

Proposal Form
(Please fill the form in BLOCK letters)

Producer Name : _____

Producer Code : _____

Step 1A : PERSONAL DETAILS (Details of PROPOSED INSURED)

First Name

Middle Name

Surname

Address

City : State : Pin :

Father's/Husband's Name

Tel (O) Tel (R) Mobile

E-mail

Correspondence Address Residential Business

Gender M F Date Of Birth Marital Status Married Single

Nominee Name* Relationship:

STEP 1B : PERSONAL DETAILS of APPLICANT/s, other than PROPOSED INSURED

Yes! I would like to cover the following members of my family.

FAMILY

	Name	Date of Birth	Nominee Name*	Relationship
Spouse				
First Child				
Second Child				
Father				
Mother				

**Incase the nominee is a minor please provide the name of guardian too.*

STEP 2 : BENEFIT PLAN/PREMIUM SCHEDULE

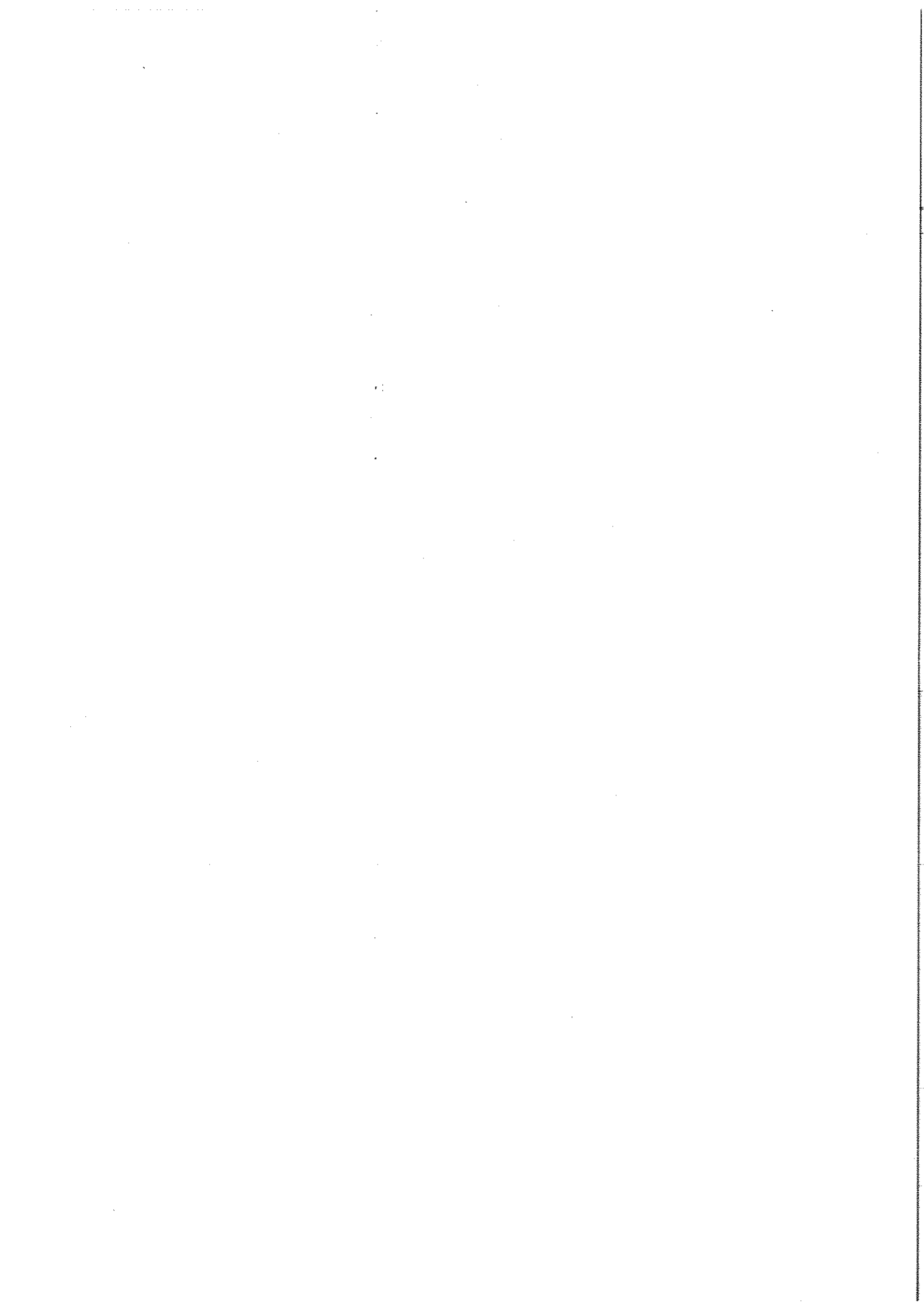
PREMIUM (Including Service Tax) Core Benefits

	Option 1	Option 2	Option 3	Option 4
Self only	1,579 <input type="checkbox"/>	2,346 <input type="checkbox"/>	4,517 <input type="checkbox"/>	5,921 <input type="checkbox"/>
Self + Spouse	2,842 <input type="checkbox"/>	4,223 <input type="checkbox"/>	8,131 <input type="checkbox"/>	10,659 <input type="checkbox"/>
Self + Spouse + Children (2)*	4,168 <input type="checkbox"/>	6,193 <input type="checkbox"/>	11,926 <input type="checkbox"/>	15,634 <input type="checkbox"/>
Self + Spouse + Children (2)* + Parents	5,350 <input type="checkbox"/>	7,947 <input type="checkbox"/>	15,304 <input type="checkbox"/>	20,062 <input type="checkbox"/>
Self + Parents	4,273 <input type="checkbox"/>	6,348 <input type="checkbox"/>	12,223 <input type="checkbox"/>	16,024 <input type="checkbox"/>

RIDERS

	Option 1	Option 2	Option 3	Option 4
Self only	630 <input type="checkbox"/>	968 <input type="checkbox"/>	1,469 <input type="checkbox"/>	2,096 <input type="checkbox"/>
Self + Spouse	1,134 <input type="checkbox"/>	1,743 <input type="checkbox"/>	2,644 <input type="checkbox"/>	3,773 <input type="checkbox"/>
Total Amount				

**For children - 6 Months to 18 years (23 years if attending as a full time student of a recognised institute of higher learning)*



STEP 3 : PAYMENT DETAILS

Premium Amount Rs. (in words)

Cheque No. Bank Name Date

Branch Payable /In favour of "Tata AIG General Insurance Company Limited."

OR

*Credit Card Number Expiry Date

Signature of Credit Card Holder/Account Holder

Bank Name

*For credit card payment:

- 1. Only Visa/Master card accepted.
- 2. Photo copy of the credit card has to be attached along with the application form.
- 3. The signature of the credit card should match the signature on the application form.

(As it appears in bank records)

STEP 4 : HEALTH DECLARATION

"This Policy does not cover pre-existing medical conditions that are declared or undeclared. In the event of a claim, in order to determine eligibility for benefit payments under the Policy, I/We authorize any hospital, medical care institution, physician, medical professional, pharmacy or insurers to furnish to TATA AIG General Insurance Company Ltd. or its representatives any and all medical information or records with respect to any injury suffered by the person whose death, injury or loss is the basis of a claim against the Policy.

I/We understand that this authorization is valid during the pendency of the claim until all issues with regard thereto have been definitively resolved, either extrajudicially or judicially.

I/We have read the Policy Prospectus and am/are willing to accept the insurance coverage, subject to all the terms, conditions and expectations described in that Policy Prospectus.

I/We hereby declare and warrant that all of the statements in this and in the preceding paragraphs are true and complete. If it is found that the answers or particulars stated in this Proposal Form and Medical Declaration are incorrect or untrue in any respect, I/we hereby acknowledge that the insurance company shall incur no liability for any insurance coverage.

I/We have understood the terms and conditions of this insurance and agree that the insurance would be effective only on acceptance of this application by the Company and the payment of premium by me/us in advance.

This Policy is valid subject to the realization of the amount of premium by the Company. In the event of non-realisation of the Cheque or non-receipt of the amount of premium by the Company where payment has been made by way of credit card for any reason whatsoever, the Policy shall be deemed cancelled 'ab-initio' and the Company shall not be responsible for any liabilities of whatsoever nature."

Signature of the Insured Person : _____

Date :

Producer Name :

Producer Code : _____

Signature of Producer : _____

Date :

INSURANCE ACT 1938 Section 41 Prohibition of Rebates : No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectus or tables of the Insurer. ANY PERSON MAKING DEFAULT IN COMPLYING WITH THE PROVISIONS OF THIS SECTION SHALL BE PUNISHED WITH A FINE WHICH MAY EXTEND TO FIVE HUNDRED RUPEES.

Tata AIG General Insurance Company Ltd.

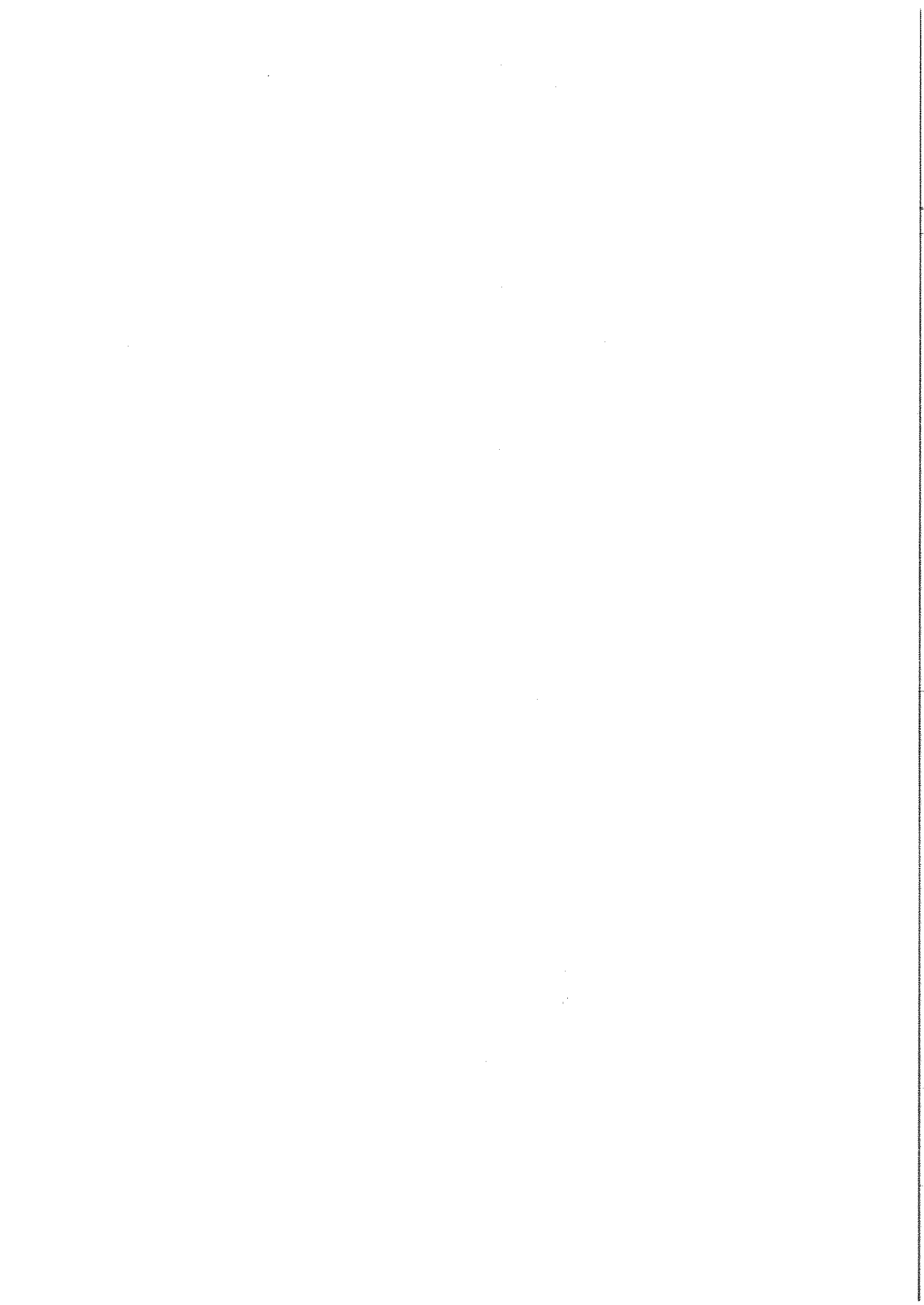
Regd. Office : Peninsula Corporate Park, Nicholas Piramal Tower, 9th floor, Ganpatrao Kadam Marg, Lower Parel, Mumbai - 400 013

For more information, call Tata AIG Toll-free 24-hour Helpline at 1-800-119966. Visit us at: www.tata-aig.com

Or contact us at the following nos. : Mumbai : 022-66939500/Bangalore : 080-66500001/Pune : 020-66014156/Delhi : 011-66603500

Hyderabad : 040-66629882/Ahmedabad : 079-66610201/Chennai : 044-66841050

Insurance is the subject matter of solicitation



8. "Rule of Nines" A system used by doctors for assessing the percentage of the body surface affected by burns. In this system, the head and each arm cover 9% of the body; the front of the body and the back of the body and each leg covers 18% of the body. The groin covers the remaining 1%.
9. Second degree burns Burns which penetrate beyond the epidermis, causing formation of blisters.
10. Third degree burns These destroy the full skin thickness.

Hazard H-1
24-HOUR PROTECTION
 (Business and Pleasure)

DESCRIPTION OF HAZARDS

Such insurance as is afforded to an Insured Person to which this Hazard H-1 applies, shall apply to Injury sustained by such person anywhere in the world 24 Hours a Day, 7 Days a week.

Such insurance includes such Injury sustained while the Insured Person is riding as a passenger (but not as a pilot, operator or member of the crew) in or on, boarding or alighting from any civilian aircraft having a current and valid Airworthiness Certificate, and piloted by a person who then holds a valid and current certificate of competency of a rating authorizing him to pilot such aircraft. This Hazard H-1 shall not apply while such Insured Person is riding in any civilian aircraft other than as expressly described herein, unless previously consented to in writing by Us.



POLICY WORDINGS

INJURY GUARD

TATA AIG General Insurance Company Limited (We, Our or Us) will provide the insurance described in this Policy and any endorsements thereto for the Insured Period as defined in this Policy, to the Insured Persons detailed in the Policy Schedule and in reliance upon the statements contained in the Proposal and Declaration Form filled and signed by the Policyholder, which shall be the basis of this Policy and are deemed to be incorporated herein in return for the payment of the required premium when due and compliance with all applicable provisions of this Policy. The insurance provided under this Policy is only with respect to such and so many of the benefits as are indicated by a specific amount set opposite in the Policy Schedule.

This Policy will only be valid and in force if the Policy Schedule is signed by a person We have authorized.

Atri Chakraborty
 Authorized Signatory

 AUTHORISED SIGNATORY

 Date

TATA AIG GENERAL INSURANCE COMPANY LIMITED

Regd. Office : Peninsula Corporate Park, Nicholas Piramal Tower, 9th floor,
 Ganpatrao Kadam Marg, Lower Parel, Mumbai - 400 013.

For more information, call
 Tata AIG Toll-free 24-hour Helpline at 1-800-119966. Visit us at www.tata.aig.com

Part I: GENERAL DEFINITIONS

We use certain words in this Policy and Policy Schedule, which have a specific meaning and are shown under the heading of General Definitions in the Policy. They have this meaning wherever they appear in the Policy or Policy Schedule. Where the context so permits, references to the singular shall also include references to the plural and references to the male gender shall also include references to the female gender, and vice-versa in both cases.

Accident - means a sudden, unforeseen, uncontrollable and unexpected physical event to the Insured Person caused by external, violent and visible means occurring under the circumstances described in a Hazards H-1 applicable to that person.

Acquired Immune Deficiency Syndrome - means the meanings assigned to it by the World Health Organization. Acquired Immune Deficiency Syndrome shall include HIV (Human Immune-deficiency Virus), encephalopathy (dementia), HIV Wasting Syndrome, and ARC (AIDS Related Condition).

Age - means the Age of the Insured Person on his / her most recent birthday as per the English calendar, regardless of the actual time of birth.

Certificate of Insurance - means the document issued by Us detailing the effective date, installment date, Insured Person(s), benefits, sums insured, Deductible, Franchise, premium and more generally all special condition(s) and or endorsement(s).

Common Carrier - means any civilian land or water conveyance or Scheduled Airline in each case operated under a valid license for the transportation of passengers for hire.

Day - means a period of 24 consecutive hours.

Daily Benefit - means the amount payable for each Day spent in the Hospital

Disease - means an illness or affliction of the body having a defined and recognized pattern of symptom(s) which causes more than temporary indisposition and which illness or affliction first manifested itself and was contracted under the circumstances described in Hazards H-1.

Deductible - means the amount of expenses or the number of Days to be paid or supported by the Insured Person before the Policy benefits become payable.

Eligible Children - means dependent children including adopted and step children of the Insured Person between Ages six (6) months and eighteen (18) years (twenty three (23) years if attending as a full time student in an accredited Institution of Higher Learning) who are unmarried, who permanently reside with the Insured Person, and receive the majority of maintenance and support from the Insured Person

Hospital - means a medically recognized establishment which is a Hospital and:

- (a) that holds a valid license (if required by law) to practise medicine, and
- (b) the primary function of which is to provide for the care and treatment of sick or injured persons, and that has a staff of one or more Physicians actually available on the premises at all times, and
- (d) that provides a 24-hour nursing service and has at least one qualified and registered professional nurse present and on duty at all times, and
- (e) that has organised diagnostic and surgical facilities, either on its own premises or in facilities available to the Hospital on a pre-arranged basis, and
- (f) is not, except incidentally to its primary function, a clinic, nursing home, rest home, or convalescent home for the aged, or any similar institution.

Injury - means bodily Injury caused solely, independently and directly by Accident (as defined in the Policy) and occurring under the circumstances described in Hazards H-1.

Inpatient - means a person: (a) who is confined in a Hospital as a registered bed patient; and (b) for whom at least one Day's room and board is charged by the Hospital.

Insured Period(s) - means with respect to the Policy, the period commencing with the Effective Date of the Policy and terminating with the Expiration Date of the Policy as stated in the Policy Schedule and any subsequent period for which the Policy may be renewed.

Accident causing the Injury for which benefits are claimed under this coverage, but not including, overtime, bonuses, tips, commissions, and special compensation.

Elimination Period - means the number of consecutive days of Temporary Total Disability that must elapse before weekly benefit amounts become payable. The Elimination Period is shown in the Policy Schedule. Weekly benefit amounts are not payable, nor do they accrue, during the Elimination Period.

Temporary Total Disability - means disability which wholly and continuously prevents such Insured Person from performing each and every duty pertaining to his occupation.

Coverage C-6

Section: IN HOSPITAL INDEMNITY ACCIDENT ONLY

We will pay a Daily Benefit for each Day You are an Inpatient in a Hospital due to Injury subject to any applicable Deductible or Franchise shown in the Policy Schedule, that occurs anywhere in the world and commences during the circumstances described in Hazard H-1 and while this Policy is in effect. The Period of Confinement must be Medically Necessary and recommended by a Physician. The total benefits provided for any One Period of Confinement are subject to the In Hospital maximum shown in the Policy Schedule.

Definitions:

Daily Benefit - means the amount payable for each Day spent in the Hospital.

One Period of Confinement means a Hospital confinement due to the same Injury unless separated by at least 90 days.

Period of Confinement - means a period of consecutive Days of confinement as an Inpatient caused by an Accident, or Injury. However, successive confinements as an Inpatient caused by or attributable to the same Accident, or Injury are considered to be part of the same Period of Confinement, unless the discharge date for the prior confinement is separated from the admission date for the next confinement by at least the number of days shown in the Policy Schedule.

Only one Daily Benefit is provided for any one Day of confinement, regardless of the number of covered Accidents, or Injuries for which the confinement is required.

Exclusions:

In addition to the General Exclusions listed in this Policy this coverage section shall not cover:

1. hospitalization due to any Disease or Sickness; or 1. pregnancy and resulting childbirth, miscarriage or Disease of the female organs of reproduction; or
2. routine physical exams; or
3. elective, cosmetic or plastic surgery, except as a result of an Injury caused by a covered Accident while our policy is in force; or
4. any mental, nervous or emotional disorders or rest cures.

If, as a result of a Bodily Injury or Insured Injury as defined in the Policy, the Insured Person shall be necessarily confined, commencing while this Policy is in effect, within a Hospital as a resident patient under the professional care of a currently registered Physician or Surgeon but not for the purpose of a convalescent rest, the Company will pay the Daily Hospital Income stated in the Benefits Schedule with respect to such Insured Person for each day that the Insured Person shall be so confined up to 365 days per Injury.

Glossary

- | | |
|---------------------------|--|
| 1. "Coccyx" | Four fused vertebrae at the bottom of the spine. |
| 2. "Colles' fracture" | A break in the radius (one of the lower arm bones, just above the wrist) |
| 3. "Complete fracture" | A fracture where the bone is broken completely across. |
| 4. "Compound fracture" | A fracture where the bone breaks the skin. |
| 5. "Compression fracture" | Crushing on the vertebrae. |
| 6. "Multiple fracture" | More than one fracture in the same bone. |
| 7. "Reduction" | The correction of a dislocation. |

SECTION IV: COVERAGE

Coverage C-4

Section: HOME ALTERATION AND VEHICLE MODIFICATION BENEFIT

If an Insured Person:

1. suffers one of the following Injuries listed under the Accidental Dismemberment and Paralysis Coverage Section of the Policy for which Loss of Both Feet, Quadriplegia, Hemiplegia or Paraplegia under the circumstances described in a Hazard is payable while this Policy is in effect; and
2. did not, prior to the date of the Accident causing such loss(es), require the use of a wheelchair to be ambulatory; and
3. as a direct result of such loss(es) is now required to use a wheelchair to be ambulatory; the Company will pay Covered Home Alteration and Vehicle Modification Expenses that are incurred within one year after the date of the Accident causing such loss(es), up to the maximum amount stated in the Policy Schedule for all such losses caused by the same Accident.

Definition:

Covered Home Alteration and Vehicle Modification Expenses - means one-time expenses that:

1. are charged for:
 - (a) alterations to the Insured Person's residence that are necessary to make the residence accessible and habitable for a wheelchair-confined person; or
 - (b) modifications to one motor vehicle owned or leased by the Insured Person or modifications to a motor vehicle newly purchased for the Insured Person that are necessary to make the vehicle accessible to and/or drivable by the Insured Person; and
2. do not include charges that would not have been made if no insurance existed; and
3. do not exceed the usual level of charges for similar alterations and modifications in the locality where the expense is incurred;

but only if the alterations to the Insured Person's residence and the modifications to his or her motor vehicle are:

1. made on behalf of the Insured Person;
2. recognized by a nationally-recognized organization providing support and assistance to wheelchair users;
3. carried out by individuals experienced in such alterations and modifications; and
4. in compliance with any applicable laws or requirements for approval by the appropriate government authorities.

Exclusion:

In addition to the General Exclusions listed in this Policy, this coverage shall not cover any expense for or resulting from any condition for which the Insured Person is entitled to benefits under any Worker's Compensation Act or similar law.

Coverage C-5

Section: TEMPORARY TOTAL DISABILITY

We shall pay a weekly benefit amount during a period of continuous Temporary Total Disability of an Insured Person resulting from Injury under the circumstances described in a Hazard after completion of the Elimination Period shown in the Policy Schedule, provided that:

1. such period of disability commences within 30 Days after the date of the Accident causing such Injury; and
2. such amount shall be payable as stated in the Policy Schedule, as applicable to such Insured Person; and
3. the maximum period for which such amount shall be payable for any one such period of disability shall not exceed the maximum number of weeks payable as stated in the Policy Schedule and in no event to exceed <<52,104>> weeks whichever is less.
4. We will not pay more than the Insured Person's Gross Weekly Wage for the Temporary Total Disability benefit. Any payment made under this benefit shall be deducted from any Accidental Death, or Accidental Dismemberment, or Permanent Total Disability, or Permanent Partial Disability, or Permanent Total Loss of Use benefits, if available under this Policy, which ultimately become payable under this Policy as a result of the same Accident.

Definitions:

Gross Weekly Wage - means the Insured Person's base weekly earnings in his or her occupation at the time of the

Insured Person - means the Insured Person between Age 18 and 75, named in the Policy Schedule as being eligible to become insured under this Policy and for whom a Proposal and Declaration Form for insurance has been received and approved by Us.

Medically Necessary - means medical services or supplies which: (a) are essential for diagnosis, treatment, or care of the covered loss under the applicable benefit for which it is prescribed or performed; (b) meets generally accepted standards of medical practice; and (c) is ordered by a Physician and performed under his or her care, supervision, or order.

Parents - means a Insured Person's legal father and mother, who are between the Ages of 18 and 75 years old

Period of Confinement - means a period of consecutive Days of confinement as an Inpatient caused by an Accident, Injury. However, successive confinements as an Inpatient caused by or attributable to the same Accident, Injury, are considered to be part of the same Period of Confinement, unless the discharge date for the prior confinement is separated from the admission date for the next confinement by at least 30 Days.

Only one Daily Benefit is provided for any one Day of confinement, regardless of the number of Accidents, Injuries, for which the confinement is required

Physician - means a licensed medical practitioner acting within the scope of his license and who holds a degree of a recognized institution and is registered by the Medical Council of the respective country. The term Physician would include specialist and surgeon.

Policy - means the insurance contract, the Policy Schedule, and any attached enrollment forms, endorsements, or riders.

Policyholder - means the physical person(s) or the entity named in the Policy Schedule who executed the Policy Schedule and is (are) responsible for payment of premiums

Policy Schedule - means the Policy Schedule attached to and forming part of the Policy.

Pre existing Condition - a condition for which care, treatment, or advice was recommended by or received from a Physician or which was first manifested or contracted within a two year period preceding the Policy Effective Date of Coverage, or a condition for which hospitalization or surgery was required within a five year period preceding the Policy Effective Date specified in the Schedule.

Professional Sports - means a sport, which would remunerate a player in excess of 50% of his or her annual income as a means of their livelihood.

Proposal and Declaration Form - means any initial or subsequent declaration made by the Insured Person and is deemed to be attached and which forms a part of this Policy.

Scheduled Airline - means any civilian aircraft operated by a civilian scheduled air carrier holding a certificate, license or similar authorization for civilian scheduled air carrier transport issued by the country of the aircraft's registry, and which in accordance therewith flies, maintains and publishes tariffs for regular passenger service between named cities at regular and specified times, on regular or chartered flights operated by such carrier.

Spouse - means Your legal husband or wife, who is between the Ages of 18 and 75 years old, and is living in Your residence

Act of Terrorism - means any actual or threatened use of force or violence directed at or causing damage, Injury, harm or disruption, or 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 Terrorism shall also include any act which is verified or recognized by the relevant Government as an act of terrorism. 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 Acts.

War - means war, whether declared or not, or any warlike activities, including use of military force by any sovereign nation to achieve economic, geographic, nationalistic, political, racial, religious or other ends.

We, Us, Our - means TATAAIG General Insurance Company Limited.

You/Your/Yourself - means the Insured Person(s) who is detailed / named in the Policy Schedule.

Part II: GENERAL EXCLUSIONS

This entire Policy does not provide benefits for any loss resulting in whole or in part from, or expenses incurred, directly or indirectly in respect of:

1. any Pre-existing Condition(s) and complications arising out of or resulting therefrom; or
2. suicide, attempted suicide (whether sane or insane) or intentionally self inflicted Injury or Illness, or sexually transmitted conditions, mental or nervous disorder, anxiety, stress or depression, Acquired Immune Deficiency Syndrome (AIDS), Human Immune deficiency Virus (HIV) infection; or
3. serving in any branch of the Military or Armed Forces of any country, whether in peace or War, and in such an event We, upon written notification by You, shall return the pro rata premium for any such period of service during the circumstances described in Hazards H-1.
4. being under the influence of drugs, alcohol, or other intoxicants or hallucinogens unless properly prescribed by a Physician and taken as prescribed; or
5. participation in an actual or attempted felony, riot, crime, misdemeanor, or civil commotion; or
6. operating or learning to operate any aircraft, or performing duties as a member of the crew on any aircraft; or Scheduled Airlines; or
7. War, civil War, invasion, insurrection, revolution, act of foreign enemy, hostilities (whether War be declared or not), rebellion, mutiny, use of military power or usurpation of government or military power; or
8. ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from burning nuclear fuel; or
9. the radioactive, toxic, explosive or other dangerous properties of any explosive nuclear equipment or any part of that equipment; or
10. self exposure to needless peril (except in an attempt to save human life); or
11. congenital anomalies or any complications or conditions arising therefrom; or
12. participation in winter sports, skydiving/parachuting, hang gliding, bungee jumping, scuba diving, mountain 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, 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 sport for which You are untrained; or
13. is caused by osteoporosis (porosity and brittleness of the bones due to loss of protein from the bones matrix) or pathological fracture (any fracture in an area where pre-existing Disease has caused the weakening of the bone) if osteoporosis or bone Disease diagnosed prior to the Policy Effective Date.
14. congenital anomalies and conditions arising out of or resulting therefrom; or
15. confinement in a Hospital which is not Medically Necessary; or

POSTPONEMENT OF EFFECTIVE DATE

No insurance provided by this Policy shall become effective if You are hospital confined or disabled, meaning unable to perform the usual and customary daily duties or activities of a person of like age and sex on the effective date of the policy. The coverage will take effect thirty one (31) Days after such hospital confinement or disability terminates.

such fracture, no further claim will be admitted in respect of any fracture sustained by the Insured Person concerned. However the Insurance provided in the respect of Insured Injuries I, J, K, may continue at the Insured's option.

Coverage C-3

Section: EMERGENCY ACCIDENT MEDICAL EXPENSE

We will pay the Reasonable and Customary Charges, subject to the Deductible shown in the Policy Schedule, for Covered Medical Expenses incurred in the Republic of India by You for medical services which are not due to a Pre-existing Condition up to the maximum amount and benefit period stated in the Policy Schedule for Immediate Medical Treatment of an Injury sustained by You, under the circumstances described in a Hazard, while this Policy is in effect.

Definitions:

Covered Medical Expenses - means expenses incurred overseas by You for medical services and supplies which are recommended by the attending Physician. They include:

- (a) the services of a Physician;
- (b) Hospital confinement and use of operating room;
- (c) anesthetics (including administration), x-ray examinations or treatments, and laboratory tests;
- (d) ambulance service;
- (e) drugs, medicines, and therapeutic services and supplies;

Immediate Medical Treatment - means treatment commencing within 24 hours of the time and date of the Accidental bodily Injury. Only Covered Medical Expenses are covered.

Exclusions:

In addition to the General Exclusions listed in this Policy this coverage section shall not cover:

1. Any treatment of any disease or sickness.
2. services, supplies, or treatment, including any period of Hospital confinement, which were not recommended, approved, and certified as Medically Necessary by a Physician; or
3. routine physicals or other examinations where there are no objective indications of impairment in normal health, and laboratory diagnostic or X-ray examinations except in the course of a disability established by the prior call or attendance of a Physician; or
4. elective, cosmetic, or plastic surgery, except as a result of an Injury caused by a covered Accident while Our Policy is in force; or
5. dental care, except as a result of Injury caused by Accident to Sound Natural Teeth while this Policy is in effect; or
6. expenses incurred in connection with weak, strained, or flat feet, corns, calluses, or toenails; or
7. the diagnosis and treatment of acne; or
8. deviated septum, including sub mucous resection and/or other surgical correction thereof; or
9. organ transplants that are considered experimental in nature; or
10. well child care including exams and immunizations; or
11. expenses which are not exclusively medical in nature; or
12. eyeglasses, contact lenses, hearing aids, and examination for the prescription or fitting thereof, unless Injury or no Sickness cover has caused impairment of vision or hearing; or
13. treatment provided in a government Hospital or services for which no charge is normally made; or
14. mental, nervous, or emotional disorders or rest cures; or
15. pregnancy and all related conditions, including services and supplies related to the diagnosis or treatment of infertility or other problems related to inability to conceive a child; birth control, including surgical procedures and devices; or
16. medical expenses covered under any workers' compensation or similar policy; or
17. medical expenses incurred as the result of alcohol and/or drug abuse, addiction or overdose; or
18. Therapeutic services unless conclusive scientific evidence proves, that it improves health outcome.

Part IV: COVERAGES

Coverage C-1

Section : ACCIDENTAL DEATH

We will pay the Principal Sum shown in the Policy Schedule Under Accidental Death Section, if Injury to You results in loss of life. The loss must occur during the circumstances described in Hazard H-1 within 365 Days from the date of the Accident which caused Injury, or

Limitation

With regard to the Accidental Death of an Insured Person Age Seventeen (17) or below, the maximum Principal Sum payable is 10% of the principal sum insured.

Exposure

For the purposes of the Accidental Death benefit above, a loss resulting from You being unavoidably exposed to the elements due to an Accident occurring during the circumstances described in Hazards H-1 will be payable as if resulting from an Injury. Loss must occur within 365 Days of the date of the Accident.

Disappearance

We will pay the benefit for Loss of Life during the circumstances described in Hazards H-1 if Your body cannot be located within 365 Days after the forced landing, stranding, sinking or wrecking of a conveyance in which You were a passenger or as a result of any Acts of God, in which case it shall be deemed, subject to all other terms and provisions of the Policy, that You shall have suffered loss of life within the meaning of the Policy.

Exclusions:

In addition to the General Exclusions listed in this Policy this coverage section shall not cover:

- a. 1. loss caused directly or indirectly, wholly or partly by infections (except pyogenic infections which shall occur through an Accidental cut or wound) or any other kind of Disease;
- b. medical or surgical treatment except as may be necessary solely as a result of Injury;
2. any Injury which shall result in hernia.

Coverage C-2

Section : FRACTURES / BURNS

We will pay the Principal Sum shown in the Policy Schedule if Injury to You results in one of the losses shown in the Schedule of Injuries below. The Injury must occur during the circumstances described in Hazard H-1 within 90 Days from the date of the Accident, which caused Injury.

Provision:

If more than one Injury results from any one Accident, only one amount, the largest, will be paid.

Schedule of Injuries: The type of fractures and the coverage levels will be as specified in the Policy Schedule

Multiple Fractures -- a fracture of a single bone occurring in multiple locations.

Open Fracture -- a fracture during which the bone penetrated the skin.

Complete Fracture -- a fracture of a bone through all its thickness.

Fractures of: Percentages of Principal Sum

As Specified in the Policy Schedule

1. Burns The degree of burns and the coverage levels will be as specified in the Policy Schedule

2nd or 3rd degree burns on

- at least 27% of body surface	100%
- at least 18% of body surface	80%
- at least 9% of body surface	40%

Second degree burns Burns which penetrate beyond the epidermis, causing formation of blisters.

Third degree burns These destroy the full skin thickness.

Special Condition Relating to Osteoporosis or Pathological Fracture

If a claim is admitted under this Policy involving fracture of a bone and osteoporosis is first diagnosed at the time of

Part III : UNIFORM PROVISIONS

1. ENTIRE CONTRACT - CHANGES: This Policy, together with the Proposal and Declaration Form, as well as any forms, riders and endorsements and papers hereto, constitutes the entire contract of insurance.

No change in this Policy shall be valid until approved by Our authorized officer and such approval is endorsed hereon. No agent has authority to change this Policy or to waive any of the provisions of this Policy.

2. CONSIDERATION: The premium payable under this Policy is payable in installments:

- a) in the case of annually paid premium -- before the beginning of each 12 monthly period when the annual premium installment is due, or
- b) in the case of monthly / quarterly / half yearly installment premiums -- before the beginning of each such period when the premium installment is due.

3. EFFECTIVE DATE: The Policy will start on the date specified on the Proposal and Declaration Form and Policy Schedule provided it is countersigned by Us and the total premium has been paid by You.

However Your coverage under this Policy begins on the latest of:

- 1) the Policy Effective date as stated above; or
- 2) the date on which the premium is paid when due.

4. RENEWAL CONDITIONS: The Policy may be renewed with Our consent by the payment in advance of the total premium specified by Us, which premium shall be at Our premium rate in force at the time of renewal. We, however, are not bound to give notice that it is due for renewal. Unless renewed as herein provided, this Policy shall terminate at the expiration of the period for which premium has been paid.

5. EXPIRATION DATE:

- 1) This Policy will terminate at the expiration of the period for which premium has been paid or on the Expiration Date shown in the Proposal and Declaration Form and Policy Schedule, whichever is earlier.

- 2) However We may cancel this Policy at any time by giving you 7 Days notice delivered to You, or mailed to Your last address as shown by Our records, stating when such cancellation shall be effective. In the event of cancellation, We will return promptly the pro-rata unearned portion of any premium You have actually paid. Such cancellation shall be without prejudice to any claim originating prior thereto. If you cancel the Policy, the earned premium shall be computed in accordance with Our short rate table for the period the Policy has been in force, provided no claim has occurred up to the date of cancellation in which case the whole premium shall be fully earned and no return of premium will be made.

6. TERRITORY: This Policy applies to incidents anywhere in the world unless limited by Us through endorsement.

7. CONTRIBUTION: If at the time of a claim there is another insurance Policy or other contract in the Policyholder's, and/or The Insured Person's name which covers the Insured Person for the same expense or loss, We will only pay Our proportionate share of the loss. Our Proportionate share will be calculated by determining the percentage Our Policy maximum bears to the total amount of insurance in force as to the loss. This does not apply to, Accidental Death, Accidental Dismemberment, Accidental Permanent Total Loss of Use, Permanent Total Disability and In-Hospital Indemnity, which We will pay in full if available under this Policy.

8. CONCEALMENT OR FRAUD: The entire Policy will be void if, whether before or after a loss, You have, related to this insurance,

- (a) intentionally or recklessly or otherwise concealed or misrepresented what we consider to be any material fact or circumstance;
- (b) engaged in what we consider to be fraudulent, dishonest or deceitful conduct; or
- (c) made false statements.

9. NOTICE OF CLAIM/LOSS: It is a condition precedent to Our liability hereunder that written notice of claim must be given by You to Us within 7 days after an actual or potential loss begins or as soon as reasonably possible

and in any event not later than 30 Days after an actual or potential loss begins.

10. **CLAIM FORMS:** We, upon receipt of a notice of claim, will furnish Your representative with such forms as We may require for filing proofs of loss.
11. **TIME FOR FILING CLAIM FORMS AND EVIDENCE:** Completed claim forms and written evidence of loss must be furnished to Us within thirty (30) Days after the date of such loss. Failure to furnish such evidence within the time required shall not invalidate nor reduce any claim if You can satisfy us that it was not reasonably possible for You to give proof within such time. However, no proof will be accepted if furnished later than one (1) year from the time the loss occurred.
12. **TIME OF PAYMENT OF CLAIM:** Benefits payable under this Policy will be paid within a reasonable time upon receipt of due written evidence of such loss and any other documentation, information and assistance that We may request You pursuant to Uniform Provision 10 above.
13. **PAYMENT OF CLAIM:** All claims under this Policy that are payable to You / Your NOMINEE shall be paid in Indian currency.
14. **ARBITRATION:** If any dispute or difference shall arise as to the quantum of claim 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 to 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 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 Indian Arbitration and Conciliation Act, 1996.

It is clearly agreed and understood that no difference or dispute shall be referable to arbitration as herein before provided, if the Company has denied, 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 upon this Policy that the award by such Arbitrator/Arbitrators of the amount of the loss or damage shall be first obtained.

15. **ASSIGNMENT OF INDEMNITIES:** Indemnity, if any, in case of Your loss of life is payable as defined in the Policy Schedule by default to the NOMINEE declared by You; indemnity is payable to Your estate. Any payment We make in good faith pursuant to this provision shall fully discharge Us to the extent of the payment.
16. **CONSENT OF NOMINEE:** Consent of the NOMINEE, if any, shall not be a pre-requisite for any change of NOMINEE or to any other changes in this Policy.
17. **CHANGE OF NOMINEE:** No change of NOMINEE under this Policy shall bind Us, unless consent / such change thereto is formally endorsed thereon by Our authorized officer.
18. **MEDICAL EXAMINATION:** We, at Our own expense, shall have the right and opportunity to obtain a post mortem examination report of Your body as permitted by law. Your or Your estate's compliance with the need for such examination report is a condition precedent to establishing liability under the Policy.
19. **LEGAL ACTIONS:** Without prejudice to Uniform Provision 15 above, no action at law or in equity shall be brought to recover on this Policy prior to the expiration of sixty (60) Days after written evidence has been furnished in accordance with the requirements of this Policy. If no evidence has been furnished within one (1) year of the date upon which it should have been furnished then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable under this Policy.

If We disclaim liability to You for any claim, and if You do not notify Us in writing within one (1) year from the date of receipt of the notice of such disclaimer that You do not accept such disclaimer and intend to recover this claim from Us, then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable under this Policy.

20. **MISSTATEMENT OF AGE:** If Your Age has been misstated, all amounts payable under this Policy shall be adjusted to the coverage amount that would have been purchased for the premium paid. In the event Your Age has been misstated, and if according to Your correct Age, the coverage provided by the Policy would not have

become effective, or would have ceased prior to the acceptance of such premium or premiums, then Our liability during the period You are not eligible for coverage, shall be limited to the refund, upon written request, of all premiums paid for the period not covered by the Policy.

21. **COMPLIANCE WITH POLICY PROVISIONS:** Failure to comply with any of the provisions contained in this Policy shall invalidate all claims hereunder.
22. **LIMITATIONS:**
 - Multiple policies :

If an Insured Person suffers a covered Accident, Injury, for which benefits, are payable under more than one like Policy issued by Us, the maximum amount payable under all Policies combined will not exceed the amount payable under the Policy which pays the largest benefit.

 - Provisions for Reduction of Coverage:

The benefits of this Policy in respect of Benefits 1-5 shall be reduced by 50% upon Insured Person's attainment of age 71 and such insurance coverage shall immediately terminate upon Insured Person's attainment of age 75.
23. **INTEREST ON THE BENEFIT WE PAY:** We will not pay any interest on any benefit We pay.
24. **OTHER INTEREST:** No person(s) other than you and/or your nominee (s) named by you in this application form can claim or sue us under this policy.
25. **SUBROGATION:** In the event of any payment under this Policy, We shall be subrogated to all Your rights of recovery thereof against any person or organization or You shall execute and deliver instruments and papers to us and do whatever else is necessary to secure such rights and provide whatever assistance We might reasonably require from You in the pursuance of Our subrogation rights. You shall take no action after the loss to prejudice such rights.
26. **DISPUTE RESOLUTION CLAUSE AND PROCEDURE:** This contract of insurance includes the following dispute resolution procedure, which is exclusive and a material part Choice of Law. This Policy will be governed by the law of the Republic of India. Any disputes will be dealt with as provided for by Uniform Provision 15, above and otherwise by the Indian courts.
27. **ADDITIONS:** Any person becoming eligible after the Effective Date of this Policy or Certificate of Insurance may be added from time to time as a named Insured Person, upon a Proposal and Declaration Form by You, proof of eligibility and insurability satisfactory to Us, and payment of the required additional premium. Insurance coverage for the new named Insured Person shall commence on the date such Proposal and Declaration Form has been approved by Us subject to any limitations that We may set forth in the accompanying forms.
28. **REASONABLE CARE AND ASSISTANCE:** You and each Insured Person must take all reasonable steps to avoid or reduce, as far as possible, any loss or damage. You and they must also make every effort to get back any property, which has been lost.

In addition, You and each Insured Person must assist Us in any manner We may reasonably require in relation to the investigation or settlement of a claim or the preservation or enforcement of any rights of subrogation to which we may be entitled.

Tata AIG - With you always

Tata AIG is a joint venture that is backed by the TATA group - one of India's most respected business conglomerates and the American International Group, Inc. (AIG), the leading US based international insurance and financial services organization, with a presence in over 130 countries and jurisdictions throughout the world. Tata AIG is one of the few partnerships in the Indian Insurance industry that brings you a range of insurance products: from automobiles to life insurance, from travel to personal accident coverage, and more.



How can I get the Tata AIG Injury Guard?

Contact our agent or call our

24x7 helpline 1-800-119966 ☎

(for MTNL & BSNL users in India only)

Or contact us at the following nos.

- Mumbai : 022-66939500 • Bangalore : 080-66500001
- Pune : 020-66014156 • Delhi : 011-66603500
- Hyderabad : 040-66629882 • Ahmedabad : 079-66610201
- Chennai : 044-66841050

For more info visit : www.tata-aiggeneral.com



WITH YOU ALWAYS

Note : Coverage, terms & conditions and exclusions are only outlined briefly in this brochure.
For complete details please refer to the policy wordings available on request.

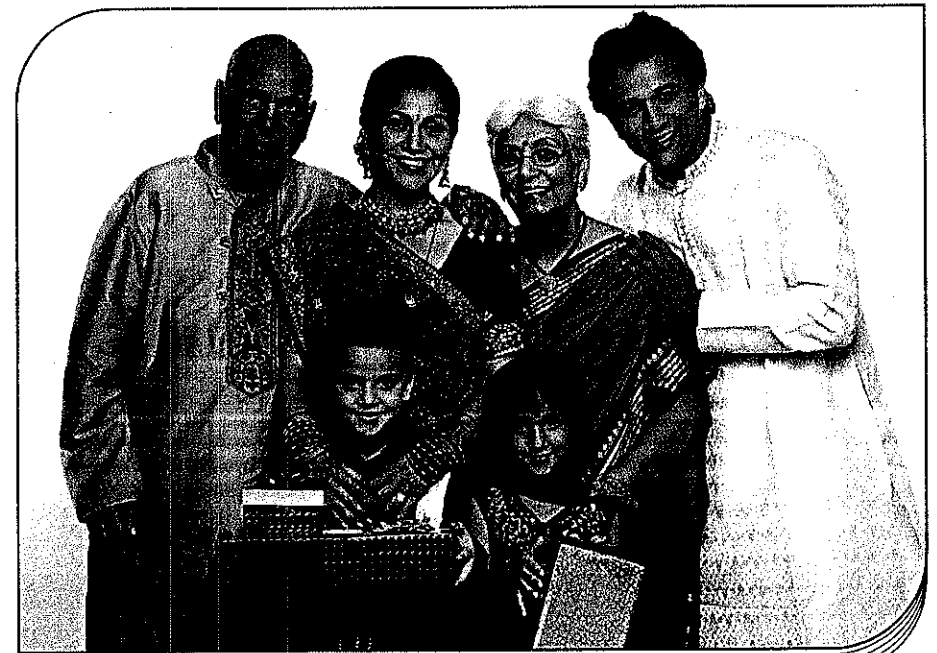
Tata AIG General Insurance Company Ltd.

Regd. Office: Peninsula Corporate Park, Nicholas Piramal Tower, 9th Floor, G. K. Marg,
Lower Parel, Mumbai - 400 013.

InjuryGuard

PERSONAL ACCIDENT PLAN

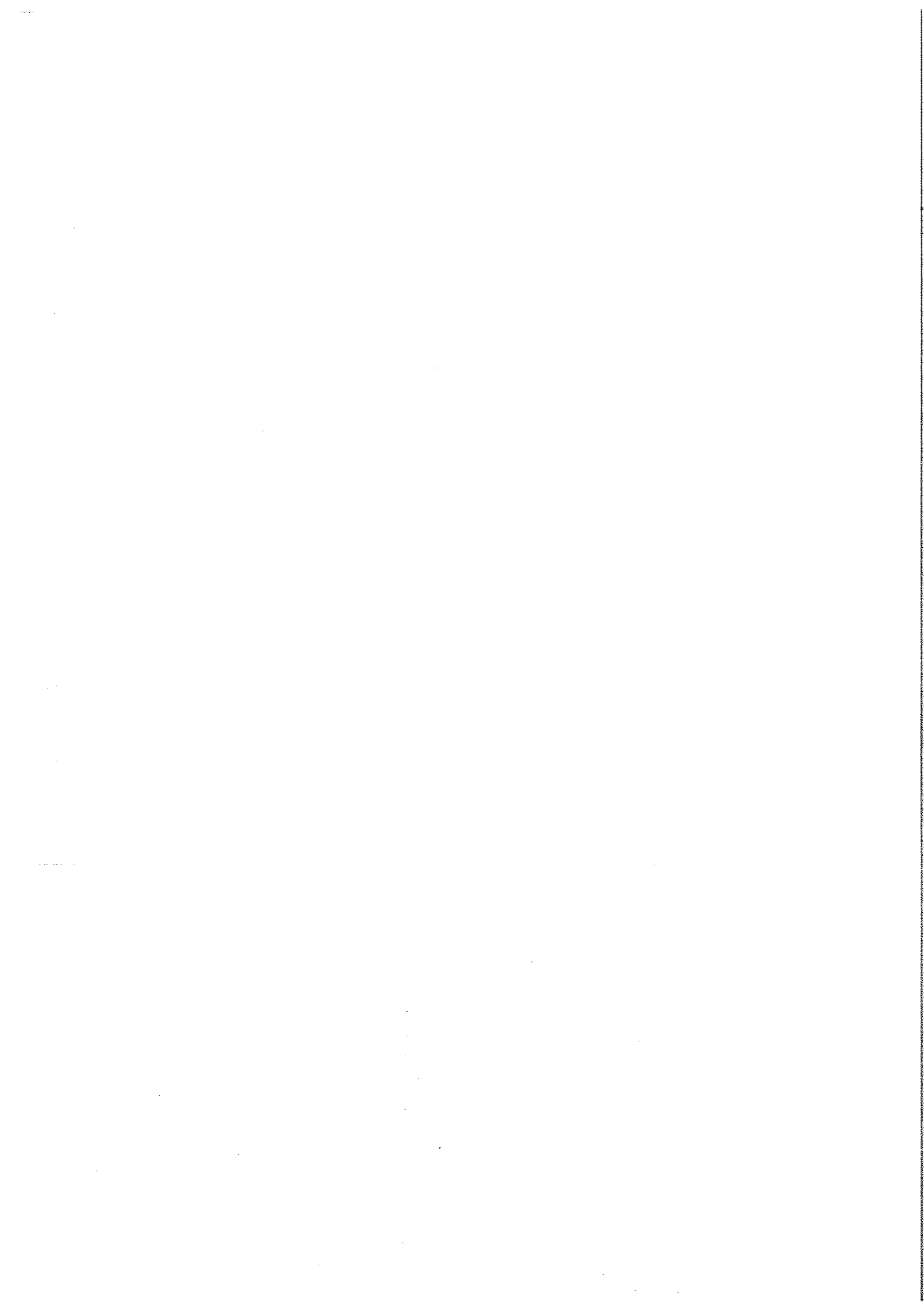
Make their maturing years just as wonderful as your childhood



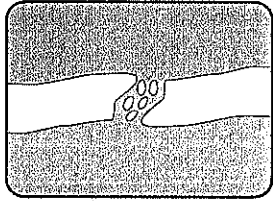
Insurance is a subject matter of solicitation.



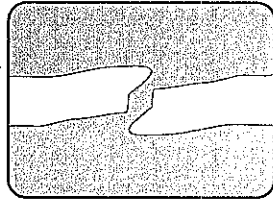
WITH YOU ALWAYS



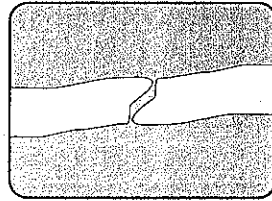
Types of Fracture



Multiple



Complete



Simple/Other

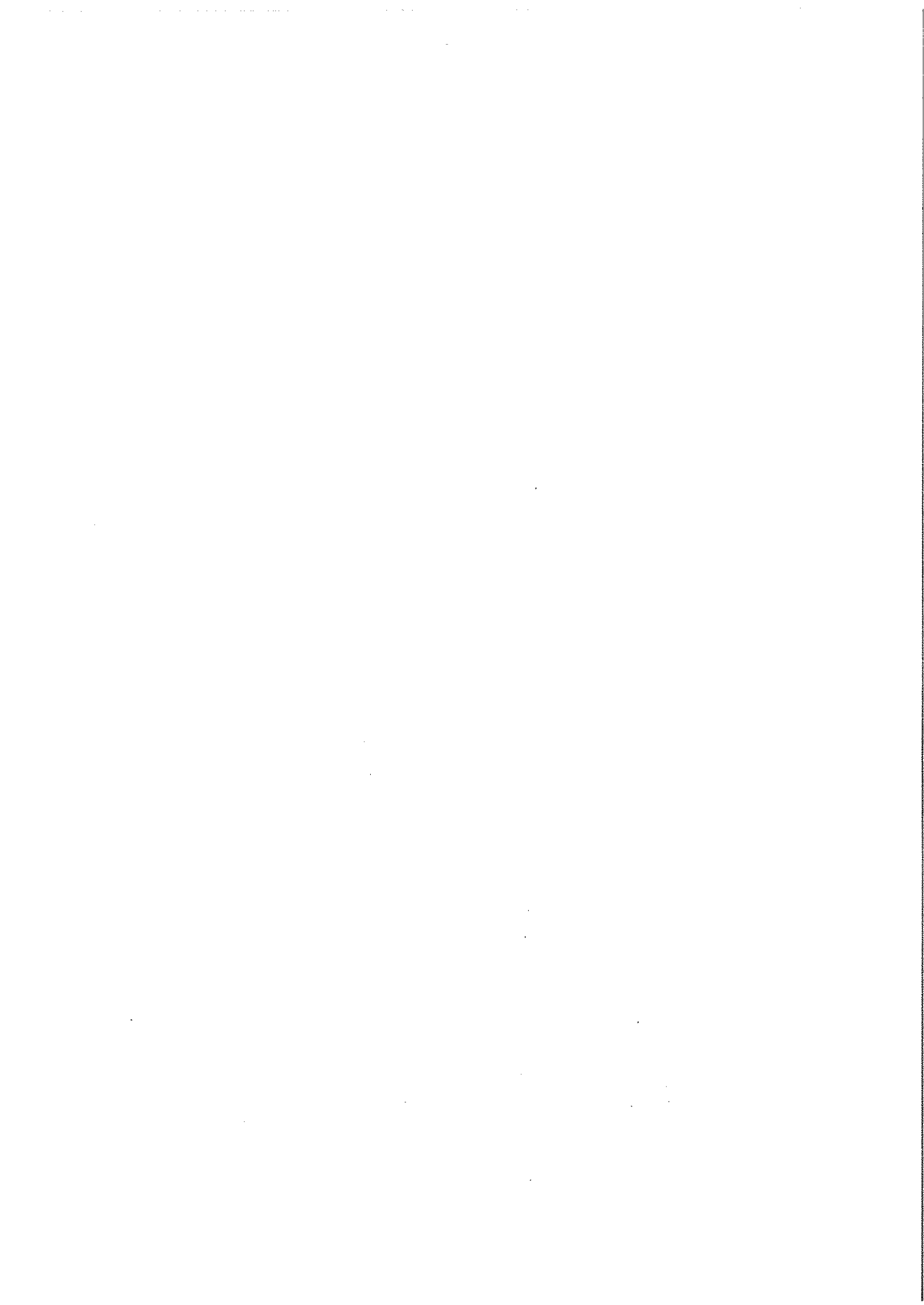
Multiple Fractures – a fracture of a single bone occurring in multiple locations.

Open Fracture – a fracture during which the bone penetrated the skin.

Complete Fracture – a fracture of a bone through all its thickness.

KEY EXCLUSIONS

- Any pre-existing condition(s) and complications arising out or resulting therefrom
- Suicide, attempted suicide (whether sane or insane) or intentionally self-inflicted injury or illness, or sexually transmitted conditions, mental or nervous disorder, anxiety, stress or depression, Acquired Immune Deficiency Syndrome (AIDS), Human Immune deficiency Virus (HIV) infection
- Ailment caused by osteoporosis (porosity and brittleness of the bones due to loss of protein from the bones matrix) or pathological fracture (any fracture in an area where pre-existing Disease has caused the weakening of the bone) if osteoporosis or bone Disease diagnosed prior to the Policy Effective Date.
- Confinement in a Hospital which is not Medically Necessary
- War, civil War, invasion, insurrection, revolution, act of foreign enemy, hostilities (whether War be declared or not), rebellion, mutiny, use of military power or usurpation of government or military power.





**with Tata AIG INJURY GUARD,
live a worry free life.**

Life, by definition is full of uncertainties and unexpected events and as much as we'd like to avoid them. We can come across accidents at any point of time in our lives. While we all like to believe that it won't happen to us, the risk of injury is likely to increase with age. And while you worry about your health, you also have an additional thing to worry about and that's the money required for the treatment.

With the Tata AIG INJURY GUARD, you can ensure a greater level of financial independence, should any such need arise. The scope of accidents covered would range from simple fractures to skin burns at different levels. At Tata AIG, we understand that your needs would be unique, and have therefore taken utmost care to be sensitive in

addressing the same, by way of providing you with four different plans / options and riders, to choose from, as per your individual estimated requirement.

Household help for a quick & hassle-free recovery

With the benefits that this plan pays you, in the unfortunate occurrence of an accident or being physically incapacitated, you can arrange for household help to assist you in bathing, dressing, preparing meals and to look after your home. Even a part time nurse or physiotherapist can provide much-needed support. No matter what, with Tata AIG INJURY GUARD, you will have cash to spend as you wish.

Who can apply?

- Age group :
 - 18 to 75 years for adults
 - For Children - 6 Months to 18 years (23 years if attending as a full time student of a recognised institute of higher learning)
 - Age 71-75 years will be covered for 50% of the PSI (Principle Sum Insured)
- Spouse and Parents will be 100% of the PSI (Principle Sum Insured)
- Parents of self only will be covered
- Children will be 50% of the PSI (Principle Sum Insured)
- Riders are applicable only for the principal insured + spouse

24-Hour world wide coverage



Tata AIG INJURY GUARD will protect you 24 hours a day, 365 days a year, anywhere in the world.

Sometimes, even a simple fall can result in a fracture, causing much anguish. It can take several weeks, even months to heal. If for example, you suffer a fractured heel, cash benefits of upto Rs. 75,000 will be paid. This benefit could be used to cover medical expenses or pay for household help until you recover.

Guaranteed acceptance up to 75 years

Acceptance for this plan is guaranteed, from 18 years up to 75 years of age. However, the benefits will be reduced by 50% from the age of 71 to 75 years.

No Medical Examination

No Medical examination is required when you enrol for this plan.

Family cover at a discounted rate

Injury guard comes to you at a much discounted price for your entire family. You can cover your spouse, children and parents at a much lower price in the injury guard Family package as against if covered individually.

A. BENEFITS*

Sum(s) insured in Rs. upto

Coverages (As per Terms and Conditions of the Policy)	Option 1	Option 2	Option 3	Option 4
INJURIES				
1. Fractures of Hip / Pelvis Open and / or Multiple and/or complete fracture All other fractures	25,000 12,500	50,000 25,000	100,000 50,000	150,000 75,000
2. Fractures of Thigh / Heel Open and / or Multiple and / or complete fracture All other fractures	20,000 10,000	30,000 15,000	50,000 25,000	75,000 40,000
3. Fractures of Spinal Column, lower leg, ankle, elbow, upper / lower arm Open and/or Multiple and / or complete fracture All other fractures	15,000 7,500	25,000 12,500	45,000 22,500	60,000 30,000
4. Fractures of shoulder blade, kneecap, hand (excl. wrist & finger) Open and / or Multiple and / or complete fracture All other fractures	10,000 5,000	15,000 7,500	25,000 12,500	40,000 20,000
5. Fractures of upper jaw, lower jaw, ribs, check-bones, foot, toes and fingers Open and / or Multiple and / or complete fracture All other fractures	5,000 2,500	10,000 5,000	15,000 7,500	20,000 10,000
6. Fractures of any other bone, not specifically provided for as above Open and / or Multiple and / or complete fracture	5,000	10,000	15,000	20,000
7. Burns				
A) Skin burns - 2nd and 3rd degree and covering 27% and more of the body surface.	15,000	25,000	45,000	60,000
B) Skin burns - 2nd and 3rd degree and covering between 18% & more of the body surface, but less than 27 % of the body surface.	10,000	15,000	30,000	40,000
C) Skin burns - 2nd and 3rd degree and covering 9% & more of the body surface, but less than 18 % of the body surface.	5,000	7,500	15,000	20,000
Total of A not to exceed Rs.	100,000	150,000	300,000	400,000

The above sums are maximum sums payable under the benefit and may vary according to the seriousness and type of the injury. *Benefits shall be 50% of the PSI for the age group 71 to 75 years.

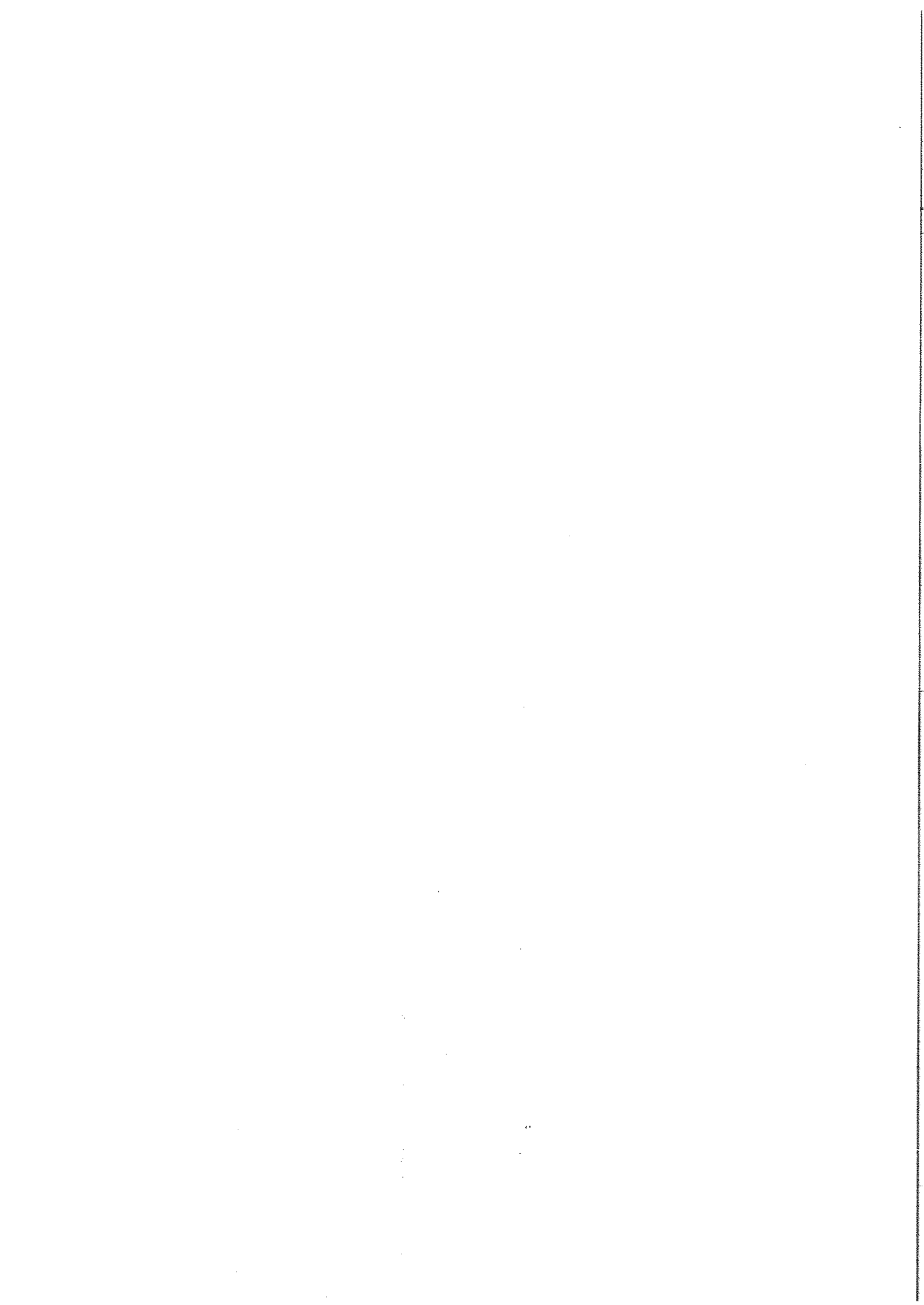
B. ACCIDENT HOSPITAL CASH per day upto 60 days	1,000	1,500	3,000	3,000
C. ACCIDENTAL DEATH 24 hr world wide	50,000	50,000	50,000	50,000

RIDERS

Weekly benefit for self and working spouse - upto 52 wks	3,000	5,000	7,500	10,000
Emergency Accident Medical Expenses Reimbursement (self only)	15,000	20,000	30,000	50,000
House and vehicle modifications (self only)	50,000	50,000	50,000	50,000

PREMIUM (Including Applicable Service Tax)

Core Benefits				
Self only	1,579	2,346	4,517	5,921
Self + Spouse	2,842	4,223	8,131	10,659
Self + Spouse + Children (2)	4,168	6,193	11,926	15,634
Self + Spouse + Children (2) + Parents	5,350	7,947	15,304	20,062
Self + Parents	4,273	6,348	12,223	16,024
RIDERS				
Self only	630	968	1,469	2,096
Self + Spouse	1,134	1,743	2,644	3,773



What's more...

you may avail the add on benefits with
a little extra premium for yourself and your spouse

WEEKLY BENEFIT

In an unfortunate event of an accident, should you be recuperating at home, or at the hospital/ nursing home, you can avail of the weekly indemnity benefit up to Rs. Ten Thousand per week, up to fifty two weeks.

EMERGENCY ACCIDENT MEDICAL REIMBURSEMENT

In case of emergency you could also avail of reimbursement of immediate medical expenses like Operation Charges (Anesthetist's Fees, Operation Theatre Charges and Surgeon Fees), Hospital Services (X-Ray/CT Scan and Pathology Tests), Ambulance Charges and Physiotherapy Benefit (during confinement in the Hospital) arising out of the accident, up to Rs. Fifty Thousand



HOUSE AND VEHICLE MODIFICATIONS

In the unfortunate occurrence of being physically incapacitated or Dismemberment, an amount up to a maximum of Rs. Fifty Thousand will be reimbursed to you towards the cost of modifying your house or vehicle to combat disability.

