND SECTION 6 "ACCIDENTAL MEDICAL EXIGENCIES"

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The Company shall be under no liability to make payment in respect of-

1. Any routine physical or other examination, vaccination, vitamins where there is no objective indication of impairment of normal health
2. Any routine dental examination, corrective treatment to previously fitted dental implants, bridge, caps prior to policy inception date, dental pain relief or treatment unless rendered necessary due to accidental injury requiring hospitalization.
3. The cost of spectacles, contact lenses,
4. Any medical treatment obtained in India except that is covered under sub-section Emergency Medical Evacuation
5. Any medical Evacuation undertaken without the consent of the Insurer.
6. Any Claim arising when You are:
 - Travelling against the advice of a Physician; or
 - Receiving or on a waiting list for specified medical treatment declared in the Physician's report or certificate provided by You in Your proposal; or
 - Travelling for the purpose of obtaining treatment; or
 - Receiving treatment for a terminal medical condition
 - Routine medication which commenced before Your trip start
7. Any Pre-existing ailment or disease unless opted for "Extension 3: Pre- Existing Illness And Injury Cover"
8. Suicide, attempted suicide or willful Self-inflicted injury or Illness.
9. Any mental retardation.
10. Alcoholism, drunkenness or the abuse of drugs and or intoxicating substances. Waiver is provided for student plan if optional cover for the same is opted by Insured Student.
11. Pregnancy, resulting childbirth, miscarriage, abortion, medical termination of pregnancy or complication arising out of any of the foregoing. Waiver is provided for student plan if optional cover for the same is availed by Insured Student.
12. Any Fertility, sub fertility, impotence, assisted conception operation or sterilization procedure.
13. Whilst You are engaged in adventure sports in a non-professional capacity unless under the supervision of a trained professional
14. Your participation in any sport activity in a professional capacity unless opted for Sporting Activities Cover
15. Your participation in riding or driving in races or rallies
16. Expenses incurred due to Accidents as a driver/rider on motorized vehicles unless at the time of the Accident You are in possession of a current full international driving license and while riding a two wheeler You are wearing a safety crash helmet if this is required by local regulations.
17. Losses arising directly or indirectly from manual work or hazardous occupation, self-exposure to needless peril (except in an attempt to save life)
18. Losses arising directly or indirectly from engaging in any criminal or illegal activities.
19. Cost of Experimental, unproven or non-standard treatment.
20. Treatment by any other system other than modern medicine (also known as Allopathy).
21. Weight management services and treatment related to weight reduction programs including treatment of obesity and its complications.
22. Congenital anomalies or any complications or conditions arising there from.
23. Cosmetic surgery unless required due to accidental injuries.

III. SECTION 7: EMERGENCY DENTAL PAIN RELIEF

The Company shall be under no liability to make payment in respect of

1. Any routine dental examination
2. Any Pre-existing ailment or disease
3. Dentures including dental crowns, inlays and onlays
4. Dental treatment that goes beyond treatment for pain relief as well as prophylactic dental treatment including plaque removal
5. Corrective treatment incurred due to previously fitted dental implants, bridge, caps prior to policy inception date.
6. Any cosmetic dental treatment.

IV. SECTION 13: TRIP AND EVENT CANCELLATION:

1. Involuntary loss of Job due to any criminal activity, moral hazards, disciplinary action, non-performance and retirement.

V. SECTION 18: LOSS OF CHECKED-IN BAGGAGE

1. Accompanied or cabin luggage
2. Partial destruction of baggage or contents missing from the baggage.

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VI. SECTION 20: LOSS OF PERSONAL BELONGING:

1. Loss due to Your negligence, or acting in a non-prudent manner, or leaving personal belongings unattended
2. Loss to Jewellery, coins or curios, Gold or silver or any precious metals or articles made from any precious metals; bonds, cheques, money, financial loss on account of loss of debit card, credit card, pre-paid/ forex cards or any other negotiable instrument.
3. Loss or damage arising for any reason, other than Theft
4. Loss or theft which has not been reported to the Police within 24 hours of discovery.
5. Loss or damage caused by delay, wear and tear, moth, vermin, atmospheric or climatic conditions, deterioration or electrical or mechanical derangement of any kind.
6. Loss or damage caused by Spilled fluid from cosmetic or beverage containers whilst in the baggage.
7. Loss to Hired or borrowed property or equipment or Personal belongings entrusted to a third party.
8. Claims arising from confiscation or detention by customs or other law enforcement officials and authorities.
9. Claims in respect of documents of any kind.
10. Items which have not been noted on the police report, or Property Irregularity Report
11. Liability in respect of a pair or set of articles where we shall be liable only for the value of that part of the pair or set which is lost or damaged.
12. Breakage, Cracking or Scratching of Musical Instruments and similar articles of brittle or fragile nature unless caused by the Insured Peril.
13. Loss or damage to software or data or any other material including pictures stored in the Laptops, Mobile Phones, Cameras, I-pads, I-pods etc.
14. Loss of Checked-in baggage, passport
15. Any consequential loss or damage, loss of use, delay or loss of markets, loss of income, depreciation, reduction in functionality, or increased cost of working;
16. Loss arising out of mysterious disappearance of the personal belongings
17. Losses due to Your willful acts or willful act of any other person with or without Your connivance.

VII. SECTION 21: PERSONAL LIABILITY

1. Your liability towards Your employees (whether under a contract of or for services);
2. Bodily Injury to and/or Property Damage to property belonging to the Your Family or Travelling Companion.
3. Any liability for Bodily Injury and/or Property Damage arising directly or indirectly from or due to:
 - i Livestock belonging to You or in Your care, custody or control;
 - ii Any willful, malicious, criminal or unlawful act, error, or omission;
 - iii The pursuit of any trade, business of profession, employment or occupation;
 - iv Ownership, possession or use of vehicles, aircraft or aerial devices, or watercraft or hovercraft;
 - v Due to Your being involved in any other dangerous or hazardous activity;
 - vi Use or misuse of alcohol, any hallucinogenic substance, drugs (except those used as medically prescribed), or drug addiction;
 - vii Supply of goods or services;
 - viii Any form of ownership or occupation of land or buildings (other than occupation only of any temporary residence).
 - ix Any professional liability arising out of Your professional activities.

VIII. SECTION 22: LOSS OF PASSPORT AND DRIVING LICENSE

We shall be under no liability to make payment for:

1. Loss or damage to Your passport/ Driving License as a result of the confiscation or detention by customs, police or any other authority
2. Loss which is not reported to the appropriate police authority within 24 hours of the discovery of the loss, and in respect of which an official report has not been obtained.
3. Loss caused because of Your negligence
4. Cost of VISA

IX. SECTION 23: CAR HIRE EXCESS INSURANCE

1. We will not pay if
 - i The incident is not reported to an appropriate police authority as soon as reasonably possible or where an official police report has not been obtained, if required by local law;

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- ii any claim arising from wear and tear, gradual deterioration, insect or vermin attack/infestation, hidden defect or inherent damage of the rental car;
 - iii any claim as a result of mechanical or electrical breakdown, other than towing costs;
 - iv any damage to the rental car's interior unless the damage is as a result of an accidental collision, fire, theft or vandalism;
2. Any loss claimed for vehicle other than the rental car (as specified on the car rental agreement)

X. SECTION 24: ALTERNATIVE TRANSPORT EXPENSES

- 1. The cancellation, delay, shortening or diversion of Your scheduled transport arising from the financial collapse of any transport, tour or accommodation provider
- 2. If You failed to check in or reach to the transportation destination/pick up point within stipulated time
- 3. Any action or detention or travel prevention by Airlines Authority.
- 4. Non Scheduled Transport Arrangements which are from unscheduled transport services of passengers which operates without fixed and published Schedule at an hourly/ per mile / kilometer charge.

XI. SECTION 25: LEGAL EXPENSES

Any claim:

- 1. Trigger event should not be on account of Your involvement.
- 2. Reported to us more than 48 hours after the event giving rise to the claim;
- 3. Where the cost of legal action could be more than the settlement; **unless** You take all necessary measures towards expeditious disposal of the dispute.
- 4. Involving legal action between members of the same household, an immediate relative, a travelling companion or one of Your employees;
- 5. Against a travel agent, tour operator or carrier, us, the insurer, another person insured by this policy or our agents.
- 6. Legal costs and expenses incurred in pursuit of any claim against us, our Assistance or our agents, someone You were travelling with, a person related to You, or another Insured.

XII. SECTION 32: EXTENDED PET STAY:

Any consequential liability or expenses incurred on account of mishandling and/or improper care of pet.

XIII. SECTION 33: HOME BURGLARY AND ROBBERY INSURANCE

No indemnity is available hereunder for any Claim directly or indirectly caused by, based on, arising out of or howsoever attributable to any of the following

- 1. The deductible of first 5% of each and every claim amount subject to a minimum of INR 1,000 excluding Jewellery, unless specifically revised and altered by the Insurer and mentioned in the Policy Schedule. The deductible shall apply for each and every loss arising out of the perils in respect of which the Insured Beneficiary is indemnified by this section. The deductible shall apply per event per Insured Beneficiary.
- 2. Any loss or damage covered and/or recoverable under other Sections of this Policy.
- 3. Earthquake, flood, storm, cyclone or other convulsions of nature or atmospheric disturbances.
- 4. Any consequential losses of any kind, be they by way of loss of profit, business interruption, market loss or otherwise, and any other legal liability of any kind.
- 5. Contents from any safe following the use of a key to gain access to the safe, or any duplicate thereof belonging to the Insured Beneficiary unless such key has been obtained by Robbery.
- 6. Loss or damage caused by theft.

XIV. SECTION 36: ALCOHOL AND SUBSTANCE ABUSE -

- 1. Any treatment taken for de-addiction will not be covered under the policy.
- 2. Medical Emergencies, complications and injuries arising out of use of Psychoactive Substance which do not fall under Exempted substances under local legislation.

SECTION E) GENERAL TERMS AND CLAUSES - STANDARD GENERAL TERMS AND CLAUSES

- 1. **Conditions Precedent-** The due observance and fulfilment of the terms and conditions of the policy, by the insured person, shall be a condition precedent to any liability of the Company to make any payment for claim(s) arising under the policy.
- 2. **Notice & Communication**
 - i. Any notice, direction, instruction or any other communication related to the Policy should be made in writing.

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- ii. Such communication shall be sent to the address of the Company or through any other electronic modes specified in the Policy Schedule.
- iii. The Company shall communicate to the Insured at the address or through any other electronic mode mentioned in the schedule.

3. Policy Excess/Deductible

For medical sickness/accident there is a policy excess which the Insured Person will have to self-pay and this amount cannot be claimed. Policy excess for rest of the benefits will be applicable as per Policy Schedule and will be applicable for each and every claim.

This implies for any claim the policy excess to be borne by the Insured Person. This applies for all benefits with policy excess stated in Policy Schedule.

4. Fraud-

If any claim made by the insured person, is in any respect fraudulent, or if any false statement, or declaration is made or used in support thereof, or if any fraudulent means or devices are used by the insured person or anyone acting on his/her behalf to obtain any benefit under this policy, all benefits under this policy shall be forfeited.

Any amount already paid against claims which are found fraudulent later under this policy shall be repaid by all person(s) named in the policy schedule, who shall be jointly and severally liable for such repayment. For the purpose of this clause, the expression "fraud" means any of the following acts committed by the Insured Person or by his agent, with intent to deceive the insurer or to induce the insurer to issue an insurance Policy:—

- (a) the suggestion, as a fact of that which is not true and which the Insured Person does not believe to be true;
- (b) the active concealment of a fact by the Insured Person having knowledge or belief of the fact;
- (c) any other act fitted to deceive; and
- (d) any such act or omission as the law specially declares to be fraudulent

The company shall not repudiate the policy on the ground of fraud, if the insured person / beneficiary can prove that the misstatement was true to the best of his knowledge and there was no deliberate intention to suppress the fact or that such mis-statement of or suppression of material fact are within the knowledge of the insurer. Onus of disproving is upon the policyholder, if alive, or beneficiaries.

5. Claim Settlement (provision for Penal Interest)

- a) The Company shall settle or reject a claim, as the case may be, within 30 days from the date of receipt of last necessary document.
- b) In the case of delay in the payment of a claim, the Company shall be liable to pay interest to the policyholder from the date of receipt of last necessary document to the date of payment of claim at a rate 2% above the bank rate.
- c) However, where the circumstances of a claim warrant an investigation in the opinion of the Company, it shall initiate and complete such investigation at the earliest, in any case not later than 30 days from the date of receipt of last necessary document. In such cases, the Company shall settle or reject the claim within 45 days from the date of receipt of last necessary document.
- d) In case of delay beyond stipulated 45 days, the Company shall be liable to pay interest to the policyholder at a rate 2% above the bank rate from the date of receipt of last necessary document to the date of payment of claim.

6. Multiple Policies

1. In case of multiple policies taken by an insured person during a period from one or more insurers to indemnify treatment costs, the insured person shall have the right to require a settlement of his/her claim in terms of any of his/her policies. In all such cases the insurer chosen by the insured person shall be obliged to settle the claim as long as the claim is within the limits of and according to the terms of the chosen policy.
2. Insured person having multiple policies shall also have the right to prefer claims under this policy for the amounts disallowed under any other policy / policies even if the sum insured is not exhausted. Then the insurer shall independently settle the claim subject to the terms and conditions of this policy.
3. If the amount to be claimed exceeds the sum insured under a single policy, the insured person shall have the right to choose insurer from whom he/she wants to claim the balance amount.
4. Where an insured person has policies from more than one insurer to cover the same risk on indemnity basis, the insured person shall only be indemnified the treatment costs in accordance with the terms and conditions of the chosen policy.

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7. Grievance Redressal Procedure-

In case of any grievance the insured person may contact the company through

Bajaj Allianz General Insurance Co. Ltd
Bajaj Allianz House, Airport Road
Yerawada, Pune 411006
E-mail: customercare@bajajallianz.co.in
Call : 1800-225858 (free calls from BSNL/MTNL lines only)
1800-1025858 (free calls from Bharti users – mobile /landline) or 020-30305858

Grievance Redressal Cell for Senior Citizens
Senior Citizen Cell for Insured Person who are Senior Citizens
'Good things come with time' and so for Our customers who are above 60 years of age We have created special cell to address any health insurance related query. Our senior citizen customers can reach Us through the below dedicated channels to enable Us to service them promptly
Health toll free number: 1800-103-2529
Exclusive Email address: seniorcitizen@bajajallianz.co.in

If Insured person is not satisfied with the redressal of grievance through above methods, the insured person may also approach the office of Insurance Ombudsman of the respective area/region for redressal of grievance as per Insurance Ombudsman Rules 2017 as detailed in Annexure III:

Note: Note: Address and contact number of Governing Body of Insurance Council
Council For Insurance Ombudsmen, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054.
Tel.: 022 - 69038801/03/04/05/06/07/08/09
Email: inscoun@cioins.co.in
Cashless facility offered through network hospitals of Bajaj Allianz only. Cashless facility at 3300+ Network hospitals PAN India. Please visit our website for list of network hospitals and network Diagnostic Centres , Website: www.bajajallianz.com or get in touch with 24*7 helpline number: 1800-103-2529 (toll free) / 020-30305858

Grievance may also be lodged at IRDAI Integrated Grievance Management System - <https://igms.irda.gov.in/>

SECTION E) GENERAL TERMS AND CLAUSES - SPECIFIC TERMS AND CLAUSES

1. Automatic Extension:

Automatic extension of the Policy Period will be granted up to a period of 7 days, from the policy expiry date, if the extension is necessary, due to delay by the Scheduled Airlines, which is beyond the control of the Insured Person, and no alternative air transportation is made available to the Insured due to Inclement weather, political instability and terrorism.

Claims arising under “**Medical Exigency**” Cover will be excluded from the scope of this clause.

2. Eligible Entry Age Limit :

1 day to Lifetime

3. No Extension of Policy Period-

- On expiry of the Policy Period, except as provided In General Conditions 1 “Automatic Extension of Policy Period”, No automatic extension of Policy Period shall be allowed.
- If Insurance cover is required beyond the expiry date stated in the Policy Schedule, a fresh Policy will be issued subject to the following conditions.
- Insured / Insured Person shall submit a declaration letter (Format available on the website) clearly mentioning his/her medical status including any event giving rise to claim if any within 7 days after expiry of Policy Period.
- Proposal for fresh policy if accepted by Us is subject to a complete medical declaration and Payment of premium.
- Depending upon the medical declaration mentioned on the declaration letter, We (Insurance company) shall reserve the right to accept/decline such proposals in case required.
- The premium payable for the policy during the trip will be as per the trip duration and age band slab.
- If the Insured /Insured Person does not declare the correct medical status or any such event giving rise to a

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claim under fresh certificate to be issued, it shall be deemed to be invalid and premium shall be forfeited.

- h. If the Insured person suffers with any illness/injury in the first Policy Period with which he travels overseas then any claim arising of or related to or complication of the same shall be termed as pre-existing in the Fresh Policy Period and shall not be covered.

4. Duty of Disclosures:

The Policy shall be null and void and no benefit shall be payable in the event of untrue or incorrect statements, misrepresentation, misdescription or on non-disclosure in any material particular in the proposal, personal statement, declaration and connected documents, or any material information having been withheld, or a claim being fraudulent or any fraudulent means or devices being used by the Insured or any one acting on his behalf to obtain any benefit under this policy and We may cancel this Policy at its sole discretion.

5. Act of Terrorism:-

Policy will cover loss, damage arising out of opted covers in case of being an accidental victim of terror attack without active involvement in such Terrorist Activity of whatsoever nature.

- 6. Insured Person** - Only those persons named as the Insured Person in the Policy Schedule shall be covered under this Policy. Cover under this Policy shall be withdrawn from any Insured Person/member upon such Insured Person/ member giving 14 days written notice to be received by Us.

7. Discounts:

- **Travelling Companion Discount:** Below mentioned discount on published premium rates will be provided in case policy is taken by more than 1 travelling companions.

Travelling Member(s)	Discount
Self	0%
Self + 1 or 2 travel Partner	5%
Self + 3 or more travel partner	10%

- **Employee Discount** - 20% discount on published premium rates to employees of Bajaj Allianz & its group companies, this discount is applicable only if the policy is booked in direct office code

- **Online Discount/Direct Customer Discount:**

5% discount is extended for the policies purchased online/ through website and to direct customers.

(Note: Employee Discount is not applicable to Online/Direct Customers)

8. Cancellation-

1. You may terminate this Policy at any time before the commencement of the Risk Period, by giving Us written notice and the Policy shall terminate. If no claim has been made under the Policy, We will deduct INR 250 + applicable tax as cancellation charges and will refund the premium paid:
2. This Policy constitutes the complete contract of insurance. This Policy cannot be changed by anyone (including an insurance agent or broker) except Us. Any change that We make will be evidenced by a written endorsement signed and stamped by Us.
3. We may terminate/cancel this Policy on grounds of untrue or incorrect statements, misrepresentation, fraud, misdescription or non-disclosure of material facts in the proposal, personal statement, declaration and connected documents, or any material information having been withheld, or non-cooperation by You or any Insured Person or a claim being fraudulent or any fraudulent means or devices being used by the Insured anyone acting on Your behalf or on behalf of an Insured Person to obtain any benefit under this policy, upon 30 days' notice by sending an endorsement to Your address shown in the Policy Schedule and no refund of premium shall be made by the Company.
4. In other cases of cancellation of Policy by the Company, premium will be refunded on pro-rata basis.
5. After the commencement of Insured Journey, if the part of the policy days are utilised & the customer makes a request for cancellation before arriving back to India, refund will be on prorata basis.
6. An Annual Multi Trip Policy will automatically terminate at the end of the Policy Period.
7. In case of any early return of the insured person prior to expiry of the Policy Period We will refund premium at the following rates subject to no claims being incurred on the policy.

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For Policies with Term less than 1 year	
Period in Risk	Refund Rounded
Within 20% of the policy period	65.0%
Exceeding 20% but less than 30% of the policy period	55.0%
Exceeding 30% but less than 40% of the policy period	50.0%
Exceeding 40% but less than 50% of the policy period	40.0%
Exceeding 50% of the policy period	0.0%

For Annual Policies			
Period in Risk	Policy Period 1 Year	Policy Period 2 Years	Policy Period 3 Years
	Pro Rate Refund		
Exceeding 15 days but less than 3 months	60%	70%	75%
Exceeding 3 months but less than 6 months	40%	60%	70%
Exceeding 6 months but less than 12 months	0%	40%	55%
Exceeding 12 months but less than 15 months		30%	45%
Exceeding 15 months but less than 18 months		20%	40%
Exceeding 18 months but less than 24 months		0%	25%
Exceeding 24 months but less than 27 months			20%
Exceeding 27 months but less than 30 months			10%
Exceeding 30 months but less than 36 months			0%

8. No claim will be considered under this policy once cancelled on the request of Insured.

9. Free Look Period –

- Single Trip Insurance - Free look period is not applicable.
- Annual Multi Trip Policy - You have a period of 15 days from the date of receipt of the Policy document to review the terms and conditions of this Policy provided no trip has been commenced. If You have any objections to any of the terms and conditions, You have the option of cancelling the Policy stating the reasons for cancellation and You will be refunded the premium paid by You after adjusting the amounts spent on stamp duty charges and proportionate risk premium.
You can cancel Your Policy only if You have not made any claims under the Policy.
All Your rights under this Policy will immediately stand extinguished on the free look cancellation of the Policy.
Free look provision is not applicable and available at the time of renewal of the Policy.

10. Notifications & Declarations-

Any and all notices and declarations for the attention of the Company shall be submitted in writing and shall be sent to the address specified in the Policy Schedule.

11. Due Observance-

The due observance of and compliance with the terms, provisions, warranties and conditions of this Policy in so far as they relate to anything to be done or complied with by the Insured Person shall be a condition precedent to the Company's liability under this Policy.

12. Entire Contract-

The Policy constitutes the complete contract of insurance. No change or alteration in this Policy shall be valid or effective unless approved in writing by the Company, which approval shall be evidenced by an endorsement on the Policy. No agent shall or has the authority to change in any respect whatsoever any term of this Policy or waive any of its provisions.

13. Reasonable Care-

The Insured Person shall take all reasonable and proper steps to safeguard and protect himself and his possessions against any fact, matter, circumstance or cause that might result in a Claim under this Policy, and shall not do or cause to be done anything that might enhance the likelihood of a Claim under this Policy (except in an attempt to save human life).

14. Revision/ Modification of the policy-

There is a possibility of revision/ modification of terms, conditions, cover ages and/or premiums of this product at any time in future, with appropriate approval from IRDA. In such an event of revision/modification

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of the product, intimation shall be set out to all the existing insured Persons at least 3 months prior to the date of such revision/modification comes into the effect.

15. Withdrawal of Policy-

There is possibility of withdrawal of this product at any time in future with appropriate approval from IRDAI, as We reserve Our right to do so with a intimation of 3 months to all the existing insured Persons. In such an event of withdrawal of this product, at the time of Your seeking extension of this Policy, You can choose, among Our available similar and closely similar Travel insurance products. Upon Your so choosing Our new product, You will be charged the Premium as per Our Underwriting Policy for such chosen new product, as approved by IRDAI.

Provided however, if You do not respond to Our intimation regarding the withdrawal of the product under which this Policy is issued, then this Policy shall be withdrawn and shall not be available to You for any extension and accordingly upon Your seeking extension of this Policy, You shall have to take a Policy under available new products of Us subject to Your paying the Premium as per Our Underwriting Policy for such available new product chosen by You.

16. Migration of policy:

- The insured can opt for migration of policy to our other similar or closely similar products at the time of renewal.
- The premium will be charged as per Our Underwriting Policy for such chosen new product, and all the guidelines, terms and condition of the chosen product shall be applicable.
- Suitable credit of continuity/waiting periods for all the previous policy years would be extended in the new policy, provided the policy has been maintained without a break.

17. Transfer of Interest-

This Policy of Insurance is a Contract between the Company and the Insured Person. The Insured Person) shall not transfer, assign, alienate or in any way pass the benefits and/or liabilities to any other person, Institution, Hospital, Company or Body Corporate without specific prior approval in writing by a duly authorized officer of the Company. However, if the Insured Person(s) is permanently incapacitated or deceased, the legal heirs of Insured Person may represent him in respect of claim under the Policy.

18. Penal Interest Clause-

1. You agree that We need only make payment when You or someone claiming on Your behalf has provided Us with necessary documentation and information. We will make payment to You or Your Nominee. If there is no Nominee and You are incapacitated or deceased, We will pay Your heir, executor or validly appointed legal representative and any payment We make in this way will be a complete and final discharge of Our liability to make payment.
2. On receipt of all the documents and on being satisfied with regard to the admissibility of the claim as per policy terms and conditions, we shall offer within a period of 30 days a settlement of the claim to You. Upon acceptance of an offer of settlement by You, the payment of the amount due shall be made within 7 days from the date of acceptance of the offer by You. In the cases of delay in the payment, we shall be liable to pay interest at a rate which is 2% above the bank rate prevalent at the beginning of the financial year in which the claim is reviewed by it.
3. If we, for any reasons decide to reject the claim under the policy, the reasons regarding the rejection shall be communicated to You in writing within 30 days of the receipt of complete set of documents. You may take recourse to the Grievance Redressal procedure stated in the Policy.

19. Arbitration and courts jurisdiction –

- a. If any dispute or difference shall arise as to the quantum of claim to be paid under this Policy (liability/claim being otherwise admitted by the Insurers), such difference shall independently of all other question be referred to the decision of a sole arbitrator to be appointed in writing by the Insurers and the Insured/Insured Member(s) who has made claim under this Policy or if they cannot agree upon a single arbitrator within 30 days of any party [the Insurers or the and the Insured/Insured Member(s) who has made claim under this Policy] invoking arbitration, the same shall be referred to a panel of three arbitrators, comprising of two arbitrators one to be appointed by the Insured/Family Member(s) who has made claim under this Policy, as the case may be and the Insurer, respectively, who are the parties to the dispute/ difference and the third arbitrator to be appointed by such two appointed arbitrators and arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996 as amended from time to time. The law of the arbitration will be Indian law, and the seat of arbitration and venue for all hearings shall be within India.
- b. It is clearly agreed and understood that no difference or dispute shall be referable to arbitration as

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herein before provided if the Insurers has disputed or not accepted/admitted the liability/claim under the Policy.

- c. It is hereby expressly stipulated and declared that it shall be a condition precedent to any right of action or suit read with this Policy that the award by such arbitrator/ arbitrators of the amount of the Loss or damage shall be first obtained.
- d. It is also hereby further expressly agreed and declared that if the Insurers shall disclaim/repudiate the liability to the Insured for any claim under the Policy, and such claim shall not, within 12 calendar months from the date of such disclaimer/repudiation have been made the subject matter of a suit in a court of law, then all benefits/indemnities under the Policy shall be forfeited and the rights of Insured shall stand extinguished and the liability of the Insurers shall also stand discharged.
- e. The seat of the arbitration shall be Pune. This condition remains valid, should the Policy become void.
- f. In the event that these arbitration provisions shall be held to be invalid then all such disputes or differences shall be referred to the exclusive jurisdiction of the Indian Courts subject to other clauses herein.

SECTION E) GENERAL TERMS AND CLAUSES – OTHER TERMS AND CLAUSES**1. Claims Procedures****(For Medical and Accidental Contingencies)**

If You meet with any Accidental Bodily Injury or suffer an Illness that may result in a claim, then as a condition precedent to our liability, You must comply with the following.

I. Hospitalization

In case of medical sickness/accident You will have to mandatorily call and notify the claim on our 24*7 helpline number - ++91-20- 30305858 or country specific toll free number or write to us at travel@bajajallianz.co.in for us to assist you better. You may also refer our website for our other contactability details, claim procedures. It is important to notify us before seeking any medical consultation (unless it is an accident/emergency). In case of medical hospitalization, please notify us immediately or within 24 hours.

1. We have our coordinating doctor on duty to speak to the Insured Person and provide medical advice. However if the Insured Person wants a medical referral of any specialist doctor/hospital, we can provide the referral.
2. It is important to notify us immediately before/after seeking any kind of medical consultation (unless it is an accident/emergency) and provide us with the treating doctor/hospital details, medical expenses incurred/paid and review appointment details because this will help us to validate Your claim and provide You with a Claim Reference Number which must be mentioned in the Claim Form.
3. The Insurance medical assistance department (doctor) will discuss Your medical condition with the treating doctor and if it is confirmed that the admission to a hospital is NOT due to any pre-existing conditions or any conditions listed in the exclusion list, then the Insurance Company shall guarantee payments to the hospital and settle the payments with the hospital.
4. In order to expedite processing of the claim You must send the following documents listed under relevant section immediately by fax to +91-20-30512207 or scan and email to us at travel@bajajallianz.co.in
5. Your prompt submission of the above documents/information (ROMIF, LMO details, Medical Reports, estimated medical expenses, Claim Form, Passport copy) will enable the medical assistance department to make a medical assessment and recommendation of coverage thereby facilitating the claims process.

II. Outpatient Consultation

1. For outpatient consultation(s), the Insured Person will have to self-pay and file the claim upon return to India. However, if the amount is above USD 500 and the Insured Person is facing difficulty in making payments due to shortage of cash on hand then we may assist and arrange to make payments on behalf of the patient, provided the medical condition is admissible as per terms and conditions of policy.
2. If any hospital does not submit a bill to You for the treatment /service rendered, please inform us before You leave the hospital. If the hospital insists that they will claim directly from the Insurance Company, please inform them that BAJAJ ALLIANZ shall not entertain any such requests from the hospital. Only claims whereby the Insured Person filed directly with all relevant documents on return to India will be considered.
3. You or someone claiming on Your behalf must promptly and in any event within 30 days of discharge from a Hospital give us the documentation (written details of the quantum of any claim along with all original supporting documentation as per the claims documents list specified below.

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4. In the event of the death of the Insured Person, someone claiming on his behalf must inform Us in writing immediately and send Us a copy of the post mortem report (in case its conducted) within 30 days.
5. In event of a claim, the original documents to be submitted & after the completion of the claims assessment process the original documents may be returned if requested by the Insured Person in writing, however we will retain the Xerox copies of the claim documents.
6. If the original documents are submitted with the co-insurer, the Xerox copies attested by the co-insurer should be submitted along with the letter confirming the status of the claim & settlement details if any.
7. In order to expedite processing of the claim You must send the following documents immediately by fax to +91-20-30512207 or scan and email to us at travel@bajajallianz.co.in

III. Claims Procedures (applicable for other sections)

- a. You or someone claiming on Your behalf must promptly notify the claim event immediately and submit the documents within 30 days from date of loss, give us documentation (written details of the quantum of any claim along with all supporting documentation as per the claims documents listed in respective section
- b. Your prompt submission of the required documents/information will enable the claim processing unit for assessment the claim
- c. In order to expedite processing of the claim You must send the following documents immediately by fax to +91-20-30512207 or scan and email to us at travel@bajajallianz.co.in

2. Notifications of Claims-

Condition Precedent shall mean a policy term or condition upon which the Insurers Liability under the policy is conditional upon:

1. In respect of any claim under section 1,2 and 3 , the Insured Person or if deceased, his legal heirs or other legal representative, shall notify the Insurance Company/ Claims Administrator within 14 days from the date of loss and provide him with the name of the Physician, the name and telephone numbers of the hospital at which treatment is being obtained, and the fact or matter giving rise to the need for medical treatment, and any other documentation or information that might be required or requested by the Insurance Company/ Claims Administrator of the Company.
2. You or someone claiming on Your behalf must inform Us in writing immediately within 48 hours of hospitalization in case of emergency hospitalization and 48 hours prior to hospitalization in case of planned hospitalization
3. For intimation of Hospitalization please use our miss call facility by dialing the number mentioned on the Policy Schedule, this will help us to assist You better. You can also write an email to travel@bajajallianz.co.in. Planned hospitalization to be notified at least 7 days in advance before admission and emergency hospitalization within 24 hours or as soon as possible before discharge
4. For all other Claims, the Insured Person shall notify the Insurance Company / Claims administrator of the company, immediately within 7 days from the date of loss, obtain mandatory claim documentation forms for completing the same on and return submit to the Insurance Company / Claims Administrator of the company, along with supporting invoices and any other documentation or information that might be required or requested by Insurance Company/ Claims Administrator of the Company.
5. Under any unavoidable circumstances if delay in communication to register claim or documentation submission may be condoned after valid reason received from Insured Person.
6. The Insured Person shall not admit any liability or make any offer or promise of payment without the prior written consent of the Company.
7. Time for filing claim form and evidence
 - a. Completed claim forms/ Documents and written evidence/ proof of loss, must be submitted to the Company or Claims Administrator of the Company within thirty (30) days from the date of such loss.
 - b. You or some else claiming on Your behalf shall obtain and furnish Us or Claims Administrator of the Company with all original bills, receipts, and any other documentation upon which a claim is based, at Your cost and shall also give Us or Claims Administrator of the Company in a timely fashion such additional documentation, information and assistance we may require for adjudication of the claim.
 - c. In absence of the requisite documents and/or revert from You within 60 days from date of intimation / loss, we would assume that You are not interested in pursuing the claim and accordingly we would be constrained to close the claim.

PART I- Common Claim Documents Required for all claims

1	Claim Form (to be filled and signed by Insured Person)	
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2	NEFT form and Cancelled cheque stating Insured Person's (nominee in case of death claim) Claimant Indian Bank account details	You can contact us on our toll free numbers, or email us at travel@bajajallianz.co.in to obtain a Claim procedure and related documents.
3	Aadhaar card & PAN card Copies is as per the IRDAI guidelines read with	
4	Receipts of Invoices and Bills provided in support of Claim amount	
5	Passport and Visa copy with Entry Stamp Overseas and exit Stamp from India	
6	Release of Medical Information Form (ROMIF) BAJAJ and Assistance Provider (to be filled and signed by Insured) to obtain the medical records from facility in case of claim in II. Medical Contingencies	

PART II- Section wise required Claim Documents

SECTION	COVER	Required Claim document in addition to Part I
Accidental Contingencies		
Section 1	Personal Accident Cover	1. Copy of FIR (filed with the local police authorities) 2. Medical records/Consultation Papers/Investigation Reports in case any hospitalization. 3. Death certificate/Post Mortem report in case its conducted (In case of Death) 4. Certificate from Civil surgeon certifying the extent and percentage of disability (For Disability related claims) 5. Local Medical Offer's (Family Physician's) details.
Extension 1 (Extension applicable to Section 1)	Lifestyle Modification Benefit	
Extension 2 (Extension applicable to Section 1)	Children Education Benefit	
Section 2	Accidental Death & Disability- Common Carrier (AD&D)	
Section 3	Personal Accident Cover In India	
Section 4	Disability Benefit Cover	
Medical Contingencies		
Section 5	Sickness Medical Exigencies	1. Attending Physician Statement (to be filled and signed by overseas treating doctor) 2. Medical records/Consultation Papers/Investigation Reports 3. Deductible amount as per Policy Schedule to be issued with DD/Cheque in favor of Bajaj Allianz General Insurance Company Ltd (in case of complete cashless subject to confirmation of admissibility from “Us”. In case inability to provide deductible amount from Insured Person same can be deducted from Your cashless bill.
Section 6	Accidental Medical Exigencies	
Extension 3 (Extension applicable to Section 5/6)	Pre- Existing Illness and Injury Cover	
Extension 4 (Extension applicable to Section 5/6)	Waiver of Sub-limits	
Extension 5 (Extension applicable to Section 1/6)	Sporting Activities Cover	
Section 7	Emergency Dental Pain Relief	
Section 8	Hospitalization Daily Allowance*	
Section 9	Compassionate Visit	
Section 10	Compassionate Stay	
Section 11	Return of Minor Children	
Section 12	Replacement And Rearrangement Of Staff	
Trip Contingencies		

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Section 13	Trip and Event Cancellation	<ol style="list-style-type: none"> 1. Hospitalization discharge summary/consultation papers of Insured Person/ spouse/ child/ parent/ parent in law if applicable. 2. Death Certificate in case of cancellation of trip due to death 3. All bills and payment receipts towards transportation and lodging and event tickets (incurred overseas) if applicable 4. Certificates from overseas billers regarding cancellation charges if applicable. 5. Letter from the airlines stating reason for cancellation (if applicable)
Section 14	Trip Interruption	<ol style="list-style-type: none"> 1. Hospitalization discharge summary/consultation papers of Insured Person if applicable. 2. Both ticket itineraries (Old and new) 3. Medical document and discharge summary stating hospitalization details and need for pre or postponement of Trip.
Section 15	Missed Connection	Letter from the airlines stating reason and duration of delay.
Section 16	Trip Extension	<ol style="list-style-type: none"> 1. Attending Physician Statement (to be filled and signed by overseas treating doctor) 2. Medical records/Consultation Papers/Investigation Reports 3. Letter from the airline clearly stating reason of delay/ travel prohibition and media coverage details.(e.g photograph, videos, newspaper cutting etc)
Section 17	Ticket Overbooking	Letter from the airlines stating confirmation and reason of Ticket Overbooking.
Section 18	Loss Of Checked Baggage	<ol style="list-style-type: none"> 1. PIR report (Property Irregularity Report) (to be obtained from the airline authorities) 2. Letter from the airlines accepting the liability for loss 3. Proof of compensation received form airlines
Section 19	Delay Of Checked Baggage	<ol style="list-style-type: none"> 1. Copies of Boarding Pass/Ticket/Baggage Tags 2. Copies of correspondence with the Airline authorities/others certifying the delay & actual date and time of delivery of baggage. 3. PIR report (Property Irregularity Report) (to be obtained from the airline authorities). 4. Emergency purchase bills/ receipts
Miscellaneous Contingencies		
Section 20	Loss Of Personal Belonging	<ol style="list-style-type: none"> 1. Original bills and receipt towards purchase of the item 2. Covering Letter detailing full statement of the facts of the incident
Section 21	Personal Liability	<ol style="list-style-type: none"> 1. Detailed self-explanatory note stating scenario arises in to third party loss 2. Court order or any judicial order received against the compensation
Section 22	Loss Of Passport and Driving Licence	<ol style="list-style-type: none"> 1. FIR/ copy of police report obtained within 24 hours of becoming aware of theft. 2. Copy of new passport, copy of previous passport (if available)

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		3. Written statement narrating the incident of loss i.e. type of loss, causes, circumstances and the place
Section 23	Car Hire Excess Insurance	1. Copy of car rental agreement 2. A police report/ FIR confirming the incident. 3. Copy of Internationally recognized license
Section 24	Alternative Transport Expenses	1. Copies of Boarding Pass/Ticket/Baggage Tags 2. Copies of correspondence with the Airline authorities/others certifying the delay/cancellation/diversion/shortening of trip & actual date and time of arrival. 3. Purchase bills/ receipts of alternate transport tickets
Section 25	Legal Expenses	1. Written statement narrating the incident of loss i.e. type of loss, causes, circumstances and the place 2. documentation and evidence to support Your claim, including photographic evidence
Section 26	Pre Booked Meal Cover	Letter from the airlines stating confirmation and reason of non-availability of Pre-booked meal.
Section 27	Weather Guarantee	1. Written statement narrating the incident of loss i.e. type of loss, causes, circumstances and the place 2. Local news, weather report, associated news references in support of the claim
Section 28	Golfer's Hole-In-One	Letter from USGA supporting Your claim
Section 29	Bounced Hotel	Letter from the Hotel Authority stating confirmation and reason of non-availability of Pre-booked Room.
Section 30	Hijack Cover	A police report confirming the incident. It should contain the passport number of the insured and period of hijacking. Letter from the airline clearly stating period of hijack and media coverage details.(e.g photograph, videos, newspaper cutting etc)
Section 31	Emergency Cash Assistance Service	1. FIR/ copy of police report obtained within 24 hours of becoming aware of theft. 2. Written statement narrating the incident of loss i.e. type of loss, causes, circumstances and the place
Domestic Contingencies		
Section 32	Extended Pet Stay	1. receipts for fees paid to Pet house 2. Letter from the airlines stating reason and duration of delay 3. Medical records in case of Insured's hospitalization
Section 33	Home Burglary and Robbery Insurance	1. FIR/ copy of police report obtained within 24 hours of becoming aware of burglary/theft/Robbery. 2. Written statement narrating the incident of loss i.e. type of loss, causes, circumstances and the place. 3. Receipt of Purchase of items claimed under this benefit
Section 34	Standard Fire And Special Perils Cover	1. FIR/ copy of police report obtained within 24 hours of becoming aware of Fire. 2. Written statement narrating the incident of loss i.e. type of loss, causes, circumstances and the place

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		3. Receipt of Purchase of items claimed under this benefit
Additional Covers for Student Plan only		
Section 35	Cancer Screening and Mammography Cover	1. Attending Physician Statement (to be filled and signed by overseas treating doctor) stating need for Cancer Screening and Mammography 2. Medical records/Consultation Papers/Investigation Reports
Section 36	Alcohol and Substance Abuse	Documents required as mentioned in Section Medical Exigencies
Section 37	Maternity and Baby Cover	
Section 38	Bail Bond Insurance	1. Written statement narrating the incident of loss i.e. type of loss, causes, circumstances and the place 2. Police report
Section 39	Tuition Fees	1. Attending Physician Statement (to be filled and signed by overseas treating doctor) 2. Medical records/Consultation Papers/Investigation Reports 3. Total tuition fee, outstanding tuition fee letter from university and paid tuition fee receipts
Section 40	Contingency To Sponsor	Documents required as mentioned in Section 1 Personal Accident
VII. All Risk Covers		
Section 41	Trip Delay Delight	1. Letter from the airlines stating reason and duration of delay 2. Aadhar card & PAN card Copies is as per the IRDAI guidelines read with Passport and Visa copy with Entry Stamp Overseas and exit Stamp from India in case of "Flight Delay for International Travel"
Section 42	All Risk Trip And Event Cancellation	1. - 2. Self explanatory note confirming the reason for cancellation 3. Certificates/Invoices from overseas billers / airlines regarding cancellation charges if applicable. 4. Letter from the airlines stating reason for cancellation (if applicable)

3. Paying a Claim-

1. You agree that We shall only make payment when You or someone claiming on Your behalf has provided Us with necessary documentation and information.
2. We will make payment to You or Your Nominee. If there is no Nominee and You are incapacitated or deceased, We will pay Your heir, executor or validly appointed legal representative and any payment thus made, will be deemed as complete and final discharge of Our liability under the Policy.
3. On receipt of all the documents and on being satisfied with regard to the admissibility of the claim as per policy terms and conditions, we shall offer within a period of 30 days a settlement of the claim to the Insured Person. Upon acceptance of an offer of settlement by the Insured Person, the payment of the amount due shall be made within 7 days from the date of acceptance of the offer. In the cases of delay in the payment, the insurer shall be liable to pay interest at a rate which is 2% above the bank rate prevalent at the beginning of the financial year in which the claim is reviewed by it.
4. However, where the circumstances of a claim warrant an investigation, We shall initiate and complete such investigation at the earliest, in any case not later than 30 days from the date of receipt of last necessary document. In such cases, We shall settle the claim within 45 days from the date of receipt of last necessary document.
5. If the insurer, for any reasons decides to reject the claim under the policy the reasons regarding the rejection shall be communicated to the Insured Person in writing within 30 days of the receipt of documents. The Insured Person may take recourse to the Grievance Redressal procedure stated under condition no 30.

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4. Basis of Claims Payment-

1. Reimbursement of all claims will be made on the basis of first date of consultation/ hospitalisation, mentioned on consultation paper/medical records
2. Cashless will be paid to overseas facility in the prevalent currency of the said country on the date of payment & incase of payment through TMA partners on the date of invoice raised to us
3. For the purpose of reimbursement claim payments all currencies shall be converted in to USD (as policy Sum Insured are in USD) and later to INR (as reimbursement payment will be in INR only)

5. Assessments of Claim & Payment-

- i. No sum payable under this policy shall carry interest.
 - ii. We shall be under no liability to make payment in respect of any Claim until such time as the Insured Person has provided it and/or the Insurance Company / Claims Administrator with whatever documentation and/or information may be requested and established the quantum of any amount claimed to the Company's satisfaction.
 - iii. The obligation of the Company to make payments to the Insured Person in respect of Claims made after the Insured Person return to India shall be to make payment in Indian Rupees only.
 - iv. **Specifically in respect of a Claim under Sections 1 and/or 2 and/ or 3-**
 1. The Company's liability to make payment is in respect of those charges approved by the Insurance Company / Claims Administrator prior to being incurred.
 2. If requested by the Insurance Company / Claims Administrator, the Insured Person shall (at his own expense) furnish all certificates, information, proofs or other evidence in support of the Claim, present himself for medical examination by a Medical Advisor as considered necessary by the Insurance Company / Claims Administrator, and the Insured Person agrees that the Insurance Company / Claims Administrator may approach him/her for information and/or documentation in respect of the Claim.
 3. In the event of the Insured Person's death, the Company shall have the right to carry out a post mortem at its own expense.
 4. Where the Insured Person is incapacitated or otherwise unable to give a valid release for the Claim; the Company may make arrangements to pay the Claim to the Insured Person's legal guardian or legal representative. Any payment made by the Company thereby in good faith shall operate as a complete and effective discharge of the Company's liability in respect of the Claim.
 5. The Company shall not pay Medical Expenses except at the Usual and Customary Level.
 6. Reimbursement of all claims will be made on the basis of date of service, mentioned on the bill as per foreign exchange rate specified by Reserve Bank of India.
- 6. Claim Assistance-** In event of a claim during the Insured Person's overseas trip, the Insured Person shall contact on our toll free numbers or email ids available on Travel Kit or Policy Schedule. We provide assistance through our In house Team or may seek assistance from overseas assistance partners.

Annexure I
List of Day Care Procedures:

Sr No	Organ	Name of the Surgical Procedure
1	Eye	Incision of tear glands
2		Other operations on the tear ducts
3		Incision of diseased eyelids
4		Correction of Eyelid Ptosis by LevatorPalpebraeSuperioris Resection (bilateral)
5		Correction of Eyelid Ptosis by Fascia Lata Graft (bilateral)
6		Excision and destruction of diseased tissue of the eyelid
7		Operations on the canthus and epicanthus
8		Corrective surgery for entropion and ectropion
9		Corrective surgery for blepharoptosis
10		Removal of a foreign body from the conjunctiva

TRAVEL ACE (INTERNATIONAL)

11		Removal of a foreign body from the cornea
12		Incision of the cornea
13		Other operations on the cornea
14		Removal of a foreign body from the lens of the eye
15		Removal of a foreign body from the posterior chamber of the eye
16		Removal of a foreign body from the orbit and eyeball
17		Operation of cataract
18		Diathermy/Cryotherapy to treat retinal tear
19		Anterior chamber Paracentesis/Cyclodiathermy/Cyclocryotherapy/Goniotomy/Trabeculotomy and Filtering and Allied Operations to treat glaucoma
20		Enucleation of Eye without Implant
21		Dacryocystorhinostomy for various lesions of Lacrimal Gland 46
22		Laser Photocoagulation to treat Retinal Tear
23		Stapedotomy to treat various lesions in middle ear
24		Revision of a stapedectomy
25		Other operations on the auditory ossicles
26		Myringoplasty (post-aura/endaural approach as well as simple Type –I Tympanoplasty)
27		Tympanoplasty (closure of an eardrum perforation/reconstruction of the auditory ossicles)
28		Revision of a tympanoplasty
29		Other microsurgical operations on the middle ear
30		Myringotomy
31		Removal of a tympanic drain
32		Incision of the mastoid process and middle ear
33		Mastoidectomy
34		Reconstruction of the middle ear
35		Other excisions of the middle and inner ear
36		Fenestration of the inner ear
37		Revision of a fenestration of the inner ear
38		Incision (opening) and destruction (elimination) of the inner ear
39		Other operations on the middle and inner ear
40		Removal of Keratosis Obturans
41		Excision and destruction of diseased tissue of the nose
42		Operations on the turbinates (nasal concha)
43		Other operations on the nose
44		Nasal sinus aspiration Foreign body removal from nose
45		Incision and lancing of a salivary gland and a salivary duct
46		Excision of diseased tissue of a salivary gland and a salivary duct
47		Resection of a salivary gland
48		Reconstruction of a salivary gland and a salivary duct
49		Other operations on the salivary glands and salivary ducts
50		External incision and drainage in the region of the mouth, jaw and face
51		Incision of the hard and soft palate
52		Excision and destruction of diseased hard and soft palate
53		Incision, excision and destruction in the mouth

TRAVEL ACE (INTERNATIONAL)

54		Palatoplasty
55		Other operations in the mouth
56	Skin and Subcutaneous tissue	Incision of a pilonidal sinus
57		Other incisions of the skin and subcutaneous tissues
58		Surgical wound toilet (wound debridement) and removal of diseased tissue of the skin and subcutaneous tissues
59		Local excision of diseased tissue of the skin and subcutaneous tissues
60		Other excisions of the skin and subcutaneous tissues
61		Simple restoration of surface continuity of the skin and subcutaneous tissues
62		Free skin transplantation, donor site
63		Free skin transplantation, recipient site
64		Revision of skin plasty
65		Other restoration and reconstruction of the skin and subcutaneous tissues
66		Chemosurgery to the skin
67		Destruction of diseased tissue in the skin and subcutaneous tissues
68		Reconstruction of Deformity/Defect in Nail Bed
69		Operations on the tongue
70		Incision, excision and destruction of diseased tissue of the tongue
71		Partial glossectomy
72		Glossectomy
73		Reconstruction of the tongue
74		Other operations on the tongue
75	Tonsils & Adenoids	Transoral incision and drainage of a pharyngeal abscess
76		Tonsillectomy without adenoidectomy
77		Tonsillectomy with adenoidectomy
78		Excision and destruction of a lingual tonsil
79		Other operations on the tonsils and adenoids
80		Trauma surgery and orthopaedics
81		Incision on bone, septic and aseptic
82		Closed reduction on fracture, luxation or epiphyseolysis with osteosynthesis
83		Suture and other operations on tendons and tendon sheath
84		Reduction of dislocation under GA
85	Breast	Arthroscopic knee aspiration
86		Adenoidectomy
87	Breast	Incision of the breast abscess
88		Operations on the nipple
89		Excision of single breast lump
90	Digestive tract, Kidney and Bladder	Operations on the digestive tract, Kidney and Bladder
91		Incision and excision of tissue in the perianal region
92		Surgical treatment of anal fistulas
93		Surgical treatment of hemorrhoids
94		Division of the anal sphincter (sphincterotomy)
95		Other operations on the anus
96		Ultrasound guided aspirations

TRAVEL ACE (INTERNATIONAL)

97		Sclerotherapy, etc
98		Laparotomy for grading Lymphoma with Splenectomy/Liver/Lymph Node Biopsy
99		Therapeutic Laparoscopy with Laser
100		Cholecystectomy and Choledcho-Jejunostomy /Duodenostomy/Gastrostomy/Exploration Common Bile Duct
101		Esophagoscopy, gastroscopy, duodenoscopy with polypectomy/removal of foreign body/diathermy of bleeding lesions
102		Lithotripsy/Nephrolithotomy for renal calculus
103		Excision of renal cyst
104		Drainage of Pyonephrosis/Perinephric Abscess
105		Appendicectomy with/without Drainage
106	Female reproductive organs	Incision of the ovary
107		Insufflations of the Fallopian tubes
108		Other operations on the Fallopian tube
109		Dilatation of the cervical canal
110		Conisation of the uterine cervix
111		Therapeutic curettage with Colposcopy/Biopsy/Diathermy/Cryosurgery
112		Laser Therapy of Cervix for Various lesions of Uterus
113		Other operations on the uterine cervix
114		Incision of the uterus (hysterectomy)
115		Local excision and destruction of diseased tissue of the vagina and the pouch of Douglas
116		Incision of vagina
117		Incision of vulva
118		Culdotomy
119		Operations on Bartholin's glands (cyst)
120		Salpingo-Oophorectomy via Laparotomy
121	Prostate & Seminal vesicles	Incision of the prostate
122		Transurethral excision and destruction of prostate tissue
123		Transurethral and percutaneous destruction of prostate tissue
124		Open surgical excision and destruction of prostate tissue
125		Radical prostatovesiculectomy
126		Other excision and destruction of prostate tissue
127		Operations on the seminal vesicles
128		Incision and excision of periprostatic tissue
129		Other operations on the prostate
130	scrotum and testes	Incision of the scrotum and tunica vaginalis testes
131		Operation on a testicular hydrocele
132		Excision and destruction of diseased scrotal tissue
133		Other operations on the scrotum and tunica vaginalis testes
134		Incision of the testes
135		Excision and destruction of diseased tissue of the testes
136		Unilateral orchidectomy
137		Bilateral orchidectomy
138		Orchidopexy
139		Abdominal exploration in cryptorchidism

TRAVEL ACE (INTERNATIONAL)

140		Surgical repositioning of an abdominal testis
141		Reconstruction of the testis
142		Implantation, exchange and removal of a testicular prosthesis
143		Other operations on the testis
144	Spermatic cord, Epididymis	Surgical treatment of a varicocele and a hydrocele of the spermatic cord
145		Excision in the area of the epididymis
146		Epididymectomy
147	Male sexual organs	Operations on the foreskin
148		Local excision and destruction of diseased tissue of the penis
149		Amputation of the penis
150		Other operations on the penis
151	Urinary System	Cystoscopical removal of stones
152		Catheterisation of Bladder
153	Bones and Joints	Surgery for ligament tear
154		Surgery for meniscus tear
155		Surgery for hemoarthrosis/pyoarthrosis
156		Removal of fracture pins/nails
157		Removal of metal wire
158		Closed reduction on fracture, luxation
159		Reduction of dislocation under GA
160		Epiphyseolysis with osteosynthesis
161		Excision of Bursitis
162		Tennis Elbow Release
163		Excision of Various Lesions in Coccyx
164	Others	Lithotripsy
165		Coronary angiography
166		Biopsy of Temporal Artery for Various Lesions
167		External Arterio-venous Shunt
168		Haemodialysis
169		Radiotherapy for Cancer
170		Cancer Chemotherapy
171		Endoscopic polypectomy

Annexure II

S. NO	List of Expenses ("Non-Medical") in Hospital Indemnity Policy -	REMARKS
	TOILETRIES/COSMETICS/ PERSONAL COMFORT OR CONVENIENCE ITEMS	
1	HAIR REMOVAL CREAM	Not Payable
2	BABY CHARGES (UNLESS SPECIFIED/INDICATED)	Not Payable
3	BABY FOOD	Not Payable
4	BABY UTILITES CHARGES	Not Payable
5	BABY SET	Not Payable

TRAVEL ACE (INTERNATIONAL)

6	BABY BOTTLES	Not Payable
7	BRUSH	Not Payable
8	COSY TOWEL	Not Payable
9	HAND WASH	Not Payable
10	MOISTURISER PASTE BRUSH	Not Payable
11	POWDER	Not Payable
12	RAZOR	Payable
13	SHOE COVER	Not Payable
14	BEAUTY SERVICES	Not Payable
15	BELTS/ BRACES	Payable for surgery of thoracic or lumbar spine
16	BUDS	Not Payable
17	BARBER CHARGES	Not Payable
18	CAPS	Not Payable
19	COLD PACK/HOT PACK	Not Payable
20	CARRY BAGS	Not Payable
21	CRADLE CHARGES	Not Payable
22	COMB	Not Payable
23	DISPOSABLES RAZORS CHARGES (for site preparations)	Payable
24	EAU-DE-COLOGNE / ROOM FRESHNERS	Not Payable
25	EYE PAD	Not Payable
26	EYE SHEILD	Not Payable
27	EMAIL / INTERNET CHARGES	Not Payable
28	FOOD CHARGES (OTHER THAN PATIENT'S DIET PROVIDED BY HOSPITAL)	Not Payable
29	FOOT COVER	Not Payable
30	GOWN	Not Payable
31	LEGGINGS	Payable for varicose vein surgery if varicose vein surgery is payable.
32	LAUNDRY CHARGES	Not Payable
33	MINERAL WATER	Not Payable
34	OIL CHARGES	Not Payable
35	SANITARY PAD	Not Payable
36	SLIPPERS	Not Payable
37	TELEPHONE CHARGES	Not Payable
38	TISSUE PAPER	Not Payable
39	TOOTH PASTE	Not Payable
40	TOOTH BRUSH	Not Payable
41	GUEST SERVICES	Not Payable
42	BED PAN	Not Payable
43	BED UNDER PAD CHARGES	Not Payable
44	CAMERA COVER	Not Payable
45	CLINIPLAST	Not Payable
46	CREPE BANDAGE	Not Payable/ Payable by the patient
47	CURAPORE	Not Payable
48	DIAPER OF ANY TYPE	Not Payable
49	DVD, CD CHARGES	Not Payable (However if CD is specifically sought by us then payable)

TRAVEL ACE (INTERNATIONAL)

50	EYELET COLLAR	Not Payable
51	FACE MASK	Not Payable
52	FLEXI MASK	Not Payable
53	GAUSE SOFT	Not Payable
54	GAUZE	Not Payable
55	HAND HOLDER	Not Payable
56	HANSAPLAST/ADHESIVE BANDAGES	Not Payable
57	INFANT FOOD	Not Payable
58	SLINGS	Reasonable costs for one sling in case of upper arm fractures payable
	ITEMS SPECIFICALLY EXCLUDED IN THE POLICIES	
59	WEIGHT CONTROL PROGRAMS/ SUPPLIES/ SERVICES	Not Payable
60	COST OF SPECTACLES/ CONTACT LENSES/ HEARING AIDS ETC.,	Not Payable
61	DENTAL TREATMENT EXPENSES THAT DO NOT REQUIRE HOSPITALISATION	Not Payable
62	HORMONE REPLACEMENT THERAPY	Not Payable
63	HOME VISIT CHARGES	Not Payable
64	INFERTILITY/ SUBFERTILITY/ ASSISTED CONCEPTION PROCEDURE	Not Payable
65	OBESITY (INCLUDING MORBID OBESITY) TREATMENT IF EXCLUDED IN POLICY	Not Payable
66	PSYCHIATRIC & PSYCHOSOMATIC DISORDERS	Not Payable
67	CORRECTIVE SURGERY FOR REFRACTIVE ERROR	Payable after waiting period
68	TREATMENT OF SEXUALLY TRANSMITTED DISEASES	Payable
69	DONOR SCREENING CHARGES	Not Payable
70	ADMISSION/REGISTRATION CHARGES	Not Payable
71	HOSPITALISATION FOR EVALUATION/ DIAGNOSTIC PURPOSE	Not Payable
72	EXPENSES FOR INVESTIGATION/ TREATMENT IRRELEVANT TO THE DISEASE FOR WHICH ADMITTED OR DIAGNOSED	Not Payable
73	ANY EXPENSES WHEN THE PATIENT IS DIAGNOSED WITH RETRO VIRUS + OR SUFFERING FROM /HIV/ AIDS ETC IS DETECTED/ DIRECTLY OR INDIRECTLY	Not payable as per HIV/AIDS exclusion
74	STEM CELL IMPLANTATION/ SURGERY and storage	Not Payable except Bone Marrow Transplantation where covered by policy
	ITEMS WHICH FORM PART OF HOSPITAL SERVICES WHERE SEPARATE CONSUMABLES ARE NOT PAYABLE BUT THE SERVICE IS	
75	WARD AND THEATRE BOOKING CHARGES	Payable under OT Charges, not payable separately
76	ARTHROSCOPY & ENDOSCOPY INSTRUMENTS	Rental charged by the hospital payable. Purchase of Instruments not payable.
77	MICROSCOPE COVER	Payable under OT Charges, not separately
78	SURGICAL BLADES, HARMONIC SCALPEL, SHAVER	Payable under OT Charges, not separately
79	SURGICAL DRILL	Payable under OT Charges, not separately

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80	EYE KIT	Payable under OT Charges ,not separately
81	EYE DRAPE	Payable under OT Charges ,not separately
82	X-RAY FILM	Payable under Radiology Charges, not as consumable
83	SPUTUM CUP	Payable under Investigation Charges, not as consumable
84	BOYLES APPARATUS CHARGES	Part of OT Charges , not separately
85	BLOOD GROUPING AND CROSS MATCHING OF DONORS SAMPLES	Part of Cost of Blood, not payable
86	Antiseptic or disinfectant lotions.	Not Payable -Part of Dressing Charges
87	BAND AIDS, BANDAGES, STERILE INJECTIONS, NEEDLES, SYRINGES	Not Payable - Part of Dressing charges
88	COTTON	Not Payable -Part of Dressing Charges
89	COTTON BANDAGE	Not Payable- Part of Dressing Charges
90	MICROPORE/ SURGICAL TAPE	Not Payable-Payable by the patient when prescribed , otherwise included as Dressing Charges
91	BLADE	Not Payable
92	APRON	Not Payable -P a r t of Hospital Services/ Disposable linen to be part of OT/ICU charges
93	TORNIQUET	Not Payable (service is charged by hospitals, consumables can not be separately charged)
94	ORTHOBUNDLE, GYNAEC BUNDLE	Part of Dressing Charges
95	URINE CONTAINER	Not Payable
	ELEMENTS OF ROOM CHARGE	
96	LUXURY TAX	Actual tax levied by government is payable. Part of room charge for sub limits
97	HVAC	Part of room charge not payable separately
98	HOUSE KEEPING CHARGES	Part of room charge not payable separately
99	SERVICE CHARGES WHERE NURSING CHARGE ALSO CHARGED	Part of room charge not payable separately
100	TELEVISION & AIR CONDITIONER CHARGES	Payable under room charges not if separately levied
101	SURCHARGES	Part of Room Charge , Not payable separately
102	ATTENDANT CHARGES	Not Payable - Part of Room Charges
103	M IV INJECTION CHARGES	Part of nursing charges, not payable
104	CLEAN SHEET	Part of Laundry /Housekeeping not payable separately
105	EXTRA DIET OF PATIENT(OTHER THAN THAT WHICH FORMS PART OF BED CHARGE)	Patient Diet provided by hospital is payable
106	BLANKET/WARMER BLANKET	Not Payable- part of room charges

TRAVEL ACE (INTERNATIONAL)

	ADMINISTRATIVE OR NON-MEDICAL CHARGES	
107	ADMISSION KIT	Not Payable
108	BIRTH CERTIFICATE	Not Payable
109	BLOOD RESERVATION CHARGES AND ANTE NATAL BOOKING CHARGES	Not Payable
110	CERTIFICATE CHARGES	Not Payable
111	COURIER CHARGES	Not Payable
112	CONVENYANCE CHARGES	Not Payable
113	DIABETIC CHART CHARGES	Not Payable
114	DOCUMENTATION CHARGES / ADMINISTRATIVE EXPENSES	Not Payable
115	DISCHARGE PROCEDURE CHARGES	Not Payable
116	DAILY CHART CHARGES	Not Payable
117	ENTRANCEPASS / VISITORS PASS CHARGES	Not Payable
118	EXPENSES RELATED TO PRESCRIPTION ON DISCHARGE	To be claimed by patient under Post Hosp where admissible
119	FILE OPENING CHARGES	Not Payable
120	INCIDENTAL EXPENSES / MISC. CHARGES (NOT EXPLAINED)	Not Payable
121	MEDICAL CERTIFICATE	Not Payable
122	MAINTENANCE CHARGES	Not Payable
123	MEDICAL RECORDS	Not Payable
124	PREPARATION CHARGES	Not Payable
125	PHOTOCOPIES CHARGES	Not Payable
126	PATIENT IDENTIFICATION BAND / NAME TAG	Not Payable
127	WASHING CHARGES	Not Payable
128	MEDICINE BOX	Not Payable
129	MORTUARY CHARGES	Payable upto 24 hrs, shifting charges not payable
130	MEDICO LEGAL CASE CHARGES (MLC CHARGES)	Not Payable
	EXTERNAL DURABLE DEVICES	
131	WALKING AIDS CHARGES	Not Payable
132	BIPAP MACHINE	Not Payable
133	COMMODE	Not Payable
134	CPAP/ CAPD EQUIPMENTS	Device not payable
135	INFUSION PUMP - COST	Device not payable
136	OXYGEN CYLINDER (FOR USAGE OUTSIDE THE HOSPITAL)	Not Payable
137	PULSEOXYMETER CHARGES	Device not payable
138	SPACER	Not Payable
139	SPIROMETRE	Device not payable
140	S P0 2PRO B E	Not Payable
141	NEBULIZER KIT	Not Payable
142	STEAM INHALER	Not Payable
143	ARMSLING	Not Payable
144	THERMOMETER	Not Payable (paid by patient)
145	CERVICAL COLLAR	Not Payable
146	SPLINT	Not Payable
147	DIABETIC FOOT WEAR	Not Payable
148	KNEE BRACES (LONG/ SHORT/ HINGED)	Not Payable
149	KNEE IMMOBILIZER/SHOULDER IMMOBILIZER	Not Payable

TRAVEL ACE (INTERNATIONAL)

150	LUMBOSACRAL BELT	Payable for surgery of lumbar spine.
151	NIMBUS BED OR WATER OR AIR BED CHARGES	Payable for any ICU patient requiring more than 3 days in ICU, all patients with paraplegia /quadriplegia for any reason and at reasonable cost of approximately Rs 200/ day
152	AMBULANCE COLLAR	Not Payable
153	AMBULANCE EQUIPMENT	Not Payable
154	MICROSHEILD	Not Payable
155	ABDOMINAL BINDER	Payable in post surgery patients of major abdominal surgery including TAH, LSCS, incisional hernia repair, exploratory laparotomy for intestinal obstruction, liver transplant etc.
	ITEMS PAYABLE IF SUPPORTED BY A PRESCRIPTION	
156	BETADINE \ HYDROGEN PEROXIDE \ SPIRIT \ DISINFECTANTS ETC	Payable when prescribed for patient, not payable for hospital use in OT or ward or for dressings in hospital
157	PRIVATE NURSES CHARGES- SPECIAL NURSING CHARGES	Post hospitalization nursing charges not Payable
158	NUTRITION PLANNING CHARGES - DIETICIAN CHARGES- DIET CHARGES	Patient Diet provided by hospital is payable
159	SUGAR FREE Tablets	Payable - Sugar free variants of admissible medicines are not excluded
160	CREAMS POWDERS LOTIONS (Toiletries are not payable only prescribed medical pharmaceuticals payable)	Payable when prescribed
161	Digestion gels	Payable when prescribed
162	ECG ELECTRODES	Upto 5 electrodes are required for every case visiting OT or ICU. For longer stay in ICU, may require a change and at least one set every second day must be payable.
163	GLOVES	Sterilized Gloves payable / unsterilized gloves not payable
164	HIV KIT	Payable - payable Pre operative screening
165	LISTERINE/ ANTISEPTIC MOUTHWASH	Payable when prescribed
166	LOZENGES	Payable when prescribed
167	MOUTH PAINT	Payable when prescribed
168	NEBULISATION KIT	If used during hospitalization is payable reasonably
169	NOVARAPID	Payable when prescribed
170	VOLINI GEL/ ANALGESIC GEL	Payable when prescribed
171	ZYTEE GEL	Payable when prescribed
172	VACCINATION CHARGES	Routine Vaccination not Payable / Post Bite Vaccination Payable
	PART OF HOSPITAL'S OWN COSTS AND NOT PAYABLE	
173	AHD	Not Payable - Part of Hospital's internal Cost
174	ALCOHOL SWABES	Not Payable - Part of Hospital's internal Cost

TRAVEL ACE (INTERNATIONAL)

175	SCRUB SOLUTION/STERILLIUM	Not Payable - Part of Hospital's internal Cost
	OTHERS	
176	VACCINE CHARGES FOR BABY	Not Payable
177	AESTHETIC TREATMENT / SURGERY	Not Payable
178	TPA CHARGES	Not Payable
179	VISCO BELT CHARGES	Not Payable
180	ANY KIT WITH NO DETAILS MENTIONED [DELIVERY KIT, ORTHOKIT, RECOVERY KIT, ETC]	Not Payable
181	EXAMINATION GLOVES	Not Payable
182	KIDNEY TRAY	Not Payable
183	MASK	Not Payable
184	OUNCE GLASS	Not Payable
185	OUTSTATION CONSULTANT'S/ SURGEON'S FEES	Not payable, except for telemedicine consultations where covered by policy
186	OXYGEN MASK	Not Payable
187	PAPER GLOVES	Not Payable
188	PELVIC TRACTION BELT	Payable in case of PIVD
189	REFERAL DOCTOR'S FEES	Not Payable
190	ACCU CHECK (Glucometry/ Strips)	Not payable pre hospitalisation or post hospitalisation / Reports and Charts required / Device not payable
191	PAN CAN	Not Payable
192	SOFNET	Not Payable
193	TROLLY COVER	Not Payable
194	UROMETER, URINE JUG	Not Payable
195	AMBULANCE	Payable-Ambulance from home to hospital or inter hospital shifts is payable/ RTA as specific requirement is payable
196	TEGADERM / VASOFIX SAFETY	Payable - maximum of 3 in 48 hrs and then 1 in 24 hrs
197	URINE BAG	Payable where medically necessary till a reasonable cost - maximum 1 per 24hrs
198	SOFTOVAC	Not Payable
199	STOCKINGS	Payable for case like CABG etc.

ANNEXURE III: OMBUDSMEN DETAILS

TRAVEL ACE (INTERNATIONAL)

Office Details	Jurisdiction of Office Union Territory, District)
AHMEDABAD - Shri Kuldip Singh Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor, Tilak Marg, Relief Road, Ahmedabad – 380 001. Tel.: 079 - 25501201/02/05/06 Email: bimalokpal.ahmedabad@cioins.co.in	Gujarat, Dadra & Nagar Haveli, Daman and Diu.
BENGALURU - Smt. Neerja Shah Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No. 57-27-N-19 Ground Floor, 19/19, 24th Main Road, JP Nagar, 1st Phase, Bengaluru – 560 078. Tel.: 080 - 26652048 / 26652049 Email: bimalokpal.bengaluru@cioins.co.in	Karnataka.
BHOPAL - Shri Guru Saran Shrivastava Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp. Airtel Office, Near New Market, Bhopal – 462 003. Tel.: 0755 - 2769201 / 2769202 Fax: 0755 - 2769203 Email: bimalokpal.bhopal@cioins.co.in	Madhya Pradesh Chattisgarh.
BHUBANESHWAR - Shri Suresh Chandra Panda Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar – 751 009. Tel.: 0674 - 2596461 /2596455 Fax: 0674 - 2596429 Email: bimalokpal.bhubaneswar@cioins.co.in	Orissa.
CHANDIGARH - Dr. Dinesh Kumar Verma Office of the Insurance Ombudsman, S.C.O. No. 101, 102 & 103, 2nd Floor, Batra Building, Sector 17 – D, Chandigarh – 160 017. Tel.: 0172 - 2706196 / 2706468 Fax: 0172 - 2708274 Email: bimalokpal.chandigarh@cioins.co.in	Punjab, Haryana(excluding Gurugram, Faridabad, Sonapat and Bahadurgarh) Himachal Pradesh, Union Territories of Jammu & Kashmir, Ladakh & Chandigarh.
CHENNAI - Shri M. Vasantha Krishna Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018. Tel.: 044 - 24333668 / 24335284 Fax: 044 - 24333664 Email: bimalokpal.chennai@cioins.co.in	Tamil Nadu, Tamil Nadu PuducherryTown and Karaikal (which are part of Puducherry).
DELHI - Shri Sudhir Krishna Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel.: 011 - 23232481/23213504 Email: bimalokpal.delhi@cioins.co.in	Delhi & Following Districts of Haryana - Gurugram, Faridabad, Sonapat & Bahadurgarh.

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<p>GUWAHATI - Shri Kiriti .B. Saha Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati – 781001(ASSAM). Tel.: 0361 - 2632204 / 2602205 Email: bimalokpal.guwahati@cioins.co.in</p>	<p>Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.</p>
<p>HYDERABAD - Shri I. Suresh Babu Office of the Insurance Ombudsman, 6-2-46, 1st floor, "Moin Court", Lane Opp. Saleem Function Palace, A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004. Tel.: 040 - 23312122 Fax: 040 - 23376599 Email: bimalokpal.hyderabad@cioins.co.in</p>	<p>Andhra Pradesh, Telangana, Yanam and part of Union Territory of Puducherry.</p>
<p>JAIPUR - Smt. Sandhya Baliga Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141 - 2740363 Email: bimalokpal.jaipur@cioins.co.in</p>	<p>Rajasthan.</p>
<p>ERNAKULAM - Ms. Poonam Bodra Office of the Insurance Ombudsman, 2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard, M. G. Road, Ernakulam - 682 015. Tel.: 0484 - 2358759 / 2359338 Fax: 0484 - 2359336 Email: bimalokpal.ernakulam@cioins.co.in</p>	<p>Kerala, Lakshadweep, Mahe-a part of Union Territory of Puducherry.</p>
<p>KOLKATA - Shri P. K. Rath Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 / 22124340 Fax : 033 - 22124341 Email: bimalokpal.kolkata@cioins.co.in</p>	<p>West Bengal, Sikkim, Andaman & Nicobar Islands.</p>
<p>LUCKNOW -Shri Justice Anil Kumar Srivastava Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, Lucknow - 226 001. Tel.: 0522 - 2231330 / 2231331 Fax: 0522 - 2231310 Email: bimalokpal.lucknow@cioins.co.in</p>	<p>Districts of Uttar Pradesh : Lalitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar.</p>
<p>MUMBAI - Shri Milind A. Kharat Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 022 - 26106552 / 26106960 Fax: 022 - 26106052 Email: bimalokpal.mumbai@cioins.co.in</p>	<p>Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane.</p>

TRAVEL ACE (INTERNATIONAL)

<p>NOIDA - Shri Chandra Shekhar Prasad Office of the Insurance Ombudsman, Bhagwan Sahai Palace 4th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddha Nagar, U.P-201301. Tel.: 0120-2514252 / 2514253 Email: bimalokpal.noida@cioins.co.in</p>	<p>State of Uttaranchal and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.</p>
<p>PATNA - Shri N. K. Singh Office of the Insurance Ombudsman, 1st Floor, Kalpana Arcade Building,, Bazar Samiti Road, Bahadurpur, Patna 800 006. Tel.: 0612-2680952 Email: bimalokpal.patna@cioins.co.in</p>	<p>Bihar, Jharkhand.</p>
<p>PUNE - Shri Vinay Sah Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 3rd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune – 411 030. Tel.: 020-41312555 Email: bimalokpal.pune@cioins.co.in</p>	<p>Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region.</p>

ANNEXURE FOR STANDARD FIRE AND SPECIAL PERILS COVER

BAJAJ ALLIANZ GENERAL INSURANCE COMPANY LTD. BHARAT GRIHA RAKSHA POLICY

POLICY WORDINGS

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TRAVEL ACE (INTERNATIONAL)

You chose this **Bajaj Allianz General Insurance Company Ltd. Bharat Griha Raksha Policy** and applied to Us for insurance covers of Your choice. You paid Us the Premium and gave Us information about Yourself, Your Home Building and Home Contents. Based on Your confirmation that this information is true and correct, and in return of accepting the Premium You have paid Us We promise to provide You insurance as stated in this Policy Document and the Policy Schedule attached to it.

CLAUSE A - THIS POLICY AND THE INSURANCE CONTRACT

1. **Your Policy:** This **Bajaj Allianz General Insurance Company Ltd. Bharat Griha Raksha Policy** is a contract between You and Us as stated in the following:
 - a. This Policy document,
 - b. The Policy Schedule attached to this Policy document,
 - c. Any Endorsement attached to and forming part of this Policy document,
 - d. Any Add-on to this Policy that You may have purchased from Us,
 - e. The proposals and all declarations made by You or on Your behalf.
2. **To whom this Policy is issued and what it covers:**
 - a. This Policy is issued to You and covers You and/or Your Home Building and/or Home Contents as mentioned in the Policy Schedule.
 - b. If more than one person is insured under this Policy, each of You is a joint policyholder. Any notice or letter We give to any of You will be considered as given to all of You. Any request, statement, representation, claim or action of any one of You will bind all of You as if made by all of You.
 - c. If You have mortgaged, pledged or hypothecated Your Home Building and/or Home Contents with a Bank, the Policy Schedule will show an 'Agreed Bank Clause' and the name of such Bank. The terms and conditions of this arrangement will be added to this Policy as an additional clause.
3. **The Policy Schedule:** The Policy Schedule is an important document about Your insurance cover. It contains:
 - a. Your personal details,
 - b. the Policy Period,
 - c. the description of Your Insured Property,
 - d. the total Sum Insured, the Sum Insured for each cover or item covered, and any limits and sub-limits,
 - e. the insurance covers You have purchased,
 - f. the Premium You have paid for these insurance covers,
 - g. add-on covers opted by You,
 - h. other important and relevant aspects and information.
4. **Special meaning of certain words:** Words stated in the table below have a special meaning throughout this Policy, the Policy Schedule and Endorsements.

These words with special meaning are stated in the Policy with the first letter in capitals.

Word /s	Specific meaning
Bank	A bank or any financial institution
Carpet Area	<ol style="list-style-type: none"> 1. for the main building unit of Your Home, it is the net usable floor area, excluding the area covered by the external walls, areas under services shafts, exclusive balcony or verandah area and exclusive open terrace area, but including the area covered by the internal partition walls of the residential unit; 2. for any enclosed structure on the same site, it is the net usable floor area of such structure; and 3. for any balcony, verandah area, terrace area, parking area, or any enclosed structure that is part of Your Home, it is 25% of its net usable floor area.

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Commencement Date	It is the date and time from which the insurance cover under this Policy begins. It is shown in the Policy Schedule.
Cost of Construction	<p>The amount required to construct Your Home Building at the Commencement Date.</p> <p>This amount is calculated as follows:</p> <p>a. For residential structure of Your Home including Fittings and Fixtures: Carpet Area of the structure in square metres X Rate of Cost of Construction at the Commencement Date. The Rate of Cost of Construction is the prevailing rate of Cost of Construction of Your Home Building at the Commencement Date as declared by You and accepted by Us and shown in the Policy Schedule.</p> <p>b. For additional structures : the amount that is based on the prevailing rate of Cost of Construction at the Commencement Date as declared by You and accepted by Us.</p>
Endorsement	A written amendment to the Policy that We make (additions, deletions, modifications, exclusions or conditions of an insurance Policy) which may change the terms or scope of the original policy.
Home Contents	Those articles or things in Your Home that are not permanently attached or fixed to the structure of Your Home. Home Contents may consist of General Contents and/or Valuable Contents.
General Contents	General Contents are all the contents of household use in Your Home, e.g., furniture, electronic items and goods, antennae, solar panels, water storage equipment, kitchen equipment, electrical equipment (including those fitted on walls), clothing and apparel and items of similar nature.
Valuable Contents	Valuable Contents of Your Home consist of items such as jewellery, silverware, paintings, works of art, antique items, curios and items of similar nature.
Insured	The Person/s who has/have purchased Insurance Cover under this Policy.
Insured Property	Your Home Building and Home Contents, or any item of property covered by this Policy.
Kutcha Construction	Building(s) having walls and/or roofs of wooden planks/thatched leaves and/or grass/hay of any kind/bamboo/plastic cloth/asphalt/canvas/tarpaulin and the like.
Policy Period	Policy period means the period commencing from the effective date and time as shown in the Policy Schedule and terminating at Midnight on the expiry date as shown in the Policy Schedule or on the termination of or the cancellation of insurance as provided for in Clause G (III) of this Policy, whichever is earlier.

TRAVEL ACE (INTERNATIONAL)

Policy Schedule	The document accompanying and forming part of the Policy that gives Your details and of Your insurance cover, as described in Clause A (3) of this Policy.
Premium	The premium is the amount You pay Us for this insurance. The Policy Schedule shows the amount of premium for the Policy Period and all other taxes and levies.
Pucca Construction	Construction other than Kutcha Construction.
Spouse	Your wife or husband.
Sum Insured	The amount shown as Sum Insured in the Policy Schedule and as described in Clause C (4) and Clause D (2) of this Policy. It represents Our maximum liability for each cover or part of cover and for each loss.
Total Loss	A situation where the Insured Property or item is completely destroyed, lost or damaged beyond retrieval or repair or the cost of repairing it is more than the Sum Insured for that item or in total.
We, Us, Our, Insurer	The Bajaj Allianz General Insurance Company Ltd that has provided Insurance Cover under this Policy of the Company.
You, Your, Insured	The Insured Person/s who has/have purchased Insurance Cover under this Policy; of such Insured Person/s.
Your Home Building	Your Home Building is a building consisting of a residential unit, having an enclosed structure and a roof, basement (if any) and used as a dwelling place described in detail as per Clause C (2) of this Policy.

CLAUSE B - INSURED EVENTS

We give insurance cover for physical loss or damage, or destruction caused to Insured Property by the following unforeseen events occurring during the Policy Period.

The events covered are given in Column A and those not covered in respect of these events are given in Column B.

Sr. No	Column A	Column B
	We cover physical loss or damage, or destruction caused to the Insured Property by	We do not cover any loss or damage, or destruction caused to the Insured Property
1	Fire	caused by burning of Insured Property by order of any Public Authority.
2	Explosion or Implosion	-
3	Lightning	-

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4	Earthquake, volcanic eruption, or other convulsions of nature	-
5	Storm, Cyclone, Typhoon, Tempest, Hurricane, Tornado, Tsunami, Flood and Inundation	-
	We cover physical loss or damage, or destruction caused to the Insured Property by	We do not cover any loss or damage, or destruction caused to the Insured Property
6	Subsidence of the land on which Your Home Building stands, Landslide, Rockslide	caused by a. normal cracking, settlement or bedding down of new structures, b. the settlement or movement of made up ground, c. coastal or river erosion, d. defective design or workmanship or use of defective materials, or e. demolition, construction, structural alterations or repair of any property, or groundworks or excavations.
7	Bush Fire, Forest Fire, Jungle Fire	-
8	Impact damage of any kind, i.e., damage caused by impact of, or collision caused by any external physical object (e.g. vehicle, falling trees, aircraft, wall etc.)	caused by pressure waves caused by aircraft or other aerial or space devices travelling at sonic or supersonic speeds.
9	Missile testing operations	-
10	Riot, Strikes, Malicious Damages	caused by a. temporary or permanent dispossession, confiscation, commandeering, requisition or destruction by order of the government or any lawful authority, or b. temporary or permanent dispossession of Your Home by unlawful occupation by any person.
11	Acts of terrorism (Coverage as per Terrorism Clause attached)	Exclusions and Excess as per Terrorism Clause attached.
12	Bursting or overflowing of water tanks, apparatus and pipes,	-
13	Leakage from automatic sprinkler installations.	a. repairs or alterations in Your Home or the building in which Your Home is located, b. repairs, removal or extension of any sprinkler installation, or c. defects in the construction known to You.

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14	Theft within 7 (seven) days from the occurrence of and proximately caused by any of the above Insured Events.	if it is a. any article or thing outside Your Home, or b. any article or thing attached from the outside of the outer walls or the roof of Your Home, unless securely mounted.
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CLAUSE C - HOME BUILDING COVER**1. What We cover**

We cover physical loss or damage, or destruction of Your Home Building because of any Insured Event listed in Clause B of this Policy. We also cover architect's, surveyor's, consulting engineer's fees, cost of removing debris as specified under Clause C (5) (f) of this Policy. Further, We pay for Loss of rent and Rent for Alternative Accommodation, which will be paid to the extent declared by You and agreed by Us as specified under Clause C (6) of this Policy while Your Home Building is not fit for living following loss or damage due to an Insured Event.

2. Your Home Building

- a. Your Home Building is a building consisting of a residential unit, having an enclosed structure and a roof, basement (if any) and used as a dwelling place.
- b. **Your Home Building includes**
 - i. fixtures and fittings permanently attached to the floor, walls or roof, like fixed sanitary fittings, electrical wiring and other permanent fittings.
 - ii. the following 'additional structures' if they are on the same site, and are used as part of Your Home Building:
 - a) garage, domestic out-houses used for residence, parking spaces or areas, if any
 - b) compound walls, fences, gates, retaining walls and internal roads,
 - c) verandah or porch and the like,
 - d) septic tanks, bio-gas plants, fixed water storage units or tanks,
 - e) solar panels, wind turbines and air conditioning systems, central heating systems and the like, if not included in Home Contents Cover,
 - iii. any other structure shown in the Policy Schedule.
- c. **Your Home Building does not include Contents of Your Home.**

3. Use for residence

- a. We will pay only if Your Home Building is used for the purpose of residence of Yourself and Your family, or of Your tenant, licensee or employee.
- b. We will not pay if
 - i. Your Home Building is used as a holiday home, or for lodging and boarding, or
 - ii. Your Home Building or any part of Your Home Building is used for purposes other than residential except where it is used both for Your residence and for the purposes of earning Your livelihood if You are self-employed or You have shifted Your office to Your Home Building for a temporary period due to lockdown or closure of Your office ordered by a public authority.

4. Sum Insured

- a. The Sum Insured for the Home Building Cover is the prevailing Cost of Construction of Your Home Building at the Commencement Date as declared by You and accepted by Us and will be the maximum amount payable in the event the Home Building is a Total Loss.
- b. If the Policy Period is more than one year, We will automatically increase Your Sum Insured during the Policy Period by 10% per annum on each anniversary of Your Policy without additional Premium for a maximum of 100% of the Sum Insured at the Policy Commencement Date.
- c. The Sum Insured will be automatically increased each day by an amount representing 1/365th of 10% of Sum Insured at the Policy Commencement Date for annual policies.
- d. Restoration of Sum Insured: Except as stated in **Clause G (III) (3) (b)** of this Policy, the insurance cover will at all times be maintained during the Policy Period to the full extent of the respective Sum Insured. This means that after We have paid for any loss, the Policy shall be restored to the full original amount of Sum Insured. You must pay to Us proportionate Premium for the unexpired Policy Period from the date of loss. We can also deduct this Premium from the net claim that We must pay You.

5. What We pay

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- a. If You make a claim under the Policy for damage to Your Home Building due to any of the insured perils, We reimburse the cost to repair it to a condition substantially the same as its condition at the time of damage. You must spend for repairs, and claim that amount from Us.
- b. We will calculate the amount of claim on the basis of the actual Carpet Area subject to the Carpet Area not exceeding that declared by You in the Proposal Form and stated in the Policy Schedule.
- c. The maximum We will pay for all items together is the Sum Insured shown in the Policy Schedule for Home Building Cover. If the Policy Schedule shows any limit for any item, such limit is the maximum We will pay for that item.
- d. If Your Home Building is a Total Loss, We will pay You the Sum Insured of the Home Building.
- e. If only an additional structure is destroyed, We will pay You an amount equal to the Cost of Construction of the additional structure.
- f. In addition to what **Clause C (5) (c)** of this Policy provides for, We will pay You the following expenses:
 - i. up to 5% of the claim amount for reasonable fees of architect, surveyor, consulting engineer;
 - ii. up to 2 % of the claim amount for reasonable costs of removing debris from the site.

6. Loss of Rent and Rent for Alternative Accommodation: In addition to what **Clause C (5) (c)** of this Policy provides for, We will pay the amount of rent You lose or alternative rent You pay while Your Home Building is not fit for living because of physical loss arising out of an Insured Event as follows:

- a. If You are living in Your Home as a tenant, and You are required to pay higher rent for the alternative accommodation, We will pay the difference between the rent for alternative accommodation and the rent of Your Home Building.
- b. We will pay the loss under this cover for an accommodation that is not superior to Your Home Building in any way and in the same city as Your Home Building.
- c. The amount of lost rent shall be calculated as follows: Sum Insured for Cover for Loss of Rent (as declared by You in the Proposal Form and specified by Us in the Policy Schedule) X Period necessary for repairs ÷ Loss of Rent Period opted for.
- d. This cover will be available for the reasonable time required to repair Your Home Building to make it fit for living. The maximum period of this cover is three years from the date Your Home Building becomes unfit for living. You must submit a certificate from an architect or the local authority to show that Your Home Building is not fit for living.
- e. Claim for loss of rent will be accepted only if We have accepted Your claim for loss for physical damage to Your Home under the Home Building Cover.

CLAUSE D - HOME CONTENTS COVER

1. What We cover:

We cover the physical loss or damage to or destruction of the General Contents of Your Home caused by an Insured Event as listed in Clause B of this Policy. Valuable Contents of Your Home are not covered under this Policy unless You have purchased the optional cover for the Valuable Contents.

2. Sum Insured:

- a. The Sum Insured for the Home Contents Cover is shown in the Policy Schedule and will be the maximum amount payable in the event the Home Contents are destroyed/lost completely.
- b. The Policy has a built-in cover for the General Contents of Your home equal to 20% of the Sum Insured for Home Building Cover subject to a maximum of ₹ 10 Lakh (Rupees Ten Lakh) provided You have opted for both Home Building and Home Contents cover. If You choose to have a higher Sum Insured for Home Contents, You have to declare the Sum Insured in the Proposal Form and pay additional Premium.
- c. If You have purchased only Home Contents Cover, You have to declare the Sum Insured for the General Contents in the Proposal Form.
- d. The Sum Insured You have chosen for General Contents must be enough to cover the cost of replacement of the General Contents.
- e. If You want to cover the Valuable Contents in Your Home, You must opt for the Optional Cover for Valuable Contents as given in Clause E (1) (a) of this Policy.
- f. Restoration of Sum Insured: Except as stated in **Clause G (III) (3) (b)** of this Clause below, the insurance cover will at all times be maintained during the Policy Period to the full extent of the respective Sum Insured. This means that after We have paid for any loss, the Policy shall be restored to the full original amount of Sum Insured. You must pay to Us proportionate Premium for the unexpired Policy Period from the date of loss. We can also deduct this Premium from the net claim that We must pay You.

3. What We pay

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- a. If the General Contents of Your Home are physically damaged by any Insured Event, We will at Our option,
 - i. reimburse to You the cost of repairs to a condition substantially the same as its condition at the time of damage, or
 - ii. pay You the cost of replacing that item with a same or similar item, or
 - iii. repair the damaged item to a condition substantially the same as its condition at the time of damage.
- b. The maximum We will pay for Home Contents is the Sum Insured shown in the Policy Schedule for Home Contents Cover. If the Policy Schedule shows any limit for any item, or category or groups of items, such limit is the maximum We will pay for that item.

CLAUSE E- ADDITIONAL COVERS

1. Optional Covers:

- a. **Cover for Valuable Contents on Agreed Value Basis (under Home Contents cover):**

For Valuable Contents, a value may be agreed upon by You and Us based on a valuation certificate submitted by You and accepted by Us. However, We shall waive the requirement of valuation certificate if the Sum Insured opted for is up to ₹ 5 Lakh (Rupees Five Lakh) and Individual item value does not exceed ₹ 1 Lakh (Rupees One Lakh).

 - i. If the Valuable Contents of Your Home are physically damaged by any Insured Event, We will pay the cost of repairing the item/s.
 - ii. If the Valuable Contents of Your Home are a Total Loss We will pay the Sum Insured shown in the Policy Schedule for the Valuable item/s. If the Policy Schedule shows any limit for any item, or category or groups of items, such limit is the maximum We will pay for that item. Loss to only one item of a pair or set does not constitute loss or damage to the entire pair or set.
- b. **Personal Accident Cover:**

In the event an insured peril that caused damages to Your Home Building and/or Home Contents also results in the unfortunate death of either You or Your spouse, We will pay compensation of ₹ 5,00,000 (Rupees Five Lakh) per person.

In the event of the unfortunate death of the Insured, the Personal Accident cover shall continue for the Spouse until expiry of the Policy.

2. Add-ons:

You can opt for an Add-on by choosing from the Add-ons, if any, offered by Us under this product and the ones that You have purchased will be mentioned in the Policy Schedule and the relevant clause/s and/or Endorsements will be attached to this Policy.

CLAUSE F - EXCLUSIONS (WHAT WE DO NOT COVER) FOR ALL COVERS UNDER THIS POLICY

We do not cover losses and expenses for any loss or damage or destruction of the Insured Property that is directly or indirectly as a result of or is caused by or arising from events, stated below:

1. Your deliberate, wilful or intentional act or omission, or of anyone on Your behalf, or with Your connivance.
2. War, invasion, act of foreign enemy hostilities or war-like operations (whether war is declared or not), civil war, mutiny, civil commotion amounting to a popular rising, military rising, rebellion, revolution, insurrection or military or usurped power.
3. Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from combustion of nuclear fuel, or the radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component that is part of it.
4. Pollution or contamination, unless
 - i. the pollution or contamination itself has resulted from an Insured Event, or
 - ii. an Insured Event itself results from pollution or contamination.
5. Loss, damage or destruction to any electrical/electronic machine, apparatus, fixture, or fitting by over-running, excessive pressure, short circuiting, arcing, self-heating or leakage of electricity from whatever cause (Lightning included). This exclusion applies only to the particular machine so lost, damaged or destroyed.

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6. Loss or damage to bullion or unset precious stones, manuscripts, plans, drawings, securities, obligations or documents of any kind, coins or paper money, cheques, vehicles, and explosive substances unless otherwise expressly stated in the Policy.
7. Loss of any Insured Property which is missing or has been mislaid, or its disappearance cannot be linked to any single identifiable event.
8. Loss or damage to any Insured Property removed from Your Home to any other place.
9. Loss of earnings, loss by delay, loss of market or other consequential or indirect loss or damage of any kind or description whatsoever.
10. Any reduction in market value of any Insured Property after its repair or reinstatement.
11. Any addition, extension, or alteration to any structure of Your Home Building that increases its Carpet Area by more than 10% of the Carpet Area existing at the Commencement Date or on the date of renewal of this Policy, unless You have paid additional Premium and such addition, extension or alteration is added by Endorsement.
12. Costs, fees or expenses for preparing any claim.

CLAUSE G - CONDITIONS

(I) Your Obligations

- 1. Make true and full disclosure in the proposal and related documents**
 - a. You have a duty of disclosure to tell Us everything You know, or could reasonably be expected to know, that is relevant to Us for deciding whether to give You insurance cover and on what terms. You owe this duty to disclose such relevant material information even if We have not specifically asked for it. This duty extends to any information or declaration given by anyone else on Your behalf.
 - b. We have agreed to give You insurance cover entirely on the basis of the information You, or anyone on Your behalf, have given Us in the proposal, statements and other declarations and documents (in writing or electronic) about Yourself, Your family, Your Home Building and Home Contents. The correct and complete information You give is the basis of Our contract with You. Our promise to pay is conditional upon the truth of these statements and on the assumption that You, or anyone on Your behalf, has not withheld any material information about Yourself, Your family, Your Home Building and Home Contents.
- 2. Obligation to take care:** You must:
 - a. keep Your Home Building and Home Contents in good condition and well maintained, You must ensure that the structure of Your Home Building does not have any faults or defects that are visible and material that will aggravate loss or damage to the Home Building in the event an insured peril occurs.
 - b. take care to prevent theft, loss or damage to Your Home Building and Home Contents, and
 - c. ensure that unauthorized persons do not occupy Your Home Building.
- 3. Inform change in circumstances:** You must inform Us immediately if
 - a. You change Your address,
 - b. You make any addition, alteration, extension to the structure of Your Home Building,
 - c. You let out Your Home Building, or Your Home Building will no longer be solely occupied by You,
 - d. You change the use of Your Home Building.
- 4. Allow inspection and investigation of claim:** You must allow, and give full cooperation to the survey/investigation of Your claim by Us. You must allow Us, and any surveyor, officer or other representative that We authorise, to inspect Your Home Building and Home Contents including the interior wherever necessary, take photographs and where required, permit the scientific testing and investigation of any insured article affected by the insured peril. You must answer all questions asked regarding Your claim truthfully and completely, and submit all relevant documents that We will require.
- 5. Make true statements and full disclosure in the claim and related documents**

You must also give true and full information in Your claim and submit true documents. If You give any false information or document in the claim, or if You withhold any information or document (written or electronic), We have a right to refuse payment of Your claim. We may also cancel Your Policy.

(II) Renewal of Policy

- 1. End of Policy:** This Policy will expire at the end of the Policy Period.

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2. **Renewal is not automatic**, We may seek relevant information from You for the purpose of renewal. We can reject Your renewal only on grounds of mis-representation, non-disclosure of material facts, fraud or non-co-operation on Your part.
3. **Application for renewal:** If You wish to renew the Policy, You must apply for renewal before the end of the Policy Period and pay the required Premium amount.

(III) Cancellation and Termination of Policy**1. Cancellation by You at any Time**

- a. You can cancel this Policy at any time by giving Us notice in writing. The Policy will terminate when We receive Your notice.
- b. If You cancel the Policy, We will refund premium as per table (B1) and (B2) hereinafter, as may be applicable, subject however to a minimum retention of Rs.100, except as stated in B1.1.
- c. No premium refund shall be made in respect of Policy on which claim has been lodged by the Insured or a person on behalf of the Insured, whether such claim was admitted or repudiated.

(B1) Short Period Scale (Applicable to Annual Policy):

Sr. No	Cancellation Period (Days)	Refund Amount as percentage of Annual Premium
B1.1	Up to 7 Days	100%
B1.2	8 to 270 days	Pro Rata
B1.3	271 to 365 days	0%

Note:

- a. No request for cancellation of Policy shall be entertained after completion of 270 days (applicable only to annual Policy) from the date of commencement of the Policy Period.
- b. Policy where Policy Period is short term (lesser than one year) cannot be cancelled.
- c. B1.1 shall apply only at first inception of the Policy (Commencement Date) and shall not be applicable for cancellation in the subsequent years as applicable under (B2)

Example: Policy Period: 1st January 2020 to 31st December 2020 (Annual Policy)

Case 1:

Request for cancellation received on: 5th January 2020

Refund: 100% refund

Case 2:

Request for cancellation received on: 5th March 2020

You shall be entitled to refund calculated as below:

Refund: Pro-Rata of annual premium

Case 3:

Request for cancellation received on: 5th November 2020

Refund: Nil

(B2) Policy Period of more than 1 year, up to 10 Years:

- (i) If the request for cancellation is received in First Year, the apportioned premium of unutilized Policy Period will be refunded in full; for First Year the above mentioned short period scale in table (B1) will be applied on the apportioned First Year premium.
- (ii) If the request for cancellation is received in any consecutive year after completion of one year from Commencement Date, the premium for fully utilized Policy Period will be

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retained in full by the Company, the annual short period scale as mentioned in B1.2 and B1.3 hereinabove shall apply to the apportioned active Policy year, and full refund shall be made of the apportioned unutilized Policy Period

Example: Policy Period: 1st January 2020 to 31st December 2024 (Long Term Policy of 5 years)

Case 1:

Request for cancellation received on: 5th January 2020

Refund: 100% refund of Policy Premium

Case 2:

Request for cancellation received on: 5th March 2020

You shall be entitled to refund calculated as below:

Refund: [Pro-Rata of {Apportioned First Year Premium}] + Apportioned premium of second, third, fourth and fifth year in full

Case 3:

Request for cancellation received on: 5th November 2020

Refund: (Nil for First Year) + Apportioned premium of second, third, fourth and fifth year in full

Case 4:

Request for cancellation received on: 5th March 2021

You shall be entitled to refund calculated as below:

Refund: (Nil for first year) + [Pro-Rata of {Apportioned Second Year Premium}] + Apportioned premium of third, fourth and fifth year in full

Case 5:

Request for cancellation received on: 2nd January 2022

You shall be entitled to refund calculated as below:

Refund: (Nil for first and second year) + [Pro-Rata of {Apportioned Third Year Premium}] + Apportioned premium of fourth and fifth year in full

2. Cancellation by Us:

- a. We will not cancel the Policy during the Policy Period except on the grounds of mis-representation, non-disclosure of material facts, fraud or non-co-operation on Your part.
- b. In case of Total Loss of Your Home Building in a long term Policy where You have decided not to reinstate Your Home Building in favour of a cash settlement of Your claim, We will cancel the Policy for the remaining duration of the Policy Period. In such a case We shall refund the proportionate Premium for the un-expired Policy years after grossing up the Premium paid by You towards long term discount, if any.

3. Automatic termination of the Policy

This Policy will automatically end in the following cases:

- a. **Destruction of Your Home Building:** This Policy will automatically end 7 (seven) days after Your Home Building collapses or is destroyed by reason other than any Insured Event. If a separable part of Your Home Building, or any additional structure falls down or is destroyed by reason other than any Insured Event, the covers will end for such part or additional structure. You can apply within 7 (seven) days of such fall or destruction for continuing insurance cover. We may agree, but will not be bound, to continue the cover on the same rates, terms and conditions.
- b. **Exhaustion of Sum Insured:** If Your Home Building, or any additional structure, or any item of Home Contents, is lost, destroyed or stolen, or is a Total Loss, and We pay You the full Sum Insured for such item, the insurance cover for that item will automatically end unless the subject matter of insurance is reconstructed and the Sum Insured is reinstated by paying additional Premium. If We pay the total Sum Insured for any claim, this Policy will end.
- c. **Change of use of Your Home Building or Home Contents:** The Policy will end
 - i. if You change the use of Your Home Building from personal residence to any other purpose, or
 - ii. if You use any item of Home Contents for use that is not personal.

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- d. **Sale of Your Home Building or Home Contents:** This Policy will end when You sell, surrender or release Your interest in Your Home Building and/or Home Contents, or Your interest in the Home Building and/or Home Contents comes to an end. The Policy will end to the extent any additional structure of Your Home Building or item of Home Contents if You sell, surrender or release Your interest in such additional structure or item of Home Content, or Your interest in these ends.
- e. **Effect of death**
In the event of the unfortunate death of the Insured during the Policy Period, the Home Building Cover and the Home Contents Cover that You have purchased will continue for the benefit of Your legal representative/s during the Policy Period subject to all the terms and conditions of this Policy.

(IV) Claims Procedure

If You suffer a loss because of an Insured Event, You must make a claim for Your financial loss at Your cost. The procedure for making a claim is given below. These include things that **You must do**, and that **You must not do**. It is important to comply with these to ensure that it does not prejudice Your claim in any manner.

1. Immediate notice to Us

- a. As soon as any physical loss or damage occurs to Your Home Building or Home Contents due to an Insured Event, You must immediately give notice to Us of the loss or damage. This is necessary for Us to survey/ investigate the loss or damage, as may be required.
- b. You can give notice to any of Our offices or call-centres.
- c. You must state in this notice
 - i. the Policy Number,
 - ii. Your name,
 - iii. details of report to the police that You made,
 - iv. details of report to any Authority that You made,
 - v. details of the Insured Event,
 - vi. a brief statement of the loss,
 - vii. particulars of any other insurance of Your Home Building or any of Your Home Contents,
 - viii. details of loss or damage under any Optional Cover or Add-ons,
 - ix. submit photographs of loss or physical damage, wherever possible.

2. Steps to prevent loss and damage

- a. You must take all reasonable steps to prevent further loss or damage to Your Home Building and Home Contents.
- b. Until We have inspected Your Home Building and Home Contents, and have given Our consent,
 - i. You must not sell, give away or dispose of any damaged items of any property for which You are making a claim;
 - ii. You must not wash or clean, or remove any damaged item or debris, except for any urgent necessity;
 - iii. You must not carry out repairs, unless such repairs are urgent and You cannot contact Us.

3. Immediate notice to Authorities

- a. As soon as any loss or damage occurs to the Insured Property, You must give immediate report to appropriate legal authorities. For example, You must report to the fire brigade of the local authority and the police if there is damage by Fire/ Explosion / Implosion or Lightning. In case of subsidence /landslide/rockslide, You must inform the District Administration. In the event of impact damage of any kind or Riot Strikes, Malicious damages and acts of terrorism, You must inform the police. If there is a theft within 7 (seven) days following an Insured Event You must inform the police.
- b. We may, but not necessarily, waive this condition if We are satisfied that by reason of extreme hardship it was not possible for You or any other person on Your behalf to give such report.

4. Submit claim

- a. Claim form:
 - i. You must submit Your claim in Our claim form at the earliest opportunity, but within 30 days from the date You first notice the loss or damage. The claim form is available in any of Our branches, and on Our web-site.
 - ii. You must state in Your claim the details of any other insurance Policy that covers the damage or loss for which You have filed Your claim, whether You have purchased such other insurance, or someone else has purchased it for You.

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- b. We shall not be liable for any loss or damage after the expiry of 12 months from the happening of the loss or damage unless the claim is the subject of pending action or arbitration. If We disclaim liability for a claim You have made and if the claim is not made a subject matter of a suit in a court of law within a period of 12 months from the date of disclaimer, the claim shall not be recoverable hereunder.

5. Establish loss

- a. You must prove that the Insured Event has occurred, and the extent of physical loss or damage You have suffered with full details.
- b. When We request,
 - i. You must support Your claim for Home Building and/or Home Contents with plans, specification books, vouchers, invoices pertaining to costs incurred by You for reconstruction/replacement/repairs.
 - ii. You must allow Us, Our officers, surveyors or representatives to inspect the loss or damage to Your Home Building and/or Home Contents, and to take measurements, samples, damaged items or parts, and photographs that are relevant.
 - iii. You must give Us authority to see the relevant records and get information about the Event and Your loss from the police or any other authority.
- c. For Optional Cover of Personal Accident, Death Certificate and Post Mortem report (wherever necessary) shall be submitted.

6. Fraudulent claim

If You, or anyone on Your behalf, make a false or fraudulent claim, or support a claim with any false or fraudulent statement or documents:

- i. We will not pay,
- ii. We can cancel the Policy: in such a case, You will lose all benefits under this Policy and Premium that You have paid, and
- iii. We can also inform the police, and start legal proceedings against You.

7. Other insurance

- a. If You have any other Policy with Us or any other Insurance Company (taken by You or by anyone else for You) covering in whole or in part any claim that You have made under this Policy, You have a right to ask for settlement of Your claim under any of these policies.
- b. If You choose to claim under this Policy from Us, We will settle Your claim within the limits and the terms and conditions of this Policy.
- c. After We pay the amount under Your claim, We have the right to ask for contribution from the Insurers that have given You the other policies.
- d. We will ensure that Our actions do not impose any liability on You.

8. Recovery action by Us

- a. When We accept and pay Your claim under the Policy, We can start legal proceedings to recover the amount or property from the third party who has caused the loss or damage to Your Home Building or Home Contents. You must give authority to Us to take such action and exercise this right effectively, when We request You, whether before or after making payment of Your claim. You must give all information, cooperation, assistance and help for this purpose. You must not do anything which will prejudice Our right. We can do this
 - i. without seeking Your consent,
 - ii. in Your name, and
 - iii. whether or not Your loss has been fully compensated.
- b. Any amount We recover from such person will be applied first to the costs of the legal proceedings and recovery, then to the claim amount We have paid or must pay to You. We will pay You any balance.
- c. You can start legal proceedings against any person who has caused the loss or damage only with Our prior consent, and on conditions that We will impose. You must not compromise or settle any claim against such person without Our consent. If You recover any amount from such person, You must return to Us the amount We have paid for Your claim. We can take over the conduct of legal proceedings that You have started and continue the proceedings in Your name.

CLAUSE H - CHANGES TO COVERS

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- a. You can choose to make changes to the covers of this Policy as may be permitted by Us, or increase or reduce any Sum Insured. You must make a proposal or request for any change. It will be effective only after We have accepted Your proposal, and You have paid the additional Premium, where applicable.
- b. This Policy (including the Policy Schedule, the proposal, declarations and Endorsements) consists of the entire contract between You and Us.

CLAUSE I - WAIVER OF UNDERINSURANCE

Underinsurance does not apply to this Policy. Thus, if Your Sum Insured calculated on the basis of the information that You provided, is less than the actual value at risk, the difference will not affect the amount We pay.

CLAUSE J - OTHER DETAILS

1. Notices

- a. We will send any notice, letter or communication in writing to You at Your address mentioned in the Policy Schedule, and to Your email address that You have registered with Us.
- b. You will send any notice, letter, intimation or communication in writing to Us at Our branch office where You purchased this Policy. You can also send it at the address mentioned in the Policy Schedule.

2. Nomination for this Policy

You can nominate a person to receive the claim amount under this Policy in the event of Your death. You can make such nomination at the time You take the Policy, or later. You can also change the nomination at any time. You can make the nomination on Our nomination form available in Our office or from Our website: www.bajajallianz.com

3. Applicable law and jurisdiction

This Policy will be subject to the laws of India, and to the jurisdiction of courts in India.

4. Arbitration

If any dispute or difference arises between You and Us regarding the amount of claim to be paid under this Policy (liability having been admitted by Us), such difference shall independently of all other questions, be referred to the decision of a sole arbitrator to be appointed in writing by You and Us or if You and We cannot agree upon a single arbitrator within 30 days of either of Us opting for arbitration, the same shall be referred to a panel of three arbitrators comprising of two arbitrators, one to be appointed by each of Us, to the dispute/difference and the third arbitrator to be appointed by two such arbitrators and arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996.

CLAUSE K - GRIEVANCES

If You have a grievance about any matter relating to the Policy, or Our decision on any matter, or the claim, You can address Your grievance as follows:

1. Our Grievance Redressal Officer

You can send Your grievance in writing by post or email to Our Grievance Redressal Officer at the following address:

Address including email

Customer Care Cell

Bajaj Allianz General Insurance Co. Ltd

Bajaj Allianz House, Airport Road, Yerawada, Pune 411 006

E-mail: bagichelp@bajajallianz.co.in

2. Consumer Affairs Department of IRDAI

- a. In case it is not resolved within 15 days or if You are unhappy with the resolution You can approach the Grievance Redressal Cell of the Consumer Affairs Department of IRDAI by calling Toll Free Number **155255 (or) 1800 4254 732** or sending an e-mail to complaints@irdai.gov.in. You can also make use of IRDAI's online portal - Integrated Grievance Management System (IGMS) by registering Your complaint at igms.irda.gov.in.
- b. You can send a letter to IRDAI with Your complaint on a Complaint Registration Form available by clicking here. You must fill and send the Complaint Registration Form along with any documents by post or courier to General Manager, Insurance Regulatory and Development Authority of India (IRDAI),

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Consumer Affairs Department - Grievance Redressal Cell, Sy.No.115/1, Financial District, Nanakramguda, Gachibowli, Hyderabad-500032.

c. You can visit the portal <http://www.policyholder.gov.in> for more details.

3. Insurance Ombudsman

You can approach the Insurance Ombudsman depending on the nature of grievance and financial implication, if any. Information about Insurance Ombudsmen, their jurisdiction and powers is available on the website of the Insurance Regulatory and Development Authority of India (IRDAI) at www.irdai.gov.in, or of the General Insurance Council at www.generalinsurancecouncil.org.in, the Consumer Education Website of the IRDAI at <http://www.policyholder.gov.in>, or from any of Our Offices.

Office Details	Jurisdiction of Office Union Territory, District)
AHMEDABAD - Office of the Insurance Ombudsman, 2nd floor, Ambica House, Near C.U. Shah College, 5, Navyug Colony, Ashram Road, Ahmedabad – 380 014. Tel.: 079 - 27546150 / 27546139 Fax: 079 - 27546142 Email: bimalokpal.ahmedabad@ecoi.co.in	Gujarat, Dadra & Nagar Haveli, Daman and Diu.
BENGALURU Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No. 57-27-N-19 Ground Floor, 19/19, 24th Main Road, JP Nagar, 1st Phase, Bengaluru – 560 078. Tel.: 080 - 26652048 / 26652049 Email: ecoi.co.in bimalokpal.bengaluru@ecoi.co.in	Karnataka.
BHOPAL - Shri. R K Srivastava Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp. Airtel Office, Near New Market, Bhopal – 462 003. Tel.: 0755 - 2769201 / 2769202 Fax: 0755 - 2769203 Email: bimalokpal.bhopal@ecoi.co.in	Madhya Pradesh Chattisgarh.
BHUBANESHWAR - Shri. B. N. Mishra Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar – 751 009. Tel.: 0674 - 2596461 / 2596455 Fax: 0674 - 2596429 Email: bimalokpal.bhubaneswar@ecoi.co.in	Orissa.
CHANDIGARH - Office of the Insurance Ombudsman, S.C.O. No. 101, 102 & 103, 2nd Floor, Batra Building, Sector 17 – D,	Punjab, Haryana, Himachal Pradesh,

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Office Details	Jurisdiction of Office Union Territory, District)
Chandigarh – 160 017. Tel.: 0172 - 2706196 / 2706468 Fax: 0172 - 2708274 Email: bimalokpal.chandigarh@ecoi.co.in	Jammu & Kashmir, Chandigarh.
CHENNAI - Shri Virander Kumar Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018. Tel.: 044 - 24333668 / 24335284 Fax: 044 - 24333664 Email: bimalokpal.chennai@ecoi.co.in	Tamil Nadu, Pondicherry Town and Karaikal (which are part of Pondicherry).
DELHI - Smt. Sandhya Baliga Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel.: 011 - 23239633 / 23237532 Fax: 011 - 23230858 Email: bimalokpal.delhi@ecoi.co.in	Delhi.
GUWAHATI - Sh. / Smt. Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati – 781001 (ASSAM). Tel.: 0361 - 2132204 / 2132205 Fax: 0361 - 2732937 Email: bimalokpal.guwahati@ecoi.co.in	Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.
HYDERABAD - Shri. G. Rajeswara Rao Office of the Insurance Ombudsman, 6-2-46, 1st floor, "Moin Court", Lane Opp. Saleem Function Palace, A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004. Tel.: 040 - 65504123 / 23312122 Fax: 040 - 23376599 Email: ecoi.co.in_bimalokpal.hyderabad@ecoi.co.in	Andhra Pradesh, Telangana, Yanam and part of Territory of Pondicherry.
JAIPUR - Shri. Ashok K. Jain Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141 - 2740363 Email: Bimalokpal.jaipur@ecoi.co.in	Rajasthan.

TRAVEL ACE (INTERNATIONAL)

Office Details	Jurisdiction of Office Union Territory, District)
ERNAKULAM - Shri. P. K. Vijayakumar Office of the Insurance Ombudsman, 2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard, M. G. Road, Ernakulam - 682 015. Tel.: 0484 - 2358759 / 2359338 Fax: 0484 - 2359336 Email: ecoi.co.in bimalokpal.ernakulam@ecoi.co.in	Kerala, Lakshadweep, Mahe-a part of Pondicherry.
KOLKATA - Shri. K. B. Saha Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 / 22124340 Fax : 033 - 22124341 Email: ecoi.co.in bimalokpal.kolkata@ecoi.co.in	West Bengal, Sikkim, Andaman & Nicobar Islands.
LUCKNOW - Shri. N. P. Bhagat Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, Lucknow - 226 001. Tel.: 0522 - 2231330 / 2231331 Fax: 0522 - 2231310 Email: bimalokpal.lucknow@ecoi.co.in	Districts of Uttar Pradesh : Laitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar.
MUMBAI - Shri. A. K. Dasgupta Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 022 - 26106552 / 26106960 Fax: 022 - 26106052 Email: bimalokpal.mumbai@ecoi.co.in	Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane.
NOIDA - Shri. Ajesh Kumar Office of the Insurance Ombudsman, Bhagwan Sahai Palace 4th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddh Nagar, U.P-201301. Tel.: 0120-2514250 / 2514251 / 2514253 Email: bimalokpal.noida@ecoi.co.in	State of Uttaranchal and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.

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Office Details	Jurisdiction of Office Union Territory, District)
PATNA - Shri. Sadasiv Mishra Office of the Insurance Ombudsman, 1st Floor, Kalpana Arcade Building,, Bazar Samiti Road, Bahadurpur, Patna 800 006. Tel.: 0612-2680952 Email: bimalokpal.patna@ecoi.co.in	Bihar, Jharkhand.
PUNE - Shri. A. K. Sahoo Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 3rd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune – 411 030. Tel.: 020 - 32341320 Email: bimalokpal.pune@ecoi.co.in	Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region.

If the Insured Beneficiary is still not satisfied, he can approach the Insurance Ombudsman in the respective area for resolving the issue. The contact details of the Ombudsman offices are mentioned below:

Note: Address and contact number of Governing Body of Insurance Council:
Secretary General - Governing Body of Insurance Council
Jeevan Seva Annexe, 3rd Floor, S.V. Road, Santacruz (W), Mumbai - 400 054
Tel. No.: 022 - 2610 6889, 26106245, Fax No.: 022 - 26106949, 2610 6052,
E-mail ID: inscoun@vsnl.net

CLAUSE L - INFORMATION ABOUT US

Bajaj Allianz General Insurance Company Limited [BAGIC] is a joint venture between Bajaj Finserv Limited and Allianz SE. Both enjoy a reputation of expertise, stability and strength. This joint venture company incorporates global expertise with local experience. The comprehensive, innovative solutions combine the technical expertise and experience of Allianz SE, and in-depth market knowledge and goodwill of Bajaj. Over a period of very short time the Company has earned a reputation of being a "Customer First Company".

Bajaj Allianz House, Airport Road, Yerawada, Pune-411006
Web: www.bajajallianz.com
E-mail: bagichelp@bajajallianz.co.in
Customer Service

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STANDARD SPECIAL CLAUSE

AGREED BANK CLAUSE

If You have mortgaged, hypothecated or created any security over Your Home or any of its Contents in favour of a Bank, and the Bank has an interest in the Policy, the name of such Bank will also be shown in the Policy Schedule under the title 'Agreed Bank Clause'. If You choose to add the name of such Bank at any time during the Policy Period, this will be shown as an Endorsement.

Under this Clause You agree as follows:

- i. We shall pay to the Bank the entire amount that We are liable to pay under this Policy. Such Bank will receive it for its own demand, and as agent for any other person interested in the amount.
- ii. When We pay the amount to the Bank, Our liability under this Policy will be discharged, and will be binding on all of You and all persons named as the Insured.
- iii. Any notice or communication We make to the Bank under the provisions of this Policy shall be sufficient notice or communication to You.
- iv. Any settlement or compromise that We make with the Bank will be binding on You and all persons named as the Insured. However, such settlement or compromise will not affect the rights of the Bank to recover any amount from You or any other person.
- v. If You make any change in the use of Your Home or sell or transfer the Insured Property, such actions will not prejudice the interest of the Bank under the Policy and this clause, unless the condition has been broken by the Bank or its employees.
- vi. If You commit any act or omission that will increase the risk, the insurance cover will not be invalidated. However, the Bank shall notify Us of any change or ownership, or alterations and increase in risks as soon they become known to the Bank, and shall pay additional Premium from the time of such change.
- vii. When We pay the amount to the Bank, We will become legally and automatically subrogated to all rights of the Bank to the extent of such payment. This will not impair or prejudice the rights of the Bank to recover any amount from You or any other person.

N.B: The Bank shall mean the first named Financial Institution/Bank named in the Policy.

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TERRORISM DAMAGE COVER ENDORSEMENT

Insuring Clause

Subject otherwise to the terms, exclusions, provisions, and conditions contained in the Policy, it is hereby agreed and declared that Notwithstanding anything stated in the 'Terrorism Risk Exclusion' of this Policy to the Contrary, this Policy is extended to cover Physical loss or physical damage occurring during the period of this Policy caused by an act of terrorism, subject to the exclusions, limit and excess described hereinafter.

For the Purpose of this cover, an act of terrorism means an act or series of acts, including but not limited to the use of force or violence and/or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s) or government (s), or unlawful associations, recognized under Unlawful Activities (Prevention) Amendment Act, 2008 or any other related and applicable national or state legislation formulated to combat unlawful and terrorist activities in the nation for the time being in force, committed for political, religious, ideological or similar purposes including the intention to influence any government and/or to put the public or any section of the public in fear for such purposes

This **Terrorism Damage Cover** also includes Loss, damage, cost or expense directly caused by, resulting from or in connection with any action taken in suppressing, controlling, preventing or minimizing the consequences of an act of terrorism by the duly empowered government or Military Authority.

Provided that if the Insured is eligible for indemnity under any government compensation plan or other similar scheme in respect of the damage described above, this Policy shall be limited only for the excess of any recovery due from such plan or scheme.

For the purpose of the aforesaid inclusion clause, "Military Authority" shall mean armed forces, para military forces, police or any other authority constituted by the government for maintaining law and order.

EXCLUSION

This cover shall not indemnify loss of or damage to property caused by any or all of the following

1. Loss by seizure or legal or illegal occupation;
2. Loss or damage caused by:
3. Voluntary abandonment or vacation,
4. Confiscation, commandeering, nationalization, requisition, detention, embargo, quarantine, or any result of any order of public or government authority, which deprives the Insured of the use or value of its property;
5. Loss or damage arising from acts of contraband or illegal transportation or illegal trade;
6. Loss or damage directly or indirectly arising from or in consequence of the seepage and or discharge of pollutants or contaminants, which pollutants and contaminants shall include but not be limited to any solid, liquid, gaseous or thermal irritant, contaminant or toxic or hazardous substance or any substance the presence, existence or release of which endangers or threatens to endanger the health, safety or welfare of persons or the environment
7. Loss or damage arising directly or indirectly from or in consequence of chemical or biological emission, release, discharge, dispersal or escape or chemical or biological exposure of any kind;
8. Loss or damage arising directly or indirectly from or in consequence of asbestos emission, release, discharge, dispersal or escape or asbestos exposure of any kind;
9. Any fine, levy, duty, interest or penalty or cost or compensation/damage and/or other assessment which is incurred by the Insured or which is imposed by any court, government agency, public or civil authority or any other person;

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10. Loss or damage by electronic means including but not limited to computer hacking or the introduction of any form of computer virus or corrupting or unauthorized instructions or code or the use of any electromagnetic weapon. This exclusion shall not operate to exclude losses (which would otherwise be covered under this Policy) arising from the use of any computer, computer system or computer software programme or any other electronic system in the launch and/or guidance system and /or firing mechanism of any weapon or missile;
11. Loss or damage caused by vandals or other persons acting maliciously or by way of protest or strikes, labour unrest, riots or civil commotion;
12. Loss or increased cost occasioned by any public or government or local or civil authority's enforcement of any ordinance or law regulating the reconstruction, repair or demolition of any property Insured hereunder;
13. Any consequential loss or damage, loss of use, delay or loss of markets, loss of income, depreciation, reduction in functionality, or increased cost of working;
14. Loss or damage caused by factors including but not limited to cessation, fluctuation or variation in, or insufficiency of, water, gas or electricity supplies and telecommunications or any type of service;
15. Loss or increased cost as a result of threat or hoax;
16. Loss or damage caused by or arising out of burglary, house breaking, looting, theft, larceny or any such attempt or any omission of any kind of any person (whether or not such act is committed in the course of a disturbance of public peace) in any action taken in respect of an act of terrorism;
17. Loss or damage caused by mysterious disappearance or unexplained loss;
18. Loss or damage directly or indirectly caused by mould, mildew, fungus, spores or other micro-organism of any type, nature or description, including but not limited to any substance whose presence poses an actual or potential threat to human health;
19. Total or partial cessation of work or the retardation or interruption or cessation of any process or operations or omissions of any kind.

LIMIT OF INDEMNITY

The Limit of indemnity under this cover shall not exceed the Total Sum Insured given in the Policy Schedule or INR 15,000,000,000 whichever is lower. In respect of several insurance policies within the same compound/location with one or different insurers, the maximum aggregate loss payable per compound/location by anyone or all insurers shall be INR 15,000,000,000. If the actual aggregate loss suffered at one compound/location is more than 15,000,000,000 the amounts payable under individual policies shall be reduced in proportion to the Sum Insured of the policies.

EXCESS

1. **Shops & Residential Risks:** 1% of the claim amount for each and every claim subject to Minimum of INR 10,000 and Maximum of INR 500,000
2. **Non-Industrial Risks:** 1% of the claim amount for each and every claim subject to Minimum of INR 25,000 and Maximum of INR 1,000,000
3. **Industrial Risks:** 5% of the claim amount for each and every claim subject to Minimum of INR 100,000 and maximum of INR 25,000,000

CANCELLATION CLAUSE

Notwithstanding the cancellation provisions relating to the basic insurance Policy on which this Endorsement is issued, there shall be no refund of Premium allowed for cancellation of the terrorism risk insurance during the period of insurance except where such cancellation is done along with the cancellation of the basic insurance. Where a Policy is cancelled and rewritten mid-term purely for the purpose of coinciding with the accounting year of the Insured, pro-rate refund of the cancelled Policy Premium will be allowed.

If the cancellation is for any other purpose, refund of Premium will only be allowed after charging short term scale rates.

Note: The definitions, terms and conditions of main Policy save as modified or endorsed herein shall apply.