

Royal Sundaram General Insurance Co. Limited

Corp. Office : Vishranthi Melaram Towers, No. 2 / 319, Rajiv
Gandhi Salai (OMR) Karapakkam, Chennai - 600097. Regd.
Office : 21, Patullos Road, Chennai - 600 002

CUSTOMER INFORMATION SHEET / KNOW YOUR POLICY

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)	Policy Clause Number
1	Name of Insurance Product / Policy	EMI Advantage	
2	Policy Number	XXXXXX	
3	Type of Insurance Product / Policy	<ul style="list-style-type: none"> Benefit 	
4	Sum Insured (Basis) (Along with amount)	<ul style="list-style-type: none"> Individual Sum Insured – Rs. _____ 	
5	Policy Coverage (What the policy covers?)	<p>This policy offers cover against EMI Protection and Personal Accident benefits. Customer can select any or both the benefits</p> <p>EMI Protection Coverage in case of Sickness & Accident If the Insured Person suffers from sickness or an injury due to an Accident during the Policy Period which solely and directly results in the Insured Person's hospitalization, the Company will pay the EMI as specified in the Policy Schedule/ Certificate of Insurance subject to following Plans as opted by Insured Person:</p> <p>Plan A (i) Hospitalisation duration 11 Days or more - 3 EMIs will be paid; or (ii) Hospitalisation duration 7-10 Days - 2 EMIs will be paid; or (iii) Hospitalisation duration is 3-6 Days - 1 EMI will be paid (iv) Accident induced PTD or PPD - 1 additional EMI will be paid Under Serial No. (iii) above, option available to add coverage from day2.</p> <p>Plan B</p>	EMI Protection Section 3.1

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		<p>(i) If continuous hospitalization duration is 7-10 Days – 1 EMI will be paid; or (ii) If continuous hospitalization duration is 11 or more Days – 2 EMIs will be paid (iii) Accident induced PTD or PPD - 1 additional EMI will be paid</p> <p>Plan C (i) If continuous hospitalization duration is 3-10 Days – 1 EMI will be paid; or (ii) If continuous hospitalization duration is 11 or more Days – 2 EMIs will be paid (iii) Accident induced PTD or PPD - 1 additional EMI will be paid</p> <p>Plan D (i) If continuous hospitalization duration is 11 or more Days - 1 EMI will be paid. (ii) Accident induced PTD or PPD - 1 additional EMI will be paid</p>	
6	Exclusions (What the Policy does not cover)	<ol style="list-style-type: none"> 1) Initial Waiting Period 2) Investigation & Evaluation 3) Rest Cure, Rehabilitation and Respite care 4) Obesity/ Weight Control 5) Cosmetic or plastic Surgery 6) Hazardous or Adventure sports 7) Breach of law 8) Excluded Providers 9) Treatment for, Alcoholism, drug or substance abuse, Tobacco Abuse or any addictive condition and consequences thereof 10) Treatments received in health hydro's, nature cure clinics, spas or similar establishments 11) Dietary supplements and substances that can be purchased without prescription 12) Refractive Error 13) Expenses related to any unproven treatment 14) Sterility and Infertility 15) Maternity Expenses 16) Convalescence, general debility, 'Run-down' condition or rest cure, Congenital Anomalies, Tubectomy, Vasectomy, Venereal disease, intentional self-injury 17) All expenses arising out of any condition directly or indirectly caused by or associated with Human T-Cell Lymphotropic Virus 	EMI Protection Section 4.1 standard exclusions & 4.2 Specific exclusions

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		<p>Type III (HTLB-III) or Lymphadenopathy Associated Virus (LAV) or the Mutants Derivative or variations Deficiency Syndrome or any Syndrome or condition of a similar kind commonly referred to as AIDS/HIV</p> <p>18) War, Invasion, Act of Foreign Enemy, Warlike Operations (whether war be declared or not), Biological, nuclear or chemical terrorism, Nuclear weapons/materials or Radioactive Contamination.</p> <p>19) Any claim arising whilst engaging in speed contest or racing of any kind, bungee jumping, parasailing, ballooning, flying an aircraft otherwise than as a passenger on a regular air carrier, parachuting, skydiving, paragliding, hang gliding, mountain or rock climbing necessitating the use of guides or ropes, potholing, abseiling, deep sea diving using hard helmet and breathing apparatus, polo, snow and ice sports and boxing, caving, horse racing, jet skiing, martial arts, off piste skiing, scuba diving, any flying activity (other than as a passenger in a commercially licensed aircraft) and activities of similar hazard.</p> <p>20) Complication of any surgery, therapy or treatment administered on the Insured Person which is not prescribed or required by a Specialist Medical Practitioner/Registered Medical Institution in their professional capacity.</p> <p>21) Insured's/Proposer's involvement in any activities resulting in any breach of law with criminal intent.</p> <p>22) Any alternative treatment</p> <p>23) If the Insured does not submit a medical certificate from the Doctor evidencing diagnosis of Illness or Injury or occurrence of the medical event or the undergoing of the medical/surgical procedure.</p> <p>24) Any medical procedure or treatment, which is not medically necessary or not performed by a Doctor.</p> <p>25) Any events occurring before the commencement of the cover or otherwise outside the Period of Insurance;</p> <p>26) Arising out of or as a result of attempted suicide or suicide, any sexually transmitted diseases, sexually transmitted conditions, anxiety, stress, depression, venereal disease or any loss directly or indirectly attributable to HIV (Human Immunodeficiency Virus) and / or any HIV related illness including AIDS (Acquired Immunodeficiency Syndrome) AIDS related complex syndrome (ARCS) and all diseases caused by</p>	
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		<p>and/ or related to the HIV, insanity and / or any mutant derivative or variations thereof howsoever caused.</p> <p>27) Self-endangerment unless in self-defence or to save life.</p> <p>28) Participation in riots, confiscation or nationalization or requisition of or destruction of or damage to property by or under the order of any Government or local authority.</p> <p>29) arising out of or resulting directly or indirectly due to or as a consequence of pregnancy or treatment traceable to infirmity, pregnancy and childbirth, abortion, Miscarriage and its consequences, tests and treatment relating to infertility and invitro fertilization.</p> <p>30) Arising out of or resulting directly or indirectly while serving in any branch of the Military or Armed Forces of any country during war or warlike operations</p> <p>31) 4.2.16 Nuclear, Chemical, Biological Terrorism</p>	
7	Waiting Period	30 days. Not applicable in the case of accident	EMI Protection Section 4.1.1
8	<p>Financial limits of coverage</p> <p>i. Sub-limit</p> <p>ii. Co-payment</p> <p>iii. Deductible</p> <p>iv. Any other limit</p>	<p>The policy will pay only up to the limits specified hereunder for the following diseases/procedures:</p> <p>Not applicable</p> <p>Not applicable.</p> <p>Not applicable.</p> <p>amount equivalent up to 4 EMI's or INR 8 Lakhs whichever is lower.</p>	
9	Claims/Claims Procedure	Provided that the due observance and fulfilment of the terms and conditions of this Policy (conditions and 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 and /or Insured person, be a condition precedent to any liability of the Company under this Policy.	EMI Protection Section 6 – Claims Procedure

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		<p>The Claims Procedure is as follows:</p> <p>6.1 Claim Documents</p> <p>The claim form duly completed in all respects along with all documents (if applicable) listed below should be submitted within 30 days from the date of such Accident/Hospitalization (as the case may be):</p> <ol style="list-style-type: none"> 1. Discharge summary (detailed) describing the nature of the complaints and it duration, treatment given, advice on discharge etc issued by the Hospital. 2. First consultation papers. 3. Doctor's prescription confirming diagnosis/advising hospitalization. 4. Proof of accident – FIR, medical records etc. 5. Confirmation from concerned company/institution on the quantum of EMI and no of EMIs outstanding. 6. Subscription confirmation along with monthly subscription fee and tenure. 7. Certificate from employer confirming period of absence from duty. 8. Certificate from attending physician confirming period of sickness, advise on rest and date from which patient can resume normal duties <p>6.2 Payment of Claim</p> <ul style="list-style-type: none"> • All valid claims will be settled within 15 working days upon receipt of due written evidence of such incident and any further documentation information and assistance that the Company may require. The company shall be released from any obligation to pay benefits if any of the obligations are breached. • All claims under this Policy shall be payable in Indian Currency. • The Company shall be liable to pay any interest at 2% above the bank rate prevalent at the beginning of the financial year in which the claim is reviewed, for sums paid or payable under this Policy, upon acceptance of an offer of settlement by the insured but there is delay in payment beyond 7 days from the date of acceptance. 	<p>Section 6.1</p> <p>Section 6.2</p>
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		<ul style="list-style-type: none"> The claim if admissible shall be paid to the legal heir/ nominee of the proposer in case if the proposer is not surviving at the time of payment of claim If a claim is settled for an insured, cover for other insured members under the policy shall continue. At the time of claim settlement, Company may insist on KYC documents of the Proposer as per the relevant AML guidelines in force. All claims are to be notified to Us within a timeline. In case where the delay in intimation is proved to be genuine and for reasons beyond the control of the Insured Person or Nominee specified in the Policy Schedule/Certificate of Insurance. We may condone such delay and process the claim. Please note that the waiver of the time limit for notice of claim and submission of claim is at Our evaluation. <p>The claim documents should be sent to: Health Claims Department Royal Sundaram Alliance Insurance Co Ltd Vishranthi Melaram Towers, No.2/319, Rajiv Gandhi Salai (OMR) Karapakkam, Chennai - 600097</p>	
10	Policy Servicing	<p>Call Center number of the insurer: 1860 258 0000 / 1860 425 0000</p> <p>Details of Company Officials : Mr. T M Shyamsunder – Grievance Redressal Officer</p>	EMI Protection Section 5.1.16
11	Grievances / Complaints	<p>Redressal of grievance</p> <p>We promise to provide the service you want, but sometimes mistakes can happen. If you're not satisfied with our service, we're here to make it right. Your satisfaction is our main concern, especially when things haven't gone as planned.</p> <p>Step 1 : Please raise a complaint with us through our Online form, and we would come back to you with a response in 2 business days.</p>	EMI Protection Section 5.1.14

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		<p>Step 2 : In case you are not satisfied with our online response or have not received any response in 2 business days, you may approach our office at the following address: Customer Services Team Royal Sundaram General Insurance Co. Limited Vishranthi Melaram Towers No.2/319 , Rajiv Gandhi Salai(OMR) Karapakkam, Chennai – 600097 Call us at 1860 425 0000 1860 258 0000 Drop us an email care@royalsundaram.in</p> <p>Step 3: In case you are not satisfied with our online response or have not received any response in 2 business days, you may approach our office at the following address: Customer Services Team Royal Sundaram General Insurance Co. Limited Vishranthi Melaram Towers No.2/319 , Rajiv Gandhi Salai(OMR) Karapakkam, Chennai - 600097 Senior Citizen Redressal : 9500413019 Grievance Redressal Officer : Mr. T M Shyamsunder, 9500413094 Drop us an email manager.care@royalsundaram.in Senior Citizen can Write to us at seniorcitizengrievances@royalsundaram.in</p> <p>Step 4 : In case you are not satisfied with our online response or have not received any response in 2 business days, you may approach our office at the following address: Customer Services Team Royal Sundaram General Insurance Co. Limited Vishranthi Melaram Towers No.2/319 , Rajiv Gandhi Salai(OMR) Karapakkam, Chennai - 600097</p>	
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		<p>https://www.cioins.co.in/Ombudsman Click here to view Office of the Executive Council of Insurers</p> <p>Drop us an email head.cs@royalsundaram.in</p> <p>Step 5 : In case you are not satisfied with the decision/resolution of the Company, you may approach the IRDAI Grievance Call Center IRDAI Grievance Call Center Insurance Regulatory & Development Authority of India United India Tower, 9th floor, 3-5-817/818 Basheerbagh, Hyderabad- 500 029. Contact Number: 040-66514888</p> <p>Call us at 1860 425 0000 1860 258 0000</p> <p>Drop us an email gro@royalsundaram.in</p>	
12	Things to remember	<p>Free Look Period:</p> <p>At the inception of the policy the Insured Person will be allowed a period of 30 days from the date of receipt of the policy to review the terms and conditions of the policy and to return the same if not acceptable. If Insured Person has not made any claim during the free look period, he will be entitled to the following, provided no claim has been settled or lodged for the period the policy has been in force:</p> <ul style="list-style-type: none"> a) A refund of the premium paid less any expenses incurred by the Insurer on medical examination of the insured person and the stamp duty charges or; b) where the risk has already commenced and the option of return of the policy is exercised, a deduction towards the proportionate risk premium for period on cover or; c) Where only a part of the risk has commenced, such proportionate risk premium commensurate with the risk covered during such period. d) Free-look will not be applicable for policies with tenure less than one year. e) Free-look not applicable in case of renewals. 	EMI Protection Section 5.1.13

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All rights under this Policy shall immediately stand extinguished on the free look cancellation of the Policy.

Cancellation/Termination

Cancellation/ Termination (other than Free Look cancellation)

EMI
Protection
Section
5.1.7

1. Cancellation by Insured Person:

You may terminate this Policy during the Policy Period by giving Us at least 30 days prior written notice. We shall cancel the Policy and refund the premium for the balance of the Policy Period in accordance with the table below provided that no claim has been made under the Policy by or on behalf of any Insured Person.

- i. Short-term(less than one year) Policies prior to commencement of risk We shall retain an amount of 10% of total premium paid.
- ii. Short-term(less than one year) Policies post commencement of risk

Completed tenure of the policy	Retention of Premium amount
0%-25%	40%
26%-50%	60%
51% and above	100%

iii. Annual Policies

Completed tenure of Policy	Retention of Premium
less than 1 month	25% of annual rate
between 1 month and 3 months	50% of annual rate
between 3 months and 6 months	75% of annual rate
Above 6 months	full annual premium

iv. Policy with tenure more than one year

Policy year in which policy is cancelled, we shall retain the premium as per below grid. However, for rest of years 5% of the pro-rated annual Premium amount shall be retained. Pro-rated

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annual rate will be arrived on the basis of pro-rated rate from the entire tenure premium.
In the year of cancellation, below grid shall apply for more than one year policies.

Completed tenure of Policy	Retention of Premium
less than 1 month	25% of annual rate
between 1 month and 3 months	50% of annual rate
between 3 months and 6 months	75% of annual rate
Above 6 months	full annual premium

Renewal of the Policy:

- This Policy will automatically terminate at the end of the Policy Period. This Policy is ordinarily renewable on mutual consent for life, subject to application of Renewal and realization of Renewal premium. All Renewal application should reach Us on or before the Policy Period End Date.
- We may in Our sole discretion, revise the Product and Renewal premium payable under the Policy provided that revision to the Renewal premium are in accordance with the IRDAI rules and regulations as applicable from time to time. Renewal premiums will not alter based on individual claims experience. We will intimate You of any such changes at least 3 months prior to date of such revision or modification.
- The premium payable on renewal shall be paid to Us on or before the Policy Period End Date and in any event before the expiry of the Grace Period. For the purpose of this provision, Grace Period means a period of 15 days in case of monthly payments and 30 days in case of quarterly, half- yearly and yearly payments immediately following the Policy Period End Date during which a

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		<p>payment can be made to renew this Policy without loss of continuity benefits such as Waiting Periods and coverage of Pre Existing Diseases. If the premium is paid in instalments, coverage will still be available during the grace period,</p> <ul style="list-style-type: none"> • Renewal of the Policy will not ordinarily be denied other than on grounds of moral hazard, misrepresentation or fraud or non-cooperation by You. • We reserve the right to carry out underwriting in relation to any alterations like increase/decrease in Sum Insured, change in plan/coverage, addition/deletion of members, addition/deletion of Medical Conditions, request at the time of Renewal of the Policy. Any request for acceptance of changes on renewal will be subject to underwriting. The terms and conditions of the existing Policy will not be altered. • vi. This product may be withdrawn by Us after due approval from the IRDAI. In case this product is withdrawn by Us, this Policy can be renewed under the then prevailing Health Insurance Product or its nearest substitute approved by IRDAI. We shall duly intimate You regarding the withdrawal of this product and the options available to You at the time of Renewal of this Policy. <p>Moratorium Period After completion of five continuous years under the policy no look back to be applied. This period of five years is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy and subsequently completion of 5 continuous years would be applicable from data of enhancement of sums insured only on the enhanced limits. After the expiry of Moratorium Period no health insurance claim shall be contestable except for proven fraud and permanent exclusions specified in the policy contract. The policies would however be subject to all limits, sub limits, co-payments, deductibles as per the policy contract. The accrued credits gained under the ported and migrated policies shall be counted for the purpose of calculating the Moratorium period.</p> <p>Multiple Policies If multiple certificates are issued under the same Group policy or across multiple group policies in the name of same person then we shall refund</p>	<p>EMI Protection Section 5.1.10</p> <p>EMI Protection Section 5.1.5</p>
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		the premium of all other policies except the policy with maximum Sum Insured. However, in case of fraud or misrepresentation, all the policies will be cancelled and premium stands forfeited.	
13	Your Obligations	<ul style="list-style-type: none"> • Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may result in claim not being paid. • Disclosure of Material Information during the policy period such as change in occupation 	

Declaration by the policy holder:

I have read the above and confirm having noted the details.

Place:

Date:

(Signature of the Policy Holder)

Note:

- Insurer shall provide weblink where the product related documents including the Customer Information Sheet are available on the website of the insurer.
- In case of any conflict, the terms and conditions mentioned in the policy document shall prevail.
- Insurer to take confirmation of the policyholder regarding receiving the Customer Information Sheet.

SI No	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy Clause Number
1	Name of Insurance Product / Policy	EMI Advantage	

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2	Policy Number	XXXXXX	
3	Type of Insurance Product / Policy	<ul style="list-style-type: none"> Benefit 	
4	Sum Insured (Basis) (Along with amount)	<ul style="list-style-type: none"> Individual Sum Insured – Rs. _____ 	
5	Policy Coverage (What the policy covers?)	<p>This policy offers cover against EMI Protection and Personal Accident benefits. Customer can select any or both the benefits</p> <p>Personal Accident (caused by external, violent and visible means) Cover offers the following benefits:</p> <ul style="list-style-type: none"> Accidental Death: covers death solely and directly due to an Accident occurring during the Policy Period which solely and directly results in the Insured Person's death within three hundred and sixty- five (365) days from the occurrence of such Accident. Permanent Total Disablement: covers Permanent Total Disablement as per grid solely and directly due to an Accident occurring during the Policy Period which solely and directly results in the Insured Person's permanent total disability within three hundred and sixty- five (365) days from the occurrence of such Accident. Permanent Partial Disablement: covers Permanent Partial Disablement solely and directly due to an Accident occurring during the Policy Period which solely and directly results in the Insured Person's permanent partial disability within three hundred and sixty- five (365) days from the occurrence of such Accident. Temporary Total Disablement: Temporary Total Disablement (TTD) means disability which is temporary in nature and wholly and continuously prevents the Insured Person from performing each and every duty pertaining to his occupation during the period of such disablement. If the Insured Person suffers an Injury solely and directly due to an Accident that occurs during the Policy Period and such Injury solely and directly results in the Temporary Total Disablement of the Insured Person within 365 days from the date 	<p>Personal Accident Section 3</p> <p>Personal Accident Section 3.1</p> <p>Personal Accident Section 3.2</p> <p>Personal Accident Section 3.3</p> <p>Personal Accident Section 3.4</p>

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		<p>of the Accident. The Company will pay an amount equal to 1% of the Sum Insured up to maximum of Rs.10,000 per week, for the duration of the Temporary Total Disablement.</p> <ul style="list-style-type: none"> • Medical Expenses due to Accident If the Insured Person suffers an Injury solely and directly due to an Accident that occurs during the Policy Period and is hospitalized as an in-patient for 24 continuous hours and more, then the Company will reimburse the insured person the necessary usual and reasonable In-hospital Medical Expenses incurred within twelve months from the date of Accident up to forty percent (40%) of the compensation paid in settlement of a valid claim under this Policy or ten percent (10%) of the Sum Insured or actuals whichever is less . 	Personal Accident Section 3.5
6	Exclusions (What the Policy does not cover)	<ul style="list-style-type: none"> i. Suicide or attempted Suicide, intentional self-inflicted injury, acts of self-destruction whether the Insured Person is medically sane or insane ii. Mental illness or sickness or disease including a psychiatric condition, mental disorders of or disturbances of consciousness, strokes, fits or convulsions which affect the entire body and pathological disturbances caused by mental reaction to the same. iii. Certification by a Medical Practitioner who shares the same residence as the Insured Person or who is a member of the Insured Person's Family. iv. Death or disablement arising out of or attributable to foreign invasion, act of foreign enemies, hostilities, warlike operations (whether war be declared or not or while performing duties in the armed forces of any country during war or at peace time), participation in any naval, military or v. air-force operation, civil war, public defence, rebellion, revolution, insurrection, military or usurped power. vi. Death or disablement directly or indirectly caused by or associated with any venereal disease, sexually transmitted disease vii. Congenital external diseases, defects or anomalies or in consequence thereof. viii. Death or disablement directly or indirectly caused due to or associated with human T-cell Lymph tropic virus type III (HTLV-III or IITLB-III) or 	Personal Accident Section 4

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		<p>Lymphadenopathy Associated Virus (LAV) and its variants or mutants, Acquired Immune Deficiency Syndrome (AIDS) whether or not arising out of HIV, AIDS related complex syndrome (ARCS) and any injury caused by and/or related to HIV.</p> <p>ix. Any change of profession after inception of the Policy which results in the enhancement of Our risk under the Policy, if not accepted and endorsed by Us on the Policy Schedule/ Certificate of Insurance.</p> <p>x. Death or disablement arising or resulting from the Insured Person committing any breach of law or participating in an actual or attempted felony, riot, crime, misdemeanour or civil commotion with criminal intent.</p> <p>xi. Death or disablement arising from or caused due to use, abuse or a consequence or influence of an abuse of any substance, intoxicant, drug, alcohol or hallucinogen.</p> <p>xii. Death or disablement resulting directly or indirectly, contributed or aggravated or prolonged by childbirth or from pregnancy or a consequence thereof including ectopic pregnancy unless specifically arising due to accident;</p> <p>xiii. Death or disablement caused by participation of the Insured Person in any flying activity including chartered flights except as a bona fide, fare-paying passenger of a recognized airline on regular routes and on a scheduled timetable.</p> <p>xiv. Insured Persons whilst engaging in adventure and hazardous sport, or involving a naval, military or air force operation and is specifically specified in the Policy Schedule/ Certificate of Insurance.</p> <p>xv. Working in underground mines, tunnelling or explosives, or involving electrical installation with high tension supply, or as jockeys or circus personnel, or engaged in Hazardous Sports/Activities.</p> <p>xvi. Death or disablement arising from or caused by ionizing radiation or contamination by radioactivity from any nuclear fuel (explosive or hazardous form) or resulting from or from any other cause or event contributing concurrently or in any other sequence to the loss, claim or expense from any nuclear waste from the combustion of nuclear fuel, nuclear, chemical or biological attack.</p> <p>xvii. Chemical attack or weapons means the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous chemical compound</p>	
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		<p>which, when suitably distributed, is capable of causing any illness, incapacitating disablement or death</p> <p>iii. Biological attack or weapons means the emission, discharge, dispersal, release or escape of any pathogenic (disease producing) microorganisms and/or biologically produced toxins (including genetically modified organisms and chemically synthesized toxins) which are capable of causing any illness, incapacitating disablement or death.</p> <p>Any physical, medical or mental condition or treatment or service that is specifically excluded in the Policy.</p>	
7	Waiting Period	Not applicable	
8	<p>Financial limits of coverage</p> <p>i.Sub-limit</p> <p>ii.Co-payment</p> <p>iii.Deductible</p> <p>iv.Any other limit</p>	<p>The policy will pay only up to the limits specified hereunder</p> <p>For Temporary Total Disablement, the Company will pay an amount equal to 1% of the Sum Insured up to maximum of Rs.10,000 per week, for the duration of the Temporary Total Disablement.</p> <p>For Medical expenses, up to forty percent (40%) of the compensation paid in settlement of a valid claim under this Policy or ten percent (10%) of the Sum Insured or actuals whichever is less</p> <p>Not applicable.</p> <p>Not applicable.</p> <p>Not applicable.</p>	<p>Personal Accident Section 3.4</p> <p>Personal Accident Section 3.5</p>
9	Claims/Claims Procedure	<p>Claims Procedure</p> <p>Provided that the due observance and fulfilment of the terms and conditions of this Policy (conditions and all Endorsements hereon are to be read as part of this Policy) shall, so far as they relate to anything</p>	Personal Accident Section 5

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		<p>to be done or not to be done by the Insured and /or Insured person, be a condition precedent to any liability of the Company under this Policy.</p> <p>The Claims Procedure is as follows:</p> <p>Claim Documentation</p> <p>The claim form duly completed in all respects along with all documents (if applicable) listed below should be submitted within 30 days from the date of occurrence:</p> <p>1.1.1. Death Claims</p> <ul style="list-style-type: none"> i. Duly completed claim form ii. Original Death certificate iii. Post-mortem report iv. First Information Report v. Inquest report/Panchanama Report vi. Extract of MLC/Accident Register vii. Final report issued by Police Authorities if sought viii. Chemical analysis report/viscera report if preserved for analysis ix. Admission/Discharge/Death summary issued by the hospital authority x. Medical records pertaining to hospitalisation xi. English translation of vernacular documents xii. Legal Heir Certificate / Succession Certificate or Alternate set of legal documents sought in the absence of nomination xiii. Any other document sought by the Company <p>1.1.2. Disablement Claims</p> <ul style="list-style-type: none"> xiv. Duly completed claim form along with medical certificate forming part of claim form xv. Attending physician's certificate certifying extent of 	<p>Personal Accident Section 5.1</p>
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disability

xvi. First Information Report

xvii. Medical records pertaining to hospitalisation

xviii. Photographs of the insured exhibiting disability

xix. Any other document sought by the Company

1.1.3. Additional documents required:

xx. Temporary total disablement (TTD) – leave certificate from employer confirming period of absence from work

xxi. Medical Expenses due to accident – All bills in original (with serial number, date and stamp), all receipts for proof of payment, hospital records, doctors' prescriptions for lab tests/medicines

The claim form duly completed in all respects along with all documents (if applicable) listed below should be submitted within 30 days after the occurrence of the event.

1.2. Payment of Claim

- All valid claims will be settled within 15 working days upon receipt of due written evidence of such loss and any further documentation information and assistance that the Company may require. The company shall be released from any obligation to pay benefits if any of the obligations are breached.
- All claims under this Policy shall be payable in Indian Currency.
- The Company shall be liable to pay any interest at 2% above the bank rate prevalent at the beginning of the financial year in which the claim is reviewed, for sums paid or payable under this Policy, upon acceptance of an offer of settlement by the insured but there is delay in payment

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5.2

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		<p>beyond 7 days from the date of acceptance.</p> <ul style="list-style-type: none"> • The claim if admissible shall be paid to the legal heir/nominee of the proposer in case if the proposer is not surviving at the time of payment of claim • If a claim is settled for an insured, cover for other insured members under the policy shall continue. • At the time of claim settlement, Company may insist on KYC documents of the Proposer as per the relevant AML guidelines in force. • All claims are to be notified to Us within a timeline. In case where the delay in intimation is proved to be genuine and for reasons beyond the control of the Insured Person or Nominee specified in the Schedule of Insurance Certificate, We may condone such delay and process the claim. Please note that the waiver of the time limit for notice of claim and submission of claim is at Our evaluation. <p>The claim documents should be sent to: Health Claims Department Royal Sundaram Alliance Insurance Co Ltd Vishranthi Melaram Towers, No.2/319, Rajiv Gandhi Salai (OMR) Karapakkam, Chennai – 600097</p>	
10	Policy Servicing	<p>Call Center number of the insurer: 1860 258 0000 / 1860 425 0000</p> <p>Details of Company Officials : Mr. T M Shyamsunder – Grievance Redressal Officer</p>	Personal Accident Section 6.22
11	Grievances / Complaints	<p>Grievances Redressal Procedure:</p> <p>We promise to provide the service you want, but sometimes mistakes can happen. If you're not satisfied with our service, we're here to make</p>	Personal Accident Section 6.21

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		<p>it right. Your satisfaction is our main concern, especially when things haven't gone as planned.</p> <p>Step 1 : Please raise a complaint with us through our Online form, and we would come back to you with a response in 2 business days.</p> <p>Step 2 : In case you are not satisfied with our online response or have not received any response in 2 business days, you may approach our office at the following address: Customer Services Team Royal Sundaram General Insurance Co. Limited Vishranthi Melaram Towers No.2/319 , Rajiv Gandhi Salai(OMR) Karapakkam, Chennai – 600097 Call us at 1860 425 0000 1860 258 0000 Drop us an email care@royalsundaram.in</p> <p>Step 3: In case you are not satisfied with our online response or have not received any response in 2 business days, you may approach our office at the following address: Customer Services Team Royal Sundaram General Insurance Co. Limited Vishranthi Melaram Towers No.2/319 , Rajiv Gandhi Salai(OMR) Karapakkam, Chennai - 600097 Senior Citizen Redressal : 9500413019 Grievance Redressal Officer : Mr. T M Shyamsunder, 9500413094 Drop us an email manager.care@royalsundaram.in Senior Citizen can Write to us at seniorcitizengrievances@royalsundaram.in</p> <p>Step 4 : In case you are not satisfied with our online response or have not received any response in 2 business days, you may approach our office at the following address:</p>	
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		<p>Customer Services Team Royal Sundaram General Insurance Co. Limited Vishranthi Melaram Towers No.2/319 , Rajiv Gandhi Salai(OMR) Karapakkam, Chennai - 600097 https://www.cioins.co.in/Ombudsman Click here to view Office of the Executive Council of Insurers Drop us an email head.cs@royalsundaram.in</p> <p>Step 5 : In case you are not satisfied with the decision/resolution of the Company, you may approach the IRDAI Grievance Call Center IRDAI Grievance Call Center Insurance Regulatory & Development Authority of India United India Tower, 9th floor, 3-5-817/818 Basheerbagh, Hyderabad- 500 029. Contact Number: 040-66514888</p> <p>Call us at 1860 425 0000 1860 258 0000</p> <p>Drop us an email gro@royalsundaram.in</p>	
12	Things to remember	<p>Free Look Period:</p> <p>At the inception of the policy the Insured Person will be allowed a period of 30 days from the date of receipt of the policy to review the terms and conditions of the policy and to return the same if not acceptable. If Insured Person has not made any claim during the free look period, he will be entitled to the following, provided no claim has been settled or lodged for the period the policy has been in force:</p> <p>a) A refund of the premium paid less any expenses incurred by the Insurer on medical examination of the insured person and the stamp duty charges or;</p> <p>b) where the risk has already commenced and the option of return of the policy is exercised, a deduction towards the proportionate risk premium for period on cover or;</p>	Personal Accident Section 6.18

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	<p>c) Where only a part of the risk has commenced, such proportionate risk premium commensurate with the risk covered during such period.</p> <p>d) Free-look will not be applicable for policies with tenure less than one year.</p> <p>e) Free-look not applicable in case of renewals.</p> <p>All rights under this Policy shall immediately stand extinguished on the free look cancellation of the Policy.</p> <p>Multiple Policies</p> <p>If multiple certificates are issued under the same Group policy or across multiple group policies in the name of same person then we shall refund the premium of all other policies except the policy with maximum Sum Insured. However, in case of fraud or misrepresentation, all the policies will be cancelled and premium stands forfeited.</p> <p>Cancellation</p> <p>Cancellation/Termination</p> <p>Cancellation/ Termination (other than Free Look cancellation)</p> <p>1. Cancellation by Insured Person:</p> <p>You may terminate this Policy during the Policy Period by giving Us at least 30 days prior written notice. We shall cancel the Policy and refund the premium for the balance of the Policy Period in accordance with the table below provided that no claim has been made under the Policy by or on behalf of any Insured Person.</p> <p>i. Short-term(less than one year) Policies prior to commencement of risk We shall retain an amount of 10% of total premium paid.</p> <p>ii. Short-term(less than one year) Policies post commencement of risk</p> <table><tr><td>Completed tenure of the policy</td><td>Retention of Premium amount</td></tr><tr><td>0%-25%</td><td>40%</td></tr><tr><td>26%-50%</td><td>60%</td></tr><tr><td>51% and above</td><td>100%</td></tr></table>	Completed tenure of the policy	Retention of Premium amount	0%-25%	40%	26%-50%	60%	51% and above	100%	<p>Personal Accident Section 6.19</p> <p>Personal Accident Section 6.4</p>
Completed tenure of the policy	Retention of Premium amount									
0%-25%	40%									
26%-50%	60%									
51% and above	100%									

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iii. Annual Policies

Completed tenure of Policy	Retention of Premium
less than 1 month	25% of annual rate
between 1 month and 3 months	50% of annual rate
between 3 months and 6 months	75% of annual rate
Above 6 months	full annual premium

iv. Policy with tenure more than one year

Policy year in which policy is cancelled, we shall retain the premium as per below grid. However, for rest of years 5% of the pro-rated annual Premium amount shall be retained. Pro-rated annual rate will be arrived on the basis of pro-rated rate from the entire tenure premium.

In the year of cancellation, below grid shall apply for more than one year policies.

Completed tenure of Policy	Retention of Premium
less than 1 month	25% of annual rate
between 1 month and 3 months	50% of annual rate
between 3 months and 6 months	75% of annual rate
Above 6 months	full annual premium

Renewal of the Policy:

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		<p>1. This insurance policy shall ordinarily be renewable except on grounds of fraud, moral hazard or misrepresentation or non-cooperation by you. Wherever renewal is denied, due reasons shall be provided by us.</p> <p>2. The Company shall not be bound to give notice that renewal premium is due. Every renewal premium (which shall be paid and accepted in respect of this policy) shall be so paid and accepted upon the distinct understanding that no alteration has taken place in the facts contained in the proposal or declaration herein before mentioned and that nothing is known to the Insured that may result to enhance the risk of the Company under the insurer. Nothing herein or otherwise shall oblige the Company to offer renewal terms or restrict any renewal terms as to premium or otherwise. No renewal receipt shall be valid unless it is on the printed form of the Company and signed by an authorized official of the Company</p> <p>Policy must be renewed within the grace period of 30 days(in case of quarterly/ half-yearly/Annual Payment option) and 15 days(in case of monthly) of expiry to maintain the continuity of Coverage. If the premium is paid in instalments during the policy period, coverage will still be available during the grace period. A policy that is sought to be renewed after the grace period of 30 days or 15 days as applicable will be underwritten as a fresh policy at the discretion of Royal Sundaram.</p> <p>3. The coverages, terms & conditions and the premium are guaranteed till the expiry date shown in the policy. At renewal, the coverages, terms & condition & premium may change, in which case a 3 Months' notice shall be sent to the Insured Person at his last known address as recorded in the policy</p> <p>4. The product / plan may be withdrawn at any time, by giving a notice of 3 months to the Proposer at the address recorded / updated in the policy. When the policy is withdrawn, the product /plan shall not be available for renewal at the due date. However, the cover under such policy shall continue till the expiry date shown in the Schedule/Certificate of Insurance of the policy.</p> <p>5. In the event of withdrawal of a product, Company shall offer similar alternative product from its currently marketed product suites.</p>	Section 6.8
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		<p>In the likelihood of this product being withdrawn in future, the Company will intimate the insured person about the same 90 days prior to expiry of the policy.</p> <p>ii. Insured Person will have the option to migrate to similar health insurance product available with the Company at the time of renewal with all the accrued continuity benefits such as cumulative bonus, waiver of waiting period. as per IRDAI guidelines, provided the policy has been maintained without a break.</p> <p>Moratorium Period After completion of five continuous years under the policy no look back to be applied. This period of five years is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy and subsequently completion of 8 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 claim shall be contestable except for proven fraud and permanent exclusions specified in the policy contract. The policies would however be subject to all limits, sub limits, co-payments, deductibles as per the policy contract.</p>	Personal Accident Section 6.7
13	Your Obligations	<p>Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may result in claim not being paid.</p> <ul style="list-style-type: none"> • Disclosure of Material Information during the policy period such as change in occupation 	

Declaration by the policy holder:

I have read the above and confirm having noted the details.

Place:



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Date:

(Signature of the Policy Holder)

Note:

- iv. Insurer shall provide weblink where the product related documents including the Customer Information Sheet are available on the website of the insurer.
- v. In case of any conflict, the terms and conditions mentioned in the policy document shall prevail.
- vi. Insurer to take confirmation of the policyholder regarding receiving the Customer Information Sheet.