

Royal Sundaram General Insurance Co. Limited

Corp. Office : Vishranthi Melaram Towers, No. 2 / 319, Rajiv
Gandhi Salai (OMR) Karapakkam, Chennai - 600097. Regd.
Office : 21, Patullos Road, Chennai - 600 002

CUSTOMER INFORMATION SHEET / KNOW YOUR POLICY

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

SI No	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy Clause Number
1	Name of Insurance Product / Policy	Bharat Yatra Suraksha, Royal Sundaram General Insurance Co. Limited	
2	Policy Number	xxxxxxx	
3	Type of Insurance Product / Policy	Travel	
4	Sum Insured (Basis) (Along with amount)	Individual Sum Insured – Rs. xxxx	

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5	Policy Coverage (What the policy covers?)	I. Hospitalization Expenses due to Accident including expenses for emergency medical evacuation II. Accidental Death III. Permanent Total Disability (PTD) IV. Permanent Partial Disability (PPD) V. Repatriation Of Mortal Remains VI. Automatic trip extension Optional Benefits : I. Compassionate Allowance II. Missed Flight Connection III. Loss Of Checked-in Baggage (applicable only for air travel) IV. Trip Delay (applicable only for air travel) (beyond 3 hour) V. Carrier Cancellation (applicable only for air travel) VI. Trip Cancellation & Interruption	Bharat Yatra Suraksha Section : D
6	Exclusions (What the Policy does not cover)	a. Pre-existing illness/disease/injury/condition. b. Self-inflicted injury, attempted suicide c. Insured taking part in naval, military or airforce operations d. War, invasion, acts of foreign enemy, civil war and	Bharat Yatra Suraksha Section : E

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		similar activities e. Ionising radiations, contamination by radioactivity, nuclear fuel and similar activities f. Insured participating in professional sports g. Claims arising from Pregnancy h. Confiscation or detention by custom's officials i. Influence of drugs, alcohol or intoxicants j. Liability arising out of accidents to the journey through two wheeled motorised vehicles k. Liability arising out of journey by the Insured Person through one's own motor vehicle. l. Liability arising out of journey where the Insured Person is driving the common carrier. m. Liability arising out of Insured engaging in any criminal or illegal act n. Participation in an actual or attempted felony, riot, crime, misdemeanour, or civil commotion. o. Act of Terrorism by the Insured or which is abetted by the Insured in any manner. Claims increased by the Insured Person's own act or omission	
7	Waiting Period	Not Applicable	

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8	Financial limits of coverage		
	i.Sub-limit	I. Not Applicable	
	ii.Co-payment	II. Not Applicable	
	iii.Deductible	III. Not Applicable	
	iv.Any other limit	IV. Not Applicable	
9	Claims/Claims Procedure	CLAIM PROCEDURE : Procedure for Cashless claims: (applicable only to Section-1: Hospitalization cover) (i) Treatment may be taken in a network provider and is subject to pre authorization by the Company or its authorized Third Party Administrator (TPA). (ii) Cashless request form available with the network provider or Third Party Administrator (TPA) shall be completed and sent to the Company/TPA. (iii) The Company/ Third Party Administrator (TPA) upon getting cashless request form and related medical information from the insured person/ network provider will issue pre-authorization letter to the hospital after verification. (iv) At the time of discharge, the insured person has to verify and sign the discharge papers, pay for non-medical and inadmissible expenses. (v) The Company or Third Party Administrator (TPA) reserves the right to deny pre-authorization in case the insured person is unable to provide the relevant details. (vi) In case of denial of cashless access, the insured person may obtain the treatment as per treating doctor's advice and submit the claim documents to the Company / Third Party Administrator (TPA) for reimbursement Procedure for reimbursement of claims For reimbursement of claims, the insured person shall submit	Bharat Yatra Suraksha Section : F

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		the necessary documents to the insurer within thirty days of date of discharge from hospital. Notification of Claim: Intimation about an event or occurrence that may give rise to a claim under this policy must be given within 30 days of its happening. i. Claims for insurance benefits must be submitted to the Company not later than one (1) month after the completion of the treatment or after transportation of the mortal remains/ burial in the event of Death. ii. If any treatment for which a claim may be made is to be taken and that treatment requires Hospitalisation in an Emergency, the company shall be informed within 24 hours of the admission of the insured person in Hospital. Note: The Company will examine and relax the time limit mentioned herein above depending upon the merits of the case. Documents to be submitted: Basic documents required for all claims include a) Duly completed claim form b) Photo Identity Proof of the insured person c) Any other relevant document required by the Company for assessment of the claim d) NEFT Details (to enable direct credit of claim amount in bank account) and cancelled cheque e) KYC (Identity proof with Address) of the proposer, where claim liability is above Rs 1 Lakh as per AML Guidelines	
10	Policy Servicing	Call Center number of the insurer : 1860 258 0000 / 1860 425 0000 Details of Company Officials : Mr. T M Shyamsunder – Grievance Redressal Officer	
11	Grievances / Complaints	Grievances Redressal Procedure:	Bharat Yatra Suraksha

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		We promise to provide the service you want, but sometimes mistakes can happen. If you're not satisfied with our service, we're here to make it right. Your satisfaction is our main concern, especially when things haven't gone as planned. Step 1: Raise a Complaint Please raise your concern with us through our Online form / Call us at: 1860 425 0000 / 1860 258 0000 / mail us at care@royalsundaram.in & write us at Customer Services Team Royal Sundaram General Insurance Co. Limited Vishranthi Melaram Towers No.2/319, Rajiv Gandhi Salai(OMR) Karapakkam, Chennai – 600097 Senior Citizen can mail us at: seniorcitizengrievances@royalsundaram.in We will acknowledge your grievance immediately and provide a resolution. Step 2: Escalation 1 If you are not satisfied with the resolution provided or require any further assistance, you may escalate the matter to: manager.care@royalsundaram.in Step 3: Escalation 2 If you feel your grievance has not been resolved satisfactorily, you may escalate further to: head.cs@royalsundaram.in Step 4: Escalation to Grievance Redressal Officer - Final Internal Escalation	Section : E.1.18
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		If you need further resolution, you may escalate it to: Grievance Redressal Officer: Mr. T M Shyamsunder, 9500413094 Senior Citizen Redressal: 9500413019 Email: gro@royalsundaram.in For updated details of grievance officer, kindly refer the link http://www.royalsundaram.in. If you are not satisfied with the Redressal of grievance through above methods, you may also approach the office of Insurance Ombudsman of the respective area/region for Redressal of grievance as per insurance Ombudsman Rules 2017. Insurance Ombudsman addresses can be accessed at - https://www.cioins.co.in/Ombudsman	
12	Things to remember	Cancellation/termination by Insurer (Applicable only for Plan-E: Domestic Travel Insurance) The Company may cancel the Policy immediately on grounds of mis-representation, non-disclosure of material facts, fraud by the Insured Person. There would be no refund of premium on cancellation on grounds of mis-representation, non-disclosure of material facts or fraud. Renewal of the Policy : As it is a travel insurance policy providing coverage only for the travel through Insured Journey/Trip, this policy can't be renewed.	Bharat Yatra Suraksha Section : E.1.8 Bharat Yatra Suraksha Section : E.1.14
13	Your Obligation	Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may affect the claim settlement.	

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		Disclosure of other material information during the policy period such as change in occupation.	
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Declaration by the policy holder:

I have read the above and confirm having noted the details.

Place:

Date: (Signature of the Policy Holder)

Note:

- i. Insurer shall provide weblink where the product related documents including the Customer Information Sheet are available on the website of the insurer.
- ii. In case of any conflict, the terms and conditions mentioned in the policy document shall prevail.
- iii. Insurer to take confirmation of the policyholder regarding receiving the Customer Information Sheet.