

Digit Paint Protection Film Cover
Policy Wordings
(UIN: IRDAN158RPMs0001V01202526)

1. PREAMBLE

WHEREAS the Insured described in the Policy Schedule/ Certificate of Insurance hereto (hereinafter called the "Insured") by a proposal and declaration which shall be the basis of this contract and is deemed to be incorporated herein has applied to Go Digit General Insurance Ltd (hereinafter called the Company) for the insurance hereinafter contained and has paid premium as consideration for such insurance during the Policy 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.

2. DEFINITIONS

The following words or terms shall have the meaning ascribed to them wherever they appear in this Policy:

1. **Accident, Accidental:** A sudden, unforeseen, unintended event caused by external, visible and/or violent means
2. **Accidental Damage** means an accident that causes physical damage to the Paint Protection Film (PPF) as covered under this policy, which is caused suddenly by an outside force and is not expected.
3. **Deductible** means the amount which shall be borne by the Insured in respect of each and every claim made under this Policy. The Company's liability to make any payment under the Policy is in excess of the Deductible.
4. **Manufacturer's Warranty** means the warranty given by the respective manufacturer in respect of quality and performance standards of the product. Any manufacturing defects during the manufacturer's warranty period will be covered by the respective manufacturer and will not be covered by the Company under the coverage provided under this policy.
5. **Paint Protection Film (PPF):** A thermoplastic urethane film applied to the painted surfaces of a vehicle to protect the paint of the vehicle from stone chips, bug splatters, and minor abrasions. It is also known as clear film, or clear paint film.
6. **Policy Period:** The Period from the Commencement Date and Time to the Expiry Date and Time as shown in the Policy Schedule / Certificate of Insurance of the policy.
7. **Policy Year** means the period of one year commencing on the date of commencement specified in the Policy Schedule / Certificate of Insurance or any anniversary thereof.
8. **Policy Schedule:** Policy schedule is the part of the insurance contract that identifies the policyholder and includes details coverage, the amount of coverage, the extent of coverage including Optional Covers (if Opted), the exclusions, the deductibles, and the payment receipt details.
9. **Sum Insured:** means the amount stated in the Policy Schedule / Certificate of Insurance, which is the maximum liability of the Company under cover during the Policy Year.
10. **We, Our, Us, Digit:** Go Digit General Insurance Ltd.
11. **Your Vehicle/Insured Vehicle:** Vehicle having paint protection films which is Insured by Us as per the Policy. It is not necessary that Vehicle motor policy should be with Us.
12. **You, Your, Insured:** The person or persons whose paint protection films on the vehicle are insured as set out in the Policy Schedule / Certificate of Insurance.

3. COVERAGE

Paint Protection Film (PPF) Cover

We will indemnify You for the replacement or reinstallation of damaged Paint Protection Film (PPF) due to accidental damage of Your vehicle during the policy period.

Provided always that:

1. This policy only covers the cost of Film, related adhesives and labour to repair/replace the covered installed PPF on Your vehicle.

2. If repair of damaged PPF costs more than the original purchase price of the replacement PPF, We will replace the damaged PPF with a new PPF of similar features and specifications, not exceeding the original purchase price.
3. In case replacement of PPF with similar features and specifications is not available, Our liability under the policy will be limited to original purchase price of PPF or sum Insured under the Policy whichever is lower.
4. Our maximum liability under the policy during a policy year will be limited to the Sum Insured mentioned in the Policy Schedule/ Certificate of Insurance. The liability of the Company for any one loss (if applicable) will be as shown in the Policy Schedule/ Certificate of Insurance.
5. Coverage provided under this policy will be applicable only on damage to the installed PPF for partial losses to the vehicle. Any loss or damage arising out of Total Loss of the vehicle will not be covered under this Policy, unless specifically agreed otherwise by Us.
6. Maximum number of claims will be payable under the policy in a policy year will be as mentioned in the Policy Schedule/ Certificate of Insurance.

4. EXCLUSION

1. If the accidental damage to the vehicle is not admissible as claim under Own Damage section of Your Vehicle Insurance Policy, unless specifically agreed otherwise by Us.
2. If loss is covered under manufacturer warranty, any other maintenance agreement or compensation is payable by any other source.
3. Any loss or damage, which exists prior to commencement of the Policy period.
4. Replacement of any consumable item or accessory or used for fitting the film. These include, but are not limited to plugs, fuses, batteries, light bulbs, light covers, cables, filters, attachments, belts, tapes or software.
5. Normal wear and tear i.e. gradual deterioration associated with normal use and age of the PPF.
6. Expenses which are regular in nature and required to maintain PPF in Proper condition as recommended by the Manufacturer are not covered.
7. Damage caused by unauthorized repair, intentional damage or negligence.
8. Any deductible mentioned in the Policy Schedule/certificate of insurance.
9. Costs arising from incorrect installation, modification or maintenance.
10. Damage caused before or during installation of PPF.
11. Damage due to failure to follow the manufacturer's instructions.
12. Any alteration in the installed PPF.
13. Any loss or damage arising out of
 - a. Ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste or from the combustion of nuclear fuel.
 - b. The radioactive toxic explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.
 - c. War, invasion, acts of foreign enemies, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, military or usurped power or confiscation or nationalization or requisition of or damage to property by or under the order of any government or public local authority.

5. GENERAL CONDITIONS

1. This Policy and the Policy Schedule/ Certificate of Insurance shall be read together and any word or expression to which a specific meaning has been attached in any part of the Policy or of the Policy Schedule / Certificate of Insurance shall bear such meaning wherever it may appear.
2. **Due Observance**
The due observance and fulfilment of the terms, provision 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 said proposal shall be a condition precedent to any liability of the Company to make any payment under this Policy.
3. **Reasonable Care**

The Insured shall:

- a) take all reasonable steps to safeguard the PPF against any insured event
- b) take all reasonable steps to prevent a claim from arising under this Policy

4. Duties and Obligations after Occurrence of an Insured Event

It is a condition precedent to the Company's liability under this Policy that, upon the happening of any event giving rise to or likely to give rise to a claim under this Policy:

- a) The Insured must simultaneously notify Us while registering the claim under the Vehicle Insurance policy for accidental damage to the Vehicle.
- b) the Insured shall not abandon the Insured Vehicle nor take any steps to rectify/remedy the damage before the same has been approved by the Company or any of its representatives and appointees, and
- c) the Insured shall within 7 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 sought from the Company, and
- d) the Insured shall expeditiously provide the Company and its representatives and appointees with all the information, assistance, records and documentation that they might reasonably require, and
- e) the Insured shall allow the Company and its representatives and appointees to inspect the Insured vehicle or any other material items, as per 'the Right to Inspect' Clause.

*Note: Waiver of conditions (a) and (c) may be considered by the Company at its absolute discretion, in extreme cases of hardship where it is proved to the satisfaction of the Company that under the circumstances in which the Insured was placed, it was not possible for the Insured or any other person claiming on his/her behalf to give notice or file claim within the prescribed time limit. The decision of the Company shall be final and binding on the Insured.

5. Claim Settlement Process

i. Claim Intimation

In the event of a claim arising out of an Insured Event covered under this Policy, the Insured shall transport the Insured Vehicle to any authorized service centre, for its inspection and repair at the earliest. The event shall be intimated, in writing, to the Company immediately of its occurrence. The Insured then shall arrange for the following at the direction of the Company:

- a) All reasonable information, assistance and proofs in connection with any claim hereunder including but not restricted to service booklets, owner's manual etc.
- b) Submit duly signed completed claim form.
- c) Copy of Insurance Policy
- d) Original documents, indicating the purchase/invoice price of the installed PPF on the vehicle.
- e) Manufacturer's warranty certificate (wherever required).
- f) Documents confirming the breakup of the total cost incurred for the repair/ replacement of PPF.
- g) Claim assessment report confirming admissibility of claim under Own Damage Section of the Motor Vehicle Policy. In case claim assessment report is not available with the insured (when underlying OD policy is not with Digit), then final settlement bill explicitly specifying the panels replaced/ labor charges and policy details/claim details.
- h) Any other document as may be appropriately applicable against the claim registered.

ii. Basis of Claim Settlement

In the event of a claim, the basis of claim settlement shall be as follows:

- a) The company's liability will be established only after:
 - 1. verifying the details of the event and accident confirming that underlying OD claim has been reported and admissible under own damage section of the vehicle insurance policy for the accidental damage, unless specifically agreed otherwise by Us and
 - 2. receiving and reviewing all necessary bills & settlement documents related to the reported accident to ensure that repairs have been carried out or replacements have taken place for the own damage claim where PPF has been installed, as the case may be.

- b) In case the claim is not settled within the specified timelines, then the claimant is entitled for interest as per the rate specified in prevailing regulatory provisions.
- c) For any claim related query, intimation of claim and submission of claim related documents, insured person may contact the company through:
 - i. Website: www.godigit.com
 - ii. Toll Free: 1800 258 5956
 - iii. E-mail: Hello@godigit.com
 - iv. Courier: Go Digit Claims Team, Corporate office: Atlantis, 95, 4th B Cross Road, Koramangala Industrial Layout, 5th Block, Bengaluru, Karnataka 560095

6. Right to Inspect

If required by the Company, its representatives and appointees, including a loss assessor or a surveyor appointed in that behalf, shall in case of any loss or any circumstances that have given rise to a claim under the Policy be permitted at all reasonable times to examine into the circumstances of such loss. The Insured shall, on being required so to do by the Company, produce receipts, documents relating to the loss or such circumstance in his possession and furnish copies of or extracts from them as may be required by the Company so far as they relate to such claims or will in any way assist the Company to ascertain in the correctness thereof or the liability of the Company under the Policy.

7. Contribution

If at the time of any loss or damage there shall be any other subsisting insurance against such loss or damage, the Company shall not be liable for more than its rateable proportion of such loss or damage.

8. Subrogation

The Insured and any claimant under this Policy shall at the expenses of the Company do and concur in doing and permit to be done all such acts and things as may be necessary or reasonably required by the Company for the purpose of enforcing any rights and remedies or of obtaining relief or indemnity from other parties to which the Company shall be or would become entitled or Subrogated upon the Company 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 the insured's indemnification by the Company.

9. Fraud

If any claim under this Policy shall be in any respect fraudulent or if any fraudulent means are used by you or anyone acting on your behalf to obtain any benefit under this Policy, all benefits, premiums and rights under the Policy shall be forfeited.

10. Mis-representation or non-disclosure of material facts

We will not be liable to consider/admit the liability in any form under the Policy if any Mis-representation or Non-disclosure of material facts noted at the time of claim or otherwise, whether by You or anyone acting on behalf of You & Policy shall be void ab-initio without any premium refund.

11. Salvage

All salvage and recoveries resulting from claims on covered insured vehicle will be the property of the Company.

12. Transfer of Ownership of the Vehicle

This policy will expire in case of transfer of the vehicle (having covered installed PPF) and also cannot be transferred to another vehicle. However, if specifically agreed by the Company and specially endorsed/mentioned in the Policy Schedule/ Certificate of Insurance, this Policy will continue to be in effect in case of transfer of the Insured vehicle by the Insured, for the balance Policy Period and Sum Insured. However, such transfer must be intimated to the Company within 30 days, in writing. This transfer shall be made by the Company only upon the receipt of a specific request from the Insured along with the consent of the transferee in writing under recoded delivery to the Company, with the details of the transfer of the Insured vehicle and the date of transfer of the Insured Vehicle.

13.Cancellation**i. Cancellation By The Insured**

The insurer shall refund the premium if there is no claim(s) made during the policy period -

- a) **For Annual Policy:** refund proportion premium for unexpired policy period, if the term of the policy is upto one year.
- b) **For Long Term Policies:** refund premium for the unexpired policy period, in respect of policy with the term more than one year and the risk coverage for such policy years has not commenced.

ii. Cancellation By the Company

Policy may be cancelled by the Company on the grounds of established fraud, by giving minimum notice of 7 (seven) days to the insured. There will be any refund if policy is cancelled on the grounds of established fraud.

14.Notices

All notices, declarations and communications in relation to this Policy are to be sent to the Company in writing to the address specified in the Policy Schedule/ Certificate of Insurance or in electronic format.

15.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.

16.Entire Contract

This Policy constitutes the complete contract of insurance. No change or alteration in this Policy shall be valid or effective unless approved in writing by the Company, whose approval shall be evidenced by an endorsement on the Policy.

17.Governing Law

Any dispute concerning the interpretation of the terms, conditions limitations and/ or exclusions contained herein is understood and agreed to by both the Insured and the Company to be subject to Indian law. Each party agrees to submit to the jurisdiction of any court of competent jurisdiction within India and to comply with all requirements necessary to give such court the jurisdiction. All matters arising hereunder shall be determined in accordance with the laws of India.

6. 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 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.

If Insured person is not satisfied with the redressal of grievance through one of the above methods, insured person may contact the grievance officer at grievance@godigit.com

For updated details of grievance officer, kindly refer the link: → [Click Here](#)

Grievance may also be lodged at IRDAI Integrated Grievance Management System- <https://irdai.gov.in/igms1>

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.

(Note: Address and contact number of Council for Insurance Ombudsman).

Address and contact number of Council for Insurance Ombudsman

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.	Gujarat, Dadra & Nagar Haveli, Daman and Diu.

	Tel.: 079 - 25501201/02/05/06 Email: bimalokpal.ahmedabad@cioins.co.in	
BENGALURU	Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No. 57-27-N-19 Ground Floor, 19/19, 24th Main Road, JP Nagar, 1st 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	West Bengal, Sikkim, Andaman & Nicobar Islands.

	Email: bimalokpal.kolkata@cioins.co.in	
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, Bulandshahr, 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.

For updated details of Ombudsman details, request to please check Council of Insurance Ombudsmen website available on <https://www.cioins.co.in/Ombudsman>

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