

**Additional Personal Accident Cover to Employee of the Insured, Driver and Unnamed Passengers (IRDAN108RP0004V02200001/A0068V01201920)**

This cover is applicable if it is shown on *Your* schedule.

**What is covered:**

We will pay compensation on the scale provided below for bodily injury as hereinafter defined sustained by employee of the insured/ driver/ unnamed passenger in direct connection with the insured vehicle whilst mounting and dismounting from or driving or travelling in the insured vehicle or road rage and caused by violent, accidental external and visible means which independently of any other cause shall within three calendar months of the occurrence of such injury result in:-

Details of Injury	Scale of Compensation
i) Death	100%
ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye	100%
iii) Loss of one limb or sight of one eye	50%
iv) Permanent Total Disablement from injuries other than named above	100%

We shall pay under only one of the items (i) to (iv) above in respect of any such person arising out of any one occurrence in addition to maximum limit of liability covered under Section IV of the policy and total liability of the insurer shall not in the aggregate exceed the amount stated in the schedule during any one *Period of insurance* in respect of any such person.

- We will reimburse an amount of maximum of Rs 5000/- per person for repatriation of remains of unnamed passengers limited to the seating capacity of the vehicle.
- Such compensation shall be payable only with *Your* approval and directly to the injured person or his/her legal representative(s) whose receipt shall be a full discharge in respect of the injury of such person.
- Not more than persons/passengers specified in the registration certificate were in the vehicle at the time of occurrence of such injury.
- Subject to such person holding an effective driving license, in accordance with the provisions of Rule 3 of the Central Motor Vehicles Rules, 1989, at the time of the accident in case such person was driving the insured vehicle.
- 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 actual or potential loss begins.
- You* or someone claiming on *Your* behalf shall provide *Us* with all documentation, medical records and information that *We* may request to establish the circumstances of the claim, its quantum or *Our* liability for the claim within 15 days of notice of claim to *Us*.

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. The Company may accept claims where documents have been provided after a delayed interval only in special circumstances and for the reasons beyond the control of the insured.

**Documentation:**

- Duly Completed and signed Claim Form
- Attested copy of Death Certificate in case of death.
- Medical report from attending specialist doctor including Death Summary in case of hospitalization.
- Attested copy of disability certificate from the specialist treating doctor stating percentage of disability.
- Attested copy of FIR / Panchanama / Inquest Panchanama.
- Complete medical records/reports including investigation /Lab reports ( X-Ray ,MRI etc) in case of disability claim.
- Attested copy of Post Mortem Report (only if conducted).
- Any other document(s) as requested by Claims Department which is/are relevant to the coverage under the policy.
- If claim amount > 1 Lakh, KYC Documents such as Pan Card Copy, Address Proof, one Passport color photo of claimant.

**Special Conditions:**

- We*, at *Our* own expense, shall have the right and opportunity of *Your* medical examination through *Our* appointed agents whose details will be notified to *You* when and as often as *We* may reasonably require during the pendency of a claim hereunder, and also the right and opportunity to arrange for a post mortem examination report, if conducted, on *Your* body as permitted by law. *Your* or *Your* estate's compliance with the need for such examination is a condition precedent to establishing liability under the Policy.

**What is not covered:**

- We* shall not pay any compensation in respect of death or injury directly or indirectly wholly or in part arising or resulting from traceable to:
- Intentional self injury suicide or attempted suicide physical defect or infirmity or
- an accident happening whilst such person is under the influence of intoxicating liquor or drugs.
- We* shall not pay any compensation in respect of death or injury to any person who is not legally permitted to travel in the vehicle as per provisions of relevant applicable laws.

Subject otherwise to the terms exceptions condition & limitations of the policy.