

To,  
24/08/2023  
MrMIRIYALA SHANKARA RAO,  
MIAN ROAD, CHINABONDAPALLE,  
Vizianagaram, Vizianagaram,  
Andhra Pradesh - 535522,  
India.  
Contact details: +91-9491759964

Date:

URN NO:

Subject: Policy Number: **000000034713430**

Dear Customer,

Welcome to SBI General. Thank you for choosing SBI General's "**Commercial Vehicle Goods Carrying - Liability**" policy. We are delighted to have you as our esteemed customer. With this, we enclose the following documents pertaining to your policy:

- Policy Schedule
- Policy clauses & wordings
- Premium Receipt
- Grievance redressal letter

We have taken care that the documents reflect details of risk and cover as proposed by you. We request you to verify and confirm that the documents are in order. Please ensure safety of these documents as they form part of our contract with you. For all your future correspondence you may have with us, kindly quote your Customer ID and Policy No.

**Your Customer ID : 000000065644614**

**Your Policy No. : 000000034713430**

The Postal Address of your SBI General Branch that will service you in future is:

**SBI General Insurance Company Limited**

9th Floor,A&B Wing, Fulcrum Building, Sahar Road,  
Andheri East,Mumbai,Mumbai,  
Maharashtra-400099,  
1000000108

In case of any queries or suggestions, please do not hesitate to get in touch with us.You can contact us at [customer.care@sbigeneral.in](mailto:customer.care@sbigeneral.in) or call our Customer Care Number 1800-22-1111 (MTNL/BSNL user) and 1800-102-1111 (for other users)

We look forward to a continuing and mutually beneficial relationship.

Yours sincerely,



Authorized Signatory

**COMMERCIAL GOODS CARRYING VEHICLE CERTIFICATE OF INSURANCE CUM POLICY SCHEDULE**

Important Note: 1) The Validity of this Certificate of Insurance cum Schedule is subject to realization of the premium cheque. 2) This Insurance Policy cover is valid subject to availability of Complete and Correct Registration Number within 15 days from the Date of Commencement of this Policy.

Policy Issuing Office	:	9 <sup>th</sup> Floor, A&B Wing, Fulcrum Building, Sahar Road, Andheri East, Mumbai – 400099.			
Policy No	:	0000000034713430	Policy Service Branch	:	Vizag
Insured Name	:	<b>MIRIYALA SHANKARA RAO</b>			
Business or Profession	:	PROFESSION			
Address:	:	MIAN ROAD, CHINABONDAPALLE,  Vizianagaram, Vizianagaram - 535522 , Andhra Pradesh			
Customer Contact Details	:	+91-9491759964,			
Period of Insurance	:	From : <b>26/08/202300:00</b> Hours	to Midnight of:	<b>25/08/2024</b>	
Geographical Area	:	India			

INSURED MOTOR VEHICLE DETAILS		INSURED TRAILER DETAILS
Make	Mahindra & Mahindra	Trailer Registration No:
Model & Variant	Bolero Camper	Trailer Chassis No:
Year of Manufacturing	2008	Trailer Type
Registration Number	AP-35-V-0381	
Engine Number	GG81E40396	
Chassis Number	MA1ZN2GGA81E31772	
Gross Vehicle Weight (GVW)	2880	
Seating Capacity (Including Driver)	3	
Type of Body		
RTO Location Name	Vizianagaram	

**LIMITATION AS TO USE:** As per Motor Vehicle Rules, 1989, The Policy covers use of the vehicle for any purpose other than : a) Organized racing, b) Pace Making, c) Reliability Trials, d) Speed Testing, e) Use whilst drawing a trailer except the towing (other than for reward) of any one disabled Mechanically propelled vehicle (only for Passenger Carrying Vehicles).

**PERSONS OR CLASSES OF PERSONS ENTITLED TO DRIVE:** Any person including Insured

**STAGE CARRIAGE/CONTRACT CARRIAGE/ PRIVATE SERVICE VEHICLE:** Provided that the person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license.

**GOODS CARRIAGE:** Provided that the person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license. Provided also that the person holding an effective learner's license may also drive the vehicle when not used for the transport of passengers at the time of the accident and that such a person satisfies the requirements of Rule 3 of The Central Motor Vehicles Rules, 1989.

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

**LIMITS OF LIABILITY:** a. Under Section II-1(i) of the Policy-Death of or bodily injury to any person so far as it is necessary to meet the requirements of the Motor Vehicle Act, 1988. b. Under Section II (1)(ii) of the Policy-Damage to property other than property belonging to the insured or held in trust or in the custody of control or the insured up to the limits specified **Rs. 750000/-** (c) PA Cover for owner-driver under Section-III CSI - **Rs. 1500000/-**.

**PUC-Warranty:** Warranted that the insured named herein/owner of the vehicle holds a valid Pollution Under Control (PUC) Certificate and/or valid fitness certificate, as applicable, on the date of commencement of the Policy and undertakes to renew and maintain a valid and effective PUC and/or fitness Certificate, as applicable, during the subsistence of the Policy. Further, the Company reserves the right to take appropriate action in case of any discrepancy in the PUC or fitness certificate.

**Intermediary Details**

UIN No: IRDAN144RP0001V01200910

Intermediary Name	:	Policybazaar Insurance Brokers Pvt Ltd	Intermediary Code	:	0081454	
Contact Details	:	Mobile Nos	:	Landline Nos	:	+91-124-4218302
POSP Agent ID	:					

NOMINATION DETAILS			
Name of the Nominee	Date of Birth	Relationship with Proposer	Name of Appointee (in Nominee is Minor)

**Premium Computation Table**

<b>A. LIABILITY</b>			<b>PREMIUM (Rs.)</b>
Basic TP Premium			16,049.00
Trailers			
Bi fuel Kit (CNG/LPG) – TP			
Geographical Extension			0.00
<b>Additional Covers</b>			
<b>Personal Accident Cover</b>	<b>Sum Insured</b>	<b>Nos of Persons</b>	
PA to Owner Driver	1500000		325.00
PA to Paid Driver, Cleaner Conductor and Coolies			
<b>Legal Liability Cover</b>			
Legal Liability to Paid Driver		1	50.00
Legal Liability to Employees of the Insured			
Legal Liability to Cleaner Conductor Coolies		1	50.00
Legal Liability to Workmens			
Legal Liability to NFPP			
<b>Less Discounts</b>			
TPPD Discount	750000		0.00
Vehicle Restricted to Own Premises			0.00
<b>(B) TOTAL LIABILITY PREMIUM</b>			16,474.00
Subject to IMT Nos: IMT28,	<b>Total Policy Premium</b>		16,474.00
SBIG Add Nos:	<b>Taxes as applicable</b>		2,002.38
	<b>Kerala Flood Cess @1%</b>		0.00
	<b>Total Premium Collected</b>		18,476.00
Hire Purchase/ Lease /Hypothecated with	NA,	NA,	NA

Premium Collection details: Receipt No.:33591139, Receipt Date: 24/08/2023.

**For claims, Please contact us at Toll Free number  
MTNL/BSNL users – 1800-22-1111 AND for Other users - 1800-102-1111**

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

**For and on behalf of SBI General Insurance Co. Ltd**




**Authorized Signatory**

Consolidated Stamp Duty Rs.0.5/- paid towards Insurance Policy Stamps vide Order No: LOA/CSD/676/2023/(Validity Period Dt. 11/04/2023 to Dt.10/04/2024)/2017 Date:- 10/04/2023 Dated: 2023-08-24 14:39:48.00 of General Stamp Office, Mumbai

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

**Disclaimer:** Please examine this Policy including attached Schedules / Annexure if any. In the event of any discrepancy please contact the office of the Company immediately, it being noted that this Policy shall be otherwise considered as being entirely in order. Please find claims settlement & grievance redressal procedure document attached herein for ready references.

**Policy printed by: 100001on Date: 24-Aug-23Time: 11:40 AM**

<b>Branch Office Address:</b> 9th Floor,A&B Wing, Fulcrum Building,Sahar Road,Andheri East, Mumbai, Mumbai, India, Maharashtra-400099.	<b>Reference No:</b>	000047142335	
	<b>OF Receipt No:</b>	33591139	
	<b>Date:</b>	24/08/2023	
	<b>Branch Code:</b>	00021	
	<b>Party/Depositor ID:</b>	0000000065644614	
<b>RECEIPT</b>			
Received with thanks from MIRIYALA SHANKARA RAO an amount of <b>Rs.18476 (Rupees Eighteen Thousand Four Hundred and Seventy Six)</b> <b>by Internet banking</b> No: Dated : Drawn on Bank : Branch:			
<b>Party ID</b>	<b>Quote/Policy/Claim No.</b>	<b>Name of Party</b>	<b>Amount(Rs.)</b>
0000000065644614	0000000034713430	MIRIYALA SHANKARA RAO	18476
		<b>TOTAL</b>	<b>18476</b>

**Disclaimer**

- 1) Receipt subject to realisation of instrument submitted
- 2) Kindly refer to the policy document for time of commencement of cover

**For and on behalf of  
SBI General Insurance Co.  
Ltd.**



Authorized Signatory



**COMMERCIAL VEHICLE CERTIFICATE OF INSURANCE CUM POLICY SCHEDULE**

**ENDORSEMENT WORDINGS**

Attached to and forming part of the Schedule to the Policy No: **0000000034713430**

**ENDORSEMENT DESCRIPTION**

**IMT28- Legal Liability to Driver**

In consideration of an additional premium of Rs. 50/- notwithstanding anything to the contrary contained in the policy it is hereby understood and agreed that the insurer shall indemnify the insured against the insured's legal liability under the Workmen's Compensation Act, 1923, the Fatal Accidents Act, 1855 or at Common Law and subsequent amendments of these Acts prior to the date of this Endorsement in respect of personal injury to any paid driver and/or conductor and/or cleaner whilst engaged in the service of the insured in such occupation in connection with the vehicle insured herein and will in addition be responsible for all costs and expenses incurred with its written consent.

Provided always that

(1) this Endorsement does not indemnify the insured in respect of any liability in cases where the insured holds or subsequently effects with any insurer or group of insurers a Policy of Insurance in respect of liability as herein defined for insured's general employees;

(2) the insured shall take reasonable precautions to prevent accidents and shall comply with all statutory obligations;


\*(3) the insured shall keep record of the name of each paid driver conductor cleaner or persons employed in loading and/or unloading and the amount of wages and salaries and other earnings paid to such employees and shall at all times allow the insurer to inspect such records on demand.

(4) in the event of the Policy being cancelled at the request of the insured no refund of the premium paid in respect of this Endorsement will be allowed.

Subject otherwise to the terms conditions limitations and exceptions of the Policy except so far as necessary to meet the requirements of the Motor Vehicles Act, 1988.

\*In case of Private cars/ motorised two wheelers (not used for hire or reward) delete this para.



GST INVOICE										
<b>GST Invoice No:</b>	94846171					<b>GST Invoice Date:</b>		24/08/2023		
<b>GSTIN/Unique No: (SBI General)</b>	27AAMCS8857L1ZC					<b>SBI General State</b>		Maharashtra		
<b>SBI General Branch Address:</b>	<b>SBI General Insurance Company Limited</b> 9th Floor,A&B Wing, Fulcrum Building, Sahar Road, Andheri East,Mumbai,Mumbai, Maharashtra-400099, 1000000108									
<b>Details of Policy Holder:</b>										
<b>Name:</b>	Mr. MIRIYALA SHANKARA RAO									
<b>Address:</b>	MIAN ROAD, CHINABONDAPALLE, Kavithadra, Vizianagaram, Vizianagaram, Andhra Pradesh - 535522, India.									
<b>Policy Holder State</b>	Andhra Pradesh				<b>Place of supply</b>		Andhra Pradesh			
					<b>Whether invoice under Reverse Charge</b>		No			
<b>GSTIN/Unique No:</b>						<b>Policy Number</b>		0000000034713430		
Insurance Product Name	HSN Code	Premium (without Taxes)	KFC		CGST		SGST/ UTGST		IGST	
			Rate	Amount	Rate	Amount	Rate	Amount	Rate	Amount
Commercial Vehicle Goods Carrying - Liability- Other than Basic TP	997134	425.00	1%	0	9%	38.25	9%	38.25	0%	0.00
Commercial Vehicle Goods Carrying - Liability- Basic TP	997134	16,049.00	1%	0	6%	962.94	6%	962.94	0%	0.00
<b>Total Invoice Value (In Figures)</b>	18,476.00					  <b>Authorized Signatory</b>				
<b>Taxes Applicable</b>	2,002.38									

***"I/We hereby declare that though our aggregate turnover in any preceding financial year from 2017-18 onwards is more than the aggregate turnover notified under sub-rule (4) of rule 48, we are not required to prepare e-invoice in view of exemption provided to insurance companies under Notification no. 13/2020 –Central Tax dated March 21, 2020"***



**COMMERCIAL VEHICLE INSURANCE – POLICY PACKAGE**
**POLICY WORDINGS**

Whereas the Insured by a proposal and declaration dated as stated in the Schedule which shall be the basis of this contract and is deemed to be incorporated herein has applied to SBI GENERAL INSURANCE COMPANY LIMITED (herein after called “the Company”) for the insurance hereinafter contained and has paid the premium mentioned in the schedule as consideration for such insurance in respect of accidental loss or damage occurring during the period of insurance.

**NOW THIS POLICY WITNESSETH:**

That subject to the Terms Exceptions and Conditions contained herein or endorsed or expressed hereon;

**SECTION I – LIABILITY TO THIRD PARTIES**

1. Subject to the limits of liability as laid down in the Schedule hereto the Company will indemnify the Insured in the event of an accident caused by or arising out of the use of the vehicle against all sums which the Insured shall become legally liable to pay in respect of :-
  - i) death of or bodily injury to any person so far as it is necessary to meet the requirements of Motor Vehicles Act.
  - ii) damage to property other than property belonging to the Insured or held in trust or in the custody or control of the Insured.
2. The Company will pay all costs and expenses incurred with its written consent.
3. In terms of and subject to the limitations of the indemnity granted by this Section to the Insured, the Company will indemnify any driver who is driving the Motor vehicle on the Insured's order or with Insured's permission provided that such driver shall as though he/she was the Insured observe fulfill and be subject to the terms exceptions and conditions of this Policy in so far as they apply.
4. In the event of the death of any person entitled to indemnity under this Policy the Company will in respect of the liability incurred by such person indemnify his/her personal representative in terms of and subject to the limitations of this Policy provided that such personal representative shall as though such representative was the insured observe fulfill and be subject to the terms exceptions and conditions of this Policy in so far as they apply.
5. The Company may at its own option
  - a. arrange for representation at any Inquest or Fatal Inquiry in respect of any death which may be the subject of indemnity under this Policy
  - and
  - b. undertake the defence of proceedings in any Court of Law in respect of any act or alleged offence causing or relating to any event which may be the subject of indemnity under this Policy.

**AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY**

Nothing in this Policy or any endorsement hereon shall affect the right of any person indemnified by this Policy or any other person to recover an amount under or by virtue of the provisions of the Motor Vehicles Act.

But the Insured shall repay to the Company all sums paid by the Company which the Company would not have been liable to pay but for the said provision.

**APPLICATION OF LIMITS OF INDEMNITY**

In the event of any accident involving indemnity to more than one person, any limitation by the terms of this Policy and/or of any Endorsement thereon of the amount of any indemnity shall apply to the aggregate amount of indemnity to all persons indemnified and such indemnity shall apply in priority to the Insured.

**SECTION II – PERSONAL ACCIDENT COVER FOR OWNER-DRIVER**

Subject otherwise to the terms exceptions conditions and limitations of this Policy, the Company undertakes to pay compensation as per the following scale for bodily injury/ death sustained by the owner-driver of the vehicle in direct connection with the vehicle insured or whilst mounting into/dismounting from or traveling in the insured vehicle as a co-driver, caused by violent accidental external and visible means which independent of any other cause shall within six calendar months of such injury result in:

Nature of injury	Scale of compensation
(i) Death	100%
(ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye	100%
(iii) Loss of one limb or sight of one eye	50%
(iv) Permanent total disablement from injuries other than named above	100%

Provided Always that:

- A. Compensation shall be payable under only one of the items (i) to (iv) above in respect of the owner-driver arising out of any one occurrence and the total liability of the Company shall not in the aggregate exceed the sum of Rs..... during any one period of insurance.
- B. No compensation shall be payable in respect of death or bodily injury directly or indirectly wholly or in part arising or resulting from

or traceable to (1) intentional self injury suicide or attempted suicide physical defect or infirmity or (2) an accident happening whilst such person is under the influence of intoxicating liquor or drugs.

**This cover is subject to**

- (a) the owner-driver is the registered owner of the vehicle insured herein;
- (b) the owner-driver is the insured named in this Policy.
- (c) the owner-driver holds an effective driving license, in accordance with the provisions of Rule 3 of the Central Motor Vehicles Rules, 1989, at the time of the accident.

**GENERAL EXCEPTIONS**

(Applicable to all Sections of the Policy)

1. The Company shall not be liable in respect of any claim arising whilst the vehicle insured herein

- (a) Being used otherwise than in accordance with the 'Limitations as to Use' or
- (b) Being driven by or is for the purpose of being driven by him/her in the charge of any person other than a Driver as stated in the Driver's Clause.

2. The Company shall not be liable in respect of any claim arising out of contractual liability.

3. Except so far as is necessary to meet the requirements of the Motor Vehicles Act, the Company shall not be liable in respect of death arising out of and in the course of employment of a person in the employment of the Insured or in the employment of any person who is indemnified under this Policy or bodily injury sustained by such person arising out of and in the course of such employment.

4. Except so far as is necessary to meet the requirements of the Motor Vehicles Act, the Company shall not be liable in respect of death or bodily injury to any person (other than a passenger carried by reason of or in pursuance of a contract of employment) being carried in or upon or entering or mounting or alighting from the motor vehicle at the time of the occurrence of the event out of which any claim arises.

5. The Company shall not be liable in respect of any liability directly or indirectly or proximately or remotely occasioned by contributed to by or traceable to or arising out of or in connection with war, invasion, the act of foreign enemies, hostilities or warlike operations (whether before or after declaration of war) civil war, mutiny rebellion, military or usurped power or by any direct or indirect consequence of any of the said occurrences and in the event of any claim hereunder the Insured shall prove that the accidental loss damage and/or liability arose independently of and was in no way connected with or occasioned by or contributed to by or traceable to any of the said occurrences or any consequences thereof and in default of such proof, the Company shall not be liable to make any payment in respect of such a claim.

6. The Company shall not be liable in respect of any liability directly or indirectly caused by or contributed to by or arising from nuclear weapons material.

**CONDITIONS**

This Policy and the Schedule shall be read together and any word or expression to which a specific meaning has been attached in any part of this Policy or of the Schedule shall bear the same meaning wherever it may appear.

1. Notice shall be given in writing to the Company immediately upon the occurrence of any accidental loss or damage in the event of any claim and thereafter the Insured shall give all such information and assistance as the Company shall require. Every letter claim writ summons and/or process or copy thereof shall be forwarded to the Company immediately on receipt by the insured. Notice shall also be given in writing to the Company immediately the Insured shall have knowledge of any impending prosecution, inquest or fatal inquiry in respect of any occurrence which may give rise to a claim under this Policy.

2. No admission offer promise payment or indemnity shall be made or given by or on behalf of the Insured without the written consent of the Company which shall be entitled if it so desires to take over and conduct in the name of the Insured the defence or settlement of any claim or to prosecute in the name of the Insured for its own benefit any claim for indemnity or otherwise and shall have full discretion in the conduct of any proceedings or in the settlement of any claim and the Insured shall give all such information and assistance as the Company may require. If the Company shall make any payment in settlement of any claim and such payment includes any amount not covered by this Policy, the insured shall repay to the Company the amount not so covered.

3. The Insured shall take all reasonable steps to maintain the insured vehicle in efficient condition and the Company shall have at all times free and full access to examine the vehicle or any part thereof or any driver or employee of the Insured.

4. The Company may cancel the Policy by sending seven days notice by recorded delivery to the Insured at Insured's last known address and in such event will return to the Insured the premium paid less the pro rata portion thereof for the period the Policy has been in force or the Policy may be cancelled at any time by the Insured on seven days' notice by recorded delivery and provided no claim has arisen during the currency of the Policy, the Insured shall be entitled to a return of premium less premium at the Company's Short Period rates for the period the Policy has been in force. Return of the premium by the Company will be subject to retention of the minimum premium of Rs. 250/- (Private Car & Commercial Vehicles) and Rs.100/- for Motorised Two Wheelers (or Rs.25/- in respect of vehicles specifically designed/modified for use by blind/handicapped/mentally challenged persons). Where the ownership of the vehicle is transferred, the Policy cannot be cancelled unless evidence that the vehicle is insured elsewhere is produced.

5. If at the time of occurrence of an event that gives rise to any claim under this Policy there is in existence any other insurance covering the same liability, the Company shall not be liable to pay or contribute more than its ratable proportion of any compensation, cost or expense.

6. If any dispute or difference shall arise as to the quantum to be paid under this Policy (liability being otherwise admitted), such difference shall independent of all other questions be referred to the decision of a sole arbitrator to be appointed in writing by the parties to the dispute or if they cannot agree upon a single arbitrator within 30 days of any party invoking Arbitration, the same shall be referred to a panel of three arbitrators comprising two arbitrators one to be appointed by each of the parties to the dispute / difference, and a third arbitrator to be appointed by such two arbitrators who shall act as the presiding arbitrator and Arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996.

It is clearly agreed and understood that no dispute or difference shall be referable to Arbitration as hereinbefore provided, if the Company has disputed or not accepted liability under or in respect of this Policy.

It is hereby expressly stipulated and declared that it shall be condition precedent to any right of action or suit upon this Policy that the award by such arbitrator/ arbitrators of the amount of the loss or damage shall be first obtained.

It is also hereby further expressly agreed and declared that if the Company shall disclaim liability to the insured for any claim hereunder and such claim shall not, within twelve calendar months from the date of such disclaimer have been made the subject matter of a suit in a court of law, then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable hereunder.

7. The due observance and fulfillment of the terms, conditions and endorsements of this Policy in so far as they relate to anything to be done or complied with by the Insured and the truth of the statements and answers in the said proposal shall be conditions precedent to any liability of the Company to make any payment under this Policy.

8. In the event of the death of the sole Insured, this Policy will not immediately lapse but will remain valid for a period of three months from the date of the death of Insured or until the expiry of this Policy (whichever is earlier). During the said period legal heir(s) of the Insured to whom the custody and use of the motor vehicle passes may apply to have this Policy transferred to the name(s) of the heir(s) or obtain a new insurance policy for the motor vehicle. Where such legal heir(s) desire(s) to apply for transfer of this Policy or obtain a new policy for the vehicle such heir(s) should make an application to the Company accordingly within the aforesaid period. All such applications should be accompanied by:-

- a) Death Certificate in respect of the Insured
- b) Proof of title to the vehicle
- c) Original Policy

## CLAIM SETTLEMENT

The Company will settle the claim under this Policy within 30 days from the date of receipt of necessary documents required for assessing the claim. In the event that the Company decides to reject a claim made under this Policy, the Company shall do so within a period of thirty days of the Survey Report or the additional Survey Report, as the case may be, in accordance with the provisions of Protection of Policyholders' Interest Regulations 2017.

## GRIEVANCE REDRESSAL PROCEDURE

Dear Customer

We value your relationship and are committed to offer you best in class customer service.

However if you are dissatisfied with the services rendered by us during any of your interactions with us or on resolution provided by us on your service request or complaint, we request you to register your concern with our Customer Care Team by following the steps mentioned below.

We will acknowledge receipt of your concerns within next 72 working hours & will respond to you as soon as possible upon completion of the investigation.

### Step 1:

Call us at Toll free nos: 1800 - 102- 1111 & 1800-22-1111 from Monday to Saturday (08.00 am - 8.00 pm) or write to us at

[customer.care@sbigeneral.in](mailto:customer.care@sbigeneral.in). If you don't hear from us within 48 hrs please follow step 2

### Step 2:

If you are dissatisfied with the resolution provided, please Email to

Head – customer care at [head.customer.care@sbigeneral.in](mailto:head.customer.care@sbigeneral.in). If after having followed Steps 1 & Step 2 your issue remains unresolved for more than 30 days from the date of filing your first complaint, you may approach the Insurance Ombudsman for Redressal of your Grievance.

The list of Insurance Ombudsman offices along with their area of jurisdiction is attached herewith.

Ombudsman Offices	
Areas of Jurisdiction	Addresses of the Ombudsman Offices
State of Gujarat and Union Territories of Dadra & Nagar Haveli and Daman and Diu.	<b>AHMEDABAD</b> 2 <sup>nd</sup> Floor, Shree Jayshree Ambica Chambers, Nr. C U Shah College, 5, Navyug Colony, Ashram Road, AHMEDABAD-380014 Tel: 27546150, Fax: 079-27546142 Email: <a href="mailto:insombalhd@rediffmail.com">insombalhd@rediffmail.com</a>
States of Madhya Pradesh and Chhattisgarh.	<b>BHOPAL</b> Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp. Airtel, Bhopal – 462 011. Tel.: 0755-2769200/201/202 Fax:- 0755-2769203 Email: <a href="mailto:bimalokpalbhopal@airtelmail.in">bimalokpalbhopal@airtelmail.in</a>
State of Orissa.	<b>BHUBANESWAR</b> 62, Forest Park, BHUBANESWAR-751 009. Tel: 2535220, Fax: 0674-2531607 Email: <a href="mailto:susantamishra@yahoo.com">susantamishra@yahoo.com</a> , <a href="mailto:ioobbsr@vsnl.net">ioobbsr@vsnl.net</a>
States of Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir and Union territory of Chandigarh.	<b>CHANDIGARH</b> S.C.O No.101,102 & 103, 2 <sup>nd</sup> Floor, Batra Building, Sector 17 D, CHANDIGARH-160 017 Tel: 2706196 EPBX:0172-2706468 Fax: 0172-2708274

	Email: ombchd@yahoo.co.in
State of Tamil Nadu and Union Territories - Pondicherry Town and Karaikal (which are part of Union Territory of Pondicherry).	<b>CHENNAI</b> Fatima Akhtar Court , 4 <sup>th</sup> Floor, 453 (Old 312) Anna Salai, Teynampet, CHENNAI-600 018 Tel: 24333678, 24333668, 24335284 Fax: 044-24333664 Email:insombud@md4.vsnl.net.in
States of Delhi and Rajasthan.	<b>DELHI</b> 2/2 A, Universal Insurance Bldg, Asaf Ali Road, NEW DELHI-110 002 Tel: 23239611, Fax: 011-23230858 Email: nsombudsmandel@netcracker.com
States of Andhra Pradesh, Karnataka and Union Territory of Yanam - a part of the Union Territory of Pondicherry.	<b>HYDERABAD</b> 6-2-46, Yeturu Towers, Lane Opp. Saleem Function Palace, A C Guards, Lakdi-Ka-Pool, HYDERABAD-500 004 Tel: 55574325, Fax:040-23376599 Email:insombud@hd2.vsnl.net.in
State of Kerala and Union Territory of (a) Lakshadweep (b) Mahe-a part of Union Territory of Pondicherry.	<b>KOCHI</b> 2 <sup>nd</sup> Floor, CC 27/2603 Pulinat Bldg, Opp. Cochin Shipyard, M G Road, ERNAKULAM-682 015 Tel: 2373334, 2350959, Fax:0484-2373336 Email:insuranceombudsmankochi@hclinfinet.com
States of West Bengal, Bihar, Sikkim, Jharkhand and Union Territories of Andaman and Nicobar Islands.	<b>KOLKATA</b> Hindustan Bldg. Annexe, 4, C.R. Avenue, 4th Floor, KOLKATA - 700 072. TEL : 033-22124346/22124339 Fax : 033-22124341 Email:- <a href="mailto:insombudsmankolkata@gmail.com">insombudsmankolkata@gmail.com</a>
States of Uttar Pradesh and Uttaranchal.	<b>LUCKNOW</b> Jeevan Bhavan, Phase 2, 6 <sup>th</sup> floor, Nawal Kishore Road, Hazaratganj, LUCKNOW-226001 Tel: 0522-2201188, 2231330, 2231331 Fax:0522-2231310 E-mail: <a href="mailto:joblko@sancharnet.in">joblko@sancharnet.in</a>
States of Maharashtra and Goa.	<b>MUMBAI</b> 3 <sup>rd</sup> Floor, Jeevan Seva Annexe (above MTNL), S V Road, Santacruz (W), Mumbai-400 054 Tel: 26106889, EPBX:022-26106889 Fax:022-26106052, 26106980 Email:ombudsman.i@hclinfinet.com
States of Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.	<b>GUWAHATI</b> 'Jeevan Nivesh', 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati – 781001(ASSAM). Tel:- 0361-2132204/2131307/2132205 Fax:- 0361-2732937 Email:- <a href="mailto:ombudsmanghy@rediffmail.com">ombudsmanghy@rediffmail.com</a>

#### Address and contact number of Governing Body of Insurance Council

Secretary General  
Governing Body of Insurance Council  
Jeevan Seva Annexe, 3<sup>rd</sup> Floor (Above MTNL)  
S. V. Road, Santacruz (W), Mumbai – 400 054  
Tel: 022-6106889  
Fax: 022-6106980, 6106052  
Email: [inscoun@vsnl.net](mailto:inscoun@vsnl.net)

#### Integrated Grievance Management System

IRDA has launched the Integrated Grievance Management System (IGMS). IGMS is a grievance redress monitoring tool for IRDA. Policyholders who have grievances should register their complaints with the Grievance Redress Channel of the Insurance Company first. If policyholders are not able to access the insurance company directly for any reason, IGMS provides a gateway to register complaints with insurance companies.

Complaints shall be registered with insurance companies first and only if need be, be escalated them to IRDA (Consumer Affairs Department).

Website: [http://www.policyholder.gov.in/Integrated\\_Grievance\\_Management.aspx](http://www.policyholder.gov.in/Integrated_Grievance_Management.aspx)

Toll Free Number of IRDA Grievance Call Centre: 155255

Timings: 8 AM to 8 PM -- (Monday to Saturday)