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 Product/Policy	Gro	oup Personal Ac	ccident			
2	Policy Number	4005/376527034/00/000					
3	Type of Insurance Product/Policy	Benefit- Benefit (Where an Insurance Policy pays a fixed amount unde the policy on the occurance of a covered event)		ınt under			
4	Sum insured (Basis) (Along with the Amount)	INR 40,100,000.00 Individual SI (as per enrolment annexure Individual SI (Where each member		ı member			
				insured under the polic			
5	Policy Coverage (what the policy Covers?) (Policy Clause Number/s)	Co	over Name	Cover definition	Pi	ayout	Policy Clause No .
	Í	Cor	nditions/Endorse	ments	As per the		As per the
		1.	The policy is issue	ed on named basis.		covera descri	policy coverage description below.
		2.	Age Band : Stude 65 Years	nts 03-30 Years,Parents 2	1-		
		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	d		
		6.	Animal bite/Snake except mosquito b	e Bite/Insect bite is covered bite.			
		7.		will be one year only. Mid- I not be allowed except for of Students.			
		8.	Renewal after one done based on muthe experience.	e year of group policy can l utual consent depending o	e 1		
		9.	Total liability of Lo	ombard in respect of each			

- insured beneficiary (member) shall not exceed the amount attached to single UHID/Unique ID irrespective of number of UHIDs/Unique IDs he is covered under the policy
- 10. B = (A) + Loss of Two Limbs, Two eyes or one limb and one eye -100%, Loss of One Limb or One Eye - 50%, Permanent Total Disablement (PTD) from injuries other than those named above -100%
- 11. Risk Category I & II are covered.
- 12. Premium to be charged on prorata scale for addition/ deletion endorsement
- 13. Any endorsements will be from the date of addition and not from the inception of the policy
- 14. Premium shall not be refunded for deletion if any claim is paid during the policy.
- 15. Terrorism is covered, however, terrorism activity arising out of Nuclear, Biological and/or Chemical means is excluded from the scope of this policy
- 16. C = (A) + (B) + Permanent Partial Disablement (PPD)
- 17. A Accidental Death only 100%

Special Conditions:

Below mentioned activity shall be outside the scope of the policy :-

Professional sports team in respect of specific benefit for inability to perform

Participation in any kind of motor speed contest. While engaged in aviation, or whilst mounting or dismounting from or traveling in any aircraft. (Not applicable for fare Paying Passengers) Underground mining & contractor specializing in tunneling

Naval, military or air force personnel Radioactivity, Nuclear risks, ionizing radiation Drivers are excluded from the policy

Perils of the sea are excluded from the scope of the policy.

Exclusions :-

Suicide, attempt to Suicide or intentionally selfinflicted injury, sexually transmitted conditions, mental disorder, anxiety, stress or depression. Being under influence of drugs, alcohol, or other intoxication or hallucinogens

Participation in actual or attempted felony, riot, civil commotion, crime misdemeanor

Committing any breach of law of land with criminal intent.

Death or disablement resulting from Pregnancy or childbirth

Risk Category III people are out of the scope of the

policy :-	
Persons working in mines,explosives,Electrical installations on high tension lines,Racing,Circus	
People,skiing,mountaineering,big game	
hunting,ballooning,hang gliding,river rafting,winter	
sports, skiing,ice hockey,polo&such other persons engaged in occupation of similar hazard are not	
covered under GPA	
For resolution of any query or grievance, Insured	
may contact the respective branch office of the	
Company or may call toll free no.1800-2666 or may approach us at the sub section Grievance	
Redressal on our website www.icicilombard.com	
(Customer Support section). However, if the resolution provided by us is not satisfactory you	
may approach Insurance Regulatory and	
Development Authority (IRDA) through the	
Integrated Grievance Management Section (IGMS) or IRDA Grievance Call Centre(IGCC) at their toll	
free no.155255	
	2.1
Ponofity Inquired Eyent - Death regulting from	
Benefit: Insured Event - Death resulting from Accident	
Benefit: Insured Event - Permanent Total	2.2
Disablement	
(PTD) resulting from Accident	
Benefit: Insured Event - Permanent Partial	2.3
Disablement	
(PPD) resulting from Accident	
Benefit: Insured Event - Temporary Total	2.4
Disablement (TTD) resulting from Accident	
Maximum Liability of the Company for Benefits	2.5
Deficition	
Mentioned from Section 2.1 to 2.4	
Extension Covers	3
Cover for Expenses related to Burns	3.1
Modification of residential accommodation & vehicle	3.2
Repatriation of Mortal Remains	3.3
Ambulance Charges	3.4
Transportation Allowance (Compassionate	3.5
visit	
Travel expenses for medical treatment	3.6
Catastrophe Evacuation:	3.7
Cost of clothing damage	3.8
Loss of Job cover	3.9
Improved Disability Benefit/ Dismemberment	3.10 3.11
Daily Cash Allowance: Carriage of Dead Body	3.12
	3.12

		On Duty Cover	3.13
		Children's Education Grant	3.14
		Accidental Hospitalization Expenses	3.15
		Mysterious Disappearance	3.16
		Treatment outside India (along with travelling	3.17
		cost & boarding & lodging of the attendant)	
		Medical Expenses	3.18
		Out Patient Department (OPD) expenses:	3.19
		Loss/damage to School Bag/Books	3.20
		Widowhood cover	3.21
		Purchase of blood	3.22
		Prosthesis & Artificial Limbs	3.23
		Broken Bones	3.24
		Legal Expenses	3.25
6	Exclusions (What does		IV. 4.
	the policy not cover)	l The Company shall not be liable under this policy	
		(i) Compensation in more than one base benefit o than extensions if opted	
		(ii) Benefit over and above base covers unless op separately	
		(iii) Payment in multiple claims for same event unl opted separately	ess
		(iv) Payment of compensation relating to medical expenses until an additional premium is paid for the same as mentioned in Part I Schedule to this police	
		(v) Payment of compensation in respect of death, injury or disablement of Insured Person (a) from intentional self-injury, suicide or attempted suicide (b) whilst under the influence of intoxicating liquor drugs; (c) whilst engaging in air travel other than a passenger in common carrier	or
		(vi) Payment of compensation in respect of death, injury or disablement of Insured Person (a) adven sports as defined in policy wordings(d) directly or indirectly caused by venereal disease; (e) arising resulting from the Insured committing any breach the law.	ture or
		(vii) Claims arising out of war, invasion, act of fore enemy, hostilities (whether war be declared or no civil war, rebellion, revolution, insurrection, mutiny military or usurped power, seizure, capture, arrest restraints and detainment of all kinds.	t)
		(viii) Payment of compensation in respect of death	n of,

		or bodily injury or any disease or illness to the Insured Persons. (a) Directly or indirectly caused by or contributed to by or arising from ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste or from the combustion of nuclear fuel. For the purpose of this exception, combustion shall include any self-sustaining process of nuclear fission. (b) Directly or indirectly caused by or contributed to by or arising from nuclear weapon Materials.	
		(x) Claim for Persons while serving in any branch of the Military or Armed Forces of any country during war or warlike operations. Special Condition applicable to all the Exclusion: If the Company alleges that by reason of any of the above Exclusion i.e. any loss, damage, cost or expenses is not covered by this insurance, the onus	
		of proving the contrary shall be upon the Insured. Note: The above is only an indicative list of policy exclusions. Please refer to the policy wordings for the full listing	
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		Sub-limit/Co-pay/Deductible – Not applicable	

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 claim amount is more than the specified amount) iv. Any other limit (as applicable)		
procedure	The procedure of lodging the claim shall be as under: Upon the happening of any event giving rise or likely to give rise to a claim under this Policy: (a) • Claims under this policy should be intimated and registered with the Company on our 24x7 toll free helpline 1800 2666 and in writing to our address. • The list of documentation required is provided in the policy wordings. • The Insured shall intimate the claims with all the necessary documents to our claim processing team immediately and in any event within 7 days of claim intimation.	5

(b) The Insured shall deliver to the Company, within 14 days of the date on which the event shall have come to his knowledge, a detailed statement in writing as per the claim form and any other material particular, relevant to the making of such claim.

Customer to send documents to Company at :-

ICICI Lombard General Insurance Company Limited

1st, 4th (Half) , 5th and 6th floors, Varun Towers- II, Opp. Hyderabad Public school, Begumpet Hyderabad District Hyderabad , Pin code -500016

Benefits payable under this policy will be paid within 15 days of the receipt of claim along with claim form and required documents.

Download the Claim Form here

1	ı	the management of the second	
		https://www.icicilombard.com/downloads	
		Find our extensive list of	
		hospitals providing	
		services on our	
		website	
		https://www.icicilombard.com/health	
		L	
		insurance/health-	
		claim/partner-	
		hospital or on the	
		IL TakeCare	
		App.	
		''	
		List of excluded	
		providers/delisted	
		hospitals is	
		available on our	
		website	
		https://www.icicilombard.com/docs/default	
		<u> </u>	
		source/apps/healthclaims/assets/files/delisted	
4.0		-hospital-list.pdf	
10	Policy Servicing	You may contact	
		us on our Toll Free no: 1800	
		2666, or email to	
		customersupport@icicilombard.comor	
		use our IL	
		TakeCare App or	
		send a Hi to RIA,	
		our Responsive	
		Intelligent	
		Assistant on	
		WhatsApp	
		(7738282666) for	
		policy services.	
		L	
		For details of	
		Company	
		officials kindly	
		visit our website	
		https://www.icicilombard.com/customer	
4.4	10.	-support.	D () () ()
11	Grievances/Complaints	In case of any	Part III 18
		grievance the	
		insured person	
		may contact the	
	I	Company	- I

through Website: www.icicilombard.com Toll free: 1800 2666 E-mail: customersupport@icicilombard.com

ICICI Lombard General Insurance Co. Ltd. Ground floor- Interface 11, Sixth floor-

Interface 16, Office no 601 & 602, New linking Road, Malad

(West), Mumbai

400064

There is an interactive voice response (IVR) facility for senior citizens' grievance redressal for easy and faster resolution

Insured person may also approach the grievance cell at any of the company's branches with the details of grievance.For branch details, please visit

https://www.icicilombard.com/docs/default -source/policy-

wordings-

product-

brochure/finalgro-mapping.pdf.

If Insured person is not satisfied with the redressal of grievance ,insured person may

contact the grievance redressal officer at the details provided in the below link: https://www.icicilombard.com/grievanceredressal.com If Insured person is not satisfied with the redressal of grievance, the insured person may also approach Insurance Regulatory and Development Authority of India (IRDAI) through the Bima Bharosa Portal https://bimabharosa.irdai.gov.in/ or IRDA Grievance Call Centre(IGCC) at their toll free no. 1800 4254 732 / 155255 Insured may also approach Insurance Ombudsman, subject to vested jurisdiction, for the redressal of grievance. Details of Insurance Ombudsman offices are available at IRDAI website: www.irdai.gov.in, or on the Company's website at www.icicilombard.com or on https://www.cioins.co.in/Ombudsman

Things to remember Free Look Period Every insured of new health insurance policies, except for those policies with tenure of less than a year, shall be provided a free look period of 30 days beginning from the date of receipt of policy document, whether received electronically or otherwise, to review the terms and conditions of such policy. If the insured cancels the policy within free look period then the insured shall be entitled to a refund of the premium paid subject only to a deduction of a proportionate risk premium for the period of cover and the expenses, if any, incurred by the insurer on medical examination of the insured and stamp duty charges. Cancellation: Insured or the Company may cancel this Policy by giving the Company or the insured, as the case may be,7 days written notice for the cancellation of the Policy, and then the Company shall refund premium on short term rates (if initiated by the insured) or pro rata rates (if initiated by the Company) for the unexpired Policy Period. Policy wordings can be referred for rates applicable. Renewal: The Policy can be renewed as a separate contract under the then prevailing ICICI Lombard Group Personal Accident Insurance product or its nearest substitute (in case the product ICICI Lombard Group Personal Accident Insurance is withdrawn by the Company) The policy shall ordinarily be renewable except on grounds of established fraud, or misrepresentation or non- cooperation by the insured. On renewal of the policy, the benefit provided under the policy and/or terms and condition of the policy including premium may be subject to change Change in Sum Insured: Sum Insured can be changed (increased/decreased) only at the time of renewal or at any time, subject to underwriting by the company. For increase in SI, the waiting period if any shall start afresh only for enhanced portion of sum insured Moratorium Period: After completion of sixty continuous months of coverage (including portability and migration) in health insurance policy, no policy and claim shall be contestable by the insurer on grounds of non-disclosure, misrepresentation, except on grounds of established fraud. This period of sixty continuous months is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy. Wherever, the sum insured is enhanced, completion of sixty continuous months would be applicable from the date of enhancement of sums insured only on the enhanced limits. Your Obligations Please disclose all material information including 13 occupancy/Profile of the group members before buying the policy. Non-disclosure may affect the claim settlement.

Any changes in the exposure /Sum insured/ Occupancies of the insured members during the policy tenure should be immediately notified to the insurer. Cooperation from the Insured/claimant is solicited in providing all or sufficient documents as per the claims procedure in support of claim.

Declaration by the policy holder:

I have read the above and confirm having noted the details

Place.

Dated. Signature.

Note

In case of any conflict, the terms and conditions of the policy documents shall prevail.

The product related documents including the Customer Information sheet are available on the website at https://www.icicilombard.com/downloads

UIN - ICIPAGP22077V062122

CIN - L67200MH2000PLC129408

GROUP PERSONAL ACCIDENT

UIN-ICIPAGP22077V062122 Misc 05 Part I of Policy: Policy Schedule

Policy No 4005/376527034/00/000 (TRUE COPY) Issued at MUMBAI 1. Name of the Insured: PRIDE INSTITUTE

2. Mailing Address of the Insured: Guruprasad College Arag, Ap Arag Tal Miraj Dist Sangli 416401

Sangli

Maharashtra Pin-416401

3. Politically Exposed Persons (PEP)/close relative of PEP

No

4. Intermediary Details: Agency Code1: **DB01802**

> INTEGRATED RISK **Agency Name:**

INSURANCE BROKERS

LIMITED

9945622359 Agent's mobile no.: Agent's E-mail ID: service@iribl.com

5. Period of Insurance: From: 24/12/2024 Time: 00:00 Hours

To Midnight of 23/12/2025

6. Total number of persons to be insured: 802

7. Total Capital Sum Insured: 40,100,000.00

8. Details of persons to be insured:

As per annexure attached

9. Benefit Table:

A - Accidental Death only - 100%

B = (A) + Loss of Two Limbs, Two eyes or one limb and one eye -100%, Loss of One Limb or One Eye - 50%, Permanent Total Disablement (PTD) from injuries other than those named above -100%

C = (A) + (B) + Permanent Partial Disablement (PPD)

10. Premium

Premium Break Up	(Rs.)	Premium (Rs.)
Stamp Duty	(Rs.)	03.00
*Total Premium	(Rs.)	9,466.60

^{*}Premium value mentioned above is inclusive of taxes applicable

11. Conditions/Endorsements

- 1. The policy is issued on named basis.
- 2. Age Band: Students 03-30 Years, Parents 21-65 Years
- 3. Accidental Medical Hospitalisation Expenses are covered upto Rs 50,000/- or actual whichever is lower on IPD basis.
- 4. Carriage of Dead Body 2% of SI subject to max to Rs 5,000/-
- 5. Sum insured of students is flat Rs.50000 and Parents is flat Rs.50000 only
- 6. Animal bite/Snake Bite/Insect bite is covered except mosquito bite.
- 7. The policy tenure will be one year only. Mid-term additions will not be allowed except for new admissions of Students.
- 8. Renewal after one year of group policy can be done based on mutual consent depending on the experience.
- 9. Total liability of Lombard in respect of each insured beneficiary (member) shall not exceed the amount attached to single UHID/Unique ID irrespective of number of UHIDs/Unique IDs he is covered under the policy
- 10. B = (A) + Loss of Two Limbs, Two eyes or one limb and one eye -100%, Loss of One Limb or One Eye 50%, Permanent Total Disablement (PTD) from injuries other than those named above -100%
- 11. Risk Category I & II are covered.
- 12. Premium to be charged on prorata scale for addition/ deletion endorsement
- 13. Any endorsements will be from the date of addition and not from the inception of the policy
- 14. Premium shall not be refunded for deletion if any claim is paid during the policy.
- 15. Terrorism is covered, however, terrorism activity arising out of Nuclear, Biological and/or Chemical means is excluded from the scope of this policy
- 16. C = (A) + (B) + Permanent Partial Disablement (PPD)
- 17. A Accidental Death only 100%

12. Special Conditions:

1. Below mentioned activity shall be outside the scope of the policy:-

Professional sports team in respect of specific benefit for inability to perform

Participation in any kind of motor speed contest.

While engaged in aviation, or whilst mounting or dismounting from or traveling in any aircraft. (Not applicable for fare Paying Passengers)

Underground mining & contractor specializing in tunneling

Naval, military or air force personnel

Radioactivity, Nuclear risks, ionizing radiation

Drivers are excluded from the policy

Perils of the sea are excluded from the scope of the policy.

Exclusions :-

Suicide, attempt to Suicide or intentionally self- inflicted injury, sexually transmitted conditions, mental disorder, anxiety, stress or depression.

Being under influence of drugs, alcohol, or other intoxication or hallucinogens

Participation in actual or attempted felony, riot, civil commotion, crime misdemeanor

Committing any breach of law of land with criminal intent.

Death or disablement resulting from Pregnancy or childbirth

Risk Category III people are out of the scope of the policy :-

Persons working in mines, explosives, Electrical installations on high tension lines, Racing, Circus

People, skiing, mountaineering, big game hunting, ballooning, hang gliding, river rafting, winter sports, skiing, ice hockey, polo&such other persons engaged in occupation of similar hazard are not covered under GPA

For resolution of any query or grievance, Insured may contact the respective branch office of the Company or may call toll free no.1800-2666 or may approach us at the sub section Grievance Redressal on our website www.icicilombard.com (Customer Support section). However, if the resolution provided by us is not satisfactory you may approach Insurance Regulatory and Development Authority (IRDA) through the Integrated Grievance Management Section (IGMS) or IRDA Grievance Call Centre (IGCC) at their toll free no.155255

13. Clauses:

1. The Cover is subject to inclusion of loss/ damage/ liability due to terrorism activity

14. Warranties:

1. The claim should be intimated with in the three months of the occurrence of the event, failing to which company shall not be liable to pay the claim

Subject otherwise to terms and conditions of Group Personal Accident Insurance Policy.

Signed for and on behalf of the ICICI Lombard General Insurance Company Limited, at Mumbai on this date 17/01/2025.

Gaurav Arora

Authorized Signatory

ICICI Lombard General Insurance Company Ltd.

GSTIN Reg. No: 27AAACI7904G1ZN

IL GIC GSTIN Address: 414, ICICI LOMBARD HOUSE, VEER SAVARKAR MARG, NEAR SIDDHI VINAYAK TEMPLE MAIN

GATE, PRABHADEVI, MUMBAI, 400025, MAHARASHTRA HSN/SAC code: 997133 - GENERAL INSURANCE SERVICES

Policy shall stand cancelled ab initio in the event of non realisation of the premium

The stamp duty of Rs 2.5000 paid in cash or by demand draft or by payorder, vide Receipt/Challan no. CSD372024252885 dated 15/07/2024

ICICI Lombard General Insurance Company Limited