## **Group Personal Accident, ICICI Lombard**

Customer Information Sheet / Know Your Policy(Description is illustrative and not exhaustive)

This document provides key information about your policy. You are also advised to go through your policy document.

UIN - ICIPAGP22077V062122

CIN - L67200MH2000PLC129408

Sr.No.	Title	Des	scription			Policy Clause Number	
1	Name of Insurance	Group Personal Accident					
	Product/Policy						
2	Policy Number	4005/376975512/00/000					
3	Type of Insurance Product/Policy	Benefit- Benefit (Where an Insurance Policy pays a fixed amount under the policy on the occurance of a covered event)				unt under	
4	Sum insured (Basis)	INR <b>109,200,000.00</b> Individual SI					
	(Along with the Amount)						
		(as per enrolment annexure Individual SI (Where has a separate Sum insured under the policy)			)		
5	Policy Coverage (what the policy Covers?) (Policy Clause Number/s)	Со	ver Name	Cover definition	Payout	Policy Clause No .	
		Cor	nditions/Endorse	ments		As per the	
		1.	The policy is issued on named basis.			policy	
		2.	Age Band : Stude 65 Years	ents 03-30 Years,Parents 21-		coverage description below.	
		3.		al Hospitalisation Expenses Rs 50,000/- or actual r on IPD basis.			
		4.	Carriage of Dead max to Rs 5,000/-	Body 2% of SI subject to			
		5.	Sum insured of st Parents is flat Rs.	udents is flat Rs.50000 and 50000 only			
		6.	Animal bite/Snake except mosquito b	Bite/Insect bite is covered bite.			
		7.	The policy tenure term additions will new admissions of	will be one year only. Mid- not be allowed except for f Students.			
		8.		year of group policy can be utual consent depending on			
		9.	insured beneficiar the amount attach	mbard in respect of each y (member) shall not exceed ed to single UHID/Unique ID mber of UHIDs/Unique IDs er the policy			
		10.	limb and one eye	Two Limbs, Two eyes or one -100%, Loss of One Limb or ermanent Total Disablement			