



Digitally Signed by  
Reliance General Insurance  
Company Limited Date:  
26-04-2025

| <u><b>Reliance Corporate Flexi Travel Care Insurance Policy</b></u>  |                                       |   |                                   |  |                            |  |  |  |
|--|---------------------------------------|---|-----------------------------------|--|----------------------------|--|--|--|
| <b>Policy Issuing Office:</b>  |                                       | <b>Policy Servicing Office Name &amp; Address-</b>  |                                   |  |                            |  |  |  |
| Reliance General Insurance Company Limited<br>6th Floor, Oberoi Commerz, International Business Park, Oberoi Garden City, Off Western Express Highway, Goregaon (East), Mumbai - 400 063.<br>Branch Contact No. : 022-33031000 |                                       | Reliance General Insurance Company Limited 6th Floor, Oberoi Commerz, International Business Park, Oberoi Garden City, Off Western Express Highway, Goregaon (East), Mumbai - 400 063 |                                   |  |                            |  |  |  |
| <b>Certificate No.</b> - 123456789   |                                       | <b>Master Policy No.</b> – RGICL-MP-2024  |                                   |  |                            |  |  |  |
| Br. Code- BR-123   | PSO No. - PSO-1234                    | Dept. - Dept-101  | <b>Intermediary Code</b> - INT123 |  |                            |  |  |  |
| <b>Tax Invoice No &amp; Date :</b> 123456789 & 26-04-2025  |                                       |   |                                   |  |                            |  |  |  |
| <b>Details of the Insured</b>  |                                       |   |                                   |  |                            |  |  |  |
| Name of the Policy Holder  | XXXX                                  |   |                                   |  |                            |  |  |  |
| Address of the policy holder   | XXXXXXXXX                             |   |                                   |  |                            |  |  |  |
| <b>Details of the Insured Person</b>   |                                       |   |                                   |  |                            |  |  |  |
| Name of the Insured Person   | Passport No.                          | Gender  | Nominee Name                      | Relationship of the Nominee with the Insured Person                          | ABHA ID or ABHA address    |  |  |  |
| John Doe   | P1234567                              | Male  | Jane Doe                          | Wife   | N/A                        |  |  |  |
| <b>Communication Address &amp; Place of Supply</b>   |                                       |   |                                   |  |                            |  |  |  |
| E mail id  | 123 Street Name, City, State, 123456  |   |                                   |  |                            |  |  |  |
| Telephone Number   | 022-XXXXXXX                           |   |                                   |  |                            |  |  |  |
| <b>GSTIN / UIN Of Insured : EUROP ASSISTANCE GST No.</b>   |                                       |   |                                   |  |                            |  |  |  |
| Geographical Coverage  | xxxx                                  |   |                                   |  |                            |  |  |  |
| Country Visiting   |                                       |   |                                   |  |                            |  |  |  |
| Policy Period  | <b>XXXX to XXX time 00:00 XX days</b> |   |                                   |  |                            |  |  |  |
| Name of the Plan opted   | XXX                                   |   |                                   |  |                            |  |  |  |
| Any Pre existing disease   | NO                                    |   |                                   |  |                            |  |  |  |
| <b>Policy Coverage</b>   |                                       |   |                                   | <b>Sum Insured (in INR)</b>  | <b>Deductible (in INR)</b> |  |  |  |
| Medical Expenses Including Transportation, Evacuation & Repatriation of Mortal remains   |                                       |   |                                   | 60,000   | 100                        |  |  |  |
| Dental Treatment   |                                       |   |                                   | 500  | 100                        |  |  |  |
| Loss of Passport   |                                       |   |                                   | 300  | 50                         |  |  |  |
| Total Loss of Checked in baggage   |                                       |   |                                   | 1,000  | NIL                        |  |  |  |
| Delay of Checked in Baggage  |                                       |   |                                   | 100  | 6 Hours                    |  |  |  |
| Personal Liability   |                                       |   |                                   | 25,000   | NIL                        |  |  |  |
| Daily Allowance in case of Hospitalisation   |                                       |   |                                   | 25 per day (5 days max)  | 2 days                     |  |  |  |
| Hijack Distress Allowance  |                                       |   |                                   | 50 per day (7 days max)  | 12 Hours                   |  |  |  |
| Trip Delay   |                                       |   |                                   | 150  | 12 Hours                   |  |  |  |
| Trip Cancellation & Interruption   |                                       |   |                                   | 600  | NIL                        |  |  |  |
| Missed Connection  |                                       |   |                                   | 200  | NIL                        |  |  |  |
| Compassionate visit  |                                       |   |                                   | Return Fare for any one accompanying person - spouse / child / family doctor | NIL                        |  |  |  |

|   |          |     |
|---|----------|-----|
| Home Burglary Insurance (Amount in Indian Rs) | 1,00,000 | NIL |
| Personal Accident                             | 20,000   | NIL |
| Personal Accident                             | 20,000   | NIL |
| Accidental Death-Common Carrier               | 2,500    | NIL |
| Any one illness                               | 15,000   | NIL |
| Any one Accident                              | 22,500   | NIL |

Consolidated Stamp duty Paid vide Letter of Authorisation "NO LOA/ENF-1/CSD/70/2024-25/(Validity Period Dt. 01/11/2024 to Dt. 01/12/2025)/5162 Date 30-10-2024" at General Stamp Office, Mumbai.  
\*\* Not Applicable for the State of Jammu & Kashmir

### Specific Condition

1. This policy is applicable for registered customers who have successfully booked for travel assistance services from Interstellar Services Private Ltd.
2. Warranted that every customer shall have a unique membership ID issued by Interstellar Services Private Ltd.
3. The policy will not cover insured/insured person who is less than 03 months and more than 80 years of age (as on completed birthday).
4. Warranted that insured is a citizen of India and has a permanent place of residence in India and is not an NRI or OCI or foreign national and was within the territory of India at the time of issuance of the policy and before the commencement of the trip.
5. Warranted that purpose of visit will be either leisure or personal business only.
6. Warranted that declaration of any pre-existing condition, using words/terms which mean any disease/illness similar to - Cancer / Leukemia / Malignant Tumor, Cardiac ailments, COPD, HIV/AIDS, Insulin Dependent Diabetes, Kidney Ailment, Liver Disease, Neurological Disorder / Stroke / Paralysis, Thalassemia will render this policy null and void-ab-initio and the company shall have no liability under the policy – clean health history required.
7. Any expenses related to pre-existing illness/disability/diseases and its related complications/consequences are not payable under the policy except for life-saving unforeseen emergency measures provided to the Insured/Insured Person by the Physician for hospitalization arising out of a pre-existing disease. The treatment for these emergency measures would be paid until the Insured/Insured Person becomes medically stable up to the sum insured opted. All further medical costs to maintain medically stable or to prevent the onset of acute pain would be borne by the Insured/Insured Person.
8. Repatriation of Mortal Remains: USD 7,500.
9. Warranted that the maximum amount payable per checked-in baggage in case more than one bag has been checked in is 50% (100% for only one checked-in baggage) of the applicable Sum Insured, and per item in baggage, the max is 10%.
10. Insurance cover shall become voidable at the option of the Company in the event of any untrue or incorrect statement, misrepresentation, non-description, or non-disclosure of any material particular in the proposal form/personal statement, declaration, and connected documents, or any material information has been withheld by the beneficiary or anyone acting on behalf of the beneficiary to obtain insurance benefit.
11. Any claim arising out of sporting activities insofar as they involve the training or participation in competitions of professional or semi-professional sports persons is excluded.
12. Medical/Hospitalization expenses due to COVID-19 infection are covered if contracted during travel as per policy terms and conditions.
13. Total Premium of Rs inclusive of 18% GST has been paid to RGIC.

### Exclusions:

1. Any pre-existing medical conditions and their related complications/consequences.
2. Travelling against the advice of a physician.
3. Receiving or being on a waiting list for a specified medical treatment.
4. Travelling to receive treatment.
5. Being under a terminal prognosis for a medical condition.
6. Partial loss of checked baggage – only the loss of your entire baggage is covered, not partial loss.
7. War or nuclear perils in the country you're visiting.
8. Treatment which could reasonably be delayed until the insured/insured person's return to the Republic of India.
9. Any Travel to Declined countries: -Afghanistan, Myanmar (Burma), Democratic Republic of Congo, East Timor, Eritrea, Iran, Iraq, Liberia, Libya, North Korea, Rwanda, Sierra Leone, Somalia, Sudan, Syria, Yemen, Congo, Republic of (Brazzaville), Timor-Leste (East Timor), Zaire, Ukraine, Pakistan. The list of declined countries may undergo change from time to time depending on the geo-political situation in the respective country.
10. Any claim relating to events occurring before the commencement of the cover or outside the period of insurance.

For complete list of exclusions, terms and conditions kindly refer policy wordings.

In witness whereof this policy has been signed at Mumbai on :**-DD-MM-YYYY**

**GSTIN :** 27AABCR6747B1ZG    **SAC :** 997142    Description of Services : Accident and Health Reinsurance Service

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

"In case of a renewal, the benefits provided under the policy and/or terms and conditions of the policy including premium rate may be subject to change".

**Grievance Clause:-**

For resolution of any query or grievance, Insured may contact the respective branch office of the Company or may call at 02248903009 or may write an email at [rgicl.services@relianceada.com](mailto:rgicl.services@relianceada.com). In case the insured is not satisfied with the response of the office, insured may contact the Nodal Grievance Officer of the Company at [rgicl.grievances@relianceada.com](mailto:rgicl.grievances@relianceada.com). In the event of unsatisfactory response from the Nodal Grievance Officer, insured may email to Head Grievance Officer at [rgicl.headgrievances@relianceada.com](mailto:rgicl.headgrievances@relianceada.com). In the event of unsatisfactory response from the Head Grievance Officer, he/she may, subject to vested jurisdiction, approach the Insurance Ombudsman for the redressal of grievance. Details of the offices of the Insurance Ombudsman are available at IRDAI website [www.irda.gov.in](http://www.irda.gov.in) or on company website [www.reliancegeneral.co.in](http://www.reliancegeneral.co.in) or on [www.gbic.co.in](http://www.gbic.co.in). The insured may also contact the following office of the Insurance Ombudsman within whose territorial jurisdiction the branch or office of the Company is located. 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@gbic.co.in](mailto:bimalokpal.mumbai@gbic.co.in) | 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.: 020-41312555 Email: [bimalokpal.pune@gbic.co.in](mailto:bimalokpal.pune@gbic.co.in)

**Category-General Insurance Business Service 00440005**

For and on behalf of Reliance General Insurance Company Limited.

Authorized Signatory

Note: The policy wording with detailed terms, conditions and exclusions are available on our website [www.reliancegeneral.co.in](http://www.reliancegeneral.co.in). The policy has been issued based on the information provided by you/your health of the life to be insured / proposer after the proposal has been submitted but before communication of the risk acceptance by the Company.

Europ Assistance India Pvt Ltd.

7th Floor, Star Hub, Bldg No. 2, Near ITC Maratha Hotel, Sahar, Andheri East, Mumbai – 400 059.

Please provide immediate intimation of any claim / requirement for emergency assistance while abroad to ensure that the Claim is not prejudiced. Please contact the International Toll Free Helpline numbers given below.



**In case of any requirement for emergency assistance whilst abroad, please contact the toll free helpline numbers given below:**

This document shall be treated as a Tax Invoice as per Rule 46 of the Central Goods and Services Tax Rules 2017  
International Toll Free line: Singapore and Thailand — 001-80099441111, Hong Kong — 001-80099441111 and 006-80099441111, USA — 18337426673, Canada — 011-80099441111, Australia — 0011-80099441111, Japan — 001-010-80099441111 and 010-80099441111, Israel — 00-80099441111 and 014-80099441111, Greece — 86002038017, Argentina, Austria, Belgium, China, Czech Republic, Denmark, France, Germany, Hungary, Italy, Malaysia, Netherlands, New Zealand, Norway, Philippines, Poland, Portugal, South Africa, Spain, Sweden, Switzerland, Taiwan & United Kingdom — 00-80099441111

**Note:** Kindly refer our website for updated new toll free numbers with effect from 1st October 2017 onwards.

|  |   |                                    |
|--|---|------------------------------------|
| <b>Dedicated National Toll Free Help Line: 1800 209 5522</b> | <b>Land Line: +91 22 67347843 &amp; +91 22 67347844</b> | <b>Fax Number: +91 22 67347888</b> |
|--|---|------------------------------------|

|  |  |
|--|--|
| <b>Email: <a href="mailto:reliance@europ-assistance.in">reliance@europ-assistance.in</a></b> | <b>Website: <a href="http://www.europ-assistance.com">www.europ-assistance.com</a></b> |
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|                                       |
|---------------------------------------|
| <b>Intermediary Code/Name: Direct</b> |
|---------------------------------------|

### **Prohibition of Rebates - Section 41 of the Insurance Act, 1938 as amended by Insurance Laws (Amendment) Act, 2015.**

1. No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectuses or tables of the insurer.
2. Any person making default in complying with the provisions of this section shall be liable for a penalty which may extend to ten lakh rupees.

**Note:** The Policy copy and all related documents shall be sent to the email ID provided above. If you wish to receive the Policy copy and related documents in physical form to the aforesaid communication address, please drop us an email at rgicl.services@relianceada.com

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Reliance General Insurance Company Limited.

IRDAI Registration No. 103

An ISO 9001:2015 Certified Company

**Registered & Corporate Office:** Reliance General Insurance Company Limited 6th Floor, Oberoi Commerz, International Business Park, Oberoi Garden City, Off Western Express Highway, Goregaon (East), Mumbai – 400 063.

**Corporate Identity No.** U66603MH2000PLC128300. **UIN No.** RELTIOP07004V010607. Trade Logo displayed above belongs to Anil Dhirubhai Ambani Ventures Private Limited and used by Reliance General Insurance Company Limited under License. RGI/UW/CO/2822/PS/1.0/010218.