

Accident Suraksha

Policy Wordings

Version: - Pantaloon Retail (India) Limited & Home Solution Retail (India) Limited

This Policy is issued to You based on Your Proposal to Us and Your payment of the Premium. This Policy records the agreement between Us and sets out the terms of insurance and the obligations of each party.

1. OPERATION OF COVER

- a. The cover provided by this Policy will only apply during the Policy Period stated in the Schedule.
- b. The Policy does not provide coverage for any insured person unless he or she at the date of the claim is under 70 (Seventy) years of age.

2. DEFINITIONS

Following words are phrases whenever they appear in italics in this policy wording have special meanings as defined below against each of them:

You, Your, Yourself	The Insured Person shown in the Schedule.
We, Our, Us, Insurer	Future Generali India Insurance Company Limited.
Schedule	That portion of the Policy which sets out Your personal details, the type of insurance cover in force, the period and the sum insured. Any Annexure or Endorsement to the Schedule shall also be a part of the Schedule.
Proposal	The application (Proposal) form for insurance cover submitted to Us along with all information which has enabled Us in considering whether and on what terms to offer this insurance.
Policy	The complete documents consisting of the Proposal, Policy wording, Schedule and Endorsements and attachments if any.
Occupation	Occupation of Insured Persons as shown in the Schedule or as declared to Us in the Proposal
Policy Period	The period commencing with the start date mentioned in the Schedule till the end date mentioned in the Schedule.
Accident, Accidental	A sudden, unintended and fortuitous external and visible event.
Accidental Bodily Injury	Any injury to You caused by an accident which occurs during the Policy Period but does not include any condition which is also a sickness or illness or disease or any degenerative condition provided that the injury results in any of the events specified in the table of events within 12 calendar months from the date of such injury.

Doctor/Physician	A qualified medical practitioner holding a valid and subsisting license granted by the appropriate licensing authority and acting within the scope of his license.
Permanent Total Disablement	Means disablement which entirely prevents an Insured Person from attending to any Business or Occupation of any and every kind and which lasts 12 months and at the expiry of that period is beyond hope of improvement.
Total Sum Insured	The amount stated in the Schedule, which the maximum amount we will pay for claims is made by You in one policy period irrespective of the number of claims You make or the number of years that You have had Personal Accident policy with Us.
Principal Sum Insured	The highest of the sum insured mentioned for Accidental Death or Permanent Total Disablement Benefit.
Insured Person	Whether in singular or plural means the person(s) who come within the description of Insured Persons stated in the Schedule, for whom premium has been paid.

3. WHAT WE WILL PAY FOR

Following an Accidental Bodily Injury to You which results in any of the events listed in the Table of Events, we will pay You or Your nominee such percentage stated against the event in the Table of Events of the sum insured stated in the Schedule provided that the Schedule mentions that You have opted for coverage against that event and paid premium for the same.

PRIMARY COVERS

The Primary Cover includes the following benefits. We will make payment for the benefits as specified in the Schedule.

- A. Accidental Death
- B. Permanent Total Disablement

Table of Events

Event	Percentage of Sum insured
Accidental Death	100%
Permanent Total Disablement	100%

- C. This policy shall cease for the particular Insured Person on payment of a claim for Accidental Death or Permanent Total Disablement of that Insured Person.

4. ADDITIONAL COVER

We will make payment for the following additional benefits if the Schedule mentions that You have availed the same and paid the additional premium applicable.

- a. Monthly income

In the event of We making payment for a claim for Permanent Total Disablement, We will also make payment towards the sum insured mentioned against this benefit per month for the number of months mentioned in the Schedule.

5. WHAT IS NOT PAYABLE

We will not pay for any compensation, benefit or expenses in respect of Accidental Death, Injury or Disablement, of the Insured person as a consequence of the following

1. Intentional self injury (including but not limited to the use or misuse of any intoxicating drugs or alcohol)
2. Accident while under the influence of alcohol or drugs.
3. Participation in an actual or attempted felony, riot, crime, misdemeanor or civil commotion
4. Any accident of which a contributing cause was your actual or attempted commission of, or willful participation in, an illegal act or any violation or attempted violation of the law or your resistance to arrest.
5. Whilst engaging in Aviation or Ballooning or whilst mounting into, dismounting from or traveling in any balloon or aircraft other than as passenger (fare paying or otherwise) in any duly licensed standard type of aircraft.
6. Participating in motor racing or trial run as a driver, co-driver or passenger
7. Curative treatments or interventions that You carry out or have carried out on Your body
8. Pregnancy and childbirth, miscarriage, abortion or complications arising out of any of these
9. War, invasion, acts of foreign enemies, hostilities (whether war be declared or not), civil war, commotion unrest, rebellion, revolution, insurrection, military or usurped power or confiscation or nationalization or requisition of or damage or under the order of any government or public authority
10. Nuclear energy, radiation
11. Any existing disablement prior to the inception of the policy
12. Venereal or sexually transmitted diseases, HIV (Human Immunodeficiency Virus) or HIV related illness including AIDS (Acquired Immune Deficiency Syndrome) and / or mutant derivatives or variations however caused.
13. Any medical expenses, services, supplies or treatment or hospital stay
14. **UNDER THIS SCHEME THE INSURANCE COMPANY'S LIABILITY SHALL NOT EXCEED INR 5 LAKHS FOR A SINGLE INSURED irrespective of number of certificate held by him/her.**

6. THINGS YOU SHOULD DO

1. If You meet with an accidental bodily injury that may result in a claim, then
 - a. You must immediately consult a Doctor and follow the advice and treatment that he recommends
 - b. You or someone claiming on Your behalf must inform Us in writing immediately and in any event within 15 days
 - c. You must take reasonable steps to lessen the consequences of Your bodily injury.
 - d. You or someone claiming on Your behalf must promptly give Us the documentation and other information We ask for to investigate the claim or Our obligation to make payment for it.

- e. You must have Yourself examined by Our medical advisors if We ask for this and as often as We consider this to be necessary.
 - f. In case of Your death, someone claiming on Your behalf must inform Us in writing immediately and send Us a copy of the Post Mortem report, FIR or any other document as required by Us within 15 days.
2. We have agreed to issue this policy based on the occupation that You have declared to Us while taking this policy. If You change Your occupation then You must tell Us in writing within 30 days of the change. If You do not do this, then this insurance will cease as far as You are concerned from the date that You changed Your occupation.
 3. You should send any communication meant to Us in writing to Our address shown in the Schedule.
 4. If You wish to cancel this policy You should give us 15 days notice in writing. We shall refund You balance premium after retaining premium as per the scale shown below:

Policy Period not exceeding	% of Annual Rate
1 month	20%
3 months	40%
6 months	70%
9 months	90%

7. THINGS WE WILL DO THINGS

- a. We will send any communication meant to You to Your address shown in the Schedule.
- b. We will make claim payment to You or Your Nominee. If there is no Nominee and You are incapacitated or deceased, We will pay Your heir, executor or validly appointed legal representative and any payment We make in this way will be a complete and final discharge of Our liability to make payment.
- c. We will make all claim payments in Indian rupees within India only.
- d. If We cancel this policy We will give You 15 days notice in writing. In such cases We shall make You pro rata refund of premium for the balance period.

8. WHAT YOU SHOULD NOT DO

- a. You should not make any claim knowing it to be false or fraudulent in any way.
- b. You should also not conceal, misrepresent intentionally or otherwise any fact or circumstance that We consider as material to this insurance.
- c. If You do so then the policy shall be void and all claims or payments due under it shall be lost.

9. DISPUTE RESOLUTION

- a. Any dispute regarding the claim amount, liability otherwise being admitted, are to be referred to arbitration under the Arbitration & Conciliation Act 1996. The law of the arbitration shall be Indian law and the seat of the arbitration and venue for all the hearings shall be within India.
- b. 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. COMPLIANCE WITH POLICY PROVISIONS

Failure by You to comply with any of the provisions in this Policy may invalidate all claims hereunder.

11. USE OF MASCULINE PRONOUN

A masculine personal pronoun as used in this Policy includes the feminine, wherever the context requires.

12. TERRITORIAL LIMITS AND LAW

We cover Accidental Bodily injury sustained by You during the Policy Period anywhere in the World (subject to the travel and other restrictions that the Indian Government may impose), but We will make payment within India and in Indian Rupees. The construction, interpretation and meaning of the provisions of this Policy shall be determined in accordance with Indian Law.