

Welcome to the 'I Feel Good' policy

digit

The Digit Complete Care Policy



Table of Contents

Follow these directions to find your way if you get lost. Just click on the chapter name to go there.

DEFINITIONS	4
COVERAGE	8
SECTION 1: PERSONAL ACCIDENT PROTECT	8
SECTION 2: ACCIDENTAL HOSPITALIZATION COVER	9
SECTION 3: DAILY HOSPITAL CASH COVER	11
SECTION 4: OUT-PATIENT (OPD) BENEFIT	11
SECTION 5: PERSONAL BELONGING PROTECT	16
SECTION 6: BUILDING & CONTENTS PROTECT	20
SECTION 7: LEGAL ASSISTANCE COVER	26
GENERAL CONDITIONS APPLICABLE TO THIS POLICY (UNLESS SPECIFIED OTHERWISE)	31
CONDITIONS PRECEDENT TO THE CONTRACT	31
CONDITION APPLICABLE DURING THE CONTRACT	31
CONDITIONS APPLICABLE WHEN A CLAIM ARISES	34
CUSTOMER GRIEVANCE REDRESSAL POLICY	40
ANNEXURE	42

Let's get started

You're already awesome because you decided to protect your most important asset, your health. Think of Digit as your running or gym buddy, keeping pace with you all the way. While you're reading this policy, if you get confused or have a query, or if you are referring to this policy because you have a claim to make, please call us at 1800-258-5956 or mail us at hello@godigit.com.

Based on the declaration provided by You to us, **Go Digit General Insurance Limited** (hereinafter called 'the Company/DIGIT') which forms the basis of this health policy contract, and having received your premium, we take pleasure in issuing this policy to you.

Go Digit General Insurance Limited will cover You under this Policy up to the Sum Insured mentioned against each Section, during the policy period mentioned in your Policy Schedule / Certificate of Insurance. Of course, like any insurance cover, it is governed by, and subject to certain terms, conditions and exclusions mentioned in this Policy.

The benefit under each Section will be payable provided that an event or occurrence described under the Sections/Covers occurs during the Policy Period mentioned in Your Policy Schedule/Certificate of Insurance.

Note: This Policy Wording provides detailed terms, conditions and exclusions for all Sections available under this Product. Kindly refer to the Policy Schedule / Certificate of Insurance to know exact details of Sections opted by You. Only Wordings related to Sections mentioned in your Policy Schedule/Certificate of Insurance are applicable.

Disclaimer:

The Description mentioned under "Digit Simplification"/ "Examples" throughout the Insurance Policy is only to aid Your understanding of the Coverage / Benefit Offered. In case of dispute, the Terms and Conditions detailed in the Policy Document and Policy Schedule/Certificate of Insurance shall prevail.

DEFINITIONS (Applicable to all Sections)

Digit Simplification: You didn't think you needed to know definitions since your time in school, right? Well, the good news is that you don't need to learn these by heart, as long as you understand them.

Certain words and phrases used throughout the Policy have specific meanings, and this section helps to understand them.

1. **Accident, Accidental** means sudden, unforeseen and involuntary event caused by external, visible and violent means.
2. **Alternative/Ayush Treatment** means forms of treatments other than "Allopathy" or "modern medicine" and includes Ayurveda, Unani, Sidha and Homeopathy in the Indian context.
3. **Burglary or Housebreaking** means theft following upon on actual forcible and violent entry of or exit from the premises by the person or persons committing such theft.
4. **Cashless Facility** means a facility extended by the Insurer to the Insured where payments of the costs of treatment undergone by the Insured in accordance with the policy terms and conditions, are directly made to the Network Provider by the Insurer to the extent pre-authorization is approved.
5. **Condition Precedent** means a policy term or condition upon which the insurer's liability under the policy is conditional upon.
6. **Contribution** is essentially the right of an insurer to call upon other insurers, liable to the same insured, to share the cost of an indemnity claim on a ratable proportion of Sum Insured. This clause shall not apply to any benefit offered on a fixed benefit basis.
7. **Co-Payment** means a cost sharing requirement under a health insurance policy that provides that the policyholder/insured will bear a specified percentage of the admissible claims amount. A co-payment does not reduce the Sum Insured. Co-payment will not be applicable to benefit policies of Personal Accident Protect and Daily Hospital Cash Cover. Co-payment shall also be applicable to non-health sections of this policy
8. **Day Care Centre** means any institution established for day care treatment of illness and/or injuries or a medical setup with a hospital and which has been registered with the local authorities, wherever applicable, and is under the supervision of a registered and qualified medical practitioner AND must comply with all minimum criterion as under:
 - a) has qualified nursing staff under its employment.
 - b) has qualified medical practitioner/s in charge.
 - c) has fully-equipped operation theatre of its own where surgical procedures are carried out.
 - d) maintains daily records of patients and will make these accessible to the insurance company's authorized personnel.
9. **Day Care Treatment** means medical treatment, and/or surgical procedure which is:
 - a) undertaken under General or Local Anaesthesia in a hospital/day care centre in less than 24 hours because of technological advancement, and
 - b) which would have otherwise required hospitalization of more than 24 hours.
10. **Deductible** means a cost-sharing requirement under a health insurance policy that provides that the insurer will not be liable for a specified rupee amount in case of indemnity policies and for a specified number of days/hours in case of Daily Hospital Cash policies which will apply before any benefits are payable by the insurer. A deductible does not reduce the Sum Insured. Deductible shall be applicable to all sections of this policy.

11. **Dental Treatment** means a treatment related to teeth or structures supporting teeth including examinations, fillings (where appropriate), crowns, extractions and surgery.
12. **Depreciation** means the reduction in the value of the insured property with its age, usage and condition.
13. **Emergency / Emergency Care** means management for an illness or injury which results in symptoms that occur suddenly and unexpectedly and requires immediate care by a medical practitioner to prevent death or serious long-term impairment of the insured person's health.
14. **Family Member** means the insured person's brother, sister, spouse, children, parents and parents-in-law.
15. **Grace Period** means the specified period of time immediately following the premium due date, during which a payment can be made to renew or continue a policy in force without loss of continuity benefits such as waiting periods and coverage of pre-existing diseases. Coverage is not available for the period for which no premium is received.
16. **Hazardous Activities** means any sport or activity, which is potentially dangerous to the Insured Person whether he/she is trained or not in such sport or activity. Such sport/activity includes but not limited to Insured Persons whilst engaging in speed racing of any kind (other than on foot), professional or competitive sport, bungee jumping, parasailing, ballooning, parachuting, base jumping, skydiving, paragliding, mountain or rock climbing necessitating the use of guides or ropes, potholing, abseiling, deep sea diving, biathlon, big game hunting, black water rafting, BMX stunt/obstacle riding, bobsleighting/using skeletons, bouldering, boxing, canyoning, caving/spelunking/pot holing, cave tubing, climbing/trekking/ walking over 4,000 meters, cycle racing, cyclo-cross, drag racing, endurance testing, hang gliding, harness racing, hell skiing, high diving (above 5 meters), hunting, ice hockey, ice speedway, jousting, judo, karate, kendo, luge, marathons, martial arts, micro-lighting, modern pentathlon, motorcycle racing, motor rallying, parapenting, piloting aircraft, polo, powerlifting, power boat racing, quad biking, river-boarding, river bugging, rodeo, roller hockey, rugby, ski acrobatics, ski doo, ski jumping, ski racing, sky diving, small bore target shooting, speed trials/time trials, triathlon, water-ski jumping, weight-lifting, wrestling snow and ice sports or involving a naval military or air force operation. Insured Person whilst flying or taking part in aerial activities except as a fare-paying passenger in a regular schedule airline or air charter company.
17. **Hospital** means any institution established for in-patient care and day care treatment of illness and/or injuries and which has been registered as a hospital with the local authorities under Clinical Establishments (Registration and Regulation) Act 2010 or under enactments specified under the Schedule of Section 56(1) and the said Act or complies with all minimum criteria as under:
 - a) has qualified nursing staff under its employment round the clock;
 - b) has at least 10 in-patient beds in towns having a population of less than 10,00,000 and at least 15 inpatient beds in all other places;
 - c) has qualified medical practitioner(s) in charge round-the-clock;
 - d) has a fully equipped operation theatre of its own where surgical procedures are carried out;
 - e) maintains daily records of patients and makes these accessible to the insurance company's authorized personnel;
18. **Hospitalization** means admission in a Hospital for a minimum period of 24 consecutive 'In-patient Care' hours except for specified procedures/treatments, where such admission could be for a period of less than 24 consecutive hours.
19. **Illness** means a sickness or a disease or pathological condition leading to the impairment of normal physiological function and requires medical treatment.
 - a) Acute Condition: A disease, illness or injury that is likely to respond quickly to treatment which aims to return the person to his or her state of health immediately before suffering the disease/illness/ injury, which leads to full recovery;

- b) **Chronic Condition:** - A disease, illness, or injury that has one or more of the following characteristics:
1. it needs ongoing or long-term monitoring through consultations, examinations, check-ups, and /or tests;
 2. it needs ongoing or long-term control or relief of symptoms;
 3. it requires rehabilitation for the patient or for the patient to be specially trained to cope with it;
 4. it continues indefinitely;
 5. it recurs or is likely to recur.
20. **Injury/Bodily Injury** means accidental physical bodily harm excluding illness or disease solely and directly caused by external, violent, visible and evident means which is verified and certified by a Medical Practitioner.
21. **In-patient Care** means treatment for which the insured person has to stay in a hospital for more than 24 hours for a covered event.
22. **Intensive Care Unit (ICU)** means an identified section, ward or wing of a hospital which is under the constant supervision of a dedicated medical practitioner(s), and which is specially equipped for the continuous monitoring and treatment of patients who are in a critical condition or require life support facilities and where the level of care and supervision is considerably more sophisticated and intensive than in the ordinary and other wards.
23. **ICU Charges** means the amount charged by a hospital towards ICU expenses which shall include the expenses for ICU bed, general medical support services provided to any ICU patient including monitoring devices, critical care nursing and intensivist charges.
24. **Medical Advice** means any consultation or advice from a Medical Practitioner including the issuance of any prescription or follow-up prescription.
25. **Medical Expenses** means those expenses that an insured person has necessarily and actually incurred for medical treatment on account of illness or accident on the advice of a Medical Practitioner, as long as these are no more than would have been payable if the insured person had not been insured and no more than other hospitals or doctors in the same locality would have charged for the same medical treatment.
26. **Medical Practitioner/Dentist** means a person who holds a valid registration from the Medical Council of any State or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within its scope and jurisdiction of license.
The registered practitioner should not be the insured or close member of the family.
27. **Medically Necessary Treatment** means any treatment, tests, medication, or stay in hospital or part of a stay in hospital which:
- a) is required for the medical management of the illness or injury suffered by the insured;
 - b) must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration, or intensity;
 - c) must have been prescribed by a medical practitioner;
 - d) must conform to the professional standards widely accepted in international medical practice or by the medical community in India.
28. **Network Provider** means hospitals or healthcare providers enlisted by an insurer, TPA or jointly by an insurer and TPA to provide medical services to an insured by a cashless facility.

29. **Non-Network Provider** means any hospital, day care centre or other provider that is not part of the network.
30. **Notification of Claim** means the process of intimating a claim to the insurer or TPA through any of the recognized modes of communication.
31. **OPD Treatment** means the one in which the insured visits a clinic/hospital or associated facility like a consultation room for diagnosis and treatment based on the advice of a Medical Practitioner. The insured is not admitted as a day care or in-patient.
32. **Personal Belonging** shall include personal effects carried by you during a journey in the vehicle mentioned in the Certificate of Insurance and cover contents that are personal in nature including but not limited to clothes, toiletries, shoes, mobile, laptops, I-pad, I-pods, camera etc, however excludes: Jewellery and valuables including but not limited to watches, diamonds, precious or semi-precious stones or metals, bullion, blueprints, manuscripts, sculptures, plans, designs, securities, deeds, stock and share certificates, work of art, paintings, curios, bonds, cheques, documents, cash and currency notes and coins, credit and debit cards, items of a consumable nature, baggage whilst being conveyed under a contract of affreightment or a contract of carriage and goods or samples carried in connection with any trade or business, unless specifically agreed by us and mentioned in your Policy Schedule/ Certificate of Insurance.
33. **Policy** means the Proposal, the Schedule/Certificate of Insurance (and any endorsement attaching to or forming part thereof) and the policy wordings.
34. **Policy Period** means the period between the commencement date and the expiry date specified in the Schedule/Certificate of Insurance and includes both, the commencement date as well as the expiry date.
35. **Pre-Existing Disease** means any condition, ailment or injury or related condition(s) for which there were signs or symptoms, and/or were diagnosed, and/or for which medical advice/treatment was received within 48 months prior to the first policy issued by the insurer and renewed continuously thereafter.
36. **Portability** means transfer by an individual health insurance policyholder (including family cover) of the credit gained for pre-existing conditions and time-bound exclusions if he/she chooses to switch from one insurer to another.
37. **Qualified Nurse** means a person who holds a valid registration from the Nursing Council of India or the Nursing Council of any state in India.
38. **Reasonable and Customary Charges** means the charges for services or supplies, which are the standard charges for the specific provider and consistent with the prevailing charges in the geographical area for identical or similar services, taking into account the nature of the illness/injury involved.
39. **Renewal** means the terms on which the contract of insurance can be renewed on mutual consent with a provision of grace period for treating the renewal continuous for the purpose of gaining credit for pre-existing diseases, time-bound exclusions and for all waiting periods.

40. **Robbery**

Robbery, within the meaning of this policy, is limited to a felonious and forcible taking of property:

- a) by violence inflicted upon the custodian or custodians in the actual care of the property at the time; or
- b) by putting such custodian or custodians in fear of violence;
- c) by an overt felonious act committed in the presence of such custodian or custodians and of which they were actually cognizant at the time;
- d) from the person or direct care or custody of a custodian, who, while conveying property insured under this policy, has been killed or rendered unconscious by injuries inflicted maliciously or sustained accidentally.

41. **Room** means a Single Room without wall/permanent partition, dining or waiting room and with or without following amenities: an attendant cot, one television, one sofa, a telephone, refrigerator, wardrobe, computer with internet connection and microwave oven.
42. **Room Rent** means the amount charged by a hospital towards room and boarding expenses and shall include the associated medical expenses.
43. **Sum Insured** means the amount as opted by you and stated in the Policy Schedule/Certificate of Insurance against the section/cover for each insured person including cumulative bonus (if any) for Individual Sum Insured Policy and aggregately for all insured members for a Floater Policy.
44. **Surgery or Surgical Procedure** means manual and/or operative procedure(s) required for treatment of an illness or injury, correction of deformities and defects, diagnosis and cure of diseases, relief from suffering and prolongation of life, performed in a hospital or day care centre by a medical practitioner.
45. **Terrorism or Act of Terrorism** means an act or series of acts, including but not limited to the use of force or violence and/or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s) or government(s), or unlawful associations, recognized under Unlawful Activities (Prevention) Amendment Act, 2008 or any other related and applicable national or state legislation formulated to combat unlawful and terrorist activities in the nation for the time being in force, committed for political, religious, ideological or similar purposes, including the intention to influence any government and/or to put the public or any section of the public in fear for such purposes.
46. **Theft** as defined in Section 378 of Indian Penal Code shall mean whoever, intending to take dishonestly any movable property out of the possession of any person without that person's consent, moves that property in order to such taking, is said to commit theft.
47. **Unproven/Experimental Treatment** means the treatment including drug experimental therapy which is not based on established medical practice in India, is treatment experimental or unproven.
48. **We, Us, Our, Ours, Digit, Company, Insurer** means Go Digit General Insurance Limited.
49. **You, Your, Yours, Yourself, Policyholder, Insured, Insured Person(s)** means the Individual Group Members who will be treated as insured beneficiary both Named and Unnamed as described in the Certificate of Insurance.

COVERAGE

SECTION 1. PERSONAL ACCIDENT PROTECT

Digit Simplification: The day bad luck strikes

If this cover has been opted, we will compensate the insured as per the following scale and up to the Sum Insured mentioned in the Policy Schedule/Certificate of Insurance against this section, if the insured sustains Accidental Bodily Injury while getting into, getting off or travelling inside the vehicle mentioned in the Policy Schedule/Certificate of Insurance and which independently of any other cause, shall within six calendar months of the occurrence of such injury result in:

Nature of Injury	Scale of Compensation
i) Death	100% of the Sum Insured
ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye	100% of the Sum Insured
iii) Loss of one limb or sight of one eye	50% of the Sum Insured
iv) Permanent total disablement from injuries other than named above	100% of the Sum Insured

SPECIAL CONDITIONS

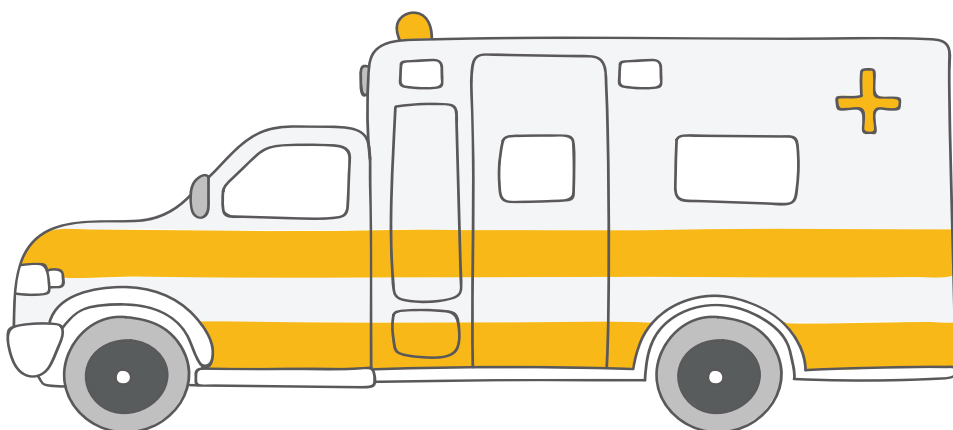
1. Compensation shall be payable under only one of the items (i) to (iv) above in respect of any such person arising out of any one occurrence and the total liability of the company shall not in the aggregate exceed the Sum Insured mentioned in your policy schedule during any one period of insurance in respect of any such person.
2. Such compensation shall be payable directly to the injured person or to his/her legal representative(s) whose receipt shall be the full discharge in respect of the injury of such person.

This cover is subject to terms, conditions, deductible, co-payment, limitations and exclusions mentioned in the policy.

SECTION 2. ACCIDENTAL HOSPITALIZATION COVER

Digit Simplification: Hospital stays are never fun. And the less said about hospital food, the better! That said, it's good to know that Digit will try and make it easy, should you need to spend some time in a hospital, before you're back on your feet.

If this cover has been opted and the insured sustains Accidental Bodily Injury while getting into, getting off or travelling inside the vehicle mentioned in the Policy Schedule/Certificate of Insurance, that requires insured person's hospitalization as an in-patient, we will pay all reasonable and customary charges that are medically necessary and incurred by the insured person. Expenses are covered up to Sum Insured mentioned in your Policy Schedule/Certificate of Insurance against this section, for the following:



Accommodation/Room Rent	Hospital accommodation in a ward, shared or private room
ICU	ICU Charges
Professional Fees	Fees for treatment by specialists, physicians, qualified nurses, surgeons and anaesthetists
Medication	Drugs, medicines, consumables, prescribed by a specialist or medical practitioner. This also includes anaesthesia, blood, oxygen, patient's diet, surgical appliances and cost of prosthetic and other devices or equipment if implanted during a surgical procedure
Diagnostic	Necessary procedures such as x-rays, pathology, brain and body scans (MRI, CT scans) etc. used to make a diagnosis for treatment.
Theatre Fees	Operation theatre fees

2a. Day Care Procedures

Digit Simplification: Why stay unnecessarily in a hospital when the required procedure requires just a day!

If the insured sustains Accidental Bodily Injury while getting into, getting off or travelling inside the vehicle mentioned in the Policy Schedule/Certificate of Insurance, due to which insured needs to undergo medical treatment and/or surgical procedure as an in-patient under General or Local Anaesthesia in a hospital/day care centre for a stay less than 24 hours because of technological advancement, we will pay the medical expenses incurred for such Day Care procedures.

Treatment normally taken on an out-patient basis is not included in the scope of this cover.

2b. Road Ambulance

Digit Simplification: Emergencies will and shall always be a top priority.

We will pay for the expenses incurred on insured's road transportation by a healthcare or an Ambulance Service Provider to a hospital for treatment following an emergency arising out of an accident, provided that:

- a) We have accepted a claim under **Section 2. Accidental Hospitalization Cover**.
- b) The maximum liability per hospitalization is restricted to the amount as mentioned in Your Policy Schedule / Certificate of Insurance against this cover.

In case the hospital the insured person has been transported to, doesn't have the necessary medical services, we will pay for the cost for additional road transportation to the new hospital too, which is prepared to admit and has the necessary medical services required. Make sure, such road transportation has been prescribed by a Medical Practitioner and/or should be medically necessary.

This cover is subject to terms, conditions, deductible, co-payment, limitations and exclusions mentioned in the policy.

SECTION 3. DAILY HOSPITAL CASH COVER

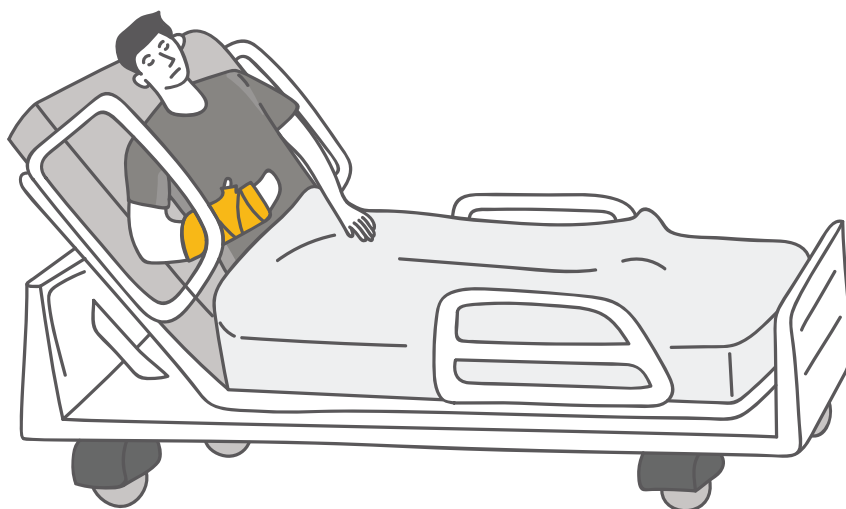
Digit Simplification: Staying in hospital has expenditure beyond hospital bill!

If this cover has been opted, we agree to pay the Insured a Daily Cash Allowance, the amount of which is mentioned in the Policy Schedule/Certificate of Insurance against this section. This will be paid for each continuous and completed period of 24 hours of hospitalisation arising out of Accidental Bodily Injury while getting into, getting off or travelling inside the vehicle mentioned in the Policy Schedule/Certificate of Insurance for a maximum number of days as mentioned in the Certificate of Insurance against this Section.

If the Insured is hospitalised in the Intensive Care Unit (ICU) of a hospital for each continuous and completed period of 24 hours, we will pay twice the Daily Cash Allowance amount mentioned in the Policy Schedule/Certificate of Insurance against this section.

Payment of claim under this benefit is subject to the time excess as opted and mentioned in the Policy Schedule/Certificate of Insurance against this section.

This cover is subject to terms, conditions, deductible, co-payment, limitations and exclusions mentioned in the policy.



SECTION 4. OUT-PATIENT (OPD) BENEFIT

Digit Simplification: Expenses like doctor's consultation fees, diagnostic tests, etc... when you are not hospitalized are covered under this!

If this cover has been opted for, we will pay the expenses incurred by the insured as an out-patient, for Medically Necessary Consultation and Examination by Medical Practitioners (including AYUSH) to assess insured's health for any illness or accidental bodily injury and medically necessary out-patient diagnostic procedures such as x-rays, pathology, brain and body scans (MRI, CT scans) etc. used to make a diagnosis for treatment, subject to the following terms and condition:

1. Consultation, examination and diagnostic tests are taken from a Network Service Provider.
2. The Limit Per Claim Incident i.e. consultation, examination and related diagnostic test does not exceed the amount mentioned in your Policy Schedule/Certificate of Insurance against this section.
3. No Waiting Period of any Pre-Existing Diseases.

4. Unlimited consultations per year, except for certain specialities mentioned in your Policy Schedule/ Certificate of Insurance where we will pay maximum up to number of times per speciality mentioned in your Policy Schedule/Certificate of Insurance during the policy period per insured.
5. This benefit is available only on Cashless Facility.
6. Every consultation should be pre-approved by us or by our Network Service Provider prior to your consultation visit



We will not pay the expenses in respect of the following:

Surgical Treatment	Any surgical procedure such as POP, suturing, dressings for accidents and animal bite related out-patient procedures etc. carried out by a Medical Practitioner
Medication	Drugs and medicines including injections prescribed by a Medical Practitioner
Miscellaneous	Any expense including but not limited to Spectacles, Hearing Aids, Implants, Contact Lenses and Physiotherapy, Psychiatric Counselling and Therapy, Vaccinations, Cosmetic Procedures, Ambulatory Devices like Walkers, BP Monitors, Glucometers, Thermometers, Vitamins and Supplements
Out-patient Dental Procedure	We will not pay for any dental procedures except for consultation, examination and diagnostic tests like dental x-ray

This cover is subject to terms, conditions, deductible, co-payment, limitations and exclusions mentioned in the policy.

SPECIFIC EXCLUSIONS APPLICABLE TO SECTIONS 1 To 4

Digit Simplification: We believe in being transparent with you, no hidden terms and conditions. So, here's what you are not covered for:

We shall not be liable to make any claim payment under this policy directly or indirectly caused by, based on, arising out of or howsoever attributable to any of the following unless specifically agreed and mentioned elsewhere in the Certificate of Insurance:

STANDARD ONES

1	<p>Artificial Life Maintenance</p> <p>Artificial Life Maintenance, including life support machine used, where such treatment is used to maintain the Insured/Patient in a vegetative state.</p>
2	<p>Breach of Law with Criminal Intent, Suicide and Self-Injury</p> <p>We do not cover treatment directly or indirectly arising from or contributed or aggravated or accelerated by any of the following:</p> <ol style="list-style-type: none"> Suicide or attempted suicide, while sane or insane, or due to use, misuse or abuse of narcotic or intoxicating drugs or alcohol or solvent. Intentional self-injury. Participation in any illegal or unlawful or criminal act. Use or consumption of narcotic or intoxicating drugs or alcohol or solvent, or taking of drugs (except under the direction of a Medical Practitioner).
3	<p>Pre-Existing Disease / Condition</p> <ol style="list-style-type: none"> Any hospitalization for an existing disability from a previous accident which has occurred prior to the first of this policy. Any hospitalization Expenses incurred because of pre-existing illness / condition. <p>This exclusion is not applicable if the insured has opted for Section 4. Out-Patient (OPD) Benefit and seeks medically necessary consultation and examination by Medical Practitioners (including AYUSH) and basic diagnostic tests as out-patient.</p>
4	<p>Cosmetic, Aesthetic and Re-Shaping Treatment & Surgeries</p> <ol style="list-style-type: none"> Plastic Surgery or Cosmetic Surgery or Treatments to change your appearance (Example a tummy tuck, facelift, tattoo, ear piercing), unless necessary as a part of medically necessary treatment certified by the attending Medical Practitioner for reconstruction following an accident covered under Section 2. Accidental Hospitalization Cover of the policy. Circumcision unless necessitated by an accident;
5	<p>Geography</p> <p>Any treatment received outside India is not covered under this policy, unless specifically agreed and mentioned in the Policy Schedule/Certificate of Insurance.</p>
6	<p>Hazardous Activities /Professional Sports/Defence Operation</p> <p>We will not pay any claim under this Policy, whilst You are:</p> <ol style="list-style-type: none"> Training for or taking part in sport as a professional for which you are paid or funded by sponsorship or grant. However, you would be covered if you participate in a non-professional capacity for any recreational sport which may be under the supervision of a trained professional. Involved in naval, military, Air Force operation. Involved in any hazardous activity.

7	<p>Non-Medical Expenses</p> <p>Items of personal comfort and convenience including but not limited to television (wherever specifically charged for), charges for access to telephone and telephone calls, internet, foodstuff (except patient's diet), cosmetics, hygiene articles, body care products and bath additive, barber or beauty service, guest service as well as similar incidental services and supplies including but not limited to charges for admission, discharge, administration, registration, documentation and filing. (Please visit our website for complete list of non-medical items).</p>
8	<p>Home Care Nursing</p> <p>Convalescence/recovery, cure, rest cure, sanatorium treatment, rehabilitation measures, private duty nursing, respite care, long-term nursing care or custodial care.</p>
9	<p>Insufficient Document</p> <p>We have tried to reduce the number of documents you need to share, but we shall not be liable to pay any claim in case all the necessary mandatory documents as mentioned in our claims processes are not submitted to us.</p>
10	<p>Spectacles, Hearing Aids & Other Expenses</p> <p>Provision or fitting of hearing aids, spectacles or contact lenses including optometric therapy, medical supplies including elastic stockings and similar products.</p>
11	<p>Eye Sight & Optical Services</p> <p>We do not cover treatment for:</p> <ol style="list-style-type: none"> a. Correction of refractive errors of the eye, including but not limited to short-sight or long-sight, such as glasses, contact lenses or laser eyesight correction surgery. b. Intravitreal injection including but not limited to Lucentis, Macugen or any other similar treatment.
12	<p>Preventive Treatment</p> <p>We do not cover inoculations, vaccinations of any kind, unless forming part of treatment for accidental bodily injury as prescribed by a Medical Practitioner.</p>
13	<p>Unproven or Experimental Treatment</p> <p>We do not cover any kind of unproven or experimental treatment. Services including device, treatment, procedure or pharmacological regimens which are considered as experimental, investigational or unproven.</p>
14	<p>Unjustified or Unwarranted Hospitalization</p> <p>Admission solely for physiotherapy, evaluation, investigations, diagnosis or observation service or not consistent with standard treatment guidelines, as defined by Clinical Establishments (Registration and Regulation) Act 2010 and amendments thereafter or Evidence Based Clinical Practices except to the extent covered under Section 4. Out-Patient (OPD) Benefit, if opted.</p>
15	<p>Vitamins/ Nutritional Supplements</p> <p>Vitamins, tonics, nutritional supplements, unless they form part of the treatment for accidental bodily injury covered under Section 2. Accidental Hospitalization Cover and as certified by the attending Medical Practitioner, are not covered.</p>

16	<p>Substance Abuse and Addictions</p> <p>Expenses incurred for the treatment of any accidental bodily injury, which is a direct or indirect consequence of:</p> <ol style="list-style-type: none"> a. Use/misuse/abuse of alcohol, opioids or nicotine or drugs (whether prescribed or not). b. Withdrawal and de-addiction.
17	<p>War and Hazardous Substances</p> <p>We do not cover treatment directly or indirectly arising from or required as a consequence of: War, invasion, acts of foreign enemy hostilities (whether or not war is declared), civil war, rebellion, revolution, insurrection or military or usurped power, mutiny, riot, strike, martial law or state of siege, attempted overthrow of government or any acts of terrorism.</p> <p>Chemical contamination or contamination by radioactivity from any nuclear material whatsoever or from the combustion of nuclear fuel.</p>
18	<p>Legal Liability</p> <p>Any Legal Liability due to any errors or omission or representation or consequences of any action taken on the part of any Hospital or Medical Practitioner.</p>
19	<p>HIV, AIDS, and related complex</p> <p>We do not cover venereal disease or any other sexually transmitted diseases such as AIDS/HIV or any other related arising out of HIV/AIDS such as ARC (AIDS related complex), Lymphomas in brain, Kaposi's Sarcoma, Tuberculosis.</p>
20	<p>Prosthetics and other devices</p> <p>Prosthetics and other devices NOT implanted internally by surgery.</p>
21	<p>Specific Treatments</p> <p>We will not pay for expenses related to administration of medications or procedures including but not limited to expense related:</p> <ol style="list-style-type: none"> a. Hyaluronic acid, Remicade or similar medications. b. Intra-articular/intra thecal or cortico-steroid injections, Immunotherapy/Hormonal Therapy. c. Robotic surgeries however expenses will be covered up to the conventional procedure cost. d. Predictive Genome Testing.
22	<p>Dental Treatment</p> <p>Treatment, procedures and preventive, diagnostic, restorative, cosmetic services related to disease, disorder and conditions related to natural teeth and Gingiva, unless requiring hospitalisation due to accident and except to the extent covered under Section 4. Out-Patient (OPD) Benefit, if opted.</p>
23	<p>Non-Allopathic Treatment</p> <p>We shall not pay for any non-allopathic treatment except to the extent covered under Section 4. Out-Patient (OPD) Benefit, if opted.</p>

SECTION 5. PERSONAL BELONGING PROTECT

A. PERSONAL BELONGING PROTECT - BURGLARY COVER

If this cover has been opted and the personal belonging(s) owned by the insured or in his/her care, custody, control or for which the Insured is legally responsible or have assumed a responsibility to insure or owned by Insured's Family Member, is physically lost during the Policy Period whilst contained or stored or lying in the insured vehicle during travel with the Insured in the vehicle mentioned in the Policy Schedule/Certificate of Insurance, due to Burglary, wherein someone has forcefully entered Your Unattended Locked Vehicle mentioned in the Policy Schedule/Certificate of Insurance, We will, at our discretion::

1. Pay the market value of the lost personal belonging prevailing at the time of loss arrived by applying suitable depreciation, or
2. Replace your personal belonging with another one of a similar make-model/type/configuration and age as available in the market.

Subject to the Sum Insured specified in the Policy Schedule/Certificate of Insurance against this section.



SPECIAL CONDITIONS APPLICABLE TO THIS SECTION

1. You must report the incidence of loss to us within 3 days from the date of incident.
2. You must immediately, and in any event within 3 days, lodge a complaint with the police to obtain crime reference and lost property report in the event of a loss or damage due to burglary, housebreaking and/or robbery (if opted).
3. Submit Proof of Ownership: Bills or Invoice Copy and any other document to substantiate the quantum of claims.
4. The Sum Insured opted under this cover is on First Loss Basis, unless specifically agreed by us.

SPECIAL EXCLUSIONS APPLICABLE TO THIS SECTION

We shall not be liable to pay any claim under this cover in the event of the following:

1. Co-Payment/Deductible as opted by You and mentioned in Your Policy Schedule.
2. Any claim which is reported or notified after 3 days to us or police after the happening of loss, unless we waive this condition at our sole discretion. Waiver can happen based on the reason for delay furnished by you to us in writing.
3. Loss or damage due to theft, mysterious disappearance and unexplained losses.
4. Any loss or damage due to robbery unless specifically opted as an extension and to the extent covered under Robbery Extension Cover.
5. Any loss or damage to goods or samples carried in connection with any trade or business.

6. Any loss or damage to jewellery and valuables, including but not limited to watches, diamonds, precious or semi-precious stones or metals, bullion, blueprints, manuscripts, sculptures, plans, designs, securities, deeds, stock and share certificates, work of art, paintings, curios, bonds, cheques, documents, cash, currency notes and coins, credit and debit cards, items of a consumable nature, baggage being conveyed under a contract of affreightment or a contract of carriage and goods or samples carried in connection with any trade or business, unless specifically agreed by us and mentioned in your Policy Schedule/Certificate of Insurance.
7. Loss of your personal belonging from the insured vehicle unless all the doors, windows and other openings are securely locked and properly fastened, and where entry was affected by violent and forcible means.
8. Any loss or damage to the personal belonging(s) arising out of by fire, explosion, self-ignition or lightning, riot and strike; Act of God Perils; accidental external means unless specifically opted and to the extent covered under **Section 5B**.
9. Loss or damage caused by delay, wear and tear, moth, vermin, atmospheric or climatic conditions, deterioration or electrical or mechanical derangement of any kind.
10. Breakage, cracking or scratching of cameras, binoculars, lenses, musical instruments and similar articles of brittle or fragile nature unless caused by the Insured Peril.
11. Loss damage or consequential loss directly or indirectly caused by, consisting of, or arising from any corruption, destruction, distortion, erasure or other loss or damage to data, software, or any kind of programming or instruction set.
12. Loss or damage to hired or borrowed property or equipment.
13. Any claim caused due to contributory negligence will be invalid.
14. Any loss or damage which is covered under the terms of the maintenance agreement of the insured personal belonging.
15. Loss or damage to contents due to burglary, robbery or theft where the insured, or any of the insured's family/employee/staff/business associate is alleged to be concerned or implicated.
16. Loss or damage caused by war, invasion, act of foreign enemy hostilities or war like operations (whether war be declared or not), civil war, mutiny, civil commotion assuming the proportions of or amounting to a popular rising, military rising, rebellion, revolution, insurrection or military or usurped power.
17. Loss or damage directly or indirectly caused to the "**Personal Belonging**" by
 - a) ionizing radiations or contamination by radioactivity from any nuclear fuel, or
 - b) from any nuclear waste from the combustion of nuclear fuel, or
 - c) the radioactive toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.
18. Loss or damage caused by act of terrorism, unless specifically agreed and mentioned in your Policy Schedule/Certificate of Insurance.

EXTENSION TO "SECTION 5A - PERSONAL BELONGING PROTECT":

ROBBERY COVER EXTENSION: If you have opted for this extension, coverage under "**Section 5 - Personal Belonging Protect**" is extended to include robbery of the personal belongings while insured or person with the insured is driving or travelling in the vehicle mentioned in the Policy Schedule/Certificate of Insurance provided you have paid additional premium and this extension is mentioned in your Policy Schedule/Certificate of Insurance. In consequence whereof, above mentioned Exclusions No 7. shall stand deleted.

SPECIAL EXCLUSIONS APPLICABLE TO THIS EXTENSION:

1. Any loss or damage to personal belongings whilst the insured or any person is driving the vehicle mentioned in the Policy Schedule/Certificate of Insurance is under the influence of intoxicating liquor or drugs.
2. Any loss or damage to personal belonging(s) whilst the insured or any person driving the vehicle mentioned in the Policy Schedule/Certificate of Insurance does not hold an effective and valid driving license.

This cover and extension are subject to terms, conditions, deductible, co-payment, limitations and exclusions mentioned in the policy.

B. PERSONAL BELONGING PROTECT: ACCIDENTAL DAMAGE COVER

If this cover has been opted and the personal belonging(s) owned by the insured or in his/her care, custody, control or for which the Insured is legally responsible or have assumed a responsibility to insure or owned by Insured's Family Member is physically damaged during the Policy Period whilst contained or stored or lying in the insured vehicle during travel with the Insured in the vehicle mentioned in the Policy Schedule/Certificate of Insurance, due to the perils mentioned below:

- Fire
- Lightning
- Explosion/Implosion
- Riot, Strike and Malicious Damage;
- Earthquake (fire and shock damage)
- Flood, Typhoon, Hurricane, Storm, Tempest, Inundation, Cyclone, Hailstorm, Frost;
- By accidental external means
- Landslide, Rockslide

We will, at our discretion:

1. Pay the Market Value of the damaged personal belonging prevailing at the time of loss arrived by applying suitable depreciation; or
2. Replace your personal belonging with another one of a similar make-model/type/configuration and age as available in the market.

Subject to the Sum Insured specified in the Policy Schedule/Certificate of Insurance against this section.

SPECIAL CONDITIONS APPLICABLE TO THIS SECTION

1. You must report the incidence of loss to us within 3 days from date of incident.
2. You must immediately, and in any event within 3 days, lodge a complaint with the police to obtain crime reference in the event of malicious damage.
3. Submit Proof of Ownership: Bills or Invoice Copy and any other document to substantiate the quantum of claims.
4. The Sum Insured opted under this cover is on First Loss Basis, unless specifically agreed by us.

SPECIAL EXCLUSIONS APPLICABLE TO THIS SECTION

We shall not be liable to pay any claim under this cover in the event of the following:

1. Co-Payment/Deductible as opted by you and mentioned in your policy schedule.
2. Any claim which is reported or notified after 3 days to us or police after the happening of the loss, unless we waive this condition at our sole discretion. Waiver can happen based on the reason for delay furnished by you to us in writing.

3. Loss or damage due to mysterious disappearance and unexplained losses.
4. Any loss or damage due to burglary, housebreaking, robbery, theft, larceny, unless specifically opted and to the extent covered under Section 5A.
5. Any loss or damage to goods or samples carried in connection with any trade or business.
6. Any loss or damage to jewellery and valuables including but not limited to watches, diamonds, precious or semi-precious stones or metals, bullion, blueprints, manuscripts, sculptures, plans, designs, securities, deeds, stock and share certificates, work of art, paintings, curios, bonds, cheques, documents, cash and currency notes and coins, credit and debit cards, items of a consumable nature, baggage being conveyed under a contract of affreightment or a contract of carriage and goods or samples carried in connection with any trade or business, unless specifically agreed by us and mentioned in your Policy Schedule/Certificate of Insurance.
7. Loss or damage caused by delay, wear and tear, moth, vermin, atmospheric or climatic conditions, deterioration or electrical or mechanical derangement of any kind.
8. Breakage, cracking or scratching of cameras, binoculars, lenses, musical instruments and similar articles of brittle or fragile nature unless caused by the Insured Peril.
9. Loss damage or consequential loss directly or indirectly caused by, consisting of, or arising from any corruption, destruction, distortion, erasure or other loss or damage to data, software, or any kind of programming or instruction set.
10. Loss or damage to hired or borrowed property or equipment.
11. Any claim caused due to contributory negligence will be invalid.
12. Any loss or damage which is covered under the terms of the maintenance agreement of the insured's personal belonging.
13. Loss or damage that is covered under manufacturer's, supplier's or dealer's warranty or recall campaign in the event of mass failure of the personal belonging.
14. Any accidental loss or damage to the personal belongings whilst the insured or any person driving the vehicle mentioned in the Policy Schedule/Certificate of Insurance is under the influence of intoxicating liquor or drugs.
15. Any accidental loss or damage to the personal belongings whilst the insured or any person driving the vehicle mentioned in the Policy Schedule/Certificate of Insurance does not hold an effective and valid driving license.
16. Loss or damage caused by war, invasion, act of foreign enemy hostilities or war like operations (whether war be declared or not), civil war, mutiny, civil commotion assuming the proportions of or amounting to a popular rising, military rising, rebellion, revolution, insurrection or military or usurped power.
17. Loss or damage directly or indirectly caused to the "Personal Belonging" by
 - a) ionizing radiations or contamination by radioactivity from any nuclear fuel, or
 - b) from any nuclear waste from the combustion of nuclear fuel, or
 - c) the radioactive toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.
18. Loss or damage caused by act of terrorism, unless specifically agreed and mentioned in your Policy Schedule/Certificate of Insurance.

This cover is subject to terms, conditions, deductible, co-payment, limitations and exclusions mentioned in the policy.

SECTION 6. BUILDING & CONTENTS PROTECT

DEFINITIONS APPLICABLE TO THIS SECTION:

1	Aircraft Damage means loss, destruction or damage caused by aircraft, other aerial or space devices and articles dropped there from excluding those caused by pressure waves.
2	Bush Fire Excluding loss, destruction or damage caused by Forest Fire.
3	Geography Any treatment received outside India is not covered under this policy
4	Fire Excluding destruction or damage caused to the property insured by a. a. its own fermentation, natural heating or spontaneous combustion. b. its undergoing any heating or drying process. b. burning of property insured by order of any Public Authority.
5	Building means the premises/structure mentioned in the Policy Schedule/Certificate of Insurance which is of standard construction and possesses a valid Occupancy Certificate and a Building Completion Certificate.
6	Contents shall include furniture, fixtures, fittings, cupboards including inbuilt cupboards, electrical fittings, sanitary fittings, electrical and electronic appliances, crockery, cutlery, steel utensils, clothing & personal effects, drapery, pedal cycles, other similar items whilst stored or lying in the insured building and excludes portable equipment, jewellery and valuables, work of art, paintings, curios, bonds, cheques, documents, cash and currency notes and coins, credit and debit cards etc., unless specifically agreed and mentioned in the Policy Schedule/Certificate of Insurance.
7	Impact Damage means loss of or visible physical damage or destruction caused to the insured property due to impact by any rail/road vehicle or animal by direct contact not belonging to or owned by a) the insured or any occupier of the premises, or b) their employees while acting in the course of their employment.
8	Kutchra Construction means “Buildings/Structure” having walls and/or roofs of wooden planks/ thatched leaves and/or grass/hay of any kind/bamboo/plastic cloth/asphalt cloth/canvas/ tarpaulin and the like are treated as “Kutchra” construction.
9	Lightning
10	Missile Testing operations
11	Property/Insured Property means “Building” and/or its “Contents” described in the Policy Schedule/Certificate of Insurance for which the insured is accountable.

12	<p>Riot, Strike and Malicious Damage means loss of or visible physical damage or destruction by external violent means, directly caused to the insured property, but excluding those caused by</p> <ul style="list-style-type: none"> a) Total or partial cessation of work or the retardation or interruption or cessation of any process or operations or omissions of any kind. b) Permanent or temporary dispossession resulting from confiscation, commandeering, requisition or destruction by order of the government or any lawfully constituted authority. c) Permanent or temporary dispossession of any building or plant or unit or machinery resulting from the unlawful occupation by any person of such building or plant or unit or machinery or prevention of access to the same. d) Burglary, housebreaking, theft, looting, larceny or any such attempt or any omission of any kind of any person (whether or not such act is committed in the course of a disturbance of public peace) in any malicious act.
13	<p>Leakage from Automatic Sprinkler Installations</p> <p>Excluding loss, destruction or damage caused by</p> <ul style="list-style-type: none"> a. Repairs or alterations to the buildings or premises b. Repairs, Removal or Extension of the Sprinkler Installation c. Defects in construction known to the Insured.
14	<p>Storm, Cyclone, Typhoon, Tempest, Hurricane, Tornado, Flood and Inundation means Loss, destruction or damage directly caused by Storm, Cyclone, Typhoon, Tempest, Hurricane, Tornado, Flood or Inundation excluding those resulting from earthquake, Volcanic eruption or other convulsions of nature. (Wherever earthquake cover is given as an “add on cover” the words “excluding those resulting from earthquake volcanic eruption or other convulsions of nature” shall stand deleted.)</p>
15	<p>Subsidence and landslide including rockslide means loss, destruction or damage directly caused by subsidence of part of the site on which the property stands or landslide/rockslide, excluding:</p> <ul style="list-style-type: none"> a) the normal cracking, settlement or bedding down of new structures; b) the settlement or movement of made up ground; c) coastal or river erosion; d) defective design or workmanship or use of defective materials; e) demolition, construction, structural alterations or repair of any property or groundworks or excavations.

PROVIDED that the liability of the Company shall in no case exceed in respect of each item the sum expressed in the said Schedule to be insured thereon or in the whole the total Sum Insured hereby or such other sum or sums as may be substituted therefor by memorandum hereon or attached hereto signed by or on behalf of the Company.

COVERAGE

A. STANDARD FIRE AND SPECIAL PERILS COVER

If you have opted for this cover, we will indemnify you up to the Sum Insured mentioned in your Policy Schedule/Certificate of Insurance against this cover, if there is any accidental and physical loss or damage by any of the perils specified below during the policy period to your “**Building**” and/or its “**Contents**” whilst contained or stored or lying in the Insured “**Building**” specified in the Policy Schedule/Certificate of Insurance:

- Fire
- Lightning
- Explosion/Implosion
- Aircraft Damage
- Riot, Strike and Malicious Damage
- Storm, Cyclone, Typhoon, Tempest, Hurricane, Tornado, Flood and Inundation
- Impact Damage
- Subsidence and Landslide including Rockslide
- Bursting and/or Overflowing of Water Tanks, Apparatus and Pipes
- Missile Testing Operations
- Leakage from Automatic Sprinkler Installations
- Bush Fire

SUM INSURED BASIS OPTION FOR BUILDING AND CONTENTS

A. Sum Insured Basis Options for Building (Property)

The Sum Insured opted by you at inception or renewal shall be as per one of the following basis mentioned in Your Policy Schedule/Certificate of Insurance:

a) **Market Value Basis**

Digit Simplification: This value considers depreciation due to age, usage and condition.

Sum Insured on Market Value Basis shall represent the cost of construction on the first day of policy period of similar property less depreciation for age, usage and condition. Cost of Land is not taken into consideration while arriving at Sum Insured on Market Value Basis.

b) **Reinstatement Value Basis**

Digit Simplification: This value means the value of similar new property without considering depreciation due to age, usage and condition.

Sum Insured on Reinstatement Value Basis shall not be less than the cost of reinstatement as if such property (excluding cost of land) were reinstated on the first day of policy period which shall mean the cost of replacement of the insured property by new property in a condition equal to but not better or more extensive than its condition when new. No depreciation for age, usage and condition should be taken into consideration while arriving Sum Insured on Reinstatement Value Basis.

B. Sum Insured Basis Options for Contents

a) **Market Value Basis**

Digit Simplification: This value considers depreciation due to age, usage and condition.

Sum Insured on Market Value Basis shall represent the Replacement Value of similar property less depreciation for age, usage and condition.

b) New for Old Basis

Digit Simplification: This value means the value of similar new content without considering depreciation due to age/wear and tear.

Sum Insured on new for old basis shall represent the Replacement Value of the Insured Property by a new property of same kind, type and capacity, without deducting depreciation for age, usage and condition.

c) First Loss Basis

Digit Simplification: First Loss Basis Sum Insured is chosen in cases where you opt to insure the "Contents" for a sum less than the Actual Total Value.

First Loss Basis Sum Insured shall be a specific amount mentioned in your policy Schedule/Certificate of Insurance which shall be less than the Actual Value at risk.

SPECIAL EXCLUSIONS APPLICABLE FOR SECTION 6A

We shall not be liable in respect of:

1. This Policy does not cover (not applicable to policies covering dwellings)
 - a. The first 5% of each and every claim subject to a minimum of Rs. 10,000 in respect of each and every loss arising out of "Act of God perils" such as Lightning, STFI, Subsidence, Landslide and Rock slide covered under the policy.
 - b. The first Rs. 10,000 for each and every loss arising out of other perils in respect of which the Insured is indemnified by this policy.

The Excess shall apply per event per insured

2. Loss, destruction, or damage caused by war, invasion, act of foreign enemy hostilities or war like operations (whether war be declared or not), civil war, mutiny, civil commotion assuming the proportions of or amounting to a popular rising, military rising, rebellion, revolution, insurrection or military or usurped power.
3. Loss, destruction, or damage directly or indirectly caused to the property insured by
 - a. ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel
 - b. the radioactive toxic, explosives or other hazardous properties of an explosive nuclear assembly or nuclear component thereof
4. **Loss, destruction or damage caused to the insured property by pollution or contamination excluding.**
 - a. Pollution or contamination which itself results from a peril hereby insured against;
 - b. Any peril hereby insured against which itself results from pollution or contamination.
5. **Electrical/Mechanical Breakdown:** Loss, destruction or damage to electrical machine, electronic equipment, apparatus, fixture, or fitting arising from or occasioned by over-running, excessive pressure, short circuiting, arcing, self-heating or leakage of electricity from whatever cause (lightning included) provided that this exclusion shall apply only to the particular electrical machine, equipment, apparatus, fixture or fitting so affected and not to other machines, equipment, apparatus, fixtures or fittings which may be destroyed or damaged by fire so set up.
6. **Architects, Surveyors and Consulting Engineer's Fees & Debris Removal:** Expenses necessarily incurred on
 - a. Architects, Surveyors and Consulting Engineer's Fees, and
 - b. Debris Removal by the insured following a loss, destruction or damage to the property insured by an Insured Peril in excess of 3% and 1% of the claim amount respectively.

7. **Burglary, Theft and Housebreaking:** Loss by theft during or after the occurrence of any insured peril except as provided under riot, strike, malicious damage cover.
8. Any loss or damage occasioned by or through or in consequence directly or indirectly due to earthquake, volcanic eruption, or other convulsions of nature.
9. Loss, or damage by spoilage resulting from retardation or interruption or cessation of any process or operation caused by operation of any of the perils covered.
10. Loss, destruction or damage to the stocks in Cold Storage premises caused by change of temperature.
11. Loss or damage to property insured if removed to any building or place other than in which it is herein stated to be insured, except machinery and equipment temporarily removed for repairs, cleaning, renovation, or other similar purposes for a period not exceeding 60 days.
12. Loss, destruction or damage to bullion or unset precious stones, any curios or works of art for an amount exceeding Rs. 10000/-, goods held in trust or on commission, manuscripts, plans, drawings, securities, obligations or documents of any kind, stamps, coins or paper money, cheques, books of accounts or other business books, computer systems records, explosives unless otherwise expressly stated in the policy.
13. Loss of earnings, loss by delay, loss of market or other consequential or indirect loss or damage of any kind or description whatsoever.
14. Loss, destruction or damage to bullion or unset precious stones, any curios or works of art for an amount exceeding Rs. 10000/-, goods held in trust or on commission, manuscripts, plans, drawings, securities, obligations or documents of any kind, stamps, coins or paper money, cheques, books of accounts or other business books, computer systems records, explosives unless otherwise expressly stated in the policy.
15. Loss of earnings, loss by delay, loss of market or other consequential or indirect loss or damage of any kind or description whatsoever.

SPECIAL CONDITIONS APPLICABLE TO SECTION 6A

This policy shall be voidable in the event of mis-representation, mis-description or non-disclosure of any material particular.

All insurances under this policy shall cease on expiry of seven days from the date of fall or displacement of any building or part thereof or of the whole or any part of any range of buildings or of any structure of which such building forms part.

Provided such a fall or displacement is not caused by insured perils, loss or damage which is covered by this policy or would be covered if such building, range of buildings or structure were insured under this policy.

Notwithstanding the above, the Company subject to an express notice being given as soon as possible but not later than seven days of any such fall or displacement may agree to continue the insurance subject to revised rates, terms and conditions as may be decided by it and confirmed in writing to this effect

Under any of the following circumstances the insurance ceases to attach as regards the property affected unless the Insured, before the occurrence of any loss or damage, obtains the sanction of the Company signified by endorsement upon the policy by or on behalf of the Company :-

If the trade or manufacture carried on be altered, or if the nature of the occupation of or other circumstances affecting the building insured or containing the insured property be changed in such a way as to increase the risk of loss or damage by Insured Perils.

If the building insured or containing the insured property becomes unoccupied and so remains for a period of more than 30 days. This condition will not be applicable for Policies covering "Dwellings".

If the interest in the property passes from the insured otherwise than by will or operation of law

This insurance does not cover any loss or damage to property which, at the time of the happening of such loss or damage, is insured by or would, but for the existence of this policy, be insured by any marine policy or policies except in respect of any excess beyond the amount which would have been payable under the marine policy or policies had this insurance not been effected

On the happening of any loss or damage the Insured shall forthwith give notice thereof to the Company and shall within 15 days after the loss or damage, or such further time as the Company may in writing allow in that behalf, deliver to the Company

A claim in writing for the loss or damage containing as particular

B. BURGLARY, HOUSEBREAKING & ROBBERY COVER

If you have opted for this cover, we will indemnify you up to the Sum Insured mentioned in your Policy Schedule/Certificate of Insurance against this cover, if the “**Contents**” are lost or damaged whilst contained in the “**Building**” specified in the Policy Schedule/Certificate of Insurance due to burglary and/or housebreaking and/or robbery.

SPECIAL EXCLUSIONS APPLICABLE TO SECTION 6B

We shall not be liable in respect of:

1. Co-Payment/Deductible as mentioned in your Certificate of Insurance against this coverage. The Co-Payment/Deductible shall apply for each and every claim.
2. Loss, destruction or damage to bullion or work of art, manuscripts, designs, moulds, plans, drawings, securities or obligations, deeds, bonds, stamps, coins or paper money, cheques, books of accounts or other business books, computer systems records, explosives, livestock, blood stock, motor vehicles, jewellery and valuables, portable equipment like mobile, laptop, I-pad, I-pod, camera and items of similar nature, unless specifically insured and mentioned in the Policy Schedule/Certificate of Insurance.
3. Loss or damage to contents due to larceny and/or theft unless specifically opted as an extension and mentioned in your Policy Schedule/Certificate of Insurance.
4. Loss or damage to contents due to burglary and/or housebreaking and/or robbery and/or larceny and/or theft where the insured or any of the insured’s family/employee/staff/business associate is alleged to be concerned or implicated.
5. Loss or damage occasioned by loot, sack, spillage or pilferage.
6. Loss or damage by fire or explosion however caused.
7. Mysterious disappearance and unexplained losses.
8. Loss or damage whether direct or indirect arising from war, invasion, act of foreign enemy, hostilities or warlike operations (whether war be declared or not), mutiny, insurrection, rebellion, revolution, conspiracy, military naval or usurped power, seizure, capture, confiscation, arrests, restraints, permanent or temporary dispossession resulting from confiscation, commandeering or requisition by order of government or any lawfully constituted authority.
9. Damage cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any act of terrorism, regardless of any other cause or event contributing concurrently or in any other sequence to the loss.

This exclusion also includes loss, damage, cost or expenses of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to action taken in respect of any act of terrorism.

If the company alleges that by reason of this exclusion, any loss, damage, cost or expenses is not covered by this insurance the burden of proving the contrary shall be upon the Insured.

10. Loss or damage directly or indirectly caused by or contributed to by or arising from ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste

or from the combustion of nuclear fuel nor any consequential loss and for the purpose of this exception, combustion shall include any self-sustaining process of nuclear fission directly or indirectly caused by or contribution to by or arising from nuclear weapons material.

11. Loss or damage caused by use of key to the insured property or any duplicate key belonging to the Insured, unless such key has been obtained by assault or violence or any threat thereof.

EXTENSION TO “SECTION 6.B. BURGLARY, HOUSEBREAKING & ROBBERY”:

THEFT & LARCENY COVER EXTENSION: If you have opted for this extension, coverage under “Section 6.B. - Burglary, Housebreaking & Robbery” is extended to include any loss or damage to the “Contents” whilst contained in the “Building” specified in the Policy Schedule/Certificate of Insurance due to theft and/or larceny, provided you have paid additional premium and this extension is mentioned in your Policy Schedule/Certificate of Insurance.

This cover and extension are subject to terms, conditions, deductible, co-payment, limitations and exclusions mentioned in the policy.

SECTION 7. LEGAL ASSISTANCE COVER

DEFINITION APPLICABLE TO THIS SECTION:

Legal Expenses means the cost incurred by the insured towards lawyer and court fees for a criminal trial / penal offence arising solely due to an accident involving

- a. The vehicle mentioned in the Policy Schedule/Certificate of Insurance driven by the insured/insured’s driver; or
- b. Any vehicle driven by the insured depending on the basis opted by you and which has resulted in bodily injury, death or property damage to a Third Party.

COVERAGE

We agree to pay up to the Sum Insured mentioned in the Policy Schedule/Certificate of Insurance against this section for:

1. Cover 1 - Legal Expenses

The Legal Expenses incurred by the insured for defending a criminal trial/penal offence arising solely due to vehicle accident.

2. Cover 2 - OPD Treatment Expenses

Necessary medical expenses incurred by the Insured for providing OPD Treatment to a Third Party, resulting solely from an Accidental Bodily Injury suffered by the Third Party during the policy period in connection with the vehicle.

We will pay for the benefits mentioned in the below table:

Professional Fees	Fees for medically necessary consultation and examination by Medical Practitioners to assess Third Party's health for an accidental injury.
Diagnostic	Medically necessary out-patient diagnostic procedures such as x-rays, brain and body scans (MRI, CT scans) etc. used to make a diagnosis for treatment from a diagnostic centre.
Surgical Treatment	Minor surgical procedure such as POP, Suturing, Dressings for accidents-related outpatient procedures etc. carried out by a Medical Practitioner
Medication	Drugs and medicines prescribed by a Medical Practitioner
Out-Patient Dental Treatment	Outpatient dental treatment resulting solely and directly from vehicle accident

We do not cover other miscellaneous expenses, including but not limited to Spectacles, Contact Lenses, Cosmetic Procedures, Physiotherapy, Ambulatory Devices like Walkers, BP Monitors, Glucometers, Thermometers, Dietician's Fees, Vitamins and Supplements.

3. Cover 3 - Hospitalization Expenses

All reasonable and customary charges that are medically necessary and incurred by the insured in respect of Third Party's hospitalization as an inpatient resulting solely from an Accidental Bodily Injury sustained by the Third Party during the policy period in connection with the vehicle.

We will pay for the benefits mentioned in the below table:

Accommodation/Room Rent	Hospital accommodation in a ward, shared or private room
ICU	ICU Charges
Professional Fees	Fees for treatment by specialists, physicians, qualified nurses, surgeons and anaesthetists
Medication	Drugs, medicines, consumables, prescribed by a specialist or medical practitioner. This also includes anaesthesia, blood, oxygen, patient's diet, surgical appliances and cost of prosthetic and other devices or equipment if implanted during the surgical procedure
Diagnostic	Necessary procedures such as x-rays, pathology, brain and body scans (MRI, CT scans) etc. used to make a diagnosis for treatment
Theatre Fees	Operation Theatre Fees

Provided always that the:

- a) Legal Expenses will be paid only if accident leads to a criminal trial/penal offence and legal representation is done by lawyers empanelled with us, unless specifically agreed otherwise, by us.
- b) OPD Treatment expenses will be paid up to the limit mentioned in your Policy Schedule/Certificate of Insurance provided such treatment is taken from Network Hospitals empanelled by us or by Third Party Administrator engaged by us only, unless specifically agreed otherwise, by us.

- c) Hospitalization expenses will be paid only if the medical treatment for Third Party is taken from Network Hospitals empanelled by us or by Third Party Administrator engaged by us only, unless specifically agreed otherwise, by us. Where the Insured has made Payment directly to the Hospital which is not a Network Hospital, We shall reimburse the expenses on submission of documents mentioned in the list of documents mentioned in the Claim Process below provided such hospital / establishments must be licensed or registered as may be required by any Local, State or National Law as applicable.
4. We will also provide the following assistance services as soon as the insured informs us about the vehicle accident and needs immediate guidance to deal with the accident scenario:
- a) Call us on our helpline number XXXXXXXXXX for instant legal advice and legal information, and to examine the situation for referral to other services.
- b) Based on the situation informed to us, the insured may be referred to our empanelled lawyers for further legal assistance, for example – assistance with regards to dealing with police authorities, assistance in submission of all necessary documents to the court, plea bargaining for criminal offence under IPC, assistance in doing away with the insured's personal presence in the court matter unless necessary, out of court negotiation etc.
- c) In case of vehicle accident leading to Third Party bodily injury, we will assist in arranging details of nearest Network Hospitals empanelled by us or by Third Party Administrator engaged by us, where OPD treatment or hospitalization can be taken/done. This service will be provided only if the insured has opted for a wider plan.
- d) Assistance in arranging towing service for the vehicle involved in accident, provided it is so damaged that it is immobilized or rendered unfit for the purpose of driving on the road, to the nearest vehicle repair shop. The towing charges need to be paid by the insured.
- e) In case of vehicle involved in accident being immobilized due to an accident, we shall arrange a taxi to a single destination within 50 km of radius from the accident site.

COVERAGE BASIS

This cover can be opted on one of below two bases, as mentioned in your Policy Schedule/Certificate of Insurance.

BASIS 1: If, the insured has opted for this basis, then he/she would be compensated as per the plan opted and mentioned in your Policy Schedule/Certificate of Insurance, only if the vehicle mentioned in the Policy Schedule/Certificate of Insurance meets with an accident during the policy period resulting in bodily injury, death or property damage to a Third Party.

BASIS 2: If, the insured has opted for this basis, then he/she would be compensated as per the plan opted and mentioned in your Policy Schedule/Certificate of Insurance, when any vehicle driven by the insured meets with an accident during the policy period, resulting in bodily injury, death or property damage to a Third Party.

PLAN OPTIONS

There are two plan options under this cover. The plan opted by you is as mentioned in your Policy Schedule/Certificate of Insurance.

Basic Plan: If you have opted for this plan, we will compensate you only for “Cover 1 - Legal Expenses” as mentioned in the above coverage part.

Comprehensive Plan: If you have opted for this plan, we will compensate You for “Cover 1 - Legal Expenses”, “Cover 2 - OPD Treatment Expenses” and “Cover 3 - Hospitalization Expenses” as mentioned in the above coverage part.

SPECIAL CONDITIONS APPLICABLE FOR SECTION 7

1. The person driving the vehicle holds a valid and effective driving license at the time of the accident for driving the particular class of vehicle and is not disqualified from holding or obtaining such a license.
2. The person holding a valid and effective Learner's License may also drive the vehicle and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicles Rules, 1989 and any subsequent amendment as applicable.
3. The vehicle possesses a valid and effective Pollution Under Control (PUC) Certificate and fitness certificate.
4. The vehicle should have a valid Motor Third Party Liability Insurance unless this condition is specifically waived off by us.
5. Any payment of claim under this section does not amount to acceptance of a Motor Third Party Liability Claim under Motor Policy availed by the insured from us.
6. Third Party excludes persons travelling in the vehicle including family, friends and relatives.

SPECIAL EXCLUSION APPLICABLE FOR SECTION 7

We shall not be liable for the following:

1. Any claim notified/reported to us after 24 hours of accident, provided, we may, at our sole discretion, condone the delay in notification of claim on merits based on the reason for delay furnished by you to us.
2. Any claim whilst the insured or any person driving the vehicle is under the influence of intoxicating liquor or drugs.
3. Any claim whilst the insured or any person driving the vehicle does not hold valid and effective driving license.
4. Any claim arising outside India.
5. Any claim arising out of any Contractual Liability.
6. Any claim for legal liability to Third Party and/or Consequential Loss.
7. Any claim for OPD Treatment/hospitalization due to illness.
8. Any claim for insured's/insured's driver's OPD Treatment/hospitalization.
9. Any claim for accidents happening prior to the policy inception.
10. Any claim for accidents resulting from electrical and mechanical breakdown of your vehicle.
11. Loss or damage to your vehicle.
12. Any award by the court/judicial/quasi-judicial authority for payment of compensation to Third Party.
13. Any claim directly or indirectly arising from or required as a consequence of:
 - a) War, invasion, acts of foreign enemy hostilities (whether or not war is declared), civil war, rebellion, revolution, insurrection or military or usurped power, mutiny, riot, strike, martial law or state of siege, attempted overthrow of government or any acts of terrorism.
 - b) Chemical contamination or contamination by radioactivity from any nuclear material whatsoever or from the combustion of nuclear fuel.

CLAIMS PROCESS APPLICABLE FOR SECTION 7

1. Insured shall immediately, and in any event within 24 hours report the incident to us.
2. Based on the incident reported, we will provide suitable assistance services mentioned above in Clause 4 under the coverage section.
3. For claims related to legal expenses where services have been availed from our empanelled lawyers, we will make direct payment to the lawyer. Where the insured has taken prior approval from us and made payment directly to the lawyer who is not empanelled with us, we shall reimburse the expenses on submission of documents mentioned in the list of documents below.
4. For claims related to OPD Treatment/hospitalization, where treatment has been availed from Network Hospitals empanelled by us or by Third Party Administrator engaged by us, we will make direct payment to the hospital. Where the insured has made payment directly to the hospital which is not a Network Hospital, we shall reimburse the expenses on submission of documents mentioned in the list of documents below.
5. List of documents to be submitted in case of a claim:
 - Documents pertaining to the vehicle to be submitted immediately within 24 hours of claims registration – Registration Copy, Driving License, Permit, Fitness Certificate, PUC. We may, at our sole discretion, condone the delay on merits based on the reason for delay furnished by you to us.
 - Document for Legal Expense Claim – FIR copy, lawyer details, receipt for lawyer, court fees and any other document requested by us.
 - Document for OPD Treatment/hospitalization claim – medical certificate, treatment details, medical bills, photo of the injured, discharge summary, FIR (if applicable) and any other document requested by us.

GENERAL CONDITIONS APPLICABLE TO THIS POLICY (UNLESS SPECIFIED OTHERWISE)

CONDITIONS PRECEDENT TO THE CONTRACT

Digit Simplification: There are some more conditions you should be aware of that we considered before we issued you the policy.

We shall not be liable to make any claim payment under this policy directly or indirectly caused by, based on, arising out of or howsoever attributable to any of the following, unless specifically agreed and mentioned elsewhere in the policy schedule / certificate of insurance.

1. CONDITION PRECEDENT

The adherence to the terms and conditions of this policy by you or any insured person including the payment of premium by the due dates mentioned in the Policy Schedule / Certificate of Insurance is necessary for us to be liable to pay you the claim money.

2. NON-DISCLOSURE OR MISREPRESENTATION

Digit Simplification: In one line, this condition means, make sure all the information you share with us is correct!

If at the time of issuance of policy or during continuation of the policy, the information provided to us in the proposal form, either physically or electronically or otherwise, by you or the insured person or anyone acting on behalf of you or an insured person is found to be incorrect, incomplete, suppressed or not disclosed, wilfully or otherwise, the policy shall be:

1. Cancelled ab initio i.e. from the inception date or the renewal date (as the case may be),
2. Or the policy may be modified by us, at our sole discretion, upon 30 days' notice by sending an endorsement to your address shown in the Schedule/Certificate of Insurance;
3. The claim under such policy if any, shall be rejected/repudiated forthwith.

3. NOMINEE

You can, at the inception or at any time before the expiry of the policy, make a nomination for the purpose of payment of claims under the policy. This is paid in the event of death of the insured.

Any change of nomination should be communicated to us in writing and such change shall apply only when an endorsement on the policy is made by us.

In case of any insured person other than you under the policy, for the purpose of payment of claims in the event of death, the default nominee would be you.

CONDITION APPLICABLE DURING THE CONTRACT

Digit Simplification: There are some more conditions you should be aware of during the contract!

4. OBLIGATIONS OF THE INSURED (Applicable for Sections 5, 6A, 6B & 7)

1. Make sure you are taking all reasonable steps to maintain the insured property in efficient working order and to ensure that no item is habitually or intentionally over loaded. You shall fully observe the manufacturer's instructions for operating, inspection and overhaul. Also follow the government's, statutory municipal and all other binding regulations in force concerning the operation and maintenance of the insured plant and machinery;

2. Our officials shall at all reasonable times have the right to inspect and examine any property insured hereunder and you shall provide our officials with all details and information necessary for the assessment of the risk.

5. ALTERATIONS AND REMOVALS (Applicable to Section 6B)

Under any of the following circumstances the insurance ceases to attach as regards the property affected unless the insured, before the occurrence of any loss or damage, obtains the sanction of the company signified by endorsement upon the policy by or on behalf of the company: -

1. If the trade or manufacture carried on be altered, or if the nature of the occupation of or other circumstances affecting the building insured or containing the insured property be changed in such a way as to increase the risk of loss or damage by Insured Perils.
2. If the building insured or containing the insured property becomes unoccupied and so remains for a period of more than 30 days.
3. If the interest in the property passes from the insured otherwise than by will or operation of law.
4. Material change in the original risk.
5. Alteration, modification or addition to insured item.
6. Departure from prescribed operating conditions, whereby the risk or loss or damage increases.

6. ALTERATIONS TO THE POLICY

This policy constitutes the complete contract of insurance. This policy cannot be changed or edited by anyone (including an insurance agent or intermediary) except us, (subject to necessary approval from the Insurance Regulatory and Development Authority of India) and any change we make will be through a written endorsement signed and stamped by us, only on the request from Group Manager/ Insured Member.

7. REVISION/MODIFICATION OF THE POLICY

There is a possibility of revision/modification of terms, conditions, coverages and/or premiums of this product at any time in future, with appropriate approval from IRDAI. In such an event of revision/modification of the product, we will inform you at least 3 months prior to the date of such revision/modification comes into effect.

8. WITHDRAWAL OF PRODUCT

There is possibility of withdrawal of this product at any time in future with appropriate approval from IRDAI, as we reserve our right to do so, with an intimation of 3 months to all the existing insured members. In such an event of withdrawal of this product, at the time of your seeking extension of this policy, you can choose, among our available similar and closely similar health insurance products. Upon your so choosing our new product, you will be charged the premium as per our Underwriting Policy for such chosen new product, as approved by IRDAI.

9. CANCELLATION

A. Cancellation by You

1. You can choose to cancel the policy, giving us a 15 days' notice period by recorded delivery. This, provided there is no claim under the policy. The insured shall be entitled to premium refund at the company's Cancellation Scale provided in table below.

Cancellation Scale	
Period in Risk	Premium Refund
Within 3 months	60.00%
Exceeding 3 months but less than 6 months	45.00%
Exceeding 6 months but less than 9 months	25.00%
Exceeding 9 months	0.00%

2. Free Look Period

We shall give you a Free Look Period at the inception of the first policy and:

1. You will be allowed a period of at least 15 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.
2. If you have not made any claim during the Free Look Period, you shall be entitled to
 - A refund of the premium paid less any expenses incurred by us on your medical examination and the stamp duty charges or;
 - Where the risk has already commenced and the option of return of the policy is exercised by you, a deduction towards the proportionate risk premium for period on cover or;
 - Where only a part of the risk has commenced, such proportionate risk premium commensurate with the risk covered during such period.
 - Free Look Period is not applicable for renewals.

B. CANCELLATION BY US

Policy may be cancelled by us on the grounds of misrepresentation, fraud or non-disclosure of material facts by sending to you 15 days' notice by recorded delivery to the last known address/e-mail ID without refund of premium.

Please note KYC documents (Photo ID card) shall be required at the premium refund to the Insured Member exceeds a threshold limit of Rs. 1 lakh per premium refund.

10. TERRORISM DAMAGE EXCLUSION WARRANTY

Notwithstanding any provision to the contrary within this insurance, it is agreed that this insurance excludes loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any act of terrorism regardless of any other cause or event contributing concurrently or in any other sequence to the loss. For the purpose of this endorsement/warranty; an act of terrorism means an act, including but not limited to the use of force or violence and/or the threat thereof, of any person or group(s) of persons whether acting alone or on behalf of or in connection with any organization(s) or government(s), or unlawful associations, recognized under Unlawful Activities (Prevention) Amendment Act, 2008 and any subsequent changes or any other related and applicable national or state legislation formulated to combat unlawful and terrorist activities in the nation for the time being in force, committed for political, religious, ideological or similar purposes including the intention to influence any government and/or to put the public or any section of the public in fear for such purposes.

The warranty also excludes loss, damage, cost or expenses of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to action taken in respect of any act of terrorism.

If the company alleges that by reason of this exclusion, any loss, damage, cost or expense is not covered by this insurance, the burden of proving the contrary shall be upon the insured. In the event any portion of this endorsement is found to be invalid or unenforceable, the remainder shall remain in full force and effect.

11. LAW AND JURISDICTION

It is hereby declared and agreed that this contract of insurance and all claims thereunder shall be governed by Indian Law and any legal proceeding in respect thereof shall be raised at a competent court of India. All claims shall be paid in Indian Rupees only.

CONDITIONS APPLICABLE WHEN A CLAIM ARISES

Digit Simplification: What you should know when you are about to claim.

12. MULTIPLE POLICIES (Applicable to Sections 1 to 4)

1. If two or more policies are taken by you during the period for which you are covered under this policy from one or more insurers, the contribution clause shall not be applicable where the cover/benefit offered:
 - is fixed in nature i.e. Personal Accident Protect and Daily Hospital Cash Cover;
 - does not have any relation to the treatment costs.
2. If you are covered under multiple policies providing Personal Accident Protect and Daily Hospital Cash Cover, we shall make the claim payments independent of payments received under other similar policies in respect of the covered event.
3. If two or more policies are taken from one or more insurers by you during the time for which you are covered under this policy for indemnification of your hospitalisation treatment costs, we shall not apply the Contribution Clause and you shall have the following rights:
 - You may choose to get the settlement of claim from us as long as the claim is within the limits of and according to terms and conditions of the policy;
 - If the amount to be claimed exceeds the Sum Insured under a single policy after consideration of the deductible and co-pay, you shall have the right to choose any insurers including us from whom you want to claim the balance amount;
 - Except for the Personal Accident Protect and Daily Hospital Cash Cover, in case if you have taken policies from us and one or more insurers to cover the same risk on indemnity basis, you shall only be indemnified the hospitalisation costs in accordance with the terms and condition of the policy.

13. PHYSICAL EXAMINATION (Applicable to Sections 1 to 4)

Any medical official or other agent of the company shall be allowed to examine the Insured Person(s) in case of alleged injury or disablement when and as often as may be reasonably be required on behalf of the company.

14. CLAIMS NOTIFICATION AND PROCEDURE (Applicable to Sections 1 to 4)

In the event of any accidental injury or illness or condition that may result in a claim under this policy, it is a condition precedent to our liability under the policy that below procedure should be followed depending on the type of claim:

A. Cashless Claim Process:

Cashless Facility can be availed from our network hospitals only. This is facilitated by our Service Provider / Third Party Administrator (TPA) and we would make a direct payment to the Network Hospital to the extent of our liability provided that:

1. We are given a notice within 24 hours of hospitalization in case of an emergency situation.
2. For Cashless Facility you shall follow the below procedure:
 - a. Share the Health Card/copy of e-cards along with ID proof with the hospital authority and obtain the Pre-Authorization Form from the hospital.
 - b. Submit duly filled and signed Pre-Authorization Form to the hospital counter.
 - c. Ensure that the hospital shares the duly filled and signed Pre-Authorization Form to Service Provider / Third Party Administrator (TPA) for further processing.
 - d. Service Provider / Third Party Administrator (TPA) will inform the decision and may issue the authorization letter depending on the Policy Terms and Conditions to the hospital, directly.
 - e. Once the request for Pre-Authorization has been granted, the treatment must take place within 15 days of the Pre-Authorization approval date or the Policy Expiry Date whichever is earlier and shall be valid only if all the details of the authorized, hospital and location including dates match with the details of the actual treatment received.
 - f. We reserve the right to modify, add or restrict any Network Provider for Cashless Facility in our sole discretion. Before availing Cashless Facility, please check the applicable updated list of Network Providers.
 - g. For any queries designated Service Provider / Third Party Administrator (TPA) may be contacted on the contact details mentioned on the Health Card/copy of e-Cards issued to you.

B. Reimbursement Claim Process (Applicable to Sections 1 to 3):

This condition is not applicable to Section 4 Out-Patient (OPD) Benefit.

Reimbursement Facility can be availed from any hospital within India of your choice wherein you will have to make payment directly to the hospital and submit the documents to Service Provider/Third Party Administrator (TPA) for processing the reimbursement of the claim amount provided that:

1. We or our Service Provider/Third Party Administrator (TPA) should be intimated within 48 hours of date of admission.
2. For Reimbursement Claim you shall follow the below procedure:
 - a. Within 30 days from the date of discharge, you should submit all original documents pertaining to the hospitalization as mentioned in the list of claim documents.
 - b. On receipt of intimation from you regarding a claim under the policy, we are entitled to investigate and obtain information on the alleged injury or illness requiring hospitalisation, if required;
 - c. All claims shall be settled/repudiated within 30 days from the date of receipt of the last necessary claim document subject to the Policy Terms and Conditions. In case of any delay in payment for all approved claims beyond 30 days from the receipt of the last necessary claim document, we shall be liable to pay interest at a rate which is 2% above the bank rate prevalent at the beginning of the financial year in which the claim is reviewed by you;
 - d. In case of your death, we shall reimburse the claim amount to your Nominee as named in your Policy Schedule/Certificate of Insurance or your Legal Representative holding a valid succession certificate.

List of Claim Documents					
Sr. No	List of Documents / Information	Personal Accident Claims	Accidental Hospitalization Claim	Daily Hospital Cash Claim	Out-Patient (OPD) Claim
1	Duly Filled and Signed Claim Form	√	√	√	√
2	Discharge Summary	×	√	√	×
3	Medical Records (Optional Documents may be asked on need basis: Indoor case papers, OT notes, PAC notes etc.)	√	√	×	×
4	Original Hospital Main Bill	×	√	×	×
5	Original Hospital Bill Break-up	×	√	×	×
6	Original Pharmacy Bills	×	√	×	×
7	Prescriptions for the medicines purchased (except hospital supply) and investigations done outside the Hospital	×	√	×	×
8	Consultation Papers	×	√	×	√
9	Investigation Reports	×	√	×	√
10	Digital Images/CDs of the Investigation Procedures (if required)	×	√	×	√
11	MLC/FIR Report (if applicable)	√	√	×	×
12	Original Invoice/Sticker (if applicable)	×	√	×	×
13	Post Mortem Report (if applicable)	√	√	×	×
14	Disability Certificate (if applicable)	√	√	×	×
15	Attending Physician Certificate (if applicable)	√	√	×	×
16	Death Certificate (if applicable)	√	√	×	×
17	KYC (Photo ID card) (if applicable)	√	√	√	√
18	Bank Details with a Cancelled Cheque	√	√	√	√

Note: There are times when you or any other person who could claim on your behalf, may be in such a state of hardship, that you or such other person is unable to give us a notice or file a claim within the prescribed time limit. In such cases, condonation of delay can be done by waiver of conditions A.1, B.1 and B.2.a may be considered where the reason for delay is proved to our satisfaction.

*KYC documents shall be required at the claim settlement stage where claims pay-out to the Insured Member exceeds a threshold limit of Rs. 1 lakh per claim.

15. BASIS OF LOSS SETTLEMENT (Applicable to Section 5, 6A & 6B)

1. Partial Loss Claims

Where the building and/or contents can reasonably be repaired or reinstated at a cost less than the replacement cost then we will indemnify the insured in respect of the expenses necessarily incurred to restore to its state immediately prior to the happening of the loss. All repairs should be carried out at Digit Authorized Repair Workshop.

2. Total Loss/Constructive Total Loss Claims

- Where the Sum Insured is opted on Market Value Basis or First Loss Basis, we shall indemnify the insured the Market Value of the damaged item at the time of loss. Market Value here represents the Replacement Cost of the damaged property as on Date of Loss less due allowance for betterment and depreciation for age, usage and condition.
- Where the Sum Insured is opted on Reinstatement Value Basis, we shall indemnify the insured the Reinstatement Value of the damaged item at the time of loss, i.e. the cost of replacing or reinstating with property of the same kind or type but not superior to or more extensive than the insured property when new as on date of the loss.
- Where the Sum Insured is opted on First Loss Basis and the Replacement Value of the property exceeds the total value declared to the company, then the liability of the company will be restricted to the First Loss Limit as specified in the Certificate of Insurance under the respective cover.

16. REPAIR OR REPLACEMENT (Applicable to Section 5, 6A & 6B)

If the company at its option, reinstate or replace the property damaged or destroyed, or any part thereof, instead of paying the amount of the loss or damage, or join with any other company or insurer(s) in so doing, the company shall not be bound to reinstate exactly or completely but only as circumstances permit and in reasonably sufficient manner, and in no case shall the company be bound to expend more in reinstatement than it would have cost to reinstate such property as it was at the time of the occurrence of such loss or damage nor more than the Sum Insured by the company thereon. If the company so elects to reinstate or replace any property the insured shall at his own expense furnish the company with such plans, specifications, measurements, quantities and such other particulars as the company may require, and no acts done, or caused to be done, by the company with a view to reinstatement or replacement shall be deemed an election by the company to reinstate or replace.

If in any case the company shall be unable to reinstate or repair the property hereby insured, because of any municipal or other regulations in force affecting the alignment of streets or the construction of buildings or otherwise, the company shall, in every such case, only be liable to pay such sum as would be requisite to reinstate or repair such property, if the same could lawfully be reinstated to its former condition.

17. CONDITION OF AVERAGE CLAUSE (Applicable to Section 5, 6A & 6B)

If the property insured shall at the time of reinstatement/replacement repair following a loss or damage indemnifiable under the policy be of greater value than the Sum Insured under the policy, then the insured shall be considered as being his own insured for the different and shall bear a rateable proportion of loss.

Each item of the policy to which this condition applies shall be separately subject to the foregoing provision.

Provided however, if the Sum Insured specified in Policy Schedule/Certificate of Insurance in respect of such item(s) is greater than the (1-Percentage Specified in Policy Schedule/Certificate of Insurance as "Waiver of Underinsurance Limit") of the Actual Value of the item(s), this condition shall be of no purpose and effect.

Example: If Sum Insured is 8500 and actual value of item at the time of claim is 10000 and assuming "Waiver of Underinsurance Limit" is 20%. So, $1 - \text{"Waiver of Underinsurance Limit"} = 1 - 20\% = 80\%$ and $\text{Sum Insured/Actual Item value} = 8500/10000 = 85\%$. Since; $(\text{Sum Insured/Actual Item Value})$ is greater than $(1 - \text{"Waiver of Underinsurance Limit"})$, hence this condition shall be of no purpose and effect.

This condition shall not be applicable where Sum Insured is on First Loss Basis.

18. REINSTATEMENT VALUE POLICY CLAUSE (Applicable to Building Covered on Reinstatement Value Basis in Section 6A Only)

It is hereby declared and agreed that in the event of the property insured under within the policy being destroyed or damaged, the basis upon which the amount payable under (each of the said items of) the policy is to be calculated shall be cost of replacing or reinstating on the same site or any other site with property of the same kind or type but not superior to or more extensive than the insured property when new as on date of the loss, subject to the following Special Provisions and subject also to the terms and conditions of the policy except in so far as the same may be varied hereby.

Special Provisions

1. The work of replacement or reinstatement (which may be carried out upon another site and in any manner suitable to the requirements of the insured, subject to the liability of the company not being thereby increased) must be commenced and carried out with reasonable dispatch and in any case must be completed within 12 months after the destruction or damage or within such further time as the company may in writing allow, otherwise no payment beyond the amount which would have been payable under the policy if this memorandum had not been incorporated therein shall be made.
2. Until expenditure has been incurred by the insured in replacing or reinstating the property destroyed or damaged, the company shall not be liable for any payment in excess of the amount which would have been payable under the policy if this memorandum had not been incorporated therein.
3. If at the time of replacement or reinstatement the sum representing the cost which would have been incurred in replacement or reinstatement if the whole of the property covered had been destroyed, exceeds the Sum Insured thereon or at the commencement of any destruction or damage to such property by any of the perils insured against by the policy, then the insured shall be considered as being his own insurer for the excess and shall bear a rateable proportion of the loss accordingly. Each item of the policy (if more than one) to which this memorandum applies shall be separately subject to the foregoing provision.
4. This memorandum shall be without force or effect if
 - the insured fails to intimate to the company within 6 months from the date of destruction or damage or such further time as the company may in writing allow his intention to replace or reinstate the property destroyed or damaged;
 - the insured is unable or unwilling to replace or reinstate the property destroyed or damaged on the same or another site.

19. CLAIMS PROCESS (Applicable for Section 6A & 6B)

1. You must inform us within 15 days after the loss or damage, or such further time as the company may allow. Also, we need the details of loss or damage along with details of articles or items or property damaged or destroyed, amount of the loss or damage.
 - Give a notice to the police if the event is a theft or suspected theft or wilful or malicious damage;
 - We will need a Fire Brigade Report in case of fire;
 - Particulars of all other insurances, if any.

The insured shall also at all times at his own expense produce, procure and give to the company all such further particulars, plans, specification books, vouchers, invoices, duplicates or copies thereof, documents, investigation reports (internal/external), proofs and information with respect to the claim and the origin and cause of the loss and the circumstances under which the loss or damage occurred. No claim under this policy shall be payable unless the terms of this condition have been complied with.

2. In no case whatsoever shall the company be liable for any loss or damage after the expiry of 12 months from the happening of the loss or damage unless the claim is the subject of pending action or arbitration; it being expressly agreed and declared that if the company shall disclaim liability for any claim hereunder and such claim shall not within 12 calendar months from the date of the disclaimer have been made the subject matter of a suit in a court of law, then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable hereunder.

20. CONTRIBUTION (Applicable to Section 5, 6A & 6B)

If at the time of any loss or damage happening to any property hereby insured there be any other subsisting insurance or insurances, whether effected by the insured or by any other person or persons covering the same property, this company shall not be liable to pay or contribute more than its rateable proportion of such loss or damage.

21. FRAUDULENT/UNFOUNDED CLAIMS

If any claim under this policy is in any respect fraudulent or unfounded, all benefits paid and/or payable in relation to that claim shall be forfeited and (if appropriate) recovered. In addition, all covers with respect to the insured person shall be cancelled from policy period start date without any refund of premium.

22. ARBITRATION

If any dispute or difference shall arise as to the quantum to be paid under this policy (liability being otherwise admitted) such difference shall independently of all other questions be referred to the decision of a sole arbitrator to be appointed in writing by the parties to or if they cannot agree upon a single arbitrator within 30 days of any party invoking arbitration, the same shall be referred to a panel of three arbitrators, comprising of two arbitrators, one to be appointed by each of the parties to the dispute/ difference and the third arbitrator to be appointed by such two arbitrators and arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996.

It is clearly agreed and understood that no difference or dispute shall be referable to arbitration as hereinbefore provided, if the Company has disputed or not accepted liability under or in respect of this policy.

It is hereby expressly stipulated and declared that it shall be a condition precedent to any right of action or suit upon this policy that the award by such arbitrator/ arbitrators of the amount of the loss or damage shall be first obtained.

23. SUBROGATION

The insured shall at the expense of the company do and concur in doing, and permit to be done, all such acts and things as may be necessary or reasonably required by the company for the purpose of enforcing any rights and remedies or of obtaining relief or indemnity from other parties to which the company shall be or would become entitled or subrogated, upon its paying for or making good any loss or damage under this policy, whether such acts and things shall be or become necessary or required before or after his indemnification by the company.

CONDITIONS FOR RENEWAL OF THE CONTRACT

1. PORTABILITY AND CONTINUITY BENEFITS (Applicable to Sections 1 to 4)

We will grant continuity of benefits which were available to the insured members under a health insurance policy, which provides similar indemnity benefits in the immediately preceding Cover Year, provided that:

- i. We shall be liable to provide continuity of only those benefits (for e.g.: initial wait period, pre-existing disease etc) which are applicable under this policy.
- ii. Any other wait period that is applicable specific to this policy, but was permanently excluded in the previous policy will not be given any credit;
- iii. Insured members covered under this policy shall have the right to migrate from this policy to an individual health insurance policy or a family floater policy offered by our company. The credit for wait periods would be given in the opted individual health insurance policy or a family floater policy offered by our company. Application for this policy is made within 45 days before, but not earlier than 60 days from the expiry of that group insurance policy.

2 . RENEWAL

- i. Your policy shall ordinarily be renewable for lifetime except on grounds of fraud, moral hazard or misrepresentation or non-cooperation by you, provided the policy is not withdrawn.
- ii. We shall not deny the renewal of your policy on the ground that you had made a claim or claims in the preceding policy years, except for benefit-based policies where the policy terminates after the payment of Sum Insured under the Personal Accident Protect and Daily Hospital Cash Cover Section of the policy.
- iii. If you get delayed in renewing your policy, you can renew it within 30 days from the due date of renewal. Just that the coverage will not be available for such break in period. If the policy is not renewed within the above Grace Period of 30 days from the due date of renewal, you can still renew the policy with us. But it will then be issued as a fresh policy, subject to our Underwriting criteria and no continuing benefits shall be available from the expired policy.
- iv. The renewal premium shall be as per the rates approved by the Insurance Regulatory and Development Authority of India ("IRDAI") on the date of renewal for this product.

CUSTOMER GRIEVANCE REDRESSAL POLICY

We hope that we never leave you dissatisfied. However, if you ever wish to lodge a complaint, please feel free to call our toll-free number **1800-258-5956** or email our Customer Service Desk at **hello@godigit.com**.

Senior citizens can contact us on **1800-258-5956** or write to us at **seniors@godigit.com**.

After investigating the matter internally and subsequent closure, we will send you our response. If you do not get a satisfactory response from us and wish to pursue other avenues for redressal of grievances, you may approach Insurance Ombudsman appointed by IRDAI under the Insurance Ombudsman Scheme. The contact details of the Insurance Ombudsman Centres are mentioned below (Note: Address and contact number of Governing Body of Insurance Council).

Office Location	Contact Details	Jurisdiction of Office (Union Territory, District)
AHMEDABAD	Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor, Tilak Marg, Relief Road, Ahmedabad – 380 001. Tel.: 079 - 2550 201/02/05/06 , Email: bimalokpal.ahmedabad@gbic.co.in	Gujarat, Dadra & Nagar Haveli, Daman and Diu
BENGALURU	Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No. 57-27-N-9, Ground Floor, 9/ 19, 24th Main Road, JP Nagar, Ist Phase, Bengaluru – 560 078. Tel.: 080 - 26652048 / 26652049 , Email: bimalokpal.bengaluru@gbic.co.in	Karnataka
BHOPAL	Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp. Airtel Office, Near New Market, Bhopal – 462 003. Tel.: 0755 - 2769201/ 2769202 , Fax: 0755 - 2769203 , Email: bimalokpal.bhopal@gbic.co.in	Madhya Pradesh, Chattisgarh
BHUBANESHWAR	Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar – 751009. Tel.: 0674 - 2596461/2596455 , Fax: 0674 - 2596429 , Email: bimalokpal.bhubaneswar@gbic.co.in	Orissa
CHANDIGARH	Office of the Insurance Ombudsman, S.C.O. No. 101, 102 & 103, 2nd Floor, Batra Building, Sector 17 – D, Chandigarh – 160 017. Tel.: 0172 - 2706196 / 2706468 , Fax: 0172 - 2708274 , Email: bimalokpal.chandigarh@gbic.co.in	Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir, Chandigarh
CHENNAI	Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018. Tel.: 044 - 24333668 / 24335284 , Fax: 044 - 24333664 , Email: bimalokpal.chennai@gbic.co.in	Tamil Nadu, Pondicherry Town and Karaikal (which are part of Pondicherry).
DELHI	Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel.: 011- 23239633 / 23237532 , Fax: 011- 23230858 Email: bimalokpal.delhi@gbic.co.in	Delhi.
GUWAHATI	Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S.Road, Guwahati – 781001 (ASSAM). Tel.: 0361 - 232204 / 232205 , Fax: 0361 - 2732937 , Email: bimalokpal.guwahati@gbic.co.in	Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.
HYDERABAD	Office of the Insurance Ombudsman, 6-2-46, 1st floor, "Moin Court", Lane Opp. Saleem Function Palace, A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004. Tel.: 040 - 65504123 / 23312122 , Fax: 040 - 23376599 , Email: bimalokpal.hyderabad@gbic.co.in	Andhra Pradesh, Telangana, Yanam and part of Territory of Pondicherry.
JAIPUR	Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141- 2740363 , Email: Bimalokpal.jaipur@gbic.co.in	Rajasthan.
ERNAKULAM	Office of the Insurance Ombudsman, 2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard, M. G. Road, Ernakulam - 682 015. Tel.: 0484 - 2358759 / 2359338 , Fax: 0484 - 2359336 , Email: bimalokpal.ernakulam@gbic.co.in	Kerala, Lakshadweep, Mahe-a part of Pondicherry.
KOLKATA	Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 / 22124340 , Fax: 033 - 22124341 , Email: bimalokpal.kolkata@gbic.co.in	West Bengal, Sikkim, Andaman & Nicobar Islands.
LUCKNOW	Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, Lucknow - 226 001. Tel.: 0522 - 2231330 / 2231331 , Fax: 0522 - 2231310 , Email: bimalokpal.lucknow@gbic.co.in	Districts of Uttar Pradesh - Laitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareilly, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajganj, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar.
MUMBAI	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	Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane.
NOIDA	Office of the Insurance Ombudsman, Bhagwan Sahai Palace 4th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddha Nagar, U.P.-201301. Tel.: 0120-2514250 / 2514252 / 2514253 , Email: bimalokpal.noida@gbic.co.in	State of Uttaranchal and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshahr, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farukhabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur.
PATNA	Office of the Insurance Ombudsman, 1st Floor, Kalpana Arcade Building, Bazar Samiti Road, Bahadurpur, Patna 800 006. Tel.: 0612-2680952 , Email: bimalokpal.patna@gbic.co.in	Bihar, Jharkhand.
PUNE	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 – 411030. Tel.: 020-41312555 , Email: bimalokpal.pune@gbic.co.in	Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region.

Note: GOVERNING BODY OF INSURANCE COUNCIL, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai-400 054 Tel. No.: **022-26106889 / 671 / 980**, Fax: **022-26106949**, Email: **inscoun@gbic.co.in**

ANNEXURE

The presence of hazardous goods is covered provided their value is not more than 5% of the total stock value.

The list of allowed hazardous goods is given below:

Sl.No.	Hazardous Goods Present in a Shop
1	Celluloid Goods
2	Loose Coir
3	Crackers and Fire Works
4	Disinfectant Liquids and Liquid Insecticides (If not properly sealed in Tins or Drums)
5	Explosives of any kind
6	Hay/Straw
7	Hemp
8	Loose Jute
9	Matchboxes
10	Methylated Spirit
11	Nitro-Cellulose Plastics
12	Oils/Ether/Industrial Solvents and other inflammable liquids flashing at and below 320 C (Closed Cup test)
13	Varnishes having Flash point below 320 C (Closed Cup Test) If not properly sealed in Tins or Drums
14	Vegetable fibres of any kind including Rayon Fibre
15	Paints with inflammable base having Flash point below 320 C (Closed Cup test) If not properly sealed in Tins or Drums