

**COCORide Two-Wheeler Package Policy - DHFL General Insurance- 5 Years**

UIN No. IRDANI55RP0050V01201819

**EMI Protector-3 years**

(UIN: IRDANI55RP0050V01201819/A0063V01201819)

The cover is applicable only if its shown in your schedule.

If Your insured vehicle has been financed by any financial institution and You were driving or travelling in the insured vehicle, We will pay upto 3(three) Equated Monthly Installment (EMI) in the event insured vehicle meets with an accident during the Year of insurance caused by violent, accidental, external and visible means and You sustain injury which independently of any other cause results in Your Hospitalisation for more than 07 days.

**Condition:**

1. We will pay subject to claim in respect of damage to the vehicle being admissible under section I (Own Damage) of the policy.
2. We will pay not exceeding the outstanding loan or sum insured shown in the policy schedule.
3. This would be a onetime payment at the end of the continuous period of hospitalisation for which claim has been made and is admissible under the policy. We will be liable to pay total EMI's as per the following table.

08 <sup>th</sup> Day of Hospitalisation	1 <sup>st</sup> EMI
After 1 month of Hospitalisation	2 <sup>nd</sup> EMI
After 2 months of Hospitalisation	3 <sup>rd</sup> EMI.

4. You are paying the EMI on a Regular basis i.e. the payment of EMI to the Bank/Financial Institution from whom the loan has been availed without any defaults and/or any penalties and/or interest and /or miscellaneous charges. We will not pay any penalties and/or interest and /or miscellaneous charges levied by Bank/Financial institution for any default in payment.

**DHFL General Insurance Limited**

*(A Wholly Owned Subsidiary Of WGC)*

Registered & Corporate Office: 402, 403 & 404, A&B Wing, 4<sup>th</sup> Floor, Fulcrum, Sahar Road, Next to Hyatt Regency, Andheri (E), Mumbai - 400 099

COCORide Two-Wheeler Package Policy - DHFL General Insurance - 5 Years (Policy Wordings)

CIN: U66000MH2016PLC283275

GSTIN: 27AAFCD7985H1Z4

Phone: 022 - 4001 8100/8200

IRDAI Reg No.: 155

Web: [www.dhflinsurance.com](http://www.dhflinsurance.com)

Email: [mycare@dhflinsurance.com](mailto:mycare@dhflinsurance.com)

5. You will submit Sanction letter and Repayment Track Record or Bank account statement or Loan Account Statement reflecting EMI.

**EMI** means and includes the amount of monthly payment required to repay the principal amount of Loan and Interest by the Insured Person as mentioned in the amortization chart in the loan agreement (or any amendments thereto) between the Financial Institution and the Insured prior to the date of occurrence of the Insured Event under this Policy. For avoidance of doubt, it is clarified that any monthly payments that are overdue and unpaid by the Insured prior to the occurrence of the Insured Event will not be considered for the purpose of this Policy and shall be deemed as paid by the Insured.

Subject otherwise to terms, conditions, limitations and exceptions of the policy.

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