

CUSTOMER INFORMATION SHEET

THIS DOCUMENT PROVIDES KEY INFORMATION ABOUT YOUR POLICY. YOU ARE ALSO ADVISED TO GO THROUGH YOUR POLICY DOCUMENT.

SI NO.	TITLE	DESCRIPTION (PLEASE REFER TO APPLICABLE POLICY CLAUSE NUMBER IN NEXT COLUMN)	Refer to policy clause number
1.	Name of Insurance Product/Policy	FINANCIAL PROTECTION PERSONAL ACCIDENT POLICY	
2.	Policy number	XXXXXXXXXXXXXXXXXXXXXXXXXXXX	
3.	Type of Insurance Product/Policy	Both Benefit and Indemnity Policy	
4.	Sum Insured (Basis) (Along with amount)	XXXXXXXXXXXXXXXXXXXX	
5.	Policy Coverage (What the policy covers?) (Policy clause Number/s)	Benefit 1: Death arising out of an Injury If the Insured Person shall sustain any injury, resulting solely and directly, from an accident during the Cover Period and if such injury shall within twelve calendar months of its occurrence be the sole and direct cause of the death of the Insured Person, then the Company shall be liable to pay the Sum Insured to Nominee / Legal Heir / Assignee as stated in the Policy Schedule/Certificate of Insurance applicable to Benefit I hereto, applicable to such Insured Person. Benefit 2: Permanent Total Disability arising out of an Injury If the Insured Person shall sustain any injury, resulting solely and directly, from an accident during the Cover Period and if such injury shall within twelve calendar months of its occurrence be the sole and direct cause of the total and irrecoverable loss of: - Sight of both eyes, or of the actual loss by physical separation of two entire hands or two entire feet, or of one entire hand and one entire foot, or of such loss of sight of one eye and such loss of one entire hand or one entire foot, or - Use of two hands or two feet, or of one hand and one foot, or of such loss of sight of one eye and such loss of use of one hand or one foot, or - Immediate, permanent, total and absolute disablement of the Insured from engaging in any gainful employment or occupation of any description whatsoever. NOTE: For the purpose of above 'physical separation' of a hand means separation at or above the wrist and of the foot means at or above the ankle Benefit 3: Permanent Partial Disability arising out of an Injury If the Insured Person shall sustain any injury, resulting solely and directly, from an accident during the Cover Period and if such injury shall within twelve calendar months of its occurrence be the sole and direct cause of the total and/or partial and irrecoverable loss of use or of the actual loss by physical separation as per description of loss (mentioned in the policy wording), then the Company shall be liable to pay such percentage of the Sum Insured as mentioned in the table of benefits as applicable to such Insured Person stated in the Policy Schedule/Certificate of Insurance under Benefit 3 to Insured Person / Nominee / Legal Heir / Assignee as stated in the Policy Schedule/Certificate of Insurance.	Section 1

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IRDAI Registration No. 103 IndusInd General Insurance Company Limited (Formerly known as Reliance General Insurance). An ISO 9001:2015 Certified Company For complete details on the benefits, coverage, terms & conditions and exclusions, do read the sales brochure, prospectus and policy wordings carefully before concluding sale. Registered & Corporate Office: 6th Floor, Oberoi Commerz, International Business Park, Oberoi Garden City, Off. Western Express Highway, Goregaon (E), Mumbai-400063. Corporate Identity Number: U66603MH2000PLC128300. Financial Protection Personal Accident Policy. UIN No.: RELPAGP18103V011718. IGI/MCOM/CO/FPPAP/CIS/VER.1.0/200326.



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Benefit 4: Temporary Total Disability arising out of an Injury

If the Insured Person shall sustain any injury, resulting solely and directly, from an accident during the Cover Period and if such injury shall be the sole and direct cause of the temporary total disablement, then so long as the Insured Person shall be totally disabled from engaging in any employment or occupation of any description whatsoever, the Company shall be liable to reimburse the expenses, upto a maximum of the Sum Insured << as mentioned in the Policy Schedule/Certificate of Insurance>>

This benefit which is available only for salaried class people is payable after 3 days of deductible and is intended as a compensation for any loss of earnings as a result of the Accidental Injury and inability to engage in the regular occupation.

Benefit 5: Education Grant

If the Insured Person shall sustain any injury, resulting solely and directly, from an accident during the Cover Period, and if such injury shall within twelve calendar months of its occurrence be the sole and direct cause of the death of the Insured Person, the Company hereby agrees to pay Sum Insured « as mentioned in Policy Schedule/Certificate of Insurance» as Education grant for the dependent child / children to Dependent child / children / Legal Guardian

Benefit 6: Modification of Residence / Vehicle

The Company shall be liable to reimburse the expenses, upto a maximum of the Sum Insured << as mentioned in the Policy Schedule/Certificate of Insurance>> as applicable to such Insured Person stated in the Policy Schedule/Certificate of Insurance under Benefit 6, which are incurred as per medical advise for modification of the Insured Person's Residential accommodation and / or Vehicle.

Benefit 7: Burns

If the Insured Person shall sustain any burn injury, resulting solely and directly, from an accident during the Cover Period, and if such injury shall within ninety days of its occurrence be the sole and direct cause of burn injuries as defined in the policy wording , then the Company shall be liable to pay such percentage of the Sum Insured as applicable to such Insured Person stated in the Policy Schedule / Certificate of Insurance under Benefit 7 to Insured Person as stated in the Policy Schedule/Certificate of Insurance.

Benefit 8: Broken Bones

If the Insured Person shall sustain any injury, resulting solely and directly, from an accident during the Cover Period, and if such injury, within ninety days of its occurrence, results in any Fracture as defined in the policy wording, then the Company shall be liable to pay such percentage of the Sum Insured as applicable to such Insured Person as stated in the Policy Schedule / Certificate of Insurance under Benefit 8 to Insured Person as stated in the Policy Schedule/Certificate of Insurance.

6. Exclusions (What the policy does not covers)

- i. Any pre-existing disability/ accidental injury.
- ii. Childbirth or from pregnancy or in consequence thereof
- iii. Any organ/bodily part being directly or indirectly being non-functional, partially or totally, caused by bacterial or viral infections, venereal disease or insanity or mental, nervous or emotional disorder (Except pyogenic infection which occurs through an Accidental cut or wound) / Hernia
- iv. Any organ/bodily part being directly or indirectly being non-functional, partially or totally, caused by parasite.
- v. Claim in respect of any Insured Person under Benefit 8 arising directly or indirectly due to any of the following shall not be admissible:

Section 2

Section 2

- a) Sickness or disease.
- b) Any fracture due to osteoporosis or a malignant disease.
- c) Any hair line fracture.
- d) If Valid claim under Temporary total disablement arising out of an Injury
- vi. Claim in respect of any Insured Person under Benefit 6 arising directly or indirectly due to any of the following shall not be admissible:
 - a) Any expenses incurred in excess of the amount that would have usually been incurred had the Insured Person not been insured under this Policy.
 - b) Any modifications or alterations not compliant with the applicable law.
- vii. Medical or Surgical Treatment except as necessary solely and directly as a result of accident
- viii (a) From intentional self-injury, suicide or attempted suicide,
- ix. (b) Whilst engaging in aviation or ballooning whilst mounting into, dismounting from or travelling in any aircraft or balloon other than as a passenger (fare paying or otherwise) in any duly licensed standard type of aircraft anywhere in the world,
- (c) Directly or indirectly caused by venereal diseases, AIDS or insanity,
- (d) From sickness,
- x. 'Standard type of aircraft' means any aircraft duly licensed to carry passengers (for hire or otherwise) by an appropriate authority irrespective of whether such an aircraft is privately owned or chartered or operated by a regular airline or whether such an aircraft has a single engine or multiengine.
- xi. War or connected with or traceable to war, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, mutiny, military or usurped power, seizure, capture, arrests, restraints and detentions of all Kings, Princes and people of whatsoever nation, condition or quality.
- xii. ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste or from the combustion of nuclear fuel and for the purposes hereof, combustion shall include any self-sustaining process of nuclear fission;
- xiii. nuclear weapons material.
- xiv. Provided that due observance and fulfillment of the terms and conditions of this policy (with conditions on all endorsements hereon are to be read as part of this policy) shall so far as they relate to anything to be done or not to be done by the Insured Person and truth of the statement and answers in the said written proposal shall be a condition precedent to any liability of the Company under this policy.
- xv. Death/ disablement /Burn Injury / Broken Bones / Injury resulting directly or indirectly caused by, contributed to or aggravated or prolonged by misfeasance, malfeasance or nonfeasance or breach of law in relation thereto by the Insured Person.
- xvi. Under the influence of drugs, alcohol, or other intoxicants or hallucinogens unless properly prescribed by a Physician and taken as prescribed;
- xvii. Participation in an actual or attempted felony, riot, crime, misdemeanor, or civil commotion;
- xviii. Congenital Anomalies (Except internal congenital anomalies discovered within our cover period) or any complications or conditions arising therefrom;

		xix. Participation in speed contest or racing of any kind (other than on foot), bungee jumping, parasailing, ballooning, parachuting, skydiving, paragliding, hang gliding, scuba diving, mountain or rock climbing necessitating the use of guides or ropes, winter sports, potholing, abseiling, deep sea diving using hard helmet and breathing apparatus, polo, snow and ice sports, riding or driving in races or rallies using a motorized vehicle or bicycle, caving or pot-holing, hunting or equestrian activities, skin diving or other underwater activity, rafting or canoeing involving white water rapids, yachting or boating outside coastal waters 12 miles), participation in any Professional Sports, any bodily contact sport or any other hazardous or potentially dangerous sport for which Insured Person is untrained	
7.	Waiting period Time period during which specified diseases/ treatments are not covered It is counted from the beginning of the policy coverage.	Not Applicable	
8.	Financial limits of coverage i. Sub-limit (It is a pre-defined limit and the insurance company will not pay any amount in excess of this limit) ii. Co-payment (It is a specified amount/ percentage of the admissible claim amount to be paid by policyholder/ insured). iii. Deductible (It is a specified amount:- up to which an insurance company will not pay any claim, and-which will be deducted from total claim amount (if claim amount is more than the specified amount) iv. Any other limit (as applicable)	i. Sublimit - As mentioned in the certificate of insurance ii. Copayment - Not applicable iii. Temporary Total Disability arising out of an Injury -3 days deductible	Section 2- Benefit 4
9.	Claims/Claims Procedure	Details of procedure to be followed for cashless service as well as for reimbursement of claim including pre and post hospitalization. Turn Around Time (TAT) for claims settlements i. TAT for preauthorization of cashless facility – 6 hours from receipt of complete documents.	Section 5

		ii. TAT for cashless final bill authorization 1 hour from receipt of complete documents iii. For reimbursement claims - The Company shall settle the claim within 30 days from the date of receipt of last necessary document. However, where the circumstances of a claim warrant an investigation, Company shall settle the claim within 45 days from the date of receipt of last necessary document. i. Network Hospital details - https://indusindinsurance.com/Insurance/Self-Help/Cashless-Garages-and-Hospitals.aspx?network=Hospitals ii. Helpline number- 022-4890 3009 iii. Hospitals which are blacklisted or from where no claims will be accepted by insurer - www.indusindinsurance.com iv. Downloading/getting claim form - www.indusindinsurance.com	
10.	Policy Servicing	Helpline Paid number - 022-48903009 Email id - services@indusindinsurance.com	
11.	Grievances/ Complaints	In case of any grievance the Insured Person may contact the Company through Website: www.indusindinsurance.com paid no: 022 4890 3009 Dedicated Senior Citizen helpline: 022-33834185 (paid line) E-mail: services@indusindinsurance.com Fax:+91 22 3303 4662 Courier: Any branch office, the correspondence address, during normal business hours. Write to us at: IndusInd General Insurance. Winway Building 2nd and 3rd Floor, 11/12 Block No - 4, Old No - 67, South Tukoganj, Indore (M.P) - 452001 Insured Person may also approach the grievance cell at any of the Company's branches with the details of grievance. If Insured Person is not satisfied with the redressal of grievance through one of the above methods, Insured Person may contact the grievance officer at: Grievance Redressal Officer The Grievance Cell, IndusInd General Insurance Co. Limited No. 1-89 / 3 / B / 40 to 42 / ks / 301, 3rd floor, Krishe Block, Krishe Sapphire, Madhapur Hyderabad - 500 081. Grievance Redressal officer email ID: headgrievances@indusindinsurance.com (For updated details of grievance officer, kindly refer the link : https://www.indusindinsurance.com/Insurance/About-Us/GrievanceRedressal.aspx) 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. The contact details of the Insurance Ombudsman offices have been provided as Annexure-B Grievance may also be lodged at IRDAI Integrated Grievance Management System https://igms.irdai.gov.in in approach the office of Insurance Ombudsman of the respective area/region for redressal of grievance as per Insurance Ombudsman Rules 2017. The contact details of the Insurance Ombudsman offices have been provided as Annexure-B Grievance may also be lodged at IRDAI Integrated Grievance Management System https://igms.irdai.gov.in	6.21
12.	Things to remember	Free Look Cancellation: You may cancel the insurance policy if you do not want it, within 30 days from the beginning of the policy. The Company shall refund premium for the unexpired policy period as defined in the policy wording. Policy Renewal: The policy shall ordinarily be renewable except on grounds of fraud, moral hazard, misrepresentation by the insured person. Renewal shall not be denied on the ground that the insured had made a claim or claims in the preceding policy years. (if applicable as per the policy wording) Migration and Portability: When your policy is due for renewal, you may migrate to another policy with us or port your policy to another insurer. (if applicable as per the policy wording)	6.12 6.11

		Change in Sum Insured: Change or alteration with respect to increase/decrease of the Sum Insured shall be permissible only at the time of renewal of the Policy subject to underwriting decision of the Company. Moratorium Period: After completion of sixty continuous months under the policy no look back to be applied. This period of eight years is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy and subsequently completion of eight continuous years would be applicable from date of enhancement of sums insured only on the enhanced limits. After the expiry of Moratorium Period no health insurance policy shall be contestable except for proven fraud and permanent exclusions specified in the policy contract.	6.14
13.	Your Obligations	Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may affect the claim settlement. The policy shall be void and all premium paid thereon shall be forfeited to the Company in the event of misrepresentation, mis description or non-disclosure of any material fact by the policyholder "Material facts" for the purpose of this policy shall mean all relevant information sought by the Company in the proposal form and other connected documents to enable it to take informed decision in the context of underwriting the risk	

The enclosed Customer Information Sheet bearing reference number CIS /<Policy Number> is an essential part of your policy schedule, please acknowledge that you have read and understood the CIS on the communication sent on your registered mobile number/e-mail ID.

Disclaimer: The information must be read in conjunction with the policy document. In case of any conflict between the CIS and the policy document, the terms and conditions mentioned in the policy document shall prevail.

Declaration by the Policy Holder:

I have read and understood the benefits and details of the product as mentioned in this Wsheet.

Place: XXXXXXXXXX

Date: DD/MM/YYYY

(Signature of the Policyholder)