

Individual Personal Accident Policy (Accidental Death & Disablement Only)

Prospectus

Individual Personal Accident Policy – Protecting what you value

No matter how good your health is, an accident can take place any time, anywhere. It can leave you or your family in severe financial hardship and ruin the comfort that you have worked so hard to provide to them.

You can now safeguard yourself and your family against such hardships by opting for Individual Personal Accident Policy (Accidental Death & Disablement only), underwritten by Royal Sundaram General Insurance company Limited.

This is a round the clock, worldwide cover towards accidental death/disablement. This product offers you renewal for life long.

In an unfortunate incident of fatal accident, the nominee will be getting the Sum Insured. In case of an accident resulting in permanent total or partial dismemberment / disablement of organs, the assured benefit will be paid to you.

Who is providing coverage under Individual Personal Accident Policy?

Your Coverage under Individual Personal Accident Policy is offered by Royal Sundaram General Insurance Company Limited (first private non-life Insurance Company licensed to operate in India).

What are the key benefits of Individual Personal Accident Policy?

This policy is specially designed to offer complete protection to you and your family against the accidents

Death: In unfortunate event of fatal accident the Sum stated in the Schedule/ Certificate of Insurance will be paid to the nominee of Insured Person.

Permanent Total Disablement: In unfortunate event of an accident resulting in Permanent Total Disablement the Insured Person will be paid the Sum stated in the Schedule/Certificate of Insurance.

Permanent Partial Disablement: In unfortunate event of an accident resulting a Permanent Partial Disablement the Insured Person will be paid a specified percentage of Sum stated in Schedule/Certificate of Insurance according to the disability which has been listed in the policy.

Temporary Total Disablement Benefit: Fixed lump sum (stated in the Schedule/Certificate of Insurance) of Weekly benefit as compensation for accident resulting in home confinement of the Insured Person.

Medical Expenses due to hospitalization: Reimbursement of medical Expenses for hospitalization due to accident resulting in Death/ Disablement.

Special Free Benefits:

Carriage of Dead Body: A lump sum, as stated in the Schedule/Certificate of Insurance or Policy condition is payable for carriage of Insured person's dead body to the place of his/her residence.

Educational Grant: In the event of death or Permanent total disablement of the insured person, Educational grant as stated in the Schedule/ Certificate of Insurance/Policy condition shall be payable.

Recovery Benefit: A lump sum stated in the Schedule/Certificate of Insurance or Policy condition shall be payable if hospital confinement due to accident is for a consecutive period of more than 25 days.

Additional Benefits

Cumulative Bonus

Compensation payable under Death and Permanent Total Disablement benefits of the Policy arising out of accidental injuries, shall be increased by 5% thereof in respect of each completed claim free year, during which the policy shall have been in force. Amount of such increase shall not exceed 25% for the Capital Sum Insured stated in the Schedule herein or Rs.25 lakhs whichever is less. This Cumulative bonus is applied on CSI when the policy is renewed continuously.

This clause shall not in any way alter the annual character of the insurance nor the right of the Company to decline or renew or to cancel this Policy as hereinafter provided.

The earned Cumulative Bonus will not be lost if the Policy is renewed within 30 days after its expiry.

Policy Tenure

- Policy tenure - One, Two and Three years

Eligibility

- The rates and conditions laid down are applicable to persons between the ages of 5 and 70 years (male and female), except in case of family package cover where the minimum age of children shall be 5 years and maximum 25 years. However, where the age of insured person is above 70, the premium should be suitably loaded at our discretion. Cover for non earning spouse shall be restricted to 50% of the sum insured of the primary insured.
- Cover for children below 5 years may be avoided as far as possible. If allowed, this may be done at higher rates at our discretion. Cover for children shall be restricted to 25% of the sum insured of the primary insured.
- 8 times of annual Income is considered for deriving the Sum Insured to be offered.

When does the Coverage Start?

Cover shall start from the time and date when premium is received by Royal Sundaram General Insurance Co. Ltd.

When does the Cover End?

Event	Parameter
End of coverage term	Expiry date of policy period unless renewed
If you cancel the coverage	Premium would be refunded as per the cancellation clause as specified in the policy.
Non receipt of renewal premium	If the renewal premium is not paid within the due date and within the Grace Period of 30 days.
Fraudulent event/non-cooperation	The policy when not renewed on grounds of fraud, moral hazard or misrepresentation or non-cooperation by you.
On Payment of Claim	Once a claim is made and found admissible (for Death & PTD where 100% SI is payable)

Exclusions under the Policy

The Company shall not be liable under this Policy for:

1. Compensation under more than one of the foregoing Subclauses in respect of the same period of disablement.
2. Any other payment after a claim under one of the Sub-clauses (a), (b) or (d) has been admitted and become payable. This would not apply to the payment made under medical expenses extension, education grant and expenses for carriage of dead body.
3. Any payment in case of more than one claim under the Policy during any one period of insurance, by which the maximum liability of the Company in that period would exceed the sum payable under the Sub-clause(a) of the policy. This would not apply to the payment made under medical expenses extension, educational grant and expenses for carriage of dead body.
4. Payment of weekly compensation until the total amount shall have been ascertained and agreed.
5. Payment of compensation in respect of death, injury or disablement of the Insured
 - (a) from intentional self injury, suicide or attempted suicide.
 - (b) whilst under the influence of intoxicating liquor or drugs.
 - (c) whilst engaging in aviation or ballooning, whilst mounting into or dismounting from or travelling in any balloon or aircraft other than as passenger (fare paying or otherwise) in any duly licensed Standard type of Aircraft anywhere in the world. ("Standard type of Aircraft" means an aircraft duly licensed to carry passenger (for hire or otherwise) by appropriate authority irrespective of whether such an aircraft is privately owned or chartered or operated by a regular airline or whether such an aircraft is privately owned OR charged OR operated by a regular airline OR whether such an aircraft has single engine or multiengine
 - (d) directly or indirectly caused by venereal diseases, AIDS or insanity.
 - (e) arising or resulting from the Insured committing any breach of law with criminal intent.
 - (f) as a result of, or which is contributed to by, the Insured person suffering from any pre-existing condition or pre-existing physical or mental defect or infirmity.
Complications arising from the pre-existing physical or mental defect or infirmity will be considered as part of the pre-existing condition.
6. Payment of compensation in respect of death, injury or disablement of the Insured due arising out of or directly or indirectly connected with or traceable to War, Invasion, Act of foreign enemy, Hostilities (whether war be declared or not), Civil War, Rebellion, Revolution, Insurrection, Mutiny, Military or Usurped Power, Seizure, Capture, Arrests, Restraints and Detainments of all Kings, Princes and people of whatsoever nation, condition or quality.
7. Payment of compensation in respect of death of or bodily injury or any disease or illness to the Insured
 - (a) directly or indirectly caused by or contributed to by or arising from ionising radiation or contamination by radio activity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. For the purpose of this exception, combustion shall include any self-sustaining process of nuclear fission.
 - (b) directly or indirectly caused by or contributed to by or arising from nuclear weapon material. Provided also that the due observance and fulfillment of the terms and conditions of this Policy (which conditions and all endorsement hereon, are to be read as part of this Policy) shall so far as they relate to anything to be done or not to be done by the insured be a condition precedent to any liability of the Company under this Policy.

8. **Pregnancy Exclusion Clause** : The Insurance under this Policy shall not extend to cover death or disablement resulting directly or indirectly caused the contributed to or aggravated or prolonged by child birth or from pregnancy or in consequence thereof.

9. As a result of, or which is contributed to by, the Insured person suffering from any pre-existing condition or pre-existing physical or mental defect or infirmity.

10. Nuclear, Chemical, Biological Terrorism Exclusion Clause: The Insurance under this Policy shall not extend to cover Death, disablement or injury resulting directly or indirectly arising out of, contributed to or caused by, or resulting from or in connection with any act of nuclear, chemical, biological terrorism (as defined below) regardless of any other cause or event contributing concurrently or in any other sequence to the loss.

For the purpose of this endorsement "Nuclear, chemical, biological terrorism" shall mean the use of any nuclear weapon or device or the emission, discharge, dispersal, release or escape of any solid, liquid or gaseous Chemical agent and/or Biological agent during the period of this insurance by 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 or ideological purposes or reasons including the intention to influence any government and/or to put the public, or any section of the public, in fear.

"Chemical" agent shall mean any compound which, when suitably disseminated, produces incapacitating, damaging or lethal effects on people, animals, plants or material property.

"Biological" agent shall mean any pathogenic (disease producing) micro-organism(s) and/or biologically produced toxin(s) (including genetically modified organisms and chemically synthesized toxins) which cause illness and/or death in humans, animals or plants.

Claims Procedure

1. Upon the happening of any event which may give rise to a claim under this Policy, written notice with full particulars must be given to the Company immediately. In case of death, written notice also for the death must unless reasonable cause is shown, be so given before internment cremation and in case, within one calendar month after the death, and in the event of loss or sight or amputation of limbs, written notice thereof must also be given within one calendar month after such loss of sight or amputation.

2. Proof satisfactory to the Company shall be furnished for all matters upon which a claim is based. Any medical or other agent of the Company shall be allowed to examine the Insured Person on the occasion of any alleged injury or disablement when and so often as the same may reasonably be required on behalf of the Company and in the event of death to make a post-mortem examination of the body of the insured. Such evidence as the Company may, from time to time required shall be furnished and postmortem examination report, if necessary be furnished within the space of fourteen days after demand in writing and in the event of a claim in respect of loss of sight, the Insured shall undergo at his own expense such operation or treatment as the Company may reasonably deem desirable. Provided that all sums hereunder shall be payable.

i). In case of death or permanent total disablement only after deleting by an endorsement, the name of the Insured Person in respect of whom such amount shall become payable without any refund of premium.

ii). In case of permanent partial disablement only after reduction by an endorsement of CSI by the amount admissible under the claim in respect of the Insured Person to whom, such sum shall become payable.

iii). In case of temporary total disablement upon termination of such disablement. All admissible claims under this policy shall be offered for settlement within 30 days from the receipt of last necessary document. Wherever settlement offer has been made and accepted by Insured Person / Nominee /Legal heir as the case may be, the company shall pay the offered claim amount within 7 days from the date of

such acceptance, failing which the Company shall be liable to pay interest at 2% above the bank rate prevalent at the beginning of the financial year in which the claim is reviewed.

Claim Documentation:

Death Claim (Submit the duly filled in claim form with the following documents)

- Original Death Certificate.
- Post Mortem Report.
- Inquest report.
- Accident report.
- FIR/MLC copy.
- Hospital records.
- News Paper cuttings if any and any other relevant records.
- Chemical Analysis Report if available.
- English Translation of vernacular documents.
- Succession Order/legal heir certificate/legal documents to establish identification of legal heir in the absence of nomination under the policy.
- Any other document as may be required by the Company.

Disablement Claim (Submit the duly filled in Claim form with the following documents).

Permanent Total or Partial Disablement.

- Disability Certificate issued by attending physician.
- Accident report.
- FIR/MLC copy.
- Hospital Records.
- News Paper cuttings if any and any other relevant records.
- English Translation of vernacular documents.
- Latest IT return to show Proof of annual income.
- Any other document as may be required by the Company.

The Claim documents should be sent to:

Health Claims Department

M/s.Royal Sundaram General Insurance Co. Limited.,
Corporate office: Vishranthi Melaram Towers, No. 2 / 319
Rajiv Gandhi Salai (OMR), Karapakkam, Chennai - 600097.

Claim documents may be submitted to local Royal Sundaram Offices address of which can be obtained by calling our Toll Number 1860 425 0000.

Renewal Process

- i. This Policy will automatically terminate at the end of the Policy Period. This Policy is ordinarily renewable on mutual consent for life, subject to application of Renewal and realization of Renewal premium. All Renewal application should reach Us on or before the Policy Period End Date.
- ii. We may in Our sole discretion, revise the Product and Renewal premium payable under the Policy provided that revision to the Renewal premium are in accordance with the IRDAI rules and regulations as applicable from time to time. Renewal premiums will not alter based on individual claims experience. We will intimate You of any such changes at least 3 months prior to date of such revision or modification.
- iii. The premium payable on renewal shall be paid to Us on or before the Policy Period End Date and in any event before the expiry of the Grace Period. For the purpose of this provision, Grace Period means a period of 30 days in case of one year immediately following the Policy Period End Date during which a payment can be made to renew this Policy without loss of continuity benefits such as Waiting Periods and coverage of Pre Existing Diseases.

- iv. Renewal of the Policy will not ordinarily be denied other than on grounds of moral hazard, misrepresentation or fraud or non-cooperation by You.
- v. We reserve the right to carry out underwriting in relation to any alterations like increase/decrease in Sum Insured, change in plan/coverage, addition/deletion of members, addition/deletion of Medical Conditions, request at the time of Renewal of the Policy. Any request for acceptance of changes on renewal will be subject to underwriting. The terms and conditions of the existing Policy will not be altered.
- vi. This product may be withdrawn by Us after due approval from the IRDAI. In case this product is withdrawn by Us, this Policy can be renewed under the then prevailing Health Insurance Product or its nearest substitute approved by IRDAI. We shall duly intimate You regarding the withdrawal of this product and the options available to You at the time of Renewal of this Policy.

Cancellation Process

The Company may at any time by notice in writing terminate this policy in the event of fraud or misrepresentation by the Insured/Insured Person or non-cooperation by the Insured, provided that the company shall in that case return to the Insured the then last paid premium less a pro-rata thereof for the portion of the current insurance period which shall have expired.

Such notice shall be deemed sufficiently given if posted and addressed to the insured at the address last registered in the Company's books and shall be deemed to have been received by the Insured at the time when the same would be delivered in the ordinary course of post.

OR

The policy may even be cancelled at any time by the insured by a notice in writing under a Certificate of posting or a Regd. A.D. Such notice shall be deemed to be effective from the date of despatch of the same by the insured. PROVIDED no claim has arisen under the within mentioned policy prior to the despatch of such notice by the insured to the Company, the insured would be entitled to the return of premium less premium at company's *Short period rates for the policy has been in force.

The Policy may be cancelled at any time, by the Insured on 14 days notice in writing (provided no claim has arisen during the currency of the Policy). The Insured shall be entitled to the return of premium less premium at Company's *Short period rates for the period the Policy has been in force.

***Short Period Rates**

Period on Risk	Rate of Premium to be retained
Up to 1 month	25% of Premium
Up to 3 months	50% of Premium
Up to 6 months	75% of Premium
Up to 12 months	Full Premium

For Multi year policies refund of premium shall be calculated as follows:

- a) Total premium shall be divided by the policy tenure to arrive annual premium.
- b) Multi year discount shall be adjusted based on the actual tenure completed including the year of cancellation.
- c) Annual premium shall be retained for each completed years and for the year in which the policy is cancelled the above table shall be applied.
- d) For the remaining unexpired period the entire premium shall be refunded.

PREMIUM TABLE

Benefit	Description	Table	Benefits Covered	Group 1	Group 2	Group3	Group 4

1	Death Only	D		0.45	0.6	0.45	0.8
2	Loss of limbs, two eyes, or one limb or one eye – 100%	C	1 to 4	0.6	0.9	0.6	1.1
3	Loss of one limb or one eye – 50%						
4	PTTD – 100%						
5	Permanent Partial Disability	B	1 to 5	0.9	1.2	0.9	1.45
6	TTD – 1% of CSI up to 100 weeks with weekly benefit of maximum of 3000/-	A	1 to 6	1.2	1.5	1.2	2.0

Medical Benefits

Present Limit available is

10%. Additional Premium for Medical Benefit,

40% of Claim Amount or 10%, of sum insured whichever is less.

	COVER	PROPOSED LOADING
1.	50% of Claim amount or 15% of Sum Insured, whichever is less	15% Additional
2.	75% of Claim amount or 20% of Sum Insured, whichever is less	20% Additional
3.	100% of Claim amount or 25% of Sum Insured, whichever is less	25% Additional

Offering of the higher limit is optional at the discretion of Insurer.

Family Discount: 10% for 3 or more in the same policy.

Income Proof Requirement:

5 to 10 times annual salary shall be considered as eligibility criteria for different segments and company may insist on financial documents either at the time of underwriting or at the time of claim. When the income proof is required at the time of claim, if the SI chosen is more than 5 to 10 times, then the claim shall be limited to 75% of the Sum Insured by imposing a suitable warranty. This is at the option of the company. Where this is imposed, it will be specified in the schedule of the policy.

Portability

The insured Person will have the option to port the policy to other insurers as an extant Guidelines related to portability. If such person is presently covered and has been continuously covered without any lapses under any health insurance plan with an Indian General/Health insurer as per Guidelines on portability, the proposed Insured Person will get all the accrued continuity benefits in waiting periods as under:

- i. The waiting periods specified in Section D shall be reduced by the number of continuous preceding years of coverage of the Insured Person under the previous health insurance policy.
- ii. Portability benefit will be offered to the extent of sum of previous sum insured and accrued bonus (as part of the base sum insured), portability benefit shall not apply to any other additional increased Sum Insured.

For Detailed Guidelines on Portability, kindly refer the below link:- <https://www.royalsundaram.in/health-insurance/health-insurance-portability>

Free Look Period:

At the inception of the policy the Insured Person will be allowed a period of 30 days from the date of receipt of the policy to review the terms and conditions of the policy and to return the same if not acceptable. If Insured Person has not made any claim during the free look period, he will be entitled to the following, provided no claim has been settled or lodged for the period the policy has been in force:

- a) A refund of the premium paid less any expenses incurred by the Insurer on medical examination of the insured person and the stamp duty charges or;
- b) where the risk has already commenced and the option of return of the policy is exercised, a deduction towards the proportionate risk premium for period on cover or;
- c) Where only a part of the risk has commenced, such proportionate risk premium commensurate with the risk covered during such period.
- d) Free-look will not be applicable for policies with tenure less than one year.
- e) Free-look not applicable in case of renewals.

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

Claims in respect of Multiple Policies

If multiple certificates are issued under the same Group policy or across multiple group policies in the name of same person issued by us then we shall refund the premium of all other policies except the policy with maximum Sum Insured. However, in case of fraud or misrepresentation, all the policies will be cancelled and premium stands forfeited. If customer has multiple policies with different insurers, on occurrence of the insured event, he can claim from all Insurers under all policies

Migration

The Insured Person will have the option to migrate the Policy to other health insurance products/plans offered by the company as per extant Guidelines related to Migration. If such person is presently covered and has been continuously covered without any lapses under any health insurance product/plan offered by the company, as per Guidelines on migration, the proposed Insured Person will get all the accrued continuity benefits in waiting periods as per below:

- i. The waiting periods specified in Section D shall be reduced by the number of continuous preceding years of coverage of the Insured Person under the previous health insurance policy.
- ii. Migration benefit will be offered to the extent of sum of previous sum insured and accrued bonus/multiplier benefit (as part of the base sum insured), migration benefits shall not apply to any other additional increased Sum Insured.

For Detailed Guidelines on Migration, kindly refer the below link:- <https://www.royalsundaram.in/html/files/Modification-guidelines-on-standardization-in-health-insurance-Migration.pdf>

Moratorium

After completion of five continuous years under this policy no look back would be applied. This period of five

years is called as moratorium period. The moratorium would be applicable for the Sum Insured of the first policy and subsequently completion of five continuous years would be applicable from the date of enhancement of sum insured only on the enhanced limits. After the expiry of Moratorium Period no claim under this policy shall be contestable except for proven fraud specified in the policy contract. The policies would however be subject to all limits, sub limits, co-payments as per the policy. The accrued credits gained under the ported and migrated policies shall be counted for the purpose of calculating the Moratorium period.

Disclaimer:

Insurance is the subject matter of solicitation. Individual Personal Accident Policy (Accidental Death & Disablement only) is issued by Royal Sundaram General Insurance Company Limited. Claims will be settled by Royal Sundaram General Insurance Company Limited as per the terms and conditions of the policy. This Prospectus is not a contract of Insurance. Please refer policy document for exact terms and conditions and specific details applicable to this Insurance. This plan is underwritten by Royal Sundaram General Insurance Company Limited. Your participation in this insurance product is purely on a voluntary basis.

Prohibition of rebates:

Section 41 of the Insurance Act 1938

No person shall allow or offer to allow, 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 table of the insurer. Any person making default in complying with the provisions of this section shall be punishable with fine which may extend to five hundred rupees.

For any Complaint / Grievance / Refund / Cancellation / Claim, please contact:

In case of any grievance the insured person may contact the company through

Website: <https://www.royalsundaram.in>

Grievance Redressal: <https://www.royalsundaram.in/customer-service>

You may call us at – 1860 258 0000, 1860 425 0000

Email:

1. Please raise a complaint with us through e mail – care@royalsundaram.in, and we would come back to you with a response in 24 hours.
2. In case you are not satisfied with our response or have not received any response in 24 hours, you may write to manager.care@royalsundaram.in
3. If you feel you are not heard of or have not received any response in 2 business days, you may escalate it to head.cs@royalsundaram.in
4. In case you are not happy with our response or have not received any response in 2 business days, you may approach gro@royalsundaram.in - GRO Contact Number – 7228087400

Sr. Citizen can email us at : seniorcitizengrievances@royalsundaram.in - Senior Citizen Grievance Number - 7228933501 (A separate e-mail id for Senior Citizens has been created for the ease and convenience of Senior citizens)

Fax us at: 044 – 7117 7140

Courier us your complaint at:

Royal Sundaram General Insurance Co. Limited

Vishranthi Melaram Towers,

No.2/319, Rajiv Gandhi Salai (OMR)

Karapakkam, Chennai – 600097

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

If Insured person is not satisfied with the Redressal of grievance through one of the above methods, insured person may contact the grievance officer at

Mr. T M Shyamsunder
Grievance Redressal Officer
Royal Sundaram General Insurance Co. Limited
Vishranthi Melaram Towers,
No.2/319, Rajiv Gandhi Salai (OMR)
Karapakkam, Chennai – 600097

For updated details of grievance officer, kindly refer the link <http://www.royalsundaram.in>

If Insured person is not satisfied with the Redressal of grievance through above methods, the insured person may also approach the office of Insurance Ombudsman of the respective area/region for Redressal of grievance as per insurance Ombudsman Rules 2017.

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

Grievance may also be lodged at –

Registration of Complaints in Bima Bharosa by Policyholders:

1. Can directly register complaint in the **Bima Bharosa Portal** <https://bimabharosa.irdai.gov.in/>
2. Can send the complaint through Email to complaints@irdai.gov.in.
3. Can call Toll Free No. **155255** or **1800 4254 732**.
4. Apart from the above options, if it is felt necessary by the complainant to send the communication in physical form, the same may be sent to IRDAI addressed to:

General Manager
Insurance Regulatory and Development Authority of India(IRDAI)
Policyholder's Protection & Grievance Redressal Department – Grievance Redressal Cell.
Sy.No.115/1, Financial District, Nanakramguda,
Gachibowli, Hyderabad – 500 032.

No loading shall apply on renewals based on individual claims experience.

Insurance is the subject matter of solicitation.

Council for Insurance Ombudsmen

Contact details:

Address:

Council for Insurance Ombudsmen,
3rd Floor, Jeevan Seva Annexe,
S. V. Road, Santacruz (W),
Mumbai - 400 054.

INSURANCE OMBUDSMAN OFFICE LIST

The contact details of **Insurance Ombudsman Office** details are as below:

<https://www.cioins.co.in/ContactUs>

WHAT IF I EVER NEED TO COMPLAIN?

We hope, of course, that you will never feel the need to complain. Nevertheless, sometimes things do go wrong. When they do, we want to know straight away, so we can put them right as quickly as possible, and take steps to make sure they don't happen again.

In all instances, call our Customer Services at our Chennai office at 1860 258 0000 or e-mail at care@royalsundaram.in or write us to Royal Sundaram General Insurance Co. Limited, Vishranthi Melaram Towers, No. 2 / 319, Rajiv Gandhi Salai (OMR), Karapakkam, Chennai - 600097.

Royal Sundaram General Insurance Co. Limited

IRDAI Registration No.102. | CIN: U67200TN2000PLC045611