

Bajaj Allianz General Insurance Company Limited

Corporate Identity Number: U66010PN2000PLC015329. IRDA Registration No.113

Regd. Office & Head Office: GE Plaza, Airport Road, Yerwada, Pune - 411 006

Unified Package Insurance Scheme (UPIS)

Policy Wordings

UIN- IRDAN113P0001V01201718

PREAMBLE

WHEREAS the Insured named in the Schedule has applied to Bajaj Allianz General Insurance Company Limited (hereinafter called "the Company") for the insurance herein contained, the Company agrees to indemnify the loss, if any, incurred by the Insured subject to:

- a) Any proposal or other information supplied by Insured or by Banks/Governmental agencies, for and on behalf of the Insured.
- b) disclosing all facts and circumstances known to the Insured that are material to the assessment of the risks insured hereby, and
- c) forming the basis of this insurance, and the Insured or Banks/Governmental agencies having paid on behalf of the Insured and the Company having received the premium on or before the due date thereof to grant such insurance to the Insured subject to the terms, conditions, provisions and exclusions set out in the Schedule, this Policy Terms and Conditions or as contained in any endorsement that may be issued.

A. DEFINITIONS

1. **Accident, Accidental** – An accident means sudden, unforeseen and involuntary event caused by external, visible and violent means.
2. **Actual Yield (AY)** means yield per hectare of the insured Crop calculated on the basis of requisite number of Crop Cutting Experiments (CCEs) in the insured season for defined area and within Policy Period under Policy.
3. **Automatic Weather Stations (AWS)** means a device installed in the insurance unit [declared by concerned State Government] to measure and record the weather parameters like rainfall, Minimum/Maximum temperature, relative humidity, wind speed, solar radiation etc. This device mainly have sensors and data logger to automatically record the weather parameters and transmit the data electronically in the data providers server.
4. **Authorized data provider** means an agency which has installed the reference or backup weather station and has been authorized to provide data for the same for the purpose of calculation and settlement of the claim.
5. **Automatic Rain Guage (ARG)** means a device installed in the insurance unit to measure the rainfall in the given time frame.
6. **Backup weather station** means the secondary weather station as defined in the schedule, the weather data of which will act as a substitute for the missing data, if any, of the reference weather station.
7. **Bank** means an entity licensed as a Bank under Banking Regulation Act, 1949 and permitted by the Reserve Bank of India [RBI] to carry on banking business in India. Bank shall also include Cooperative Banks, RRBS or any Financial Institution disbursing/granting credit to the agriculture sector as per relevant guidelines of NABARD/RBI.
8. **Beneficiary** means any person(s) whose crop/property is (are) insured under agricultural or non- agricultural activity.
9. **Company** means the Bajaj Allianz General Insurance Company Limited.
10. **Condition Precedent** shall mean a Policy term or condition upon which the Insurer's liability under the Policy is conditional upon.
11. **Crop or Crops** means the variety of seed and/ or plants the Insured cultivates as mentioned in the Policy Schedule. Cropped has to be construed accordingly.
12. **Crop Cutting Experiments (CCE)** means Crop experiments which consist of identification and marking of experimental plots of a specified size and shape in a selected field on the principle of random sampling, threshing the produce and recording of the harvested produce for determining the percentage recovery of dry grains or the marketable form of the produce.
13. **Cropping Plan** means a detailed statement forming part of this Policy showing the insurance cover selected by the Insured, the field number or name, the Crop and variety planted, the respective area planted, the sowing date, the emergence date, the average yield per 5 hectare, the value per ton of harvested Crop and the Sum Insured of this crop.
14. **Deductible** The Insured shall first bear an agreed percentage of the value at risk at the time of loss at the insured location as specified in the schedule on each and every loss caused by any insured peril and the Company shall only be liable for any amount in excess of the said loss amount.
15. **Defined Area or Unit area of insurance** means specified area for the Notified Crop under the Policy.
16. **Disclosure to information norm:** The Policy shall be void and all premium paid hereon shall be forfeited to the Company, in the event of misrepresentation, mis-description or non-disclosure of any material fact.
17. **Endorsement** means any alteration made to the Policy which has been agreed to by the company in writing.

18. **Exclusion** means the damages/perils/properties/contingencies which are not covered under the Policy and the company has no liability in the event of loss occurrence.
19. **Exit Index** shall mean the Observed Weather Index level at which the Insured becomes eligible for full Sum Insured under the Policy.
20. **Financial Institution** shall have the same meaning assigned to the term under section 45 I of the Reserve Bank of India Act, 1934 and shall include a Non-Banking Financial Company as defined under section 45 I of the Reserve Bank of India Act, 1934.
21. **Harvesting** means the process of cutting the insured Crops or part thereof from an insured Field for sale or use on the insured farm.
22. **Humidity** shall mean Relative Humidity
23. **Injury/ Bodily 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.
24. **Insured Person/ Policy Holder** means person(s) whose name specifically appears as such in Policy Schedule.
25. **Insured Area** means the area under cultivation which is covered under the Policy and notified by State Government.
26. **Insured Vehicle** means the Agriculture Tractor and trailers insured by the Company under standard Motor Insurance Policy.
27. **Level of Indemnity** means the percentage of indemnity as specified in the Policy Schedule.
28. **Limit of Indemnity** means the amount stated in the Schedule against each Cover.
29. **Loanee Farmers** are those Farmers for whom agricultural loans have been sanctioned or disbursed by Bank / Financial Institutions.
30. **Major Crops** are those crops which are grown by majority of the farmers in the notified area in the season.
31. **Medical Practitioner/ Physician/Doctor:** A Medical Practitioner is a person who holds a valid registration from the Medical Council of any State or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of license.
32. **Minimum Support Price** means a minimum price for a Notified Crop, decided by the Government with a view to ensuring remunerative prices to the farmers for their produce on the basis of the Commission for Agricultural Costs and Prices (CACP) recommendations.
33. **Nominee** is the person selected by the Policy Holder to receive the benefit in case of death of the insured thus giving a valid discharge to the insurer on settlement of claim under an insurance Policy.
34. **Notified Crop** is the Crop which is selected for the insured season in the defined area by the insurer or selected by the Government authority for the crop insurance with the consent of the insurer and which is specifically mentioned in the Policy Schedule. It shall include
 - a) Food Crops (Cereal, Millets, Pulses)
 - b) Oil seeds
 - c) Annual Commercial /Annual Horticultural Crops
35. **Notional Payment** shall mean the agreed amount, which shall be paid as compensation to the Insured per unit deviation in Weather Index.
36. **Notional Threshold Yield** means the threshold yield (TY) or guaranteed yield for a Crop shall be the average yield multiplied by level of indemnity. Average yield will be calculated on the basis of the data for the preceding 7 years excluding two year(s) in which a natural calamity such as drought, floods etc. may have been declared by the concerned Government/Authority [not more than two such calamity years shall be excluded from calculation of threshold yield, even in instances where declared calamity years are more than two during the preceding seven years]. However; it may be ensured that at least 5 years yield data is available for calculating the threshold yield.
37. **Observed Weather Index** shall mean the observed value of the Weather Index against the weather parameters covered in the Policy, which observed value will be used for determining the Strike Index or the Exit Index, during the Period of Insurance.
38. **Policy** means the Policy booklet, the Schedule, any Extension and applicable endorsements under the Policy. The Policy contains details of the extent of cover available to the Insured, the exclusions under the cover and the Policy Terms and Conditions of the issue of the Policy.
39. **Policy Period** shall mean the period commencing from the Policy Start Date and time and ending on Policy End Date and time as specifically appearing in the Policy Schedule.
40. **Proposal** means any signed proposal in form of letters and declarations, written statements and any information in addition hereto supplied to the Company by or on behalf of the Insured.
41. **Rainfall** shall mean Deficit rainfall , excess rainfall , unseasonal rainfall ,rainy days , dry spells , dry days
42. **Reference unit Area (RUA)** means the smallest possible area notified by the State Government for operation of the Weather Based Crop Insurance scheme
43. **Reference Weather Station** shall mean the weather station engaged in the study or monitoring of weather or atmospheric observations as stated in Schedule I, the data from which will be used for the purpose of determining the Observed Weather Index, Exit Index and Strike Index for payment of compensation and claim settlement under this Policy.

44. **Schedule** means the schedule, and any annexure to it, attached to and forming part of this Policy.
45. **SLCCCI** means State Level Coordination Committee on Crop Insurance as per Pradhan Mantri Fasal Bima Yojana.
46. **Strike Index** shall mean the Observed Weather Index level at which the Insured becomes eligible for claim payment.
47. **Sum Insured** means the amount as stated in the Policy Schedule which shall represent the Company's maximum liability for any and all claims incurred under the Policy,
48. **Temperature** shall mean High Temperature (heat) ,low temperature
49. **Term Sheet** shall mean the document attached to the Policy Schedule which contains the weather index along with the Strike Point, Exit Point, Notional Payment and which shall be the basis for claim settlement.
50. **Terrorism** - An act of terrorism means an act or series of acts, including but not limited to the use of force or violence and/or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with any organisation(s) or government(s), or unlawful associations, recognized under Unlawful Activities (Prevention) Amendment Act, 2008 or any other related and applicable national or state legislation formulated to combat unlawful and terrorist activities in the nation for the time being in force, committed for political, religious, ideological or similar purposes including the intention to influence any government and/or to put the public or any section of the public in fear for such purposes. Theft as defined in Section 378 of Indian Penal Code shall mean whoever, intending to take dishonestly any movable property out of the possession of any person without that person's consent, moves that property in order to such taking, is said to commit theft.
51. **Theft** means whoever, intending to take dishonestly any movable property out of the possession of any person without that person's consent, moves that property in order to such taking, is said to commit theft.
52. **Unit** for Agriculture purpose shall mean standard measureable unit of land area [declared by concerned State Government] and for Non-Agricultural purpose shall mean a specific place or location where a business activity or an event is being carried out and for which insurance is being sought.
53. **Weather Index** shall mean the mathematical construct on the basis of which Policy is issued. Weather Index would be constructed with any one or a combination of the following weather parameters (this will be specified for each individual Policy under section "Coverage Details" in Schedule):
 - Rainfall (Deficit /Excess/Unseasonal/Dry Spells/Rainy Days/Dry Days)
 - Temperature (High/Low)
 - Relative Humidity
 - Wind speed
 - A combination of the above
54. **Wind** shall mean Wind Speed
55. **You, Your, Yourself, Your Family** named in the schedule means the person or persons that We insure as set out in the Schedule.
56. **We, Our, Ours, Us, the Company** means the Bajaj Allianz General Insurance Company Limited.

B. SCOPE OF COVER

SECTION 1: CROP INSURANCE

This section is mandatory. The Insured Person have to choose either of the following covers provided under this section:

- I. Pradhan Mantri Fasal Bima Yojana (PMFBY)
- II. Restructured Weather Based Crop Insurance Scheme (RWBCIS)

I. PRADHAN MANTRI FASAL BIMA YOJANA (PMFBY)

The Company hereby agrees, subject to the terms, conditions and exclusions herein contained, or otherwise expressed herein, to indemnify the Insured Person for crop Loss to the Insured Crop due to the occurrence of the following risks during the period of Insurance.

a) **Prevented sowing/planting risk**

Loss caused to the Insured if the Insured area is prevented from sowing/planting due to deficit rainfall or adverse seasonal conditions subject to the following conditions

- 1) Crops in More than 75% of the area sown in an Insurance Unit are affected at an early stage leading to total loss of crop or the farmer not in a position to either sow or transplant the crop
- 2) The Company has been informed about the issuance of the notification of the scheme and details of Insurance coverage from Banks before the commencement of normal sowing process.
- 3) The provision is invoked by the State Government through notification based on proxy indicators like Rainfall data, other weather data, satellite imagery and crop condition reports by District level state Government official, media reports and area sown data released by state Government. The state Government would notify crop wise and agro –climatic zone or district wise cut off dates by which this provision could be invoked.

- 4) Only those farmers would be eligible for financial support under this cover who have paid the premium/the premium has been debited by the Bank to the Insured's account and received by the Company of such Premium on or before the due date in accordance with cut off dates as specified by SLCCCI for that particular Crop and season.
 - 5) The cover is available to Major Crops only
- b) **Sowing to Harvesting:** Cover for loss of Yield due to non-preventable risks namely Drought, Dry spells, Flood, Inundation , pests and diseases , landslides, natural fire and lightening, storm, hailstorm, cyclone, Typhoon, tempest, hurricane and tornado. Only those farmers who have paid the premium /the premium has been debited by the Bank to the Insured's account and received by the Company on or before the due date in accordance with cut off dates as specified by SLCCCI for that particular Crop and season would be eligible for coverage.
- c) **Post-Harvest Losses :** Assessment of Yield loss on Individual plot basis caused to Crops in case of occurrence of cyclone, cyclonic rains and unseasonal rains in Insurance Unit resulting in damage to harvested crop lying in the field in " cut and spread" condition upto a maximum of 14 days from harvesting for the sole purpose of drying.
- d) **Localized Calamities**
Loss or damage to notified crops resulting from occurrence of identified localized risks of Hailstorm, Landslide, and Inundation affecting part of a notified unit or isolated farms in the notified unit provided
- 1) the maximum liability is limited to proportionate Sum Insured of damaged Crop's area based on the proportion of cost of inputs incurred during the sowing period to the sum Insured.
 - 2) Only those farmers who have paid the premium /the premium has been debited by the Bank to the Insured's account before occurrence of the insured peril, and received by the Company on or before the due date in accordance with cut off dates as specified by SLCCCI for that particular Crop and season would be eligible for coverage under the Policy

OPTION TO CHANGE CROP NAME

- 1) The Insured Covered on Voluntarily basis can avail of the insurance cover before actual sowing/planting based on advance Crop planning
- 2) For any reason if the insured changes the Crop planned earlier, he should intimate the change to the Company at least 30 days before the cutoff date for buying insurance or sowing through financial institution /channel partner /insurance intermediary /directly as the case may be with difference of premium payable, if any, accompanied by sowing certificate issued by concerned village /sub district level official of the state. Excess premium if any will be refunded by the company
- 3) Loanee farmers can also change the name of the Insured Crop from the original Crops submitted in the loan application but such changes should be submitted in writing to the concerned bank branch well in advance so that the proposed Crops are insured .
- 4) Changes from non-notified Crops to notified Crops without submitting the sowing certificate is not permissible

EXCLUSIONS

The Company shall not be liable to make any payment under this section of the Policy in connection with or in respect of any expenses whatsoever incurred arising out of damage or loss to insured Crop arising from:

- 1) The burning of the Crop by order of any public authority.
- 2) Malicious, willful act or gross negligence of the Insured or any of his representative(s) or employee(s).
- 3) Any peril not specifically covered under this section of the Policy.
- 4) Other preventable risks.
- 5) Consequential loss whether or not caused by an insured peril.
- 6) Theft / clandestine sale of the Insured Crop
- 7) Intentional destruction of the Insured Crop
- 8) Action of birds and animals including grazed and destroyed by Domestic and/or wild animals
- 9) Loss occurring prior to commencement of risk.
- 10) 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
- 11) Ionizing radiations or contaminations by radioactivity from any nuclear waste from the combustion of nuclear fuel or the radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.
directly or indirectly connected with or traceable to, war, invasion, act of foreign enemy, hostilities (whether war be declared or not) civil war, rebellion, revolution, insurrection, mutiny, tumult, military or usurped power, seizure, capture, arrests, restraints and detainment of all kinds or any consequences thereof.
- 12) Harvested Crops bundled and heaped at the place before Threshing,

SUM INSURED

- 1) Sum Insured per hectare for both loanee and non-loanee farmers will be same and equal to the Scale of Finance as decided by the District Level Technical Committee, and would be pre-declared by SLCCCI and notified. No other calculation of Scale of Finance will be applicable.
- 2) Sum Insured for individual farmer will be same and equal to the Scale of Finance per hectare multiplied by the area of the notified Crop proposed by the farmer/Bank for Insurance. Area under cultivation shall always be expressed in Hectare.
- 3) Sum insured for irrigated and un-irrigated areas may be opted separately.

ASSESSMENT OF CLAIMS

Widespread Calamities – If the “Actual Yield” per hectare of the insured Crop for the Defined Area (on the basis of requisite number of Crop cutting experiments) in the insured season, falls short of the specified “Threshold Yield”, all the insured farmers growing that Crop in the defined area are deemed to have suffered shortfall in their yield.

CLAIM SHALL BE CALCULATED AS PER THE FOLLOWING FORMULA

Threshold – Actual Yield/ Threshold Yield X Sum Insured

Where Threshold yield for a Crop in a notified insurance unit is the average yield of past seven years (excluding a maximum of two calamity year(s) as notified by the state Government /UT multiplied by the applicable indemnity level for that Crop

A) ON ACCOUNT PAYMENT OF CLAIMS DUE TO MID SEASON ADVERSITY

All notified Insurance units would be eligible for “ON ACCOUNT” payment in case of adverse seasonal conditions viz floods, prolonged dry spells, severe drought etc., provided:

- 1) If the expected yield of the affected Crops during the season is less than 50% of the threshold yield.
- 2) State government has invoked this provision through damage notification based on proxy indicators such as rain fall data, other weather data, / satellite imagery Crops condition reports by district level state Government officials supported by media reports.
If adversity occurs within 15 days before the normal Harvest time, this provision will not be invoked.
- 3) The company may decide the quantum of likely losses and the amount of on account payment based on joint survey of the company and state government officials.
- 4) The amount of the on account payment shall be up to a maximum 25 percent of likely claims and would be subject to adjustment against the claims assessed on yield basis.

LOSS ASSESSMENT PROCEDURE FOR ON ACCOUNT PAYMENT

- 1) Joint committee of State Government and the Company for assessment of Crops damage, has to be formed and notified before start of the Crop season by the SLCCCI for each district.
- 2) This Joint Committee shall decide the eligibility for on-account payment based on the weather data (available AWS notified by the Government)/long term average rainfall data/satellite imagery supported by estimated yield losses at notified Insurance unit level. Loss intimation order has to be issued within 7 days from the adverse seasonal event.
- 3) Based on the above report, a joint inspection of the affected area may be done by Insurance Company for ground truthing with State government officials and arrive at the extent of loss.
- 4) Information/ Services of Mahalanobis National Crop Forecast Centre (MNCFC) may also be utilized for determination of extent of loss for On-Account payout.
- 5) If the expected loss of the affected Crop is more than 50% of the normal yield for the Notified Insurance Unit, on-account payment would be payable.
- 6) On-account payment would be calculated as per following formula:

$$\frac{(\text{Threshold Yield} - \text{Estimated Yield})}{\text{Threshold Yield}} \times \text{Sum Insured} \times 25\%$$

TIME FRAME FOR LOSS ASSESSMENT AND SUBMISSION OF REPORT

- 1) An order will be issued by State Government defining eligibility of on account payment with details of damaged Insurance Units within 7 days from the occurrence of adverse seasonal event.
- 2) Loss assessment report at the affected insurance unit level has to be completed by the joint committee within 15 days from occurrence of the adverse seasonal event.

CONDITIONS

- 1) Mere disbursement/ sanction of loan without receipt/ debit of premium and receipt of the same by the Company before the notification of calamity would not make a farmer eligible for the claim.
- 2) The On-account payment would be disbursed by the insurance company only after the receipt of Government share of premium subsidy.
- 3) On- account payment would be paid to all eligible insured farmers within one month of the notification invoking this provision by the State Government and subject to receipt of loss report from State Government.

- 4) These claims would be adjusted from the end season area approach yield based claims.

B) LOSS ASSESSMENT PROCEDURE FOR PREVENTED /FAILED SOWING AND PREVENTED PLANTING /GERMINATION CLAIMS

- 1) State Government would declare a Notified Insurance Unit as having suffered Prevented or Failed Sowing/ Planting conditions with approximate areas in percentage of the unit.
- 2) The Lump sum payout under this cover would be limited to 25% of the sum insured upon which the insurance cover under this section of the Policy shall stand terminated.

CONDITIONS

- 1) The cover will be available for Major Crops only.
- 2) Mere disbursement/ sanction of loan without receipt/ debit of premium and receipt of the same by the Company before the notification of calamity won't make a farmer eligible for claim.
- 3) The Company would disburse the claim within 30 days of the State's order / notification invoking the event of the insured risk provided the data on estimated area sown have been received from State Government.
- 4) The pay-out under the cover would be disbursed by the insurance company only after the receipt of Government share of premium subsidy.
- 5) Insurance Cover would terminate for the affected Crop in a Notified Insurance Unit once a claim under this section is invoked and the Affected Insurance Unit/ Crop would not be eligible for area yield based claim calculated at the end of the season.
- 6) This provision would be needed to be invoked within the cut-off date as notified by the state government, beyond which if invoked, no claim would be payable.
- 7) Once this provision is invoked, no fresh enrolment of farmers for the affected notified Crops and areas would be done.
- 8) Once exigency is invoked it applies to all the insured farmers in the Notified Insurance Unit for a given Crop, including for those whose Crop survived.

C) LOSS ASSESSMENT PROCEDURE FOR POST HARVEST LOSSES

TIME AND METHOD OF REPORTING THE LOSS/CLAIMS

- 1) Immediate intimation (within 48 hours) by the insured farmer to any one as detailed below.
- 2) Intimation must contain details of survey number-wise insured Crop and acreage affected.
- 3) Premium payment verification to be reported in next 48 hours by the farmer/Bank.

WHOM TO BE REPORTED (CHANNEL OF REPORTING)

- 1) Intimation may be given within 48 hours by farmer either directly to (i) the Company, (ii) concerned Bank, (iii) local agriculture department, government/district officials or (iv) through toll free number (*Centralized dedicated Toll Free Number for claim intimation/ intimations can be redirected to us through backend*) to the Company. First mode of intimation will be centralized Toll Free Number.
- 2) In absence of such a facility, the report can be given to banks or Government officials and the same would be forwarded/ intimated to the Company immediately. The banks would verify the insured details like Crop insured, sum insured, premium debited and date of debit and details of remittance/RTGS before sending the same to the Company

DOCUMENTARY EVIDENCE REQUIRED FOR CLAIM ASSESSMENT

- 1) Duly filled Claim form along with all relevant documents is requisite for payment of claims. However, if information on all the columns is not readily available, semi-filled form may be sent to the Company and later within 7 days of the loss, filled form may be submitted.
- 2) Local Newspaper cutting and any other available evidence to substantiate occurrence of loss event and severity of the loss, if any.

APPOINTMENT OF LOSS ASSESSORS BY THE INSURANCE COMPANY

- 1) The loss assessors would be appointed by the Company for assessment of losses due to the operations of Post-harvest losses (Yield Insurance).
- 2) The loss would be jointly assessed by a team comprising of loss assessor appointed by the Company, block level agriculture officer and the concerned farmer.

TIME FRAME FOR LOSS ASSESSMENT AND SUBMISSION OF REPORT

- 1) Appointment of loss assessor within 48 hours from receipt of information
- 2) Loss assessment to be completed within next 10 days
- 3) Claim settlement/ payment to the farmers to be completed in next 15 days (subject to receipt of premium) from loss assessment report.

- 4) If the affected area under a notified Crop is more than 25% of the total insured area in a notified insurance unit, all the eligible farmers (who have taken insurance for the notified Crop, which has been damaged, and informed about occurrence of calamity in the farm within the stipulated time) in the notified insurance unit would be deemed to have suffered post-harvest loss and would be eligible for financial support. Percentage of loss would be arrived at by requisite percentage of sample survey (as decided the Joint Committee) of affected area by the insurance company.
- 5) If the claim on area approach (based on CCEs) is more than the claims of the Post-Harvest losses, the difference claims will be payable to affected farmers. If claim for Post-Harvest is higher, no recovery will be applicable from affected farmers.

CONDITIONS

- 1) Mere disbursement/ sanction of loan without receipt/ debit of premium before the occurrence of insured peril would not make a farmer eligible for claim.
- 2) When affected area is limited up to 25% of total insured area in the notified insurance unit, the losses of eligible farmers would be assessed individually provided they have paid premium and the Company has received the premium prior to occurrence of insurance peril.
- 3) The pay-out under the cover would be disbursed by the Company only after the receipt of Government share of premium subsidy.
- 4) The Company would disburse the claim, if payable within 30 days of receipt of report on survey of loss.
- 5) If end of season claim based on the yield data is more than the claim under this cover, the balance would be paid at the end of the season under widespread claims.
- 6) Farmers getting enrolled or whose premium is debited and received by the Company after occurrence of insurance peril would not be eligible for financial support under this cover.

D) LOSS ASSESSMENT PROCEDURE FOR LOCALIZED RISKS

TIME AND METHOD OF REPORTING THE LOSS/CLAIMS

- 1) Immediate intimation (within 48 hours) by the insured farmer to any one as detailed in (iv.a) below.
- 2) Intimation must contain details of survey number-wise insured Crop and acreage affected.
- 3) Premium payment verification to be reported in next 48 hours by the farmer/ Bank and duly received by the Company.
- 4) Mobile application may be used for reporting incidents of localized risks for intimation of events including longitude/ latitude details and pictures using NRSC Mobile App.

WHOM TO BE REPORTED (CHANNEL OF REPORTING)

- 1) Intimation may be given within 48 hours by farmer either directly to the Company, concerned bank, local agriculture department, government /district officials or through toll free number (*Centralized dedicated Toll Free Number for claim intimation/ intimations can be redirected to us through backend*) to the Company. First mode of intimation will be centralized Toll Free Number.
- 2) In absence of such a facility, the report can be given to banks or Government officials and the same would be forwarded/ intimated to the Company immediately. The banks would verify the insured details like Crop insured, sum insured, premium debited and date of debit before sending the same to us

DOCUMENTARY EVIDENCE REQUIRED FOR CLAIM ASSESSMENT

- 1) Duly filled Claim form along with all relevant documents is requisite for payment of claims. However, if information on all the columns is not readily available, semi-filled form may be sent to the Company and later within 7 days of the loss, filled form may be submitted.
- 2) Evidence of Crop loss through capturing pictures using mobile application if any.
- 3) Local Newspaper cutting and any other available evidence to substantiate occurrence of loss event and severity of the loss, if any.

APPOINTMENT OF LOSS ASSESSORS BY THE INSURANCE COMPANY

- 1) The loss assessors would be appointed by the Company for assessment of losses due to the operations of Post-harvest losses (Yield Insurance).
- 2) The loss would be jointly assessed by a team comprising of loss assessor appointed by the Company, block level agriculture officer and the concerned farmer.

TIME FRAME FOR LOSS ASSESSMENT AND SUBMISSION OF REPORT

- 1) Appointment of loss assessor within 48 hours from receipt of information
- 2) Loss assessment to be completed within next 10 days
- 3) Claim settlement/ payment to the farmers to be completed in next 15 days (subject to receipt of premium) from loss assessment report.
- 4) Maximum liability would be limited to proportionate Sum Insured of damaged Cropped area.

- 5) Maximum pay-out under this provision would be in proportion to cost of inputs, incurred up to the occurrence of insured peril, subject to the sum insured. If the payout under area approach (based on CCEs data) is more than localized losses, the higher claims of two will be payable to insured farmers.
- 6) If the affected area under a notified Crop is more than 25% of the total insured area in a notified insurance unit, all the eligible farmers (who have taken insurance for the notified Crop, which has been damaged, and informed about occurrence of calamity in the farm within the stipulated time) in the notified Insurance Unit would be deemed to have suffered localized loss and would be eligible for financial support. Percentage of loss would be arrived at by requisite percentage of sample survey (as decided the Joint Committee) of affected area by the Company.

CONDITIONS

- 1) Mere disbursement/sanction of loan without receipt/debit of premium and receipt by the Company before the occurrence of insured peril would not make a farmer eligible for claim.
- 2) When affected area is limited up to 25% of total insured area in the notified insurance unit, the losses of eligible farmers would be assessed individually provided they have paid and the Company has received the premium prior to occurrence of insurance peril.
- 3) The pay-out under the cover would be disbursed by the Company only after the receipt of Government share of premium subsidy.
- 4) The Company would disburse the claim, if payable within 30 days of receipt of report on survey of loss.
- 5) If, at the end of season, based on the yield data, claim is more than the claim under this cover, the balance would be paid at the end of the season under widespread claims.
- 6) Farmers getting enrolled or whose premium is debited after occurrence of insurance peril would not be eligible for financial support under this cover.
- 7) Bank would remit farmers premium with farmers list within 7 days of intimation of loss under this section, if not sent earlier.

PROCEDURE FOR SETTLEMENT OF CLAIMS TO THE FARMERS

- 1) Upfront premium subsidy from Government of India and concerned State/UT, should have been received for the season, by the Company to enable them to settle the claim.
- 2) In case of widespread calamity (end of season claims), once yield data is received from State Government as per the cut-off-dates decided, claims will be worked out as per Declarations/ proposals received from banks /channel partners / insurance intermediaries for each notified area and Crops and claims will be approved by Competent Authority of the Company i.e. Implementing Agency (IA).
- 3) In case of farmers covered through Banks, claims shall be released only through electronic transfer, followed by hard copy containing claim particulars, to individual Bank branches/ nodal Banks; and Bank branches/ PACs at grass root level, is expected to credit into accounts of individual farmers within a week of receipt of claim amount from the Company and shall provide a certificate to the Company along with list of farmers benefited. Bank Branch should also display particulars of beneficiaries on notice board and also upload the same on Crop insurance portal.
- 4) In case of farmers covered on voluntary basis through agents/intermediaries, payable claims will directly credited to the concerned bank accounts of insured farmers and details of the claims may also intimated to them. The list of beneficiaries may also be uploaded on the Crop insurance portal immediately.
- 5) In case of claims under prevented/failed sowing, localized calamities, postharvest losses; the Company will process the claims after assessment and shall release the claims as per procedure given in the relevant sections above.
- 6) The Company shall resolve all the grievances of the insured farmers and other stakeholders in the shortest possible time.
- 7) Disputed claims / sub-standard claims, if any will be referred within three months of claim disbursement through SLCCCI/ State Government to DAC& FW for consideration and decision of DAC & FW in case of any interpretation of provisions of scheme or disputes will be binding on State Government / Insurance Company / Banks and the farmers.

IMPORTANT CONDITIONS /CLAUSES APPLICABLE FOR COVERAGE OF RISKS

- 1) The Company should have received the premium for coverage either from Bank, channel partner, insurance intermediary or directly. Any loss in transit due to negligence by these agencies or non-remittance of premium by these agencies, the concerned Bank/ intermediaries shall be liable for payment of claims.
- 2) In case of any substantial misreporting by nodal Bank /branch in case of compulsory farmers coverage, the concerned Bank only shall be liable for such mis-reporting.
- 3) Mere sanctioning/ disbursement of Crop loans and submission of proposals/ declarations and remittance of premium by farmer/ Bank, without explicit intent to raise the Crop, does not constitute acceptance of risk by the Company.
- 4) Acreage discrepancy
 - a) Wherever the 'acreage discrepancy' is likely, the acreage insured at IU level shall be compared with average planted acreage of past three years, and the difference is treated as 'excess' insurance coverage after taking into account sown area data of the Revenue authority.
 - b) Sum insured is scaled down in the proportionate ratio the average of three years' actual planted acreage bears to the insured acreage for the given Crop.

- c) Claims shall be calculated on the scaled down sum insured
- d) Premium (farmer share and Central and State Government Subsidy) shall be refunded back to Government of India for the portion of sum insured scaled down.

STANDARD TERMS AND CONDITIONS APPLICABLE TO PMFBY

1) Incontestability and Duty of Disclosure:

The Policy shall be null and void and no benefit shall be payable in the event of untrue or incorrect statements, misrepresentation, mis-description or on non-disclosure in any material particular in the proposal form, personal statement, declaration and connected documents, or any material information having been withheld, or a claim being fraudulent or any fraudulent means or devices being used by the Insured or any one acting on his behalf to obtain any benefit under this Policy.

2) Reasonable Care:

The Insured shall take all reasonable steps to safeguard the interests of the Insured against loss or damage that may give rise to a claim.

3) Observance of Policy Terms and Conditions:

The due observance and fulfillment 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 shall be a condition precedent to any liability of the Company to make any payment under this Policy.

4) Material change:

The Insured shall immediately notify the Company by in writing of any material change in the risk, and cause at his own expense such additional precautions to be taken as circumstances may require to ensure safe operation of the Insured items or trade or business practices thereby containing the circumstances that may give rise to the claim, and the Company may adjust the scope of cover and / or premium if necessary, accordingly.

5) Records to be maintained:

The Insured shall keep an accurate record containing all relevant particulars and shall allow the Company to inspect such record. The Insured shall within one month after the expiry of the Insurance Policy furnish such information as the Company may require.

6) No constructive Notice:

Any knowledge or information of any circumstances or condition in connection with the Insured in possession of any official of the Company shall not be the notice to or be held to bind or prejudicially affect the Company notwithstanding subsequent acceptance of any premium.

7) Notice of charge etc.:

The Company shall not be bound to take notice or be affected by any notice of any trust, charge, lien, assignment or other dealing with or relating to this Policy, but the payment by the Company to the Insured or his legal representative of any compensation or benefit under the Policy shall in all cases be an effectual discharge to the Company.

8) Special Provisions:

Any special provisions subject to which this Policy has been entered into and endorsed in the Policy or in any separate instrument shall be deemed to be part of this Policy and shall have effect accordingly.

9) Duties of the Insured on occurrence of loss:

On the occurrence of any loss, within the scope of cover under this section of the Policy the Insured shall:

- a. In case of localized risk, the insured farmer would give intimation to the company within 48 hours of the event through the concerned financial institution / Bank / authorized agent or directly.
- b. Allow the Surveyor or any agent of the Company to inspect the lost/damaged properties premises /goods or any other material items, as per 'the Right to Inspect' Clause as provided in this section of the Policy.
- c. Assist and not hinder or prevent the Company or any of its agents in pursuance of their duties under 'Rights of the Company on Happening of Loss or Damage' Clause as provided in this section of the Policy.
- d. Not abandon the insured Property/item / premises, nor take any steps to rectify/remedy the damage before the same has been approved by the Company or any of its agents or the Surveyor.

If the Insured does not comply with the provisions of this Clause or other obligations cast upon the Insured under this section of the Policy, in terms of the other clauses referred to herein or in terms of the other clauses in any of the Policy documents, all benefits under this section of the Policy shall be forfeited, at the option of the Company.

10) Rights of the Company on happening of loss or damage:

On the happening of loss or damage, or circumstances that have given rise to a claim under this section of the Policy, the Company may:

- a. Enter and/or take possession of the Property and / or Crop Cultivated, where the loss or damage has happened
- b. Take possession of or require to be delivered to it any property of the Insured in the building or on the premises at the time of the loss or damage
- c. Keep possession of any such property and examine, sort, arrange, remove or other wise deal with the same; and,
- d. Sell any such property or dispose of the same for account of whom it may concern. The powers conferred by this condition shall be exercisable by the Company at any time until notice in writing is given by the Insured that he makes no claim under this section of the Policy, or if any claim is made, until such claim is finally determined or withdrawn. The Company shall not by any act done in the exercise or purported exercise of its powers hereunder incur any liability to the Insured or diminish its rights to rely upon any of the conditions of this section of the Policy in answer to any claim.

If the Insured or any person on his behalf shall not comply with the requirement of the Company, or shall hinder or obstruct the Company in the exercise of the powers hereunder, all benefits under this section of the Policy shall be forfeited at the option of the Company.

11) Right to inspect:

If required by the Company, an agent/representative of the Company 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 the claim to the Insured 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 all books of accounts, receipts, documents relating to or containing entries relating to the loss or such circumstance in his possession and furnish copies of or extracts from such of 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.

12) Position after a claim:

The Insured shall not be entitled to abandon any Insured item/property whether the Company has taken possession of the same or not. As from the day of receipt of the claim amount by the Insured as determined by the Company to be fit and proper, the Sum Insured for the remainder of the Period of Insurance shall stand reduced by the amount of the compensation.

13) Subrogation:

In the event of payment under this Policy, the Company shall be subrogated to all the Insured's rights or recovery thereof against any person or organization, and the Insured shall execute and deliver instruments and papers necessary to secure such rights.

The Insured and any claimant under this Policy shall at the expense of the Company do and concur in doing and permit to be done, all such acts and things as may be necessary or required by the Company, before or after Insured's indemnification, in enforcing or endorsing any rights or remedies, or of obtaining relief or indemnity, to which the Company shall be or would become entitled or subrogated.

II. RESTRUCTURED WEATHER BASED CROP INSURANCE SCHEME

The Company hereby agrees, subject to the terms, conditions and exclusions herein contained, or otherwise expressed herein, to compensate the Insured for financial losses on account of anticipated crop loss resulting from adverse weather perils of (i) Rainfall, (ii) Temperature [High temperature (heat) or Low temperature, (iii) Wind Speed, (iv) Relative humidity or (v) combination of these weather perils in (i) to (iv) and any other peril as notified by the Government under Restructured weather Based Crop Insurance Scheme to

- a) Food Crops (cereals ,Millets and pulses)
- b) Oilseeds
- c) Commercial /Horticultural Crops

,provided that the observed weather index deviates from the weather index stated in the Term Sheet of the Policy at the geographical location/Unit stated in the Policy during the Policy Period. The compensation shall be arrived at based on the weather index formula stated in the Term Sheet and subject to a maximum of Sum Insured stated in this section of the Policy,

EXCLUSIONS

- i. The Company shall not be liable to make any payment under this section of the Policy to the Insured in connection with or in respect of any expenses whatsoever incurred by any Insured arising out of deviation in Weather Index resulting from:
 - a. Ionizing radiations or contaminations by radioactivity from any nuclear waste from the combustion of nuclear fuel; or
 - b. The radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.

- ii. The company shall not be liable to make any payment under this section of the Policy to the insured in case of loss or damage to crops , property or events arising directly out of the insured AOG perils such as Storm, Cyclone, Tempest, Typhoon, Hurricane, Tornado, Flood, Inundation, Earthquake, Tsunami , Hailstorm .However in the event the insured AOG peril has caused any deviation in the Weather Index as mentioned in the term sheet of this Policy, the company shall be liable to provide compensation as per terms stated in the term sheet.
- iii. The Company shall not be liable to make any payment under this section of the Policy in connection with or in respect of any expenses whatsoever incurred by any Insured in connection with or in respect of any event leading to diminished agricultural or non-agricultural output/yield, or increased operational costs, howsoever caused, other than on account of a deviation in weather parameters as stated in the Schedule within a specific geographical location and specified time period.
- iv. Riots, Strike, Malicious Damage, Acts of Terrorism, Loss or 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 such action taken in respect of any act of terrorism shall be excluded, unless it is proved by the Insured to the satisfaction of the Company that such loss or damage, cost or expenses of whatsoever nature is not directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to such action taken in respect of any act of Terrorism.
- v. War, war-like operations, act of foreign enemy, invasion of Indian territory or any part thereof, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, civil commotion, military or usurped power, or loot or pillage in connection with the foregoing, seizure, capture, confiscation, arrests, restraints and detainment by order of any governments or any other authority, unless it is proved by the Insured to the satisfaction of the Company that such loss or damage or contingency or cost or expenses of whatsoever nature are not directly or indirectly caused by, resulting from or in connection with any war, war-like operations, act of foreign enemy, invasion of Indian territory or any part thereof, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection, civil commotion, military or usurped power, or loot or pillage in connection with the foregoing, seizure, capture, confiscation, arrests, restraints and detainment by order of any governments or any other authority.
- vi. In case of cover granted for agricultural activities, insurance is not valid, if the land is not cultivated during the Policy Period.
- vii. Consequential losses of any kind, by the way of loss of profit, business interruption, market loss or otherwise and/or any other legal liability of any kind.

CLAIMS ASSESSMENT & SETTLEMENT

1. The Company shall be responsible for all claims arising out of covered adverse weather perils and shall settle claims strictly as per the Operation Guidelines of the Reconstructed Weather Based Crop Insurance Scheme issued by Department of Agriculture, Cooperation and Farmers Welfare, Ministry of Agriculture & Farmers Welfare, Krishi Bhawan, New Delhi-110001 or any amendments thereof issued by the respective state Government ["notification"]. In case of covered adverse weather perils all the insured cultivators growing the notified crop in a RUA shall be deemed to have suffered the same level of adverse weather condition & same proportion of crop loss and become eligible for the same rate of claims.
2. Claims shall be assessed only on the basis of weather data recorded by the notified RWSs or BWS, as the case may be, and the claims process shall commence once the weather data is received by the company. The weather data providers should ensure that the exposure conditions of AWS, their standardization / calibration, maintenance and weather data transmission meet the guidelines issued by the Government.
3. Claims processing shall be strictly as per the insurance term sheets, payout structure and the Scheme provisions. Claims shall be worked out as per the Insurance Declarations received from the Nodal Branches/ Nodal Banks for each notified area and crop.
4. All standard Claims shall be processed and paid within 45 days from the end of the risk period. Further verification & collection of relevant documents / papers, if required, in respect of affected farmers shall be completed within a period of 30 days from payment of standard claims of season.
5. The Company shall verify about the insured farmers, crops & areas before approaching the Government for release of Subsidy. Cases of area discrepancies under RWBCIS will be settled as per procedure, and such cases should be settled within a maximum period of three months from closing of crop season.
6. Disputed claims / sub-standard claims, if any, shall be referred through State Government to DAC&FW for disposal by the company and the decision or any interpretation of DAC&FW of provisions of scheme or disputes shall be binding on all concerned.
7. If observed index value falls below or above, (as the case may be) the notified trigger value, then claims per unit shall be calculated using following formula depending upon index definition:

Claims per Unit = (Difference between Observed & Notified index values) X Notional Payout

Overall claims will be 'Claims per Unit' X 'Number of units'

Acreage discrepancy

- a) Wherever the 'acreage discrepancy' is likely, the acreage insured at IU level shall be compared with average planted acreage of past three years, and the difference is treated as 'excess' insurance coverage after taking into account sown area data of the Revenue authority.
- b) Sum insured is scaled down in the proportionate ratio the average of three years' actual planted acreage bears to the insured acreage for the given Crop.
- c) Claims shall be calculated on the scaled down sum insured
- d) Premium (farmer share and Central and State Government Subsidy) shall be refunded back to Government of India for the portion of sum insured scaled down

Important Conditions / Clauses Applicable for Coverage of Risks

1. In case of any substantial misreporting by bank branch / cooperative nodal bank / PACS particularly of compulsory farmers coverage, the concerned bank only shall be liable for such misreporting.
2. Insured / applicant must have insurable interest. Mere sanctioning / disbursement of crop loans and submission of proposals / declarations and remittance of premium by farmer/ bank, without explicit intent to raise the crop, does not constitute acceptance of risk by the company.

GENERAL CONDITIONS APPLICABLE TO RWBCIS:

1. Limitation Period

In no case whatsoever shall the Company be liable for any loss or damage after the expiration of 12 months from the date on which the claim under this Policy is made if the Insured fails to produce or deliver such documents or details as may be required by the Company in connection with the claim, unless the claim is the subject of pending action or arbitration as mentioned in "Arbitration and Legal Action:" clause.

2. Legal Ownership

During the Period of Insurance, the Insured shall possess all legal ownership rights with regard to the Property and / or Crop Cultivated. The Insured shall provide to the Company such title deeds and other documents as may be required by the Company for verification of his/her legal ownership rights over the Property and / or Crop Cultivated.

3. Agreed Bank Clause

It is hereby declared and agreed:-

- (a) That upon any monies becoming payable under this section of the Policy the same shall be paid by the Company to the Bank and such part of any monies so paid by the Company as may relate to the interests of other parties Insured hereunder shall be received by the Bank as Agents for such other parties Insured.
- (b) That the receipts by the Bank shall be complete discharge for the Company there of and shall be binding on all the parties Insured hereunder.
- (c) That a copy of all notices and communication sent to the insured shall also be mandatorily sent to the Bank.
- (d) That any adjustment, settlement, compromise or reference to arbitration in connection with any dispute between the Company and the Insured or any of them arising under or in connection with this Policy if made by the Bank shall be valid and binding on all parties Insured hereunder but not so as to impair rights of the Bank to recover the full amount of any claim it may have on other parties Insured hereunder.
- (e) It is further agreed that whenever the Company shall pay the Bank any sum in respect of claim for loss or damage under this Policy and shall claim that as to the Mortgagor or owner no liability therefore existed, the Company shall become legally subrogated to all the rights of the Bank to the extent of such payments but not so as to impair the right of the Bank to recover the full amount of any claim it may have on such Mortgagor or Owner or any other party or parties Insured hereunder or from any securities or funds available.

4. Assignment Clause

"It is hereby declared and agreed that:

- i. from the Policy Start Date/Risk inception Date, the monies payable by the Company to the Insured and all rights, title, benefits and interest of the Insured under this Policy stand assigned in favour of the " Bank / Financial Institution" as named in the Schedule of this Policy
- ii. upon any monies becoming payable by the Company under this Policy towards claim, the same shall be paid [not exceeding the Sum Insured] by the Company to the "Bank/Financial Institution" as named in Policy Schedule to this Policy without any reference / notice to the Insured, but not exceeding the Principal Outstanding as defined under the Policy. In the event of any monies payable by the Company under claim in this Policy exceeding the Principal Outstanding due to the Bank from the Insured, the Company shall pay to the Insured, the balance of such monies as exceeding the Principal Outstanding; the receipt of such monies in the manner aforesaid by the Bank/Financial Institution as named in the Schedule of this Policy and the Insured shall completely discharge the Company from all liability under the claim under the Policy and shall be binding on the Insured and all the legal heirs, executors, administrators, successors or legal representatives of the Insured, as the case may be.
- iii.

- iv. any adjustment, settlement, compromise or reference to arbitration in connection with any dispute between the Company and the Insured or any of them arising under or in connection with this Policy if made by the Bank/Financier shall be valid and binding on all parties Insured hereunder but not so as to impair rights of the Bank/Financier to recover the full amount of any claim it may have on other parties insured hereunder”.

STANDARD TERMS AND CONDITIONS APPLICABLE TO RWBCIS:

1. Incontestability and Duty of Disclosure:

The Policy shall be null and void and no benefit shall be payable in the event of untrue or incorrect statements, misrepresentation, mis-description or non-disclosure of any material particular in the proposal form, personal statement, declaration and connected documents, or any material information having been withheld, or a claim being fraudulent or any fraudulent means or devices being used by the Insured or any one acting on his behalf to obtain any benefit under this Policy.

2. Observance of Policy Terms and Conditions:

The due observance and fulfillment 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 shall be a condition precedent to any liability of the Company to make any payment under this Policy.

3. Material change:

The Insured shall immediately notify the Company in writing of any material change in the risk, and cause at his own expense such additional precautions to be taken as circumstances may require to ensure safe operation of the Insured items or trade or business practices thereby containing the circumstances that may give rise to the claim, and the Company may adjust the scope of cover and / or premium if necessary, accordingly.

4. Records to be maintained:

The Insured shall keep an accurate record containing all relevant particulars and shall allow the Company to inspect such record. The Insured shall within one month after the expiry of the Insurance Policy furnish such information as the Company may require.

5. No constructive Notice:

Any knowledge or information of any circumstances or condition in connection with the Insured in possession of any official of the Company shall not be the notice to or be held to bind or prejudicially affect the Company notwithstanding subsequent acceptance of any premium.

6. Notice of charge etc.:

The Company shall not be bound to take notice or be affected by any notice of any trust, charge, lien, assignment or other dealing with or relating to this Policy [except the Bank/Financial Institution], but the payment by the Company to the Insured or his/her legal representative of any compensation or benefit under the Policy shall in all cases be an effectual discharge to the Company.

7. Special Provisions:

Any special provisions subject to which this Policy has been entered into and endorsed in the Policy or in any separate instrument shall be deemed to be part of this Policy and shall have effect accordingly.

8. Overriding effect:

The Policy Terms and Conditions contained herein of the Schedule shall be deemed to form part of the Policy and shall be read as if they are specifically incorporated herein; however in case of any inconsistency of any of these term and condition with the scope of cover contained in Part II of the Schedule, then the term(s) and condition(s) contained herein shall be read in consonance with the scope of cover/ Policy Terms and Conditions contained in the Schedule and these Policy Terms and Conditions shall be deemed to be modified accordingly or superseded by the Schedule, in case of inconsistency being irreconcilable.

9. Electronic Transactions:

The Insured agrees to adhere to and comply with all such Policy Terms and Conditions as the Company may prescribe from time to time, and hereby agrees and confirms that all transactions effected by or through facilities for conducting remote transactions including the Internet, World Wide Web, electronic data interchange, call centers, teleservice operations (whether voice, video, data or combination thereof) or by means of electronic, computer, automated machines network or through other means of telecommunication, established by or on behalf of the Company, for and in respect of the Policy or its terms, or the Company's other products and services, shall constitute legally binding and valid transactions when done in adherence to and in compliance with the Company's Policy Terms and Conditions for such facilities, as may be prescribed from time to time. The Insured agrees that the Company may exchange, share or part with any information to or with other Bajaj Allianz Group Companies or any other person in connection with the Policy, as may be determined by the Company and shall not hold the Company liable for such use application.

10. Right to inspect:

If required by the Company, an agent/representative of the Company 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 the claim to the Insured be permitted by the Insured 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 all books of accounts, receipts, documents relating to or

containing entries relating to the loss or such circumstance in his possession and furnish copies of or extracts from such of 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.

SECTION 2: PERSONAL ACCIDENT INSURANCE

Coverage under this section will be as per Pradhan Mantri Suraksha Bima Yojana (PMSBY).

On the happening of any insured event as provided for hereunder arising during the Policy Period and notified as prescribed, the Company will make payment as but only up to the Sum Insured or Limit of Indemnity as specified below.

If the Insured Person shall sustain any Bodily Injury resulting solely and directly from Accident caused by outward, violent and visible means, then the company shall pay to the Insured the sum or sums hereinafter set forth that is to say:

- 1) In the event of Accidental Bodily Injury causing the Insured Person's Death within 12 months of the Accidental Bodily Injury being sustained, the Company will pay the sum Insured of Rs 2 Lakh (Two lakh). OR
- 2) In the event of Accidental Bodily Injury causing the Insured Person's Total and irrecoverable loss of both eyes or loss of use of both hands or feet or loss of sight of one eye and loss of use of hand or foot within 12 months of the Accidental Bodily Injury being sustained, the Company will the pay the Sum insured of Rs 2 Lakh (Two lakh). OR
- 3) In the event of Accidental Bodily Injury causing the Insured Person's Total and irrecoverable loss of sight of one eye, or loss of use of one hand or a foot, the Company will pay the sum Insured of Rs 1 Lakh (One lakh).

The Company's liability to make payment to the Insured Person for one or more of the events described at 1) to 3) above under this section is limited to the Total Sum Insured of Rs. 2 Lakhs (Rupees Two Lakhs).

The Insured Person agree that the Company shall deduct from the amount payable under 1) or 2), the amount (if any) the Company has already paid under 3), so that the Company's total payments under the Policy does not exceed the Total Sum Insured of Rs. 2 Lakhs (Rupees Two Lakh). However, if the Company become liable to make payment under 1) or 2), then the insurance cover provided under this section will cease as far as Insured Person is concerned.

EXCLUSIONS APPLICABLE TO SECTION 2

No indemnity is available hereunder and no payment will be made by the Company for any claim directly or indirectly caused by, based on, arising out of or howsoever attributable to any of the following:

1. Accidental Bodily Injury that the Insured Person meet with:
 - a) Through suicide, attempted suicide or self inflicted injury or illness.
 - b) While under the influence of liquor or drugs.
 - c) Arising or resulting from the Insured Person(s) committing any breach of law with criminal intent.
 - d) 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.
 - e) Whilst participating as the driver, co-driver or passenger of a motor vehicle during motor racing or trial runs.
 - f) As a result of any curative treatments or interventions that you carry out or have carried out on your body.
 - g) Arising out of your participation 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.
2. The Insured Person's consequential losses of any kind or your actual or alleged legal liability.
3. Any existing disability.
4. HIV (Human Immunodeficiency Virus) and/or any HIV related illness including AIDS (Acquired Immune Deficiency Syndrome) and/or mutant derivatives or variations thereof however caused.
5. Pregnancy, resulting childbirth, miscarriage, abortion, or complications arising out of any of these.

CLAIM PROCESS METHODOLOGY

1. Making a Claim

If the Insured Person meets with any Accidental Bodily Injury that may result in a claim, then as a condition precedent to the Company's liability:

- i. The Insured Person or someone claiming on Insured Person's behalf must inform the company in writing immediately and in any event within 30 days.
- ii. The Insured Person or someone claiming on Insured Person's behalf must promptly give the Company documentation and other information the Company ask for to investigate the claim or the Company's

obligation to make payment for it.

- iii. In event of Insured Person's death, someone claiming on Insured Person's behalf must inform the Company in writing immediately and send Us a copy of the post mortem report (if any) within 30 days.

*Note: Waiver of conditions (i) and (iii) may be considered in extreme cases of hardship where it is proved to the Company's satisfaction that under the circumstances in which the Insured Person was placed, it was not possible for the Insured Person or any other person to give notice or file claim within the prescribed time limit.

List of Claim documents:

a.) Death

- Duly Completed Claim Form signed by Nominee.
- Copy of address proof (Ration card or electricity bill copy).
- Photo identity proof
- Death Certificate.
- Original FIR / Panchanama / Inquest Panchanama.
- Post Mortem Report (only if conducted).
- Claim form with NEFT details & cancelled cheque duly signed by Insured
- Original Policy copy / Certificate of Insurance

b) Other Accidental Bodily Injuries

- Duly Completed Claim Form signed by the insured/ claimant.
- Disability Certificate from Civil Surgeon.
- Claim form with NEFT details & cancelled cheque duly signed by Insured
- Original Policy copy/ Certificate of Insurance.

2. Paying a claim

- i. The Insured Person agree that the Company need only make payment when the Insured Person or someone claiming on the Insured Person's behalf has provided the Company with necessary documentation and information.
- ii. The Company will make payment to the Insured Person or the Insured Person's Nominee. If there is no Nominee and the Insured Person is incapacitated or deceased, the Company will pay the Insured Person's heir, executor or validly appointed legal representative and any payment the Company makes in this way will be a complete and final discharge of the Company's liability to make payment.
- iii. On receipt of all the documents and on being satisfied with regard to the admissibility of the claim as per Policy Terms and Conditions, the Company shall offer a settlement of the claim to the Insured Person. Upon acceptance of an offer of settlement by the Insured Person, the payment of the amount due shall be made within 7 days from the date of acceptance of the offer by the Insured Person. The Company will settle the claim within thirty (30) days of the receipt of the last necessary document. In the cases of delay in the payment, the Company shall be liable to pay interest at a rate which is 2% above the bank rate prevalent at the beginning of the financial year in which the claim is reviewed by it.
- iv. If the Company for any reasons decides to reject the claim under the Policy the reasons regarding the rejection shall be communicated to the Insured Person in writing within 30 days of the receipt of documents. The Insured Person may take recourse to the Grievance Redressal procedure stated in the document.

TERMINATION OF COVER (Applicable to Section 2)

The accident cover for the Insured Person shall terminate on any of the following events and no benefit will be payable there under:

- i) On attaining age 70 years (age nearest birthday).
- ii) At the time of renewal, closure of account with the Bank or insufficiency of balance to keep the insurance in force.
- iii) In case a member is covered through more than one account and premium is received by the Insurance Company inadvertently, insurance cover will be restricted to one only and the premium shall be liable to be forfeited.
- iv) If the insurance cover is ceased due to any technical reasons such as insufficient balance on due date for renewal or due to any administrative issues, the same can be reinstated on receipt of full annual premium, subject to conditions that may be laid down. During this period, the risk cover will be suspended and reinstatement of risk cover will be at the sole discretion of the Insurance Company.

SECTION -3: LIFE INSURANCE

Coverage would be as per Pradhan Mantri Jeevan Jyoti Bima Yojna (PMJJBY).

Coverage to be extended by Life Insurers and hence this section is not applicable for Bajaj General Insurance Company Pvt. Ltd.

SECTION 4: BUILDING AND CONTENTS INSURANCE (FIRE & ALLIED PERILS)

The Company will indemnify the Insured Person in respect of loss of or damage to the Buildings / Contents whilst contained in the insured premises by any of the perils specified hereunder during the Policy Period. :

- 1) Fire, Lighting, Explosion of gas in domestic appliances,
- 2) Bursting and overflowing of water tanks, apparatus or pipes,
- 3) Aircraft or articles dropped therefrom,
- 4) Riot, Strike, or Malicious damage
- 5) Earthquake, (Fire and / or Shock) Subsidence and Landslide (including Rockslide) damage
- 6) Flood, inundation, storm, tempest, typhoon, hurricane, Tornado or Cyclone.
- 7) Impact damage
- 8) Bush Fire

The indemnity under this section will be based on fixed sum insured basis (maximum liability of the Company will be sum insured or actual loss whichever is less). The Sum Insured for this cover has been capped at:

	Sum Insured
A. Building	INR 50,000
B. Content	INR 20,000

EXCLUSIONS APPLICABLE TO SECTION 4

The Company shall not be liable in respect of:

1. Loss or damage by burglary and / or housebreaking or theft where any member of the Insured Person's family is concerned as principal or accessory.
2. Loss of or damage to articles of consumable nature
3. Loss of or damage to money, securities, stamps, stamp collections, bullion, livestock, motor vehicles and pedal cycles
4. Loss of or damage to deeds, bonds, bills of exchange, promissory notes, shares and stock certificates, business books, manuscripts, documents of any kind, unset precious stones and Jewellery and Valuables
5. Wilful act or gross negligence of the Insured Person or his representatives
6. Terrorism

CLAIM PROCESS METHODOLOGY

1. In case of damage due to above mentioned perils, the Insured Person shall intimate the Company via phone or in writing within 72 hours. For intimation, the Insured Person may choose to intimate directly to Bajaj Allianz General Insurance Co. Ltd or through financial institutions/same intermediary channel vide which they have availed insurance. It is necessary to share unique reference number of proposal cum declaration form while intimating the claims. No repair/reinstatement to be carried out until loss assessment procedure is completed.
2. The claim is admissible only if the premium is paid with in the cut off dates as mentioned in section 1 of PMFBY.
3. The Insured Person will extend full co-operation to the surveyor appointed by the Company and provide necessary documents to substantiate the loss. A claim form issued by the Company is also to be submitted.
4. Basis of claim settlement would be market value of the property on the date of loss. The Company gets the survey done of the site within 3 days of intimation. The Insured Person will submit the claim forms and other relevant documents to surveyor/ insurance company within 10 days of date of survey. Claims would be paid on assessment basis only within 20 days of survey and submission of all required documents. Payment would be done in the Insured Person's bank account directly through NEFT.

SECTION 5: AGRICULTURE PUMPSET INSURANCE

The Company will indemnify the Insured Person against loss or damage to Centrifugal pump sets (electrical and diesel) upto 10 Horsepower capacity, provided it is used for agricultural purposes only and owned by the Insured Person, caused due to any of the following perils :

- a) Fire & lightning
- b) Burglary (due to violent forcible entry provided the pump set is kept in a locked enclosure).
- c) Mechanical / electrical Breakdown
- d) Riot, Strike, malicious damage

The Sum Insured has been capped to Rs. 25,000. Agriculture pump sets of age upto 7 year can be covered under this section.

EXCLUSION APPLICABLE TO SECTION 5

- 1) Normal wear & tear, gradual deterioration due to atmospheric condition or otherwise.
- 2) Wilful act or gross negligence of the Insured Person or his representatives.
- 3) Faults existing at the time of commencement of insurance and known to the Insured Person or his representative.
- 4) Loss or damage for which the manufacturer or supplier of pump set is responsible either by law or under contract.
- 5) Cost of dismantling, transport to workshop and back as also cost of re-erection.
- 6) Loss due to floods

CLAIM PROCESS METHODOLOGY:

- 1) In case of damage due to above mentioned perils, the Insured Person shall intimate the Company via phone or in writing within 72 hours giving an indication as to the nature and extent of loss or damage. For intimation, Insured Person may choose to intimate directly to Bajaj Allianz General Insurance Company Ltd or through financial institutions/same intermediary channel vide which they have availed insurance. No repair/reinstatement to be carried out until loss assessment procedure is completed.
- 2) The claim is admissible only if the premium is paid with in the cut off dates as mentioned in section 1 of PMFBY.
- 3) The Insured Person will extend full co-operation to the surveyor appointed by the Company and provide necessary documents to substantiate the loss. A claim form issued by the company is also to be submitted.
- 4) Preserve the damaged or defective parts and make them available for inspection by an Official or Surveyor of The Company.
- 5) The Company gets the survey done of the site within 3 days of intimation. The Insured Person will submit the claim forms and other relevant documents to surveyor/ the Company within 10 days of date of survey. Claims would be paid on assessment basis only within 20 days of survey and submission of all required documents. Payment would be done in the Insured Person's bank account directly through NEFT.
- 6) Claims for repair of pump set will be on reinstatement value basis. The claim for total loss of pump will be on market value basis.
- 7) In case of burglary claims, FIR should be lodged immediately and its copy may be made available to the surveyor.

The liability of the Company under this Section in respect of any item of property sustaining damage for which indemnity is provided, shall cease if the same item is kept in operation without being repaired to the satisfaction of the Company.

Note: Submersible Pumps will be added in the cover subsequently.

SECTION 6: STUDENT SAFETY INSURANCE

On the happening of any insured event as provided for hereunder arising during the Policy Period, the Company will make payment up to the Sum Insured as specified below.

SUMMARY OF BENEFITS

Contingency	Amount of Compensation	Scope of Coverage
Part A: Accidental Death	Rs. 50000 (Parent/ Student)	If at any time during the currency of this Policy the parent / guardian/ student named in the schedule shall sustain any bodily injury resulting solely and directly from accident caused by external violent and visible means and if such injury shall within six calendar months of the occurrence be the sole and direct cause of death or total and irrecoverable loss of two limbs or two eyes or 100% Permanent Total Disablement (permanently totally and absolutely disable the parent /guardian from engaging in any employment or occupation of any description whatsoever) then the Company shall pay to the Insured Student or parent / guardian as the case may be the capital sum insured stated in the schedule.
Part B: Permanent Total Disablement	Rs. 50000 (Student)	If at any time during the currency of this Policy the Insured Student shall sustain any bodily injury resulting solely and directly from accident caused by external violent and visible means and if such injury shall within six calendar months of the occurrence be the sole and direct cause of death or total and irrecoverable loss of two limbs or two eyes or 100% Permanent Total Disablement (permanently totally and absolutely disable the Insured student from engaging in any employment or occupation of

		any description whatsoever) then the Company shall pay to the parent / guardian or insured Student as the case may be the capital sum insured stated in the schedule of benefits.
Part C: Loss of one Limb / Eye	Rs. 25000 (Student)	If at any time during the currency of this Policy the Insured Student shall sustain any bodily injury resulting solely and directly from accident caused by external violent and visible means resulting into irrecoverable loss of one limb or one eye, then the Company shall pay to the parent / guardian or Insured Student as the case may be 50% of the capital sum insured stated in the schedule of benefits. However, if such injury shall within six calendar months of the occurrence be the sole and direct cause of death, remaining 50% of the capital sum insured shall be payable to the parents/guardian as the case may be. In case of death of both student and the parent / guardian named in the schedule of the Policy resulting solely and directly from same accident caused by outward, violent and visible means, within six calendar months of its occurrence then the Company shall pay the legal heir of the parent / guardian sums stated in the schedule.
Part D: Accidental Hospitalisation	Rs. 5000 (Student)	Subject to the terms, conditions & exclusions the Company undertakes that if during the period stated in the Policy any insured student sustains any bodily injury through accident, and takes treatment at any Nursing Home/Hospital in India as an inpatient, the Company will pay to the Insured Person such expenses as are reasonably and necessarily incurred subject to the limits prescribed but not exceeding the Sum Insured during the period of insurance stated against that person in the Policy upon submission of supporting documents with bills.

Age Limit:

Students: 5-25 years,
Parents: 18-70 years

EXCLUSION APPLICABLE TO SECTION 6

1. Payment of compensation in respect of death or injury as a direct consequence of:
 - a. Committing or attempting suicide or intentional self-injury.
 - b. Being under the influence of intoxicating liquor or drugs.
 - c. Engaging in aviation other than travelling as a bonafide passenger in any duly licensed standard type of aircraft anywhere in the world.
 - d. Pregnancy or child birth.
 - e. Venereal disease or insanity.
 - f. Contracting any illness directly or indirectly arising from or attributable to HIV and/or any HIV related illness including AIDS and/or any mutant derivative or variation of HIV or AIDS.
2. Committing any breach of law with criminal intent.

CLAIM PROCESS METHODOLOGY
1. Making a Claim

If the Insured Person meets with any Accidental Bodily Injury that may result in a claim, then as a condition precedent to the Company's liability:

- i. The Insured Person or someone claiming on Insured Person's behalf must inform the Company in writing immediately and in any event within 30 days.
- ii. The Insured Person or someone claiming on Insured Person's behalf must promptly give the Company the documentation and other information the Company ask for to investigate the claim or the Company's obligation to make payment for it.
- iii. In event of the Insured Person's death, someone claiming on the Insured Person's behalf must inform the Company in writing immediately and send the Company a copy of the post mortem report (if any) within 30 days.

*Note: Waiver of conditions (i) and (iii) may be considered in extreme cases of hardship where it is proved to the Company's satisfaction that under the circumstances in which the Insured Person was placed, it was not possible for the Insured Person or any other person to give notice or file claim within the prescribed time limit.

List of Claim documents:
a.) Death

- Duly Completed Claim Form signed by Nominee of the Insured Person/ claimant
- Copy of address proof (Ration card or electricity bill copy).

- Photo identity proof
- Death Certificate.
- Police Report.
- Post Mortem Report (only if conducted).
- Claim form with NEFT details & cancelled cheque duly signed by Insured

b) Other Accidental Bodily Injuries

- Duly Completed Claim Form signed by insured/ claimant.
- Doctor's report, prescriptions and certificate confirming the nature and degree of disability
- Bills, Receipts and Prescriptions of Doctor for reimbursement hospitalization expenses
- Claim form with NEFT details & cancelled cheque duly signed by Insured

2. Paying a claim

- i. The Insured Person agree that the Company need only make payment when the Insured Person or someone claiming on the Insured Person's behalf has provided the Company with necessary documentation and information.
- ii. The Company will make payment to the Insured Person or the Insured Person's Nominee.
- iii. In case of death of Father or Mother, the Claim amount to be converted into fixed deposit in the name of student till attainment of 18 year of age
- iv. On receipt of all the documents and on being satisfied with regard to the admissibility of the claim as per Policy Terms and Conditions , the Company shall offer a settlement of the claim to the Insured Person. Upon acceptance of an offer of settlement by the Insured Person, the payment of the amount due shall be made within 7 days from the date of acceptance of the offer by the Insured Person. The Company will settle the claim within thirty (30) days of the receipt of the last necessary document. In the cases of delay in the payment, the Company shall be liable to pay interest at a rate which is 2% above the bank rate prevalent at the beginning of the financial year in which the claim is reviewed by it.
- v. If the Company for any reasons decides to reject the claim under the Policy the reasons regarding the rejection shall be communicated to the Insured Person in writing within 30 days of the receipt of documents. The Insured Person may take recourse to the Grievance Redressal procedure stated in the document.

SECTION 7: AGRICULTURAL TRACTOR INSURANCE

The Company will indemnify the Insured Person in respect of loss of or damage to the Agricultural Tractor as per the provisions. Terms, exceptions, conditions and endorsements of standard Motor Insurance Policy related to Agriculture tractor and trailers.

I. Loss of or damage to the Vehicle Insured

1. The Company will indemnify the Insured Person against loss or damage to the Tractor insured hereunder and/or its accessories whilst thereon:
 - i. by fire explosion, self-ignition or lightning
 - ii. by burglary, housebreaking, theft
 - iii. by riot and strike
 - iv. by earthquake (fire and shock damage)
 - v. by flood typhoon hurricane storm tempest inundation cyclone hailstorm frost
 - vi. by accidental external means
 - vii. by malicious act
 - viii. by terrorism activity
 - ix. whilst in transit by road, rail, inland waterway, lift, elevator, or air.
 - x. by landslide rockslide

Subject to a deduction for depreciation at the rates mentioned below in respect of parts replaced:

Parts	Depreciation
A. For all rubber/nylon/plastic parts, tyres, tubes, batteries and air bags	50%
B. For fibre glass components	30%
C. For all parts made of glass	Nil
D. Rate of depreciation for all other parts including wooden parts	Will be as per the following schedule

AGE OF VEHICLE	% OF DEPRECIATION
Not exceeding 6 months	Nil
Exceeding 6 months but not exceeding 1 year	5%
Exceeding 1 year but not exceeding 2 years	10%
Exceeding 2 years but not exceeding 3 years	15%
Exceeding 3 years but not exceeding 4 years	25%
Exceeding 4 years but not exceeding 5 years	35%
Exceeding 5 years but not exceeding 10 years	40%
Exceeding 10 years	50%

E. Rate of depreciation for Painting- In the case of painting, depreciation rate of 50% shall be applied only on the material cost of total painting charges. In case of a consolidated bill for painting charges, the material component shall be considered as 25% of the total painting charges for the purpose of applying the depreciation.

The age of the Tractor will be computed from the date of Registration.

The maximum liability of the Company, in any case, shall not exceed the Sum Insured shown in the Policy Schedule.

2. The Company shall not be liable to make any payment in respect of:
 - a) consequential loss, depreciation, wear and tear, mechanical or electrical breakdown, failures or breakages nor for damage caused by overloading or strain of the insured vehicle nor for loss of or damage to accessories by burglary, housebreaking or theft unless such insured vehicle is stolen at the same time.
 - b) damage to Tyres and Tubes unless the vehicle insured is damaged at the same time in which case the liability of the Company shall be limited to 50% of the cost of replacement.
 - c) any accidental loss or damage suffered whilst the insured or any person driving with the knowledge and consent of the insured is under the influence of intoxicating liquor or drugs.
3. In the event of the vehicle being disabled by reason of loss or damage covered under this section of the Policy the Company will bear the reasonable cost of protection and removal to the nearest repairer and re-delivery to the insured but not exceeding Rs.2500/- for Tractor in respect of any one accident.
4. The Insured Person may authorise the repair of the vehicle necessitated by loss or damage for which the Company may be liable under this section of the Policy provided that :-
 - 1) the estimated cost of such repair including replacements does not exceed Rs.500/-
 - 2) the Company is furnished forthwith with a detailed estimate of the cost of repairs ; and
 - 3) the Insured Person shall give the Company every assistance to see that such repair is necessary and the charges are reasonable.

SUM INSURED – INSURED’S DECLARED VALUE (IDV)

The Insured’s Declared Value (IDV) of the vehicle will be deemed to be the ‘SUM INSURED’ for the purpose of this section of the Policy which is fixed at the commencement of each Policy Period for the insured vehicle.

The IDV of the vehicle (and accessories if any fitted to the vehicle) is to be fixed on the basis of the manufacturer’s listed selling price of the brand and model as the insured vehicle at the commencement of insurance/renewal and adjusted for depreciation (as per schedule below).

The schedule of age-wise depreciation as shown below is applicable for the purpose of Total Loss/Constructive Total Loss (TL/CTL) claims only.

THE SCHEDULE OF DEPRECIATION FOR FIXING IDV OF THE VEHICLE

AGE OF VEHICLE	% OF DEPRECIATION
Not exceeding 6 months	5%
Exceeding 6 months but not exceeding 1 year	15%
Exceeding 1 year but not exceeding 2 years	20%
Exceeding 2 years but not exceeding 3 years	30%
Exceeding 3 years but not exceeding 4 years	40%
Exceeding 4 years but not exceeding 5 years	50%

IDV of vehicles beyond 5 years of age and of obsolete models of the vehicles (i.e. models which the manufacturers have discontinued to manufacture) is to be determined on the basis of an understanding between the insurer and the Insured Person.

IDV will be treated as the ‘Market Value’ throughout the Policy Period without any further depreciation for the purpose of Total Loss (TL)/ Constructive Total Loss (CTL) claims

The insured vehicle will be treated as a CTL if the aggregate cost of retrieval and / or repair of the vehicle, subject to Policy Terms and Conditions of the Policy, exceeds 75% of the IDV of the vehicle.

II. Liability To Third Parties

1. Subject to the limits of liability as laid down in the Schedule hereto the Company will indemnify the Insured Person in the event of an accident caused by or arising out of the use of the insured vehicle against all sums including claimant's cost and expenses which the Insured shall become legally liable to pay in respect of:
 - i) Death of or bodily injury to any person caused by or arising out of the use (including the loading and/or unloading) of the Insured Vehicle.
 - ii) Damage to property caused by the use (including the loading and/or unloading) of the Insured Vehicle.

PROVIDED ALWAYS THAT:-

- a. The Company shall not be liable in respect of death, injury damage caused or arising beyond the limits of any carriage way or thoroughfare in connection with the bringing of the load to the insured vehicle for loading thereon or the taking away of the load from the insured vehicle after unloading there from.
- b. Except so far as is necessary to meet the requirements of the Motor Vehicle Act the Company shall not be liable in respect of death or bodily injury to any person in the employment of the insured arising out of and in the course of such employment.
- c. Except so far as is necessary to meet the requirements of the Motor Vehicle Act in relation to the liability under the Workmen's Compensation Act 1923 the Company shall not be liable in respect of death or bodily injury to any person (other than a passenger carried by reason of or in pursuance of a contract of employment) being carried in or upon entering or mounting or alighting from the insured vehicle at the time of occurrence of the event out of which any claim arises.
- d. The Company shall not be liable in respect of damage to property belonging to or held in trust by or in the custody of the insured or a member of the insured's household or being conveyed by the insured vehicle.
- e. The Company shall not be liable in respect of damage to any bridge and/or viaduct and/or to any road and/or anything beneath by vibration or by the weight of the insured vehicle and/or load carried by the insured vehicle.
- f. Except so far as is necessary to meet the requirements of the Motor Vehicles Act the Company shall not be liable in respect of death and/or bodily injury to any person(s) who is/are not employee(s) of the insured and not being carried for hire or reward, other than owner of the goods or representative of the owner of goods being carried in or upon or entering or mounting or alighting from the insured vehicle described in the Schedule of this Policy.
2. The Company will pay all costs and expenses incurred with its written consent.
3. In terms of and subject to the limitations of the indemnity granted by this section to the insured the Company will indemnify any driver who is driving the insured vehicle on the insured's order or with insured's permission provided that such driver shall as though he/she were the insured observe fulfil and be subject to the terms exceptions and conditions of this Policy in so far as they apply.
4. The Company may at its own option
 - a. arrange for representation at any Inquest or Fatal Inquiry in respect of any death which may be the subject of indemnity under this section; and
 - b. undertake the defence of proceedings in any court of Law in respect of any act or alleged offence causing or relating to any event which may be the subject of indemnity under this section.
5. In the event of the death of any person entitled to indemnity under this section of the Policy the Company will in respect of the liability incurred by such person indemnify his/her personal representative(s) in terms of and subject to the limitations of this section of the Policy provided that such personal representative(s) shall as though they were the insured observe fulfill and be subject to the terms exceptions and conditions of this section of the Policy in so far as they apply.

III. Towing Disabled Vehicles

This section of the Policy shall be operative whilst the insured vehicle is being used for the purpose of towing any one disabled mechanically propelled vehicle and the indemnity provided by Section II of this Policy shall subject to its terms and limitations be extended to apply in respect of liability in connection with such towed vehicle; Provided always that

- a. such towed vehicle is not towed for reward
- b. the Company shall not be liable by reason of this section of this Policy in respect of damage to such towed vehicle or property being conveyed thereby.

IV. Personal Accident Cover for Owner-Driver

Subject otherwise to the terms exceptions conditions and limitations of this section of the Policy, the Company undertakes to pay compensation as per the following scale for bodily injury/ death sustained by the owner-driver of the vehicle in direct connection with the vehicle insured or whilst mounting into/dismounting from or traveling in the insured vehicle as a co-driver, caused by violent accidental external and visible means which independent of any other cause shall within six calendar months of such injury result in:

Nature of injury	Scale of compensation
(i) Death	100%
(ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye.	100%
(iii) Loss of one limb or sight of one eye	50%
(iii) Permanent total disablement from injuries other than named above.	100%

Provided always that

1. the compensation shall be payable under only one of the items (i) to (iv) above in respect of the owner-driver arising out of any one occurrence and the total liability of the insurer shall not in the aggregate exceed the sum of Rs. 1 lakh during any one period of insurance.
2. no compensation shall be payable in respect of death or bodily injury directly or indirectly wholly or in part arising or resulting from or traceable to (a) intentional self-injury suicide or attempted suicide physical defect or infirmity or (b) an accident happening whilst such person is under the influence of intoxicating liquor or drugs.
3. Such compensation shall be payable directly to the insured or to his/her legal representatives whose receipt shall be the full discharge in respect of the injury to the insured.

This cover is subject to

- a. the owner-driver is the registered owner of the vehicle insured herein;
- b. the owner-driver is the insured named in this Policy.
- c. the owner-driver holds an effective driving license, in accordance with the provisions of Rule 3 of the Central Motor Vehicles Rules, 1989, at the time of the accident

AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY

Nothing in this section of the Policy or any endorsement hereon shall affect the right of any person indemnified by this Policy or any other person to recover an amount under or by virtue of the provisions of the Motor Vehicles Act, 1988. But the insured shall repay to the Company all sums paid by the Company which the Company would not have been liable to pay but for the said provision.

EXCLUSION APPLICABLE TO SECTION 7

The Company shall not be liable under this section of the Policy in respect of

1. Any accidental loss or damage and/or liability caused sustained or incurred outside the geographical area.
2. Any claim arising out of any contractual liability.
3. Any accidental loss or damage and/or liability caused sustained or incurred whilst the vehicle insured herein is
 - a. Being used otherwise than in accordance with the Limitations of Use (tractor as well as trailer can only be used for agriculture purpose)
 - b. Being driven by or is for the purpose of being driven by him/her in the charge of any person other than a Driver as stated in the Driver's Clause.
4. Losses such as
 - a. Any accidental loss or damage to any property whatsoever or any loss or expense whatsoever resulting or arising there from or any consequential loss.
 - b. any liability of whatsoever nature directly or indirectly caused by or contributed to by or arising from ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. For the purposes of this exception combustion shall include any self-sustaining process of nuclear fission.
5. Any accidental loss or damage/liability directly or indirectly or proximately or remotely occasioned by, contributed to by or traceable to or arising out of or in connection with war, invasion, the act of foreign enemies, hostilities or war like operations (whether before or after declaration of war), civil war, mutiny, rebellion, military or usurped power or by any direct or indirect consequences of any of the said occurrences and in the event of any claim here under the insured shall prove that the accidental loss damage and/or liability arose independently of and was in no way connected with or occasioned by or contributed to by or traceable to any of the said occurrences or any consequences thereof and in default of such proof, the Company shall not be liable to make any payment in respect of such a claim

DEDUCTIBLE APPLICABLE TO SECTION 7

The Company shall not be liable for each and every claim under - I (loss of or damage to the vehicle insured) of this section of the Policy in respect of the deductible stated in the schedule.

CLAIM PROCESS METHODOLOGY

1. In case of damage due to above mentioned perils, the Insured Person shall intimate the Company via phone or in writing within 48 hours giving an indication as to the nature and extent of loss or damage. For intimation, the Insured Person may choose to intimate directly to the Company or through financial institutions/same

intermediary channel vide which they have availed insurance. No repair/reinstatement to be carried out until loss assessment procedure is completed.

2. The claim is admissible only if the premium is paid with in the cut off dates as mentioned in section 1 of PMFBY.
3. The Insured Person will extend full co-operation to the surveyor appointed by the Company and provide necessary documents to substantiate the loss. A claim form issued by the Company is also to be submitted.
4. Preserve the damaged or defective parts and make them available for inspection by an Official or Surveyor of the Company.
5. Basis of claim settlement under OD claim would be market value of the vehicle on the date of loss. The Company gets the survey done of the site within 3 days of intimation. The Insured Person will submit the claim forms and other relevant documents to surveyor/ the Company within 15 days of date of survey. Claims would be paid on assessment basis only within 30 days of survey and submission of all required documents. Payment would be done in the Insured Person's bank account directly through NEFT.
6. In case of burglary claims, FIR should be lodged immediately and its copy may be made available to the surveyor.

C. GENERAL EXCLUSIONS APPLICABLE TO ALL SECTIONS:

The Company shall not be liable in respect of:

- 1) Loss or damage, liability or expenses whether directly or indirectly, occasioned by happening through or arising from any consequences of war, invasion, act of foreign enemy, hostilities (whether war be declared or not) civil war, rebellion, revolution, insurrection, mutiny, military, or usurped power or civil commotion or loot or pillage in connection herewith.
- 2) Loss or damage caused by depreciation or wear and tear
- 3) Consequential loss of any kind or description.
- 4) a) Loss or damage directly or indirectly caused by or arising from or in consequence of or contributed to by nuclear weapons material.
b) This Insurance does not cover loss or damage directly or indirectly caused by or arising from or in consequence of or contributed to by ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. For the purpose of Condition 4 (b) only combustion shall include any self-sustaining process of nuclear fission.
- 5) **Excess/Deductible:**
The excess/deductible will be applicable as following:
 - Section 4 (Building and content): Nil
 - Section 5 (Pump set): First Rs. 100 of each and every claim
 - Section 7 (Tractor): 0.5% of IDV subject to a minimum of Rs. 2000 on Claim under Loss of or damage to the Vehicle Insured

D. GENERAL CONDITIONS APPLICABLE TO ALL SECTIONS

1. **Misdescription:** This Policy shall be void and all premium paid hereon shall be forfeited to the Company in the event of misrepresentation, misdescription or non-disclosure of any material particular.
2. **Reasonable Care:** The Insured shall take all reasonable steps to safeguard the property insured against any loss or damage. The Insured shall exercise reasonable care that only competent employees are employed and shall take all reasonable precautions to prevent all accidents and shall comply with all statutory or other regulations.
3. **Fraud:** If any claim under this Policy shall in any respect be fraudulent or if any fraudulent means or devices are used by the Insured or any one acting on the Insured's behalf to obtain any benefit under this Policy, all benefits under the Policy shall be forfeited.
4. **Contribution:** In the event of any loss damage liability or expenses covered by this Policy there shall be any other insurance covering the same loss damage liability or expenses, whether effected by the Insured or not this Policy shall pay only so much of the excess of such loss damage liability or expenses as is not recoverable under such other insurance subject always to the limitations of this Policy.
5. **Indemnity:** The Company may at its option reinstate/replace or repair the property or premises lost or damaged or any part thereof instead of paying the amount of the loss or damage or may join with any other insurer in so doing but the Company shall not be bound to reinstate exactly or completely but only as circumstances permit and in reasonably sufficient manner and in no case shall the Company be bound to expend more in reinstatement than it would have cost to reinstate such property as it was at the time of occurrence of such loss or damage and not more than the Sum Insured by the Company thereon.

6. Policy Renewal:

The Company shall not be bound to accept any renewal premium nor give notice that the renewal is due. Every renewal premium (which shall be paid and accepted in respect of this Policy) shall be so paid and accepted upon the distinct understanding that no alteration has taken place in the facts contained in the proposal or declaration herein before mentioned and that nothing is known to the Insured that may result to enhance the risk of the Company under the guarantee hereby given.

7. Cancellation/ termination:

(a) Under normal circumstances, the Company will not cancel the Policy except for reasons of misrepresentation, fraud, non-disclosure of material facts, non-cooperation of the Insured or if any false statement, or declaration is made or used.

(b) Cancellation condition applicable to the Policy in case **PMFBY is opted under Section 1: Crop Insurance:**

- i. The Company may at any time cancel this Policy without assigning any reasons by giving at least seven days written notice in writing by Registered post Acknowledgment Due post to the Insured Person at his last known address in which case the Company shall be liable to repay on demand a rateable proportion of the premium for the unexpired term from the date of the cancellation.
- ii. The Insured Person may also give at least seven days notice in writing, to the Company, for the cancellation of this Policy, in which case the Company shall from the date of receipt of notice cancel the Policy and refund the premium for the period this Policy has been in force as per the short period refund grid:

PERIOD ON RISK	RATE OF PREMIUM REFUNDED
Upto 15 days	50% of premium
Upto 30 days	25% of premium
Exceeding 30 days	Nil

Upon making any refund of premium under this Policy in accordance with the Policy Terms and Conditions hereof, the cover and Company's liability in respect of the Insured shall forthwith terminate.

Notwithstanding anything contained herein or otherwise stated, no refunds of premium shall be made where any claim has been lodged with the Company or any benefit has been availed by the Insured Person/ admitted by the Company under the Policy.

(c) Cancellation condition applicable to the Policy in case **RWBCIS is opted under Section 1: Crop Insurance**

- i. The Company may at any time, cancel this Policy, by giving 15 days notice in writing by Registered post to the Insured at his last known address. In such an event, the company shall refund to the insured full premium in respect of those sections of this Policy for which the risks are yet to commence. For the avoidance of doubt, no cancellation will be allowed for those sections of risks which have already expired and/or are already in force as on date of request for cancellation and the company shall remain liable to make benefit payments, if applicable, to the insured in respect of such sections.
- ii. The Insured may also give 15 days notice in writing, to the company, for the cancellation of this Policy. In such case, the insured shall be entitled to a refund of seventy five percent (75%) premium in respect of those sections of the Policy for which the risk are yet to commence. For the avoidance of doubt, no cancellation will be allowed for those sections which have already expired and/or are already in force as on date of request for cancellation and the company shall remain liable to make benefit payments, if applicable, to the insured in respect of such sections.

8. Policy Disputes

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 such dispute to a Court of competent jurisdiction and to comply with all requirements necessary to give such Court the jurisdiction. All matters arising hereunder shall be determined in accordance with the law and practice of such Court.

9. Arbitration and Reconciliation:

- a. 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 decision of a sole arbitrator in writing by the parties 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 the arbitrators comprising of two arbitrators, one appointed by each of the parties to the dispute/difference and the third arbitrator to be appointed by such two arbitrators and arbitration shall be conducted in English under and in accordance with the provisions of the Arbitration

and Conciliation Act, 1996. The law of the arbitration will be Indian law, and the seat of the arbitration and venue for all hearings shall be Pune.

- b. It is clearly agreed and understood that no difference or dispute shall be referable to arbitration as herein before provided, if the Company has disputed or not accepted liability under or in respect of claim under the Policy.
- c. 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.
- d. It is also hereby further expressly agreed and declared that if the Company shall disclaim liability to the Insured for any claim hereunder and such claim shall not, within 12 calendar months from the date of such disclaimer have been made the subject matter of a suit or proceeding before a Court of law or any other competent statutory forum/tribunal, then all benefits under the Policy shall be forfeited and the rights of Insured shall stand extinguished and the liability of the Company shall also stand discharged.
- e. If these arbitration provisions are held to be invalid, then all such disputes or differences shall be referred to the exclusive jurisdiction of the Indian Courts.

10. Grievance Redressal Mechanism:

Welcome to Bajaj Allianz and Thank You for choosing us as your insurer.

Please read your Policy and schedule.

The Policy and Policy Schedule set out the terms of your contract with us. Please read your Policy and Policy Schedule carefully to ensure that the cover meets your needs.

We do our best to ensure that our customers are delighted with the service they receive from Bajaj Allianz. If you are dissatisfied we would like to inform you that we have a procedure for resolving issues. Please include your Policy number in any communication. This will help us deal with the issue more efficiently. If you don't have it, please call our Branch office.

Initially, we suggest you contact the Branch Manager/ Regional Manager of the local office which has issued the Policy. The address and telephone number will be available in the Policy. Naturally, we hope the issue can be resolved to your satisfaction at the earlier stage itself. But if you feel dissatisfied with the suggested resolution of the issue after contacting the local office, please e-mail or write to:

Bajaj Allianz General Insurance Co. Ltd

GE Plaza, Airport Road

Yerawada, Pune 411006

E-mail: customercare@bajajallianz.co.in

Call : 1800-225858 (free calls from BSNL/MTNL lines only)

1800-1025858 (free calls from Bharti users – mobile /landline) or020-30305858

Grievance Redressal Cell for Senior Citizens

Senior Citizen Cellfor Insured Person who are Senior Citizens

'Good things come with time' and so for our customers who are above 60 years of age we have created special cell to address any health insurance related query. Our senior citizen customers can reach us through the below dedicated channels to enable us to service them promptly

Health toll free number: 1800-103-2529

Exclusive Email address:seniorcitizen@bajajallianz.co.in

As an alternative process, to address any grievance/ complaint under the scheme, a committee consisting of District Agriculture Officer (Nodal Officer), representatives of implementing insurance company and bank/ financial institution can also be constituted. The working of the grievance committee will be monitored by District Level Monitoring Committee (DLMC) under the chairmanship of District Magistrate.

If you are still not satisfied, you can approach the Insurance Ombudsman in the respective area for resolving the issue. The contact details of the Ombudsman offices are mentioned below:

Office Details	Jurisdiction of Office Union Territory, District)
AHMEDABAD - Office of the Insurance Ombudsman, 2nd floor, Ambica House, Near C.U. Shah College, 5, Navyug Colony, Ashram Road, Ahmedabad – 380 014. Tel.: 079 - 27546150 / 27546139 Fax: 079 - 27546142 Email: bimalokpal.ahmedabad@gbic.co.in	Gujarat, Dadra & Nagar Haveli, Daman and Diu.

Office Details	Jurisdiction of Office Union Territory, District)
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@gbic.co.in	Karnataka.
BHOPAL Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp. Airtel Office, Near New Market, Bhopal – 462 003. Tel.: 0755 - 2769201 / 2769202 Fax: 0755 - 2769203 Email: bimalokpal.bhopal@gbic.co.in	Madhya Pradesh Chattisgarh.
BHUBANESHWAR Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar – 751 009. Tel.: 0674 - 2596461 / 2596455 Fax: 0674 - 2596429 Email: bimalokpal.bhubaneswar@gbic.co.in	Orissa.
CHANDIGARH - Office of the Insurance Ombudsman, S.C.O. No. 101, 102 & 103, 2nd Floor, Batra Building, Sector 17 – D, Chandigarh – 160 017. Tel.: 0172 - 2706196 / 2706468 Fax: 0172 - 2708274 Email: bimalokpal.chandigarh@gbic.co.in	Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir, Chandigarh.
CHENNAI Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018. Tel.: 044 - 24333668 / 24335284 Fax: 044 - 24333664 Email: bimalokpal.chennai@gbic.co.in	Tamil Nadu, Pondicherry Town and Karaikal (which are part of Pondicherry).
DELHI Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel.: 011 - 23239633 / 23237532 Fax: 011 - 23230858 Email: bimalokpal.delhi@gbic.co.in	Delhi.
GUWAHATI Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati – 781001 (ASSAM). Tel.: 0361 - 2132204 / 2132205 Fax: 0361 - 2732937 Email: bimalokpal.guwahati@gbic.co.in	Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.
HYDERABAD Office of the Insurance Ombudsman, 6-2-46, 1st floor, "Moin Court", Lane Opp. Saleem Function Palace, A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004. Tel.: 040 - 65504123 / 23312122 Fax: 040 - 23376599 Email: bimalokpal.hyderabad@gbic.co.in	Andhra Pradesh, Telangana, Yanam and part of Territory of Pondicherry.
JAIPUR Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141 - 2740363 Email: Bimalokpal.jaipur@gbic.co.in	Rajasthan.
ERNAKULAM Office of the Insurance Ombudsman, 2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard, M. G. Road, Ernakulam - 682 015. Tel.: 0484 - 2358759 / 2359338 Fax: 0484 - 2359336 Email: bimalokpal.ernakulam@gbic.co.in	Kerala, Lakshadweep, Mahe-a part of Pondicherry.
KOLKATA Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 4th Floor,	West Bengal, Sikkim, Andaman & Nicobar Islands.

Office Details	Jurisdiction of Office (Union Territory, District)
4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 / 22124340 Fax : 033 - 22124341 Email: bimalokpal.kolkata@gbic.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@gbic.co.in	Districts of Uttar Pradesh : Laitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, 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@gbic.co.in	Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane.
NOIDA Office of the Insurance Ombudsman, Bhagwan Sahai Palace 4th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddh Nagar, U.P-201301. Tel.: 0120-2514250 / 2514251 / 2514253 Email: bimalokpal.noida@gbic.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@gbic.co.in	Bihar, Jharkhand.
PUNE Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 3rd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune – 411 030. Tel.: 020 - 32341320 Email: bimalokpal.pune@gbic.co.in	Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region.

Note: Address and contact number of Governing Body of Insurance Council
 Secretary General - Governing Body of Insurance Council
 JeevanSevaAnnexe, 3rd Floor, S.V. Road, Santacruz (W), Mumbai - 400 054
 Tel No: 022-2610 6889, 26106245, Fax No. : 022-26106949, 2610 6052, E-mail ID: inscoun@vsnl.net