

Policy Wordings

Travel Assure - Group Overseas Travel Insurance

Preamble & Operative Clause

This Policy is a contract of insurance between the Policyholder and the Company which is subject to (a) the terms, conditions and exclusions of this Policy and (b) the receipt of premium against each Benefit of the applicable in full and (c) the Schedule of Benefits and (d) Disclosure to Information Norm

Definitions

Any word or expression to which a specific meaning has been assigned in any part of this Policy or the Schedule/ Certificate shall bear the same meaning wherever it appears in the Policy, including any subsequent endorsements to this Policy and the Policy Schedule/ Policy Certificate. Where the context permits, references to the singular shall also include references to the plural, similarly references to the male gender shall also include references to the female gender, and vice versa in both cases.

For purposes of this Policy, the terms specified below shall have the meaning set forth:

1. **"Accident"** means sudden, unforeseen and involuntary event caused by external, visible and violent means.
2. **"Any one Illness"** means continuous period of illness and includes relapse within 45 days from the date of last consultation with the Hospital/Nursing Home where treatment was taken.
3. **"Cashless facility"** means a facility extended by the insurer to the insured where the payments, of the costs of treatment undergone by the insured in accordance with the policy terms and conditions, are directly made to the network provider by the insurer to the extent pre-authorization is approved.
4. **"Condition Precedent"** means a policy term or condition upon which the Insurer's liability under the policy is conditional upon.
5. **"Congenital Anomaly"** means a condition which is present since birth, and which is abnormal with reference to form, structure or position.
 - a. **"Internal Congenital Anomaly"** refers to the Congenital anomaly which is not in the visible and accessible parts of the body.
 - b. **"External Congenital Anomaly"** refers to the Congenital anomaly which is in the visible and accessible parts

of the body.

6. **“Co-Payment”** means a cost sharing requirement that the policy holder/insured will bear a specified percentage of the admissible claim amount. A co-payment does not reduce the Sum Insured.
7. **“Day care centre”** means any institution established for day care treatment of illness and/or injuries or a medical setup with a hospital and which has been registered with the local authorities, wherever applicable, and is under supervision of a registered and qualified medical practitioner AND must comply with all minimum criterion as under –
- has qualified nursing staff under its employment;
 - has qualified medical practitioner/s in charge;
 - has fully equipped operation theatre of its own where surgical procedures are carried out;
 - maintains daily records of patients and will make these accessible to the insurance company’s authorized personnel.
8. **“Day care treatment”** means medical treatment, and/or surgical procedure which is:
- undertaken under General or Local Anesthesia in a hospital/day care centre in less than 24 hrs because of technological advancement, and
 - which would have otherwise required hospitalization of more than 24 hours.
- Treatment normally taken on an out-patient basis is not included in the scope of this definition.
9. **“Disclosure to information norm”** means the Policy shall be void and all premium paid hereon shall be forfeited to the Company, in the event of misrepresentation, mis-description or non-disclosure of any material fact.
10. **“Emergency Care”** means management for an illness or injury which results in symptoms which occur suddenly and unexpectedly, and requires immediate care by a medical practitioner to prevent death or serious long term impairment of the Insured Person’s health.
11. **“Grace Period”** means the specified period of time immediately following the premium due date during which a payment can be made to renew or continue a policy in force without loss of continuity benefits such as waiting periods and coverage of pre-existing diseases. Coverage is not available for the period for which no premium is received.
12. **“Illness”** means a sickness or a disease or pathological condition leading to the impairment of normal physiological function and requires medical treatment.
- Acute condition** - Acute condition is a disease, illness or injury that is likely to respond quickly to treatment which aims to return the person to his or her state of health immediately before suffering the disease/ illness/ injury which leads to full recovery.
 - Chronic condition** - A chronic condition is defined as a disease, illness, or injury that has one or more of the following characteristics:
 - it needs ongoing or long-term monitoring through consultations, examinations, check-ups, and /or tests
 - it needs ongoing or long-term control or relief of symptoms
 - it requires rehabilitation for the patient or for the patient to be specially trained to cope with it

- iv. it continues indefinitely
 - v. it recurs or is likely to recur
13. **“Injury”** means accidental physical bodily harm excluding illness or disease, solely and directly caused by external, violent and visible and evident means which is verified and certified by a Medical Practitioner
14. **“Intensive care unit”** means an identified section, ward or wing of a hospital which is under the constant supervision of a dedicated medical practitioner(s), and which is specially equipped for the continuous monitoring and treatment of patients who are in a critical condition, or require life support facilities and where the level of care and supervision is considerably more sophisticated and intensive than in the ordinary another wards
15. **“ICU Charges”** ICU (Intensive Care Unit) charges means the amount charged by a hospital towards ICU expenses which shall include the expenses for ICU bed, general medical support services provided to any ICU patient including monitoring devices, critical care nursing and intensivist charges.
16. **“Maternity Expenses” means**
- a. medical treatment expenses traceable to childbirth (including complicated deliveries and caesarean sections incurred during hospitalization)
 - b. expenses towards lawful medical termination of pregnancy during the policy period
17. **“Medical Advice”** means any consultation or advice from a Medical Practitioner including the issuance of any prescription or follow-up prescription
18. **Medical Advisor”** are Medical Practitioners appointed by “Emergency Assistance Service provider”
19. **“Medical Expenses”** means those expenses that an Insured Person has necessarily and actually incurred for medical treatment on account of Illness or Accident on the advice of a Medical Practitioner, as long as these are no more than would have been payable if the Insured Person had not been insured and no more than other hospitals or doctors in the same locality would have charged for the same medical treatment.
20. **“Medical Practitioner”** means a person who holds a valid registration from the Medical Council or appropriate authority of the country where Insured Person is availing emergency treatment outside India/ Country of origin and is thereby entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of license. The term Medical Practitioner includes any qualified physician, specialist, or surgeon, and should not be an Immediate Family Member of the Insured Person or related to the Insured Person by way of blood, marriage, adoption, employment, or any pre-existing business relationship.
21. **“Medically Necessary Treatment”** means any treatment, tests, medication, stay in Hospital or part of a stay in Hospital in relation to the Insured Person which:
- a. is required for the medical management of the Illness or Injury suffered by the Insured Person;
 - b. must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration, or intensity;
 - c. must have been prescribed by a Medical Practitioner;
 - d. must conform to the professional standards widely accepted in international medical practice or by the medical community in India.
22. **“Non-Network Provider”** means any hospital, day care centre or other provider that is not part of the network.

23. **“Notification of Claim”** means the process of intimating a claim to the insurer or Emergency Assistance Service Provider through any of the recognized modes of communication.
24. **“Outpatient Treatment”** means the one in which the Insured visits a clinic / hospital or associated facility like a consultation room for diagnosis and treatment based on the advice of a Medical Practitioner. The Insured is not admitted as a day care or in-patient.
25. **“Reasonable and Customary Charges”** means the charges for services or supplies, which are the standard charges for the specific provider and consistent with the prevailing charges in the geographical area for identical or similar services, taking into account the nature of the illness / injury involved.
26. **“Renewal”** means the terms on which the contract of insurance can be renewed on mutual consent with a provision of grace period for treating the renewal continuous for the purpose of gaining credit for pre-existing diseases, time-bound exclusions and for all waiting periods.
27. **“Subrogation”** means the right of the insurer to assume the rights of the insured person to recover expenses paid out under the policy that may be recovered from any other source.
28. **“Surgery” or “Surgical Procedure”** means manual and / or operative procedure(s) required for treatment of an illness or injury, correction of deformities and defects, diagnosis and cure of diseases, relief from suffering and prolongation of life, performed in a hospital or day care centre by a medical practitioner.

Specific definitions

1. **“Air Travel”** means travel by an airline/aircraft for the purpose of flying therein as a Fare paying passenger.
2. **“Adventure Sports”** means and includes skydiving/parachuting, parasailing, hang gliding, paragliding, ballooning, bungee jumping, scuba diving, mountain or rock climbing (where ropes or guides are customarily used), riding or driving in races or rallies using a motorized vehicle or bicycle, caving or pot-holing, hunting or equestrian activities, skin diving or other underwater activity, polo, snow and ice sports, rafting or canoeing involving white water rapids, yachting or boating, Base jumping, Ski jumping, Trekking, Adventure racing on land and water, Snorkeling, Kayaking, and any sporting activity based on bodily contact or which is hazardous or potentially dangerous.
3. **“Aggregate Limit”** means the Company’s maximum, total and cumulative liability under the Benefit or the set of Benefits as specified in the Policy Schedule or Policy Certificate in respect of all claims by or on behalf of all Insured Persons under the Policy Certificate. If at any time the total value of unpaid claims, if paid, would result in this Aggregate Limit being exceeded, the pay outs under the individual Benefits attributable to those outstanding claims shall be reduced pro rata as necessary to ensure that this Aggregate Limit is not exceeded.
4. **“Ambulance”** means a vehicle equipped for paramedical treatment and emergency air or surface transportation of a person requiring medical attention, provided by licensed/authorized medical service providers.
5. **“Appliances”** shall mean and include electrical, mechanical and electronic appliances such as refrigerator, television, DVD player, videocassette recorder/player, washing machine, microwave oven, music system, personal computer, laptops and air-conditioner contained or fixed in the Insured Person’s home for domestic use.
6. **“Burglary”** means theft involving entry into or exit from the Insured Person’s usual place of residence by forcible and violent means or following assault or violence or threat thereof, to the Insured Person or to any Immediate Family Member or any person residing lawfully in the Insured Person’s residence, with intent to commit a felony therein and includes housebreaking.
7. **“Catastrophe”** means an unexpected natural or man-made event, such as an earthquake, tsunami, flood, civil unrest, mass bandh or riot which causes widespread loss, damage, or disruption in travel schedules.
8. **“Checked-in Baggage”** means each suitcase or baggage handed over by the Insured Person and accepted by a Common Carrier for transportation in the same Common Carrier in which the Insured Person is or would be travelling, and for which the Common Carrier has issued a baggage receipt to the Insured Person. Checked-in

Baggage excludes all items that are carried/ transported under any contract of affreightment.

9. **“City of Origin”** means any city in India/ Country of Origin from which the Trip commences, and which is specified in the Policy Certificate.
10. **“Common Carrier”** means any commercial public airline, railway, motor transport, or water borne vessel (including ocean going and/or coastal vessels and/or vessels engaged for official or personal purposes), operating under license issued by the appropriate authority for transportation of passengers and/or cargo.
11. **“Contents”** mean and include Appliances, furniture, fixture, fittings, linen, clothing, kitchen items, cutlery /crockery contained in the Insured Person’s home belonging to the Insured Person or to any Immediate Family Members permanently residing with the Insured Person including items for which the Insured Person is responsible, and used for domestic use. However, Contents does not include any deeds, bonds, bills of exchange, promissory notes, cheques, traveller’s cheques, and securities for money, documents of any kind, cash and currency notes.
12. **“Contribution”** is essentially the right of an insurer to call upon other insurers liable to the same insured to share the cost of an indemnity claim on a ratable proportion of Sum Insured. This clause shall not apply to any Benefit offered on fixed benefit basis.
13. **“Corporate”** means any organization, firm, society or body corporate on whose name the policy is issued.
14. **“Company / Insurer”** means ICICI Lombard General Insurance Company Limited.
15. **“Cruise”** means a Trip involving a sea voyage of at least 1 hours of total duration, where transportation and accommodation is primarily on an ocean going Common Carrier.
16. **“Deductible”** means a cost-sharing requirement under this policy, that provides that the insurer will not be liable for a specified amount or percentage of claim amount and/or number of days and/or number of hours as specified in the policy schedule/certificate of insurance which will apply before any benefits are payable by the insurer. A deductible does not reduce the Sum Insured and is applicable per event upto the specified limits mentioned.
17. **“Defence Costs”** are reasonable costs necessarily incurred in defending the Insured Person against any civil proceeding initiated against him/her, during the Trip Duration.
18. **“Dependent Child”** means a child of the Insured Person whether natural or legally adopted, who is (i) less than age 30 years as of the commencement of the Trip, and (ii) does not have his/her independent source of income and is financially dependent on the Insured Person.
19. **“Disease”** means an alteration in the state of the body or of some of its organs interrupting or disrupting the performance of the functions, and causing or threatening pain and weakness or physical or mental disorder and certified by a Medical Practitioner.
20. **“Emergency Assistance Service Provider”** means or any organization or institution appointed by the Company, for providing services to the Insured Person for an Insured Event covered.
21. **“Emergency Hospitalization”** means admission of the Insured Person in a Hospital as an in-patient for a minimum period of 24 consecutive hours for an Illness contracted or Injury sustained by an Insured Person in an Accident, which occurs suddenly and unexpectedly, and requires immediate medical care to prevent death or serious long term impairment of the Insured Person’s health, as prescribed by a Medical Practitioner.
22. **“Family”** means the Insured Person, his/her lawful spouse and maximum of any two (2) dependent children .
23. **“Felonious Assault”** means an act of violence against the Insured Person or a Travelling Companion requiring

medical treatment.

24. **“Financial Emergency”** means a situation wherein the Insured Person loses all or a substantial amount of his/her travel funds due to theft, robbery, mugging or dacoity, which has detrimental effects on his/her travel plans.
25. **“Foreign Enemy”** means any group of individuals, entity or country, who intend to cause Injury, or commission an act dangerous to human life or property in the location where the Insured Person is travelling to, by the use of hostile force or violence.
26. **“Hijack”** means any unlawful seizure or exercise of control, by force or violence or threat of force or violence and with wrongful intent, of the Common Carrier in which the Insured Person is travelling.
27. **“Hospital”**.means any institution established for the treatment of patients which is under constant medical management, has adequate diagnostic and therapeutic facilities, keeps constant medical records, is recognized as a hospital in the country in which it is situated, and which is appropriately licensed, wherever required to be so, to operate as a hospital in that country.
28. **“Hospitalization”** means admission in a Hospital for a minimum period of 24 In-patient Care consecutive hours except for day-care procedures/ treatments.
29. **“Immediate Family Member”** means any member of the Insured person’s immediate family i.e. the insured person’s spouse, child or parent or sibling.
30. **“Inclement Weather”** means any severe catastrophic weather conditions which delay the scheduled arrival or departure of a Common Carrier but not including normal, seasonal/climatic weather changes.
31. **“Inpatient Treatment”** shall mean any **Emergency** care treatment rendered to the Insured at a Hospital in connection with any Injury or Illness resulting in Hospitalization.
32. **“Insured Event”** means an event, loss or damage specifically described as covered and for which the Insured Person is entitled to benefit/s under this Policy.
33. **“Insured Person”** means the person named in the Policy Certificate, who is an employee or member of the Policyholder and is covered under this Policy upon appropriate premium being paid to the Company.
34. **“Intended Destination(s)”** means area(s) which appear on the scheduled travel itinerary of the Insured Person for stay during the Trip, is/are specified in his/her main travel booking.
35. **“Life Threatening Condition”** means a medical condition suffered by the Insured Person which has the following characteristics:
 - i. Markedly unstable vital parameters (blood pressure, pulse, temperature and respiratory rate).
 - ii. Acute impairment of one or more vital organ systems (involving brain, heart, lungs, Liver, Kidneys and pancreas) including ectopic pregnancy.
 - iii. Critical care being provided, which involves high complexity decision making to assess, manipulate and support vital system function(s) to treat single or multiple vital organ failure(s) and requires interpretation of multiple physiological parameters and application of advanced technology.
 - iv. Critical care being provided in critical care area such as coronary care unit, intensive care unit, respiratory care unit, or the emergency department.
36. **“Loss”** means loss or damage.

37. **“Mandays”** A Man day is a 24 hours period starting from midnight for an individual whilst travelling abroad
38. **“Money”** means cash, bank drafts, current coins, bank and currency notes, treasury notes, cheques, traveller’s cheques, postal orders and current postage stamps not forming part of a collection.
39. **“Multi Trip”** means two or more Trips to Intended Destinations outside India/ Country of Origin during the Period of Insurance.
40. **“Multi Trip Cover”** means a cover under which the Insured Person can undertake one or more Trips during the Period of Insurance but not exceeding the maximum number of travel days specified in the Policy Certificate.
41. **“Period of Insurance”** means.
- In respect of a Single Trip cover, the Period of Insurance is the period from the Coverage Commencement Date/time period specified in the Policy Certificate, to the coverage expiry date/time period specified in the Policy Certificate or end of the actual Trip Duration, whichever is earlier. A Single Trip cover shall not exceed consecutive days/time specified in policy certificate, including departure from and return to the Insured Person’s place of residence,.
 - In respect of a Single Trip cover where the Policy Certificate is issued prior to the Trip for the purpose of obtaining Visa, the Period of Insurance is the period from the Coverage Commencement Date specified in the Policy Certificate or a later date on which the Insured Person’s Trip actually commences, till the coverage expiry date specified in the Policy Certificate or end of the actual Trip Duration, whichever is earlier, but not exceeding consecutive days, as specified in the Certificate of Insurance, including departure from and return to the Insured Person’s place of residence.
 - “Period of Insurance” in respect of multi trip policy, this means the period from the commencement of insurance cover to the end of actual trip duration or full utilization of the maximum number of travel days per trip as mentioned in the Policy Schedule/Certificate or expiry of the Policy or cancellation of the insurance, whichever is earlier
 - “Period of Insurance” in case of student means a period within the policy period which commences when the insured person crosses the international border of the country of residence to leave that country on a common carrier(except for a student of Indian origin who is already studying abroad with similar insurance coverage for whom period of insurance will commence from policy start date) and expires automatically on the earliest of:
 - Policy period end date
 - The date on which the insured person’s educational course is discontinued or is completed by the insured
 - Special Condition: If the insured person returns to his country of residence, for a temporary period not exceeding 60 days, then the scope of cover under this policy during insured stay in the country of residence shall be restricted as defined in the benefit under home country cover.
42. **“Physician”** means a Medical Practitioner legally qualified to practice in medicine or Surgery and duly licensed in his/her respective jurisdiction and is not a member of the insured person’s family.
43. **“Permanent Partial Disability”** means a bodily injury caused by accidental, external, violent and visible means, which as a direct consequence thereof, disables any part of the limbs or organs of the body of the Insured Person and which falls into one of the categories listed in the Table of Benefits
44. **“Permanent Total Disability”**: means a bodily injury caused by accidental, external, violent and visible means, which as a direct consequence thereof totally disables and prevents the Insured Person from attending to any business or occupation of any and every kind or if he/she has no business or occupation, from attending to his/her usual and normal duties that last for a continuous period of twelve calendar months from the date of the accident, with no hopes of

improvement at the end of that period

45. **“Policy”** means the Schedule, the Policy documents and any endorsements attaching to or forming part hereof either on the commencement date or during the Policy Period.
46. **“Policy Certificate”** means the certificate issued to the Insured Person evidencing the Insured Person’s cover under the Policy.
47. **“Policy Period”** means the period between the Commencement Date and the Expiry Date of the Policy as specified in the Policy Schedule/ Policy Certificate.
48. **“Policyholder”** means and includes an individual, organization, firm, society or body corporate whose name the policy is issued.
49. **“Port”** means a scheduled point of departure or arrival of a Common Carrier in which an Insured Person is booked to travel.
50. **“Pre-existing Condition”** means any condition, ailment or injury or related condition(s) for which the Insured Person had signs or symptoms, and/or was diagnosed, and/or received medical advice/treatment within 48 months prior to the Coverage Commencement Date.
51. **“Professional Sportsperson”** means those sports persons who are in to full time sports and maintain their livelihood through earnings derived from their involvement in sports.
52. **“Reasonable Additional Expenses”** means any expenses for meals, temporary accommodation, emergency communication and purchases of toiletries, medication and clothing necessarily incurred by the Insured Person and not provided by the Common Carrier, or any other individual/entity, free of charge.
53. **“Room Rent”** means the amount charged by a hospital for the occupancy of a bed on per day (24 HRS) basis and shall include associated medical expenses.
54. **“Schengen Countries”** are a group of countries that includes Austria, Belgium, Czech Republic , Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Iceland, Italy, Latvia, Liechtenstein, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Slovakia, Slovenia, Spain, Sweden, Switzerland. The list of these countries is subject to update from time to time as and when necessitated by the relevant authorities.
55. **“Semi-Professional sportsperson”** shall mean those sports persons who participate in sports and get remuneration for participating, but whose primary source of income is not from sports.
56. **“Single Trip Cover”** means a cover under which the Insured Person can undertake only one Trip during the Period of Insurance.
57. **“Strike”** means stoppage of work announced, organized and sanctioned by a labour union, inclusive of work slowdowns, lockouts and sickouts, which interferes with the normal departure and arrival of a Common Carrier.
58. **“Sub-limit”** means a cost sharing requirement under a policy in which an insurer would not be liable to pay any amount in excess of the pre-defined limit. As specified in the Certificate of Insurance a sublimit can also be interpreted in time – hours/days
59. **“Sum Insured”** means the amount specified in the Policy Certificate against a Benefit or set of Benefits, which

represents the Company's maximum, total and cumulative liability for any and all claims made in respect of the Insured Person during the Period of Insurance, under that Benefit/set of Benefits. Sum Insured can be a lump sum benefit payment upon occurrence of an insured event or indemnity payment basis expenditure of the Insured Person for coverage as specified in the Policy Wording upon occurrence of the insured event

60. **"Terrorism/Terrorist Incident"** means any actual or threatened use of force or violence directed at or causing damage, injury, harm or disruption, or the commission of an act dangerous to human life or property, against any individual, property or Government, with the stated or unstated objective of pursuing economic, ethnic, nationalistic, political, racial or religious interests, whether such interests are declared or not. Robberies or other criminal acts, primarily committed for personal gain and acts arising primarily from prior personal relationships between perpetrator(s) and victim(s) shall not be considered terrorist activity. Terrorism shall also include any act, which is verified or recognized by the relevant Government as an act of terrorism
61. **"Travel Agent"** means the Travel Agent, tour operator or other entity from which the Insured / Insured Person purchases the insurance Policy or travel arrangements, and includes all officers, employees and affiliates of the Travel Agent, tour operator or other entity.
62. **"Theft"** means an act of illegally, permanently and directly or indirectly depriving the Insured Person of his or her personal belongings or any property by violent or forceful means.
63. **"Travelling Companion"** means an individual or individuals travelling with the Insured Person, provided that the Insured Person and such individual(s) are travelling to the same Intended Destination and on the same date and such individual(s) is/are also insured with the Company. For the purpose of this definition, any individual(s) forming part of a group travelling on a tour arranged by a travel agent or a tour operator shall not be considered as Travelling Companion, unless the individual(s) is/are Immediate Family Members of the Insured Person.
64. **"Trip"** means a journey originating from the residence of the Insured Person to out of the Republic of India/Country/City of Origin and back to the Republic of India/Country/City of Origin of the Insured Person, the details of which are specified in the Policy certificate/Schedule.
65. **Unattended"** A Vehicle, premises or personal belongings that are unattended if there is no one able to observe or to prevent interference with it
66. **"Unproven/Experimental treatment"** means the treatment including drug experimental therapy which is not based on established medical practice in India or in the country where such treatment is undertaken
67. **"Valuables"** mean and include photographic, audio, video, computer and any other electronic and electrical equipment, cellular phones, data, business goods, telecommunications and electrical equipment, motor vehicles, documents and any accessories, sculptures, manuscripts, rare books, plan, medals, moulds, designs, telescopes, binoculars, antiques, watches, jewellery, furs and articles made of precious stones and metals.

2. Benefits under the Policy:

The Policy Certificate will specify Benefits that are in force for the Insured Person during the Period of Insurance. Claims made under any applicable Benefit for the Period of Insurance will be subject to the terms, conditions and exclusions of this Policy wording, the availability of the Sum Insured for that Benefit, any applicable sub-limits and/or Deductibles..

Section : Emergency Medical Expenses

Coverage

The Company shall pay or reimburse to the Insured/Insured Person Emergency Care expenses incurred for availing immediate emergency medical assistance required on account of any disease/illness contracted or injury sustained whilst on a trip upto the limit of Sum Insured or sub-limit specified in the Policy certificate.

In the event, the Insured/Insured Person contracts disease/illness or sustains injury during the Policy period; the Company will pay or reimburse to the Insured/Insured Person emergency care expenses subject to the Sum Insured or sublimit for any or all of these benefits as specified in the Policy Certificate. The Insurer's liability to make payment is only in excess of the Deductible as specified in policy certificate

1. Out-patient treatment, provided, the same is critical and cannot be deferred till the Insured's/Insured Person's return to the Republic of India.
2. In-patient treatment in a local hospital at the place the Insured/Insured Person is staying at the time of occurrence of an insurable event including but not limited to the following:
 - a. Room Rent including Boarding lodging
 - b. Intensive Care Unit
 - c. Surgery
 - d. Anesthetist Services
 - e. Physician Visit
3. Medical aid prescribed by a Medical Practitioner as necessary part of a treatment for broken limbs or injuries (e.g. plaster casts, bandages and walking aids).
4. Radiotherapy, heat therapy or photo therapy and other such treatment prescribed by a Medical Practitioner.
5. X-ray, diagnostic tests and all reasonable costs towards diagnostic methods and treatment of all disease/illness/injury provided these pertain to the disease/illness/injury due to which hospitalization was deemed necessary.
6. Cost of transportation, including necessary medical care, by recognized medical service providers for medical attention to the nearest hospital or to the nearest Medical Practitioner or to a special clinic if prescribed by a Medical Practitioner

Extension to Emergency Medical Expenses section

The cover can be extended if specifically agreed and subject to receipt of additional premium and accordingly indicated in the Policy Certificate in the event of the occurrence of any of the circumstances given hereunder and the Insurer's liability to make payment is only in excess of the Deductible as specified in policy certificate

- i. Inpatient Emergency medical expenses for injuries during inter-collegiate sports, such expenses shall be treated as any other Emergency medical expenses for treatment of injury due to an accident and shall be subject to the terms and conditions mentioned in the Policy and limits specified in the policy certificate/schedule.
- ii. Outpatient Physiotherapy related to disease/illness/injury for which the treatment has been taken shall be subject to the terms and conditions mentioned in the Policy and limits specified in the policy certificate/schedule .
- iii. Cancer screening and mammography examinations on recommendation from the Medical Practitioner shall be subject to the terms and conditions mentioned in the Policy and limits specified in the policy certificate/schedule. However the same is not included under this benefit, if they form part of any routine medical check-up/examination.
- iv. Chiropractic Treatment related to disease/ illness/ injury requiring outpatient/inpatient care, shall be subject to the terms and conditions mentioned in the Policy and limits specified in the policy certificate/schedule.
- v. Skilled nursing facility related to disease/illness/injury requiring outpatient care, shall be subject to the terms and conditions mentioned in the Policy and limits specified in the policy certificate/schedule.
- vi. Adventure sports extends the scope of coverage to cover emergency medical expenses incurred for the insured person subject to the limits specified in the policy schedule/certificate due to any injury arising out of adventure sports, provided that claims under this extension shall be admissible only if medical expenses are incurred. This extension shall supersede any exclusion regarding adventure sports.
- vii. Sexually transmitted disease will extend the scope to cover the medical expenses incurred for the treatment of acquired immune deficiency syndrome (AIDS), shall be subject to the terms and conditions mentioned in the Policy and limits specified in the policy certificate/schedule. This extension shall supersede any exclusion regarding AIDS except in case the insured is suffering from HIV/ AIDS prior to the period of insurance.
- viii. Mental Disorder cover extends the scope to cover the expenses incurred in respect of insured person for Mental and Nervous disorder, shall be subject to the terms and conditions mentioned in the Policy and limits specified in the policy certificate/schedule. This extension shall supersede any exclusions regarding mental and nervous disorder.
- ix. Drug and Alcohol abuse extends the scope to cover medical expenses incurred for the treatment of alcohol and drug abuse provided that claims shall be admissible only if the medical expenses are incurred in case of hospitalization , shall be subject to the terms and conditions mentioned in the Policy and limits specified in the policy certificate/schedule. This extension will supersede the exclusion regarding drug and alcohol abuse.
- x. In-patient medical expenses related to pregnancy/childbirth (after a waiting period of 10 months or waiting period of months specified in the policy certificate) extends the scope to cover medical expenses incurred in respect of the insured person for the hospitalization for the delivery of the child, shall be subject to the terms and conditions mentioned in the Policy and limits specified in the policy certificate/schedule. This extension shall supersede clauses regarding maternity in the general exclusion but with following conditions:
 - Claims under this extension are admissible only if the expenses are incurred in hospital for delivery of child as in patient
 - The delivery occurs after the completion of waiting period specified in the policy certificate or if such medical complications occurs or are first diagnosed prior to the commencement of the period of insurance. The Company shall not be liable to make any payment under this extension in respect of the insured person more than two times in the insured person's lifetime.
 - The company shall cover pre-natal and post-natal expenses upto 10% of Sum Insured under this extension provided that the condition necessitate treatment in a hospital and the insured person is hospitalized.

Section: Emergency Medical Evacuation

The Company shall indemnify the Insured for the cost incurred for an ambulance or any other Emergency transportation and evacuation services, including necessary medical care en-route, reasonably incurred forming part of the treatment for any Illness contracted or Injury sustained whilst on Trip during the Period of Insurance. These transportation expenses would be limited to transporting the Insured from the place of loss to the nearest appropriate medical facility or to the Place of Origin or to the City of Residence of the Insured, whichever is nearer provided that the such cost are certified and authorized by the attending medical practitioner and/or the Company and Company's liability does not exceed the Sum Insured or sub-limit specified in the policy certificate. The Insurer's liability to make payment is only in excess of the Deductible as specified in policy certificate

- a) The extra costs of medically necessary and prescribed transportation of the Insured/ Insured Person from the foreign country to his/ her permanent place of residence in India or to the nearest Hospital.
- b) If it is medically necessary in the opinion of Emergency Assistance Service Provider, that the Insured/ Insured Person needs to be accompanied by a Medical Practitioner, nurse, relative, friend or colleague; then the additional costs for an accompanying person would also be payable

The **extra costs** under "Transportation" are:

- a. In the event of transportation home, the additional costs arising for the return journey home as a consequence of the insured event;
- b. In the opinion of the Emergency Assistance Service Provider, the Insured/Insured Person is capable of being transported to India

Section : Repatriation of Mortal Remains**Coverage**

In the unfortunate event of the death of the Insured/ Insured Person whilst on a trip during the period of insurance, the Company shall, pay or reimburse the costs of transporting the mortal remains of the deceased Insured/Insured Person back to the Republic of India or the cost of local burial or cremation in the country where the accidental death occurred, subject to the maximum limit specified in the Policy Schedule or limits specified in the policy certificate.

Special Conditions applicable for Emergency Medical Expenses, Emergency Medical Evacuation & Repatriation of Mortal Remains

1. Sum Insured for Emergency Medical Evacuation & Repatriation of Mortal Remains can be specified separately or as a Sub Limit to the Sum Insured specified in the Emergency Medical Expenses Section as specifically mentioned in the Policy Certificate
2. If any disease/ illness/ injury during the period abroad necessitate curative treatment beyond duration of this insurance, the Company's liability to pay benefits within the scope of this Policy shall extend automatically for a further period of 30 days insofar as it can be proved that transportation home is not possible. Emergency Service Assistance Provider must be notified immediately as soon as it is known that Insured/ Insured Person is unfit to return to India. If any new disease/

illness/ injury are contracted beyond duration of this Policy, treatment for the same will not be covered. Company's liability does not exceed the Sum Insured or sub limit specified in the policy certificate

3. Further, in case of transportation home on the advice of Emergency Assistance Service Provider, appropriate continued treatment in India for the same disease/ illness/ injury will be covered for a maximum of 30 days beyond this Policy period automatically, provided the disease/ illness/ injury is contracted abroad within this Policy period. The transportation of the Insured/Insured person back to India shall be done only on agreement and confirmation from the attending medical practitioner that the Insured/ Insured Person is capable of being transported to India. Company's liability does not exceed the Sum Insured or sub limit specified in the policy certificate
4. If Emergency Assistance Service Provider recommends that continued treatment in an Indian hospital is appropriate, this Policy shall be extended automatically to cover medical expenses incurred in India as specified in the Medical Expenses Cover in this Policy provided that such expenses will only be paid at the usual and customary level for such services, and further provided that expenses will only be paid for treatment incurred within the 30 days period immediately following the first manifestation of the disease/ illness/ injury during the trip. Company's liability does not exceed the Sum Insured or sub limit specified in the policy certificate
 - a. **Special Sublimit:-** Special Sub Limit to the Sum Insured specified in the Emergency Medical Expenses Section as specifically mentioned in the Policy Certificate table

Definition limited to Special Sublimit

- a. **"Room Rent including Boarding lodging"** means the amount charged by a hospital for the occupancy of a bed on per day (24 HRS) basis and shall include associated medical expenses.
- b. **"Intensive Care unit"** means visit to emergency department or ward or wing of a hospital which is under the constant supervision of a dedicated medical practitioner(s) and equipped for the continuous monitoring and treatment of patients who are in a critical condition or require life support facilities where the level of care and supervision is more intensive than in the ordinary and other wards.
- c. **"Operation Theatre charges (Inclusive surgeon charges)"** means operation theatre charges, surgeon fees(inpatient /outpatient/day care procedure), implant charges and all other associated charges which is payable as per policy conditions .
- d. **"Ambulance Services"** means include cost of transportation of the insured person to the nearest hospital and paramedic services.
- e. **"Anesthetist services"** means connection with inpatient surgery or outpatient procedures or day care procedures/surgery
- f. **"Physician Visit"** means one physician visit per day but not applicable in case of surgery
- g. **"Diagnostic and Radiology services"** means test prescribed by Medical practitioner

- h. **“Hospital Miscellaneous Expenses”** while hospital confined; benefits will be cover for services and supplies such as the cost of operating room; laboratory tests; x-ray examination; drugs (excluding take home drugs) or medicines and supplies.

Specific Exclusions Applicable to Emergency Medical Expenses, Emergency Medical Evacuation and Repatriation of Mortal Remains

The Company shall not be liable to make any payment under this benefit in connection with or in respect of any expenses whatsoever incurred by the Insured/ Insured Person for:

1. Where the insured person is travelling against the advice of a physician or receiving or on a waiting list for specified medical treatment; or is travelling for the purpose of obtaining treatment or has received a terminal prognosis for a medical condition
2. Treatment of orthopedic, degenerative, oncological diseases, unless the medical assistance provided abroad involves unforeseen emergency measures to save the Insured/ Insured person’s life or amount specified in Policy Certificate.
3. Treatment which could be reasonably delayed until Insured/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 Medical Practitioner and the Company and shall be in accordance with accepted standards of medical care.
4. Charges in excess of reasonable and customary charges incurred for emergency treatment on account of an insured event.
5. Treatment relating to the removal of physical flaws or anomalies (cosmetic treatment or plastic surgery in any form or manner unless medically required as part of treatment for cancer, accidents and burns).
6. Expenses incurred in connection with rest or recuperation at a spa or health resort, sanatorium, convalescence home or similar institution or related to treatment of alcoholism or drug dependency.
7. Maternity, child birth and any consequences, including changes in other chronic conditions as a result of pregnancy. However, this exclusion will not apply in following cases:
 - a) Ectopic Pregnancy proved by diagnostic means and certified to be life threatening by the attending Medical Practitioner.
 - b) If the medical assistance provided abroad involves unforeseen emergency measures to save the Insured’s/ Insured Person’s or the child’s life in the event of acute complications, provided that the Insured/ Insured Person has not completed the age of 38 years and the 30th week of the pregnancy is not yet completed.
8. Rehabilitation and/or physiotherapy or the costs of prostheses/ prosthetics (artificial limbs) etc. However, expenses towards physiotherapy related to disease/ illness/ injury requiring outpatient/ inpatient care, subject to the specified limits and conditions, will be covered if specifically agreed for and specified in the Policy certificate.
9. Any exclusion mentioned in the ‘General Exclusions’ section of this Policy.

Section : Daily Allowance in case of Hospitalization

The Company will pay a daily allowance, in the event of hospitalization of the Insured/ Insured Person beyond a specified number of days or HRS as mentioned in the Policy certificate as deductible, for which a valid claim is admissible under the Policy whilst on trip abroad. The Insurer’s liability to make payment is only in excess of the Deductible as specified in policy certificate

All exclusions and Special Conditions applicable to Emergency Medical Expenses, **Emergency Medical Evacuation and Repatriation of Mortal Remains**, shall be applicable to this Section also.

Automatic Extensions

Extension of the period of insurance is automatic for a period not exceeding **7** days and without extra charge, if necessitated by delay of Common Carrier services beyond the control of the Insured/ Insured Person or due to your accidental injury or illness or quarantine.

All Specific exclusions and special conditions applicable to Emergency Medical Expenses , Emergency Medical Evacuation, Repatriation of Mortal Remains shall be applicable to this section also.

Section : Dental Treatment Expenses:

The Company shall pay or reimburse to the Insured/Insured Person expenses incurred in respect of acute anesthetic treatment of a natural tooth or teeth during a trip, but not exceeding the Sum Insured or sublimit specified in the Policy Certificate. The Insurer's liability to make payment is only in excess of the Deductible as specified in policy certificate

Specific Exclusions Applicable to Dental Treatment Expenses:

The Company shall not be liable to make any payment under this benefit in connection with or in respect of any expenses whatsoever incurred by the Insured / Insured Person for:

- 1 Treatment, which could reasonably be delayed until the Insured/ 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 Dentist and the Emergency Assistance Service Provider.
- 2 Treatment of orthopedic, degenerative or oncological diseases,
- 3 Charges in excess of reasonable and customary charges as per the determination by the Emergency Assistance Service Provider.
- 4 Cementing or Fixation of tooth or teeth bridge/s.
- 5 Root Canal Treatment , Crowning and Dental Filling.
- 6 Treatment relating to the removal of physical flaws or anomalies (cosmetic treatment or 'plastic' surgery in any form or manner).
- 7 Expenses incurred in connection with rest or recuperation at a spa, health resort, sanatorium, convalescence home, rehabilitation measures, private duty nursing, respite care, domiciliary care, long- term nursing care, custodial care and treatment related alcoholism and drug dependency.
- 8 Any exclusion mentioned in the 'General Exclusions' section of this Policy.

Section : Political Risk and Catastrophe Evacuation**Coverage**

1. The Company shall reimburse the insured, the cost of travel expenses to the country of residence or nearest place of safety up to the cost of an economy class air ticket (one way) and reasonable accommodation expenses , if incurred for a maximum of 7 days or sum insured specified in the policy certificate if insured is unable to return to his country of residence when Officials in the country where insured is visiting , recommend that certain categories of persons which include the Insured should leave the country , or

2. Insured is expelled from or declared person non grata in the country he/she is in.
3. A Catastrophe (fire, flood, earthquake, Tsunami, Volcano Eruption, Storm, hurricane or epidemic due to contagious disease) has occurred in the country the insured is in, necessitating his immediate evacuation in order to avoid risk of personal injury or illness to himself
4. In event of any of the contingencies covered hereunder occurring at the place Insured is visiting any time after the commencement of the trip and before the termination of the same, immediate notice thereof shall be given by insured to Emergency Assistance Service provider or the Insurance Company.

The Insurer's liability to make payment is only in excess of the Deductible as specified in policy certificate

Specific Exclusions Applicable to Political Risk and Catastrophe Evacuation:

The Company shall not be liable to make any payment under this benefit in connection with or in respect of any expenses whatsoever incurred by the Insured / Insured Person for:

1. Insured Violating the laws or regulations of the country from which he/she is to be evacuated
2. Failure to produce or maintain immigration, work, residence or similar visas, permits or other documentation
3. Failure to honour any contractual obligation or bond or to obey any condition in a license.
4. Insured being a national of the country from which he is to be evacuated
5. Circumstances that resulted in the Insured's evacuation being in existence prior to the Insured entering the country or their occurrence being foreseeable to a reasonable person before the insured entered the country
6. Any exclusion mentioned in the 'General Exclusions' section of this Policy.

Section: Personal Accident

Accidental Death

Coverage

The Company shall compensate the Insured/Insured Person or his/her nominees or the legal representatives, as the case may be, for accidental bodily injury (whilst on a trip covered by this Policy) solely and directly caused by accidental, violent, external and visible means resulting in death within twelve (12) calendar months of occurrence of such injury.

The Sum Insured as specified in the Policy Schedule/Certificate shall be the limit per person per Policy period payable only in Indian Currency on the Insured Person's return to India. In case of the unfortunate accidental death of the Insured Person, the compensation shall be paid in Indian Currency in India to the nominee or the legal representative as set forth in the Table of Benefits below. The Sum Insured shall be the maximum liability of the Company under this benefit.

This also covers if the insured/insured person suffers Accidental Bodily Injury on the way from his residence to the International Airport in India to start his Overseas journey or back to his residence from the International Airport in India on his return from Overseas journey during Policy Period and if this is the sole and direct cause of his Death within 12 months from the date of such injury, then the Insurer will pay the Insured the percentage of the Sum Insured as mentioned in the table below. The Insurer's maximum liability however shall not be more than 100% of the Limit of Indemnity as stated in the schedule or certificate

Table of Benefits	Percentage of Sum Insured payable as compensation
1. Accident Death	100%

Permanent Total Disability (PTD):

Coverage

The Company shall compensate the Insured/Insured Person or his/her nominees or the legal representatives, as the case may be, for accidental bodily injury (whilst on a trip covered by this Policy) solely and directly caused by accidental, violent, external and visible means resulting in one of the losses shown in the table below. The loss must occur within 365 Days from the date of the Accident which caused Injury.

If one or more than one loss results from any one accident, only one amount, the largest will be paid.

The Sum Insured as specified in the Policy Schedule/Certificate shall be the limit per person per Policy period payable only in Indian Currency on the Insured Person's return to India. The Sum Insured shall be the maximum liability of the Company under this benefit.

Subject to the above, the Company shall pay to the Insured/Insured Person or his/her nominees or the legal representative, as the case may be, the sum or the sums as set forth in the Table of Benefits below

This also covers if the Insured suffers Accidental Bodily Injury on the way from his residence to the International Airport in India to start his Overseas journey or back to his residence from the International Airport in India on his return from Overseas journey during Policy Period and if this is the sole and direct cause of his Permanent Disability within 3 months from the date of such injury, then the Insurer will pay the Insured the percentage of the Sum Insured specified for each and every form of condition mentioned in the table below. The Insurer's maximum liability however shall not be more than 100% of the Limit of Indemnity as stated in the schedule/Certificate

Table of Benefits	Percentage of Sum Insured payable as compensation
2. PTD – Total and irrecoverable loss of	
i) Sight of both eyes or of the actual loss by physical separation of two entire hands or two entire feet or one entire hand and one entire foot or of such loss of sight of one eye and such loss of one entire hand or one entire foot.	100%
ii) Use of two hands or of two feet or of one hand and one foot or of such loss of sight of one eye and such loss of use of one hand or one foot.	100%

iii) Total Paralysis	100%
iv) Loss of all fingers and both thumbs OR loss of arm – at shoulder; between shoulder and elbow; at and below elbow OR loss of leg – at hip; between knee and hip; below knee	100%
For the purpose of items 2 i) and 2 ii) above, physical separation of one entire hand shall mean separation at or above wrist and/or of the foot at or above ankle respectively.	
3. Permanent total and absolute Disability disabling the Insured/Insured Person from engaging in any employment or occupation of any description whatsoever which he or she was capable of doing earlier	100%

Permanent Partial Disability (PPD):

Coverage

The Company shall compensate the Insured/Insured Person or his/her nominees or the legal representatives, as the case may be, for accidental bodily injury (whilst on a trip covered by this Policy) solely and directly caused by accidental, violent, external and visible means resulting in one of the losses shown in the table below. The loss must occur within 365 Days from the date of the Accident which caused Injury.

If due to any accident, multiple physical and mental functions of the Insured/Insured person are impaired, the amount payable shall be cumulative sum of the percentage of Sum Insured stated in the Table of Benefits for PPD below, but the total compensation payable for all the Disabilities together shall be upto the 100% of the Sum Insured specified in the Policy Schedule/Certificate.

The Sum Insured as specified in the Policy Schedule/Policy Certificate shall be the limit per person per Policy period payable only in Indian Currency on the Insured Person's return to India. The Sum Insured shall be the maximum liability of the Company under this benefit.

Subject to the above, the Company shall pay to the Insured/Insured Person or his/her nominees or the legal representative, as the case may be, the sum or the sums as set forth in the Table of Benefits below

4. Table of Benefits for PPD - Total and irrecoverable loss of various parts as given below:	Percentage of Sum Insured
The sight of one eye or the actual loss by physical separation of one entire hand or one entire foot.	50%
Use of a hand or a foot without physical separation	50%
Loss of speech	50%
Loss of toes – all	20%
Loss of toes great - both phalanges	5%
Loss of toes great - one phalanx	2%
Loss of toes other than great, if more than one toe lost: each	2%
Loss of hearing - both ears	75%
Loss of hearing - one ear	30%

Loss of four fingers and thumb of one hand	50%
Loss of four fingers of one hand	40%
Loss of thumb - both phalanges	25%
Loss of thumb – one phalanx	10%
Loss of index finger – three phalanges	15%
Loss of index finger – two phalanges	10%
Loss of index finger - one phalanx	5%
Loss of middle finger or ring finger or little finger – three phalanges	10%
Loss of middle finger or ring finger or little finger – two phalanges	7%
Loss of middle finger or ring finger or little finger - one phalanx	3%
Loss of metacarpals – first or second (additional) or third, fourth or fifth (additional)	3%
Any other permanent partial Disability	Percentage as assessed by an independent Physician and / or doctor of the Company
<p>The Disability occurs within one year of accident The Disability must be confirmed and claimed for prior to the expiry of a period of 3 months since occurrence of the Disability</p>	

Special Conditions

- 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 for payment.
- If the accident impairs a number of physical or mental functions, the degree of Disability given in the Table of Benefits will be added together, but the amount payable shall not exceed 100% of the Sum Insured specified in the Policy Schedule/Policy Certificate.
- 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 determining the benefit amount in such a case will be the degree to which the normal physical or mental capabilities are impaired, solely from a medical point of view, as ascertained by a panel of doctor by the Company or Emergency Assistance Service Provider.
- In the event of permanent Disability, the Insured Person will be under obligation:
- To have himself/herself examined by the Panel Doctors appointed by the Company/Emergency Assistance Service Provider and the Company will pay the costs thereof.
- To authorize doctors providing treatment or giving expert opinion and any other authority to supply the Company any information that may be required on the condition of the Insured Person.
- If the above obligations are not met with due to whatsoever reason, the Company shall be relieved of its liability to compensate under this benefit.
- The benefit applicable under this Section shall be in addition to the benefits applicable under Section - Accidental Death (Common Carrier), - Permanent Total **Disability** - Common carrier, Permanent Partial **Disability** - Common carrier
- The benefit applicable under this section shall include Felonious Assault for Section – Personal Accident Death, Permanent Total Disability & Permanent Partial Disability

Special Exclusions:

- The Company shall not be liable to make any payment under this benefit in respect of the following:
- Any existing physical disability.
- Accidents due to mental disorders or disturbances of consciousness, strokes, fits or convulsions which affect the entire body and pathological disturbances caused by the mental reaction to the same.

- Damage to health caused by curative measures, radiation, Infection, poisoning except where these arise from an accident.
- Any payment under this benefit whereby the Company's liability would exceed the sum payable in the event of accidental death.
- Any other claim after a claim for accidental death has been admitted by the Company and becomes payable.
- Any claim which arises out of an accident connected with the operation of an aircraft or which occurs during parachuting except when the Insured/Insured Person is flying as a Fare Paying passenger in a multi-engine, commercial aircraft.
- Payment of compensation in respect of accidental death, injury or Disability of the Insured/Insured Person from;
 - intentional self-injury, suicide, or attempted suicide.
 - whilst under the influence of intoxication, liquor or drugs.
 - whilst engaging in aviation or ballooning whilst mounting into dismounting from or travelling in any aircraft or balloon other than as a Fare Paying Passenger in any duly licensed standard type of aircraft.
 - arising or resulting from the insured/insured person committing any breach of law with criminal intent or participating in an actual or attempted felony, riot, crime, misdemeanour or civil commotion.
 - whilst engaging in speed contest or racing of any kind, hunting, bungee jumping, parasailing, ballooning, skydiving, paragliding, hand gliding, mountaineering or rock climbing, potholing, abseiling, deep sea diving, polo, snow and ice sports, etc. unless specifically covered and duly mentioned in the Policy Schedule/Policy Certificate
- Any consequential loss or damage cost or expense of whatsoever nature.
- Accidental Death or Disability resulting, directly or indirectly, caused by, contributed to or aggravated or prolonged by childbirth, maternity or pregnancy or in consequence thereof, venereal disease or infirmity
- Insured whilst flying or taking part in aerial activities (including cabin crew) except as a Fare Paying Passenger in a regular Scheduled Commercial airline or air Charter Company.
- Any exclusion mentioned in the 'General Exclusions' section of this Policy.

Accidental Death—Common Carrier

Coverage

The Company will pay compensation upto the limit of the Sum Insured for this benefit as specified in the Policy Schedule/policy certificate if accidental injury to the Insured Person results in loss of life while riding as a passenger (but not as a pilot operator or member of the crew) in or on, boarding or alighting from any common carrier as defined under definition section of this document provided that, this benefit shall not apply while the Insured Person is riding in or on, or boarding or alighting from, and/or is piloted by a person who does not hold a current and valid certificate of competency of a rating authorizing as a pilot of such common carrier.

Specific Exclusion:

All the exclusions and Special Conditions applicable to Section- Personal Accident Death shall be applicable to this Section also.

The benefit applicable under this Section shall be in addition to the benefits applicable under Section - Accidental Death

-
- Any exclusion mentioned in the "General Exclusions" Section of this Policy.
-

Permanent Total Disability - Common carrier

Coverage

The Company will pay compensation upto the limit of the Sum Insured for this benefit as specified in the Policy Schedule /Policy Certificate if accidental injury to the Insured Person results in permanent total Disability while riding as a passenger (but not as a pilot operator or member of the crew) in or on, boarding or alighting from any common carrier as defined under definition section of this document provided that, this benefit shall not apply while the Insured Person is riding in or on, or boarding or alighting from, any common carrier as defined under definition section of this document that does not hold a or is piloted by a person who does not hold a current and valid certificate of competency of a rating authorizing as a pilot of such common carrier.

Specific Exclusion:

- All the exclusions and Special Conditions applicable to Section - Permanent Total Disability (PTD) shall be applicable to this Section also.
- The benefit applicable under this Section shall be in addition to the benefits applicable under Section - Permanent Total Disability (PTD)
- Any exclusion mentioned in the “General Exclusions” Section of this Policy.

Permanent Partial Disability - Common carrier

Coverage

The Company will pay compensation upto the limit of the Sum Insured for this benefit as specified in the Policy Schedule/Policy Certificate if accidental injury to the Insured Person results permanent partial Disability while riding as a passenger (but not as a pilot operator or member of the crew) in or on, boarding or alighting from any common carrier as defined under definition section of this document provided that, this benefit shall not apply while the Insured Person is riding in or on, or boarding or alighting from, any common carrier as defined under definition section of this document that does not hold a current /or is piloted by a person who does not hold a current and valid certificate of competency of a rating authorizing as a pilot of such common carrier.

Exclusion:

- All the exclusions and Special Conditions applicable to Section- Permanent Partial Disability (PPD) shall be applicable to this Section also.
- The benefit applicable under this Section shall be in addition to the benefits applicable under Section - Permanent Partial Disability (PPD)
- Any exclusion mentioned in the “General Exclusions” Section of this Policy.

Section: Compassionate Visit

Coverage

- A. If the Insured Person is Hospitalized for more than seven (7) consecutive days in a Country of Visit whilst on a Trip, and no adult Immediate Family Member is present, the Company shall pay or reimburse the amounts incurred by any one Immediate Family Member for obtaining return tickets in economy class on a Common Carrier to visit the Insured Person, and expenses for the duration of the stay in the Hospital up to the limit of Sum Insured as specified against this Benefit in the Policy Certificate, provided that the attending Medical Practitioner certifies in writing that it is not advisable that the Insured Person travel back to India/ Country of Origin based on the medical condition, and that he/she would benefit from the visit of an Immediate Family Member.
- B. If an Immediate Family Member of the Insured Person is Hospitalized in India/ Country of Origin for more than seven (7) consecutive days or in the event of their death, whilst the Insured Person is in a Country of Visit on a Trip, the Company shall pay or reimburse the amounts incurred by the Insured Person for obtaining return tickets in economy class on a Common Carrier to his usual place of residence to visit the Immediate Family Member up to the limit of Sum Insured as specified against this Benefit in the Policy Certificate, provided that the attending Medical Practitioner certifies in writing that such Immediate Family Member would benefit from the Insured Person's visit.
- C. The Insurer's liability to make payment is only in excess of the Deductible as specified in policy certificate

For point A above, this Benefit is payable subject to the following:

1. The Company has accepted a claim under Emergency Medical Expenses in respect of the Insured Person for the same period of Hospitalization.
2. In case this benefit has been opted as standalone basis, the admissibility of the claims for compassionate visit shall be determined based on the admissibility of claim under Emergency Medical Expenses had the same been covered under the policy
3. All the exclusions and Special Conditions applicable to **Emergency Medical Expenses , Emergency Medical Evacuation , Repatriation of Mortal Remains or Emergency or "Emergency Medical Expenses (inclusive of Emergency Medical Evacuation and Repatriation of Mortal Remains)** shall also be applicable to this Benefit also
4. Company's liability does not exceed the Sum Insured or limit specified in the policy certificate.
5. Round trip tickets in economy class on a Common carrier will be reimbursable due to event mentioned under point (B) of this cover will be occurred , however, company's liability does not exceed the Sum Insured or limit specified in the policy certificate
6. Any exclusion mentioned in the "General Exclusion" section of this policy.

Section :Loss of Passport and documents

Coverage

If the Insured Person's passport is lost or stolen during a trip abroad, the Company shall reimburse the actual expenses necessarily and reasonably incurred in connection with obtaining a duplicate or fresh passport or issuance of an Emergency Certificate from the concerned consulate, up to the limit of Sum Insured or limits specified against this Benefit in the Policy Certificate.

This Section also provides for reimbursement of actual expenses necessarily and reasonably incurred in connection with obtaining/replacing the stolen travel documents/tickets and travelers cheques up to the limit of Sum Insured for this benefit, if such documents/tickets/ travelers cheques belonging to the Insured/ Insured Person be lost whilst on a trip. The Insurer's liability to make payment is only in excess of the Deductible as specified in policy certificate

This Benefit is payable subject to the following:

1. The incident is to be reported to the police within 24 hours of the Insured Person becoming aware of the theft, and a written police report is to be furnished to the Company.
2. A Deductible of an amount specified in the Policy Certificate shall be separately applicable for each and every claim made under this Benefit.

Specific Exclusion:

The Company shall not be liable to make any payment for any claim for loss or theft in respect of an Insured Person, directly or indirectly for, caused by, arising from or in any way attributable to any of the following:

- 1 Any delay or confiscation or detention by the customs, police or public authorities.
- 2 Any loss of the passport in a public place or in a public transport, due to the Insured Person's failure to take reasonable precautions to avoid such loss.
- 3 Loss or theft of the passport from an unlocked private hotel room/apartment/vehicle, unless forcible and violent entry was used to gain access to it.
- 4 Any exclusion mentioned in the "General Exclusions" Section of this Policy.

This cover is also available as a fixed benefit option upto the sum insured clearly specified in the policy certificate or under the special conditions of the policy certificate & subject to admissible claim as per the policy conditions applicable to this section including specific exclusion and to any other condition applicable to this policy. In respect to process claims documents specified under Documentation section is necessary to evaluate the claim. All terms & conditions applicable to this cover remains same as mentioned in coverage, specific exclusion, General exclusion applicable to this section

Section : Total Loss of Checked-in Baggage

Coverage

In the event of total and complete loss of Checked-in Baggage whilst on a Trip and whilst it is in the custody of the Common Carrier, the Company shall reimburse the Insured Person for the Market Value of such Checked-in Baggage upto the limit of Sum Insured or sub limit specified against this Benefit in the Policy Certificate.

For the purpose of this Benefit, "Market Value" refers to the amount required to purchase new items of the same kind and quality as those contained in the Checked-in Baggage, in relation to which a claim is under this benefit, less applicable depreciation @25% per annum from the date of purchase, calculated as at the time of loss. Maximum depreciation applicable under this benefit shall not exceed 60% in any event.

The cover is applicable only at the Intended Destinations, and is limited to the period commencing from the time the

Checked-in Baggage is entrusted to the Common Carrier and return of the Insured Person back to the City of Origin, or any other Port in India/ Country of Origin along with all halts and via destinations included in the travel booking.

This Benefit shall be payable subject to the following:

1. In the event of such a total and complete loss of Checked-in Baggage whilst in the custody of the Common Carrier, a Property Irregularity Report (PIR) must be obtained from the Common Carrier immediately upon discovery of the loss which must be submitted along with the claim.
2. A Deductible of an amount specified in the Policy Certificate shall be separately applicable for each and every claim made under this Benefit.
3. Our maximum liability under this Benefit in respect of any one Checked-in Baggage, in case more than one bag has been checked-in, is 50% of the applicable Sum Insured. In case of only one bag being checked-in, the maximum liability is upto 100% of the applicable Sum Insured.
4. The Company has been provided with all the documents, reports and other details from the Common Carrier confirming the loss of Checked-in Baggage in its custody.
5. If the Company makes any payment under this benefit, it is agreed that any recovery from any Common Carrier by the Insured Person, under the terms of the Convention for the Unification of Certain Rules Relating to International Carriage by Air, 1929 ("Warsaw Convention") shall become the property of the Company.
6. Any partial loss of the items contained within the Checked-in Baggage, not amounting to a total and complete loss of such Checked-in Baggage, shall not be payable.
7. In the event of simultaneous claims under this Benefit as well as under Delay of Checked-in Baggage, the higher of the claims shall be payable by the Company in respect of the same item(s) of Checked-in Baggage during any one Period Of Insurance.

Specific Exclusions:

The Company shall not be liable to make any payment for any claim under this Benefit of the Policy in respect of an Insured Person, directly or indirectly for, caused by, arising from or in any way attributable to any of the following:

- 1 Valuables, Money, any kind of securities and tickets/passes or any other item not declared and/or agreed by the Company.
- 2 Loss of any Checked-in Baggage unless a Property Irregularity Report or other report usually issued by the Common Carrier in the event of loss of Checked-in Baggage has been procured and submitted to the Company.
- 3 Any partial loss of the items contained within the Checked-in Baggage.
- 4 Losses arising from any delay, detention, confiscation by the customs officials or other public authorities.
- 5 Any Checked-in Baggage loss while the Insured Person is in India/ Country of Origin.
- 6 Any exclusion mentioned in the "General Exclusions" Section of this Policy

This cover is also available as a fixed benefit option upto the sum insured clearly specified in the policy certificate or under the

special conditions of the policy certificate & subject to admissible claim as per the policy conditions applicable to this section including specific exclusion and to any other condition applicable to this policy. In respect to process claims documents specified under Documentation section is necessary to evaluate the claim. All terms & conditions applicable to this cover remains same as mentioned in coverage, specific exclusion, General exclusion applicable to this section

Section : Delay of Checked-in Baggage

Coverage

The Company shall pay or reimburse to the Insured/ Insured Person for costs of necessary emergency purchases of toiletries, medication and clothing in the event of the Insured/Insured Person for the delay in scheduled arrival of the checked-in baggage caused by a Common Carrier, on a trip up to the Sum Insured or limits specified in the Policy certificate or the expenses incurred by the Insured person towards transportation for recovering the checked –in baggage from the common carrier. The cover is limited to the travel destinations specified in the main travel ticket from the Republic of India with all halts and via destinations included in the main travel ticket and declared at the time of purchase of this Policy. The Insurer’s liability to make payment is only in excess of the Deductible as specified in policy certificate

This Benefit shall be payable subject to the following:

1. For each and every claim made under this Benefit, a Deductible of number of hours specified in the Policy Certificate shall be separately applicable in terms of delay in arrival of the Checked-in Baggage from the actual arrival time of the Common Carrier at the Insured Person’s Intended Destination.
2. The Company is provided with a proof of such delay in writing from the Common Carrier.
3. The Company is provided with the receipts of the purchase of toiletries, medication and clothing that the Insured Person needed to buy in the duration of such delay.
4. If the Company makes any payment under this benefit, it is agreed that any recovery from any Common Carrier by the Insured Person, under the terms of the Convention for the Unification of Certain Rules Relating to International Carriage by Air, 1929 (“Warsaw Convention”) shall become the property of the Company.
5. In the event of simultaneous claims under this Benefit as well as under Total Loss of Checked-in Baggage, the higher of the claims shall be payable by the Company in respect of the same item(s) of Checked -in Baggage during any one Period Of Insurance.

This cover is also available as a fixed benefit option upto the sum insured clearly specified in the policy certificate or under the special conditions of the policy certificate & subject to admissible claim as per the policy conditions applicable to this section including specific exclusion and to any other condition applicable to this policy. In respect to process claims documents specified under Documentation section is necessary to evaluate the claim. All terms & conditions applicable to this cover remains same as mentioned in coverage, specific exclusion, General exclusion applicable to this section

Specific Exclusions:

The Company shall not be liable to make any payment for any claim under this Benefit of the Policy in respect of an Insured Person, directly or indirectly for, caused by, arising from or in any way attributable to any of the following:

- 1 Valuables, Money, any kind of securities and tickets/passes or any other item not declared and/or agreed by the Company.
- 2 Loss of any Checked-in Baggage unless a Property Irregularity Report or other report usually issued by the Common Carrier in the event of loss of Checked-in Baggage has been procured and submitted to the Company.
- 3 Any partial loss of the items contained within the Checked-in Baggage.
- 4 Losses arising from any delay, detention, confiscation by the customs officials or other public authorities.
- 5 Any delay while the Insured Person is in India/ Country of Origin.
- 6 Loss due to complete/partial damage of the Checked-in Baggage.

Section : Trip Cancellation and/or Interruption**Coverage**

The Company shall compensate the Insured/ Insured immediate family, subject to limit of Sum Insured or sublimit shown in the policy certificate, if a trip is cancelled or interrupted due to any of the following reasons:

1. Unforeseen disease, illness, injury, or death of the Insured. Disease, injury or illness must be so disabling as to reasonably cause a trip to be cancelled or interrupted as supported by medical records and opinion acceptable to the Company.
2. Death of Insured's spouse, children, parent or parent in-law's.
3. Death of Brother or Sister of the insured 15 days prior to the departure date as stated in the policy.
4. Serious injury, sudden sickness of insured's spouse or parent or parent in-law or child requiring hospitalization for more than 24 hrs.
5. Compulsory quarantine or prevention of travel by Government of India
6. Inclement weather conditions causing cancellation or interruption of the trip with due authentication by a letter from the common carrier or this information is available from a reliable source in the public domain through any form of communication;
7. A Deductible of an amount specified in the Policy Certificate shall be separately applicable for each and every claim made under this Benefit.

For the purpose of this benefit immediate family member shall mean member of the Insured Person's immediate family i.e the Insured Person's spouse, child who reside in the same country as the Insured Person

"Inclement weather" means includes Earthquake, Lighting, Storm, Typhoon, Hurricane, Landslide and rockslide, Tsunami, Volcano Eruption, Floods and Cyclone .

Trip Cancellation Benefits: Trips that are cancelled before the scheduled departure due to the reasons mentioned above. Company will reimburse for the non-refundable portion of the pre-paid lodging cost and/or the ticket cancellation charges, Visa charges, any sightseeing booked, cruise ticket, events, which are paid in advance or contracted to be paid by insured/insured

person in the event of cancellation of trip post deduction of compensation offered by service provider/common carrier or any other source) , the maximum liability of company is subject to Sum insured or Sub limit shown in the policy certificate .

Trip Interruption Benefits: The Company will pay this benefit up to Sum Insured as specified in the Policy certificate, for trips that have been interrupted, due to the reasons mentioned above. The Company will reimburse for the forfeited, non-refundable prepaid payments, made prior to the Insured/ Insured Person's departure and additional cost of transportation expenses incurred by the Insured/ Insured Person(cost after adjusting the proceeds of canceling or preponing the already booked return ticket, if any), either

1. To return to the Republic of India; or
2. From the place that the Insured left the trip to the place that the Insured may rejoin the trip;
3. To reach the original trip destination if the Insured/ Insured Person is delayed, and leaves after the trip departure date.

However, the benefit payable under (2) and (3) will not exceed the cost of economy airfare by the most direct route, less any refunds paid or payable.

This cover is also available as a fixed benefit option upto the sum insured clearly specified in the policy certificate or under the special conditions of the policy certificate & subject to admissible claim as per the policy conditions applicable to this section including specific exclusion and to any other condition applicable to this policy. In respect to process claims documents specified under Documentation section is necessary to evaluate the claim. All terms & conditions applicable to this cover remains same as mentioned in coverage, specific exclusion, General exclusion applicable to this section.

Section: TRAVEL INCONVENIENCE:

Coverage

In the event of Trip cancellation or Interruption of a covered trip due to necessary and unavoidable reasons as stated below, the Company will indemnify the insured for the non-refundable portion of the pre-paid lodging cost and/or the ticket cancellation charges, Visa charges, any sightseeing booked, cruise ticket, events, which are paid in advance or contracted to be paid by insured/insured person in the event of cancellation of trip (post deduction of compensation offered by service provider/common carrier or any other source) , the maximum liability of company is subject to Sum insured or Sub limit shown in the policy certificate. The Insurer's liability to make payment is only in excess of the Deductible as specified in policy certificate

1. Unforeseen disease, illness, injury, or death of the Insured/Insured Immediate Family Member. Disease, injury or illness must be so disabling as to reasonably cause a trip to be cancelled or interrupted as supported by medical records and opinion acceptable to the Company.
2. When Insured's Principal residence and/or his intended place of stay at destination is rendered uninhabitable due to Fire, flood, vandalism or natural disaster and also his place of business is rendered inoperative due to operation of said perils.
3. Termination of employment or layoff affecting the insured provided that the insured have been employed with the same employer for at least five continuous years without any break.
4. The Insured and/or his immediate family member have become victim of Felonious Assault 10 days prior to the departure date provided he/they are not principal or an accessory in such felonious assault.
5. Inclement weather in the city or primary place of departure and / or at intended destination.

6. Terrorist Attack in the home city and/or at departing station and/or destination listed on the insured's itinerary 3 days prior to the Insured's departure date and resulting that the Insured is unable to move out consequent upon such terrorist attack
7. Civil Unrest, Riot and Strike in the home city and/or at departing station and/or intended destination (as defined in the policy) of the Insured making the trip impossible, provided that
 1. The Govt. of India issues a travel advisory.
 2. Airport is shut down forcing the Airline to delay the flight for more than 24 hours or to cancel the flight.
 3. Curfew is imposed by the City Administration.

For the purpose of this benefit immediate family member shall mean any member of the Insured Person's immediate family i.e. the Insured Person's spouse, child or parent, children-in-law; siblings; siblings-in-law; parents; parents-in-law; grandparents; grandchildren; legal guardian, ward; step or adopted children; step-parents; who reside in the same country as the Insured Person

"Inclement weather" means includes Earthquake, Lighting, Storm, Typhoon, Hurricane, Landslide and rockslide, , Tsunami, Volcano Eruption, Floods and Cyclone.

This cover is also available as a fixed benefit option upto the sum insured clearly specified in the policy certificate or under the special conditions of the policy certificate & subject to admissible claim as per the policy conditions applicable to this section including specific exclusion and to any other condition applicable to this policy. In respect to process claims documents specified under Documentation section is necessary to evaluate the claim. All terms & conditions applicable to this cover remains same as mentioned in coverage, specific exclusion, General exclusion applicable to this section.

Specific Conditions applicable for Trip Cancellation and/or Interruption / Travel Inconvenience

1. It is a condition precedent to liability hereunder that in the event of any occurrence likely to give rise to a claim under this Insurance, that the Insured Person must notify insurer immediately. While notifying the occurrence, the insured person must quote as much as information concerning the occurrence as is available including policy number and its date of issue.
2. It shall be the responsibility of Insured to take appropriate action to avoid or minimize any potential claim under policy (e.g. avoid intentional delay during interruption or not to travel to the country or part thereof for which warning has been issued.)
3. The insured must not be aware of any reason (as stated in the list of covered risks) at the time of opting of this extension that may give rise to a claim under the policy.
4. The company's liability shall be restricted to the sum insured opted by the Insured or the sum of total non-refundable amount whichever is less.
5. In case of partial cancellation of the trip, i.e. if only one or two members' trip is cancelled on account of operation of Insured peril, the company's liability shall be restricted to the non-refundable portion of insured's travel tickets only and not for Hotel Charges unless exclusive booking was made for each member. No partial charges of Hotel Booking for reduction in number of members will be allowed in such cases.
6. If the situation becomes normal against the alert of Quarantine issued earlier by the Govt. of India or if the prevention of travel is withdrawn by Govt. of India before the departure date mention in the schedule of policy/policy certificate and this information is available for the knowledge of General Public through any communication, the company shall not be liable for any claim in respect of such perils.
7. Operation of any of insured peril shall be considered only at the time of travel for all practical purposes in settlement of claims.

Specific Exclusions Applicable for Trip Cancellation and /or Interruption, Travel Inconvenience.

The Company shall not be liable to make any payment under this benefit in connection with or in respect of the following:

1. Common carrier-caused delays, including an announced, organized sanctioned union labour strike that affects public transportation, unless the commencement of the period of insurance is prior to a date when the strike is foreseeable. A strike is foreseeable on the date the labour union members vote to approve a strike.
2. Travel arrangements cancelled or changed by an airline, cruise line, or tour operator, unless the cancellation is the result of inclement weather.
3. Changes in plans by the Insured, an immediate family member, or travelling companion for any reason.
4. Adverse change in financial circumstances of the Insured/ Insured Person, any family member, or a travelling companion.
5. Any business or contractual obligations of the Insured/ Insured Person, any family member, or a travelling companion, except for termination or layoff of employment of the Insured or the travelling companion of the Insured as defined above.
6. Default by the person, agency, or tour operator from whom the Insured/ Insured Person bought this Policy and/or made travel arrangements.
7. Any government regulation or prohibition.
8. An event or circumstance, which occurs prior to the commencement of the period of insurance.
9. On account of a felonious assault, where the Insured, any family member of the Insured, the travelling companion or travelling companion's family member has been a principal or accessory in the assault committed.
10. Any exclusion mentioned in the 'General Exclusions' section of this Policy.

Section: Trip Delay**Coverage**

The Company shall reimburse the reasonable additional expenses incurred by the Insured if his or her trip, covered by this Policy, is delayed beyond a specified number of hours, as mentioned in the Policy Schedule, from the scheduled time only on account of the following unforeseen reasons. Delay will be covered under the following circumstances if specified on the certificate of insurance. The Insurer's liability to make payment is only in excess of the Deductible as specified in policy certificate

1. Adverse weather condition &/or Air Traffic Congestion.
2. Riot, Strike, Industrial Action at airport or that of Airlines,
3. Accidental or Mechanical Failure or Technical problem in the Aircraft, Provided always that
 - a) The insured has taken every reasonable step to complete the journey to the departure point on time, and
 - b) The insured shall submit to the Company sufficient proof to substantiate the cause of delay in support of his claim.

Specific Exclusions:

1. Any departure which is delayed as a result of the insured or any other person who have arranged to travel with failing to check in timely as required by the airlines.
2. Any delayed departure caused by strike or industrial action known to exist or was anticipated at the time the trip was booked
3. If the air craft is taken out of service on the instruction of the Civil Aviation Authority
4. No claim shall be payable for delay of hrs. mentioned in the policy certificate from the schedule time of departure of Flight

This benefit does not cover any other loss other than those mentioned above under the head coverage, directly or indirectly, in whole or in part, including loss caused by or resulting from any exclusion mentioned in the 'General Exclusions' section of this Policy

This cover is also available as a fixed benefit option upto the sum insured clearly specified in the policy certificate or under the special conditions of the policy certificate & subject to admissible claim as per the policy conditions applicable to this section including specific exclusion and to any other condition applicable to this policy. In respect to process claims documents specified under Documentation section is necessary to evaluate the claim. All terms & conditions applicable to this cover remains same as mentioned in coverage, specific exclusion, General exclusion applicable to this section.

Section: Personal Liability

Coverage

The Company shall indemnify the Insured/ Insured Person towards legal liability including defense costs of the Insured Person to a third party for an incident which results in accidental death, injury or damage to the health or property of such third party whilst on a trip abroad during the period of insurance covered by this Policy, up to the sum insured or sub limit specified in the Policy certificate. The incident leading to the legal liability of the Insured/Insured Person should have occurred during the period of insurance and whilst on a trip abroad covered by this Policy.

The deductible in respect of this benefit will be applicable for each and every claim separately, and shall be of an amount as specified in the Policy Schedule/Policy Certificate

Specific Exclusions

The Company shall not be liable to make any payment under this Section in respect of the following:

1. Any claim arising from Insured/Insured Person's personal contractual liability or through promises made by the Insured/Insured Person.
2. Any claim of personal liability of the Insured Person towards his/her family, relations and travelling companions, whether personal or official.
3. Any claim resulting from transmission of an illness or disease by the Insured Person.
4. Any claim for damage resulting from professional activities/sports involving the Insured/ Insured Person.
5. Any claim for liability, arising directly or indirectly, from or due to:
 - a) possession of animals, birds, reptiles, insects etc. and their by-products like skin, hair, feathers, horns, fur, ivory, bones, eggs, etc.
 - b) ownership or possession of vehicles, aircrafts, water crafts, or activities of the Insured/Insured Person involving parachuting, hand-gliding, hot air ballooning or use of fire arms.
 - c) Any wilful, negligent, malicious or unlawful act.
 - d) Insanity, the use of any alcohol/drugs (except as medically prescribed) or drug addiction.
 - e) Any supply of goods or services on the part of the Insured/Insured Person.
6. Any ownership or occupation of land or buildings other than the occupation of any temporary residence.
7. Any exclusion mentioned in the 'General Exclusions' section of this Policy.

Special Conditions

1. The Company shall be responsible for contesting unjustified claims against the insured and providing indemnity for the damages, which the Insured/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 the Company or under a judicial decision rendered by a Court of Law.
2. The Insured Person does not incur any Defence Costs or expenses, admit liability or settle or attempt to settle, make any admission or offer any payment or otherwise assume any contractual obligation with respect to such claim

without Our prior written consent.

3. If there is a legal action in process against the Insured/Insured Person over a personal liability issue, the Company may conduct the legal action, including appointment of legal counsel, at the Company's expense in the name of the Insured/Insured Person.
4. The Company will have the right, but in no case the obligation, to take over and conduct in the name of the insured/insured person the defense of any claim and will have full discretion in the conduct of any proceedings and in the settlement of any claim and having taken over the defence of any claim, the Company may relinquish the same.
5. The Company shall not settle any claim without the express consent of the Insured Person, but if the Insured Person refuses an available settlement recommended by the Company, then the Company's liability shall be restricted to the amount by which such claim could have been settled;
6. A Deductible of an amount specified in the Policy Certificate shall be separately applicable for each and every claim made under this Benefit.

Section : Financial Emergency Assistance

Coverage

In the event of a financial emergency arising in relation to the permanent and total loss of the Insured Person's Money whilst on a Trip, due to any Theft, mugging, robbery, dacoity, or pilferage of Money of the Insured Person in the Country of Visit, the Company shall co-ordinate with Insured Person's relative/s in India/ Country of Origin to facilitate/organize emergency cash to the Insured as per his/her requirement, and make payment for transfer charges which has been made through emergency service provider or by company up to the limit of Sum Insured specified against this Benefit in the Policy Certificate.

This Benefit shall be payable subject to the following:

1. Such loss of Money is required to be reported to the Police having jurisdiction at the place of loss within 24 hours of the occurrence of the incident, and a written report being obtained for the same.
2. In case of loss of traveller's cheques, such loss needs to be immediately reported to the local branches or agents of the applicable issuing authority.
3. It is a Condition Precedent to the Company's liability under this Benefit that in the event of any such loss of Money, the Insured Person must notify the same to the Company as soon as practicable, with complete details of the occurrence, as are available, Policy number, Member ID/Policy Certificate no, date of issuance, in addition to applicable Police Report/Issuing Authority's notification by the Insured Person.

Specific Exclusions:

The Company shall not be liable to make any payment for any claim under this Benefit of the Policy in respect of an Insured Person, directly or indirectly for, caused by, arising from or in any way attributable to any of the following:

1. A shortage in or loss of Money due to currency fluctuation, errors, omissions, exchange loss or depreciation in value.
2. Any loss not reported to the police having jurisdiction at the place of loss within 24 hours of the occurrence of the incident and a written report being obtained for the same.
3. Any claim in respect of a loss of traveler's cheques not immediately reported to the local branches or agents of the issuing authority.

4. Loss of Money not kept in the personal custody of the Insured Person.
5. Any claim made on or after return of the Insured Person back to India/ Country of Origin.
6. Any loss of Valuables, any kinds of securities or tickets;
7. Any loss of Money contained in Checked-in Baggage.
8. Any exclusion mentioned in the 'General Exclusions' Section of the Policy.

Section: Hijack Distress Allowance

Coverage

In the event that a Common Carrier in which the Insured Person is traveling whilst on a Trip is hijacked for more than the number of hours or amount specified as deductible in the Policy Certificate, the Company shall pay the amount specified in the Policy Certificate that the Insured Person is detained by hijackers, upto the maximum Sum insured or sub limit specified in the Policy Certificate.

A Deductible of the number of hours the Common Carrier has been under hijack, as specified in the Policy Certificate, shall be separately applicable for each and every claim made under this Benefit.

Specific Exclusions:

The Company shall not be liable to make any payment for any claim under this Benefit of the Policy in respect of an Insured Person, directly or indirectly for, caused by, arising from or in any way attributable to any of the following

1. The Insured Person and/or his Immediate Family Member being suspected to be an accomplice or an accessory in such hijack.
2. Any claim as a consequence of a change in the regular routes of travel/journey of the Common Carrier due to traffic, weather, fuel shortage and technical snag or security reasons.
3. Any exclusion mentioned in the 'General Exclusions' Section of this Policy.

Section: Bail Bond

Coverage

If the Insured/ Insured Person is arrested or detained by Police or Judicial authorities, for any bailable offence whilst on a trip abroad covered by this Policy, the Company shall provide the payment of bail amount to the appropriate authority/court on behalf of the Insured/ Insured Person up to the limit of Sum Insured specified against this Benefit in the Policy Certificate.

A Deductible of an amount specified in the Policy Certificate shall be separately applicable for each and every claim made under this Benefit.

Specific Exclusions

The Company shall not be liable to make any payment under this benefit in connection with or in respect of any expenses whatsoever incurred by the Insured/ Insured Person for:

1. All non-bailable offences as per the local law of the country in which the incident has taken place whilst the Insured is on a trip abroad
2. Any exclusion mentioned in the "General Exclusions" section of this Policy

This Benefit shall be payable subject to the following:

- i. The Company shall pay or arrange to pay through Emergency Assistance Service Provider to the Judicial Authority / Court directly on behalf of the Insured/Insured Person, the bail amount.
- ii. This benefit would be for bailable offences only.
- iii. The Insured shall appear in the Court on the date specified by the Court for trial and judgment.

If the bail bond is forfeited due to the misconduct or negligence or any wrongful act of the Insured/Insured Person or otherwise for breach of the terms of such bail bond, then the amount of the bail bond and all cost reasonably incurred by the Company in such behalf will require to be repaid by the Insured to the Company within 1 month after the bail bond is forfeited

- iv. In case of death of the Insured Person, at the first instance, the Immediate Family Member, and in case, where there is no Immediate Family Member, the Insured Sponsor, if any, will be liable to produce the death certificate or the necessary documents, as per the local law, in the Court within 1 month (of such death) for the release of the bail amount to Emergency Service Provider. In case the Insured fails to do so, it is hereby agreed that the Company would have full right and authority to recover the bail amount from the Insured.
- v. The amount will be refunded to the Company or Emergency Assistance Service Provider by the Court with which it was deposited as soon as the Court releases the bail amount with which the deposit was made. In no case the amount will be paid out to the Insured/Insured Person.
- vi. In the event the Court releases the bail amount to the Company/Emergency Assistance Service Provider and the bail amount has already been recovered from the estate of the Insured, it shall be paid back to the Insured's legal heir. The judgment shall have no bearing on the refund of the deposit to the Company or Emergency Assistance Service Provider. If the Court imposes any penalty or fine on the Insured/Insured Person at the time of interim order or final judgment, then in that case the Insured Person will not be at the liberty to get the fine deducted or adjusted from the bail amount which was deposited by the Company or Emergency Assistance Service Provider.

This cover is also available as a fixed benefit option upto the sum insured clearly specified in the policy certificate or under the special conditions of the policy certificate & subject to admissible claim as per the policy conditions applicable to this section including specific exclusion and to any other condition applicable to this policy. In respect to process claims documents specified under Documentation section is necessary to evaluate the claim. All terms & conditions applicable to this cover remains same as mentioned in coverage, specific exclusion, General exclusion applicable to this section.

Section: Loss of Gadgets

Coverage

In the event of Theft of the Insured Person's gadgets in the Country of Visit whilst on a Trip, the Company shall reimburse the Market Value of such gadgets, up to the limit of Sum Insured or sub limit on age, amount, per event limit specified against this Benefit in the Policy Certificate. The Insurer's liability to make payment is only in excess of the Deductible as specified in policy certificate.

For the purpose of this Benefit, "**Gadget**" shall mean a Mobile phone, I-Phones, I-PAD/tablet/laptop computer, or any handheld tablet, computers excluding any accessories or attachments that come as standard equipment with such devices.

For the purpose of this Benefit, "Market Value" refers to the amount required to purchase a new gadget of the same kind and quality as the gadget in relation to which a claim is made under this Benefit, less applicable depreciation @25% per annum from the date of purchase of such gadget, calculated as at the time of the loss.

For the purpose of this benefit "Unattended means" the device is either not visible to insured or proximity to the device is such that you cannot intervene an incident occur that results in loss, theft or damage to the gadget.

This Benefit shall be payable subject to the following:

1. Such Theft is required to be reported to the Police having jurisdiction at the place of loss within 24 hours of the occurrence of the incident, and a written report being obtained for the same.
2. The Company is provided with the original invoice/receipt evidencing the proof of purchase and ownership of such gadget, or document evidencing the authorized custody of the same, if such gadget is provided by his/her employer/business organization.
3. The Company is satisfied that the Insured Person took reasonable care to protect his/her gadget and did not in any way expose the gadget to the Theft due to negligence on his/her account, or on account of any Immediate Family Member or Travelling Companion.

Policy Wordings: Travel Assure - Group Overseas Travel Insurance

UIN of Product: ICITGOP22203V022122

Registered and corporate office address: ICICI Lombard General Insurance Company Ltd., ICICI Lombard House,

414, Veer Savarkar Marg, Prabhadevi, Mumbai - 400025, IRDAI Registration No: 115, CIN: L67200MH2000PLC129408, Toll free no: 1800 2666,

Website: www.icicilombard.com, Email: customersupport@icicilombard.com

4. A Deductible of an amount specified in the Policy Certificate shall be separately applicable for each and every claim made under this Benefit.

This cover is also available as a fixed benefit option upto the sum insured clearly specified in the policy certificate or under the special conditions of the policy certificate & subject to admissible claim as per the policy conditions applicable to this section including specific exclusion and to any other condition applicable to this policy. In respect to process claims documents specified under Documentation section is necessary to evaluate the claim. All terms & conditions applicable to this cover remains same as mentioned in coverage, specific exclusion, General exclusion applicable to this section.

Specific Exclusions:

The Company shall not be liable to make any payment for any claim under this Benefit of the Policy in respect of an Insured Person, directly or indirectly for, caused by, arising from or in any way attributable to any of the following:

1. Theft from road vehicles unless such theft is from the locked boot or closed glove compartment
2. Gadget being left unattended by the Insured Person.
3. Gadget packed in any Checked-In Baggage
4. Any Lost accessories or attachments
5. Any internal or external damage caused to the Gadget, either due to mishandling of such Gadget or otherwise on account of either the Insured Person or any other party involved in any Theft
6. Any claim made on or after return of the Insured Person back to India/ Country of Origin.
7. Any exclusion mentioned in the "General Exclusions" section of this Policy

Section: Loss of International driving License Coverage

The Company shall pay or reimburse to the Insured/ Insured Person upto the sum Insured or sub limit as specified in the policy certificate for expenses incurred towards obtaining a duplicate or fresh International Driving License either overseas or within 30 days upon the return to India, in the event of loss of Insured's International Driving License Overseas during covered trip. The Insurer's liability to make payment is only in excess of the Deductible as specified in policy certificate.

This Benefit shall be payable subject to the following:

1. Any Theft is required to be reported to the Police having jurisdiction at the place of loss within 24 hours of the occurrence of the incident, and a written report being obtained for the same.
2. A Deductible of an amount specified in the Policy Certificate shall be separately applicable for each and every claim made under this Benefit.
3. As a condition precedent to the Company's liability under this Benefit, the Insured Person shall immediately, or as soon as practicable, following the below procedure in the event of any occurrence or event giving rise to a claim under this Policy:
 - Provide immediate notice of such loss to the applicable Indian/Country of Origin authority as also expeditiously give or arrange for the applicable Indian/ Country of Origin authority to be provided with any and all information and documentation in respect of the claim and/or the Company's liability for it that may be requested by the Company or by the applicable Indian/ Country of Origin authority.
 - Provide the written police report to the applicable Indian/ Country of Origin authority.
 - Furnish all documents mentioned in the Claim Documentation of this policy.

This cover is also available as a fixed benefit option upto the sum insured clearly specified in the policy certificate or under the special conditions of the policy certificate & subject to admissible claim as per the policy conditions applicable to this section including specific exclusion and to any other condition applicable to this policy. In respect to process claims documents specified under Documentation section is necessary to evaluate the claim. All terms & conditions applicable to this cover remains same as mentioned in coverage, specific exclusion, General exclusion applicable to this section.

Policy Wordings: Travel Assure - Group Overseas Travel Insurance

UIN of Product: ICITGOP22203V022122

Registered and corporate office address: ICICI Lombard General Insurance Company Ltd., ICICI Lombard House, 414, Veer Savarkar Marg, Prabhadevi, Mumbai - 400025, IRDAI Registration No: 115, CIN: L67200MH2000PLC129408, Toll free no: 1800 2666, Website: www.icicilombard.com, Email: customersupport@icicilombard.com

Specific Exclusions

The Company shall not be liable for any claim under this Cover that is caused by or is attributable to or arises out of or is howsoever connected to any of the following:

- a) Any loss not reported to the police having jurisdiction at the place of loss within 24 hours of the incident and a written report is obtained from the police.
- b) Any loss arising from any delay, detention or confiscation by customs officials, police or other public authorities.
- c) Any loss arising from due to International Driving License left unattended or forgotten by the Insured in the public place or public transport, hotel or apartment.
- d) Any loss falling under the General Exclusions of this policy.

Section: Mugging Benefit

Coverage

If an Insured Person suffers any act of Mugging, whilst on a Trip in the Country of Visit and loss of any personal documents or personal effects is stolen by way of mugging, then the Company shall pay or reimburse the Insured Person up to the sublimit or Sum Insured specified against this Benefit in the Policy Certificate, provided that the Mugging is reported to the police in the applicable jurisdiction within 24 hours of Mugging, and a written police report is furnished to the Company. The Insurer's liability to make payment is only in excess of the Deductible as specified in policy certificate.

For the purpose of this Benefit, "Mugging" means a violent, unprovoked attack by a third party individual who is not an Immediate Family Member, relative, Travelling Companion or colleague of the Insured Person and is evidenced as such in a police report.

Specific Definitions

"Personal Documents" means an Insured Person's identity card (if applicable), ration card, voter identity card, Adhar Card.

"Personal Effects" means an Insured Person's clothing, toiletries, traveller cheques wherein personal effects will be covered upto 30% of the Sum insured or claimed amount whichever is more.

Specific Conditions

1. Any valid claim involving a motor vehicle, and at all-time subject to Specific Exclusion (5), will be limited to a maximum of Thirty percent (30%) of the Sum Insured stated in the Policy certificate.
2. All claims will be subject to the Company at its own discretion assessing the value of the claim based on the age and estimated wear and tear of the article that forms the basis of the claim.
3. Simultaneous claims under the "Checked in Baggage Delay, Loss of Gadgets Or Loss of Passport and documents cover, any amounts paid would be deducted from payment of a claim under this Section of the Policy.
4. If a Policyholder or Insured Person has other insurance against a loss covered by this Section, then the Company shall not be liable for a greater proportion of the loss than the applicable benefit under this Section bears to the total applicable benefit under all such insurance.

This cover is also available as a fixed benefit option upto the sum insured clearly specified in the policy certificate or under the special conditions of the policy certificate & subject to admissible claim as per the policy conditions applicable to this section including specific exclusion and to any other condition applicable to this policy. In respect to process claims documents specified under Documentation section is necessary to evaluate the claim. All terms & conditions applicable to this cover remains same as mentioned in coverage, specific exclusion, General exclusion applicable to this section.

Policy Wordings: Travel Assure - Group Overseas Travel Insurance

UIN of Product: ICITGOP22203V022122

Registered and corporate office address: ICICI Lombard General Insurance Company Ltd., ICICI Lombard House,

414, Veer Savarkar Marg, Prabhadevi, Mumbai - 400025, IRDAI Registration No: 115, CIN: L67200MH2000PLC129408, Toll free no: 1800 2666,

Website: www.icicilombard.com, Email: customersupport@icicilombard.com

Specific Exclusions:

The Company shall not be liable to make any payment for any claim under this Benefit of the Policy in respect of an Insured Person, directly or indirectly for, caused by, arising from or in any way attributable to any of the following:

1. Any loss not reported to the police having jurisdiction at the place of loss within 24 hours of the occurrence of the incident and a written report being obtained for the same.
2. Any claim made on or after return of the Insured Person back to India/ Country of Origin.
3. Any loss of money, coins or curios, sculptures, manuscripts, securities for money or any other negotiable instrument, stamp, rare books, medals, designs or any other collectibles, deeds, bonds, bill of exchange, share or stock certificates, business books, documents of any kind, unset precious stones, jewellery, ATM or credit or debit cards.
4. Losses arising from any delay, detention, confiscation by customs officials or other public authorities
5. Contact lenses, glasses, hearing aids or bridges or dentures for a tooth or teeth.
6. Any exclusion mentioned in the 'General Exclusions' Section of the Policy.

Section: Debit / Credit Card / FOREX CARD- Fraud**Coverage**

In the event of loss or Theft of the Insured Person's bank issued debit/credit/forex card in a Country of Visit whilst on a Trip, the Company shall pay or reimburse the financial loss incurred by the Insured Person, arising out of any fraudulent utilization of such card from the time of such loss or Theft being reported until the time of such card being blocked by issuing bank, up to the limit of Sum Insured as specified against this Benefit in the Policy Certificate. The Insurer's liability to make payment is only in excess of the Deductible as specified in policy certificate.

This Benefit shall be payable subject to the following:

1. All claims made under this Benefit shall be payable in India and in Indian Rupees only.
2. The Insured Person must have taken all reasonable steps to avoid any loss, damage or expense.
3. The loss or Theft is to be reported to the issuing bank as soon as practicable, and a written police report is to be furnished to the Company.
4. A Deductible of an amount specified in the Policy Certificate shall be separately applicable for each and every claim made under this Benefit.

Specific Conditions:

1. All claim under this section shall be payable in India and in Indian Rupees only.
2. Any suit or legal proceedings against the Company under this section shall be filed and instituted in the court having jurisdiction in India only.
3. Each insured person must take all reasonable steps to avoid any loss, damage or expense.

Specific Exclusions

The Company shall not be liable to make any payment for any claim under this Benefit of the Policy in respect of an Insured Person, directly or indirectly for, caused by, arising from or in any way attributable to any of the following:

1. Any claims where the loss can or could have been recovered from any other source.
2. Any claims where the reporting procedures of the issuing bank have not been followed as soon as practicable from the time of the Insured Person becoming aware
the local police as soon as practicable from the time of the Insured Person becoming aware of the loss or Theft.
4. Any claim arising out of a loss where Insured Person has left the card unattended.
5. Any costs incurred in procurement of a new card.
6. Any claims arising out of, or in connection with any contractual liability.

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7. Any claim arising out of a loss where the Insured Person, his/her Immediate Family Member, relative, colleague, Travelling Companion or business staff is involved as an accomplice or accessory.
8. Any loss or damage of a consequential nature.
9. Any financial loss or liability due to misuse of card occurring after the time of reporting the loss or Theft to the issuing bank.
10. Any claim, which is in any manner fraudulent or supported by any fraudulent statement or device, whether by the Insured Person or by any person acting on behalf of the Insured Person.
11. Any loss falling under the 'General Exclusions' Section

Section : Study Interruption

Coverage

In the event of any prolonged interruption/discontinuance of studies at an educational institution for an Insured Person, who is a student pursuing an educational course as a full time student in an educational institution in the Country of Visit during the Period of Insurance, directly as a result of his/her Hospitalization for one or more consecutive months due to any Injury or Illness covered under this Policy, or in case of any (i) Life Threatening Condition or (ii) any emergency medical evacuation or (iii) death of any of the Immediate Family Members, the Company shall reimburse any tuition fees paid by or on behalf of the Insured Person to any competent educational institution, up to the limit of Sum Insured as specified against this Benefit in the Policy Certificate, if the Insured Person cannot attend the remaining part of his/her current semester at the education institution, and the situation warrants that the Insured Person has to take tuition to complete the educational course.

This Benefit shall be payable subject to the following:

1. Any refund of tuition fees made or due to Insured Person from his/her existing educational institution shall be adjusted from any amounts payable under this Benefit.
2. In the event of a claim, the Insured Person shall be required to make a written request to the educational institution in which he is studying and obtain a written response in respect of the refund of tuition fees due to the Insured Person. Copies of both the above letters shall be required to be furnished to the Company for processing of a claim under this Benefit.

Only the tuition fee amounts mentioned on the official invoice(s) issued by said educational institution and any corresponding statement of refund of fee shall be the basis of settlement of a claim under this Benefit.

Specific Exclusions

This Section does not cover any other loss, directly or indirectly, in whole or in part, including loss caused by or resulting from any hospitalisation or trip arising due to:

1. Routine physical check-up and/ or any expenses related thereto;
2. A trip, the purpose of which was to obtain medical care;
3. Cosmetic or plastic surgery except medically required as part of treatment for accidents and burns,
4. Elective surgery;
5. Any treatment provided by a family member;
6. Specific named hazards, hand gliding, mountaineering, rock climbing, sky diving, professional or amateur racing and piloting an aircraft;
7. Accidents due to mental disorders or disturbances of consciousness, stroke, fits or convulsions which affect the entire body and pathological disturbances caused by the mental reaction to the same;
8. Damage to health caused by curative measures, radiation, infection, poisoning except where these arise from an accident;
9. Any claim which arises out of an accident connected with the operation of an aircraft or which occurs during parachuting

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- except when the Insured is flying as a passenger on a multi engine, commercial aircraft;
10. Any claim due to pregnancy or childbirth, venereal disease or infirmity;
 11. Simultaneous claims under 'study interruption' and 'sponsor protection' is not permitted.
 12. Any exclusion mentioned in the 'General Exclusions' section of this Policy.

Section : Sponsor Protection

Coverage

In the event of death of the Insured's Sponsor named in the Policy certificate, who pays the Tuition Fees to the institution abroad on behalf of the Insured for his/ her education in the Institution abroad, the Company shall reimburse the Insured the Tuition Fees to be incurred by him/ her for the remaining period of his/ her education in the Institution abroad, up to the limits as specified in the Policy certificate, subject to the Special Conditions mentioned below.

Special Conditions

A Sponsor can be either of the parents of the Insured or any relative of the Insured or other person.

The benefit under this Section is limited only to the reimbursement of tuition fees for the remaining period of the education of the Insured in the Institution abroad which has been paid by the Insured himself/ herself, following the unfortunate death of the Sponsor due to an injury. No reimbursement can be claimed by the Insured as a benefit under this Section in case the tuition fees have been paid in advance by the Sponsor for the whole of the period of education.

The benefit would be payable by the Company upon submission of an official Death Certificate of the Sponsor and a statement from a Medical Practitioner (not to be a relative or spouse of the Insured or the Sponsor) stating cause of death, as proof of death, of the Sponsor.

Simultaneous claims under 'study interruption' and 'sponsor protection' is not permitted.

In the event of a claim, only the figures shown on official invoice(s) from the educational institution and voucher(s) toward s payment of the said Tuition fees shall be used for calculating any payment by the Company.

Specific Exclusions

This benefit does not cover any other loss, directly or indirectly, in whole or in part, caused by or resulting from any exclusion mentioned in the 'General Exclusions' section of this Policy.

Section : Home Country Cover

Coverage

If the insured person returns to his/her country of residence for a period not exceeding 60 days, the scope of cover under this policy during his stay in the country of residence shall be restricted to the following sections, if opted for:

- **Section: Emergency Medical Expenses:** Limited to Hospitalizations arising due to Medical Emergency.
- **Section: Personal Accident**
 - **Accidental Death**
 - **Permanent Total Disability (PTD)**

- **Permanent Partial Disability (PPD):**
- **Sponsor Protection**

Specific Exclusions

This benefit does not cover any other loss, directly or indirectly, in whole or in part, caused by or resulting from any exclusion mentioned in the 'General Exclusions' section of this Policy or all specific exclusions applicable to above mentioned covers. Claims will be admissible as per the coverage section and special conditions applicable to above stated covers.

Section: University Excess Medical Cover

Coverage

In the event of a claim payable during the Period of Insurance under any insurance policy issued by a foreign insurance company to an Insured Person, who is a student pursuing an educational course as a full time student in an educational institution in the Country of Visit during the Period of Insurance, whilst such Insured Person is on a Trip, and where such claim is covered under Emergency Medical Expenses of this insurance), then the Company shall reimburse the excess amount above the deductible that the Insured Person is liable to bear. Cover under this Benefit is only available if Emergency Medical Expenses is in-force and opted for by the Insured Person and the payment being made is covered under the Emergency Medical Expenses section of this Policy.

Section : University Insolvency:

Coverage

The Company will indemnify the Insured Person the actual additional expenses/cost incurred by the Insured for Common Carrier expenses for returning back to the Country of Residence/City of Residence and accommodation expenses in case the University in which the Insured Person has applied has become insolvent, provided that:

- The Company's liability shall be in relation to the economical category of accommodation in the same place of stay where the University is situated for a maximum of 7 days and additional expenses in relation to the economical class of travel.
- It is a condition precedent to admission of liability by the Company under this cover that the Insured shall take all steps to fix the primary responsibility for the University Insolvency and try to recover from them the consequential loss incurred by the Insured. Details of the steps taken by the Insured shall be furnished to the Company.
- Any recovery towards additional expenses from the University as the case may be, if any, effected from the concerned agencies after settlement of the claim under the policy, shall be remitted to the Company to the extent of the amount of claim admitted and paid by the Company to the Insured.

The Insurer's liability to make payment is only in excess of the Deductible as specified in policy certificate.

Specific Exclusions

A Claim is not admissible under this Benefit unless expressly stated to the contrary elsewhere in the Policy terms and conditions in respect of any Insured Person for, arising out of or directly or indirectly due to the Insured failing to adhere to the rules of the University or regulation of state in connection to admission as the case may be.

Section: Missed Connection:**Coverage**

In the event of an insured person failing to board any common carrier onwards to an intended destination due to a delay or cancellation of a prior connecting common carrier, including any change of route, non-landing/docking or offloading of passenger due to overbooking, and provided that any such delay or cancellation is not caused due to, arising out of or in consequence of any acts omissions of the insured person, the company shall reimburse up to the limit of following expenses (post deduction of compensation offered by service provider/common carrier or any other source) and subject to the limit of sum insured specified against this benefit in the policy certificate. The Insurer's liability to make payment is only in excess of the Deductible as specified in policy certificate.

1. Non-refundable, unused portion of the pre-paid expenses but limited to lodging cost and/or the ticket cancellation charges, as long as these expenses are supported by a proof of purchase and is not reimbursable by another source.
2. Such delay must be authenticated by the common carrier in writing.
3. Reasonable expenses towards alternative travel bookings made up to such intended destination as may be absolutely necessary by any other common carrier
4. Reasonable and necessary costs of upgradation of travel booking to a superior class in the same form of Common Carrier subject to same category of travel booking is not available & same has been confirmed by travel provider.
5. Necessary expenses incurred towards Reasonable Additional Expenses, if not provided by the common carrier or other third party, subject to production of bill/receipts if this cover has been offered on indemnity basis.
6. Reasonable and necessary costs of upgradation of accommodation arrangements provided in cases where only partial services are provided by the concerned travel provider subject to same category of travel booking is not available & same has been confirmed by travel provider.

This cover is also available as a fixed benefit option upto the sum insured clearly specified in the policy certificate or under the special conditions of the policy certificate & subject to admissible claim as per the policy conditions applicable to this section including specific exclusion and to any other condition applicable to this policy. In respect to process claims documents specified under Documentation section is necessary to evaluate the claim. All terms & conditions applicable to this cover remains same as mentioned in coverage, specific exclusion, General exclusion applicable to this section, however, reasonable additional expenses claimed by insured/insured person will be only reimburse basis on indemnity basis.

Specific Exclusions

This benefit does not cover any other loss other than those mentioned above under the head "coverage", directly or indirectly, in whole or in part, including loss caused by or resulting from any exclusion mentioned in the 'General Exclusions' section of this Policy.

Section: Missed or Delay Event:**Coverage**

The Company shall compensate or offer fixed amount as a compensation (if same has been clearly mentioned in policy certificate as fixed benefit) to the Insured person towards forfeited, non-refundable prepaid payments towards event booked in advance due to any of the following reasons subject to limit of Sum Insured or sublimit shown in the policy certificate. The Insurer's liability to make payment is only in excess of the Deductible as specified in policy certificate.

1. Inclement Weather causing cancellation of the event with due authentication by a letter from common carrier or this information is available in the public domain through print or any other form of media.

2. Death of Insured's family. spouse, children, parent or parent in-law.
3. Accident of Vehicle resulting in hospitalization of Insured or an admissible claim in the motor insurance policy along with the FIR proving that the insured was involved in an Accident with a third party,
4. Strike, Curfew, Failure of public transport, death of insured person, felonious assault fire & flood with clear documentary proof.
5. The breakdown of a common carrier on which the Insured Person is travelling with clear evidence of breakdown from the common carrier.

In addition to above, the Company will also reimburse new event booking expenses for the same ticket category booked by the insured/insured person (cost after adjusting the proceeds of compensation offered towards original event for organizers or any other sources, if any) and offering new event booking expenses will be offered on indemnity basis only

This cover is also available as a fixed benefit option upto the sum insured clearly specified in the policy certificate/special conditions of policy certificate & subject to admissible claim as per the policy condition applicable to this sections including specific exclusion and to any other condition to this policy In respect to process claims documents specified under Documentation section is necessary to evaluate the claim. All terms & conditions applicable to this cover remains same as mentioned in coverage, specific exclusion, General exclusion applicable to this section, however, new event booking expenses will not be offered as fixed benefit option irrespective of the fact, whether it has been defined in certificate or not.

For the purpose of this benefit "Event" means any official sporting occasion, music concert, exhibition, educational /cultural tour, cinema, Any order delivery, Schedule conferences, theatre, theme park or military display, or a visit to any other tourist attraction where admission is only by way of tickets sold in advance or expenses incurred in advance prior to journey.

Specific Exclusions

The Company shall not be liable to make any payment under this Policy for:

- 1 Common carrier-caused delays, including an announced, organized sanctioned union labour strike that affects public transportation, unless the commencement of the period of insurance is prior to a date when the strike is foreseeable. A strike is foreseeable on the date the labour union members vote to approve a strike, unless the delay is due to breakdown of a common carrier.
- 2 Arrangements cancelled or changed by an organizer, unless the cancellation is the result of inclement weather.
- 3 Changes in plans by the Insured/Insured Person, an immediate family member, or travelling companion for any reason unless the cancellation is the result of death of family member as specified in coverage section. .
- 4 Adverse change in financial circumstances of the Insured/ Insured Person, any family member, or a traveling companion.
- 5 Any business or contractual obligations of the Insured/Insured Person, any family member, or a traveling companion
- 6 Default by the person, agency, or tour operator from whom the Insured / Insured Person bought this Policy and/or made travel arrangements.
- 7 Any government regulation or prohibition.
- 8 An event or circumstance, which occurs prior to the commencement of the period of insurance.
- 9 On account of a felonious assault, where the Insured/Insured Person, any family member of the Insured/Insured Person, the traveling companion or traveling companion's family member has been a principal or accessory in the assault committed
- 10 Any exclusion mentioned in the 'General Exclusions' section of this Policy

Section: Home Fire Insurance (Contents)

Coverage

This Section provides for indemnity, against any loss, destruction or damage to the contents of the Insured Person's home in India caused by any of the fire and related perils specified hereunder whilst the Insured Person is on a trip abroad covered by the Policy.

I. Fire

Excluding destruction or damage caused to the property insured by

- (a) (i) Its own fermentation, natural heating or spontaneous combustion
- (a) (ii) Its undergoing any heating or drying process.
- (b) Burning of property insured by order of any Public Authority.

II. Lightning

III. Explosion/ Implosion

Excluding destruction or damage

- a) Caused to the boilers (other than domestic boilers), economisers or other vessels, machinery or apparatus (in which steam is generated), or their contents resulting from their own explosion/implosion.
- b) Caused by centrifugal forces.

IV. Aircraft Damage

Loss, Destruction or damage caused by Aircraft, other aerial or space devices and articles dropped therefrom excluding those caused by pressure waves.

V. Riot, Strike, Malicious Damage

Loss of or visible physical damage or destruction by external violent means directly caused to the property insured but excluding those caused by:

- a) Total or partial cessation of work or the retarding or interruption or cessation of any process or operations or omissions of any kind;
- b) Permanent or temporary dispossession resulting from confiscation, commandeering, requisition or destruction by order of the Government or any lawfully constituted authority;
- c) Permanent or temporary dispossession of any building or plant or unit or machinery resulting from the unlawful occupation by any person of such building or plant or unit or machinery or prevention of access to the same;
- d) Burglary, housebreaking, theft, larceny or any such attempt or any omission of any kind of any person (whether or not such act is committed in the course of a disturbance or public peace) in any malicious act.
- e) If the company alleges that the loss/damage is not caused by any malicious act, the burden of proving the contrary shall be upon the insured.

Terrorism Damage Exclusion Warranty

Notwithstanding any provision to the contrary within this insurance it is agreed that this insurance excludes loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any act of terrorism regardless of any other cause or event contributing concurrently or in any other sequence to the loss.

For the purpose of this endorsement an act of terrorism means an act, including but not limited to the use of force of violence and/or the threat thereof, of any person or group(s) of persons whether acting alone or on behalf of or in connection with any organisation(s) or government(s), committed for political, religious, ideological or similar purpose including the intention to influence any government and/or to put the public, or any section of the public in fear.

The warranty also excludes loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to action taken in respect of any act of terrorism.

If the Company alleges that by reason of this exclusion, any loss, damage, cost or expenses is not covered by this insurance the burden of proving the contrary shall be upon the Insured/Insured Person.

In the event any portion of this endorsement is found to be invalid or unenforceable, the remainder shall remain in full force and effect

VI. Storm, Cyclone, Typhoon, Tempest, Hurricane, Tornado, Flood and Inundation (STFI)

VII. Impact Damage

Impact by any Rail/Road vehicle or animal by direct contact not belonging to or owned by

- (a) The Insured/Insured Person or any occupier of the premises or
- (b) Their employees while acting in the course of their employment.

VIII. Subsidence and Landslide including Rock Slide

Loss, Destruction or damage caused by Subsidence of part of the site on which the property stands or Land slide/Rock slide excluding:

- (a) The normal cracking, settlement or bedding down of new structures
- (b) The settlement or movement of made up ground
- (c) Coastal or river erosion
- (d) Defective design or workmanship or use of defective materials
- (e) Demolition, construction, structural alterations or repair of any property or groundworks or excavations.

IX. Bursting and/or overflowing of Water Tanks, Apparatus and Pipes

X. Missile Testing operations

XI. Leakage from Automatic Sprinkler Installations

Excluding destruction or damage caused by

- (a) Repairs or alterations to the buildings or premises
- (b) Repairs, Removal or Extension of the Sprinkler Installation
- (c) Defects in construction known to the Insured/Insured Person.

XII. Bush Fire

Excluding destruction or damage caused by Forest Fire.

PROVIDED that the liability of the Company shall in no case exceed in respect of each item the sum expressed in the said Schedule to be insured thereon or in the whole the total Sum Insured hereby or such other sum or sums as may be substituted therefore by memorandum hereon or attached hereto signed by or on behalf of the Company.

Specific Exclusions

This Section of the Policy does not cover the following:-

- 1 Loss, destruction or damage caused by war, invasion, act of foreign enemy hostilities or war like operations (whether war be declared or not), civil war, mutiny, civil commotion assuming the proportions of or amounting to a popular rising, military rising, rebellion, revolution, insurrection or military or usurped power.
- 2 Loss, destruction or damage directly or indirectly caused to the property insured by
 - a) Ionizing radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel;
 - b) The radioactive toxic, explosives or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.
- 3 Loss, destruction or damage caused to the insured property by pollution or contamination excluding

- a) Pollution or contamination which itself results from a peril hereby insured against;
- b) Any peril hereby insured against which itself results from pollution or contamination.
- 4 Loss, destruction or damage to bullion or unset precious stones, any curios or works of art for an amount exceeding Rs.10000/-, manuscripts, plans, drawings, securities, obligations or documents of any kind, stamps, coins or paper money, cheques, books of accounts or other business books, computer systems records, explosives unless otherwise expressly stated in the Policy.
- 5 Loss, destruction or damage to the stocks in Cold Storage premises caused by change of temperature.
- 6 Loss, destruction or damage to any electrical and/or electronic machine, apparatus, fixture or fitting (excluding fans and electrical wiring in dwellings) arising from or occasioned by over-running, excessive pressure, short circuiting, arcing, self-heating, or leakage of electricity, from whatever cause (lightning included).
- 7 Expenses necessarily incurred on
 - i. Architects, Surveyors and Consulting Engineer's Fees and
 - ii. Debris Removal by the Insured/Insured Person following a loss, destruction or damage to the property insured by an insured peril in excess of 3% and 1% of the of the claim amount respectively.
- 8 Loss of earnings, loss by delay, loss of market or other consequential or indirect loss or damage of any kind or description whatsoever.
- 9 Loss or damage by spoilage resulting from the retardation or interruption or cessation of any process or operation caused by operation of any of the perils covered.
- 10 Loss by theft during or after the occurrence of any insured peril except as provided under Riot, Strike and Malicious Damage cover.
- 11 Any Loss or damage occasioned by or through or in consequence directly or indirectly due to earthquake, volcanic eruption or other convulsions of nature.
- 12 Loss or damage to property insured if removed to any building or place other than in which it is herein stated to be insured, except machinery and equipment temporarily removed for repairs, cleaning, renovation or other similar purposes for a period not exceeding 60 days
- 13 Any exclusion mentioned in the 'General Exclusions' section of this Policy.

Special Conditions

1. This benefit does not cover any loss or damage to property which, at the time of the happening of such loss or damage, is insured by or would, but for the existence of this Policy, be insured by any marine policy or policies except in respect of any excess beyond the amount which would have been payable under the marine policy or policies had this insurance not been effected.

2. All insurances under this Policy shall cease on expiry of seven days from the date of fall or displacement of any building or part thereof or of the whole or any part of any range of buildings or of any structure of which such building forms part PROVIDED such a fall or displacement is not caused by insured perils, loss or damage by which is covered by this Policy or would be covered if such building, range of buildings or structure were insured under this Policy.

Notwithstanding the above, the Company subject to an express notice being given as soon as possible but not later than seven days of any such fall or displacement may agree to continue the insurance subject to revised rates, terms and conditions as may be decided by it and confirmed in writing to this effect.

3. If the interest in the property passes from the Insured otherwise than by will or operation of law, the insurance shall cease to attach as regards the property affected unless the Insured shall have before the occurrence of any loss or damage, obtained the sanction of the Company signified by endorsement upon the Policy by or on behalf of the Company

4. (A) On the happening of any loss or damage the Insured/Insured Person shall forthwith give notice thereof to the Company and shall within 15 days after the loss or damage, or such further time as the Company may in writing allow in that behalf, deliver to the Company
- i. A claim in writing for the loss or damage containing as particular an account as may be reasonably practicable of all the several articles or items or property damaged or destroyed, and of the amount of the loss or damage thereto respectively, having regard to their value at the time of the loss or damage not including profit of any kind.
- (B) Particulars of all other insurance, if any.

The Insured shall also at all times at his own expense produce, procure and give to the Company all such further particulars, plans, specification, books, vouchers, invoices, duplicates or copies thereof, documents, investigation reports (internal/external), proofs and information with respect to the claim and the origin and cause of the loss and the circumstances under which the loss or damage occurred, and any matter touching the liability or the amount of the liability of the Company as may be reasonably required by or on behalf of the Company together with a declaration on oath or in other legal form of the truth of the claim and of any matters connected therewith.

No claim under this Policy shall be payable unless the terms of this condition have been complied with.

- (ii) In no case whatsoever shall the Company be liable for any loss or damage after the expiry of 12 months from the happening of the loss or damage unless the claim is the subject of pending action or arbitration; it being expressly agreed and declared that if the Company shall disclaim liability for any claim hereunder and such claim shall not within 12 calendar months from the date of the disclaimer have been made the subject matter of a suit in a court of law then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable hereunder.

5. On the happening of loss or damage to any of the property insured by this Policy, the Company may
- (a) Enter and take and keep possession of the building or premises where the loss or damage has happened;
- (b) Take possession of or require to be delivered to it any property of the Insured in the building or on the premises at the time of the loss or damage;
- (c) Keep possession of any such property and examine, sort, arrange, remove or otherwise deal with the same;
- (d) Sell any such property or dispose of the same for account of whom it may concern.

The powers conferred by this condition shall be exercisable by the Company at any time until notice in writing is given by the Insured/Insured Person that he makes no claim under the Policy, or if any claim is made, until such claim is finally determined or withdrawn, and the Company shall not by any act done in the exercise or purported exercise of its powers hereunder, incur any liability to the Insured/Insured Person or diminish its rights to rely upon any of the conditions of this policy in answer to any claim. If the Insured/Insured Person or any person on his behalf shall not comply with the requirements of the Company or shall hinder or obstruct the Company, in the exercise of its powers hereunder, all benefits under this policy shall be forfeited.

The Insured/Insured Person shall not in any case be entitled to abandon any property to the Company whether taken possession of by the Company or not.

6. If the Company at its option, reinstates or replaces the property damaged or destroyed, or any part thereof, instead of paying the amount of the loss or damage, or join with any other company or insurer(s) in so doing, the Company shall not be bound to reinstate exactly or completely but only as circumstances permit and in reasonably sufficient manner, and in no case shall the Company be bound to expend more in reinstatement than it would have cost to reinstate such property as it was at the time of the occurrence of such loss or damage nor more than the Sum Insured by the Company thereon. If the Company so elects to reinstate or replace any property the Insured/Insured Person shall at his own expense furnish the Company with such plans, specifications, measurements, quantities and such other particulars as the Company may require, and no acts done, or caused to be done, by the Company with a view to reinstatement or replacement shall be deemed an election by the Company to reinstate or replace.

If in any case the Company shall be unable to reinstate or repair the property hereby insured, because of any municipal or other regulations in force affecting the alignment of streets or the construction of buildings or otherwise, the Company shall, in every such case, only be liable to pay such sum as would be requisite to reinstate or repair such property if the same could lawfully be reinstated to its former condition.

7. If the property hereby insured shall at the breaking out of any fire or at the commencement of any destruction of or damage to the property by any other peril hereby insured against be collectively of greater value than the Sum Insured thereon, then the Insured shall be considered as being his own insurer for the difference and shall bear a ratable proportion of the loss accordingly. Every item, if more than one, of the Policy shall be separately subject to this condition.

8. If at the time of any loss or damage happening to any property hereby insured there be any other subsisting insurance or insurances, whether effected by the Insured/Insured Person or by any other person or persons covering the same property, this Company shall not be liable to pay or contribute more than its ratable proportion of such loss or damage.

9. The Insured Person shall at the expense of the Company do and concur in doing, and permit to be done, all such acts and things as may be necessary or reasonably required by the Company for the purpose of enforcing any rights and remedies or of obtaining relief or indemnity from other parties to which the Company shall be or would become entitled or subrogated, upon its paying for or making good any loss or damage under this Policy, whether such acts and things shall be or become necessary or required before or after his indemnification by the Company.

Section: Home Burglary Insurance (Contents)

Coverage

This Section provides for indemnity, against any loss, destruction or damage to the contents of the Insured Persons' unattended home in India caused by burglary and/or housebreaking specified hereunder whilst the Insured Person is on a trip abroad covered by the Policy.

The maximum amount payable under this Section as indemnity is limited to the Sum Insured as specified in the Policy Schedule in any one period of insurance irrespective of the number of such incidents or occurrences arising out of such incidents.

Jewellery kept in safe will be covered under this benefit as part of contents up to 20% of the Sum Insured as specified in the Policy certificate or actuals whichever is less.

Specific Exclusions:-

The Company shall not be liable to make any payment under this Policy for:

- 1 Loss or damage caused by the Insured/Insured Person's and/or Insured/Insured Person's employee(s) or agents and / or Insured/Insured Person's family member's direct or indirect involvement in the actual or attempted burglary;
- 2 Any loss or damage to, or on account of loss of, livestock, motor vehicles, pedal cycles, money, securities for money, stamp, bullion, deeds, bonds, bills of exchange, promissory notes, stock or share certificates, business books, manuscripts, documents of any kind, ATM debit or credit cards, precious stones that are not part of jewellery or ornaments, gold bullion (unless previously specifically declared to, and accepted by, the Company in writing
- 3 Loss or damage to any property/item illegally acquired, kept, stored or property subject to forfeiture in any manner whatsoever.
- 4 Loss or damage which is recoverable under Fire or Plate Glass Insurance Policy or any other policy.
- 5 Loss or damage directly or indirectly, proximately or remotely occasioned by or which arises out of or in connection with riot and strike, civil commotion, terrorist activities, earthquake, flood, storm, volcanic eruption, typhoon, hurricane, tornado, cyclone or other convulsions of nature or atmospheric disturbances.
- 6 Consequential loss or legal liability of any kind.

- 7 Loss of money and/or other property abstracted from safe following the use of the key to the said safe or any duplicate thereof belonging to the Insured Person, unless such key has been obtained by assault or violence or any threat thereof.
- 8 Loss of or damage to any property insured under this policy due to any misfeasance, malfeasance or nonfeasance or breach of trust in relation thereto by the Insured.
- 9 Any exclusion mentioned in the 'General Exclusions' section of this Policy.

Terrorism Damage Exclusion Warranty

Notwithstanding any provision to the contrary within this insurance it is agreed that this insurance excludes loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any act of terrorism regardless of any other cause or event contributing concurrently or in any other sequence to the loss.

For the purpose of this endorsement an act of terrorism means an act, including but not limited to the use of force of violence and/or the threat thereof, of any person or group(s) of persons whether acting alone or on behalf of or in connection with any organisation(s) or government(s), committed for political, religious, ideological or similar purpose including the intention to influence any government and/or to put the public, or any section of the public in fear.

The warranty also excludes loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to action taken in respect of any act of terrorism.

If the Company alleges that by reason of this exclusion, any loss, damage, cost or expenses is not covered by this insurance the burden of proving the contrary shall be upon the Insured/Insured Person.

In the event any portion of this endorsement is found to be invalid or unenforceable, the remainder shall remain in full force and effect

Sum Insured for Home Fire Insurance (Contents) & Home Burglary Insurance (Contents) can be offered separately or together to the Sum Insured specified in the Policy Certificate

Section: Loss of Deposit or Cancellation (Hotel & Common Carrier)

Coverage

This Section provides that in the event of necessary and unavoidable cancellation of Hotel and Common carrier booking arrangement due to following listed reasons -,

The Company will compensate the Insured/Insured Person against the loss of irrevocable deposits or charges paid in advance or contracted to be paid towards hotel & common carrier. The Insurer's liability to make payment is only in excess of the Deductible as specified in policy certificate.

1. Inclement Weather
2. Accident of Vehicle resulting in hospitalization of Insured or an admissible claim in the motor insurance policy along with the FIR proving that the insured was involved in an Accident with a third party,
3. Strike, Curfew, Failure of public transport, death of insured person, felonious assault fire & flood
4. The breakdown of a scheduled Common Carrier on which the Insured Person is travelling;

- o An breakdown on a motorway or thoroughfare, occurring ahead of the Common Carrier or any vehicle on which the Insured Person is travelling, which causes an unexpected delay in arriving at the first Port of departure of the Common Carrier on which he/she has booked to travel

The Company will reimburse for the forfeited, non-refundable prepaid payments, made prior to the Insured/Insured Person's departure date or within specified number of hours or amount specified in the Policy certificate after adjusting the proceeds of canceling or preponing of the arrangement, if any.

This cover is also available as a fixed benefit option upto the sum insured clearly specified in the policy certificate/special conditions of policy certificate & subject to admissible claim as per the policy condition applicable to this sections including specific exclusion and to any other condition to this policy In respect to process claims documents specified under Documentation section is necessary to evaluate the claim. All terms & conditions applicable to this cover remains same as mentioned in coverage, specific exclusion, General exclusion applicable to this section,

Specific Exclusions

The Company shall not be liable to make any payment under this Policy for:

1. Common carrier-caused delays, including an announced, organized sanctioned union labour strike that affects public transportation, unless the commencement of the period of insurance is prior to a date when the strike is foreseeable. A strike is foreseeable on the date the labour union members vote to approve a strike, unless the delay is due to breakdown of the common carrier.
2. Travel arrangements cancelled or changed by an airline, cruise line, or tour operator, unless the cancellation is the result of inclement weather.
3. Changes in plans by the Insured/Insured Person, an immediate family member, or travelling companion for any reason.
4. Adverse change in financial circumstances of the Insured/ Insured Person, any family member, or a traveling companion.
5. Any business or contractual obligations of the Insured/Insured Person, any family member, or a traveling companion
6. Default by the person, agency, or tour operator from whom the Insured / Insured Person bought this Policy and/or made travel arrangements.
7. Any government regulation or prohibition.
8. An event or circumstance, which occurs prior to the commencement of the period of insurance.
9. On account of a felonious assault, where the Insured/Insured Person, any family member of the Insured/Insured Person, the traveling companion or traveling companion's family member has been a principal or accessory in the assault committed
10. Any exclusion mentioned in the 'General Exclusions' section of this Policy

Section: Overbooked-Common Carrier

Coverage

If the Insured/Insured Person is denied boarding of an opted common carrier due to over-booking, and no alternative transportation is made available within hours specified under deductible section in policy certificate of the scheduled departure time of such opted common carrier, the Company will indemnify the Insured/Insured Person for expenses incurred, by evidence of bills/receipts in respect of hotel accommodation if not provided by the common carrier or any other third party and purchase of a new ticket for the same category as per the original booking, less refund, if any, obtained from the common carrier, subject to the amount specified policy certificate. The over-booked details to be obtained by the Insured/Insured Person must be verified in writing by the operators of the common carrier or their handling agents.

This cover is also available as a fixed benefit option upto the sum insured clearly specified in the policy certificate/special conditions of policy certificate & subject to admissible claim as per the policy condition applicable to this sections including

specific exclusion and to any other condition to this policy In respect to process claims documents specified under Documentation section is necessary to evaluate the claim. All terms & conditions applicable to this cover remains same as mentioned in coverage, specific exclusion, General exclusion applicable to this section,

Specific Exclusions

This benefit does not cover any other loss other than those mentioned above under the head “coverage”, directly or indirectly , in whole or in part, including loss caused by or resulting from any exclusion mentioned in the 'General Exclusions' section of this Policy.

Section: Legal Expenses

Coverage

The Company shall pay the legal costs and expenses incurred by the Insured/ Insured Person or the legal representative of the Insured Person, as the case may be, towards claims for from third parties for compensation for accidental death or disablement arising due to an injury whilst on a trip abroad up to the limits specified in the Policy certificate. The Insurer’s liability to make payment is only in excess of the Deductible as specified in policy certificate.

The benefit under the Section is limited to the Sum Insured as specified in the Policy certificate.

Specific Exclusions

- All the exclusions applicable to the – Personal Accident Death, Permanent Total Disability & Permanent Partial Disability, Accidental Death (Common Carrier), - Permanent Total **Disability** - Common carrier, Permanent Partial **Disability** - Common carrier will also be applicable to this Section in so far as the accidental death or disablement is concerned.
- All exclusions mentioned in the ‘General Exclusions’ section of this Policy shall also apply to this Section

Section: Pet Care (IN INR)

Coverage

This Section provides for payment of medical expenses including fees for the Veterinary Doctor’s towards the medical care and treatment of the pet animal (limited to either cats or dogs maximum upto 3 pets) of the Insured Person arising due to an injury sustained whilst under the care of a friend, relative, house servant, other family members of the house or a Professional Carrier in India during the Insured Person’s trip abroad, covered under this Policy. The Insurer’s liability to make payment is only in excess of the Deductible as specified in policy certificate.

The benefit under the Section is limited to the Sum Insured as specified in the Policy certificate.

Specific Exclusion

This benefit does not cover any other loss other than those mentioned above under the head “coverage”, directly or indirectly , in whole or in part, including loss caused by or resulting from any exclusion mentioned in the 'General Exclusions' section of this Policy

Section: Emergency Accommodation Coverage

This Section provides for payment of compensation for the additional cost of emergency accommodation maximum amount upto the limit specified in policy certificate if the Insured Person could not stay in the accommodation originally booked due to fire, flood, earthquake, storm, hurricane, explosion, outbreak of major infectious diseases. The Insurer’s liability to make payment is only in excess of the Deductible as specified in policy certificate.

Specific Exclusion

This benefit does not cover any other loss other than those mentioned above under the head “coverage”, directly or indirectly , in whole or in part, including loss caused by or resulting from any exclusion mentioned in the 'General Exclusions' section of this Policy.

Section: Alternate Employee/Substitute Employee Expenses**Coverage**

This Section provides for reimbursement of cost of economy return fare incurred by the Insured towards sending an alternate employee for an uncompleted assignment abroad, in case the original employee of the Insured who has been sent on an assignment abroad and covered under this Policy, has to be transported back/repatriated to his place in India, due to illness, injury or in the event of his/her unfortunate accidental death arising due to an injury whilst abroad. The substitute employee must resume duties within 30 days from the date when the original employee could not attend to his duties. The Insurer’s liability to make payment is only in excess of the Deductible as specified in policy certificate.

Specific Exclusion

All the exclusions and Special Conditions applicable to the **Personal Accident Death, Permanent Total Disability & Permanent Partial Disability, Accidental Death (Common Carrier), - Permanent Total Disability - Common carrier, Permanent Partial Disability - Common carrier** section shall be applicable to this Section also as far as the accidental death due to injury of the original employee is concerned who is covered under the Policy as the Insured Person.

Section: Travel Loan Secure(IN INR)**Coverage**

This Section provides indemnity to the Insured Person in case the Insured Person has borrowed, for the purpose of this Trip, from an NBFC/Bank or any other entity authorized by relevant authorities in India. Indemnity will be provided for the following perils: Personal Accident Death , Permanent Total Disablement and permanent partial disability of the Insured Person within 180 days from the date of such bodily injury and such bodily injury is the sole and direct cause of his death or permanent total disablement Proceeds will be paid to the lending entity provided that the Insured Person has assigned benefits under this section of the policy in favor of the entity

Indemnity is provided to the extent of principal outstanding amount at the time of loss or Sum Insured as specified under this section in the Policy certificate whichever is lower. The Insurer's liability to make payment is only in excess of the Deductible as specified in policy certificate.

Specific Conditions:

This section does not cover the loan taken from any individual / firm / non-financial institution (including his/her own firm / company) other than Commercial Bank / licensed financial institutions.

Specific Exclusion:

No claim under this section would be paid if the death is due to or caused by

1. Directly or indirectly caused by contributed to related to or aggravated or prolonged by childbirth or pregnancy or in consequence thereof,
2. Due to participation in winter sports, skydiving, parachuting, hang gliding, bungee jumping, scuba diving, mountain climbing, riding or driving in races or rallies using a motorized vehicle or bicycle, caving or pot holing, hunting or equestrian activities, skiing, diving or other underwater activity, rafting or canoeing involving white water rapids, yachting or boating outside coastal waters (2 miles), participation in any Professional Sports, any bodily contact sport or any other hazardous or potentially dangerous sports.
3. Any loss falling under general exclusion of the policy

Section: Child Escort

Coverage

The Company shall pay or reimburse for the travelling expenses of Insured / Insured person minor children aged below 17 years for return to India upto the limit of sum Insured as specified in the policy certificate. The Insurer's liability to make payment is only in excess of the Deductible as specified in policy certificate.

- If the Insured / Insured person whilst on a Trip outside the Republic of India accompanied with his minor children, dies due to illness or accident covered under the policy.
- Such minor children/s is covered under this travel along with Insured / Insured Person
- Such minor children/s is not accompanied by any other adult family member.

Specific Exclusions

This benefit does not cover any other loss other than those mentioned above under the head "coverage", directly or indirectly, in whole or in part, including loss caused by or resulting from any exclusion mentioned in the 'General Exclusions' section of this Policy.

Section: Overseas Travel Service Supplier Insolvency

Coverage

This benefit shall pay or reimburse the below stated expenses incurred by the insured in case of pre booked tour by paying an advance with an Overseas Travel Service Provider located at the intended destination(s), provided an Overseas Travel Service Provider turns insolvent and the insured/insured person does not get intended service. This benefit is limited upto the limit of sum Insured as specified in the policy certificate, The Insurer's liability to make payment is only in excess of the Deductible as specified in policy certificate.

- The company will pay the reasonable cost of such rearrangement but not exceeding the cost that the insured has already incurred for intended journey and should be for the same standard of transportation and accommodation as was originally booked by the Insured for intended journey.
- In case of cancellation of journey because of non-rearrangement of Scheduled journey, the company shall be liable only up to the extent of non-refundable cost of unused travels for which the Insured has already paid, including agent's fee for such cancellation but limited to the amount of commission the agent had earned on pre-paid refundable amount of cancelled travel arrangements.
- Any additional expenses necessarily incurred on returning to Insured's home including reasonable hotel accommodation and transport expenses

This cover is also available as a fixed benefit option upto the sum insured clearly specified in the policy certificate/special conditions of policy certificate & subject to admissible claim as per the policy condition applicable to this sections including specific exclusion and to any other condition to this policy In respect to process claims documents specified under Documentation section is necessary to evaluate the claim. All terms & conditions applicable to this cover remains same as mentioned in coverage, specific exclusion, General exclusion applicable to this section.

Specific Exclusion:

1. If insolvency of any travel agent, tour wholesaler, tour operator or booking agent in India.
2. If Insolvency of a travel services provider if at the relevant time, the travel services provider was insolvent or a reasonable person would have reason to expect the travel services provider might become insolvent.
3. Claims arising directly or indirectly from war, acts of foreign enemies, hostilities or warlike operations (whether war be declared or not), civil war, rebellion, insurrection, civil commotion assuming the proportions of or amounting to an uprising, military or usurped power;
4. Accommodation expenses incurred after the pre-decided return date of the trip to insured's town.
5. Any other loss falling under the General Exclusions of the Policy

Section: Cruise Cover

Coverage

1. Missed Port Departure

In the event where the insured / Insured person fails to arrive at the international departure point in time to board the ship on which he has booked to travel on the initial international journey of his trip as a result of:

- a) The failure of scheduled public transport on which the insured person is travelling
- b) An accident to or breakdown of the vehicle in which the insured person is travelling;
- c) An accident or breakdown occurring ahead of him on a motorway or dual carriageway which causes an unexpected delay to the vehicle in which Insured is travelling; or Strike, industrial action or adverse weather conditions,

The company shall pay or reimburse the Insured / Insured Person reasonable additional reasonable accommodation (room only) and travel expenses necessarily incurred in joining the cruise ship journey at the next docking port upto the limit specified. The Insurer's liability to make payment is only in excess of the Deductible as specified in policy certificate.

2. UNUSED EXCURSIONS

The Company agrees to pay up to the amount shown in the table of benefits of policy schedule for the cost of pre-booked excursions, which insured / insured person were unable to use and which are not refundable from any other source as a direct result of being confined by the medical officer on the ship to insured/insured person own cabin due to an accident or illness which is covered under Medical section I and other expenses.

3. CRUISE INTERRUPTION

In the event of Insured/Insured person requiring hospital treatment on dry land due to temporary illness, the Company will pay or reimburse the amount specified in the schedule of the policy, the travel expenses incurred to reach the next port in order to re-join the cruise. The insured / Insured person has to submit a certificate from the medical practitioner in attendance to confirm the insured/ insured persons unforeseen illness or injury.

Specific exclusions

- a) Claims where less than 25% of the trip duration remains.
- b) Any claim arising directly or indirectly from a known medical condition prior to departure
- c) Anything mentioned in the General Exclusion

EXCLUSIONS for point 1

1. Claims arising directly or indirectly from:

- a) Strike or industrial action or air traffic control delay existing or publicly declared by the date this insurance is purchased by insured/insured person or the date insured/insured trip was booked whichever is the later;
- b) An accident to or breakdown of the vehicle in which insured/insured are travelling for which a professional repairers report is not provided;
- c) Breakdown of any vehicle in which insured/insured person are travelling if the vehicle is owned by insured/insured and has not been serviced properly and maintained in accordance with manufacturer's instructions; or
- d) Withdrawal from service (temporary or otherwise) of an aircraft or sea vessel on the recommendation of the Civil Aviation Authority or a Port Authority or any such regulatory body in a country to/from which Insured/insured person are travelling.

2. Additional expenses where the scheduled public transport operator has offered reasonable alternative travel arrangements.

3. Additional expenses where insured/insured person planned arrival time at the port is less than 3 hours in advance of the sail departure time if insured/insured person are travelling independently and not part of an integrated cruise package.

4. Anything mentioned in the General exclusions

Specific Condition

1. In the event of a claim arising from any delay arising out of traffic congestion obtain written confirmation from the Police or emergency breakdown services of the location, reason for and duration of the delay.
3. Allow sufficient time for the scheduled public transport or other transport to arrive on schedule time and to deliver insured/insured person to the departure point.

Section: Car rental excess insurance

Coverage

Policy Wordings: Travel Assure - Group Overseas Travel Insurance

UIN of Product: ICITGOP22203V022122

Registered and corporate office address: ICICI Lombard General Insurance Company Ltd., ICICI Lombard House,

414, Veer Savarkar Marg, Prabhadevi, Mumbai - 400025, IRDAI Registration No: 115, CIN: L67200MH2000PLC129408, Toll free no: 1800 2666,

Website: www.icicilombard.com, Email: customersupport@icicilombard.com

The Company shall reimburse to the Insured/ Insured Person upto the limit of sum Insured as specified in the policy certificate (or equivalent in local currency), the “Excess Amount” that the Insured is obliged to pay arising from physical loss of or damage to the rental car whilst in the Insured’s control and custody during the covered trip. This policy covers the Excess Charge following the theft or damage to Rental car including the undercarriage, windows and tyres. The Insurer’s liability to make payment is only in excess of the Deductible as specified in policy certificate.

The insurers will also reimburse to the Insured for the costs of followings for which the Insured is liable in case of insured event:

- **CAR RENTAL KEY COVER:** Replacing a lost or stolen rental car key, including replacement of locks and locksmith charges up to 20% of limit of indemnity under this section
- **MISFUELING COVER:** Cleaning out the engine and fuel system and associated towing costs up to 20% of the limit of indemnity as mentioned in the schedule, in case the Insured put wrong type of fuel in its rented vehicle,
- **TOWING COSTS COVER:** Towing or recovery costs following an accident or breakdown involving the Rental Vehicle, up to a maximum of 20% of the limit of indemnity under this section.

UNDER NO CIRCUMSTANCES THE TOTAL PAYMENT FOR ALL ABOVE CONTINGENCIES SHALL EXCEED THE LIMIT AS SHOWN IN THE SCHEDULE OF POLICY UNDER THIS SECTION

Specific Conditions:

1. All insured drivers must hold a valid and effective driving license, or hold a full internationally recognized license which must be effective at the time of incident.
2. Except with the written consent of the insurers, no person is entitled to admit liability on their behalf or to give any representations or other undertakings binding upon them. The insurer shall be entitled to the absolute conduct, control and settlement of all proceedings arising out of or in connection with claims in the name of the insured person.
3. The insurers may at their option take proceedings in the name of the insured person to recover compensation from any Third party in respect of any indemnity provided under this insurance and any amounts so recovered shall belong to the insurers and the insured person shall render all reasonable assistance to the insurers.
4. The cover under this section will incept from the time the Insured Person takes legal control of Rental Car and will cease at the time Rental Agency assumes back control of rented car, subject always to the condition that the custody of such rental car with the Insured Person is during the period of his covered Trip only.

Specific Exclusions

The Company shall not be liable in respect of any claim made of:

1. Loss or destruction of or damage to any property whatsoever, or any liability, loss or exposure whatsoever resulting or arising there from or any consequential loss directly or indirectly caused by or contributed to or arising from
(a) ionizing radiation or contamination by radioactivity from any Nuclear fuel or any waste and the combustion of nuclear fuel or
(b) the radioactive toxic explosive or other hazardous properties or any explosive nuclear assembly or nuclear component thereof.
2. Operation of the vehicle in violation of the terms of the rental agreement.
3. Automobiles, or other vehicles, which are not rental vehicles and not rented from a licensed rental agency.
4. The rental of certain vehicles namely, motor homes, trailers or caravans, vans, trucks, non-passenger carrying vehicles, vehicles that carry more than 9 people including the driver, motorcycles, mopeds, motorbikes, off-road vehicles and recreational vehicles.
5. Expenses reimbursed by the insured person's employers' Insurer.
6. Applicable to car rental key cover – replacement of locks when only the parts need to be changed.
7. Applicable to misfueling cover – repair or replacement of any mechanical part or damage to engine arising from the use of the incorrect fuel, i.e. only cleaning charges are payable under this section.

Section: Golf Equipment Cover

Coverage

In the event of Insured / Insured person's own or hired Golf Equipment and / or its accessories are lost due to theft or damaged during the entire trip, the Company shall reimburse to the Insured/ Insured Person upto the limit of sum Insured as specified in the policy certificate, the market value of such lost or damaged equipment. The Insurer's liability to make payment is only in excess of the Deductible as specified in policy certificate.

For the purpose of this Benefit, "Market Value" refers to the amount required to purchase new golf equipment of the same kind and quality in relation to which a claim is made under this benefit, less applicable depreciation @ 25% per annum from the date of purchase of golf equipment, calculated as at the time of the loss, Maximum depreciation applicable under this benefit shall not exceed 50% in any event.

Specific Exclusions

1. Following losses are not covered under the policy:

- a. Any loss due to theft or damage to insured/insured person golfing equipment and accessories during insured's entire journey if he does not get a written PIR (Property Irregularity Report) issued by the airline. For the purpose he shall be required to lodge the complaint with the airline immediately.
- b. Loss to golfing equipment and accessories at any other time if insured does not report the loss or theft to the local police within 24hrs of discovering it and get a written police report from them.
- c. Loss or damage caused by delay, wear and tear, moths, vermin, weather and atmospheric conditions or mechanical failure.
- d. Loss or damage to golfing equipment and accessories left unattended at any place.
- e. Any loss or damage to the property due to confiscation or detention by any authority other than airline.
- f. Any loss falling under the General Exclusions of the Policy

2. Any amount of loss that has already been compensated from the club.

Conditions applying for the claim:

- a) The Insured must keep the damaged property for inspection of the insurer or its authorized representative at any time after the loss is reported to the insurer.
- b) The Insured shall be required to surrender the said damaged property to the insurer on demand by them at the time of final settlement of the claim or shall agree to deduct an appropriate salvage value from the claim amount admissible at the option of the insurers.
- c) If the claim involves a part of a set of Property, the insurer liability shall be limited to the value of that part which has been damaged or lost during the trip.
- d) Receipts for items lost, stolen or damaged or proof of ownership should be preserved properly so as to the Insured to substantiate his claim.
- e) The insured shall preserve all his recovery rights against the Third Party and shall be required to subrogate the same to the insurer at the time of settlement of claim.

Section: Bounced Hotel booking

Coverage

This benefit shall pay or reimburse the below stated expenses, if the Insured / Insured Person has booked the hotel at destination points(s) with suppliers/agents outside city of origin which is confirmed and could not obtained such hotel accommodation by the Insured/Insured person due to non-supply of services, The Insurer's liability to make payment is only in excess of the Deductible as specified in policy certificate.

- a) Reasonable cost of Transportation expenses to the alternative hotel.
- b) The difference of cost in up gradation to a superior class of accommodation, wherever alternate accommodation is not available on the cost of pre-booked hotel. For this benefit the Insured shall be required to furnish proof that the alternate accommodation on the cost of pre-booked hotel is not available in the form of a certificate issued by the Alternate Accommodation Service Provider.

Specific Exclusions

This benefit does not cover any other loss other than those mentioned above under the head "coverage", directly or indirectly , in whole or in part, including loss caused by or resulting from any exclusion mentioned in the 'General Exclusions' section of this Policy.

Section : Visa Refusal**Coverage**

In the event of Refusal of Visa application by the Visa Facilitation Services the Company shall reimburse the Insured Person up to the limit of Sum Insured and limit as specified against this Benefit in the Policy Certificate for expenses incurred towards processing of visa application, which are not recoverable from any other source.

A Deductible of an amount specified in the Policy Certificate shall be separately applicable for each and every claim made under this Benefit.

Specific Exclusion:

The Company shall not be liable to make any payment for any claim under this Benefit of the Policy in respect of an Insured Person, directly or indirectly for, caused by, arising from or in any way attributable to any of the following:

- Visa application was submitted prior to issuance of Policy
- Missed pre-scheduled Appointment
- Past or current criminal Actions
- Insufficient/ False Travel Document or income document
- Insufficient explanation for the purpose and circumstances of the planned stay
- Damaged Passport
- Passport Invalidity
- Lack to prove the travel itinerary
- Invalid letter of reference
- Insufficient means of subsistence
- Unacceptable birth or marriage certificate
- Lacking to present a proof of accommodation
- Any other reason for rejection which is due to the insured member not meeting the criteria set out by the visa issuing authority.

Section: Flight Delay(Airlines)

In the event of delay of the airlines, whilst on a Trip, at any Port specified in the Insured Person's main travel booking except in India/ Country of Origin, the Company shall reimburse the Insured Person for any reasonable and necessary expenses incurred on any alternate travel booking under any mode of transport (but travel booking superior to original category is not covered) post deduction of compensation offered by service provider/common carrier or through any other source, for travelling to the next Intended Destination as per Insured person's main travel booking upto the limit of Sum Insured specified against this Benefit in the Policy Certificate, if such delay is caused due to any of the following reasons:

1. Inclement Weather
2. Any Strike, riots, industrial action at the Port or relating to the Common Carrier
3. Delay by the Airlines

This Benefit shall be payable subject to the following:

1. The Insured Person shall submit to the Company sufficient proof to substantiate the reason for such delay of the Common Carrier, unless this proof is available to the Company directly from a reliable source in the public domain;
2. The delay of the Common Carrier is in excess of the number of hours specified in the Policy Certificate from the scheduled time of the Common Carrier at the Port.
3. The Company shall be liable under this Benefit for only one/ multiple delay/s, as specified in the Policy Certificate, encountered by the Insured Person during the Period of Insurance, irrespective of whether the Policy is Single Trip or Multi Trip Policy.
4. A Deductible of the number of hours or an amount specified in the Policy Certificate shall be separately applicable for each and every claim made under this Benefit.

This cover is also available as a fixed benefit option upto the sum insured clearly specified in the policy certificate/special conditions of policy certificate & subject to admissible claim as per the policy condition applicable to this sections including specific exclusion and to any other condition to this policy. In respect to process claims documents specified under Documentation section is necessary to evaluate the claim. All terms & conditions applicable to this cover remains same as mentioned in coverage, specific exclusion, General exclusion applicable to this section

Specific Exclusions

The Company shall not be liable to make any payment for any claim under this Benefit of the Policy in respect of an Insured Person, directly or indirectly for, caused by, arising from or in any way attributable to any of the following:

1. Delayed arrival of the Insured Person or Travelling Companion
2. Any delayed departure caused by a Strike or industrial action known to exist or capable of being anticipated at the time the Trip was booked.
3. If the Common Carrier is taken out of service on the instruction of the Civil Aviation Authority, or any other governmental authority.
4. Any exclusion mentioned in the "General Exclusions" Section of this Policy.

GENERAL EXCLUSIONS (APPLICABLE TO ALL BENEFITS UNDER THE POLICY):

In addition to the exclusions that are applicable for the specific sections of the Policy as mentioned above in this Policy, the following exclusions apply to benefits under all Sections of the Policy

Without prejudice to anything contained in this Policy, the Company shall not be liable to make any payment in respect of, unless specifically stated otherwise in the Schedule or certificate to the Policy:

1. Any claim relating to events occurring before the commencement of the cover or otherwise outside of the period of insurance.
2. Pre-existing condition(s) are excluded from the policy including but not limited to unforeseen emergency measures to save the Insured/Insured person's life. This exclusion will apply to the following sections: Emergency Medical Expenses, Extension to Emergency Medical Expenses section, Emergency Medical Evacuation, Repatriation of Mortal Remains Dental Treatment Expenses, Daily Allowance in case of Hospitalization, Compassionate Visit, Study Interruption, Home Country Cover, University Excess Medical Cover, Permanent Total Disability (PTD), Permanent Partial Disability (PPD), however, this exclusion can be waived Upon realization of additional premium and will be indicated in the Policy Certificate along with the corresponding sub-limit.
3. Pre-existing condition(s) are excluded from the policy. This exclusion will apply to the following sections: Emergency Medical Expenses, Extension to Emergency Medical Expenses section, Emergency Medical Evacuation, Repatriation of Mortal Remains Dental Treatment Expenses, Daily Allowance in case of Hospitalization, Compassionate Visit, Study Interruption, Home Country Cover, University Excess Medical Cover, Permanent Total Disability (PTD), Permanent Partial Disability (PPD), however, this exclusion can be waived Upon realization of additional premium and will be indicated in the Policy Certificate along with the corresponding sub-limit.
4. Treatment abroad if that is the sole reason or one of the reasons for the Insured/Insured Person's temporary stay abroad
5. Any claim if the Insured Person –
 - a. Is travelling against the advice of a Physician;
 - b. Is receiving, or is on a waiting list to receive, specified medical treatment declared in the Physician's report or certificate;
 - c. Has received terminal prognosis for a medical condition;
 - d. Is taking part in a naval, military or air force operation.
- 5 Deductibles as specified in the Policy Schedule/Policy Certificate.
6. No claim will be paid arising from suicide, attempted suicide or willfully self inflicted injury or illness, mental disorder, anxiety, depression, venereal disease, alcoholism, drunkenness or the abuse of the drugs, or any loss arising directly or indirectly from any injury, illness, death, loss, expenses, or other liability attributable to HIV (Human Immunodeficiency Virus) and/or any HIV related illness including AIDS (Acquired Immune Deficiency Syndrome) and/or any mutant derivative or variation thereof however caused
7. Congenital external diseases, defects or anomalies –
8. Diseases, illness and accidents that are results of war and warlike occurrence or invasion, acts of foreign enemies, hostilities

(whether war de declared or not), civil war, rebellion, insurrection, civil commotion assuming the proportions of or amountin gto an uprising, military or usurped power, active participation in riots, confiscation or nationalisation or requisition of or destruction of or damage to property by or under the order of any government or local authority.

9. Any claim resulting or arising from or any consequential loss, directly or indirectly, caused by or contributed to or arising from:
- Ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel or
 - The radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.

10. Any claim arising out of sporting activities in so far as they involve the training or participation in competitions of professional or semi-professional sports persons, Adventure Sports unless declared beforehand and necessary additional premium paid

11. No claim will be paid which arises from the insured Person engaging in Air Travel unless he or she flies as a passenger on an aircraft properly licensed to carry passengers. For the purpose of this exclusion, Air Travel means being in or on, or boarding an aircraft for the purpose of flying therein or alighting there from following a flight

12. Medical Expenses in respect of Experimental, investigational or unproven treatments or treatments which are not consistent with or incidental to the diagnosis and treatment of the positive existence or presence of any Illness for which confinement is required at a Hospital. Any Illness or treatment which is a result or a consequence of undergoing such experimental or unproven treatment

13. Any claim arising out of diseases, illnesses or accidents that the Insured/Insured Person has caused intentionally or by committing a crime or as a result of drunkenness or addiction (drugs, alcohol). However, treatment of mental and nervous disorders, including alcohol and drug dependency, will be covered subject to the limits specified in the Policy Schedule /Policy Certificate, if specifically agreed for and mentioned in the Policy Schedule/Policy Certificate. The payment for such medical expenses shall be limited to inpatient hospitalization in a Hospital/Nursing Home for a period more than 24 hours.

14. Any claim arising out of any act of terrorism which means an act, including but not limited to the use of force or violence and/or the threat thereof, of any person or group(s) of persons, whether acting alone or on behalf of or in connection with a ny organization(s) or government(s), committed for political, religious, ideological, or ethn ic purposes or reasons including the intention to influence any government and/or to put the public, or any section of the public, in fear. This shall not apply i n respect of **Section - Hijack Distress Allowance**

15. Naturopathy treatment

16. No claim will be paid for losses arising from accidents on two wheeled motorized vehicles unless at the time of the accident the driver is duly qualified, is in possession of a current full international Driving License and the Insured Person is wearing a safety crash helmet, or losses arising from accidents on two wheeled motorized vehicles over 50 cc.

17. No claims will be paid for losses arising directly or indirectly from hazardous occupation or if engaging in any criminal or illegal act.

GENERAL CONDITIONS OR PROVISIONS UNDER THE POLICY (APPLICABLE TO ALL BENEFITS UNDER THIS POLICY)**GRIEVANCES REDRESSAL PROCEDURE**

The Company is committed to extend the best possible services to its customers. However, If Policyholder/Insured Person have a grievance that he/she wish us to redress, he/she may contact the Company with the details of their grievance via:

- Website: www.icicilombard.com
- Email: customersupport@icicilombard.com
- Phone: 1800 2666
- Courier: Any of the Company's Branch office or corporate office

Policyholder/Insured/ Insured Person may also approach the grievance cell at any of the Company's branches with the details of the grievance during working hours from Monday to Friday.

Escalation Level 1

In case the Policyholder/Insured/Insured Person has not got his/her grievances redressed through one of the above methods (After 5 days of intimating of your complaint), Policyholder/ Insured/ Insured Person may contact the National Grievance Redressal Officer at :

Write to: ICICI Lombard Healthcare, ICICI Bank Tower, Plot No. 12, Financial District, Nanakram Guda, Gachibowli, Hyderabad-500032.

Email: <https://www.icicilombard.com/grievance-redressal/procedure>

Escalation Level 2

In case the Policyholder/ Insured/Insured Person has not got his/her grievances redressed through any of the above methods (After 5 days of approaching National Grievance Redressal Officer), Policyholder/ Insured/ Insured Person may contact the Chief Grievance Redressal Officer at:

Email : <https://www.icicilombard.com/grievance-redressal/procedure>

Escalation Level 3

In case the Policyholder/ Insured/Insured Person has not got his/her grievances redressed by the Company within 14 days, or, If Policyholder/ Insured/Insured Person is not satisfied with Company's redressal of the grievance through one of the above methods, Policyholder/ Insured/ Insured Person may approach the nearest Insurance Ombudsman for resolution of their grievance. The contact details of Ombudsman offices are mentioned below. Policy holder may also obtain copy of IRDAI circular Ref No. F. No. IRDAI/Reg/8/145/2017, notification on Insurance Regulatory and Development Authority (Protection of Policy holders' interests) Regulations, 2017 from any of our offices.

Grievance of Senior Citizens:

In respect of Senior Citizens, the Company has established a separate channel to address the grievances. Any concerns may be directly addressed to the Senior Citizen's channel of the Company for faster attention or speedy disposal of grievance, if any.

- Website: www.icicilombard.com
- Email: customersupport@icicilombard.com
- Phone: 1800 2666
- Courier: Any of the Company's Branch office or corporate office

Insured/ Insured Person may also approach the grievance cell at any of the Company's branches with the details of the grievance during working hours from Monday to Friday.

Grievance Redressal Cell of the Consumer Affairs Department of IRDAI

The insurance company should resolve the complaint within a reasonable time. In case if it is not resolved within 15 days or if the Insured/Insured Person is unhappy with their resolution you can approach the Grievance Redressal Cell of the Consumer Affairs Department of IRDAI.

- Website: igms.irda.gov.in
- Email: complaints@irda.gov.in
- Toll Free Number 155255 (or) 1800 4254 732

LIST OF INSURANCE OMBUDSMEN

The contact details of the **Insurance Ombudsman** offices are as below. These details can also be found at <http://www.cioins.co.in/ombudsman.html>.

<u>NAMES OF OMBUDSMAN AND ADDRESSES OF OMBUDSMAN CENTRES</u>		
Location	Office Details	Jurisdiction of Office, Union Territory, District
Ahmedabad	<p align="center">Shri Kuldip Singh Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor, Tilak Marg, Relief Road, Ahmedabad – 380 001. Tel.: 079 - 25501201/02/05/06 Email: bimalokpal.ahmedabad@cioins.co.in</p>	<p>Gujarat, Dadra & Nagar Haveli, Daman and Diu</p>
Bengaluru	<p align="center">Smt. Neerja Shah Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No. 57-27-N-19 Ground Floor, 19/19, 24th Main Road, JP Nagar, 1st Phase, Bengaluru – 560 078. Tel.: 080 - 26652048 / 26652049 Email: bimalokpal.bengaluru@cioins.co.in</p>	<p>Karnataka</p>
Bhopal	<p align="center">Shri Guru Saran Shrivastava Office of the Insurance Ombudsman, Janak Vihar Complex, 2nd Floor, 6, Malviya Nagar, Opp. Airtel Office, Near New Market, Bhopal – 462 003. Tel.: 0755 - 2769201 / 2769202 Fax: 0755 - 2769203 Email: bimalokpal.bhopal@cioins.co.in</p>	<p>Madhya Pradesh Chattisgarh</p>

Bhubaneswar	<p>Shri Suresh Chandra Panda Office of the Insurance Ombudsman, 62, Forest park, Bhubneshwar – 751 009. Tel.: 0674 - 2596461 /2596455 Fax: 0674 - 2596429 Email: bimalokpal.bhubaneswar@cioins.co.in</p>	Orissa
Chandigarh	<p>Office of the Insurance Ombudsman, S.C.O. No. 101, 102 & 103, 2nd Floor, Batra Building, Sector 17 – D, Chandigarh – 160 017. Tel.: 0172 - 2706196 / 2706468 Fax: 0172 - 2708274 Email: bimalokpal.chandigarh@cioins.co.in</p>	<p>Punjab, Haryana(excluding Gurugram, Faridabad, Sonapat and Bahadurgarh) Himachal Pradesh, Union Territories of Jammu & Kashmir, Ladakh & Chandigarh.</p>
Chennai	<p>Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018. Tel.: 044 - 24333668 / 24335284 Fax: 044 - 24333664 Email: bimalokpal.chennai@cioins.co.in</p>	<p>Tamil Nadu, Pondicherry Town and Karaikal (which are part of Pondicherry)</p>
Delhi	<p>Shri Sudhir Krishna Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel.: 011 - 23232481/23213504 Email: bimalokpal.delhi@cioins.co.in</p>	<p>Delhi & Following Districts of Haryana - Gurugram, Faridabad, Sonapat & Bahadurgarh</p>
Guwahati	<p>Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati – 781001(ASSAM). Tel.: 0361 - 2632204 / 2602205 Email: bimalokpal.guwahati@cioins.co.in</p>	<p>Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura</p>

Policy Wordings: Travel Assure - Group Overseas Travel Insurance

UIN of Product: ICITGOP22203V022122

 Registered and corporate office address: ICICI Lombard General Insurance Company Ltd., ICICI Lombard House,
 414, Veer Savarkar Marg, Prabhadevi, Mumbai – 400025, IRDAI Registration No: 115, CIN: L67200MH2000PLC129408, Toll free no: 1800 2666,
 Website: www.icicilombard.com, Email: customersupport@icicilombard.com

<p>Hyderabad</p>	<p>Office of the Insurance Ombudsman, 6-2-46, 1st floor, "Moin Court", Lane Opp. Saleem Function Palace, A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004. Tel.: 040 - 23312122 Fax: 040 - 23376599 Email: bimalokpal.hyderabad@cioins.co.in</p>	<p>Andhra Pradesh, Telangana, Yanam and part of Territory of Pondicherry</p>
<p>Jaipur</p>	<p>Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141 – 2740363 Email: bimalokpal.jaipur@cioins.co.in</p>	<p>Rajasthan</p>
<p>Ernakulam</p>	<p>Ms Poonam Bodra Office of the Insurance Ombudsman, 2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard, M. G. Road, Ernakulam - 682 015. Tel.: 0484 - 2358759 / 2359338 Fax: 0484 - 2359336 Email: bimalokpal.ernakulam@cioins.co.in</p>	<p>Kerala, Lakshadweep, Mahe-a part of Union Territory of Puducherry.</p>
<p>Kolkata</p>	<p>Shri P.K. Rath Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 / 22124340 Fax : 033 - 22124341 Email: bimalokpal.kolkata@cioins.co.in</p>	<p>West Bengal, Sikkim, Andaman & Nicobar Islands</p>

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Website: www.icicilombard.com, Email: customersupport@icicilombard.com

<p>Lucknow</p>	<p>Shri Justice Anil Kumar Srivastava Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, Lucknow - 226 001. Tel.: 0522 - 2231330 / 2231331 Fax: 0522 - 2231310 Email: bimalokpal.lucknow@cioins.co.in</p>	<p>Districts of Uttar Pradesh : Lalitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar.</p>
<p>Mumbai</p>	<p>Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 69038821/23/24/25/26/27/28/28/29/30/31 Fax: 022 - 26106052 Email: bimalokpal.mumbai@cioins.co.in</p>	<p>Goa, Mumbai Metropolitan Region excluding Navi Mumbai & Thane</p>
<p>Noida</p>	<p>Shri Chandra Shekhar Prasad Office of the Insurance Ombudsman, Bhagwan Sahai Palace 4th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddh Nagar, U.P-201301. Tel.: 0120- 2514252 / 2514253 Email: bimalokpal.noida@cioins.co.in</p>	<p>State of Uttaranchal and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur, Hapur, Shamli, Rampur, Kashganj, Sambhal, Amroha, Hathras, Kanshiramnagar, Saharanpur</p>

Patna	<p>Shri N. K. Singh Office of the Insurance Ombudsman, 1st Floor, Kalpana Arcade Building,, Bazar Samiti Road, Bahadurpur, Patna 800 006. Tel.: 0612-2680952 Email: bimalokpal.patna@cioins.co.in</p>	<p>Bihar, Jharkhand</p>
Pune	<p>Shri Vinay Sah Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 3rd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune – 411 030. Tel.: 020-41312555 Email: bimalokpal.pune@cioins.co.in</p>	<p>Maharashtra, Area of Navi Mumbai and Thane excluding Mumbai Metropolitan Region</p>

Policy Wordings: Travel Assure - Group Overseas Travel Insurance

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Website: www.icicilombard.com, Email: customersupport@icicilombard.com

GENERAL CONDITIONS OR PROVISIONS UNDER THE POLICY (APPLICABLE TO ALL BENEFITS UNDER THIS POLICY)

1. The deductible in respect of this benefit will be applicable for each and every claim separately and shall be of an amount as specified in the Policy Schedule/Policy Certificate
2. Policies covering single trips can be issued upto single trip not exceeding 365 days.
3. Of the covers indicated in this policy wording coverage available to the insured will be indicated in the Certificate of Insurance along with Sum Insured and Deductibles
4. Policies covering annual multi trips can be issued for annual period of one year covering multiple single trips within the annual period of insurance with each and every single trip not exceeding a specified number of days as mentioned in the Policy Schedule/Policy Certificate
5. The Policy start date shall be on or before the trip start date.
6. Extension of the Period of Insurance of the Policy during the duration of the trip can be done only at the sole discretion of the Company depending upon the risk factors.
7. If the Insured /Insured Person does not declare the full current facts or declare wrong facts while requesting for extension of the Policy, any extension of such a Policy if granted shall be deemed to be invalid. No refund of premium will be given in case of extensions so invalidated. The Company will also not be liable to pay any claim filed under the extended Policy.
8. Termination of the Policy at a date earlier than the end date can be done only if the Insured Person returns back to the Republic of India earlier than the end date of the Period of Insurance of the Policy. Refund of premium for the days between the return date to the Republic of India and the end date of the Period of Insurance as mentioned in the Policy Schedule/Policy Certificate will only be given if the same are a minimum of 10 days. A cancellation charge will be deducted from the refund premium. Premium refunded will be equal to the amount of premium to be paid for the original Policy duration minus the premium to be paid by taking the return date as the new end date of Period of Insurance. No refunds will be given on policies with claims.
9. The premium payable for the extension of the Policy during the trip duration shall be the premium payable for the overall trip duration (including the extension) less the initial premium already paid.
10. Policy is applicable for one-way travel also, including immigration travel with a condition for maximum duration of coverage limited to specified number of days as mentioned in the Policy Schedule/Policy Certificate.
11. The Insured Person shall take all reasonable precautions in the normal course, to stay healthy and prevent disease, illness and injury. Failure to do so will prejudice the Insured/Insured Person's claim under this Policy.
12. The Insured / Insured Person shall provide the Company with the details of the trip and other information as may be required by the Company from time to time.
13. Deductible will be charged for each separate incident reported for claims payment, even though the claim may be registered under the same benefit more than once.
14. Claim Procedure – The procedure to be followed by the Insured / Insured person in case of any event that may give rise to a claim under this Policy, the claim documentation required to be submitted by the Insured / Insured Person at the time lodging claims as well as the claim settlement process are enumerated in the enclosed Claim Procedure attached to this Policy. Any failure on the part of the Insured / Insured Person in complying with the procedure or submission of required documents in support of his/her claim may prejudice the claim of the Insured/Insured Person.
15. Obligations of the Insured /Insured Person:
 - a. Insured / Insured Person shall provide to the Company or the Emergency Service Provider appointed by the Company, on demand any information that is required to determine the occurrence of the insurable event or the Company's liability to pay the benefits.
 - b. If requested to do so by the Company or the Emergency Service Provider appointed by the Company, the Insured / Insured Person is obliged to undergo a medical examination by a Medical Practitioner designated by the Emergency Service Provider for the purpose of settlement of claims only.. The cost towards the medical examination shall be borne by the Company
 - c. The Company or the Emergency Service Provider appointed by the Company is authorized to take all measures that are suitable for loss prevention and claim minimization which includes the Insured / Insured Person's transportation back to the Republic of India. The transportation of the Insured/Insured person back to India shall be done only on agreement

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and confirmation from the attending medical practitioner/ panel doctor that the Insured/Insured Person is capable of being transported to India

- d. The Company shall be released from any obligation to pay benefits under this Policy, if any, of the aforementioned obligations are breached by the Insured/ Insured Person.
16. Transfer and Set-off of Claims:
- If the Insured / Insured Person have any outstanding claims against third parties, such claims shall be transferred in writing to the Company up to the amount for which the reimbursement of costs is made by the Company in accordance with the terms hereunder.
 - In so far as an Insured / Insured Person receives compensation for costs he/she has incurred either from third parties liable for damages or as a result of other legal circumstances, the Company shall be entitled to set off this compensation against the insurance benefits payable.
 - Claims to the insurance benefits may be neither pledged nor transferred by the Insured/ Insured Person.
- Transfer and Set-Off of Claims shall not be applicable to any Medical Sections under the Policy namely Emergency Medical Expenses, Emergency Medical Evacuation, Repatriation of Mortal Remains, Dental Treatment Expenses, Personal Accident, Accidental Death and Permanent Total Disablement – Common carrier Coverage, Daily allowances in case of Hospitalization.
17. The premium charged shall be based on the number of man days insured in each category at the commencement of the Policy Period, as declared by the Insured Person. Depending on the actual number of man days covered in the Policy Period in each category as at the last day of such Policy period, if the premium calculated on the actual number of man days shall differ from the premium charged at the commencement of the Policy, then such difference shall be paid to the Company or refunded by the Company as the case may be
18. Multiple Claims: In the event a claim is payable in multiple sections under this policy the Company's liability will be restricted to the highest amount payable per section.
19. In case a covered insured event, as described in the Benefit Section, occurs before date of purchase of this policy or advance warning is issued by the relevant authorities of the likelihood of such an event happening before date of purchase of this policy the Company shall not be liable to pay a claim.

GENERAL TERMS AND CONDITIONS (APPLICABLE TO ALL SECTIONS OF THIS POLICY)

1. Duty of Disclosure or Disclosure to information norm

The Policy shall be null and void and no benefit shall be payable in the event of untrue or incorrect statements, misrepresentation, mis-description or non-disclosure of any material particulars in the, personal statement, declaration and connected documents, or any material information having been withheld, or a claim being fraudulent or any fraudulent` means or device being used by the Insured/Insured Person or any one acting on his/their behalf to obtain a benefit under this Policy.

2. Observance of terms and conditions

The due observance and fulfilment of the terms, conditions and endorsement of this Policy in so far as they relate to anything to be done or complied with by the Insured / Insured Person, shall be a condition precedent to any liability of the Company to make any payment under this Policy.

3. Geography

The geographical scope of this policy applies to events limited to the Geographical Area of Cover opted and which are specified in the Policy Schedule/ Policy Certificate

4. Eligibility

- Policy shall be offered on single trip/multi (annual) trip basis
- Premium Payment Frequency available under the policy is: Monthly/Quarterly/Half yearly/ Yearly
- Premium is payable and realized in full by the company in monthly/quarterly/half yearly frequency(as the case may be) before the installment due date.

- Area of cover
 - Worldwide, Including US & Canada
 - Worldwide excluding US & Canada
 - Asia
 - Schengen Excluding US & Canada
 - Schengen Including US & Canada
 - MDV(Marhaba Dubai Visa)

For a specific group, the area of cover may be limited to any particular country or region from above list of Area of Cover

5. Insured Person

Only those persons named as an Insured Person in the Schedule/certificate shall be covered under this Policy. Any person may be added as an Insured Person during the Policy Period after his application has been accepted by Us, additional premium to be paid and We have issued an endorsement confirming the addition of such person as an Insured Person

6. Waiting Period

All claims payable with respect to a Pre-Existing Illness or any conditions declared and/or accepted at the time of proposal / application will be subject to a Waiting Period as specified in the Policy Certificate

7 . Alterations and Endorsements to the Policy

This Policy constitutes the complete contract of insurance. This Policy cannot be changed or varied by anyone (including an insurance agent or broker) except Us, and any change We make will be evidenced by a written endorsement signed and stamped by Us.

The following endorsement requests can be accepted by Us:

Sno	Scenarios	Before Policy Start Date	After Policy Start Date
1	Name Change	Allowed	Allowed
2	Address Change	Allowed	Allowed
3	DOB Change	Allowed	Allowed, subject to change in premium and company's guidelines
4	Change of Email	Allowed	Allowed
5	Change of Contact number	Allowed	Allowed
6	Change of Risk Start and/or End Date	Allowed	Not Allowed
7	Trip Extension	Not Allowed	Allowed
8	Change of Nominee	Allowed	Allowed
9	Change of Passport Details	Allowed	Not Allowed
10	Policy Cancellation	Allowed, only if request is received before 24 hours	Not Allowed
11	Plan Change	Allowed	Not Allowed
12	Geography Change	Allowed	Not Allowed

8.Loadings and / or exclusion

On change of your Occupation and / or risk profile, the coverage may cease, unless specifically agreed by Us. However in such case We may charge an additional loading or apply exclusion or both depending upon the risk profile

9.Material change

The Insured/ Insured Person shall immediately notify the Company in writing of any material change in the risk such as change in occupation,

Policy Wordings: Travel Assure - Group Overseas Travel Insurance

UIN of Product: ICITGOP22203V022122

Registered and corporate office address: ICICI Lombard General Insurance Company Ltd., ICICI Lombard House, 414, Veer Savarkar Marg, Prabhadevi, Mumbai – 400025, IRDAI Registration No: 115, CIN: L67200MH2000PLC129408, Toll free no: 1800 2666, Website: www.icicilombard.com, Email: customersupport@icicilombard.com

trip duration, country and location of travel, correction in age, nature of job and cause at his own expense such additional precautions to be taken as circumstances may require to ensure safety and containing the circumstances that may give rise to the claim, and the Company may adjust the scope of cover and / or premium if necessary, accordingly. The liability of Company shall continue only if there is a written acceptance on the part of the Insurance through endorsement

10.Fraudulent Claims

If any claim is in any respect fraudulent, or if any false statement, or declaration is made or used in support thereof, or if any fraudulent means or devices are used by the Insured/Insured Person or anyone acting on his/her behalf to obtain any benefit under this Policy all benefits and the premium paid under this Policy shall be forfeited.

The Company will have the right to reclaim all benefits paid in respect of a claim which is fraudulent as mentioned above under this Condition as well as under Condition No 1 of this Policy

11.No constructive Notice

Any knowledge or information of any circumstance or condition in connection with the Insured/Insured Person in possession of any official of the Company shall not be notice to or be held to bind or prejudicially affect the Company notwithstanding subsequent acceptance of any premium.

12.Notice of charge

The Company shall not be bound to take notice or be affected by any notice of any trust, charge, lien, assignment or other dealing with or relating to this Policy, but the payment by the Company to the Insured /Insured Person or his/her nominees or the legal representative, as the case may be, of any compensation or benefit under the Policy shall in all cases be an effectual discharge to the Company. In the cases of delay in the payment, the Company shall be liable to pay interest in line with the Protection of Policyholders' Interests) Regulations, 2017. The said act is available for reference in the website of the Insurance Development Regulatory Authority of India (IRDAI)

13Electronic Transaction:

The Insured/ Insured Person agrees to adhere to and comply with all such terms and conditions as the Company may prescribe from time to time and hereby agrees and confirms that all transactions effected by or through facilities for conducting remote transactions including the internet, world wide web, Electronic data interchange, call centres, teleservice operations (whether voice, video, data or combination thereof) or by means of electronic, computer, automated machines network or through other means of telecommunication established by or on behalf of the Company for and in respect of the Policy or its terms or the Company's other products and services, shall constitute legally binding and valid transactions when done in adherence to and in compliance with the Company's terms and conditions for such facilities, as may be prescribed from time to time. However, the terms of this condition shall not override provisions of any law(s) or statutory regulations including provisions of IRDAI regulations for protection of policyholder's interests. All conditions of section 41 prescribed necessary disclosures on terms, conditions and major exclusions shall be made known to the Insured/Insured Person; Any voice transaction shall be duly recorded, with the consent of the Insured/Insured Person and the recordings shall be maintained by or on behalf of the Company and shall be made available to the Insured/Insured Person for subsequent validation/confirmation of the Insured/Insured Person, if so required.

14Duties of the Insured/ Insured Person on occurrence of loss

On the occurrence of any loss, within the scope of this Policy the Insured /Insured Person shall:

- a) Forthwith inform the Company and file/submit a Claim Form in accordance with 'Claim Procedure'.
- b) Allow the Medical Practitioner or the Surveyor or any agent of the Company to inspect the lost/damaged properties premises /goods as well as examine the Insured / Insured Person.
- c) Assist and not hinder or prevent the Company or any of its agents in pursuance of their duties.
- d) Not to abandon the insured property/items in the premises, nor take any steps to rectify/remedy the damage before the same has been approved by the Company or any of its agents or the Surveyor.

If the Insured/ Insured Person does not comply with this provision of this Clause, all benefits under this Policy shall be forfeited, at the option of the Company.

15Right to inspect

If required by the Company, an agent/representative of the Company including a loss assessor or a Surveyor appointed in that behalf shall in

case of any loss or any circumstances that have given rise to a claim to the Insured/Insured Person be permitted at all reasonable times to examine into the circumstances of such loss. The Insured /Insured Person shall on being required so to do by the Company produce all relevant documents relating to or containing reference relating to the loss or such circumstance in his possession including presenting himself for examination and furnish copies of or extracts from such of them as may be required by the Company so far as they relate to such claims or will in any way assist the Company to ascertain the correctness thereof or the liability of the Company under this Policy.

Basis of Payment: Compensation for an insured event as specified in the wording can be made on an indemnity or benefit basis as indicated in the Certificate of Insurance. Sections where this option is available are as indicated below

Sno	Cover Name	Cover Type	Cover Type
1	Emergency Medical Expenses	Benefit	Indemnity
The following covers are available as extensions under the Emergency Medical Expenses section			
I	Inpatient Emergency medical expenses for injuries during inter-collegiate sports	Benefit	Indemnity
ii	Outpatient Physiotherapy related to disease/illness/injury	Benefit	Indemnity
iii	Cancer screening and mammography examinations	Benefit	Indemnity
iv	Chiropractic Treatment related to disease/ illness/ injury requiring outpatient/inpatient care	Benefit	Indemnity
V	Skilled nursing facility related to disease/illness/injury requiring outpatient Care	Benefit	Indemnity
Vi	Adventure sports expenses due to injury	Benefit	Indemnity
Vii	Sexually transmitted disease	Benefit	Indemnity
Viii	Drug and Alcohol abuse	Benefit	Indemnity
Ix	Mental and Nervous disorder	Benefit	Indemnity
X	In-patient medical expenses related to pregnancy/childbirth (after a waiting period of 10 months)	Benefit	Indemnity
2	Emergency Medical Evacuation	Benefit	Indemnity
3	Repatriation of Mortal Remains	Benefit	Indemnity
4	Dental Treatment Expenses	Benefit	Indemnity
5	Political Risk and Catastrophe Evacuation	Benefit	Indemnity
6	Personal Accident- Accidental Death	Benefit	Not applicable
7	Permanent Total Disability (PTD)	Benefit	Not applicable
8	Permanent Partial Disability(PPD)	Benefit	Not applicable
9	Accidental Death—Common Carrier	Benefit	Not applicable
10	Permanent Total Disability—Common Carrier	Benefit	Not applicable
11	Permanent Partial Disability - Common carrier	Benefit	Not applicable
12	Daily Allowance in case of Hospitalization	Benefit	Not applicable
13	Compassionate Visit	Benefit	Indemnity
14	Loss of Passport and documents	Benefit	Indemnity
15	Total loss of checked-in baggage	Benefit	Indemnity
16	Delay of checked-in baggage	Benefit	Indemnity
17	Trip Delay	Benefit	Indemnity

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18	Trip Cancellation and Interruption	Benefit	Indemnity
19	Travel Inconvenience Cover	Benefit	Indemnity
20	Financial Emergency Assistance	Not applicable	Indemnity
21	Hijack Distress Allowance	Benefit	Not applicable
22	Bail Bond	Benefit	Indemnity
23	Loss of Gadgets	Benefit	Indemnity
24	Loss of International driving License	Benefit	Indemnity
25	Mugging benefits	Benefit	Indemnity
26	Missed Connection	Benefit	Indemnity
27	Loss of Deposit or cancellation - Hotel and Airline	Benefit	Indemnity
28	Overbooked -Common Carrier	Benefit	Indemnity
29	Legal expenses	Benefit	Indemnity
30	Pet Care (in INR)	Benefit	Indemnity
31	Emergency accommodation	Benefit	Indemnity
32	Child Escort	Benefit	Indemnity
33	Overseas Travel Service Supplier Insolvency	Benefit	Indemnity
34	Cruise Cover	Benefit	Indemnity
35	Bounced Hotel booking	Benefit	Indemnity
36	Visa Refusal	Benefit	Indemnity
37	Flight Delay(Airlines)	Benefit	Indemnity
38	Personal Liability	Not applicable	Indemnity
39	Golf Equipment Insurance	Not applicable	Indemnity
40	Debit / Credit Card / FOREX CARD- Fraud	Not applicable	Indemnity
41	Study Interruption	Not Applicable	Indemnity
42	Sponsor Protection	Not Applicable	Indemnity
43	Home Country Cover	Not Applicable	Indemnity
44	University Excess Medical Cover	Not Applicable	Indemnity
45	University Insolvency	Not Applicable	Indemnity
46	Missed or Delay Event	Benefit	Indemnity
47	Home Fire Insurance – Contents (in INR)	Not Applicable	Indemnity
48	Home Burglary Insurance – Contents (in INR)	Not Applicable	Indemnity
49	Alternate Employee Expenses / Substitute employee	Not Applicable	Indemnity
50	Travel Loan Secure (in INR)	Not Applicable	Indemnity
51	Car Rental Excess Insurance	Not Applicable	Indemnity

16 Position after a claim

The Insured/ Insured Person shall not be entitled to abandon any insured property whether the Company has taken possession of the same or not. As from the day of receipt of the claim amount by the Insured/ Insured Person, the Sum Insured for the remainder of the period of insurance shall stand reduced by the amount of the compensation.

In case of claims under Fire and Home Burglary Sections, the sum insured can be reinstated by payment of pro-rata premium for the unexpired period from the date of such loss to the expiry of period of insurance for the amount of such loss.

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17. Condition of Average

If the property hereby insured shall at the time of loss or at the commencement of any destruction of or damage to the property by any other peril hereby insured against be collectively of greater value than the Sum Insured thereon, then the Insured shall be considered as being his own insurer for the difference and shall bear a ratable proportion of the loss accordingly. Every item, if more than one, of the Policy shall be separately subject to this condition

18. Indemnity

The Company may at its option, if applicable reinstate, replace or repair the property or premises lost or damaged or any part thereof instead of paying the amount of loss or damage or may join with any other insurer in so doing. The Company shall not be bound to reinstate exactly or completely but only as circumstances permit and in reasonably sufficient manner. In no case shall the Company be bound to expend more in reinstatement than it would have cost to reinstate such property as it was at the time of the occurrence of such loss or damage and in any event not more than the sum Insured Person thereon.

If in any case the Company shall be unable to reinstate or repair the insured property/item, because of any law or other regulations in force affecting insured property or otherwise, the Company shall, in every such case, only be liable to pay such sum as would be requisite under this Policy. However, this condition shall not be applicable to Personal Accident, Accidental Death and Permanent Total Disability – Common Carrier Sections

19. Subrogation

In the event of payment under this Policy, the Company shall be subrogated to all the Insured /Insured Person's rights or recovery thereof against any person or Organisation, and the Insured/Insured Person shall execute and deliver instruments and papers necessary to secure such rights. The Insured/Insured Person and any claimant under this Policy shall at the expense of the Company do and concur in doing and permit to be done, all such acts and things as may be necessary or required by the Company, before or after Insured /Insured Person's indemnification, in enforcing or endorsing any rights or remedies, or of obtaining relief or indemnity, to which the Company shall be or would become entitled or subrogated. However, this condition shall not be applicable to Emergency Medical Expenses, Emergency Medical Evacuation, Repatriation of Mortal Remains, Dental Treatment Expenses, Personal Accident, Accidental Death and Permanent Total Disability – Common Carrier, Daily allowance in case of Hospitalization Sections

20. Contribution

If at the time of the happening of any loss or damage covered by this Policy, there shall be existing any other insurance of any nature whatsoever covering the same, whether effected by the Insured/ Insured Person or not, then the Company shall not be liable to pay or contribute more than its rateable proportion of any loss or damage. However, this condition shall not be applicable to Emergency Medical Expenses, Emergency Medical Evacuation, Repatriation of Mortal Remains, Dental Treatment Expenses, Personal Accident, Accidental Death and Permanent Total Disability – Common Carrier, Daily allowance in case of Hospitalization Sections

21. Two Policy Period (Applicable for Annual policies only)

If the claim event falls within two policy periods, the claims will be paid taking into consideration the available sum insured in the two policy periods, including the deductibles for each policy period. Such eligible claim amount to be payable to the insured shall be reduced to the extent of premium to be received for the renewal or due date of premium of travel insurance policy, if not received earlier.

22. Forfeiture of claims

If any claim is made and rejected and no court action or suit commenced within 12 months after such rejection or, in case of arbitration taking place as provided therein, within 12 calendar months after the Arbitrator or Arbitrators have made their award, all benefits under this Policy shall be forfeited.

23. Free Look Period

The insured/ insured persons have a period of 15 days from the date of receipt of the Policy document to review the terms and conditions of this Policy.

If insured/ insured persons have any objections to any of the terms and conditions, they have the option of canceling the Policy stating the reasons for cancellation and the premium paid will be refunded, after adjusting the amounts spent on stamp duty charges and proportionate risk premium.

1. Insured(s) can cancel the Policy before the commencement of the Risk Period, or
2. Insured(s) may also cancel the policy after the commencement of the Risk Period (in case of annual risk policies only) subject to no claim under the policy, in which case the premium will be returned on pro-rata basis.

All the rights under this Policy shall immediately stand extinguished on the free look cancellation of the Policy.

Free look provision is not applicable and available at the time of renewal and/or at the time of subsequent trips for Annual Multi Trip Policy.

24. Termination / Cancellation

In case of Annual Policies, the Company may at any time, cancel this Policy, by giving 30 days notice in writing by Registered Post Acknowledgment Due to the Insured/Insured Person at his last known address. The company shall exercise its right to cancel only in case of mis-representation, non-disclosure of material facts. In such cases, policy shall be void and all premium paid thereon shall be forfeited to the Company as per the disclosure to information norm. The Company shall exercise its right to cancel the policy on grounds of non-cooperation of the Insured / Insured Person in implementing the terms and conditions of this Policy. In such cases, Insurer shall be liable to repay premium as specified in the below mentioned table subject to no claims.

The Insured /Insured Person may also give 30 days notice in writing, to the Company, for the cancellation of this Policy, in which case the Company shall from the date of receipt of notice cancel the Policy and retain the premium for the period this Policy has been in force at the Company's short period scales, provided that, no refund of premium shall be made if any claim has been made under this Policy by or on behalf of the Insured/Insured Person upto the date of cancellation of this Policy.

Policy Period	Rate Of Premium to be retained
Up to 15% of Policy Period	25% of premium paid
Up to 25% of Policy Period	50% of premium paid
Upto 50% of Policy Period	75% of premium paid
Exceeding 50% of Policy Period	100% of premium paid

In case of single trip policies, termination of the Policy at a date earlier than the end date can be done only if the Insured Person returns back to the Republic of India earlier than the end date of the Period of Insurance of the Policy. Refund of premium for the days between the return date to the Republic of India and the end date of the Period of Insurance as mentioned in the Policy Schedule/Policy Certificate will only be given if the same are a minimum of 10 days. A cancellation charge will be deducted from the refund premium. Premium refunded will be equal to the amount of premium to be paid for the original Policy duration minus the premium to be paid by taking the return date as the new end date of Period of Insurance, provided that, no refund of premium shall be made if any claim has been made under this Policy by or on behalf of the Insured/Insured Person.

25. Cause of Action

No claim shall be payable under this Policy where the cause of action arises in India, unless otherwise specifically provided in the Policy Schedule/Policy Certificate.

26 Policy Disputes

The parties to this Policy expressly agree that the laws of the Republic of India shall govern the validity, construction, interpretation and effect of this Policy. Any dispute concerning the interpretation of the terms and conditions, limitations and/or

exclusions contained herein is understood and agreed to by both the insured and the Company to be subject to Indian law and in Indian Court.

27. Arbitration clause

If any dispute or difference shall arise as to the quantum to be paid under this Policy (liability being otherwise admitted) such difference shall independently of all other questions be referred to the decision of a sole arbitrator to be appointed in writing by the parties thereto or if they cannot agree upon a single arbitrator within 30 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 such two 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 dispute or difference shall be referable to arbitration, as hereinbefore provided, if the Company has disputed or not accepted liability under or in respect of this Policy.

It is hereby expressly stipulated and declared that it shall be a condition precedent to any right of action or suit up on this Policy that the award by such arbitrator/arbitrators of the amount of the loss or damage shall be first obtained.

28Renewability

The Company shall give notice for renewal of the Annual Multi Trip policies and accept renewal premium in all cases except in case of fraud, misrepresentation or non-cooperation of the Insured / Insured Person in implementing the terms and conditions of this Policy or if the renewal of Policy poses a moral hazard. Every renewal premium (which shall be paid and accepted in respect of this Policy) shall be so paid and accepted upon the distinct understanding that no alteration has taken place in the facts contained in the declaration herein before mentioned and that nothing is known to the Insured / Insured Person that may result to enhance the risk of the Company. No renewal receipt shall be valid unless it is on the printed form of the Company and signed by an authorized official of the Company.

This Policy provides 30 days Grace Period for renewing the Policy .. However, there is no coverage for injury sustained or disease contacted during this (grace) period under this Policy. Renewal premium are subject to change with prior approval of IRDAI.

Instalment premium is not received during a 15 days grace period

The Company may vary the renewal premium and/or benefits payable subject to approval from IRDAI and inform the same to the Insured at least 3 months prior to the date of revision and/ or modification

In the likelihood of this policy being withdrawn in future, the Company will inform the same to the Insured at least 3 months prior to expiry of the policy

Insured will have the option to migrate to other plan under similar travel insurance policy at the time of renewal (in case of Annual policies), provided the policy has been maintained without a break.

During currency of the policy, no change of plan or Sum Insured is allowed. The Company offer assured renewal of same plan / Sum Insured for lifelong. However in renewal of annual policies, insured can enhance up to next available sum insured slab, subject to no claim in the previous policy and Good Health Declaration

29Extension

The Company may in its sole and absolute discretion extend the Policy once during the Risk Period, provided that:

- 1) We receive the request for extension of the Policy and the applicable premium before the expiry date of the Policy Period.
- 2) We have received a good health and no claim declaration during the Risk Period.

- 3) The insured persons has not made a claim just before we receive the request for extension of the policy

The Company is under no obligation to extend the Policy or to extend the Policy on the same terms and conditions whether as to premium or otherwise.

30. Notices

Any notice, direction or instruction given under this Policy shall be in writing and delivered by hand, post, or facsimile to -

- a) In case of the Insured/Insured Person, at the address specified in the Policy Schedule/Certificate.
- b) In case of the Company, to the Policy issuing office of the Company.

31. Customer Service (Claims Notification- Claims Multi Media Model)

It is the endeavor of Company to give multiple options to the Insured Person/Insured Person's representative to intimate the claim to the Company. The intimation can be given in following ways:

- Toll Free call Centre of the Insurance Company(24x7) – 1800 2666
- Login to the website of the Insurance Company and intimate the claim – <http://www.icicilombard.com/contact-us>
- Send an email to the Company- customersupport@icicilombard.com
- Post/courier to Company - Claims, ICICI Lombard Healthcare, ICICI Bank Tower, Plot No. 12, Financial District, Nanakram Guda, Gachibowli, Hyderabad-500032.
- Directly contact our Company office but in writing. - ICICI Lombard Healthcare, ICICI Bank Tower, Plot No. 12, Financial District, Nanakram Guda, Gachibowli, Hyderabad-500032.

In all the above, the intimations are directed to a central team for prompt and immediate action

32. Multiple Policies

If two or more policies are taken by an insured during a period from one or more insurers to indemnify treatment costs, there will not be any contribution clause (Clause 20 mentioned above) and the insured can seek settlement of claim from any insurer.

However if the amount claimed is in excess of Sum Insured under a single policy, after considering the deductible and/or co-pay, insured can seek settlement of claim as per his/ her choice but company shall settle the claim with contribution clause

Claims Procedure

1. In the event of an accident or sudden illness which is likely to give rise to a claim under this Policy, the Insured Person shall immediately contact the Emergency Assistance Service Provider giving details of the Policy issued to him/her. The details of phone numbers and Help Line are given in the Schedule/Certificate attached to this Policy.
2. The first call will have to be made by the Insured Person giving his/ her contact number and subsequent calls will be made by the Service Provider at the contact number given by the Insured Person.
3. The Insured Person or his representative shall provide to the Emergency Assistance Service Provider maximum information about the illness, accident or occurrence as is available, as well as other information such as the Policy number etc. Emergency Assistance Service Provider shall assist the Insured Person in getting admitted in to a hospital / getting treatment from a Medical Practitioner as an outpatient.
4. Where it is not possible to make an emergency call before consulting a Medical Practitioner or going into hospital, the Insured Person shall contact the Emergency Assistance Service Provider as soon as possible. In either case, when being admitted as a patient, the Insured Person shall inform the Medical Practitioner or personnel at the hospital, the details of his/her policy coverage and shall state the details of the Emergency Assistance Service Provider and request them to contact them.
5. All necessary claim documents should be furnished to the Company/ Emergency Assistance Service Provider by the policy holder/insured to make a claim. However, claims filed even beyond such period should be considered if there are valid reasons of any delay.-
6. If proper intimation is given, the Emergency Assistance Service Provider shall give a benefit guarantee (cash less in-patient hospitalisation as well as outpatient treatment) to the hospital / other providers for the costs of hospitalization, transportation by emergency services, emergency evacuation, transportation home, repatriation or transportation of mortal remains and burial listed under Scope of Coverage under the Policy. These costs will be settled directly by the Emergency Assistance Service Provider on behalf of and for the account of the Company. The Insured Person shall release Medical

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Practitioners/hospital contacted by Emergency Assistance Service Provider from their duty not to disclose information about his/her case.

7. In such cases, the Insured Person before his discharge from the Hospital, shall fill up and sign the claim form and hand over the same to the Hospital authorities to be handed over to Emergency Assistance Service Provider. Please send the duly signed claim form along with all the documents to designated TPA within 14 days of the occurrence of the Incident. . However, claims filed even beyond such period should be considered if there are valid reasons of any delay.
8. Where no information is given to Emergency Assistance Service Provider and the payment for hospital treatment / outpatient treatment has been made by the Insured Person, the reasons therefore shall have to be given by the Insured / Insured Person along with the claim form giving details of treatment and bills for expenditure to the Company OR Emergency Assistance Service Provider. After examining the facts and establishing the liability, in consultation and with the approval of the Comp any Emergency Assistance Service Provider will reimburse to the Insured Person the costs incurred within the Scope of Coverage of the Policy on behalf of and for the account of the Company.
9. Besides where Insured or Insured Person and Emergency Assistance Service Provider agree that even though the procedure under Claims Procedure is complied with, the claim should be settled on a reimbursement basis (in consultation and with the approval of the Company), then it will be done so accordingly.
10. With respect to Emergency evacuation or repatriation, the following services shall be arranged by the Company through the Emergency Assistance Service Provider:
 - a) Transferring the Insured/Insured by air ambulance, regular airline or any other method of transport that is ascertained as being appropriate by the Emergency Assistance Service Provider and/or the Company. The method of transport and the date and time shall be decided by the Emergency Assistance Service Provider and/or Company
 - b) If the Insured/Insured Person is admitted to a Hospital then and if in the opinion of the appointed Medical Practitioner, the medical facilities in the hospital are not suitable or adequate, the Insured/Insured Person will be evacuated to the nearest place where appropriate services are available or to his/her permanent place of residence in India
 - c) Arrangement of reasonable and necessary transport and additional accommodation costs for another person to accompany the Insured/Insured Person if it is Medically Necessary that the Insured/Insured Person be accompanied in this way; this might be a Medical Practitioner, nurse, relative, friend or colleague
 - d) In the event of death of the Insured/Insured Person due to an insured event in terms of this policy, arrangements for bringing transporting the mortal remains of the deceased back to the Republic of India or reimbursement of cost of local burial or cremation in the country where the death occurred. An official death certificate and a physician's statement giving the cause of death needs to be submitted.

The Company will not be liable in respect of the emergency evacuation or repatriation service for:

- a) Any failure to provide the emergency evacuation or repatriation service or for any delays in providing it, unless the failure or delay is caused by the negligence of the Company and/or the Emergency Assistance Service Provider
 - b) Failure or delay in providing the emergency evacuation or repatriation service if:
 - a. By law the overseas evacuation or repatriation service cannot be provided in the country in which it is needed; or
 - b. The failure or delay is caused by any reason beyond our control including, but not limited to, strikes and flight conditions.
 - c) Injury or death caused while the Insured/Insured Person is being moved unless it is caused by the negligence of the Company/Emergency Assistance Service Provider or the negligence of anyone acting on the behalf of the Company/Emergency Assistance Service Provider
11. Quick turnaround time shall be ensured in case the Emergency Assistance Service Provider arranges the emergency evacuation. The Company shall review and monitor the promptness and quality of the service, turnaround time and accessibility provided by the Emergency Assistance Service Provider in the interest of the policyholder and shall take due course of action based on the results of the review.
12. Claims, if any, for Total Loss of Checked- in Baggage, Personal Accident and Loss of Passport will be settled in Indian Rupees in consultation and with approval of the Company, on return of the Insured Person to India. In such cases, the claim form with details is to be submitted to the Company OR Emergency Assistance Service Provider

13. Reimbursement of all claims by the Emergency Assistance Service Provider will be in India, in Indian Rupees at the exchange rate specified by the Reserve Bank of India, as applicable on the date the amount is billed.
14. The Company shall only be liable to indemnify if, besides proof of insurance cover, the documentary proofs required as per the claims procedure stated in the Policy, is also submitted
15. The total loss of checked-in baggage caused by an international carrier (airlines) must be reported to the International Carriers (airlines) and a Property Irregularity Report (P.I.R) shall be obtained from them. Original report together with the ticket(s), baggage tag(s) and the claim form are to be submitted in support of a claim by the Insured Person to the Company OR Emergency Assistance Service Provider.
16. When there is an Instalment facility - if Insured Person makes a claim under the policy (applicable for annual year policy), Insured Person will be liable to pay the premium for the entire policy period in full and premium shall be realized by the Company in full, before the claim is paid or Insured Person authorizes us to deduct from claim amount due any outstanding premiums due.
17. A loss of passport must be reported to the police authorities within 24 hours of discovery of such loss and an official report obtained from the Police authorities. The original official report of the Police authorities should also be submitted along with the claim form to the Company OR Emergency Assistance Service Provider
18. Failure to comply with the claims procedure stated above in respect of Total Loss of Checked-in Baggage and Loss of Passport, may prejudice the claim of the Insured Person.
19. Claims for reimbursement shall be submitted to the Company OR Emergency Assistance Service Provider within one month after completion of the treatment or transportation home. In the event of accidental death, the same shall be submitted within one month after transportation of mortal remains/burial.
20. The Insured and the Insured Person shall provide Emergency Assistance Service Provider / the Company on demand with any information that is required to determine the occurrence of the insured event or the scope of the Company's liability. In particular, at the request of Emergency Assistance Service Provider / the Company proof shall be furnished of the actual commencement of the trip abroad.
21. If requested to do so by Emergency Assistance Service Provider / the Company, the Insured Person and/or the Insured shall authorise Emergency Assistance Service Provider / the Company to obtain all the information considered necessary from third parties (Medical Practitioners, dentists, alternative practitioners, medical institutions of any kind, insurance carriers, health or pension offices) and release these parties from their obligation not to disclose information.
22. If requested to do so by Emergency Assistance Service Provider / the Company, the Insured Person is obliged to undergo a medical examination by a Medical Practitioner designated by Emergency Assistance Service Provider / the Company.
23. In case of any claim under Personal Liability or Bail Bond proof of judicial decision rendered by a Court of Law may be required.
24. In case of any accident giving rise to a claim under the Personal Accident section of the Policy, the Insured/ Insured Person, his/her nominee or legal representatives, as the case may be, shall provide complete information and details about the Insured Person in the claim form along with the following documents to the Company OR Emergency Assistance Service Provider. Such a claim will be settled only in India in Indian rupees.
25. The Company shall settle the claim within 30 days from the date of receipt of last necessary document in accordance with the provision of regulation 27 of IRDAI (Health Insurance) Regulations, 2016. In the case of delay in the payment of a claim, the

Company shall be liable to pay interest from the date of receipt of last necessary document to the date of payment of claim at a rate 2% above the bank rate.”

List of documents required for Claims processing:

EMERGENCY MEDICAL EXPENSES	
1.	Claim form duly filled and signed along with attending Medical Practitioner statement
2.	Copy of Policy certificate
3.	Covering letter detailing circumstances
4.	Medical reports and discharge summary issued by the hospital or prescriptions and medical records from the medical practitioner furnishing the name of the insured ,period of treatment and details of treatment rendered i.e. line of treatment and final diagnosis.
5.	Original hospital bills with proper description of services rendered and payment receipts towards expenses incurred
6.	Attending Surgeon's/Medical Practitioner's Prescription advising hospitalization
7.	Name, Address and Phone number of the local medical officer/family physician in India.
8.	Copy of Air tickets and boarding passes for the sector travelled
9.	Copy of passport, visa with entry and exit stamp
10.	And any other document as may be appropriately applicable for the claims preferred under this section of the Policy
11.	Cancelled cheque of the insured / nominee

EMERGENCY MEDICAL EVACUATION	
1.	Medical reports (Presenting complain, Diagnosis, Treatment given, Discharge condition etc.) and transportation details issued by the evacuation agency, prescriptions and medical report by the attending Medical Practitioner furnishing the name of the Insured Person and details of treatment rendered along with the statement confirming the necessity of evacuation;
2.	Documentary proof for all expenses incurred towards the Medical Evacuation.
3.	Claim Form duly filled in and signed
4.	Copy of policy Certificate
5.	Original Air Ticket / Boarding passes or copy of passport with visa entry and exit stamp
6.	Covering letter detailing circumstances
7.	Cancelled cheque of the insured / nominee

REPATRIATION OF MORTAL REMAINS	
1.	Copy of the death certificate, Clearance from the Indian Consulate. (Also providing details of the place, date, time, and the circumstances and cause of death;)
2.	Copy of the postmortem certificate, if conducted;
3.	Documentary proof for expenses incurred towards disposal of the mortal remains including the name of the airlines, burial details, expenses incurred, other incidental cost with bifurcation of expenses.
4.	In case of transportation of the body of the deceased to the Country of Residence or Place of Residence, the receipt for expenses incurred towards preparation and packing of the mortal remains of the deceased and also for the transportation of the mortal remains of the deceased.
5.	Quotation or estimate of repatriation cost
6.	Claim Form dully filled and signed by nominee.
7.	Copy of policy Certificate
8.	Original Air Ticket/Boarding passes or copy of passport with visa entry and exit stamp
9.	Invoices (Itemized) and money receipts in original for the amount claimed.
10.	Copy of Cancelled Passport
11.	Covering letter detailing circumstances

12.	Cancelled cheque of the insured / nominee
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DENTAL Treatment EXPENSES	
1.	Original Claim form duly filled and signed
2.	Dental Records (Presenting complain, diagnosis, treatment given, internal discharge condition etc.)
3.	All the test and X-ray reports
4.	Prescription from the doctor
5.	Copy of policy Certificate
6.	Name, address, contact no, fax no, e-mail id of the Local Medical Officer (LMO)/ Dentist in India Invoices (itemized) and
7.	Money receipts in original for the amount claimed
8.	Copy of Air tickets and Copy of boarding pass and copy of passport with visa entry and immigration stamp
9.	Covering letter detailing circumstances
10.	Cancelled cheque of the insured / nominee

PERSONAL ACCIDENT - ACCIDENTAL DEATH	
1.	Police report in original if the accident shall have taken in the public place or premises
2.	Death Certificate clearly stating the reason of death
3.	Post Mortem Report (In case of death)
4.	Detailed Sequence of events
5.	Medical records giving the details of accident, nature of injury(in case of hospital visit)
6.	Certificate of disability from civil surgeon in India or any other equivalent recognized doctor authorized by state government. Medical report from the attending doctor
7.	Letter from the Airline confirming the same.
8.	Valid ticket or certificate from the Common Carrier establishing the Insured Person's bonafide travel in the affected
9.	Common Carrier at the time of the Accident.
10.	Claim Form duly filled in and signed
11.	Copy of policy Certificate
12.	Depending upon the peculiarity of the case, additional documents/information's will be asked for
13.	Covering letter detailing circumstances
14.	Cancelled cheque of the insured / nominee
Permanent Total Disability (PTD) & Permanent Partial Disability (PPD)	
1.	Police report in original if the accident shall have taken in the public place or premises
2.	Detailed Sequence of events
3.	Medical records giving the details of accident, nature of injury(in case of hospital visit)
4.	Certificate of disability from civil surgeon in India or any other equivalent recognized doctor authorized by state government.
5.	Valid ticket or certificate from the Common Carrier establishing the Insured Person's bonafide travel in the affected Common Carrier at the time of the Accident.
6.	Claim Form duly filled in and signed
7.	Copy of policy Certificate
8.	Depending upon the peculiarity of the case, additional documents/information's will be asked for
9.	Covering letter detailing circumstances
10.	Cancelled cheque of the insured / nominee
TOTAL LOSS OF CHECKED IN BAGGAGE	

1.	Duly filled and completed claim form
2.	Policy Certificate
3.	Air tickets along with boarding passes
4.	Copy of passport with exit and entry stamps
5.	Copy of baggage tag's
6.	Property Irregularity Report issued by the common carrier mentioning the number of baggage's checked-in.
7.	Original Certificate from airline authorities stating that baggage has been lost along with compensation details
8.	Adequate proof of ownership of items contained within checked-in baggage valued in excess of Indian rupee equivalent of US\$100
9.	Covering letter detailing circumstances
10.	Cancelled cheque of the insured / nominee

DELAY OF CHECKED IN BAGGAGE

1.	Duly filled and completed claim form
2.	Policy Copy
3.	Copy of passport, visa with entry and exit stamp
4.	Air tickets and boarding pass
5.	Property Irregularity Report issued by the common carrier.
6.	Certificate from airline authorities clearly stating the date and time of delay and delivery of the baggage.
7.	Original bills towards toiletries, medication and clothing during the delay period
8.	Letter/communication clearly stating the compensation details offered by the Airlines/Third Party
9.	Covering letter detailing circumstances
10.	Cancelled cheque of the insured / nominee

COMPASSIONATE VISIT

1.	Claim Form duly filled in and signed
2.	Copy of policy Certificate
3.	Travel Details: Air Ticket and Boarding passes or copy of passport with visa entry and exit stamp
4.	Medical record of the patient. Discharge Summary, Presenting complain, diagnosis, treatment given, etc.)
5.	Certificate from the Treating Medical Officer mentioning the need for a companion (If no adult member from the family is available)
6.	Money receipts in original for expenses incurred towards air tickets and stay of the insured/Immediate Family Member
8.	Depending upon the peculiarity of the case, additional documents/information's will be asked for
9.	Covering letter detailing circumstances along with Cancelled cheque of the insured / nominee
10.	Any other documents as required while processing the claim

LOSS OF GADGETS

1.	A confirmation in writing from employer that they do not have any insurance policy/maintenance agreement /contract for the loss of the laptops / gadgets; and that employees are personally liable for same.
2.	Covering letter detailing the circumstances of claim and claimed amount.
3.	Duly filled and signed claim form from the insured.
4.	Original policy schedule duly signed by the insured or his representative
5.	Copy of air ticket or E-ticket & Passport Copies, Visa Copies and immigration stamp pages
6.	Original Police Complaint from the place of loss.
7.	Proof of ownership of the lost laptop /gadgets.
8.	Any other documents as required while processing the claim

LOSS OF PASSPORT and Documents/ Loss of Debit/credit/forex card / Loss of International driving License

1.	Duly filled and completed cla
2.	Policy Copy
3.	FIR/Copy of police report mentioning the reason of loss
4.	Bills/receipts of expenses incurred in obtaining a fresh/duplicate passport and other related expenses
5.	Copy of new passport/driving licence and previous passport/ travel documents (if available).

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- | | |
|-----|---|
| 6. | Details providing the proof for loss of debit/credit / forex card letter from bank for card block . |
| 7. | Last transaction details and transaction details prior loss of card , bank statement . |
| 8. | Air Ticket, Boarding passes and copy of passport with visa entry and exit stamp |
| 9. | Covering letter detailing circumstances |
| 10. | Cancelled cheque of the insured / nominee |
| 11. | Any other documents as required while processing the claim |

TRIP CANCELLATION AND /OR INTERRUPTION	
1.	Duly signed claim form
2.	Policy Copy
3.	Proof of death or hospitalization of insured person or of spouse, parents & children.(if applicable)
4.	Medical reports and doctors statement if trip is cancelled or interrupted due to medical reasons. (if applicable)
5.	Termination letter from the company if trip is cancelled due to employments.(if applicable)
6.	Letter from the airlines clearly mentioning the reason of cancellation and interruption of flight(if applicable)
7.	Proof of material loss or damage to the property (eg police report, media coverage) (if applicable)
8.	Copy of complete schedule itinerary for all the sectors
9.	Copy of new itinerary in case trip got reschedule along with boarding passes
10.	Copy of Passport with visa entry and exit stamp
11.	Copies of reimbursement statements issued by an airline carrier, airport facility, car rental agency, travel agent, hotel/ motel or other similar establishment or any other insurance company providing reimbursement to you for the loss
12.	All original bills and receipts for expenses which got forfeited, nonrefundable in nature. All original bills and receipts for additional reasonable and necessary transportation expenses and accommodation charges
13.	due to interruption of schedule flight
14.	Cancelled cheque of the insured / nominee
15.	Any other documents as required while processing the claim

TRIP DELAY	
1.	Policy Copy
2.	Original bills and receipts towards reasonable additional expenses during the delay i.e. meals and lodging Copy of
3.	passport/visa with entry and exit stamp
4.	Letter from the airline clearly stating the period of delay along with compensation offered (if any)
5.	Copy of boarding pass for the schedule trip and actual trip
6.	Dully filled and signed claim form
7.	Covering Letter with sequence of events
8.	Covering letter detailing circumstances
9.	Cancelled cheque of the insured / nominee
10.	Any other documents as required while processing the claim

Travel Inconvenience	
1.	Duly signed claim form
2.	Policy Copy
3.	Proof of death or hospitalization of insured person or of spouse, parents & children.(if applicable)
4.	Medical reports and doctors statement if trip is cancelled or interrupted due to medical reasons. (if applicable)
5.	Termination letter from the company if trip is cancelled due to employments.(if applicable)
6.	Letter from the airlines clearly mentioning the reason of cancellation and interruption of flight(if applicable)
7.	Proof of material loss or damage to the property (eg police report, media coverage) (if applicable)
8.	Copy of complete schedule itinerary for all the sectors
9.	Copy of new itinerary in case trip got reschedule along with boarding passes
10.	Copy of Passport with visa entry and exit stamp
11.	Copies of reimbursement statements issued by an airline carrier, airport facility, car rental agency, travel agent, hotel/ motel
12.	or other similar establishment or any other insurance company providing reimbursement to you for the loss
13.	All original bills and receipts for expenses which got forfeited, nonrefundable in nature.
14.	All original bills and receipts for additional reasonable and necessary transportation expenses and accommodation charges

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	due to interruption of schedule flight
15	Cancelled cheque of the insured / nominee
16	Any other documents as required while processing the claim

PERSONAL LIABILITY	
1.	Claim Form duly filled in and signed
2.	Copy of policy Certificate
3.	Original Air Ticket/Boarding passes or copy of passport with visa entry and exit stamp
4.	FIR/Police Report
5.	Sequence of the events leading to Personal Liability
6.	Witness Statement
7.	Copy of policy report(in case of legal case)
8.	Copy of the court award- Notice from the Third party claiming the amount
9.	Depending upon the peculiarity of the case, additional documents/information's will be asked for
10.	Covering letter detailing circumstances
11.	Cancelled cheque of the insured / nominee
12.	Any other documents as required while processing the claim

Personal Accident	
Accidental Death-Common Carrier	
Permanent Total Disability-Common Carrier	
Permanent Partial Disability -Common Carrier	
1.	Duly filled and signed claim form.
2.	Policy Copy
3.	Discharge summary.
4.	Death certificate mentioning the cause of death(in case of death)
5.	Original treating doctor certificate describing disablement
6.	Disability Certificate issued by Civil Surgeon or equivalent as authorized by State Government, medical reports, case histories, investigation reports, treatment papers as applicable.
7.	Original photograph of the injured reflecting the disablement.
8.	Leave certificate from the employer.
9.	Copy of air ticket and boarding pass.
10.	Copy of cancelled passport(in case of death) Copy of all the documents proving transport of the insured in the carrier (in case of common carrier accident)
11.	Covering letter detailing circumstances
12.	Cancelled cheque of the insured / nominee
13.	Any other documents as required while processing the claim

HIJACK DISTRESS ALLOWANCE	
1.	Policy Copy.
2.	Dully filled and signed claim form and police report confirming the incident. It should contain the passport number of the insured and period of hijacking
3.	Letter from the airline clearly stating period of hijack and media
4.	Coverage details.(e.g photograph, videos, newspaper cutting
5.	Copy of passport/visa with entry and exit stamp
6.	Copy of the air ticket and boarding pass
7.	Covering letter detailing circumstances
8.	Cancelled cheque of the insured / nominee
9.	Any other documents as required while processing the claim

MUGGING BENEFIT	
1.	Duly filled and signed claim form
2.	A police report confirming the incident
3.	Medical reports from the hospital clearly mentioning the treatment details along with date and time of admission and
4.	Hospital Bill
5.	Copy of passport with Visa entry and immigration stamp
6.	Covering letter detailing circumstances
7.	Cancelled cheque of the insured / nominee
8.	Any other documents as required while processing the claim

FINANCIAL EMERGENCY ASSISTANCE	
1.	Claim Form duly filled in and signed
2.	Copy of policy Certificate
3.	Travel Details: Original Air Ticket/Boarding passes or copy of passport with visa entry and exit stamp
4.	FIR/Police report lodged at the place of loss within 24 hours.
5.	Details of items robbed -Details of funds (Cash, credit/debit cards, travelers cheque available) available with you
6.	Sequence of events
7.	Please confirm if you are staying alone or with any friends, family, relatives.
8.	Copy of foreign exchange slip for the lost cash
9.	Details of travel history for past 5 years
10.	Details of travel insurance taken in past 3 years prior to this policy
11.	Depending upon the peculiarity of the case, additional documents/information's will be asked for
12.	Covering letter detailing circumstances
13.	Cancelled cheque of the insured / nominee

BAIL BOND	
1.	Claim Form duly filled in and signed
2.	Copy of policy Certificate
3.	Original Air Ticket/Boarding passes or copy of passport with visa entry and exit stamp
4.	A written confirmation from the appropriate authority/court, mentioning the offence committed and if it is bail able or not.
5.	Sequence of events
6.	Money receipt in original from the appropriate authority/court for the amount paid towards the bail
7.	Covering letter detailing circumstances
8.	Cancelled cheque of the insured / nominee
9.	Any other documents as required while processing the claim

Political Risk and Catastrophe Evacuation	
1.	Official Declaration by embassy of the Country of Residence of the Insured/Notification from Government.
2.	Original Invoice and payment proof of expenses of Hotel Accommodation during the period Insured is unable to return to the Country of Residence/City of Residence.
3.	Original ticket(s) used for the travel back to the Country of Residence/City of Residence.
4.	Copies of reimbursement statements (refund details) issued by an airline carrier, airport facility, hotel/ motel or other similar establishment or any other insurance company providing reimbursement to you for the loss
5.	Claim Form duly filled in and signed
6.	Copy of policy Certificate
7.	Covering letter detailing circumstances
8.	Cancelled cheque of the insured / nominee
9.	Any other documents as required while processing the claim

Policy Wordings: Travel Assure - Group Overseas Travel Insurance

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Sponsor Protection	
	In relation to the Sponsor
1.	Medical reports specifying the details of the Accident and the nature of Injury.
2.	Death Certificate.
3.	Postmortem certificate.
4.	Police report.
	In relation to Unpaid Fees
	Demand letter from Educational Institute
1.	Copy of the original fee schedule
2.	Certificate from Educational Institute establishing the continuity of studies
3.	Claim Form duly filled in and signed
4.	Copy of policy Certificate
5.	Covering letter detailing circumstances
6.	Cancelled cheque of the insured / nominee .
7.	Any other documents as required while processing the claim

Study Interruption	
.	In relation to Death of the Immediate Family Member
1.	Medical reports giving the details of the Accident and nature of injury
2.	Death Certificate
3.	Postmortem certificate.
4.	Police report.
5.	Proof of relationship.
6.	Claim Form duly filled in and signed
7.	Copy of policy Certificate
8.	Covering letter detailing circumstances
9.	Cancelled cheque of the insured / nominee .
10.	Any other documents as required while processing the claim
	In relation to Hospitalization of Insured Person
1.	Original pathological or diagnostic reports, discharge summary, indoor case papers and prescriptions issued by the treating Medical Practitioner or Hospital.
	Original bills and receipts for
2.	Charges paid towards Hospital accommodation, nursing facilities and other medical services rendered
3.	Fees paid to the Medical Practitioner and for special nursing charges.
4.	Charges incurred towards any and all test and/or examinations rendered in connection with the treatment.
5.	Charges incurred towards medicines or drugs purchased from a registered pharmacy other than the Hospital duly supporter by the prescriptions of the Medical Practitioner attending to the Insured Person.
6.	Any other documents as required while processing the claim
	In relation to Fees
1.	Demand letter from Educational Institute raising such demand
2.	Copy of the original fee schedule

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3.	Certificate from Educational Institute establishing the discontinuity of studies and re-admission to the same semester under the same course
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Automatic Extensions	
1.	Original pathological or diagnostic reports, discharge summary, indoor case papers and prescriptions issued by the treating Medical Practitioner or Hospital
2.	Original bills and receipts for:
3.	Charges paid towards Hospital accommodation, nursing facilities and other medical services rendered.
4.	Fees paid to the Medical Practitioner and for special nursing charges
5.	Charges incurred towards any and all test and/or examinations rendered in connection with the treatment.
6.	Charges incurred towards medicines or drugs purchased from a registered pharmacy other than the Hospital duly supported by the prescriptions of the Medical Practitioner attending to the Insured Person.

University insolvency	
1.	A declaration from the insured that he/she strictly complied with the rules laid down by the university
2.	Copy of the complaint lodged by the insured on the university
3.	Statement of the claim for the expenses incurred
4.	Original receipt for payment of charges to the other common carrier and/or other accommodation provider
5.	Valid VISA having the same university name <ul style="list-style-type: none"> • Claim Form duly filled in and signed • Copy of policy Certificate • Covering letter detailing circumstances • Cancelled cheque of the insured / nominee .
6.	Any other documents as required while processing the claim <ul style="list-style-type: none"> •

Home Country Cover	
	<ul style="list-style-type: none"> • Section: Emergency Medical Expenses: Limited to Hospitalizations arising due to Medical Emergency. • Section: Personal Accident <ul style="list-style-type: none"> • ○ Accidental Death • ○ Permanent Total Disability (PTD) • ○ Permanent Partial Disability (PPD): • ○ Sponsor Protection <p>Kindly refer document check list mention in respective benefits above.</p>

Daily Allowance because of hospitalization

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1.	Claim form duly filled and signed along with attending Medical Practitioner statement
2.	Policy Copy
3.	Copy of passport, visa with entry and exit stamp
4.	Kindly provide discharge summary , bill/invoices
5.	Cancelled cheque of the insured

University Excess Medical Cover Coverage	
1.	Claim form duly filled and signed along with attending Medical Practitioner statement
2.	Policy Copy of both Insurance (Indian & Foreign)
3.	
4.	Medical reports and discharge summary issued by the hospital or prescriptions and medical records from the medical practitioner furnishing the name of the insured ,period of treatment and details of treatment rendered i.e. line of treatment and final diagnosis.
5.	Hospital bills with proper description of services rendered and payment receipts towards expenses incurred Original payment receipt establishing amount settled by insured .
6.	Copy of passport, visa with entry and exit stamp
7.	Cancelled cheque of the insured
8.	Any other documents as required while processing the claim

Missed Connection	
1.	Claim Form – completed and signed by the Insured.
2.	
3.	Copy of complete schedule itinerary for all the sectors.
4.	
5.	Copy of Passport with visa entry and exit stamp.
6.	Copies of reimbursement statements issued by an airline carrier, airport facility, car rental agency, travel agent, hotel/ motel or other similar establishment or any other insurance company providing reimbursement to you for the loss.
7.	All original bills and receipts for expenses which got forfeited, non-refundable in nature.
8.	All original bills and receipts for additional reasonable and necessary transportation expenses and accommodation charges due to interruption of schedule flight
9.	Depending upon the peculiarity of the case, additional documents/information will be asked for.

Missed or Delay Event	
1.	Claim Form – completed and signed by the Insured.
2.	Copy of policy Certificate,
3.	Copy of passport, visa with entry and exit stamp,
4.	Copies of boarding passes and travel ticket
5.	Original letter from the concern authority mentioning the amount paid to them or contracted to be paid due to the booking, also confirming the cancellation and refund details if any.
6.	Original Air ticket/itinerary, where you were originally supposed to travel medical record (If the cancellation was due to any medical reason)
7.	
8.	Money receipt in advance for the amount paid or contracted to be paid due to the booking.
9.	Depending upon the peculiarity of the case, additional documents/information will be asked for.
Home Fire Insurance-Contents	
1.	Claim Form duly filled in and signed
2.	Copy of policy Certificate.
3.	Original Air Ticket/Boarding passes or copy of passport with visa entry and exit stamp.
4.	Fire Department report/Police report.
5.	Original receipts for all items claimed. If not available, provide description of items and the date, place and price of purchase.
6.	Panchnama.
7.	Newspaper cutting /Media report - Depending upon the peculiarity of the case, additional documents/information will be asked for.
8.	Any other documents as required while processing the claim
Home Burglary Insurance – Contents (in INR)	
1.	Claim Form duly filled in and signed
2.	Copy of policy Certificate.
3.	Copy of first information report/police report.
4.	Copy of final investigator report/non detectable certificate issued by the police authorities/magisterial order.
5.	Original Air Ticket/Boarding passes or copy of passport with visa entry and exit stamp
6.	Original receipts for all items claimed. If not available, provide description of items and the date, place and price of purchase.
7.	Panchnama
8.	Depending upon the peculiarity of the case, additional documents/information will be asked for.
Loss of Deposit or cancellation - Hotel and Common Carrier	
1.	Claim Form – completed and signed by the Insured.
2.	Copy of policy Certificate
3.	Copy of passport, visa with entry and exit stamp.
4.	Copies of boarding pass, ticket, baggage tags.
5.	Original letter from the concern authority mentioning the amount paid to them or contracted to be paid due to the booking. Also confirming the cancellation and refund details If any
6.	Original Air ticket/itinerary, where you were originally supposed to travel
7.	Medical record (If the cancellation was due to any medical reason)
8.	Money receipt in advance for the amount paid or contracted to be paid due to the booking.
9.	Depending upon the peculiarity of the case, additional documents/information's will be asked for

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Overbooked -Common Carrier	
1.	Claim Form – completed and signed by the Insured.
2.	Copy of policy Certificate
3.	Copy of passport, visa with entry and exit stamp.
4.	Copies of boarding pass, ticket, baggage tags.
5.	Original letter from the concerned Airline confirming the overbooked flight & when the next alternative transportation is available with refund or compensation amount if any.
6.	Money receipt in original for the expenses made towards reasonable additional cost incurred for staying in a similar hotel or purchasing a new ticket.
7.	Original Air ticket /itinerary, where you were originally supposed to travel.
8.	Depending upon the peculiarity of the case, additional documents/information's will be asked for
Legal Expenses	
1.	Claim Form duly filled in and signed
2.	Copy of policy Certificate
3.	Original Air Ticket/Boarding passes or copy of passport with visa entry and exit stamp
4.	Medical report from the attending doctor abroad.
5.	Death Certificate (For Death Case)
6.	Post Mortem Report (For Death Case)
7.	Copy of FIR / Police Report
8.	Sequence of events
9.	Certificate of disability from civil surgeon in India or any other equivalent recognized doctor authorized by state government.
10.	Original invoices and receipts of legal Expenses
11.	Depending upon the peculiarity of the case, additional documents/information's will be asked for

Pet Care (IN INR)	
1.	Claim Form
2.	Copy of policy Certificate
3.	Travel Details: Original Air Ticket/Boarding passes or copy of passport with visa entry and exit stamp
4.	Medical Record
5.	Prescription from the Veterinary Doctor
6.	Invoices (itemized) and Money receipts in original for the amount claimed
7.	A confirmation letter from the person, who was taking care of your pet during your trip abroad
8.	Depending upon the peculiarity of the case, additional documents/information's will be asked for

Emergency Accommodation	
1.	Claim Form duly filled in and signed
2.	Copy of policy Certificate
3.	Travel Details: Original Air Ticket/Boarding passes or copy of passport with visa entry and exit stamp
4.	Letter in original mentioning the reason with refund details (If any) from the hotel or concern authority where you were originally supposed to stay but could not stay due to fire, flood, earthquake, storm, hurricane, explosion, outbreak of major infectious diseases
5.	Booking confirmation
6.	Money receipt in original for the expenses made towards the extra cost of travel and accommodation
7.	Depending upon the peculiarity of the case, additional documents/information's will be asked for

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Alternate Employee Expenses / Substitute employee	
1.	Dully filled and Signed claim form.
2.	Copy of policy Certificate
3.	Medical records.
4.	Medical certificate from the attending physician establishing illness/accident
5.	Original air ticket and boarding pass of the substitute employee.
6.	Copy of passport with visa entry and exit stamp
7.	Proof towards obtaining a new ticket for alternate employee.

Travel Loan Secure (IN INR)	
1.	Claim Form duly filled in and signed
2.	Copy of policy Certificate
3.	Copy of Passport with visa entry and exit stamp.
4.	Discharge summary.
5.	Death certificate mentioning the cause of death (in case of death)
6.	Original treating doctor certificate describing disablement Disability Certificate issued by Civil Surgeon or equivalent as authorized by State Government, medical reports, case histories, investigation reports, treatment papers as applicable.
8.	Original photograph of the injured reflecting the disablement.
9.	Loan statement details from the bank with EMI paid statement.
10.	Copy of cancel cheque in name of insured or nominee as the case may be.

Child Escort	
1.	Claim Form duly filled in and signed.
2.	Copy of policy Certificate.
3.	Discharge summary.
4.	Death certificate mentioning the cause of death (In case of Death) of insured person or parents.
5.	Travel Details: Original Air Ticket/Boarding passes.
6.	Copy of new itinerary along with original bills and receipts along with boarding passes.
7.	Copy of Passport with visa entry and exit stamp.
8.	Copies of reimbursement statements issued by an airline carrier, airport facility company providing reimbursement to you for the loss or cancellation of ticket.
10.	Copy of cancel cheque in name of insured or nominee.

Overseas Travel Service Supplier Insolvency	
1.	Claim Form – completed and signed by the Insured.
2.	Copy of policy Certificate.
3.	Copy of passport, visa with entry and exit stamp.
4.	Copies of boarding pass, travel ticket, baggage tags. Original letter from the concern authority mentioning the amount paid to them or contracted to be paid due to the booking. Also confirming the cancellation and refund details If any.
5.	Original Air ticket/itinerary, where you were originally supposed to travel.
7.	Money receipt in advance for the amount paid or contracted to be paid due to the booking.
8.	Copy of cancel cheque in name of insured.
9.	Depending upon the peculiarity of the case, additional documents/information will be asked for.

Policy Wordings: Travel Assure - Group Overseas Travel Insurance

UIN of Product: ICITGOP22203V022122

 Registered and corporate office address: ICICI Lombard General Insurance Company Ltd., ICICI Lombard House,
 414, Veer Savarkar Marg, Prabhadevi, Mumbai – 400025, IRDAI Registration No: 115, CIN: L67200MH2000PLC129408, Toll free no: 1800 2666,
 Website: www.icicilombard.com, Email: customersupport@icicilombard.com

Cruise cover	
1.	Claim Form – completed and signed by the Insured.
2.	Copy of policy Certificate
3.	Copy of complete schedule itinerary for all the sectors.
4.	Copy of new itinerary in case trip got rescheduled along with boarding passes.
5.	Copy of Passport with visa entry and exit stamp.
6.	Copies of reimbursement statements issued by common carrier or other similar establishment or any other insurance company providing reimbursement to you for the loss.
7.	All original bills and receipts for expenses which got forfeited, non-refundable in nature.
8.	All original bills and receipts for additional reasonable and necessary transport on expenses and Accommodation charges due to interruption
9.	Medical reports and doctors statement if trip interrupted due to medical reasons. (If applicable) .
10.	Copy of cancel cheque in name of insured
11.	Depending upon the peculiarity of the case, additional documents/information may be asked.

Car rental excess insurance	
1.	Claim Form – completed and signed by the Insured.
2.	Copy of policy Certificate
3.	Copy of Passport with visa entry and exit stamp
4.	Copies of reimbursement statements issued by an car rental agency, or other similar establishment or any other insurance company providing reimbursement to you for the loss.
5.	All documents in original supporting to establish loss with bills and receipts.
6.	FIR copy in case of theft/damage to rental car.
7.	Copy of cancel cheque in name of insured
8.	Depending upon the peculiarity of the case, additional documents/information will be asked for.

Golf Equipment Cover	
1.	Claim Form – completed and signed by the Insured.
2.	Copy of policy Certificate
3.	Copy of Passport with visa entry and exit stamp.
4.	All documents in original supporting to establish loss with bills and receipts.
5.	FIR copy of loss due to theft.
6.	Copy of cancel cheque in name of insured
7.	Depending upon the peculiarity of the case, additional documents/information may be asked.

Bounced Hotel booking

1.	Claim Form – completed and signed by the Insured.
2.	Copy of policy Certificate
3.	Copy of Passport with visa entry and exit stamp.
4.	All documents in original supporting to establish loss with bills and receipts.
5.	Original letter from the concern authority mentioning the amount paid to them or contracted to be paid due to the booking also confirming the cancellation and refund details, if any.
6.	Money receipt in advance for the amount paid or contracted to be paid due to the booking.
7.	Copy of cancel cheque in name of insured
8.	Depending upon the peculiarity of the case, additional documents/information may be asked.

Visa Refusal	
1.	Claim Form – completed and signed by the Insured.
2.	Copy of policy Certificate
3.	Copy of Passport with visa entry and exit stamp.
4.	All documents in original supporting to establish loss with bills and receipts.
5.	Letter / supporting document from embassy mentioning reason for the rejection/ refusal of Visa.
6.	Copy of cancel cheque in name of insured
7.	Depending upon the peculiarity of the case, additional documents/information may be asked.

Flight Delay(Airlines)	
1.	Claim Form – completed and signed by the Insured.
2.	Copy of policy Certificate
3.	Original bills and receipts towards reasonable additional expenses during the delay i.e. meals and lodging.
4.	Copy of passport/visa with entry and exit stamp.
5.	Letter from the airline clearly stating the period of delay and reason for such delay.
6.	Copy of boarding pass for the schedule trip and actual trip.
7.	Covering Letter with sequence of events.
8.	Copy of cancel cheque in name of insured.
9.	Depending upon the peculiarity of the case, additional documents/information may be asked.