

**CUSTOMER INFORMATION SHEET/KNOW YOUR POLICY**

**This document provides key information about your policy. You are also advised to go through your policy document.**

**Please Note:** *This Customer Information Sheet provides information available under this Product. Kindly refer to the Policy Schedule to know exact details of coverage opted by You.*

SI No	Title	Description	Policy Clause Number
1	Name of Insurance Product/ Policy	<b>Digit Happy Traveller Plan</b>  <b>Plans Name:</b> <ul style="list-style-type: none"> <li>• Double Secure Plan</li> <li>• Senior Double Secure Plan</li> <li>• Double Secure Plus Plan</li> <li>• Senior Double Secure Plus Plan</li> <li>• Double Secure Asia Plan</li> <li>• Multi Trip Plan</li> <li>• Modular Plan</li> </ul>	
2	Policy number	Please refer Your Policy Schedule	
3	Type of Insurance Product/ Policy	<u><b>On Indemnity Basis:</b></u> Section 1 - Medical Treatment and Evacuation Exigencies Section 2 - Accidental Treatment and Evacuation Exigencies Section 5 - Home to Home Cover Section 6 - Dental Treatment Section 10 – Trip Cancellation Section 11 - Trip Abandonment Section 12 - Trip Extension\ Section 13 - Compassionate Visit Section 14 - Escort of Minor Child Section 16 - Missed Connection Section 17 - Personal Liability & Bail Bond Section 18 - All Risk Cancellation Charges Section 20 - Loss of Passport, Driving License and Temporary Permit Section 21 – Bounced Booking	<b>C. Coverage</b>

		<p>Section 22 - Loss of Baggage and Personal Belongings  Section 23 - Home Building and Contents  Section 24 - Emergency Cash Assistance Service  Section 27 - Fraudulent Charges Cover  Section 28 - Extended Pet Stay  Section 29 - Hazardous or Adventure Sports  Section 30 - Upgradation to Business Class  Section 31 - Study Interruption  Section 32 - Accident of the Sponsor  Section 33 - Maternity and Baby Cover  Section 34 - Inter- Collegiate Sports Cover  Section 35 - Coverage at Home Country</p> <p><b><u>On Benefit Basis:</u></b>  Section 3 - Personal Accident  Section 4 - Accidental Death and Disability Cover (Common Carrier)  Section 7 - Hijack Distress Allowance  Section 8 - Delay of Checked-In Baggage  Section 9- Total Loss of Checked- In Baggage  Section 15 - Common Carrier Delay  Section 19 - Daily Cash Allowance  Section 25 - Financial Emergency Cash  Section 26 - Golfer's Hole in One</p>	
4	Sum Insured (Basis) (Along with amount)	<p>This product can be on "Individual Sum Insured"  Please refer Your Policy Schedule to know the Sum Insured basis applicable to Your Policy.</p> <ul style="list-style-type: none"> <li>• Individual Sum Insured -Where each member has a separate sum insured under the policy),</li> <li>• Floater Sum Insured- Not applicable</li> </ul> <p>Sum Insured Amount available under Your policy will be as per amount mentioned in Your Policy Schedule.</p>	NA
5	Policy Coverage (What am I covered for?) (Policy	<p><b>Coverages</b>  <b><u>SECTION 1 – MEDICAL TREATMENT AND EVACUATION EXIGENCIES</u></b>  If You fall ill during your trip and require medical treatment resulting in hospitalization (for a minimum period of 24 consecutive 'In-patient Care' hours), in order to save your life or to give insured immediate relief</p>	<b>C. Section 1</b>

Clause Number/s)

from an acute pain, Company will cover for the reasonable and customary charges you incur up to the Sum Insured as shown on insured's policy schedule for:

<b>Treatment</b>	Medical Treatment (including rescue services to take You to hospital) outside of Your home Country. In case of domestic travel (within the geographical boundaries of Your home country), Medical treatment will be outside your Home city.
<b>Associated Expenses</b>	a. Hospital room and boarding charges. b. ICU Charges c. Surgical procedures d. Ambulatory medical centre. e. Medical Practitioners fees. f. Anaesthesia g. Diagnostic and Radiology services h. One time reimbursement of hearing aids, crutches, and external appliances and/or devices necessitated as part of treatment and prescribed by Doctor/Physician. i. Miscellaneous expenses
<b>Medical Evacuation</b>	The cost of getting You home (origin city of the insured trip) or to another location for better treatment in India only, if it is medically necessary because You are seriously ill during Your trip and You cannot use your return ticket. It will also include medical services and medical supplies necessarily incurred in connection with Your Medical Evacuation.
<b>Out-Patient Department (OPD)</b>	It covers Your visits to a clinic/hospital or associated facility like a consultation room for diagnosis and treatment based on the advice of a Medical Practitioner. This cover will be subject to sub- limits applicable under this product for OPD which will be as mentioned in Policy Schedule.
<b>Repatriation</b>	Repatriation of mortal remains to Your place of residence (origin city of the Insured trip), or to nearby funeral or cremation facility at the city of Your trip.

**SECTION 2 – ACCIDENTAL TREATMENT AND EVACUATION EXIGENCIES**

**I. Scope of Cover**

If insured are accidentally injured during your trip, and require medical treatment resulting in hospitalisation (for a minimum period of 24 consecutive 'In-patient Care' hours), in order to save life or

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to give insured immediate relief from an acute pain, company will cover for the reasonable and customary charges you incur up to the Sum Insured as shown on insured's policy schedule for:

<b>Treatment</b>	Accidental treatment (including rescue services to take You to hospital) outside of Your home Country. In case of domestic travel Medical treatment will outside Your Home city.
<b>Associated Expenses</b>	<ul style="list-style-type: none"> <li>a) Hospital room and boarding charges.</li> <li>b) ICU Charges</li> <li>c) Surgical procedures</li> <li>d) Ambulatory medical centre.</li> <li>e) Medical Practitioners fees.</li> <li>f) Anaesthesia</li> <li>g) Diagnostic and Radiology services</li> <li>h) One time reimbursement of hearing aids, crutches, and external appliances and/or devices necessitated as part of treatment and prescribed by Doctor/Physician.</li> <li>i) Miscellaneous expenses</li> </ul>
<b>Evacuation</b>	The cost of getting You home (origin city of the insured trip) to another location for better treatment in India only, if it is medically necessary because you are seriously injured during your trip and You cannot use your return ticket. It will also include medical services and medical supplies necessarily incurred in connection with Your Medical Evacuation.
<b>Out-Patient Department (OPD)</b>	It covers Insured person visits to a clinic/hospital or associated facility like a consultation room for diagnosis and treatment based on the advice of a Medical Practitioner. This cover will subject to sub limits applicable under this product for OPD will be as mentioned in Policy Schedule.
<b>Repatriation</b>	Repatriation of mortal remains to Your place of residence (origin city of the Insured trip), in case of death and/or to nearby funeral or cremation facility.

**SECTION 3 – PERSONAL ACCIDENT**

**I. Scope of Cover**

We will pay you, up to the limits shown on your policy schedule, if you suffer an accidental bodily injury during your trip which requires urgent and immediate medical attention that leads solely, directly and independently to your:

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- **Death**
- **Permanent Total Disability**
- **Permanent Partial Disability**

Below Table summarizes the benefit Payment:

Sr No	Description	% age of Sum Insured Payable
1	Death within 365 days from the date of accident	100%
2	Loss of 2 limbs including both hands or both legs or one hand/one leg of either side	100%
3	Loss of one limb and an eye	100%
4	Loss of sight in both eyes	100%
5	Permanent loss of hearing of both ears	75%
6	Loss of one limb	50%
7	Permanent loss of sight in one eye	50%
8	Permanent loss of speech completely	50%
9	Loss of up to four fingers of hand	40%
10	Loss of up to four fingers of foot	40%
11	Permanent loss of hearing in any one ear	40%
12	Loss of each thumb	20%
13	Loss of each index finger	10%
14	Loss of each other finger	5%
15	Loss of each big toe	5%
16	Loss of each other toe	2%

Benefit payment as a % of Sum Insured for any other permanent partial disablement will be based upon the opinion and assessment of the Medical Practitioner as to the extent of disability and in no such case our liability will exceed 50% of the Sum Insured as specified in the Policy Schedule against this Cover.

**Disappearance:** We will also cover disappearance of the Insured Person, following a forced landing, stranding, sinking or wrecking of a conveyance in which such Insured Person was known to have been travelling as an occupant, it shall be deemed after 12 months, subject to all other terms and conditions of this Policy, that such person shall have died as the result of an accident. If at any time, after the payment of the Accidental death benefit, it is discovered that the insured person is still alive, all payments shall be reimbursed to the full to the Company.

**SECTION 4 – ACCIDENTAL DEATH AND DISABILITY COVER (COMMON CARRIER)**

**I. Scope of Cover**

We will pay you, up to the limits shown on your policy schedule, if you suffer an accidental bodily injury during your trip while riding as a fare paying passenger in or on a common carrier or boarding or alighting from a common carrier which requires urgent and immediate medical attention that leads solely, directly and independently to your:

- **Death**
- **Permanent Total Disability**
- **Permanent Partial Disability**

Below Table summarizes the benefit Payment:

Sr No	Description	% age of Sum Insured Payable
1	Death within 365 days from the date of accident	100%
2	Loss of 2 limbs including both hands or both legs or one hand/one leg of either side	100%
3	Loss of one limb and an eye	100%
4	Loss of sight in both eyes	100%
5	Permanent loss of hearing of both ears	75%
6	Loss of one limb	50%
7	Permanent loss of sight in one eye	50%
8	Permanent loss of speech completely	50%
9	Loss of up to four fingers of hand	40%
10	Loss of up to four fingers of foot	40%
11	Permanent loss of hearing in any one ear	40%
12	Loss of each thumb	20%
13	Loss of each index finger	10%
14	Loss of each other finger	5%
15	Loss of each big toe	5%
16	Loss of each other toe	2%

Benefit payment as a % of Sum Insured for any other permanent partial disablement will be based upon the opinion and assessment of the Medical Practitioner as to the extent of disability and in no such case our liability will exceed 50% of the Sum Insured as specified in the Policy Schedule against this Cover.

**Disappearance:** We will also cover disappearance of the Insured Person, following a forced landing, stranding, sinking or wrecking of a conveyance in which such Insured Person was known to have been

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travelling as an occupant, it shall be deemed after 12 months, subject to all other terms and conditions of this Policy, that such person shall have died as the result of an accident. If at any time, after the payment of the Accidental death benefit, it is discovered that the insured person is still alive, all payments shall be reimbursed to the full to the Company.

**SECTION 5 – HOME TO HOME COVER**

**I. Scope of Cover**

We will pay insured, up to the limits shown on insured’s policy schedule, before/beyond the Period of Insurance for Section 1: Medical Treatment and Evacuation Exigencies, Section 2: Accidental Treatment and Evacuation Exigencies and Section 3: Personal Accident for following:

1. Starting of the Journey from Home (or any intermediated Place) at the Country of Residence to the port of the common Carrier for duration of 12 hours before the scheduled departure time of the Common Carrier or whenever is insured’s actual departure, whichever is earlier.
2. Return journey from the port of common carrier to Home (or any intermediated Place) after de-boarding the Common Carrier at the Country of Residence for duration of 12 hours after the Actual arrival Time of the Insured Person or the actual time you reached home (or any intermediated Place), whichever is earlier.

**Section 6 – Dental Treatment**

If You encounter acute pain or meet with an accidental injury to your natural teeth on the trip, resulting in dental treatment provided by a medical practitioner qualified in practicing dentistry and / or dental surgery amounts mentioned in the Policy Schedule, we will cover for the reasonable and customary charges you incur up to the limits shown on your policy schedule.

**Section 7 – Hijack Distress Allowance**

We will pay You a distress allowance amount shown in your Policy Schedule for each 24 consecutive hours, period during which any Common Carrier in which You are traveling has been Hijacked, subject to maximum of Sum Insured stated in the Policy Schedule.

Hijacking of the common carrier needs to be confirmed and declared by Government of India and or any respective common carrier authority.

**Section 8 – Delay in Checked -in Baggage**

If Your Checked-In Baggage is temporarily lost or arrived late during the trip (not on return to origin city of your trip) and You are without your checked-in baggage for more than the duration specified in the policy schedule, from the expected time of delivery by the common carrier, We will pay the Sum Insured shown on Your policy schedule.

**C. Section 5**

**C. Section 6**

**C. Section 7**

**C. Section 8**

**Section 9 – Total Loss of Checked -in Baggage**

If Your checked-in baggage is lost permanently at the final destination of Your journey or en-route involving multi destination within the airport premises while in custody of common carrier, then We will pay the pro-rata Sum Insured as mentioned in the Policy Schedule against this Cover.

**C. Section 9**

**Section 10 – Trip Cancellation**

If the Insured Person’s outward journey as a fare paying passenger from the Country of Residence to an international/domestic Place of Destination on a Common Carrier is cancelled before the commencement of the Period of Insurance due to any of the reasons specified herein below, then the Company will indemnify on a reimbursement basis, up to the amount specified against this section in the Policy Schedule, for planned travel and accommodation expenses (including excursions and planned events) that the Insured incurred and cannot recover and for which no value can be derived without knowledge of the likelihood of cancellation.

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We will cover due to following reasons:

1. You or any of your immediate family or traveling companion dies or are injured or fall ill or is/are quarantined leading to emergency hospitalization for at least 2 consecutive days provided that such illness/injury shall not first occur earlier than 10 consecutive days from the commencement of period of insurance.
2. Your presence is required by judicial authority in the course of its proceedings during the period of insurance.
3. Due to unexpected strike, riot or Civil commotion at Your Travel Destination or your hometown or your departure city which leads to the cancellation of the trip.
4. You have to travel internationally and you lose your passport and visa due to theft or burglary but not earlier than 10 consecutive days from the commencement of period of insurance.
5. Advisory issued by government not to travel, Compulsory quarantine or prevention of travel by Government of India.
6. You are unable to commence your travel due to fire or inclement Weather conditions like Storm, Flood, Hurricanes, or Natural Disaster/ calamity which is not publicly known before policy issuance date.
7. Your Involuntary loss of Job and or retrenchment.
8. Any damage to your Home Building that has occurred within 48 hours before start of your journey due to following listed perils:
  - a. Fire, lightening, explosion/implosion, aircraft damage.
  - b. Riot, strike and malicious damage.



- c. Storm, cyclone, typhoon, tempest, hurricane, tornado, flood and inundation.
- d. earthquake, impact damage, subsidence and land slide including rock slide, bursting and/or overflowing of water tanks, apparatus and pipes.
- e. Theft or burglary.

**Section 11 – Trip Abandonment**

If You have to unavoidably abandon Your trip and return home early or partially abandon part of Your scheduled trip, We will pay up to the limits shown on Your policy schedule for:

- additional travel costs (in the same class as original booking) (if you cannot use your return ticket); and/or
- accommodation costs (of a similar standard you had booked for your trip); and/or
- unused accommodation costs that each insured person has paid and cannot get back (including excursions and planned events)

If any of the following happen after the onset of Your trip:

1. The Insured Person, his/her Immediate Family Member or his/her travelling companion dies or is hospitalized in an Emergency due to an unforeseen Illness or Injury for at least 2 consecutive days,
2. You are unable to continue your travel due to fire, storm or any other natural disaster / calamity.
3. Loss of Passport and visa due to theft or burglary in case of international travel only.
4. The common carrier which you boarded as a passenger is hijacked.
5. Advisory issued by government not to travel, compulsory quarantine or prevention of travel by government.
6. Due to unexpected strike, riot or Civil commotion at place of visit other than your hometown which leads to the abandonment of the trip.
7. Your presence is required by judicial authority in the course of its proceedings during the period of insurance.
8. Any damage to your Home Building while you are on your trip due to following listed perils:
  - a. Fire, lightening, explosion/implosion, aircraft damage.
  - b. Riot, strike and malicious damage.
  - c. Storm, cyclone, typhoon, tempest, hurricane, tornado, flood and inundation.
  - d. earthquake, impact damage, subsidence and land slide including rock slide, bursting and/or overflowing of water tanks, apparatus and pipes.
  - e. Theft or burglary.

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**Section 12- Trip Extension**

We will reimburse You up to the Sum Insured shown in Your schedule in the unexpected event of Your departure being delayed than the original scheduled departure date of Your return journey either at the port of destination or at any other intermediate ports forming part of the trip within the period of coverage for the below expenses:

- a. The actual additional expenses for lodging and boarding in the same class and type (as originally planned).
- b. Difference in common carrier fare between original return ticket and new ticket of economy class for Insured persons insured with us up to the limits mentioned in the Policy Schedule.

Provided that, if Your trip is extended due to following:

- 1. Death of the Travelling Companion.
- 2. Personal contingencies like emergency Hospitalization necessitated to the Insured or Insured's Traveling Companion due to an unforeseen Illness or accidental Injury where a Medical Practitioner has recommended hospitalization due to the severity of the medical condition forcing you to extend the Trip. Such hospitalization should be for minimum 2 days.
- 3. Any natural disaster which destroys Your destination and requiring you to extend the trip.
- 4. Lost or stolen passport or travel documents in case of international travel only.
- 5. Due to unexpected strike, riot or Civil commotion at the port where the Trip got extended.
- 6. Political disturbance, Travel prohibition declared by Government and or Common carrier Authorities which is not publicly known before policy period.

**Section 13 – Compassionate Visit**

We will reimburse the cost of visit of one of Your Immediate family member/ Friend/Relative, to the city where You are hospitalized up to the limits shown in Your policy schedule in the unexpected event of You being hospitalized within the period of coverage, for the below expenses:

- a. Actual cost of economy class transportation by the most direct route via a common carrier of one member of Your family / relative / friend from member's city of residence to the port of Insured's hospitalization.
- b. Actual cost of lodging and boarding (accommodation of same class or lower class as of insured person) of the visiting member during the stay.

Above benefit in clause a and b can be availed subject to the following:

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**C. Section 13**

1. The Hospitalization has been advised by the Medical Practitioner attending You and such Hospitalization is admissible under Section 1 “Medical Treatment and Evacuation Exigencies” or Section 2 - “Accidental Treatment and Evacuation Exigencies” cover of this Policy; and
2. The need of such assistance is essential in the opinion of the Medical Practitioner attending You and recommended by him/ her accordingly.

**Section 14 – Escort of Minor Child**

We will reimburse the following expenses arising out of visit of one of Your immediate family member/Relative/Friend to the city where You are hospitalized, to escort any accompanying minor child (maximum two), up to the limits shown in Your policy schedule in the unexpected event of You being hospitalized within the period of coverage, for the below expenses

- a. The actual to and fro cost of the economy class Common carrier ticket using the most direct route for a family member/relative/friend to escort the unattended Minor Children back to their city of Residence.
- b. Actual cost of the economy class Common Carrier ticket using the most direct route for the Minor Children back to their city of residence less actual/possible refund of the scheduled return ticket of the Minor Children. Provided the hospitalization of Insured occurs not within 3 days of the completion of the trip.

Above benefit in clause a and b can be availed subject to the following:

1. The Hospitalization has been advised by the Medical Practitioner attending You and such Hospitalization is admissible under “Medical Treatment and Evacuation Exigencies” or “Accidental Treatment and Evacuation Exigencies” cover of this Policy; and
2. The need of such assistance is essential in the opinion of the Medical Practitioner attending You and recommended by him/ her accordingly.
3. Death of the insured Person

**Section 15 – Common Carrier Delay**

We will pay the amount mentioned in Your Policy Schedule, if Your common carrier’s actual departure time is delayed by more than the time duration (as specified in Policy Schedule). It will be paid for each block of time excess, as agreed maximum up to Sum Insured shown in Policy Schedule from the scheduled departure time, for any of the following reasons.

1. Delay of a Scheduled Common Carrier caused by Inclement Weather.
2. Delay due to a sudden Strike or any other action by employees of the Common Carrier.
3. Delay caused by equipment failure of the Common Carrier.

**C. Section 14**

**C. Section 15**

4. Delay caused by operational problem at the Common Carrier end like crew/staff scheduling issues.
5. Cancellation or rescheduling of flights done at the instance of the Common carrier that causes delay.

**Section 16 – Missed Connection**

We will pay for reasonable extra accommodation and travel costs you must pay to reach the next destination shown on your ticket/itinerary if, you missed a pre-booked onward connection as a direct result of the scheduled common carrier (on which you were booked to travel) not running on its published timetable due to the following reasons:

1. Delay of a scheduled Common Carrier caused by Inclement Weather.
2. Delay due to a sudden strike or any other action by employees of the scheduled Common Carrier.
3. Delay caused by Equipment Failure of the scheduled Common Carrier.
4. Cancellation or rescheduling of Common Carrier done at the instance of the common carrier that causes delay.
5. Delay caused if the Scheduled Common Carrier is taken out of service due to technical reasons on the instructions of the competent Authority.
6. Delay caused by operational problem at the Common Carrier end like crew/staff scheduling issues.

**Section 17 – Personal Liability & Bail Bond**

We will indemnify You up to the limits shown in Your policy schedule for:

1. any money that You legally have to pay to any third party in Your private capacity that relates to an accident occurring during your trip anytime during the Policy Period for which claims shall be made on You by the third parties during Policy Period or within 60 days from the Policy Period end date, due to negligence on your part which causes:
  - a. death or physical injury to any person;
  - b. loss or damage to property;
  - c. loss or damage to temporary holiday accommodation which is not owned by you.
2. We will also pay legal costs and expenses incurred by you in relation to the accident. You must obtain our consent in writing before incurring any cost or expense.
3. Any Bail bond you may have to furnish in the court of law for Your immediate release before the hearing date.

**Section 18 – All Risk Cancellation Charges**

**C. Section 16**

**C. Section 17**

**C. Section 18**

We will cover Your non-refundable pre-paid or contracted to be paid portion of the booking amount up to the limits shown in Your policy schedule, when you have to cancel the booked tickets in the unexpected or unforeseen event beyond Your control.

**Section 19 -Daily Cash Allowance**

If You are hospitalized in a hospital as an in-patient for more than the 24 hours due to an accidental injury or for an emergency medical treatment, company will pay you the daily benefit Up to a maximum number of days as stated in the policy schedule.

**C. Section 19**

**Section 20 – Loss Of Passport, Driving License And Temporary Permit**

We will pay/reimburse the following expenses up to the limits shown on Your policy schedule if Your passport or visa or Valid Driving License or Temporary Permit is lost, stolen or damaged while You are outside of Country of Residence and this would prevent You from leaving the country or continuing your trip.

**C. Section 20**

1. The prescribed fee payable to the concerned authorities at the place of loss for issue of an emergency certificate for You to proceed with Your continuance of journey and/or return journey to Your country of residence.
2. Reimbursement of maximum up to sum of USD 50 (part of sum insured mentioned under this section) towards any and all incidental expenses that might be incurred by the Insured in connection with obtaining the emergency certificate.
3. Prescribed application fee payable to the concerned authorities in the Country of Residence for issue of a duplicate passport, provided that, the entire sum in relation to obtaining a duplicate passport in the Country of Residence of the Insured shall be paid in local currency of the Country of Residence of the Insured.

**Section 21 – Bounced Booking**

**21.1. Bounced Booking for Accommodation:**

If insured opt for this cover, We will reimburse you up to the Sum Insured shown in Your policy schedule in the unexpected event of Accommodation provider unable to honour Your confirmed bookings (pre-paid or contracted to pay) due to overbooking or any other reason beyond your control for the following:

**C. Section 21**

1. The difference of cost in alternate accommodation or upgradation to a same class where the cost of booking is not more than 10% cost of original booking (per night) for the same number of nights that were overbooked (in case similar alternate arrangement is not available on cost of original booking amount), less any refund/compensation given by the accommodation/Hotel.

2. Reasonable cost of transportation expenses to the alternative accommodation in the same city

**21.2. Bounced Booking for Common carrier**

If insured opt for this cover, We will reimburse You up to the Sum Insured shown in Your policy schedule in the unexpected event of Common Carrier unable to honour Your confirmed bookings (pre-paid or contracted to pay) due to overbooking or any other reason beyond your control for the following:  
The difference of cost of original common carrier fare amount and reasonable new common carrier fare amount of same class booking where the cost of booking is not more that 10% cost of original booking, less any refund/compensation given by the Common Carrier.

**Section 22 – Loss of Baggage and Personal Belongings**

We will Indemnify You for the loss or damage of baggage/personal belongings (whilst they are accompanying You) within the period of coverage due to Theft, larceny, robbery or hold up.  
The liability of the Company in any one Policy Period shall in no case exceed the Sum Insured or limit of liability as shown in the Schedule for any one loss subject to deductible and depreciation .

**C. Section 22**

**Section 23 – Home Building and Contents**

We will reimburse up to the Sum Insured shown in your Policy Schedule for the actual loss/and or damage to the building and/or Contents of Your residence located at the address mentioned in the Policy Schedule or reinstate or replace such property or any part thereof within the period of coverage, due to following reasons:

1. Fire, lightening, explosion/implosion, aircraft damage.
2. Riot, strike and malicious damage.
3. Storm, cyclone, typhoon, tempest, hurricane, tornado, flood and inundation.
4. earthquake, impact damage, subsidence and land slide including rock slide, bursting and/or overflowing of water tanks, apparatus and pipes.
5. leakage from automatic sprinkler installations, bush fire.
6. Theft or burglary or Robbery.

**C. Section 23**

**Section 24 – Emergency Cash Assistance Service**

In this cover We will only provide an assistance service when You require emergency cash following incidents like theft/burglary of luggage/money or hold up. We ourselves or through our Claims Administrator shall co-ordinate with Your relatives in your Country of Residence to provide emergency cash to You or collect the amount & arrange for the transfers up to the limit specified in the Policy Schedule.

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**Section 25 - Financial Emergency Cash**

		<p>If You have suffered a financial emergency due to the theft, pilferage, robbery or dacoity of Your Money in Your personal custody whilst on a trip and are consequently left without any travel funds (including cash, travellers cheque, debit or credit card), then We will pay up to the amount stated in the Policy Schedule to replace the amount of travel funds lost, provided that the loss is reported to the police of the foreign country within 24 hours of loss and a written police report confirming the occurrence of loss and same has been submitted to Us.</p> <p><b>Section 26 – Golfer’s Hole in One</b> Under this cover, We will pay the Sum Insured mentioned in the Policy Schedule for celebration of achieving hole-in-one by You during the trip, anywhere in the world (excluding India) in a United States Golfers’ Association (USGA) recognized golf course.</p> <p><b>Section 27 – Fraudulent charges cover</b> During the trip, if your payment card as specified in the policy schedule is lost or stolen, we will reimburse the unauthorized charges that you are not responsible for on your lost or stolen payment card, up to 12 hours prior to Your first reporting the event to your payment card issuer(s).</p> <p><b>Section 28 – Extended Pet Stay</b> We will reimburse You against expenses incurred for extended stay of Your pet in the pet house in Country of Residence as a result of Your final booked return journey to Country of Residence is delayed for more than 24 hrs due to:</p> <ol style="list-style-type: none"> <li>1. Death of the Travelling Companion during the trip.</li> <li>2. Personal contingencies like emergency Hospitalization necessitated to the Insured or Insured's Traveling Companion due to an unforeseen Illness or accidental Injury where a Medical Practitioner has recommended hospitalization due to the severity of the medical condition forcing you to extend the Trip. Such hospitalization should be for minimum 2 days.</li> <li>3. Any natural disaster which destroys Your destination and requiring you to extend the trip.</li> <li>4. Lost or stolen passport or travel documents in case of international travel only.</li> <li>5. Due to unexpected strike, riot or Civil commotion at the return journey starting port..</li> <li>6. Political disturbance, Travel prohibition declared by Government and or Common carrier Authorities which is not publicly known before policy period.</li> <li>7. Airline’s acts of omission / commission or mechanical breakdown of the aircraft on which You were scheduled to travel on.</li> </ol> <p>Your delay in returning reason should be supported with relevant proofs specific to the circumstances. Under circumstances, where Your delay in returning is due to delay of transport, You need to obtain written</p>	<p><b>C. Section 25</b></p> <p><b>C. Section 26</b></p> <p><b>C. Section 27</b></p> <p><b>C. Section 28</b></p>
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confirmation from appropriate transport authority stating the reason for delay & how long the delay lasted except.

**Section 29 – Hazardous and Adventure Sports**

Your Policy has exclusion for Hazardous or Adventure Sports. By Opting this Section 29. “HAZARDOUS OR ADVENTURE SPORTS COVER”, We will pay you, up to the limits shown on your policy schedule ,You can choose to remove the abovementioned exclusion for the 6 sections as opted by You and mentioned in Your Policy Schedule.

You can choose to remove abovementioned exclusion for below sections:

- Personal Accident
- Medical Treatment and Evacuation Exigencies
- Accidental Treatment and Evacuation Exigencies
- Daily Cash Allowance
- Dental Treatment
- Personal Liability and Bail Bond

**Section 30 – Up – Gradation Business Class**

In case You are hospitalised during Your trip, we will reimburse, up to the sum insured mentioned in the Policy Schedule, the reasonable expenses incurred in respect of upgrading the Insured Person’s returning economy class air ticket to a business class air ticket by the most direct route from the place of hospitalization of the Insured Person to the Country of Residence.

**Section 31 – Study Interruption**

We will reimburse you up to the Sum Insured shown in Your policy schedule in the unexpected event of discontinuance of Your planned studies for the remaining part of the ongoing semester within the period of coverage for the below expenses:

- a. The actual semester fees paid which cannot be refunded by the Educational Institution and You are not able to complete the semester.
- b. Booked common carrier tickets from the city of residence of the student to the country where Educational Institution is, provided interruption happens when the insured is at his own city of residence.
- c. Return common carrier ticket back to insured’s city of residence, in case, interruption happens at the city of educational institution.

**Section 32 – Accident of the Sponsor**

**C. Section 29**

**C. Section 30**

**C. Section 31**





<p><b>6</b></p>	<p>Exclusions (what the policy does not cover)</p>	<p><b><u>GENERAL EXCLUSIONS</u></b></p> <ol style="list-style-type: none"> <li>1.             <ol style="list-style-type: none"> <li>a. Any claim arising out of war or any act of war, invasion, act of foreign enemy, hostilities (whether declared or not), war like operations (whether war be declared or not or caused during service in the armed forces of any country), civil war, public defence, rebellion, revolution, insurrection, military or usurped acts, chemical or biological weapons, act of terrorism.</li> <li>b. 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.</li> </ol> </li> <li>2. Claims directly or indirectly caused by:             <ol style="list-style-type: none"> <li>a. Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from burning nuclear fuel; or</li> <li>b. the radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear part of an assembly; or</li> <li>c. pressure waves caused by aircraft and other aerial devices travelling at sonic or supersonic speeds.</li> </ol> </li> <li>3. Any claim arising as a result of committing breach of law of the land by You.</li> <li>4. Any consequential loss whatsoever, direct or indirect to You or to any third party which is not specifically defined as scope of coverage under this policy, e.g. we will not pay for loss of earnings if You are unable to return to work due to injury or illness during your trip, or any payment which you would normally have made during your travels.</li> <li>5. Any claim for Your death, injury, exacerbation of a medical condition or disability resulting from:             <ol style="list-style-type: none"> <li>a. Your suicide or attempted suicide or wilfully self-inflicted injury or illness; or</li> <li>b. Your consumption of alcohol or drugs (other than drugs taken under medical supervision and not for treating alcohol or drug addiction); or</li> <li>c. depression</li> </ol> </li> <li>6. Any claim falling within the claim deductible and/or time excess shown in the policy schedule. Claim Deductible and/or time excess shall apply individually and independently of each other for each and every claim.</li> <li>7. Any incident which happens after the trip duration limit as shown on your policy schedule (except period of automatic extension).</li> <li>8. Claims resulting from any tour operator, travel agent, airline or other service provider becoming insolvent and not being able or willing to carry out any part of their duty to You.</li> <li>9. Any claim resulting from a tropical disease / contagious disease where you have not had the recommended inoculations and /or taken the recommended medication as per the government advisory issued by the country where You are travelling.</li> <li>10. Any claim for an incident which happens during the trip that results from:</li> </ol>	<p><b>D. General Exclusions</b></p>
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- a. You are riding or being a passenger on a Motorized Two-Wheeler without wearing a crash Helmet.
  - b. You are driving any motorized vehicle, unless you are fully licensed to drive such a vehicle at the destination and/or not following the security and safety measures where this is required by law.
  - c. You are not wearing a seat belt where this is required by law.
  - d. You are flying an aircraft or taking part in other similar aerial activities.
11. Any claim for:
- a. unused travel or accommodation arranged by using air miles, loyalty or points-based ownership schemes, timeshares or similar promotions.
  - b. management fees, maintenance costs or exchange fees associated with loyalty or points-based ownership schemes, timeshares or similar promotions.
  - c. costs where these are recoverable from Your travel and/or accommodation provider.
  - d. the refund of any costs you have paid for on behalf of persons not named on your policy schedule.
12. Any claim for refund of any course or tuition fees, project costs, sponsorship fees or similar, unless specifically covered for.
13. Any claim arising out of You having invalid travel documents such as invalid passport, invalid visa or invalid common carrier ticket.
14. Any claim because You do not feel like travelling, or you are not enjoying your trip.
15. In respect of travel by the Insured to any country against whom the Republic of India has imposed general or special travel restrictions, or any country which has imposed such restrictions against travel by a citizen of the Republic of India to such country.
16. For cures of any kind and all stays in long term care institutions (retirement homes, convalescence centers, centers for detoxifications, rehabilitation centers etc.)
17. Any claim for the treatment abroad, where trip was specifically planned for the purpose of availing treatment of an existing medical condition (Medical tourism).
18. Any claim for the fact or condition which is in prior knowledge to the insured will not be payable.
19. Any non-medical expenses (list enclosed - **Annexure I**)
20. We will not pay any claim under this Policy, whilst You are under training or taking part in sport as a professional for which You are paid or funded by sponsorship or grant unless this specifically waived of and mentioned in policy schedule.
21. Any claim for an incident which happens during the trip that results from taking part in any hazardous or Adventure activities unless specifically covered in **Section 29. Hazardous or adventurous sports.**
22. Any claim for an incident which happens due to Intercollegiate sports injury, except if you opted for **Section 34 - Inter-Collegiate Sports Cover.**

23. Any treatment arising from or traceable to pregnancy (including voluntary termination), miscarriage (unless due to an Accident), childbirth, maternity (including caesarian section), abortion or complications of any of these. Any treatment arising from or traceable to any fertility, infertility, sub fertility or assisted conception procedure or sterilization or procedure, birth control procedures, hormone replacement therapy, contraceptive supplies or services including complications arising due to supplying services or Assisted Reproductive Technology.

24. Any treatment or surgery for change of sex or gender reassignments including any complication arising from these treatments.

25. Circumcision unless necessary for treatment of an illness or as may be necessitated due to an Accident.

26. Treatment taken from anyone who is not a Medical Practitioner or from a Medical Practitioner who is practicing outside the discipline for which he is licensed or any kind of self- medication.

27. Where the Insured Person is travelling against the advice of a Physician or receiving or on a waiting list for receiving specified medical treatment; or is travelling for the purpose of obtaining treatment, or has received a terminal prognosis for a medical condition.

28. Any Pre-existing medical Condition either declared or undeclared or any complication arising from it except for Sections where specifically agreed and mentioned in Policy Schedule by Us.

29. sexually transmitted conditions

30. operating or learning to operate any Common carrier or performing duties as a member of the crew on any Common Carrier or Scheduled Common carrier.

31. congenital anomalies or any complications or conditions arising.

32. Naturopathy treatment, ayurvedic/ homeopathic/ unani medicine, acupressure, acupuncture, magnetic and such other therapies or any alternative treatments.

Losses arising directly or indirectly from manual work or hazardous occupation, self-exposure to needless peril (except in an attempt to save life) **In Addition to above exclusions there section specific exclusions also mentioned in respective section in the Policy wordings**

**Any other exclusion mentioned in specific terms and conditions in the Policy Schedule.**

7  
Waiting period  
• Time period during which specified diseases/tr

**This policy have only Maternity waiting period as follow :**

Description	Waiting Period Options
Maternity Waiting Period	0 months, 3 months, 6 months, 9 months

	<p>eatments are not covered.</p> <ul style="list-style-type: none"> <li>• It is counted from the beginning of the policy coverage.</li> </ul>						
<p><b>8</b></p>	<p>Financial limits of coverage</p> <p>I.Sub-limit (It is a pre-defined limit and the insurance company will not pay any amount in excess of this limit).</p> <p>II.Co-payment (It is a specified amount /percentage of the admissible claim</p>	<p><b>Sub – Limit, Co-payment and Deductible as applicable to Your policy will be mentioned in your policy schedule.</b></p>					
		<p><b>Details of Section Wise Sub-Limits available under the product are mentioned below:</b></p>					
		<p><b>Type of Benefit for which sub limit is imposed</b></p>	<p><b>Sub Limit in Absolute Terms (in INR)</b></p>		<p><b>Sub Limit as a Percentage</b></p>		
			<p><b>Minimum</b></p>	<p><b>Maximum</b></p>	<p><b>Minimum</b></p>	<p><b>Maximum</b></p>	
		<p><b>Section 1 : Medical Treatment and Evacuation Exigencies</b></p>					
		<p><b>Hospital Room Rent</b></p>	<p>NA</p>	<p>NA</p>	<p>0.10% of Sum Insured as per the Plan opted</p>	<p>5% of Sum Insured as per the Plan opted</p>	
		<p><b>ICU</b></p>	<p>NA</p>	<p>NA</p>	<p>1.5 times of Hospital room rent as per the plan opted</p>	<p>1.5 times of Hospital room rent as per the plan opted</p>	
		<p><b>Surgery</b></p>	<p>NA</p>	<p>NA</p>	<p>6 times of Hospital room rent as per the plan opted</p>	<p>6 times of Hospital room rent as per the plan opted</p>	
		<p><b>Anaesthesia</b></p>	<p>NA</p>	<p>NA</p>	<p>1.5 times of Hospital room rent as per the plan opted</p>	<p>1.5 times of Hospital room rent as per the plan opted</p>	

<p>amount to be paid by policyholder/insured).</p> <p>III. Deductible (It is a specified amount: - upto which an insurance company will not pay any claim, and - which will be deducted from total claim amount (if claim amount is more than the specified amount)</p> <p>IV. Any other limit (as applicable)</p>	<p><b>Physician Visit Fees</b></p>	NA	NA	0.15 times of Hospital room rent as per the plan opted	0.15 times of Hospital room rent as per the plan opted	
	<p><b>Diagnostic and Radiology</b></p>	NA	NA	0.9 times of Hospital room rent as per the plan opted	0.9 times of Hospital room rent as per the plan opted	
	<p><b>Ambulance Service</b></p>	NA	NA	0.25 times of Hospital room rent as per the plan opted	0.25 times of Hospital room rent as per the plan opted	
	<p><b>Miscellaneous Expenses</b></p>	NA	NA	0.75 times of Hospital room rent as per the plan opted	0.75 times of Hospital room rent as per the plan opted	
	<p><b>Section 2: Accidental Treatment and Evacuation Exigencies</b></p>					
	<p><b>Hospital Room Rent</b></p>	NA	NA	0.10% of Sum Insured as per the Plan opted	5% of Sum Insured as per the Plan opted	
	<p><b>ICU</b></p>	NA	NA	1.5 times of Hospital room rent as per the plan opted	1.5 times of Hospital room rent as per the plan opted	
	<p><b>Surgery</b></p>	NA	NA	6 times of Hospital room rent as per the plan opted	6 times of Hospital room rent as per the plan opted	
	<p><b>Anaesthesia</b></p>	NA	NA	1.5 times of Hospital room rent as per the plan opted	1.5 times of Hospital room rent as per the plan opted	
	<p><b>Physician Visit Fees</b></p>	NA	NA	0.15 times of Hospital room rent as per the plan opted	0.15 times of Hospital room rent as per the plan opted	

<b>Diagnostic and Radiology</b>	NA	NA	0.9 times of Hospital room rent as per the plan opted	0.9 times of Hospital room rent as per the plan opted
<b>Ambulance Service</b>	NA	NA	0.25 times of Hospital room rent as per the plan opted	0.25 times of Hospital room rent as per the plan opted
<b>Miscellaneous Expenses</b>	NA	NA	0.75 times of Hospital room rent as per the plan opted	0.75 times of Hospital room rent as per the plan opted

**Details of Section Wise Deductible and Co-payment available under the product are mentioned below:**

Section Name	Deductible		Co-payment	
	Minimum (% of Deductible)	Maximum (% of Deductible)	Minimum (% of Co-pay)	Maximum (% of Co-pay)
Medical Treatment and Evacuation Exigencies	NA	25%	0%	50%
Accidental Treatment and Evacuation Exigencies	NA	25%	0%	50%
Personal Accident	NA	NA	NA	NA
Accidental Death and Disability Cover (Common Carrier)	NA	NA	NA	NA
Home to Home Cover	NA	NA	NA	NA
Dental Treatment	NA	25%	0%	50%
Hijack Distress Allowance	NA	NA	NA	NA
Delay of Checked-In Baggage	NA	NA	NA	NA
Total Loss of Checked- In Baggage	NA	NA	NA	NA

		Trip Cancellation	NA	25%	0%	50%
		Trip Abandonment	NA	25%	0%	50%
		Trip Extension	NA	25%	0%	50%
		Compassionate Visit	NA	25%	0%	50%
		Escort of Minor Child	NA	25%	0%	50%
		Common Carrier Delay	NA	NA	NA	NA
		Missed Connection	NA	25%	0%	50%
		Personal Liability & Bail Bond	NA	25%	0%	50%
		All Risk Cancellation Charges	NA	25%	0%	50%
		Daily Cash Allowance	NA	NA	NA	NA
		Loss of Passport, Driving License and Temporary Permit	NA	25%	0%	50%
		Bounced Bookings	NA	25%	0%	50%
		Loss of Baggage and Personal Belongings	NA	25%	0%	50%
		Home Building and Contents	NA	25%	0%	50%
		Emergency Cash Assistance Service	NA	NA	NA	NA
		Financial Emergency Cash	NA	NA	NA	NA
		Golfer's Hole in One	NA	NA	NA	NA
		Fraudulent Charges Cover	NA	25%	0%	50%
		Extended Pet Stay	NA	25%	0%	50%
		Hazardous or Adventure Sports	NA	NA	NA	NA
		Upgradation to Business Class	NA	25%	0%	50%
		Study Interruption	NA	25%	0%	50%
		Accident of the Sponsor	NA	25%	0%	50%
		Maternity and Baby Cover	NA	25%	0%	50%
		Inter- Collegiate Sports Cover	NA	NA	NA	NA
		Coverage at Home Country	NA	NA	NA	NA



9	Claims/Claims Procedure	<ol style="list-style-type: none"> <li>1. In case of any Medical Treatment resulting into Hospitalization, We or Our Assistance Service Provider must be informed within 7 days of the beginning of such treatment.</li> <li>2. In case of any Accidental Bodily Injury that may result in a claim, then as a condition precedent to our liability: <ol style="list-style-type: none"> <li>a. You or someone claiming on your behalf must inform us or ASP in writing immediately and in any event within 15 days from the date of the accident and submit all documents to us or ASP within 15 days from the date of intimation.</li> <li>b. You must immediately consult a Doctor and follow the advice and treatment that he recommends.</li> <li>c. You should allow examination by our medical advisors if we or ASP ask for this.</li> <li>d. You or someone claiming on your behalf must promptly give us documentation and other information we ask for to investigate the claim or our obligation to make payment for it.</li> <li>e. In case of the Insured Person's death, someone claiming on his/her behalf must inform us in writing immediately and in any event within 15 days from the date of the accident and send us a copy of the postmortem report (if conducted) within 15 days from the date of intimation. *Note: Condonation of delay can be done by waiver of conditions (a) and (e) may be considered in extreme cases of hardship where it is proved to our satisfaction that under the circumstances in which the Insured Person was placed, it was not possible for the Insured Person or any other person claiming on his/her behalf to give notice or file claim within the prescribed time limit.</li> </ol> </li> <li>3. In all other cases, We or Our Assistance Service Provider must be informed of any event or occurrence that may give rise to a claim under this Policy within 15 days of occurrence of event.</li> <li>4. For cashless claims settlement, Assistance Service Provider would settle bills directly with hospitals and provide remittance. For reimbursement claims settlement, we would check and reimburse the payments directly to you.</li> <li>5. We shall settle or reject a claim, as the case may be within 15 days of submission of last necessary documents / information. All claims will be settled in accordance with the applicable regulatory guidelines, including IRDAI (Protection of Policyholders Interest Regulation), 2017. In case of delay in payment of any claim that has been admitted as payable by Us under the Policy terms and condition, beyond the time period as prescribed under IRDAI (Protection of Policyholders Interest Regulation), 2017.</li> <li>6. In case the claim is not settled within the specified timelines, then the claimant is entitled for interest at bank rate plus 2 percent from the date of receipt of intimation to till the date of payment. For the purpose of this clause, 'bank rate' shall mean the existing bank rate as notified by Reserve Bank of India, unless the extent regulation requires payment based on some other prescribed interest rate.</li> </ol>	E.32

**Claim Documents**

S.no.	Section Name	Documents
1.	Section 1 - Medical Treatment and Evacuation Exigencies Section 2 – Accidental Treatment and Evacuation Exigencies Section 6 – Dental Treatment Section 19- Daily Cash Allowance	<ul style="list-style-type: none"> <li>• All medical reports and records given to you by the treating facility.</li> <li>• Receipts for any expenses incurred that are covered by your policy.</li> <li>• Incidence Report (FIR) with police, in case of any road traffic accident or third-party involvement.</li> </ul>
2.	Section 3 – Personal Accident Section 4 - Accidental Death and Disability Cover (Common Carrier) Section 5- Home to Home Cover	<ul style="list-style-type: none"> <li>• Preliminary medical report describing the nature and extent of all injuries and diagnosis.</li> <li>• Death certificate (where applicable).</li> <li>• PTD/PPD (disability) certificate from the doctor (where applicable).</li> <li>• Copy of Tickets of common carrier on which insured is</li> </ul>
3.	Section 7 - Hijack Distress Cover	<ul style="list-style-type: none"> <li>• A police report confirming the incident. It should contain the passport number of the insured and period of hijacking. Letter from the common carrier clearly stating period of hijack and media coverage detail. (e.g photograph, videos, newspaper cutting etc</li> </ul>
4.	Section 8 – Delay in Checked-in Baggage	<ul style="list-style-type: none"> <li>• Your baggage tag receipts.</li> <li>• Written confirmation from the carrier stating the number of hours you were without your baggage.</li> </ul>
5.	Section 9 – Total Loss of Checked- in Baggage	<ul style="list-style-type: none"> <li>• A Property Irregularity Report. This should be obtained from the carrier as soon as you are aware of the damage or loss of your baggage.</li> <li>• Your baggage tag receipts.</li> </ul>
6.	Section 10 – Trip Cancellation Section 11 – Trip Abandonment	<ul style="list-style-type: none"> <li>• the reason for cancellation/ abandonment is medical, you will need to produce a medical certificate from the medical practitioner attending the patient. This must confirm the reason and need of cancellation/abandonment.</li> </ul>

			<p>Hospitalization records (a discharge summary) will do, too.</p> <ul style="list-style-type: none"> <li>• Death certificate (where applicable).</li> <li>• Copy of cancellation proof of booked tickets.</li> <li>• Copy of booking as well as cancellation confirmation from hotel/planned event's organizers</li> <li>• Details of new bookings of your travel with ticket, invoices and receipts (in case of Trip Abandonment).</li> </ul>	
		7. Section 12 – Trip Extension	<ul style="list-style-type: none"> <li>• Medical certificate with details of the date of admission and date of discharge together with the details of the injury or illness and treatment rendered.</li> <li>• In the case of a loss of passport, a copy of the FIR in relation to the complaint lodged with the police having jurisdiction over the place of loss.</li> <li>• A copy of the application lodged with the passport office for the issue of emergency travel document or duplicate passport.</li> </ul>	
		8. Section 13 – Compassionate Visit	<ul style="list-style-type: none"> <li>• Medical certificate stating details of the date of admission and date of discharge, together with the details of the injury or illness and the treatment rendered.</li> <li>• Bills and payment receipts for the visitor's newly booked air-ticket and accommodation.</li> </ul>	
		9. Section 14 – Escort of Minor Child	<ul style="list-style-type: none"> <li>• Bills and Payment receipts for previously booked common carrier ticket.</li> <li>• Bills and payment receipts for the newly booked common carrier ticket.</li> <li>• Medical certificate stating the circumstances and date of admission of the insured.</li> </ul>	
		10. Section 15 – Common Carrier Delay	<ul style="list-style-type: none"> <li>• Your security-stamped boarding pass for the flight which got delayed.</li> </ul>	

				<ul style="list-style-type: none"> <li>• Smartphone with a decent camera (5 megapixels and above).</li> </ul>	
		11	Section 16 – Missed Connection	<ul style="list-style-type: none"> <li>• Written confirmation from the carrier of the number of hours of delay, and any compensation received towards the delay.</li> <li>• Details of Alternate travel arrangements offered by the carrier, however not accepted.</li> </ul>	
		12	Section 17 – Personal Liability and Bail Bond	<ul style="list-style-type: none"> <li>• Proof of payment towards incurred expenses.</li> <li>• Copy of Court award or order, and the bail bond submitted</li> </ul>	
		13	Section 18 – All Risk Cancellation Charges	<ul style="list-style-type: none"> <li>• Copy of cancellation proof of your booked tickets.</li> <li>• Booking payment details</li> </ul>	
		14	Section 20 – Loss of Passport and Driving License	<ul style="list-style-type: none"> <li>• Written police report.</li> <li>• Receipts for expenses relating to the purchase of an emergency travel document and/or duplicate passport/License.</li> </ul>	
		15	Section 21 – Bounced Bookings	<ul style="list-style-type: none"> <li>• Written confirmation from the common carrier/accommodation provider/ticket provider stating the reason for service cancellation.</li> <li>• You need to send across the receipts of compensation provided, like refunds/travel-stay vouchers you received when you were asked to walk away.</li> <li>• Bills and payment receipts for transportation and alternative hotel bookings made.</li> </ul>	
		16	Section 22 – Loss of Baggage and Personal Belongings	<ul style="list-style-type: none"> <li>• Written Police Report (Loss should be reported to police within 24 hours of loss and damage).</li> <li>• Written confirmation of the loss or damage from the police or any other relevant authority.</li> <li>• Proof of purchase of the lost, stolen or damaged items.</li> </ul>	

		17	Section 23. Home Building and Contents	<ul style="list-style-type: none"> <li>• FIR from the local police station.</li> <li>• Estimate and final bill of repairs.</li> <li>• Invoice of owned articles which are covered by the policy.</li> </ul>	
		18	Section 24- Emergency Cash Assistance Service	<ul style="list-style-type: none"> <li>• Proof of purchase of the lost, stolen or damaged items.</li> </ul>	
		19	Section 25- Financial Emergency Cash	<ul style="list-style-type: none"> <li>• Written confirmation of the loss or damage from the police or any other relevant authority.</li> <li>• Proof of purchase of the lost, stolen or damaged items.</li> </ul>	
		20	Section 26 – Golfer’s Hole in One	<ul style="list-style-type: none"> <li>• Letter from USGA recognizing your achievement of Hole in One..</li> </ul>	
		21	Section 27 – Fraudulent Charges	<ul style="list-style-type: none"> <li>• Proof of Disabling of Card facility at core banking Proof (to be done within 24 hours from the date of realisation of loss)</li> <li>• Transactions/Unauthorised Use and loss liability.</li> <li>• Card Copy / Declaration from the Bank/ financial institution</li> <li>• Proof of settlement / chargeback/ other recoveries</li> <li>• Customer complaint letter regarding fraudulent / unauthorized transaction to the bank/ financial authority/ card issuer.</li> </ul>	
		22	Section 28. Extended Pet Stay	<ul style="list-style-type: none"> <li>• Receipts for fees paid to Pet house.</li> <li>• Pet Ownership Proof.</li> <li>• Proof confirming reason of your delay.</li> <li>• Letter from the airlines stating reason and duration of delay.</li> <li>• Medical records in case of Insured’s hospitalization</li> </ul>	
		23	Section 30. Up-gradation to Business Class	<ul style="list-style-type: none"> <li>• Current Economy class details/tickets.</li> <li>• Medical Practitioner Certificate</li> </ul>	

		<table border="1"> <tr> <td data-bbox="409 129 510 288">24</td> <td data-bbox="510 129 1149 288">Section 31. Study Interruption</td> <td data-bbox="1149 129 1883 288"> <ul style="list-style-type: none"> <li>• Letter from the airlines stating reason and duration of delay</li> <li>• Medical records in case of Insured's hospitalization</li> </ul> </td> </tr> <tr> <td data-bbox="409 288 510 443">25</td> <td data-bbox="510 288 1149 443">Section 32 – Accident of Sponsor</td> <td data-bbox="1149 288 1883 443"> <ul style="list-style-type: none"> <li>• Preliminary medical report describing the nature and extent of all injuries and diagnosis.</li> <li>• Death/PTD/PPD certificate from a registered medical practitioner (where applicable).</li> </ul> </td> </tr> <tr> <td data-bbox="409 443 510 624">26</td> <td data-bbox="510 443 1149 624">Section 33 – Maternity and Baby Cover</td> <td data-bbox="1149 443 1883 624"> <ul style="list-style-type: none"> <li>• All medical reports and records given to you by the treating facility.</li> <li>• Receipts for any expenses incurred that are covered by your policy.</li> </ul> </td> </tr> <tr> <td data-bbox="409 624 510 703">27</td> <td data-bbox="510 624 1149 703">Section 35 – Coverage at Home Country</td> <td data-bbox="1149 624 1883 703"> <ul style="list-style-type: none"> <li>• Return Ticket</li> <li>• Any other document required</li> </ul> </td> </tr> <tr> <td data-bbox="409 703 510 1046">28</td> <td data-bbox="510 703 1149 1046">Common Documents</td> <td data-bbox="1149 703 1883 1046"> <ul style="list-style-type: none"> <li>• Claim Form</li> <li>• KYC (Identity proof with Address) of the proposer, where claim liability is above Rs 1 Lakh as per AML Guidelines</li> <li>• Legal heir/succession certificate, wherever applicable</li> <li>• Any other relevant document required by Company/TPA for assessment of the claim.</li> </ul> </td> </tr> </table>	24	Section 31. Study Interruption	<ul style="list-style-type: none"> <li>• Letter from the airlines stating reason and duration of delay</li> <li>• Medical records in case of Insured's hospitalization</li> </ul>	25	Section 32 – Accident of Sponsor	<ul style="list-style-type: none"> <li>• Preliminary medical report describing the nature and extent of all injuries and diagnosis.</li> <li>• Death/PTD/PPD certificate from a registered medical practitioner (where applicable).</li> </ul>	26	Section 33 – Maternity and Baby Cover	<ul style="list-style-type: none"> <li>• All medical reports and records given to you by the treating facility.</li> <li>• Receipts for any expenses incurred that are covered by your policy.</li> </ul>	27	Section 35 – Coverage at Home Country	<ul style="list-style-type: none"> <li>• Return Ticket</li> <li>• Any other document required</li> </ul>	28	Common Documents	<ul style="list-style-type: none"> <li>• Claim Form</li> <li>• KYC (Identity proof with Address) of the proposer, where claim liability is above Rs 1 Lakh as per AML Guidelines</li> <li>• Legal heir/succession certificate, wherever applicable</li> <li>• Any other relevant document required by Company/TPA for assessment of the claim.</li> </ul>	
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26	Section 33 – Maternity and Baby Cover	<ul style="list-style-type: none"> <li>• All medical reports and records given to you by the treating facility.</li> <li>• Receipts for any expenses incurred that are covered by your policy.</li> </ul>																
27	Section 35 – Coverage at Home Country	<ul style="list-style-type: none"> <li>• Return Ticket</li> <li>• Any other document required</li> </ul>																
28	Common Documents	<ul style="list-style-type: none"> <li>• Claim Form</li> <li>• KYC (Identity proof with Address) of the proposer, where claim liability is above Rs 1 Lakh as per AML Guidelines</li> <li>• Legal heir/succession certificate, wherever applicable</li> <li>• Any other relevant document required by Company/TPA for assessment of the claim.</li> </ul>																
Any other additional document required on case-to-case basis.																		
10	Policy Servicing	<p><b><u>Call Centre Details of the Insurer</u></b>  Toll Free: 1800-103-4448  For International Travel Claims: +91-7303470000  Email: travelclaims@godigit.com  Website: <a href="https://www.godigit.com">https://www.godigit.com</a></p> <p><b><u>Details of Company Officials:</u></b> NA</p> <p>With intent to provide better and fast service to our customers, our claims process is paperless. You may get in touch with the above email id and call centre number we assist you in case of any Policy Servicing issues.</p>	E.33															

<p>11</p>	<p>Grievances/ Complaints</p>	<p>The Company is committed to extend the best possible services to its customers. However, if you are not satisfied with our services and wish to lodge a complaint, please feel free to call our 24X7 Toll free number 1800-103-4448 or For international Travel +91-7303470000 you may email to the customer service desk at <a href="mailto:hello@godigit.com">hello@godigit.com</a> or <a href="mailto:travelclaims@godigit.com">travelclaims@godigit.com</a> After investigating the matter internally and subsequent closure, we will send our response.</p> <p>If Insured person is not satisfied with the redressal of grievance through one of the above methods, insured person may contact the grievance officer at <a href="mailto:grievance@godigit.com">grievance@godigit.com</a></p> <p>For updated details of grievance officer, kindly refer the link: <a href="https://www.godigit.com/claim/grievance-redressal-procedure">https://www.godigit.com/claim/grievance-redressal-procedure</a></p> <p>If Insured person is not satisfied with the redressal of grievance through above methods, the insured person may also approach the office of Insurance Ombudsman of the respective area/region for redressal of grievance as per Insurance Ombudsman Rules 2017</p> <p>Grievance may also be lodged at IRDAI Integrated Grievance Management System- <a href="https://irdai.gov.in/igms1">https://irdai.gov.in/igms1</a></p> <p>For updated details of Ombudsman details, request to please check Council of Insurance Ombudsmen website available on <a href="https://www.cioins.co.in/Ombudsman">https://www.cioins.co.in/Ombudsman</a></p>	<p>E.33</p>
<p>11</p>	<p>Things you need to know</p>	<p><b><u>Free Look Period</u></b></p> <p>This option is available in case of policies term of one year and more</p> <p>You have thirty (30) <b>days</b> from the date of receipt of the first policy document (but prior to start of the trip) to review the terms and conditions of this policy. You can cancel the policy during this time by simply stating your reasons for doing so. And if you haven't made any claim during the Free Look Period, you will get a refund of the premium subject to:</p> <ol style="list-style-type: none"> <li>A deduction of the expenses incurred by us on your medical examination, stamp duty charges if the risk has not commenced.</li> <li>When the risk under all the covers have commenced the stamp duty charges, medical examination charges &amp; proportionate risk premium for period on cover would be deducted.</li> <li>Where risk has commenced only on a part of the cover, such proportionate risk premium commensurate with the risk covered during such period.</li> <li>The request received for cancellation of the policy during free look period shall be processed and the premium shall be refunded within 7 days of receipt of such request.</li> </ol> <p><b><u>Policy Renewal</u></b></p> <p>Multi-Trip Policy can be renewed subject to below conditions:</p> <ul style="list-style-type: none"> <li>This Policy will automatically terminate at the end of the Policy Period. We are under no obligation to give notice that it is due for renewal, or to renew it or to renew it on the same terms whether as to premium or otherwise.</li> </ul>	<p>E.29</p>

		<ul style="list-style-type: none"> <li>• In respect of all applications for renewal received by Us before the end of the Policy Period, we will ordinarily offer renewal terms unless We believe that You or any Insured Person or anyone acting on Your behalf or on behalf of an Insured Person has acted in a dishonest or fraudulent manner under or in relation to this Policy or the renewal of the Policy poses a moral hazard.</li> <li>• We shall be entitled to call for and receive any information or documentation before agreeing to renew the Policy, and in renewing We are not bound to renew for all Insured Persons.</li> <li>• All applications for renewal of the Policy must be received by Us at least 30 days before the end of the Policy Period.</li> </ul> <p><b><u>Migration and Portability:</u></b> NA</p> <p><b><u>Change in Sum Insured:</u></b> NA</p> <p><b><u>Moratorium Period:</u></b> NA</p>	E.I.20
12	Your Obligations	<p>Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may affect the claim settlement.</p> <p>Please Disclose any change in Material Information during the policy period.</p> <p>Material Information for the purpose of this policy shall mean all relevant information sought by the Company in the proposal form and other connected documents to enable it to take informed decision in the context of underwriting the risk.</p>	