

DIGIT PAYMENT PROTECTION POLICY (RETAIL)

Policy Wordings

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DIGIT PAYMENT PROTECTION POLICY (RETAIL)

Policy Wordings

PREAMBLE:

Whereas the Insured described in the Policy Schedule/Certificate of Insurance has made a Proposal and declaration to Go Digit General Insurance Limited (hereinafter called the "Company"), which shall be the basis of this Insurance and has paid the premium specified in the Policy Schedule/Certificate of Insurance as consideration for the indemnity hereinafter contained for the Policy Period/Cover Period stated in the Policy Schedule/Certificate of Insurance or during any further Period for which the Company may accept payment for the renewal or extension of this Policy.

DEFINITIONS:

The following words or terms shall have the meaning ascribed to them wherever they appear in this Policy, and references to the singular or to the masculine shall include references to the plural and to the feminine wherever the context so permits:

1. **Accident or Accidental** means a sudden, unforeseen, and involuntary event caused by external, visible, and violent means.
2. **Air Accident** means collision of two or more commercial aircraft in Air or collision of bird with the commercial aircraft in air.
3. **ATM** mean Automated Teller Machines of Banks, which have been approved by Reserve Bank of India.
4. **ATM Robbery** means Robbery of the money that was withdrawn by the Insured person from any ATM in India using his/her Card, that occurs within time as specified in the Policy Schedule/ Certificate of Insurance of the withdrawal of the money from the ATM and within distance as specified in the Policy Schedule/ Certificate of Insurance of that ATM.
5. **Bodily Injury/ Injury** means accidental physical bodily harm excluding illness or disease solely and directly caused by external, violent, and visible and evident means which is verified and certified by a Medical Practitioner/ Physician/ Doctor.
6. **Card** means the credit card, cash card, debit card, gift card, pre-paid card, travel card and other similar cards issued to the Insured person by a Qualified Financial Institution.
7. **Card Loss means** i.) inadvertent loss of possession of the Card by the Insured person or ii.) theft of the Card from the Insured person during the Policy Period.
8. **Certificate of Insurance** means the Document issued by the Company to the Insured person under the Terms and Conditions of Master Policy/Group Policy detailing the Master Policy number, the Card details, Cover Period with the commencement date and expiry date of the cover, Insured person's name, address, coverage, benefits, Sums Assured, Deductible, condition(s), exclusions and / or endorsement(s), and the terms and conditions of the coverage.
9. **Cloning** means stealing card information by swiping the card through the device that copies the information held on the magnetic strip into memory which then copies them onto a bogus card.
10. **Counterfeit Card** means card which has been embossed or printed so as to pass off as a Card issued by the financial institution which is subsequently altered or modified or tampered without consent of the financial institution.
11. **Cover Period** means the period as specified in the Certificate of Insurance issued to the respective Insurance Beneficiary during which the coverage is provided as per Terms and Conditions of the Master Policy.
12. **Deductible** means the amount which shall be borne by the Insured person in respect of each and every claim made under the Certificate of Insurance. The Company's liability to make any payment under the Certificate of Insurance is in excess of the Deductible.
13. **Financial Institution** means Banking Company under Reserve Bank of India Act, 1934 and shall also include a Non-Banking Financial Company as defined under Reserve Bank of India Act, 1934 read with the RBI guidelines, from time to time.
14. **FIR (First Information Report)**- means the complaint filed by the Insured person and registered by the police Station within whose jurisdiction the alleged offence is committed/occurred.
15. **Group:** The definition of a group as per the provisions of group guidelines issued by Authority vide circular015/IRDA/Life/Circular/GI Guidelines/2005 dated 14th July 2005 and any further amendments issued by the Authority from time to time.
16. **Hazardous or Adventure sports** shall mean any sport or activity, which is dangerous to the Insured Person whether he/she is trained, or not. These activities shall be considered to be hazardous irrespective of the safety precautions taken while undergoing these activities/sports. Such sport/Activity includes, but is not limited to, Abseiling, Adventure racing, Animal Conservation/ Game Reserve, Archery, Base jumping, Bicycle touring, Big game hunting, Black water rafting, Biathlon, BMX Stunt/ Obstacle riding, Bobsleighting/ using Skeletons, Bouldering, Boxing, Bull-fighting, Canyoning, Bungee jumping, Cave tubing/ Cave Diving, Caving/ Pot holing, Clay Pigeon Shooting, Climbing/ Trekking/Walking over 2,000 meters altitudes, Cross Channel, Swimming, Cycle Racing, Cyclo cross, Drag racing, Dry/Desert/Dune Skiing/Bashing, Endurance testing, Fencing, Field hockey, Flying as a pilot, Free Diving/ No Limits

Driving, Gaelic Football, Gliding, Gymnastics, Hang gliding, Heptathlon, Harness racing, Heli Skiing/ Boarding, High diving (above 5 meters), Horse racing, Horse riding and Jumping, Hot air ballooning, Hunting on Horseback, Hunting/Shooting, Hurling, Ice and Street Hockey, Ice climbing, Ice skating, Ice speedway, Jet boating, Jet Skiing, Jousting, Judo, Karate, Kayaking, Kendo, Kite Skiing, Kite Surfing/Land boarding/buggying, Lacrosse Luge/Tobogganing, Lugging, Manual Labour, Marathon running, Martial Arts, Micro – lighting, Modern pentathlon, Motor cycle racing (All types), Motor rallying, Mountain biking, Mountain Boarding, Mountain Running, Mountaineering/Rock climbing, Orienteering (Involving climbing), Parachuting, Paragliding/ Parapenting, Parasailing, Parascending (Over land and water), Parkour/Parcours/Free Running, Piloting aircraft or learning to pilot an aircraft, Point to Point, Polo, Power boat racing, Powerlifting, Professional sports of any kind, Quad biking/all terrain vehicles, Rifle range shooting, River boarding, River boardings, River bugging, Rock scrambling, Rodeo, Roller hockey, Rugby, Running of the bulls, Safari tours, Sail boarding (racing/high speed/extreme), Sailing, Sand boarding, Scuba Diving, Shark feeding/cage diving, Skate boarding, Ski acrobatics, Ski doo Ski jumping, Ski racing, Sky diving, Small bore target shooting, Snorkelling, Snow mobiling, Snow Skiing, Snowboarding, Speed trials/ Time trials, Steeple Chasing, Surfing, Team Sports played in competitive contest, Tomb stoning/cliff diving/quarry diving, Trial bike riding, Triathlon, Tubing on snow, Tubing, Wakeboarding, War games(non-armed forces), Water skiing or Water Ski jumping, Weight Lifting, Wrestling, White or black water rafting, White water kayaking, Wind surfing, Yachting, Zip Line, Zorbing and Hydro-zorbing and activities of similar nature.

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.

For the Purpose of Overseas Insurance, Hospital shall mean 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 and complies with all minimum criteria as under:

- a) has qualified nursing staff under its employment round the clock;
- b) has qualified medical practitioner(s) in charge round the clock;
- c) has a fully equipped operation theatre of its own where surgical procedures are carried out;
- d) 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. Insured / Policyholder means the Organization/Entity which is Institution/ Legal Entity or Group Manager [as per IRDAI guidelines] named in the Master Policy.

20. Insured Person shall mean individual member of the group covered under the Master Policy.

21. 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.

22. Master Policy shall mean the group Policy issued to the Insured containing the terms and conditions of the insurance coverage and under which Certificates of Insurance shall be issued to the Insured person.

23. Medical Practitioner/ Physician/Doctor: Is a person who holds a valid registration/license 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 the scope and jurisdiction of registration/license. "Physician" shall not include any member of the Insured person's family.

24. Near Field Communication (NFC): Near-Field-Communication (NFC) is a short-range wireless technology that let NFC enabled devices communicate with each other. NFC-enabled devices must be either physically touching or within a few centimetres of each other for data transfer to occur.

25. Permanent Total Disability shall mean either of the following:

- a. Total Paralysis
- b. Total and irrecoverable loss of sight of both eyes, or
- c. Actual Loss by physical separation of two Limbs (both hands or both feet or one hand and one foot), or
- d. Total and irrecoverable loss of use of two Limbs (both hands or both feet or one hand and one foot),

- e. Total and irrecoverable loss of sight of one eye and physical separation of or Total and irrecoverable loss of use a limb (either one hand or one foot), or
- f. Total and irrecoverable loss of speech and hearing of both ears

For the purpose of this benefit,

- a. Total Paralysis means complete and irreversible loss of motor function leading to the total loss of function of the entire body from neck down due to an accidental injury to the spinal cord.
 - b. Limb means a hand at or above the wrist or foot above the ankle.
 - c. Physical separation means separation of limb(s) from the body above the wrist and/or ankle.
 - d. Total & irrecoverable loss of Use of limb(s) means complete and irreversible loss of functional, normal or characteristic use of the hand or foot provided loss of use continues for a period of 180 days from the onset of loss of use and at the expiry of 180 days there is no reasonable medical hope of improvement.
- 26. Phishing** is the attempt to obtain sensitive information such as usernames/user ID, passwords, and Card details (and sometimes, indirectly, money), often for malicious reasons, by masquerading as a trustworthy Entity in a written electronic communication.
- 27. Post-reporting period** means the number of hours after the time of the financial loss / card loss was reported by the Insured person to the card issuer/ financial institution.
- 28. Policy** means the Proposal, the Master Policy Schedule along with these Terms and Conditions, Certificate of Insurance issued to respective Insured person/s and any endorsements attaching to and/or forming part thereof either at the commencement or during the Policy Period.
- 29. Policy Period** means the Period commencing from Policy Start Date and time as specified in the **Policy Schedule/ Certificate of Insurance** and terminating at Policy End Date and time as specified in the **Policy Schedule/ Certificate of Insurance** to this Policy.
- 30. Pre-reporting period** means the number of hours (not falling outside the Cover Period) before the time of the financial loss/Card loss was reported by the Insured person to the card issuer/ financial institution during which any loss incurred by the Insured person will be covered.
- 31. 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.
- 32. Robbery** : Theft is "robbery" if, in order to the committing of the theft, or in committing the theft, or in carrying away or attempting to carry away property obtained by the theft, the offender, for that end, voluntarily causes or attempts to cause to any person death or hurt or wrongful restraint, or fear of instant death or of instant hurt, or of instant wrongful restraint.
- 33. Schedule** means the Card Payment Protection Policy schedule, and any annexure to it, attached to and forming part of the Policy.
- 34. Skimming** means an electronic method of capturing Insured Person's card details by unauthorized means.
- 35. Subrogation** means the right of the Company to assume the rights of the Insured person to recover loss/expenses paid out under the Certificate of Insurance that may be recovered from any other source.
- 36. Sum Insured** means the section wise amount stated in the Policy Schedule/ Certificate of Insurance, which is the maximum amount (regardless of the number and amount of claims made) for any one claim and or in the aggregate for all claims under the respective section made by the Insured person under the Policy Schedule/ Certificate of Insurance during any one Policy Period/ Cover Period.
- 37. Tele-phishing** is the practice of using the telephone system to gain access to private personal and financial information for purposes of identity theft.
- 38. Theft** shall mean intending to take dishonestly any movable property out of the possession of any person without that person's consent with the intention of permanently depriving the Insured of such property and does not include larceny, pilferage and the like.
- 39. Unauthorised /Fraudulent Transaction** means the transactions done through Point of Sale /ATM/Online payment gateway by someone else other than the Insured Person without his/her consent and/or impersonating the Insured Person.
- 40. Digital Wallet** is an Online Wallet meant for carrying out online transactions only.
- 41. Vishing** the fraudulent practice of making phone calls or leaving voice messages purporting to be from reputable companies in order to induce individuals to reveal personal information, such as bank details and credit card numbers.
- 42. We, Our, Ours, Us, Company** means the Go Digit General Insurance Company Limited.
- 43. You, Your, Yourself/Your Family named in the Certificate of Insurance** means the Insured Person that We insure as set out in the Schedule.

COVERAGES:**Benefit Table**

Section	Coverage
Section 1: Card Cover	Section 1.1 Lost Card Liability
	Section 1.2 Online Transaction Cover
	Section 1.3: Card Liability due to unauthorized / fraudulent usage on account of including but not limited to Skimming / Phishing/ Counterfeit / Payment made on mirror sites
	Section 1.4 ATM assault and robbery
	Section 1.5 ATM Fraud Cover
Section 2: Other Electronic Transaction Cover	Unauthorised /Fraudulent transactions on Other Electronic Transaction (Other than card and Digital Wallet)
Section 3: Digital Wallet Cover	Digital Wallet Cover
Section 4: Personal Accident Cover	Section 4.1 Death
	Section 4.2 Permanent Total Disablement
	Section 4.3 Permanent Partial Disablement
	Section 4.4 Temporary Total Disablement
	Section 4.5 Air Accident Cover
	Section 4.6 Children Education Grant
	Section 4.7 Girl Child Benefit
	Section 4.8 Funeral Expenses
	Section 4.9 Transportation of Mortal Remains
Section 5: Identity Theft	Identity Theft
Section 6: Purchase Protection	Purchase Protection
Section 7: Price Protection	Price Protection
Section 8: Personal Travelling Protection	Section 8.1 Loss of Personal Baggage / Personal Belongings
	Section 8.2 Loss of Passport / Documents during the trip
	Section 8.3 Missed Connecting Flight during transit Coverage:
	Section 8.4 Trip Cancellation
	Section 8.5 Delay in Flight
	Section 8.6 Emergency Medical Treatment and Evacuation
	Section 8.7 Emergency Accidental Treatment and Evacuation
	Section 8.8 Plane Hijack Cover
	Section 8.9 Home protection while Insured Person is away
Section 9: Wallet Protection (Lost Wallet Coverage)	<ul style="list-style-type: none"> • Replacement costs for the lost or stolen wallet • Application fees for applying for new personal papers and/ or cards.

All the Sections available under Digit Payment Protection Policy insured has an option for pick and choose the covers. However, Section 4 and Section 8 cannot be opted on standalone basis:

SECTION 1: CARD COVER

The Company hereby agrees subject to the terms, conditions and exclusions herein contained or otherwise expressed herein, to indemnify to the Insured Person an amount not exceeding the Sum Insured as specified in the policy schedule/ certificate of Insurance against the respective sections.

Section 1.1: Lost Card Liability**I. What We Cover**

We will indemnify the Insured Person against the financial loss arising out of unauthorized / fraudulent transaction during the cover period from the Insured person's lost or stolen Card.

II. Condition applicable to Section 1.1.

1. The cover under this section shall be applicable only for the number of hours prior to reporting the loss of Card (pre-reporting period) and the number of hours post reporting of loss of card (post-reporting period) as specifically mentioned in the Policy schedule / Certificate of Insurance.

III. Exclusions applicable to section 1.1

1. Unauthorized /fraudulent transaction made on Insured Person's card if his/her card has not been lost or stolen;
2. The amounts refunded upon cancellation of purchases of products or services.

3. Loss incurred due to erroneous debits arising on fraudulent or other transactions, on account of system or technology related fault, for which the financial institution is liable.
4. Loss or damage on account of counterfeit cards.
5. Any loss or damage arising out of Internet based transaction.

Section 1.2: Online Transaction cover

I. What We Cover

We will indemnify the Insured Person against the financial loss arising out of unauthorized/ fraudulent transactions through internet during the Cover Period, using the CVV (Card Verification Value Code) or the PIN (Personal Identification Number) of the Card issued to the Insured Person by the financial institution.

II. Conditions applicable to section 1.2:

1. The cover under this section shall be applicable only for the number of hours prior to reporting the loss (pre-reporting period) and the number of hours post reporting of loss (post-reporting period) as specifically mentioned in the Policy schedule / Certificate of Insurance.

III. Exclusions applicable to section 1.2:

1. Any transactions not confirmed by the host website or the authorized financial institution.
2. Any errors made by the host website or the authorized financial institution.
3. Loss incurred due to erroneous debits arising on fraudulent or other transactions, on account of system or technology related fault, for which the financial institution is liable.
4. Any transactions made using a PIN that has not been introduced by the financial institution as mandated by the concerned regulatory authority.
5. For any loss arising out of a PIN based fraud:
 - a. if the PIN was mentioned on the Card itself, shared with any person or
 - b. if the default PIN given by financial institution had not been changed wherever it has been suggested by the financial institution.

Section 1.3: Card Liability due to unauthorized / fraudulent usage on account of including but not limited to Skimming / Phishing / Counterfeit/ Cloning/ Payment made on mirror sites

I. What We Cover

We will indemnify the Insured Person against the financial loss arising out of unauthorized/ fraudulent transaction using Insured Person's cards due to skimming, counterfeiting, cloning, phishing, payment made on mirror sites and other similar kind of fraud as mentioned in the Policy schedule/ Certificate of Insurance.

II. Condition applicable to Section 1.3:

1. The cover under this section shall be applicable only for certain number of hours prior to reporting the loss (pre-reporting period) and certain number of hours post reporting of loss (post-reporting period) as mentioned in the Policy schedule / Certificate of Insurance.

III. Exclusions applicable to section 1.3

1. Any loss or damage arising out of card transactions effected outside the notification period (as specified in the Policy Schedule/ Certificate of Insurance) prior to the first reporting of unauthorized use of the card to the financial institution.

Specific Exclusion applicable to section 1.3 which can be waived in case specifically agreed by us:

2. Any financial loss arising out of Cards lost in transit/ wrong delivery before its eventual receipt by the original Card holder.
3. Any financial loss arising out of Tele-phishing

Section 1.4: ATM assault and robbery

I. What We Cover

We will reimburse the Insured Person against the following covers:

1. **ATM Robbery** - We will reimburse Insured Person for the money he/she withdrew from any ATM using his/her card against a robbery event that occurs within a time period from the withdrawal of the money and within a distance from ATM, as specified in the Policy Schedule / Certificate of Insurance.
2. **Bodily Injury** - We will reimburse Insured Person for reasonable emergency first aid charges for his/her bodily injury during a robbery that is covered under this section
3. **Transaction under Threat/ violence** - We will reimburse Insured Person for the money he/she withdrew from any ATM by forcibly using his/her card under a threat violence.

II. Exclusions applicable to section 1.4:

1. Damages or losses to anything other than the money withdrawn by the Insured Person from the ATM;
2. Charges for emergency first aid to anyone other than Insured Person.

Section 1.5 ATM Fraud Cover**I. What We Cover**

We will reimburse Insured Person for the money he/she has lost due to ATM related Frauds including but not limited to manipulated ATM Machine, Card Cloning at the ATM etc.

II. Exclusions applicable to section 1.5:

1. Damages or losses to anything other than the money Insured Person has lost due to Fraud happening at ATM

CONDITIONS APPLICABLE TO SECTION 1

1. Insured Person must comply with all terms and conditions given by the financial institution.
2. The cover under this section shall be applicable only for certain number of hours prior to reporting the loss (pre-reporting period) and certain number of hours post reporting of loss (post-reporting period) as mentioned in the Policy schedule / Certificate of Insurance.
3. Insured Person must report the loss/ damage to the financial institution immediately but not later than 12 hours after discovering the loss event, unless specifically agreed otherwise by Us and mentioned in the Policy Schedule / Certificate of Insurance.
4. Insured Person must report the loss/ damage to the Police Authority immediately but not later than 24 hours after discovering the loss event, unless specifically agreed otherwise by Us and mentioned in the Policy Schedule / Certificate of Insurance. In case of ATM assault and robbery cover, the Insured Person must file the Police report within 24 hours of happening of the event robbery, unless specifically agreed otherwise by Us.

Note: *There are times when You may be in such a state of hardship, that You are unable to report the loss / damage to the financial institution and / or Police Authority within the prescribed time limit. In such cases, condonation of delay may be considered by waiving conditions 2 and 3, where the reason for delay is provided to our satisfaction.*

EXCLUSIONS APPLICABLE TO SECTION 1

1. In case Geographical Location opted as India only- Any loss arising due to any unauthorised / fraudulent transaction done outside India.
2. If there was no transaction on the Card for consecutive 3 months or duration as specifically mentioned in the Policy Schedule / Certificate of Insurance, prior to the date of loss.
3. Any loss or damage if the Insured Person uses a Card in a way which the financial institution does not allow.
4. For any claim where "One-time Password" on registered mobile number for any transaction has been shared with any person by the Insured person.
5. If in case of cancellation of purchases of products or services, if the amount refunded is not credited to the original source of booking then the Company will not make payment for any claim arising as a consequence of this to the Insured person.
6. Loss incurred due to breach of security or failure of security mechanism of the financial institution.
7. For losses resulting from any Card issued by financial institution without Insured person making a proper application. However, this exception will not apply in respect of replacement of a Card which has been previously issued by the Insured named in the Schedule.
8. Damages and/ or liabilities to any third parties
9. Losses sustained by the Insured Person resulting directly or indirectly from any fraudulent or dishonest acts committed by the Insured Person's employee/members of household, acting alone or in collusion with others.
10. Loss of Interest, Consequential loss, loss of market, late fees, interest, and charges levied by the financial institution
11. Loss incurred due to gross negligence on part of the Insured Person, including but not limited to insufficient measures taken by the Insured Person to keep the PIN, Password etc safe including without limitation recording of the PIN, Password in an intelligible form by the Insured Person.

Specific Exclusion applicable to Section 1 which can be waived in case specifically agreed by us:

12. Any loss arising out of unauthorized / fraudulent transaction due to card forgotten in ATM
13. Any loss arising out of NFC transactions that are charged to the Insured Person's card
14. Any loss arising out of online transactions done without the mandatory 2 factor authentication
15. Any loss arising out of transaction due to Sim Cloning / Sim Hacking
16. In case Geographical Location opted as worldwide- Any loss arising due to any unauthorised / fraudulent transaction done outside India when the Insured Person is in India / has returned back to India

SECTION 2: OTHER ELECTRONIC TRANSACTION COVER

Unauthorised /Fraudulent electronic transactions on Legitimate Electronic Modes (Other than while using the card and any Digital Wallet)

I. What We Cover

The Company hereby agrees subject to the terms, conditions and exclusions herein contained or otherwise expressed herein, to indemnify the Insured Person upto the Sum Insured as specified in the Policy Schedule/ Certificate of Insurance, in respect of financial loss resulting from unauthorized / fraudulent transaction in his / her internet banking account / mobile banking account/ UPI Account or any other legitimate electronic modes.

II. Conditions applicable to section 2:

1. Insured Person must comply with all terms and conditions given by the financial organisation.
2. The cover under this section shall be applicable only for the number of hours prior to reporting the loss (pre-reporting period) and the number of hours post reporting of loss (post-reporting period) as specifically mentioned in the Policy schedule / Certificate of Insurance.
3. Insured Person must report the loss/ damage to the financial institution immediately but not later than 12 hours after discovering the loss event, unless specifically agreed otherwise by Us and mentioned in the Policy Schedule / Certificate of Insurance.
4. Insured Person must report the loss/ damage to the Police Authority immediately but not later than 24 hours after discovering the loss event, unless specifically agreed otherwise by Us and mentioned in the Policy Schedule / Certificate of Insurance.

Note: *There are times when You may be in such a state of hardship, that You are unable to report the loss / damage to the financial institution and / or Police Authority within the prescribed time limit. In such cases, condonation of delay may be considered by waiving conditions 2 and 3, where the reason for delay is provided to our satisfaction.*

III. Exclusions Applicable to section 2

1. Any loss due to transactions related to Card/ Digital wallet
2. Any transactions not confirmed by the host website or the authorized financial institution.
3. Any errors made by the host website or the authorized financial institution.
4. Loss incurred due to erroneous debits arising on fraudulent or other transactions, on account of system or technology related fault, for which the financial institution is liable.
5. Loss incurred due to failure of security mechanism of the financial institution.
6. Any transactions made using a PIN / password that has not been introduced by the financial institution as mandated by the concerned regulatory authority.
7. Any transaction wherein OTP/ PIN/ Password etc. is shared with other person by the Insured Person.
8. Losses sustained by the Insured Person resulting directly or indirectly from any fraudulent or dishonest acts committed by the Insured Person's employee/members of household, acting alone or in collusion with others.
9. Loss of Interest, Consequential loss, loss of market, late fees, interest, and charges levied by the financial institution
10. Loss incurred due to gross negligence on part of the Insured Person, including but not limited to insufficient measures taken by the Insured Person to keep the PIN, Password etc safe and recording of the PIN, Password in an intelligible form by the Insured Person.
11. In case Geographical Location opted as India only- Any loss arising due to any unauthorised / fraudulent transaction done outside India.

Specific Exclusion applicable to Section 2 which can be waived in case specifically agreed by us:

12. Any loss arising out of transaction due to Sim Cloning / Sim Hacking
13. Any loss arising out of NFC transactions that are charged to the Insured Person's account
14. In case Geographical Location opted as worldwide- Any loss arising due to any unauthorised / fraudulent transaction done outside India when the Insured Person is in India / has returned back to India

SECTION 3: DIGITAL WALLET COVER

I. What We Cover

The Company hereby agrees subject to the terms, conditions and exclusions herein contained or otherwise expressed herein, to indemnify to the Insured Person upto the Sum Insured as specified in the Policy Schedule/ Certificate of Insurance, in respect of financial loss to Insured Person's digital wallet due to following:

- i. **Loss of wallet balance due to fraudulent transaction as a result of theft, burglary or loss of mobile phone/device-** This section will indemnify the Insured Person for any loss of his/her wallet balance up to the

amount as specified in the Policy Schedule/ Certificate of Insurance due to unauthorised/ fraudulent transaction as a result of theft, burglary or loss of Insured Person's mobile phone/ device.

- ii. **Loss of Wallet Balance by unauthorized / fraudulent transaction-** This section will indemnify the Insured Person up to the amount as specified in the Policy Schedule/ Certificate of Insurance for any loss of his/her wallet balance due to unauthorized/ fraudulent transaction.

II. Conditions applicable to section 3:

1. Insured Person must comply with all terms and conditions given by the digital wallet company.
2. Insured Person must report the loss of wallet balance due to unauthorized/ fraudulent transaction to the digital wallet company immediately but not later than 12 hours of discovering the loss event, unless specifically agreed otherwise by Us and mentioned in the Policy Schedule / Certificate of Insurance.
3. Insured Person must report the loss of wallet balance due to unauthorized/ fraudulent transaction or the loss of mobile phone/ device to Police Authority immediately but not later than 24 hours of discovering the loss event, unless specifically agreed otherwise by Us and mentioned in the Policy Schedule / Certificate of Insurance.

Note: *There are times when You may be in such a state of hardship, that You are unable to report the loss / damage to the financial institution and / or Police Authority within the prescribed time limit. In such cases, condonation of delay may be considered by waiving conditions 2 and 3, where the reason for delay is provided to our satisfaction.*

III. Exclusions Applicable to section 3

1. Any loss occurring in case the user details/device were shared/misplaced/acquired due to user's negligence.
2. Any fraud due to misuse of credit card/debit card/bank account information through the digit wallet platform.
3. Any loss arising out of negligence on the part of the Insured Person (e.g. typing a wrong number to send money).
4. Any loss arising due to Insured Person not upgrading/adopting the latest security features released by digital wallet company.
5. Any loss arising due to failure of security mechanism of the digital wallet.
6. In case Geographical Location opted as India only- Any loss arising due to any unauthorised / fraudulent transaction done outside India.

Specific Exclusion applicable to Section 3 which can be waived in case specifically agreed by us:

7. Any loss arising out of transaction due to Sim Cloning / Sim Hacking
8. Any loss arising out of NFC transactions that are charged to the Insured Person's digital wallet
9. In case Geographical Location opted as worldwide- Any loss arising due to any unauthorised / fraudulent transaction done outside India when the Insured Person is in India / has returned back to India

SECTION 4: PERSONAL ACCIDENT COVER

I. What We Cover

In the event of any accidental bodily injury sustained by the Insured Person during the cover period, the Company hereby agrees subject to the terms, conditions and exclusions herein contained or otherwise expressed herein, to pay to the Insured Person/ nominee an amount not exceeding the Sum Insured as specified in the policy schedule/ certificate of Insurance against the respective sections.

Section 4.1 Death

In the event of Accidental Bodily Injury causing the Insured Person's death within 12 months of the Accidental Bodily Injury being sustained, we will pay 100% of the Sum Insured as stated in the Policy schedule/Certificate of Insurance to the Insured Person's nominee / legal heir.

Additional Benefit under Death Cover

Disappearance: We shall be liable to be pay under this benefit, if the Insured Person's full body cannot be located within a period of consecutive twelve (12) months, following a forced landing, stranding, sinking, or wrecking of a Common Carrier in which Insured Person was known to have been travelling as a fare paying passenger or in any event arising as a result of Act of God Perils during the Policy Period, where it is reasonable to believe that Insured Person has died as a result of an Accidental Injury.

Section 4.2 Permanent Total Disability:

In the event of Accidental Bodily Injury causing the Insured Person's Permanent Total Disability within 12 months of the Accidental Bodily Injury being sustained, we will pay 100% of the Sum Insured as stated in the Policy schedule/Certificate of Insurance.

Section 4.3. Permanent Partial Disability:

In the event of Accidental Bodily Injury which is the sole and direct cause of the Insured Person's Permanent Partial Disablement within twelve (12) months of the Accidental Bodily Injury sustained, we will pay the percentage of Sum Insured as stated in the Policy Schedule/Certificate of Insurance, as per the following Scale.

Permanent Partial Disablement –Table of Benefits

Nature of Injury	% of Sum Insured
Loss of each arm at the shoulder joint	70%
Loss of each leg above centre of the femur	70%
Loss of each arm to a point above elbow joint	65%
Loss of each leg up to a point below the femur	65%
Loss of each arm below elbow joint	60%
Loss of each hand at the wrist	55%
Complete and irrecoverable loss of sight of an eye	50%
Loss of each leg to a point below the knee	50%
Loss of each leg up the centre of tibia	45%
Loss of each foot at the ankle	40%
Loss of hearing in each ear	30%
Loss of each thumb	20%
Loss of each index finger	10%
Loss of sense of smell	10%
Loss of each other finger	5%
Loss of each big toe	5%
Loss of sense of taste	5%
Loss of each other toe	2%

Specific Conditions to Permanent Partial Disability Cover:

1. If the Insured Person suffers Accidental Injuries resulting in more than one Permanent Partial Disablement, then Our maximum, total and cumulative liability under this section shall be limited to the Sum Insured as mentioned in the Policy Schedule/Certificate of Insurance against this Section.
2. If the Insured Person suffers from a Permanent Partial Disablement not listed in the above table then an external medical advisor will determine the disablement percentage.
3. On acceptance of a claim under this section, the Insured Person's coverage under this section and other benefit opted under this Policy shall continue, subject to the availability of the Sum Insured, terms, conditions, and exclusion of this Policy.

Section 4.4. Temporary total disablement:

In the event of Accidental Bodily Injury which is the sole and direct cause of a Temporary Total Disablement of Insured Person and which completely prevents him/ her from performing each and every duty pertaining to his/ her employment or occupation on a temporary basis, then We will pay a weekly benefit amount as mentioned in the Policy Schedule/Certificate of Insurance against this Section, provided that:

1. The Temporary Total Disablement is certified by a Medical Practitioner and submission of supporting documents/reports with respect to clinical examination, radiological scanning or imaging and/or neurological fallout testing as submitted to Us, failing which We shall not be liable for any claim under this Section.
2. We will stop making payments when We are satisfied that Insured Person can engage in his/ her occupation again or when We have made payments for number of weeks as mentioned in the Policy Schedule/Certificate of Insurance, whichever is earlier.
3. We shall not be liable to make any payment under this Benefit in respect of the Insured Person for more than the Total Number of weeks as opted by You and mentioned in Your Policy Schedule/Certificate of Insurance for any and all claims arising within the Policy Period under this Benefit.
4. The benefit shall not be paid for the Time Excess mentioned in Your Policy Schedule/Certificate of Insurance i.e. for the number of days as opted by You and mentioned in Your Policy Schedule/Certificate of Insurance calculated from the date of commencement of Temporary Total Disablement.

5. In case the Temporary Total Disablement is for a period less than a week, the benefit payable shall be calculated on proportionate basis in relation to the weekly benefit.
6. We will not pay any amount in excess of the Insured Person's base weekly income net of tax and other deductions, excluding overtime, bonuses, tips, commissions, or any other special compensation.
7. In case of any dispute with respect to the duration of Temporary Total Disablement, the duration shall be finally determined by a Doctor/Medical Practitioner mutually appointed by the Insured and Insurer, who certifies the final date upon which the Insured recovered and fit to perform each and every duty pertaining to his / her employment or occupation.

Section 4.5. Air Accident Cover:

In the event of Accidental Bodily Injury being sustained to the Insured Person due to Air Accident as defined in the Policy causing the Insured Person's death or Permanent Total Disability within 12 months of the Accidental Bodily Injury being sustained, We will pay 100% of the Sum Insured as stated in the Policy schedule/Certificate of Insurance to the Insured Person's nominee/ legal heir.

Additional Benefit under Air Accident Cover

Disappearance: We shall be liable to be pay under this benefit, if the Insured Person's full body cannot be located within a period of consecutive twelve (12) months, following a forced landing, stranding, sinking, or wrecking of commercial aircraft in which Insured Person was known to have been travelling as a fare paying passenger, where it is reasonable to believe that Insured Person has died as a result of an Accidental Injury.

Section 4.6 Children Education Grant:

In the event of Death or Permanent Total Disability of the Insured person due to accidental bodily injury as covered in the policy, then we will pay a lumpsum amount equal to sum insured as mentioned in the Policy Schedule / Certificate of Insured for this section as education grant for the Insured Person's dependent children aged 25 years, unless specifically agreed otherwise by Us and mentioned in the Policy Schedule/ Certificate of Insurance.

Section 4.7 Girl Child Benefit

In the event of Death or Permanent Total Disability of the Insured person due to accidental bodily injury as covered in the policy, then we will pay a lumpsum amount equal to sum insured as mentioned in the Policy Schedule / Certificate of Insured for this section as Girl Child Benefit for the Insured Person's dependent unmarried girl child aged upto 22 years, unless specifically agreed otherwise by Us and mentioned in the Policy Schedule/ Certificate of Insurance.

Section 4.8 Funeral Expenses

In the event of Death of the Insured person due to accidental bodily injury as covered in the policy, We will pay upto the Sum Insured as mentioned in the Policy Schedule/ Certificate of Insurance towards expenses of funeral, cremation and/or burial of the body of the deceased Insured Person.

Section 4.9 Transportation of Mortal Remains

In the event of Death of the Insured person due to accidental bodily injury as covered in the policy, We will pay upto the Sum Insured as mentioned in the Policy Schedule/ Certificate of Insurance towards the expenses of transporting the mortal remains of the Insured Person from the place of death cremation and/or burial ground.

II. Conditions applicable to section 4:

1. The coverage under this section can be provided on On Duty / Off Duty basis, as mentioned in the Policy Schedule / Certificate of Insurance.
2. Air Accident Cover is available to only for Commercial / Private / Chartered flights.
3. For coverage under this section, there should be at least 1 POS transaction in past 180 days before the date of accidental bodily injury, unless specifically agreed otherwise by Us and mentioned on the Certificate of Insurance / Policy Schedule.

III. Exclusions application to section 4

No payment will be made by Us for any claim directly or indirectly caused by, based on, arising out of or howsoever attributable to any of the following:

1. Breach of Law with Criminal Intent, Suicide and Self-Injury

We do not cover any accidental bodily injury arising from or contributed or aggravated or accelerated by any of the following:

- a. Suicide or attempted suicide, while sane or insane, or due to use, misuse or abuse of narcotic or intoxicating drugs or alcohol or solvent

- b. Intentional self-injury
- c. Use or consumption of narcotic or intoxicating drugs or alcohol or solvent, or taking of drugs (except under the direction of a Medical Practitioner)
- 2. Pre-Existing Condition- Any accidental bodily injury or disablement arising out of or contributed by or traceable to any disability existing on the date of issue of this Policy.
- 3. Hazardous or Adventure sports
Expenses related to any treatment necessitated due to participation as a professional in hazardous or adventure sports, including but not limited to, para-jumping, rock climbing, mountaineering, rafting, motor racing, horse racing or scuba diving, hand gliding, sky diving, deep-sea diving. Please refer definition of Hazardous or Adventure Sports as provided in the policy document.
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.
- 4. Breach of law: Expenses for treatment directly arising from or consequent upon any Insured Person committing or attempting to commit a breach of law with criminal intent.
- 5. War and hazardous substances
We do not cover treatment 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
 - b. Chemical contamination or contamination by radioactivity from any nuclear material whatsoever or from the combustion of nuclear fuel; or
 - c. any acts of terrorism.
- 6. Legal Liability- 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.
- 7. Defence Operation- We will not pay any claim under this Policy, whilst You are involved in any naval, military or air force operations whether in the form of military exercises or war games or actual engagement with the enemy, whether foreign or domestic.
- 8. Whilst engaging in aviation or ballooning, whilst mounting into, dismounting from or travelling in any balloon or aircraft other than as a passenger (fare paying or otherwise) in any duly licensed standard type of aircraft anywhere in the world.
- 9. Any loss suffered by the Insured on account of his participation as the driver, co-driver or passenger of a motor vehicle during motor racing or trial runs.
- 10. Curative treatments or interventions that the Insured performs or has had performed on his body.
- 11. Pregnancy, resulting childbirth, miscarriage, abortion, or complication arising out of any of the foregoing.

SECTION 5: IDENTITY THEFT

I. **What We Cover**

The Company hereby agrees subject to the terms, conditions and exclusions herein contained or otherwise expressed herein, to indemnify the Insured Person up to the Sum Insured as specified in the Policy Schedule/ Certificate of Insurance, in respect of Insured Person's expenses resulting from his/her efforts to resolve Insured Person's identity theft occurring during the cover period.

For this section Identity theft shall mean obtaining the personal information of another person without his/ her consent, for the sole purpose of assuming that person's name or identity to make fraudulent and unauthorized transactions or purchases.

Following expenses shall be payable provided they are incurred during the cover period and reported within 12 months of the occurrence, unless specifically agreed otherwise by Us and mentioned in the Certificate of Insurance / Policy Schedule:

1. **Legal Expenses:** We will reimburse Insured Person for attorney and court fees incurred by him/her for:
 - a. defending any suit brought against Insured Person by a creditor or collection agency or someone acting on their behalf as a result of the identity theft.
 - b. removing any civil or criminal judgment against Insured Person, wrongfully charged as a result of the identity theft.
2. **Lost Wages:** We will reimburse Insured Person for time taken from work solely as a result of his/her efforts to correct his/her financial records that have been altered due to identity theft. Payment of lost wages (excluding any applicable taxes/ deductions) includes compensation for whole or partial unpaid workdays for a period not

exceeding 7 working days, unless specifically agreed otherwise by Us and mentioned on the Certificate of Insurance/ Policy Schedule.

Taking time from self-employment or workdays that will be paid by Insured Person's employer will not be considered for Lost wages payment.

3. **Miscellaneous Expenses:** We will reimburse the following:

- a. the cost of refiling application for credit accounts or banking accounts that are rejected solely because the lender received incorrect information as a result of identity theft.
- b. the cost of notarizing documents related to Insured Person's identity theft reasonably incurred as a result of Insured Person's efforts to report an identity theft or to correct his/her financial and credit records that have been altered as a result of his/her identity theft.
- c. the cost of contesting the accuracy or completeness of any information contained in Insured Person's credit report as result of his/her identity theft.
- d. the cost of a maximum of 4 (four) credit reports from an entity approved by us. The credit reports shall be requested when Insured Person makes a claim.

II. **Conditions applicable to section 5:**

1. The fraudulent account must have been opened with the Insured Person's credentials without his/her authorization.
2. Any false charge or withdrawal from the unauthorized opened account must be verified by Insured Person's financial institution.
3. The Company will be permitted to inspect Insured Person's financial records.
4. Insured Person will cooperate with us and help us to enforce any legal rights he/she or we may have in relation to his/her identity theft; this may include his/her attendance at depositions, hearings and trials and giving evidence as necessary to resolve his/her identity theft.
5. Insured Person must report the identity theft to the financial institution immediately but not later than 12 hours of discovering the identity theft, unless specifically agreed otherwise by Us and mentioned in the Policy Schedule / Certificate of Insurance.
6. Insured Person must report the identity theft to the card Policy Authority immediately but not later than 24 hours of discovering the identity theft, unless specifically agreed otherwise by Us and mentioned in the Policy Schedule / Certificate of Insurance.

Note: *There are times when You may be in such a state of hardship, that You are unable to report the loss / damage to the financial institution and / or Police Authority within the prescribed time limit. In such cases, condonation of delay may be considered by waiving conditions 5 and 6, where the reason for delay is provided to our satisfaction.*

III. **Exclusion applicable to section 5:**

We will not pay for any expenses or loss for:

1. Monetary losses other than the out-of-pocket expenses related to the resolution of Insured Person's identity theft outlined in this policy.
 2. Any physical injury, sickness, disease, disability, shock, mental anguish, and mental injury including required care, loss of job or death.
 3. Cost incurred in credit reports before the discovery of Insured Person's identity theft.
 4. Any amount paid by the Insured Person as extortion money due to his/ her identity theft
 5. Any outstanding amount payable to the creditor/ financial institution due to Insured Person's identity theft
- Specific Exclusion applicable to Section 5 which can be waived in case specifically agreed by us:**
6. Any loss of information/ data due to Sim Cloning / Sim Hacking

SECTION 6- PURCHASE PROTECTION

I. **What We Cover**

The Company hereby agrees subject to the terms, conditions and exclusions herein contained or otherwise expressed herein, to indemnify the Insured Person upto the Sum Insured as specified in the Policy Schedule/ Certificate of Insurance in respect of loss / damage to the items that Insured Person purchases entirely with his/her card/ bank account/ digital wallet/ any other mode of payment as specified in the Policy Schedule/ Certificate of Insurance, provided that the loss/ damage to the purchased item is due to the below listed covered perils and within number of days as specified in the Policy Schedule/ Certificate of Insurance from the date of purchase or date of confirmed delivery of the item (whichever is later).

Covered Perils

1. Fire Perils
2. Earthquake
3. Burglary

II. Condition Applicable to Section 6

1. The cover under this Section shall be available only up to the number of days as mentioned in the Certificate of Insurance / Policy Schedule from the date of purchase or date of confirmed delivery of the item (whichever is later) of the tangible goods by the Insured.
2. Items given as gifts are included.
3. We will decide whether to have the item repaired or replaced, or to reimburse Insured Person (cash or credit) up to the amount charged to his/her card, and not to exceed the original purchase price.
4. Claim shall be considered subject to due depreciation of value for usage.
5. Items must be purchased entirely with Insured Person's card/ bank account / digital wallet/ any other mode of payment as specified in the Policy Schedule / Certificate of Insurance.
6. If the item is part of a pair or set, Insured Person will only receive compensation for the value of the stolen or damaged item unless the articles are unusable individually and/or cannot be replaced individually; the theft or damage of an item that is part of a pair or set will be viewed as one occurrence and the coverage limitation still applies.
7. Product rebates, discounts will be deducted from the original cost of the item.
8. Cost of the item/ amount paid as points redemptions or as loyalty points will be deducted from the original cost of the items.
9. In case of loss/ damage of the item due to burglary or housebreaking or robbery, the Insured Person must report the loss /damage to Police Authority immediately but not later than 24 hours of the loss event, unless specifically agreed otherwise by Us and mentioned in the Policy Schedule / Certificate of Insurance.

Note: *There are times when You may be in such a state of hardship, that You are unable to report the loss / damage to the financial institution and / or Police Authority within the prescribed time limit. In such cases, condonation of delay may be considered by waiving condition 9 where the reason for delay is provided to our satisfaction.*

III. Exclusion Applicable to Section 6

1. Items Insured Person has rented or leased.
2. Shipping and handling expenses or installation, assembly related costs.
3. losses that are caused by vermin, insects, termites, mold, wet or dry rot, bacteria, or rust.
4. losses due to mechanical failure, electrical failure, software failure, or data failure including, but not limited to any electrical power interruption, surge, brownout or blackout, or telecommunications or satellite systems failure.
5. items damaged due to normal wear and tear, inherent product defect or normal course of play (such as, but not limited to sporting or recreational equipment)
6. items that Insured Person damaged through alteration (including cutting, sawing, and shaping);
7. items left unattended in a place to which the general public has access.
8. Loss or damage where the Insured Person or any resident or member of the Insured Person's residential premises or his employee/s or any other person lawfully in the Insured's residential premises is involved or has colluded, in any manner, in the actual theft or damage to any of the articles or residential premises.
9. Loss of item removed or extracted from the safe within the residential premises following the use of the key to the said safe or any duplicate thereof belonging to the Insured Person, unless such key has been obtained by assault or violence or any threat.

Specific Exclusion applicable to Section 6 which can be waived in case specifically agreed by us:

10. Items that were lost or stolen from a vehicle.
11. Loss or damage to the item due to theft
12. Loss or damage to the item due to accidental damage.
13. Items Insured Person carried with him/her or acquired by him/her during a personal trip
14. Items such as Traveller's cheque(s), cash, tickets of any kind, negotiable instruments, bullion, rare or precious coins or stamps, plants, animals, consumables, perishables, art, antiques, firearms, collectable items, furs, jewellery, gems, precious stones and articles made of or containing gold (or other precious metals and/or precious stones)
15. Portable electronic items

SECTION 7- PRICE PROTECTION**I. What We Cover**

The Company hereby agrees subject to the terms, conditions and exclusions herein contained or otherwise expressed herein, to indemnify the Insured Person upto the Sum Insured as specified in the Policy Schedule/ Certificate of Insurance, for the difference between the price Insured Person paid with his/ her card/ bank account / digital wallet/ any other mode of payment as specified in the Policy Schedule / Certificate of Insurance for an item and a lower printed advertised price for the same item (same brand, make, model name).

II. Condition Applicable to Section 7

1. The lower price of the purchased item must be on a printed advertisement.
2. The printed advertisement must be published within the time period of purchase as specified in the Policy Schedule/ Certificate of Insurance.
3. The Insured Person must contact us about the claim within the time period of purchase as specified in the Policy Schedule/ Certificate of Insurance, of printed advertisement.
4. Claim payment on any claim will not include merchant's credit, discount and/or manufacturer's rebates, and shipping and handling fees.
5. In no event will we pay more than the actual amount charged for the item.

III. Specific Exclusion applicable to Section 7 which can be waived in case specifically agreed by us:

1. Any item with an original purchase price less than Rs. 2500,
2. Traveller's cheque(s), cash, tickets of any kind, negotiable instruments, bullion, rare or precious coins or stamps, plants, animals, consumables, perishables, art, antiques, firearms, collectable items, furs, jewellery, gems, precious stones and articles made of or containing gold (or other precious metals and/or precious stones), fuel, pharmaceutical and other medical products, optical products and medical equipment;
3. Customized/personalized, unique and one-of-a-kind items;
4. Any items acquired illegally;
5. Any motor vehicles including automobiles, boats and airplanes, and any equipment and/or parts necessary for their operation and/or maintenance;
6. Land, permanent structures and fixtures (including but not limited to buildings, homes, dwellings, and building and home improvements);
7. Any services you may purchase (including but not limited to the performance or rendering of labor or maintenance, repair or installation of products, goods or property, or professional advice of any kind);
8. Products purchased by a person not resident in India and/or any product purchased from outside India;
9. Shipping and/or transportation costs or price differences due to shipping, handling costs and sales tax;
10. The price difference from an advertisement outside of India or in a Duty Free zone;
11. Used, antique, recycled, previously owned, rebuilt, refurbished or remanufactured items
12. Items advertised in or as result of "limited quantity," "going out-of-business sales," "cash only" or "close out" advertisements, items shown on price lists or price quotes, cost savings as a result of package offer, manufacturer's coupons, employees discount, or free items, or where the advertised price includes bonus or free offers, special financing, installation or rebate, or one-of-a-kind or other limited offers;
13. Any price difference found with an item sold as a special deal available only to the members of specific organizations or anywhere not open to the public, such as clubs and associations, other than those available with your payment card;
14. Items purchased for resale, professional, or commercial use;
15. Items advertised with rebate, redeemable manufacturer's coupon, or any refund of any sort, in which case your purchase price will be determined by taking into account any such rebate or refund.
16. Internet purchases or advertisements;

SECTION 8- PERSONAL TRAVELLING PROTECTION**I. What We Cover**

The Company hereby agrees subject to the terms, conditions and exclusions herein contained or otherwise expressed herein, to indemnify to the Insured Person during the personal trip, a sum not exceeding the Sum Insured as specified in the policy schedule/ certificate of Insurance against the respective sections.

Personal trip is travel within India or abroad for personal reasons and not associated with employment or education activities with the university.

Section 8.1 Loss of Personal Baggage / Personal Belongings

We will indemnify the Insured Person for the loss of baggage / personal belonging during his/ her personal trip due to robbery, larceny or hold up subject to maximum of the Sum Insured as mentioned in Policy Schedule / Certificate of Insurance.

For this section, Personal Baggage / Personal Belongings shall include personal effects carried by Insured Person during a personal trip and cover contents that are personal in nature including but not limited to clothes, toiletries, shoes, items of similar nature or any other specifically agreed by Us.

Condition applicable to Section 8.1

1. Baggage and Personal Belongings must be accompanying the Insured Person during his/ her personal trip.
2. Only one claim is payable under the section in a cover period, unless specifically agreed otherwise by Us and mentioned on the Certificate of Insurance/ Policy Schedule

Exclusion applicable to section 8.1

1. Any partial loss including loss of one or more articles
2. Baggage / Personal Belongings left unattended in a place to which the general public has access;
3. Damage to baggage/ personal belongings from normal wear and tear, decay, and manufacturing defects;
4. Damage to baggage/ personal belongings caused by leakage of powder or liquid carried within baggage/ personal belongings;
5. Loss or damage to the baggage/ personal belongings due to mysterious disappearance

Specific Exclusion applicable to Section 8.1 which can be waived in case specifically agreed by us:

6. Portable electronic items
7. Theft of baggage and personal belongings
8. Traveller's cheque(s), cash, tickets of any kind, negotiable instruments, bullion, rare or precious coins or stamps, plants, animals, consumables, perishables, art, antiques, firearms, collectable items, furs, jewellery, gems, precious stones and articles made of or containing gold (or other precious metals and/or precious stones)

Section 8.2 Loss of Passport / Documents during the trip

In case of loss of passport/ important documents during the trip, we will reimburse the Insured Person for prescribed fee payable to the concerned authorities incurred to obtain a duplicate or new passport / documents.

For this section important documents shall include Insured Person's visa, PAN card, driving licence, aadhar card, birth certificate, education marksheet/ certificate or any other document specifically agreed by Us.

Condition applicable to Section 8.2

1. Loss of passport/ visa will be covered only in case of International travel
2. All claims must be supported by documentary evidence of the costs you have incurred.
3. Insured Person must report the loss of passport/ documents to Police Authority immediately but not later than 24 hours after discovering the loss event

Exclusion applicable to section 8.2

1. Loss or damage to the Insured's passport as a result of the confiscation or detention by customs, police or any other authority.
2. Any consequential expenses incurred due to loss of passport like emergency trip extension will not be covered under this section.

Section 8.3 Missed Connecting Flight during transit Coverage:

We will reimburse reasonable additional expenses due to Missed Connecting flight due to Increment Weather, equipment failure of common carrier or Strike or other job action by employees of a Common Carrier scheduled to be used by the Insured Person.

Exclusion applicable to section 8.3

1. Any missed connection where time gap between scheduled arrival of incoming common carrier and scheduled departure of connecting common carrier was less than 6 hours or time excess as mentioned in the Certificate of Insurance/ Policy Schedule.
2. Any claim caused by a strike or industrial action or any other reason for which the dates had been publicly announced or reported by the media at the time you took out your policy or when you booked your trip (whichever is later).

Section 8.4 Trip Cancellation:

We will indemnify the Insured Person for flight cancellation charges if the Insured Person cancels his trip before the onset of the trip due to Insured Person's hospitalisation or his / her family member's hospitalisation within 7 days prior to departure of the Insured Person, death of the Insured Person family member within 7 days prior to departure of the Insured Person, natural calamity, riot or strike at the travel origin city, Government advisory or due to legal matter wherein the Insured Person is directly involved.

For this section, family member should mean spouse, children and parents of the Insured Person.

Exclusion applicable to section 8.4

1. Failure to start journey in case of rejection of VISA
2. If trip is cancelled due to any natural calamity not declared by appropriate government authority
3. Any cancellation due to Hospitalization resulting from pre-existing disease, Childbirth, Pregnancy or related medical complications to Insured Person, his/ her immediate family or traveling companion

Section 8.5 Delay in Flight

We will pay the Insured Person if his/ her common carrier's actual departure time is delayed by more than 6 hours or the duration (as specified in the Policy schedule/ certificate of Insurance) from the scheduled departure time, due inclement weather, sudden strike at common carrier, equipment failure or operational issue of the common carrier.

Exclusion applicable to section 8.5

1. Any delay, which was made public or known to at least 6 hours prior to the scheduled departure of the Common Carrier.
2. Any delay caused due to change in laws, regulations or orders issued by the respective Government or the regulating authority which was publicly announced.
3. Strikes or labour disputes which existed, or of which advance warning had been given in Public prior to the date on which the insured trip was scheduled.

Section 8.6 Emergency Medical Treatment and Evacuation

If the Insured Person fall ill during his/ her trip and require immediate medical treatment resulting in hospitalization in order to save his/ her life or to give immediate relief from an acute pain, we will pay for the reasonable and customary charges the Insured Person incur for emergency medical treatment including rescue service to take to the hospital, up to the Sum Insured as specified in the Policy Schedule / Certificate of Insurance.

Exclusion applicable to section 8.6

1. Claim arising out of any type of pre-existing disease or illness.
2. Any medical treatment resulting into hospitalisation from accidental injury.
3. Any claim for a medical condition if any insured person has travelled against the advice of a doctor or travels without medical advice when it was reasonable for them to have consulted a doctor.
4. the cost of any non-emergency treatment or surgery including exploratory tests which are not directly related to the illness that you originally went to hospital for;
5. any form of treatment that your treating doctor and our Medical Emergency Assistance provider think can reasonably wait until you return home;
6. cosmetic surgery;
7. routine medication which you were consuming or started, at the time your trip start, and you knew that you would need while you were away;
8. treatment or services provided by a health spa, convalescent or nursing home or any rehabilitation centre;
9. any treatment after you have returned home
10. Investigation & Evaluation
 - a. Expenses related to any admission primarily for diagnostics and evaluation purposes only are excluded.
 - b. Any diagnostic expenses which are not related or not incidental to the current diagnosis and treatment are excluded
11. Vitamins and tonics, vaccination (unless related to animal bite), Weight management services and treatments related to weight reduction programs including treatment of obesity, external Congenital disease, defect or anomalies.
12. Physiotherapy, rehabilitation of organs.
13. Pregnancy or childbirth related expenses.

Section 8.7 Emergency Accidental Treatment and Evacuation

If the Insured Person meets with an accident during his/ her trip and require immediate medical treatment resulting in hospitalization in order to save his/ her life or to give immediate relief from an acute pain, we will pay for the reasonable and customary charges the Insured Person incur for emergency accidental treatment including rescue service to take to the hospital, up to the Sum Insured as specified in the Policy Schedule / Certificate of Insurance.

Exclusion applicable to section 8.7

1. Claim arising out of any type of pre-existing injury.
2. All type of medical treatments and hospitalization required or undertaken at the place of origin of Trip
3. the cost of any non-emergency treatment or surgery including exploratory tests which are not directly related to the injury that you originally went to hospital
4. any form of treatment that your treating doctor and our Medical Emergency Assistance provider think can reasonably wait until you return home;
5. plastic or cosmetic surgery, unless considered necessary as a medical emergency and agreed with our Medical Emergency Assistance provider and required due to accident;
6. any treatment after you have returned home.

Section 8.8 Plane Hijack Cover

We will pay the amount as mentioned in the Policy schedule/ Certificate of Insurance if the commercial aircraft in which the Insured Person was traveling gets hijacked.

Section 8.9 Home protection while Insured Person is away

We will cover the damage, disappearance or destruction of the Insured Person's furniture, clothes, electrical and electronic items due to burglary at his/her residence during Insured Person's personal trip travel time.

Specific Exclusion applicable to Section 8.9 which can be waived in case specifically agreed by us:

1. losses that are due to events other than burglary, including but not limited to fire, smoke, lightning, wind, water, flood, earthquake, volcanic eruption, tidal wave, landslide, hail, or other acts of god;
2. losses that occurred when Insured Person's travel time is longer than 2 weeks
3. Traveller's cheque(s), cash, tickets of any kind, negotiable instruments, bullion, rare or precious coins or stamps, plants, animals, consumables, perishables, art, antiques, firearms, collectable items, furs, jewellery, gems, precious stones and articles made of or containing gold (or other precious metals and/or precious stones)

II. Condition Applicable to Section 8

1. The passenger fares(s) for a covered personal trip must be paid entirely with Insured Person's card/ bank account / digital wallet/ any other mode of payment as specified in the Policy Schedule / Certificate of Insurance.
2. Personal Trip can be within India only or any country specific or Worldwide, as mentioned in the certificate of Insurance / Policy Schedule.
3. In no event will we pay more than the replacement cost of the covered item.
4. The coverage will be restricted to first 15 days from the date of start of travel, unless specifically agreed otherwise by Us and mentioned on the Certificate of Insurance/ Policy Schedule.

Section 9– WALLET PROTECTION (Lost Wallet Coverage)**I. What We Cover**

The Company hereby agrees to indemnify to the Insured Person when Insured Person's wallet is lost or stolen, a sum not exceeding the Sum Insured as specified in the policy schedule/ certificate of Insurance against this section.

We will cover Insured Person for the following when his/her wallet is lost or stolen:

1. Replacement costs for the lost or stolen wallet;
2. Prescribed fee payable to the concerned authorities incurred to obtain a duplicate or new personal papers and /or cards.

For this section personal papers and cards shall mean Insured Person's driving licence, PAN Card, Aadhaar Card, Credit Card, Debit Card and other similar documents usually carried in a wallet.

II. Condition Applicable to Section 9

1. File a Police report immediately but not later than 24 hours of discovering the loss / theft.

III. Exclusion Applicable to Section 9

We will not cover:

1. money, cheque(s), transportation tickets, tickets of any kind, negotiable instruments, stamp or other similar items that were in the lost or stolen wallet;
2. losses that are caused by any events other than lost or stolen, such as fire, water, normal wear and tear, manufacturing defects, vermin, insects, cleaning or repairs, or similar events;
3. accidental damage to Insured Person's wallet and items inside;
4. any fraudulent/unauthorized charges on the lost or stolen cards;

5. any identity theft related costs that are caused by lost or stolen personal papers or cards.

GENERAL POLICY EXCLUSIONS (APPLICABLE TO ALL SECTIONS)

We will not cover the following:

1. Deductible as mentioned in the Policy Schedule/ Certificate of Insurance against the specific section for each loss.
2. Losses that do not occur within the cover period as specified in the Policy Schedule/ Certificate of Insurance
3. Losses caused by illegal acts;
4. Losses that Insured Person have intentionally caused;
5. Losses sustained by the Insured Person resulting directly or indirectly from the actions of the Insured Person's employee/members of household, relative, acting alone or in collusion with others.
6. Losses due to war, invasion, act of foreign enemy, hostilities or warlike operations (whether war has been declared or not), civil war, rebellion, revolution, insurrection, civil commotion, uprising, military or usurped power, martial law, riot or the act of any lawfully constituted authority.
7. Losses due to the order of any government, public authority, or customers' officials.
8. Losses due to ionizing radiations contamination by radio activity from any nuclear fuel or from any nuclear waste from the combustion (including any self-sustaining process of nuclear fission) of nuclear fuel.
9. Losses due to nuclear, biological, or chemical event
10. Any loss directly or indirectly caused by pandemic or epidemic as declared by WHO / Indian Government/ any Authorized Government body
11. Any legal liability, of whatsoever nature.
12. Any loss or damage which is recoverable from any other source
13. Any consequential losses of any kind (financial or otherwise), and/or any actual or alleged legal liability of the Insured
14. Loss due to Terrorism, unless specifically agreed otherwise by Us.

Terrorism 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 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 governments), committed for political, religious, ideological or similar purpose including the intention to influence any government and/or to put the public, or any section of the public in fear.

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 expenses 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.

POLICY DEDUCTIBLE (applicable to all sections)

Subject to the policy limits that apply, we will pay only that part of the total of all covered loss that exceeds the deductible amount shown in the Policy Schedule/ Certificate of Insurance.

POLICY LIMITATION (applicable to all sections)

For each of the coverage, we will pay up to the maximum amount per occurrence and per policy period/ cover period as shown in the Policy Schedule / Certificate of Insurance.

GENERAL CONDITIONS (applicable to all sections)

1. Notices and Alternations to the Policy:

All notices and communications in relation to this Policy are to be sent to the Company in writing or in electronic format.

2. Observance of Terms and Conditions

The due observance and fulfilment of the terms, conditions and endorsement of this Policy in so far as they relate to anything to be done or complied with by the Insured and the truth of the statements and answers in the proposal shall be a condition precedent to any liability of the Company to make any payment under this Policy.

3. Duty of Disclosure:

This Policy shall be null, and void and all premiums paid hereon shall be forfeited in the event of misrepresentation, misdescription or non-disclosure of any material fact in the Proposal form, personal statement, declaration and connected documents, or any material information having been withheld.

4. Reasonable Care:

The Insured Person shall take all reasonable precautions for safety and soundness of Insured Property and to prevent the loss in order to minimize claims. The Insured must comply with Maker's recommended actions for inspection and maintenance and shall comply all statutory requirements or other regulations and will employ only competent and honest employees and/or representative(s).

5. Fraudulent Claims

If any Insured Person shall give any notice or Claim cover for any Loss under this Policy knowing such notice or Claim to be false or fraudulent as regards amounts or otherwise, such Loss shall be excluded from cover under the Policy, and the Company shall have the right, in its sole and absolute discretion, to avoid its obligations under or void this Policy in its entirety, and in such case, all cover for Loss under the Policy shall be forfeited, all premium shall be deemed fully earned and non-refundable and the Insured Person / Policy Holder shall reimburse the Company for any payments made under this Policy.

6. Duties in the Event of Occurrence of Circumstance or Claim or Suit

1. You must notify Us/ Policyholder in writing immediately of any Occurrence which may result in a Claim. To the extent possible, notice must include –
 - a. how, when and where the Occurrence took place;
 - b. the names and addresses of any injured persons and witnesses; and
 - c. the nature and location of any injury or damage arising out of the Occurrence.
 - d. detailed statement in writing regarding loss or damage and any such information and documentation (in relation to the quantum of the Claim and otherwise)
2. Upon Our request You must
 - a. authorize Us to obtain records and other information,
 - b. cooperate with Us in the investigation, settlement or defence of the Claim or Suit; and
 - c. assist Us in the enforcement of any right against any person or organization which may be liable to the Insured because of Bodily Injury or Property Damage to which this insurance may also apply.
3. The Insured Person shall within 30 days deliver to the Company its completed claim form detailing the loss or damage that has occurred and an estimate of the quantum of any claim along with all documentation required to support and substantiate the amount of Indemnification sought from the Company, and
4. Forward Us every letter, writ, summons in relation to Your claim as soon as You receive it.
5. Not incur any expenditure for which a claim may be made against Us without Our prior approval.

7. Making a Claim

Upon the happening of any event, which may give rise to a Claim under this Policy:

- a) Following a Claim, the Insured Person shall immediately give written notice to the Company giving preliminary information regarding particulars about the loss. The Policyholder and Insured Person will, within a period of thirty (30) days of reporting of loss, submit full details of the Claim, supported by the following documents duly completed in all respects to the Company:
 - i. Completed claim form.
 - ii. Claims documents as listed below
 - iii. Photo Id proof of the Insured person
- b) We shall settle or reject a claim, as the case may be within 30 days of submission of last necessary documents / information. All claims will be settled in accordance with the applicable regulatory guidelines, including IRDAI (Protection of Policyholders Interest Regulation), 2017. In case of delay in payment of any claim that has been admitted as payable by Us under the Policy terms and condition, beyond the time period as prescribed under IRDAI (Protection of Policyholders Interest Regulation), 2017, we shall pay interest at a rate which is 2% above the bank rate from the date of receipt of last necessary document to the date of payment of claim. For the purpose of this clause, 'bank rate' shall mean the existing bank rate as notified by Reserve Bank of India, unless

the extent regulation requires payment based on some other prescribed interest rate.

- c) On payment of a claim by the Company, the Sum Insured mentioned in the Certificate of Insurance will stand reduced by the amount of claim paid and cannot be reinstated. Claim amount will be paid in Indian Rupees and in a bank account in India.
- d) The Policyholder and Insured Person will also make available any additional information/documents required by the Company to enable the Company to determine the admissibility of the claim. Any further / specific requirement which may be typical to the loss may also be raised by the Company, however, such requirement shall have to be raised within 7 working days from the date of receipt of documents.
- e) Claim documentation: The following set of documents would be submitted by Insured/ Insured Person/ someone claiming on behalf of the Insured Person to the Insurance company:
 - a. Duly filed Claim Form.
 - b. Photo Id proof and address proof of the Insured Person
 - c. Police Acknowledgement Letter / FIR (to be done immediately but not later than 24 hours from the time of realisation of loss (wherever applicable)

Section	Claim Documents
Section 1: Card Cover	<ol style="list-style-type: none"> 1) For Card Related claims – Proof of Disabling of Card facility at core banking Proof (to be done within 24 hours from the date of realisation of loss) 2) Card Statement/ Account Statement for last 6 months indicating Fraudulent Transactions/Unauthorised Use and loss liability. 3) Card Copy / Declaration from the Bank/ financial institution 4) Internal Investigation report of the card issuer/ financial institution 5) Proof of settlement / chargeback/ other recoveries 6) Customer complaint letter regarding fraudulent / unauthorized transaction to the bank/ financial authority/ card issuer. 7) In case of ATM Robbery, FIR must indicate the exact time of ATM Robbery and distance from the ATM from which the money was withdrawn. 8) Any other document required for the settlement of claim on case to case basis
Section 2: Other Electronic Transaction Cover	<ol style="list-style-type: none"> 1) Account Statement for last 6 months indicating Fraudulent Transactions/Unauthorised Use or loss 2) Customer complaint letter regarding fraudulent / unauthorized transaction to the bank/ financial authority. 3) Internal Investigation report of the bank/ financial institution 4) Proof of settlement / chargeback/ other recoveries 5) Any other document required for the settlement of claim on case to case basis
Section 3: Digital Wallet Cover	<ol style="list-style-type: none"> 1) Digital Wallet Account Statement for last 3 months indicating Fraudulent Transactions/Unauthorised Use and loss liability. 2) Internal Investigation report of the digital wallet company/ financial institution 3) Proof of settlement / chargeback/ other recoveries 4) Customer complaint letter regarding fraudulent / unauthorized transaction to the bank/ financial authority. 5) Any other document required for the settlement of claim on case to case basis
Section 4: Personal Accident Cover	<ol style="list-style-type: none"> 1) For Accidental Death Claims / Air Accident <ol style="list-style-type: none"> a) Attested Copy of Death Certificate. b) Death Summary/Certificate from the hospital authority (wherever applicable) c) Burial Certificate (wherever applicable). d) Attested Copy of Statement of Witness, if any lodged with police authorities. (wherever applicable). e) Attested Copy of FIR / Panchanama / Inquest Panchanama. (wherever applicable). f) Attested Copy of Post-mortem Report (Only if conducted). g) Attested Copy of Viscera report if any (Only if Post-mortem is conducted). h) Newspaper extract confirming the air accident and any documentary proof confirming that the Insured Person was travelling in the aircraft met with accident. 2) In Case of PTD / PPD Claim <ol style="list-style-type: none"> a) Attested Copy of disability certificate from relevant government Medical authority. b) All Investigation reports confirming the disability. c) Complete Treatment record with follow-up documentation. 3) In Case of TTD Claims <ol style="list-style-type: none"> a) All Investigation reports confirming the disability

	<ul style="list-style-type: none"> b) For Employed persons: Certificate from HR with details of medical leave availed during the period of Injury c) Certificate from the treating doctor mentioning the extent of Injury along with the period of disability d) Certificate from Treating doctor with date of full recovery & resuming of duties 4) In case of Children Education Grant - Bonafide Certificate from School / College or Certificate from the Educational Institution 5) In case of Girl Child Benefit – <ul style="list-style-type: none"> a) Proof of Relationship with the Insured Person b) Photo Identity Proof of Child c) Age Proof of the Dependent Child 6) Funeral Expenses - Original Invoice of Expenses Incurred during Funeral 7) Transportation of Mortal Remains - Original Invoices of expenses incurred for Carriage of Dead Body/repatriation of mortal remains. 8) Any other document required for settlement of claim on case to case basis
Section 5: Identity Theft	<ul style="list-style-type: none"> 1) Document confirming identity theft of the Insured Person 2) Document / Invoices confirming attorney and court fees 3) Document confirming lost wages 4) Invoices of miscellaneous expenses 5) Any other document required for settlement of claim on case to case basis
Section 6: Purchase Protection	<ul style="list-style-type: none"> 1) Statement of Card / bank account/ wallet confirming that the item was purchased from the Insured Person's Card 2) Invoice of the item purchased 3) Any other document required for settlement of claim on case to case basis
Section 7: Price Protection	<ul style="list-style-type: none"> 1) Statement of Card / bank account/ wallet confirming that the item was purchased from the Insured Person's Card 2) An original receipt of the purchased item 3) The printed advertisement proving the difference in price between your item and the same lower priced item 4) Any other document required for settlement of claim on case to case basis

Section 8: Personal Travelling Protection	<ol style="list-style-type: none"> 1) Loss, theft or accidental damage to his/her luggage <ol style="list-style-type: none"> a) Proof of Purchase of the lost items 2) Loss of Passport / Documents <ol style="list-style-type: none"> a) Receipts for fee payable to the concerned authorities incurred to obtain duplicate or new passport/ document 3) Missed Connecting Flight during transit Coverage <ol style="list-style-type: none"> a) Written confirmation from the carrier of the number of hours of delay, and any compensation received towards the delay. b) Details of alternate travel arrangements offered by the carrier, however not accepted 4) Trip Cancellation <ol style="list-style-type: none"> a) If the reason for cancellation/ abandonment is medical, Insured Person will need to produce a medical certificate from the medical practitioner attending the patient. This must confirm the reason and need of cancellation/abandonment. Hospitalization records (a discharge summary). b) Death certificate (where applicable). c) Copy of booking as well as cancellation confirmation. 5) Delay in Flight <ol style="list-style-type: none"> a) Security-stamped boarding pass for the flight which got delayed. b) Written confirmation from the carrier of the number of hours of delay and reason for delay in flight 6) Emergency Medical Treatment and Evacuation & Emergency Accidental Treatment and Evacuation <ol style="list-style-type: none"> a) All medical reports and records given by the treating facility. b) Receipts for any expenses incurred that are covered 7) Plane Hijack Cover <ol style="list-style-type: none"> a) Boarding pass confirming that the Insured Person was travelling in the Plane hijacked b) Any newspaper/ document confirming that the plane was hijacked 8) Home protection while Insured Person is away <ol style="list-style-type: none"> a) Invoice of Items damages 9) Documents confirming that the tickets were booked from the Insured Person's Card/ bank account/ wallet 10) Any other document required for settlement of claim on case to case basis
Section 9: Wallet Protection (Lost Wallet Coverage)	<ol style="list-style-type: none"> 1) Original invoice/ proof of purchase of the lost wallet 2) Receipt of cost incurred as replacement costs for the new wallet 3) Receipts for fee payable to the concerned authorities incurred to applying for / obtain new personal papers and/ or cards. 4) Any other document required for settlement of claim

8. Insufficient Document

We have provided list of relevant necessary documents to be submitted at the time of claim. We shall not be liable to pay any claim in case all the relevant necessary documents are not submitted to Us and further We shall settle or reject a claim, as may be the case, within thirty days of the receipt of the last necessary document.

9. Admission of Liability

Unless You have obtained Our prior written consent, neither You nor any of Your Employees, agents or others acting on Your behalf may:

- a. admit liability, fault, or guilt in connection with any Occurrence or
- b. do anything that might be seen as an admission of liability, fault, or guilt unless permissible in law; or
- c. settle any third-party Claim, even though it may be within the amount of the Deductible and Participation Percentage.

10. Alteration of Risk

Any alteration or addition or change materially affecting the facts or circumstances existing at the commencement of or during the course of this Policy or at any subsequent renewal date, shall be notified to Us as soon as such change comes to Your notice.

We reserve the right to accept or deny coverage at the time of such notification and to establish a separate rate and premium for any such coverage.

Notice to any agent or knowledge possessed by any agent or any other person with respect to any alteration or addition shall not effect a change in any part of this Policy or prevent Us from asserting any right under the terms of this Policy, nor shall the terms of this Policy be changed, except by endorsement issued by Us and made a part of this Policy.

11. Cancellation

a. Cancellation by Insured

Policy may be cancelled at the option of the insured with Fifteen (15) days' notice of cancellation and We will be entitled to retain premium on short period scale of rates for the period for which the cover has been in existence prior to the cancellation of the Policy. The balance premium, if any, will be refundable to the insured. In case of cancellation of Policy by the insured, premium would be refunded as per below table subject to no refund of premium corresponding to cards/accounts where claim is reported:

Period on Risk	% of Premium to be Refunded
Not Exceeding 1 Week	90% of the Annual Premium
Not Exceeding 1 Month	75% of the Annual Premium
Not Exceeding 2 Months	65% of the Annual Premium
Not Exceeding 3 Months	50% of the Annual Premium
Not Exceeding 4 Months	40% of the Annual Premium
Not Exceeding 6 Months	25% of the Annual Premium
Not Exceeding 8 Months	15% of the Annual Premium
Exceeding 8 Months	0% of the Annual Premium

Short term policies can be issued as per the short-term period scale as provided above.

b. Cancellation by Insurer:

This insurance may also at any time be terminated at the option of the Insurer, on Fifteen (15) days' notice to that effect being given to the Insured on ground of mis-representation, fraud, non-disclosure of material facts and non-co-operation by the insured and there would be no refund of premium. The policy will be null and void ab-initio.

- c. Your Policy will automatically be cancelled from the time Your Business becomes insolvent or is wound up or is permanently discontinued or a liquidator, administrator, receiver, manager and / or Trustee in bankruptcy is appointed to You or any of Your assets.
- d. No refund of premium shall be due if the Insured has made a Claim under this Policy.

12. Examination of Your Books and Records

We may examine and audit Your books and records as they relate to this Policy at any time during the Policy period and until the later of three years after termination of this Policy or one year after final disposition of all Claims arising out of any Occurrence, provided notice of which has been given under this Policy.

13. Automatic Termination

The cover for the Insured person shall terminate immediately in the event of admissible claim and settlement of 100% Sum Insured mentioned in the Certificate of Insurance or in case of discovery of fraud or misrepresentation by the insured.

14. Policy Modifications

This Policy contains all the agreements between You and Us concerning the insurance afforded. This Policy's terms can be amended or waived only by endorsement issued by Us and made a part of this Policy.

15. Reasonable Care

Without exception, the Insured Person must take all reasonable steps to prevent incurring any Loss, damage, or liability.

16. Renewal

The Company shall neither be bound to issue any renewal notice nor to accept renewal premium thereunder. Unless renewed as herein provided, this Policy shall terminate at the expiration of the period for which the premium has been paid.

17. Contribution: (Not applicable for benefit section / Personal Accident Section)

If at the time of the happening of any loss or damage covered by this Policy there shall be existing any other insurance of any nature whatsoever covering the same, whether effected by the Insured or not, then the Company shall not be liable to pay or contribute more than its rateable proportion of any loss or damage.

18. Subrogation:

You shall at Our expense do and concur in doing, and permit to be done, all such acts and things as may be necessary or reasonably required by Us for the purpose of enforcing any rights and remedies or of obtaining relief or indemnity from other parties to which We 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 Us.

19. Arbitration:

If any dispute or difference shall arise as to the quantum to be paid under the 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. The arbitration shall be conducted in English and the seat and venue of arbitration shall be in India. The arbitration proceedings shall be conducted in accordance with the provisions of The Arbitration and Conciliation Act, as amended from time to time.

It is clearly agreed and understood that no difference or dispute shall be referable to arbitrations as herein before 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 award by such arbitrator/ arbitrators of the amount of the loss or damage shall be first obtained.

20. Transfer of Rights and Duties (Assignment)

Your rights and duties under this Policy may not be transferred without Our written consent except in the case of the death of an individual who is an Insured Person.

21. Terms

All statements made in the Proposal for this Policy and any material submitted therewith, as a supplement thereto, or required thereby, either in physical or in electronic format are the basis of this Policy and, together with the Policy Schedule/ Certificate of Insurance and any Endorsements to this Policy, are hereby deemed material and are incorporated into and made a part of this Policy and this Policy is issued in reliance upon such Proposal and other material submitted to Us.

22. Jurisdiction:

This policy shall be governed by the laws of India and is subject to the exclusive jurisdiction of the courts of India.

23. Territorial Limits

This Policy covers insured events of concerned Insured person arising during the Cover Period within India unless specifically agreed otherwise by the Company. For Personal Accident Cover, territorial limits should be world-wide, unless specifically agreed otherwise by the Company.

The Company's liability to make any payment under admissible claims under Certificate of Insurance shall be to make payment to concerned Insured person within India and in Indian Rupees only.

24. Validity of Certificate of Insurance

Subject to provision relating to cancellation, the coverage under the Certificate of Insurance will terminate on the earliest of the following occurrence:

- a. The expiry date of Cover Period as mentioned in the Certificate of Insurance
- b. In case of loss/damage, any claim paid up to the Sum Insured as mentioned in the Certificate of Insurance
- c. The date that the Insured person is no longer member of the group of the Insured.

CUSTOMER GRIEVANCE REDRESSAL POLICY:

The Company is committed to extend the best possible services to its customers. However, if you are not satisfied with our services and wish to lodge a complaint, please feel free to call our 24X7 Toll free number [1800-258-5956](tel:1800-258-5956) or you may email to the customer service desk at hello@godigit.com. After investigating the matter internally and subsequent closure, we will send our response.

Senior Citizens can now contact us on [1800-258-5956](tel:1800-258-5956) or write to us at seniors@godigit.com.

If you do not get a satisfactory response from us and you wish to pursue other avenues for redressal of grievances, you may approach Insurance Ombudsman appointed by IRDAI under the Insurance Ombudsman Scheme.

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 - 25501201/02/05/06 Email: bimalokpal.ahmedabad@cioins.co.in	Gujarat, Dadra & Nagar Haveli, Daman and Diu.
BENGALURU	Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No. 57-27-N-19 Ground Floor, 19/19, 24th Main Road, JP Nagar, Ist Phase, Bengaluru – 560 078. Tel.: 080 - 26652048 / 26652049 Email: bimalokpal.bengaluru@cioins.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@cioins.co.in	Madhya Pradesh Chhattisgarh
BHUBANESHWAR	Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar – 751 009. Tel.: 0674 - 2596461 /2596455, Fax: 0674 - 2596429 Email: bimalokpal.bhubaneswar@cioins.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@cioins.co.in	Punjab, Haryana (excluding Gurugram, Faridabad, Sonapat and Bahadurgarh) Himachal Pradesh, Union Territories of Jammu & Kashmir, Ladakh & 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@cioins.co.in	Tamil Nadu, Tamil Nadu PuducherryTown and Karaikal (which are part of Puducherry)
DELHI	Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel.: 011 - 23232481/23213504 Email: bimalokpal.delhi@cioins.co.in	Delhi & Following Districts of Haryana - Gurugram, Faridabad, Sonapat & Bahadurgarh.
GUWAHATI	Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati – 781001(ASSAM). Tel.: 0361 - 2632204 / 2602205 Email: bimalokpal.guwahati@cioins.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 - 23312122 Fax: 040 - 23376599 Email: bimalokpal.hyderabad@cioins.co.in	Andhra Pradesh, Telangana, Yanam and part of Union Territory of Puducherry.

JAIPUR	Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141 - 2740363 Email: bimalokpal.jaipur@cioins.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@cioins.co.in	Kerala, Lakshadweep, Mahe-a part of Union Territory of Puducherry.
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@cioins.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@cioins.co.in	Districts of Uttar Pradesh : Lalitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, 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@cioins.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.: 0120-2514252 / 2514253 Email: bimalokpal.noida@cioins.co.in	State of Uttaranchal and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, 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@cioins.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 – 411 030. Tel.: 020-41312555 Email: bimalokpal.pune@cioins.co.in	Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region.

Note: COUNCIL FOR INSURANCE OMBUDSMAN ,3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W),
Mumbai - 400 054.Tel.: 022 – 69038801/03/04/05/06/07/08/09 Email: inscoun@cioins.co.in