



TRAVELSHIELD



Insurance Certificate No.
4168/O-TSSPL/20683/00/000

VALID UPTO: 04-06-2023

MR. DEVENDRA SINGH SHEKHAWAT
Plan : X 50
TSS Assist No. : TSS1737401



Details of your membership registered with us are

Date of Departure :	26-05-2023
Date of Arrival :	04-06-2023
Trip Duration :	10
Insurance Certificate No.:	4168/O-TSSPL/20683/00/000
TSS Assist No. :	TSS1737401
TSS Assist Charges :	736.00 Incl. GST @18%

Encl: -

- 1) Confirmation of Availability of Insurance.
- 2) Insurance T&C (please read it carefully before you travel).
- 3) Claim Form

Note: - In case of you have not received the insurance policy's Terms & Conditions along with the kit, kindly download it from www.Travelshield.in. This Welcome Letter (Part I) is to be read in conjunction with confirmation of availability of Insurance (Part II).

REGISTERED OFFICE

Travelshield Services Pvt. Ltd.

372, Sundar Nagar Main, Sukhliya,
Indore MP - 452001

Tel. : **+91 7987932103**

Email : **support@travelshield.in**

Website: **<http://www.travelshield.in>**

MR. DEVENDRA SINGH SHEKHAWAT
RAJPUT BASTI PALWAS 332042
SIKAR RAJASTHAN

Dear Member,

It is a pleasure to welcome you to the Travelshield.

We are glad to thank you for choosing "TSS Assist". We are sure that you will feel pride and relief with TSS Assist which is a comprehensive consulting programme available 24x7 for worldwide travel & lifestyle assistance with domestic road side assistance. We hope that you will take advantage of the many benefits that will be provided according to the selected plan. Please visit our website www.Travelshield.in, where you will find detailed information also feel free to use our helpline at **+91 7987932103**.

Including all the benefits as per your plan in our member, you will get an add on Overseas Mediclaim Policy Underwritten by IRDA General Insurance Co. Ltd. The Confirmation of Availability of Insurance is enclosed herewith for your kind reference. If at any time you require any assistance, please feel free to contact our nearest branch office or write to us at admin@travelshield.in

In case you need to claim, you can call our 24 x 7 helpline **+91 7987932103** or Email us at support@travelshield.in.

We once again welcome you to The Travelshield family and thank you for giving us an opportunity to be of service to you and look forwarding to build a long lasting relationship with you, Have a Nice trip.

Authorised Signatory

TSS Assist	Online Doctor Assistance	Travel Insurance
Long Distance Medical information Travel & Medical Assistance Domestic Roadside Assistance Gift & Home Care Assistance 24*7 Claims Helpline	We aim at making health care services easily accessible to ensure that patients do not hesitate while consulting doctors online	As a our esteem Travelshield member you avail travel insurance underwritten by IRDA General Insurance Company
For more plan wise details pls visit www.Travelshield.in/memberbenefits		

Disclaimer:- Travelshield Services Pvt. Ltd. will take all reasonable steps to trace your missing baggage; however the Company gives no guarantee of being able to trace the missing baggage. Travelshield Services Pvt. Ltd. will not be responsible and cannot be held liable for any loss caused and/or damage suffered in case the baggage can not be traced. Travelshield Services Pvt. Ltd. will not be responsible and cannot be held liable for any theft and/or for loss of goods from the baggage and/or damage to the baggage. All services are provided by TSS Assist are on a best effort basis. TSS Assist will use due care in recommending a service provider for the service. However, the members / member's family is advised to use their judgment prior to availing of the service from the provider. TSS Assist will not be accountable, responsible or liable for civil or criminal liability due to any failure of the services rendered by the service provider or for death, damages / injuries / accidents / loss / third party liabilities / loss to property arising out of/as a consequence of the services availed by members / member's family from third party providers

VOYAGER GROUP TRAVEL INSURANCE**PART I OF THE POLICY SCHEDULE****(UIN : ICITGBP22095V032122)**

Date: 25/05/2023

To,
MR. DEVENDRA SINGH SHEKHAWAT
RAJPUT BASTI PALWAS, SIKAR - 332042, RAJASTHAN, INDIA
0

Dear Mr. / Ms. MR. DEVENDRA SINGH SHEKHAWAT ,

Sub: Issuance of Policy Certificate no. 4168/O-TSSPL/20683/00/000 under your application for Group Travel Insurance Policy dated 25/05/2023.

We would like to thank you for investing your faith in us. Please find enclosed herewith your Policy Certificate, Policy wordings & Customer Information Sheet based on which your insurance Policy has been issued.

Insured Person Details:

Name of Proposer	MR. DEVENDRA SINGH SHEKHAWAT		
Overseas	Overseas		
Geographical Scope of Policy	WorldWide excluding USA/Canada		
No. of Travel Days	10 days		
Countries being visited	SINGAPORE		
Period of Insurance	Overseas - From 26/05/2023 To: 04/06/2023		

Name of Insured	MR. DEVENDRA SINGH SHEKHAWAT	Date of Birth of Insured	15/05/1990
PAN No. of Insured		Passport No. of Insured	Z7169237
Relationship of Insured with Proposer		Address of the Insured	RAJPUT BASTI PALWAS, SIKAR - 332042, RAJASTHAN, INDIA
Resident Status		Country of issue of Passport	

Medical expenses due to Covid-19 is covered if contracted during the travel period as per policy terms and conditions.

Please go through the details as furnished in the format and also as provided in the Policy document and confirm that they are in order. Should you feel that there are any discrepancies/ variations, you are requested to write back to us immediately at customersupport@icicilombard.com or call at 1800 2666 for necessary changes/rectification. In the absence of any communication from you within 15 days of receipt of Policy, we would take it that you have accepted the contents and the coverage to be confirming to your proposal.

Thanking You,
Yours Sincerely

ICICI Lombard General Insurance Company Limited (IRDAI Regn. No. : 115)
Master Policy Number - 4168/O-TRVSHID/52121300/00/000

CIN No. L67200MH2000PLC129408
UIN: ICITGBP22095V032122

**Group Travel Insurance
Policy Certificate**

On receipt of full premium from the Policyholder as named in this Schedule, Group Travel Insurance master policy No. 4168/O-TRVSHID/52121300/00/000 has been issued at Mumbai, by ICICI Lombard General Insurance Company Limited to the Policyholder, TRAVELSHIELD as specified in the Policy, and is governed by, and is subject to, the terms, conditions & exclusions therein contained or otherwise expressed in the said Policy.

The certificate issued to the customers/employees/members of TRAVELSHIELD under the signature of an authorized signatory of ICICI Lombard General Insurance Company Limited, represents the availability of the Benefits under the Policy to the Insured Person named below, subject to the terms, conditions and exclusions expressed in the said Policy, but not exceeding the Sum Insured as specified below.

ICICI Lombard General Insurance Company Limited

IRDA Reg. No. 115
Mailing Address:
601 & 602, 6th Floor, Interface 16,
New Linking Road, Malad (West)
Mumbai - 400 064

CIN: L67200MH2000PLC129408
Registered Office Address:
ICICI Lombard House, 414, Veer Savarkar
Marg, Near Siddhi Vinayak Temple,
Prabhadevi, Mumbai 400 025

UIN : ICITGBP22095V032122
Toll free no : 1800 2666
Alternate no : 86552 22666 (chargeable)
E-mail : Customersupport@icicilombard.com
Website : www.icicilombard.com

(PART I OF THE POLICY SCHEDULE)

POLICY CERTIFICATE NUMBER	: 4168/O-TSSPL/20683/00/000
Master Policy Number	: 4168/O-TRVSHID/52121300/00/000
Issued At	: Mumbai
Overseas	: Overseas
Geographical Scope	: WorldWide excluding USA/Canada

Trip Details						
Type of Trip	For Overseas- Round Trip					
Details of Trip*	1 From	26/05/2023	To	04/06/2023	No. of Days	10
	Place of Origin	INDIA	Destination	SINGAPORE		

Proposer/Policyholder Details	
Name of the Proposer	MR. DEVENDRA SINGH SHEKHAWAT

Insured Details	
Name of the Insured	MR. DEVENDRA SINGH SHEKHAWAT
Gender of the Insured	Male
Age as on Policy Start Date	33 years
Mailing address/ Residential Address of the Insured	RAJPUT BASTI PALWAS, SIKAR - 332042, RAJASTHAN, INDIA
Occupation	
Mobile Number	0
Email ID	
Passport Number	Z7169237
Country of Issue of Passport	
Pre-Existing Disease (if any):	
Name of Nominee	DIPESH KANWAR
Relationship of Nominee with Insured	SPOUSE

COVERAGE TABLE - FOR OVERSEAS POLICY

(Coverage Table to be customized in accordance to the Covers & Extensions opted)

Coverage	Sum Insured	Deductibles/Franchise/Co-Pay/Cover Specific Condition, if any
Hospitalization Expenses for Illness & Injury	USD 50,000	USD 100
Outpatient Treatment Expenses for Illness	USD 50,000	USD 100
Repatriation of Remains	USD 7,500	Nil
Medical Evacuation	USD 50,000	USD 100
Dental Treatment	USD 500	USD 100
Loss of Checked-In Baggage	USD 500	Nil
Delay of Checked-In Baggage	USD 100	8 HRS
Personal Accident	USD 20,000	Nil
Personal Liability	USD 1,00,000	Default Copay of 5% of actual
Hijack Distress Compensation	USD 125 Per day upto 7 days	12 HRS
Financial Emergency Cash Allowance (Lump Sum)	USD 1,000	Nil
Trip Cancellation	USD 1,250	Nil
Trip interruption or curtailment	USD 1,250	Nil
Common carrier / public carrier delay	USD 500	8 HRS
Missed connecting common carrier/ public carrier	USD 500	3 HRS
Burglary (Home Contents)	Rs 1,00,000	Nil
Loss of Passport / International Driving License	USD 300	Nil

*Sub-limits shall not be applicable for Schengen Countries or any other country where respective government bodies/embassies have similar requirements.

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GSTIN of ICICI Lombard GIC	27AAACI7904G1ZN
HSN/SAC Code	9971 / GENERAL INSURANCE SERVICES
Servicing Branch:	Mumbai

The stamp duty of ₹ paid vide deface no.dated

SPECIAL CONDITION:


IMPORTANT NOTES:

- Insurance cover will start only on receipt of full premium stated in PART I of the Policy Schedule by ICICI Lombard General Insurance Company Limited.
- Insurance cover is subject to the terms and conditions mentioned in the Policy wordings provided to you with this Certificate.
- The above covers would not be applicable for persons occupied in underground mines, explosives and electrical installations on high tension lines unless otherwise covered and stated in the Policy Schedule.
- Major exclusions: Intentional self-injury, suicide or attempted suicide whilst under the influence of intoxicating liquor or drugs, any loss arising from an act of breach of law with or without criminal intent. Please refer to the Policy wordings for a complete list of exclusions.
- For any endorsements such as name correction or change in nominee details, you can contact us at Toll Free Number 1800-2666 or Email us at customersupport@icicilombard.com or visit our nearest branch.
- For Overseas claims, Contact ICICI Lombard 24hr Help Line number for assistance and registering your claim:
 In USA & Canada (Toll Free) +1 844 871 1200; Rest of the World (Call Back Facility) +91 124 449 8778
 National Toll Free Number 1800 102 5721; Fax Number +91 124 4006674
 Email Address icicilombard@falck.com
 OR Login to the e-claim link as provided by the Company details of which will be mentioned in the policy document or updated on the Website
 For Domestic claims, Address for claim notification: IL Health Care, ICICI LOMBARD HEALTHCARE ICICI BANK TOWER,PLOT NO.12, FINANCIAL DISTRICT, NANAKRAM GUDA, GACHIBOWLI, HYDERABAD, ANDHRA PRADESH PIN CODE: 500032 or call at 1800 2666

For ICICI Lombard General Insurance Company Limited.

Issuing Office: Mumbai
 IRDA Reg No : 115

Date : 25/05/2023
 Misc Code : 168



Name : **MR. DEVENDRA SINGH SHEKHAWAT**


Policy No. : **4168/O-TSSPL/20683/00/000**

Date of Birth : **15/05/1990**

Vaild From : **26/05/2023**

Valid To : **04/06/2023**

Assistance Service Provider : Falck India Pvt. Ltd.



Please read the below mentioned information carefully for hassle free claim settlement

24x7 Customer Helpline Number for Claim Related Inquiry

- Registration of claim is required prior to availing benefits under this policy.
- Please call the given numbers to register your claim and to confirm your coverage.
- Cashless benefits are applicable for Inpatient treatment only and not for Outpatient treatment.
- This card is only for information and does not guarantee the admissibility of claim.

USA & Canada : +1 18448711200 (Toll Free)


Rest of The World : +91 124 4498778 (Call Back Facility)

India (Toll Free) : 18001025721

Fax Number : +91 124 4006674

Email Address : icicilombard@falck.com

Assistance Service Provider : Falck India Pvt. Ltd.




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CUSTOMER INFORMATION SHEET - VOYAGER GROUP TRAVEL INSURANCE

Description is illustrative and not exhaustive

Only those covers that have been opted by You / Group administrator are mentioned in the below document

Cover Name	Covers In Brief	Some Of Major Exclusions Are -
Medical Expenses for Illness & Accidental Injury	Hospitalization Expenses for Illness & Injury Reimbursement of expenses incurred in case of hospitalization due to illness contracted or any Injury due to an Accident during the policy period	* Any treatment that is not a part of the treatment for injury or illness sustained during the policy period * Routine physical tests/vaccination/inoculations of any kind
	Outpatient Treatment for Illness & Injury Reimbursement of expenses incurred for Outpatient Treatment due to illness contracted or any Injury due to an Accident during the policy period	* Any treatment that is not a part of the treatment for injury or illness sustained during the policy period * Routine physical tests/vaccination/inoculations of any kind
Non Medical Covers	Loss of Checked-In Baggage- Pro-rated payout for pieces of baggage permanently lost whilst under the custody of common carrier vis-a-vis pieces of baggage that were checked-in	* Losses due to delay, detention, confiscation by custom officials or other public authorities
	Delay of Checked-In Baggage- Fixed payout in case the checked-in baggage is delayed beyond the period specified in policy certificate	* Delay resulting from detention/confiscation by the common carrier or any authorized agency
	Personal Accident- Lump sum payout in case of death or permanent total disablement or permanent partial disablement of the insured during the policy period	* Death or Disability arising from or resulting directly or indirectly from any illness * Amounts related to medical expenses
	Personal Liability- Reimbursement of expenses towards payment of legal liability to a third party during the covered trip arising out of accidental death, bodily injury or property damages to third party	* Liability arising directly/indirectly from, in respect of, or due to your wilful, malicious, unlawful and criminal acts
	Hijack Distress Allowance- Per day payout payable in the event of an Hijack of the Common Carrier/Public Carrier in which the insured is travelling as a fare paying passenger	* If you are in any way involved principally or as an accessory in causing or planning the hijack
	Financial Emergency Cash Allowance (lump sum)- Lump sum payout in case insured is left with no travel funds following an incident of theft, robbery, larceny etc. during the policy period	* Any loss of money not in personal custody of the insured
	Trip Cancellation- Compensation for financial loss (travel and accommodation) incurred on cancellation of trip due to unexpected events e.g. sickness, natural calamities, terrorist attack etc	* Any change of plans or disinclination on the part of the insured resulting in cancellation of the trip * In case of "Event cancellation" extension, the event should not include personal family, political, anti-national or any other event of illegal nature
	Trip Interruption or Curtailment- Compensation for the financial loss incurred in case insured's trip is interrupted and/or insured need to curtail his/her trip due to unexpected events beyond his/her control	* Any change of plans or disinclination on your part which are not results of any unforeseen circumstances outside your control * Interruption of the Trip either wholly or in part done at the instance of the authority governing the Common Carrier or the government
	Common Carrier/Public Carrier delay- Fixed payout in case of a delay in departure of the scheduled Common Carrier/Public Carrier	* For any departure which is delayed as a result of the insured or any other person accompanying the Insured on the Trip
	Missed Connection (All Common Carrier/Public Carrier)- Reimbursement for official cancellation charges and additional cost incurred to proceed with insured's planned trip in case he/she fails to access a connecting flight or connecting Common Carrier/Public Carrier due to a delayed arrival of the previous Common Carrier/Public Carrier	* For any departure which is delayed as a result of the insured or any other person accompanying the Insured on the Trip
Other Medical Covers	Burglary (Home contents)- Compensation for financial loss or damage due to burglary/attempted burglary at insured's residence while insured is on a covered trip	* Loss or damage directly or indirectly, proximately or remotely occasioned by or which arises out of or in connection with riot and strike, civil commotion, terrorist activities
	Loss of Passport / International Driving License- A fixed benefit amount shall be given to the Insured if he/she loses or damages their original Passport or International Driving License	* Loss of the passport or international driving license due to delay or confiscation or detention by the customs, police or public authorities.
	Repatriation of Remains- In the unfortunate event of the death of the insured, reimbursement of expenses incurred for transporting the remains of the deceased Insured back to the Country/Place of Residence or for a local burial or cremation in the country/place where death has occurred	* Death arising from intentional self-injury/suicide/attempted suicide
	Medical Evacuation- Reimbursement of expenses for emergency transportation and evacuation services necessitated due to any illness contracted or accidental Injury sustained during the policy period.	* Any treatment or expense mentioned as an exclusion under "hospitalization expenses for injury" and/or "hospitalization expenses for illness and injury"
	Dental Treatment- Reimbursement of expenses incurred for emergency dental treatment towards relief from sudden acute pain and/or due to an accident during the policy period	* Any cost incurred for routine dental treatment and consultation

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