

**IFFCO-TOKIO GENERAL INSURANCE CO. LTD**

Regd. Office: IFFCO Sadan, C-1, Distt. Centre, Saket, New Delhi-110017

**PROSPECTUS****TRAVEL PROTECTOR INSURANCE POLICY****UIN:- IRDAN106P0015V01200102**

IFFCO-Tokio Travel protector Policy provides comprehensive coverage for Health, Personal Accident, Baggage (including delay of baggage), Passport, Hijack Distress Allowance, Financial Emergency Assistance, Hospital Daily Allowance and Personal Liability. The combination of coverage will obviously depend upon the limit of the Sum Insured as well as the country to which the Insured person is traveling.

**COVERAGE****SECTION 1 – HEALTH COVER**

<b>WHAT IS COVERED</b>	<b>WHAT IS NOT COVERED</b>
<p>If the insured person falls ill or contracts any disease or sustains an accident whilst abroad during the Period of Insurance, then We will reimburse the following costs:</p> <p>1. Medical Expenses: Costs incurred for medically necessary treatment during a temporary stay abroad less the deductible stated in the Schedule. Within the meaning of these coverages, treatment is deemed to include only the following :</p> <ul style="list-style-type: none"> <li>(a) Out patient treatment.</li> <li>(b) In patient treatment in a local hospital at the place the insured person is staying or at the nearest suitable hospital.</li> <li>(c) Medical aid that is necessary as part of the treatment for broken limbs or injuries (e.g. plaster casts, bandages and walking aids) prescribed by a physician.</li> <li>(d) Radiotherapy, heat therapy or phototherapy and other such treatment prescribed by a physician.</li> <li>(e) X-Ray, Diagnostic tests.</li> <li>(f) Cost of transportation including necessary medical care enroute by recognized emergency services for medical attention at the nearest hospital or from the nearest available physician.</li> </ul>	<p>We will not pay:</p> <ul style="list-style-type: none"> <li>1. For deductible mentioned in the Schedule except in case of Hospital Daily Allowance.</li> <li>2. For treatment abroad if that is the sole reason or one of the reasons for temporary stay abroad.</li> <li>3. Medical expenses / services, the need for which arises out of a pre-existing condition.</li> <li>4. For a treatment which could reasonably be delayed until the insured person's return to the Republic of India. The question of what can or what cannot be reasonably delayed will be decided jointly by the treating physicians and Paramount Health Services/Europ Assistance Medical Team.</li> <li>5. For treatment of orthopedic, degenerative or oncologic diseases, unless the medical assistance provided abroad involves unforeseen emergency measures to save the insured person's life or measures solely designed to relieve the acute pain.</li> <li>6. For charges in excess of reasonable and customary charges.</li> <li>7. For any costs incurred in connection with cancer treatment, unless the medical assistance provided abroad involves unforeseen emergency measures to save the insured person's life or measures solely designed to relieve the acute pain.</li> </ul>



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<p>(g) Cost of being transferred to a special clinic if this is medically necessary and prescribed by a Physician.</p> <p>(h) Life saving unforeseen emergency measures or measures solely designed to relieve acute pain provided to the insured person by medical assistance for disease / accident including their consequences arising out of a pre-existing condition. This coverage is specifically subject to General Exclusions (2) of this Policy and will not include "Transportation" described in Item 3 of "What Is Covered" of Section 1 of the Health Cover of this Policy.</p> <p>2. Dental treatment: In principle for only acute anaesthetic treatment of a natural tooth or teeth upto the maximum limit shown in the Schedule. However dental treatment rendered necessary as a result of a covered accident shall be up to the maximum limit of medical expenses and deductible shown in the Schedule.</p> <p>3. Transportation:</p> <p>(a) Extra costs of medically necessary and prescribed transportation from the foreign country to the insured person's permanent country of residence provided that -</p> <p>i) Extra costs in the event of transportation home are the additional costs arising for the return journey home as a consequence of the insured event.</p> <p>ii) If the insured person is transportable from a medical point of view, it is the decision of Paramount Health Services/ Europ Assistance whether the insured person is repatriated to India or not.</p> <p>(b) Additional extra costs for an accompanying person, if it is medically necessary or officially required that the insured person be accompanied in this way.</p>	<p>8. For treatments relating to the removal of physical flaws or anomalies (cosmetic treatment).</p> <p>9. For any costs incurred in connection with rest cures or recuperation at a spa or health resort, sanatorium, convalescence home or similar institution.</p> <p>10. For any costs related to mental or psychiatric disorders.</p> <p>11. For pregnancy, childbirth and their consequences. In the event of acute complications in the course of pregnancy however, We will indemnify within the scope of the Policy, medical measures to directly avert danger to the life of the mother and / or child, on the condition that the pregnant woman has not reached the age of 38 and the 30th week of the pregnancy is not yet completed.</p> <p>12. For medical treatment of typical complaints suffered during pregnancy and their consequences, including changes in the chronic conditions as a result of pregnancy</p> <p>13. For check ups during pregnancy or treatment of the pregnancy.</p> <p>14. For treatment by relatives.</p> <p>15. For rehabilitation and physiotherapy or the costs of prostheses ( artificial limbs etc.)</p> <p>16. For any other costs not listed as indemnifiable under "What is Covered".</p> <p>17. For any claim in respect of Hospital Daily Allowance for the first 48 hours</p>
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<p>(c) In the event of the death of the insured person due to illness/ injuries covered on the trip abroad, extra costs of transporting the mortal remains of the deceased back home or up to an equivalent amount for a local burial or cremation in the country where the death occurred up to the limit stipulated in the Schedule.</p> <p>3. Balance Period of Policy + 30 days:</p> <p>If Paramount Health Services/ Europ Assistance advises that the continued treatment in the Republic of India is appropriate, then We will pay the medical expenses incurred in India for the same illness/ bodily injury contracted abroad following the transportation home at the usual customary level, for treatment received within the Insurance Period or for a maximum of 30 days beyond the Insurance Period provided the disease/ injury/ illness is contracted within the Insurance Period.</p> <p>4. Hospital Daily Allowance: In the event of the insured person being hospitalised for a period of more than 48 hours and also if We have accepted a liability under the Medical Expenses cover aforementioned, then We will pay You / insured person US \$ 30 for each day the insured person stays in a hospital subject to the maximum limit as mentioned in the Schedule.</p>	
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### SECTION 2 – TOTAL LOSS OF BAGGAGE INCLUDING DELAY OF BAGGAGE

WHAT IS COVERED	WHAT IS NOT COVERED
<p>We will reimburse for total loss of baggage caused by a carrier ( i.e. airline, coach operator, ferry company etc.) up to the limits stipulated in the Schedule provided that:</p> <ol style="list-style-type: none"> <li>1. The amount payable in respect of any one article, pair or set is limited to the amount stated in the Schedule.</li> </ol>	<p><b>We will not pay –</b></p> <ol style="list-style-type: none"> <li>1. For valuables and money as defined, all kinds of securities and tickets. The valuables should at all times be carried on the insured person.</li> </ol>



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<ol style="list-style-type: none"> <li>You made a report to the Police within 24 hours after You become aware of the loss.</li> <li>You provide all the Reports concerning the loss to Paramount Health Services/ Europ Assistance.</li> <li>We will pay the benefit on Market Value. Market Value is the sum required to purchase new items of the same kind and quality less a figure representing the condition of the articles insured ( age, wear, usage etc.)</li> </ol> <p><u>Additional Benefits: (Delay of Baggage)</u></p> <p>We will pay up to the limit of cover shown in the Schedule for costs of necessary emergency purchases of essential items in the event of the insured person suffering a temporary loss of his / her baggage while being transported during the journey provided that:</p> <ol style="list-style-type: none"> <li>The delay of baggage is more than 12 hours from the scheduled arrival time at the destination and relates to delivery of baggage that has been checked in by the carrier.</li> <li>You give Us written proof of delay from the carrier.</li> <li>You give Us the receipts of the essential personal items You buy.</li> <li>Any claim under this additional benefit will be offset against any claim payable under Total Loss of Baggage.</li> </ol>	<ol style="list-style-type: none"> <li>For loss of property unless the Property Irregularity Report has been obtained from the carrier after the discovery of loss by the insured person.</li> <li>For any partial loss. However loss of individual units of baggage will be considered as a total loss.</li> <li>For items valued in excess of US \$ 100 without proof of ownership.</li> <li>For losses arising from any delay, detention, confiscation or distribution by custom s officials or other public authorities.</li> </ol>
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### SECTION 3 HIJACK DISTRESS ALLOWANCE

WHAT IS COVERED	WHAT IS NOT COVERED
In the event of air or sea common carrier in which You or the insured person is travelling is hijacked on the trip abroad during the Period of Insurance for more than 12 hours, and the journey is interrupted, then We will pay US \$ 125 for each day to each insured person up to the maximum limit mentioned in the Schedule.	<p><b>We will not pay for:</b></p> <ol style="list-style-type: none"> <li>First 12 hours of hijacking</li> <li>More than US \$ 875 in respect of one insured person during the Period of Insurance.</li> <li>Any claim where the insured person is considered as the principal or accessory in the hijacking.</li> </ol>



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	4. Any claim as a consequence of change in the direction of the route of the carrier due to traffic, weather, fuel shortage, technical snag or security reasons.
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### SECTION 4. LOSS OF PASSPORT

WHAT IS COVERED	WHAT IS NOT COVERED
In the event that the passport belonging to the insured person is lost, We will pay up to the limit stipulated in the Policy Schedule for the reimbursement of actual expenses necessarily and reasonably incurred in connection with obtaining a duplicate or fresh passport.	<b>We will not pay for:</b>  Loss of the passport due to delay or confiscation or detention by the customs, police or public authorities.  Loss of the passport due to theft unless it has been reported to the Police within 24 hours of You or the insured person becoming aware of the theft and a written Police Report obtained.  Loss of the passport due to it being left unattended or forgotten by You or the insured person in a public place or public transport, hotel or apartment.  Loss or theft of the passport from a private place or from a private vehicle unless it was located in a locked hotel room or apartment and forcible and violent entry was used to gain access to it.

### SECTION 5. FINANCIAL EMERGENCY ASSISTANCE COVER.

WHAT IS COVERED	WHAT IS NOT COVERED
In the event of the insured person getting into a financial emergency due to theft, pilferage,	We will not pay for:  i. Any claim reported in excess of 30 days after the occurrence of the incident, giving rise to a claim.



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robbery, dacoity of his travel funds, We will pay up to the amount stipulated in the Schedule.	<ul style="list-style-type: none"> <li>ii. Any loss or shortage due to currency fluctuation, errors, omission, exchange loss or depreciation in value.</li> <li>iii. Any loss not reported to the Police having jurisdiction at the place of loss within 24 hours of the incident and a written Report obtained.</li> <li>iv. Any claim in respect of loss of travelers' cheques not immediately reported to the local branches or agents of the issuing authority.</li> <li>v. Loss of money not kept in the personal custody of the insured person.</li> </ul>
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### SECTION 6. PERSONAL LIABILITY

WHAT IS COVERED	WHAT IS NOT COVERED
In the event the insured person becomes legally liable to a third party under statutory liability provisions in private law for an incident which results in death, injury or damage to the health of a person or damage to his/ her properties, We will pay up to the limit stipulated in the Schedule provided that the incident takes place on a trip abroad during the Period of Insurance.	<p>We will not pay for:</p> <ul style="list-style-type: none"> <li>I. Any claim up to the deductible stated in the Schedule. The deductible will apply to each insured event and shall be borne by the insured person.</li> <li>II. Any claim arising from employer's liability or contractual liability or through special promises made by the insured person.</li> <li>III. Any claim of personal liability of the insured person towards his/ her family, relations and travelling companions, whether personal or official.</li> <li>IV. Any claim resulting from transmission of an illness or disease by the insured person.</li> <li>V. Any claim or damage resulting from professional activities by the insured person.</li> <li>VI. Any claim for liability arising directly or indirectly from or due to: <ul style="list-style-type: none"> <li>a) As a keeper or owner of animals.</li> <li>b) Ownership, possession of vehicles, aircrafts, watercrafts, or activities of the insured person in parachuting, hang-gliding, hot air ballooning or use of firearms.</li> <li>c) Any willful, malicious or unlawful act.</li> <li>d) Insanity, the use of any alcohol/ drugs (except as medically prescribed) or drug addiction.</li> <li>e) Any supply of goods or services.</li> </ul> </li> </ul>



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	f) Any ownership or occupation of land or buildings other than the occupation only of any temporary residence.
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### Limit of Liability

Our liability for this Section shall be limited to the maximum per insured trip equal to the Sum Insured mentioned in the Schedule

### SPECIAL CONDITIONS:

1. Our liability comprises checking the question of personal liability, contesting unjustified claims and providing indemnity for damages which You or the insured person has to pay. For indemnity to be provided against damages, the damages must be payable under an acceptance of liability given or approved by Us or under a judicial decision.



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2. If there is a legal action with the claimant or his/ her heirs or assignees over a personal liability claim, We may conduct the legal action at Our expenses in the name of the insured person and You or the insured person will allow us to do so.
3. If an event insured against occurs which may result in a personal liability claim falling within the cover provided and if there are criminal proceedings relating to this event and if in these proceedings, We wish to appoint a defence counsel for You or the insured person or approve such an appointment, We will pay the costs of this counsel.
4. If We wish to settle a personal liability claim by accepting liability or making an out of court settlement and cannot do so due to resistance by the insured person, We shall not be liable to pay the extra expenditure incurred from the date of refusal in respect of main sum, interest and cost.

WHAT IS COVERED	WHAT IS NOT COVERED
<p>If the insured person meets with an accident on a trip abroad which leads to death or subsequent disablement of the insured person, We will provide insurance services to the insured person in the following way:</p> <ol style="list-style-type: none"> <li>1. <u>Death of insured person</u>: If following an accident that causes death of the insured person within one year from the date of accident, We will pay to the legal heirs of the insured person the Sum Insured mentioned in the Schedule.</li> <li>2. <u>Permanent disablement of the insured person</u>: If following an accident which causes permanent impairment of the insured person's mental or physical capabilities, We will pay the following benefits depending upon the degree of disablement as provided in the Table of Benefits provided that: <ol style="list-style-type: none"> <li>a) The disablement must occur within a year of the accident</li> <li>b) The disablement must be confirmed and claimed for prior to the expiry of a further period of 3 months</li> </ol> </li> </ol>	<p>We will not pay for:</p> <ol style="list-style-type: none"> <li>1. Accidents due to mental disorders or disturbances of consciousness, strokes, fits which affect the entire body and pathological disturbances caused by the mental reaction.</li> <li>2. Damage to health caused by curative measures, radiation, infection and poisoning except where these arise from an accident.</li> <li>3. Any payment under this Section during any one Period of Insurance by which Our liability in that period would exceed the sum payable in the event of death.</li> <li>4. More than US \$ 5000 in respect of death if the insured person is below the age of 16 years at the time of effecting this insurance.</li> <li>5. Any other claim after a claim for death has been admitted and becomes payable.</li> <li>6. Any claim which arises out of an accident where the cause has to do with the operation of an aircraft or which occurs during parachuting except when the insured person is flying as a passenger on a multi engine aircraft.</li> <li>7. Any claim arising out of an accident relating to pregnancy or childbirth, venereal disease or infirmity.</li> </ol>





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<u>TABLE OF BENEFITS</u>	<b>PERCENTAGE OF SUM INSURED MENTIONED IN THE SCHEDULE</b>
<b>1. <u>Death</u></b>	100
<b>2. Loss or Inability to function of</b>	
a) An arm at the shoulder joint	70
b) An arm to a point above the elbow joint	65
c) An arm below the elbow joint	60
d) A hand at the wrist	55
e) A thumb	20
f) An index finger	10
g) Any other finger	5
h) A leg above the center of the femur	70
i) A leg up to a point below the femur	65
j) A leg to a point below the knee	50
k) A leg up to the center of the tibia	45
l) A foot at the ankle	40
m) A big toe	5
n) Some other toe	2
o) An eye	50
p) Hearing in one ear	30
q) Sense of smell	10
r) Sense of taste	5

### SPECIAL CONDITIONS APPLYING TO THE PERSONAL ACCIDENT SECTION

1. In the event of partial loss or impairment of the function of one of the above parts of the body or senses, the appropriate proportion of the percentage stated in the Table of Benefits will be considered by the Medical Team of Paramount Health Services.
2. If the accident impairs a number of physical or mental functions, the degree of disablement given in the Table of Benefits will be added together, but not exceeding 100% of the Sum Insured stated in the Schedule.
3. If the accident affects parts of the body or senses whose loss or inability to function is not dealt with above, the governing factor in such a case will be how far normal physical or mental capabilities are impaired, solely from a medical point of view as ascertained by Paramount Health Services.
4. If the accident affects any physical or mental function, which was already impaired beforehand, a deduction will be made equal in amount to this prior disablement.
5. If the insured person dies for a reason unconnected with the accident within a year of the accident or for whatever reasons after more than a year from the accident, and if a claim for disablement payment had arisen, then the payment will be made in accordance with the degree of disablement which would have been expected to exist from the findings of the last medical examination made.
6. In the event of permanent disablement, the insured person will be under obligation:
  - a) To have himself / herself examined by doctors appointed by Us or on Our behalf and We will pay the costs involved thereof.
  - b) To authorize doctors providing treatments or giving expert opinion, other insurers and any other authority to supply Us any information that may be required. If the obligations are not met with due to whatsoever reasons, We may be relieved of Our liability to pay.
7. In the event of permanent disablement, a disablement payment cannot be claimed prior to completion of the healing process or within one year of occurrence of the accident, whichever is earlier.



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### GENERAL CONDITIONS:

1. **Reasonable Precaution:** You/Insured Person shall take all reasonable precautions to prevent injury or damage in order to minimize claims.
2. **Disclosure to information norm:** This means the Policy shall be void and all premium paid hereon shall be forfeited to us, in the event of misrepresentation, mis-description or non-disclosure of any material fact
3. **Free Lookup Period:** You will be allowed a period of at least 15 (fifteen) days from the date of receipt of the policy to review the terms and conditions of the policy and to return the same if not acceptable stating the reasons therein for doing so. If you have not made any claim during the free look period, then you shall be entitled to:
  - I. A refund of the premium paid less any expenses incurred by us
  - II. Where the risk has already commenced and the option of return of the policy is exercised by you, a deduction towards the proportionate risk premium for period on cover less any expenses incurred by us
  - III. Where only a part of the risk has commenced, such proportionate risk premium commensurate with the risk covered during such period less any expenses incurred by us on medical examination of the insured persons and the stamp duty charges.
  - IV. You/the insured shall be allowed a period of thirty days from date of receipt of the Policy document to review the terms and conditions of the Policy, and to return the same if not acceptable (This option is available in case of policies with term of one year or more.
4. **Changes in Circumstances:** you must inform us, as soon as reasonably possible of any change in information you have provided to us about Insured person(s) which may affect the Insurance cover provided e.g. duty, business, occupation and obtain from us an endorsement to this effect.
5. **Claim Procedure and Requirements:** An event, which might become a claim under the policy, must be reported to us as soon as possible. In case of death, written notice also of death must, unless reasonable cause is shown, be given before internment/ cremation and in any case, within one calendar month after the death, and in the event of loss of sight or amputation of limbs, written notice thereof must also be given within one calendar month after such loss of sight or amputation. A written statement of the claim will be required and a claim form will be provided.  
You or Your personal representative must give immediate written notice but within 14 (fourteen) days of occurrence of injury, disease.

All certificates, information and evidence from a Medical Attendant or otherwise required by us shall be furnished by you, your personal representative/assignee in the manner and form as we may prescribe. In such claims your legal representative, Nominee, beneficiary will allow OUR representative to carry out examination and ascertain details if and when we may reasonably require and in the event of death get the post-mortem examination done in respect of body of Insured Person(s). In the event of claim in respect of loss of sight and loss of speech, the



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Insured person(s) shall undergo at your expenses such operations or treatment as we may reasonably deem desirable.

6. **Renewal:** Renewal shall not be refused unless justified on grounds of fraud, moral hazard or misrepresentation or non-cooperation by the insured, provided, however, that you apply for renewal and remit the requisite premium before the expiry of this policy.
7. **Cancellation** The policyholder may cancel his/her policy at any time during the term, by giving 7 days' notice in writing. The Insurer shall
  - a. refund proportionate premium for unexpired policy period, if the term of policy upto one year and there is no claim (s) made during the policy period.
  - b. refund premium for the unexpired policy period, in respect of policies with term more than 1 year and risk coverage for such policy years has not commenced.

We may cancel the Policy at any time on grounds of mis-representation, non-disclosure of material facts, fraud by the Insured Person, by giving 15 days' written notice. There would be no refund of premium on cancellation on grounds of mis-representation, non-disclosure of material facts or fraud.

8. **Automatic Termination of Insurance:** The coverage for the Insured Person(s) shall automatically terminate in the case of his/ her (Insured Person) demise or exhaustion of Sum Insured. However, the cover shall continue for the remaining Insured Persons till the end of Policy Period. The other insured persons may also apply to renew the policy. In case, the other insured person is minor, the policy shall be renewed only through any one of his/her natural guardian or guardian appointed by court. All relevant particulars in respect of such person (including his/her relationship with the insured person) must be submitted to the company along with the application.

Provided no claim has been made, and termination takes place on account of death of the insured person, due to reasons apart from what stands covered under the policy, pro-rata refund of premium of the deceased insured person for the balance period of the policy will be effective.
9. **Arbitration:** 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 the decision of the sole arbitrator to be appointed in writing by the parties to or if they cannot agree upon a single arbitrator within 30 (thirty) days of any party invoking arbitration the same shall be referred to a panel of three arbitrators, comprising of two arbitrators, one to be appointed by each of the parties to the dispute/difference and the third arbitrator to be appointed by two such arbitrators and arbitration shall be conducted under and in accordance with the provisions of the arbitration and conciliation act, 1996. It is clearly agreed and understood that no difference or dispute shall be referred to arbitration as herein before provided, if we have disputed or not accepted liability under or in respect of this policy. It is understood, however, that the insured shall have the right at all times during currency of the policy to communicate only, with the leading or issuing office in all matters pertaining to this insurance.
10. **Disclaimer Clause:** If we shall disclaim our liability in any claim and such claim shall not have been made subject matter of suit in a court of law within 12(twelve) months from date of disclaimer, then the claim shall for all purpose be deemed to have been abandoned and shall not thereafter be recoverable under this policy.



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11. **Withdrawal & Alteration of Policy Conditions:** The policy terms and conditions may undergo alteration as per the IRDA Health Regulation. However the same shall be duly notified to you at least three months prior to the date when such alteration or revision comes into effect by registered post at your last declared correspondence address. The timeliness for revision in terms and rates shall be as per the IRDA Health Regulation. A product may be withdrawn with the prior approval of the Authority and information of withdrawal shall be given to you in advance as per the IRDA guidelines with details of options provided by us. If we do not receive your response on the intimation of withdrawal, the existing product shall be withdrawn on the renewal date and you shall have to take a new policy available with us, subject to portability conditions
12. **Grievance or Complaint:** You may register a grievance or complaint by visiting our website [www.itgi.co.in](http://www.itgi.co.in) you may also contact the branches from where you have bought the policy or grievance officer who can be reached at our corporate office.

### Provision for Senior Citizens

Separate channel to address the related claims and grievances of senior citizen are mentioned below:

Claims/ Grievance: [seniorcitizengrievance@iffcotokio.co.in](mailto:seniorcitizengrievance@iffcotokio.co.in)

Toll free: 1800-103-5498  
Address: Chief Grievance Officer  
IFFCO-Tokio General Insurance Co Ltd  
IFFCO Tower, Plot no. 3  
Sector -29, Gurgaon – 122001

### Get in touch with us

In case of any query, the You may contact Us through:

Company Website: [www.iffcotokio.co.in](http://www.iffcotokio.co.in)

Toll free: 1800-103-5499

E-mail: [support@iffcotokio.co.in](mailto:support@iffcotokio.co.in)

Address : IFFCO-Tokio General Insurance Co Ltd  
IFFCO Tower, Plot no. 3  
Sector -29, Gurgaon – 122001

### Redressal Of Grievance

In case of any grievance, You may contact Us through:

Website: <https://www.iffcotokio.co.in/customer-services/grievance-redressal>

Toll free: 1800-103-5499

E-mail: [support@iffcotokio.co.in](mailto:support@iffcotokio.co.in)

Address: IFFCO-Tokio General Insurance Co Ltd  
IFFCO Tower, Plot no. 3  
Sector -29, Gurgaon – 122001

Insured person may also approach the grievance cell at any of the company's branches with the details of grievance.

The list of branches with addresses are available at <https://www.iffcotokio.co.in/contact-us>

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 [chiefgrievanceofficer@iffcotokio.co.in](mailto:chiefgrievanceofficer@iffcotokio.co.in)



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For updated details of grievance officer, kindly refer the link

<https://www.iffcotokio.co.in/contact-us/customer-services/grievance-redressal>

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.

We shall comply with the award of the Insurance Ombudsman within 30 days of its receipt by Us. We shall be liable for a penalty of Rs 5,000/- per day in case of non-compliance in addition to the penal interest liable to be paid by Us under The Insurance Ombudsman Rules, 2017.

Grievance may also be lodged at Grievance Portal of IRDAI- 'Bima Bharosa' and tracked through your mobile number.

- <https://bimabharosa.irdai.gov.in/Home/Home>

For Updated List of Ombudsman Address, Please visit:

- <https://www.cioins.co.in/Ombudsman>

### **GENERAL EXCLUSIONS**

We will not pay for any compensation in respect of death, Injury or disablement of the Insured Person.

1. As consequence of war, invasion, act of foreign enemy, hostilities (whether war be declared or not) civil war, rebellion, revolution, insurrection, mutiny military or usurped power, confiscation, seizure, capture, assault, restraint, nationalization, civil commotion or loot or pillage in connection herewith.
2. Directly or indirectly caused by contributed to by or arising from:
  - (a) Ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. For the purpose of this exclusion, combustion shall include any self sustaining process of nuclear fission.
  - (b) The radioactive, toxic, explosive or the hazardous properties of any nuclear assembly or nuclear component.

### **Documents required for settlement of claims:**

- Claim form.
- Doctor's report, bills.
- Police report/post mortem report in case of accidental death.
- Leave certificate from employer in case of temporary disablement.

**NOTE:** This literature only spells out the salient features of the cover, for details kindly refer to the terms conditions and exceptions of the policy.