



CUSTOMER INFORMATION SHEET

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

Sl. No.	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy Clause Number
1	Product Name	PROFESSIONAL INDEMNITY POLICY	
2	Unique Identification Number (UIN) allotted by IRDAI	IRDAN102RP0006V01200102	Footer in all pages
3	Structure	Indemnity. Annual policy on claims made basis.	
4	Interests Insured	Professional Indemnity policy covers all sums which the Insured becomes legally liable to pay compensation including defense costs, fees and expenses anywhere in India in accordance with Indian Law.	Details as per policy schedule
5	Sum Insured	<p>Company's total liability to pay compensation for claimant's costs, fees and expenses and defense costs shall not exceed the Limit of Indemnity stated in the Policy Schedule in the form of Any One Accident (AOA) limit and Aggregate One Year (AOY) limit.</p> <ul style="list-style-type: none"> ➤ Any One Accident (AOA): It defines the maximum amount payable for each accident under the policy. ➤ Any One Year (AOY): It describes the maximum payable amount for any one year under the policy. <p>The applicant has to choose the ratio of AOA to AOY limits from any of the following choices:</p> <ul style="list-style-type: none"> ➤ 1:1, 1:2, 1:3, 1:4. 	Sum Insured Amount as per Policy Schedule
6	Policy Coverage	<ul style="list-style-type: none"> ➤ This Policy protects the Insured or qualified assistants named in the Schedule or any nurse or technician employed by the Insured against claims for damages caused by the negligent acts, errors or omissions in performance of professional activities/ services resulting in death / bodily injury of the patient. <p>Provided that such act / error / omission during the period of insurance result in claim against the insured</p> <ul style="list-style-type: none"> ➤ Claims for damages will include legal liability to pay Compensation including defense costs, fees and expenses 	2. Indemnity
7	Add-on covers	Add-on covers not applicable for this policy.	
8	Loss Participation	Not applicable	

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9	Exclusions	<p>This Policy does not cover liability</p> <ol style="list-style-type: none"> 1. assumed by the Insured by agreement and which would not have attached in the absence of such agreement. 2. arising out of deliberate, willful or intentional non-compliance of any Statutory provision. 3. arising out of loss of pure financial nature such as loss of goodwill, loss of market etc. 4. arising out of all personal injuries such as libel, slander, false arrest, wrongful eviction, wrongful detention, defamation etc. and mental injury, anguish, or shock. 5. arising out of fines, penalties, punitive or exemplary damages. 6. directly or indirectly occasioned by, happening through or in consequence of war and allied perils. 7. directly or indirectly caused by or contributed to by ionising radiations or contamination by radioactivity from any nuclear perils 8. arising out of genetic injuries caused by x-ray treatment / diagnosis or treatment/diagnosis with radioactive substances. 9. In respect of professional services rendered by the Insured prior to the Retroactive Date in the Schedule. 10. the deliberate, conscious or intentional disregard of the Insured's technical or administrative management or the need to take all reasonable steps to prevent claims. 11. Injury / death to any person under a contract of employment or apprenticeship with the Insured their contractor(s) and/or sub-Contractor(s) when such injury/death arises out of the execution of such contract. <p>No liability shall attach to the Company in respect of</p> <ol style="list-style-type: none"> (i) any criminal act or any act committed in violation of any law or ordinance (ii) services rendered while under the influence of intoxicants or narcotics (iii) the performance by dentists and dental surgeons of 1) general anesthesia or 2) any procedure carried out under general anesthesia unless performed in a Hospital, (iv) the use of drugs for weight reduction (v) Claims made against the Insured arising from the performance of cosmetic plastic surgery, hair transplants, punch grafts, flap rotations and the like (hereinafter referred to as cosmeses) it being understood that the following shall not be deemed to be cosmeses: <ol style="list-style-type: none"> (a) Anaesthetic x-ray or other medical nursing or laboratory services provided in connection with the performance of cosmesis. (b) Plastic surgical repair of scar tissue being the result of previous surgery unrelated to cosmesis performed by the Insured. 	7. Exclusions

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		(c) Plastic surgery in connection with burns or other traumatic injury. (vi) Third Party Public Liability (vii) Claims arising from any condition directly or indirectly caused by or associated with Human T-cell Lymphotropic Virus type III (HTLV 111) or LYMPHADENOPATHY ASSOCIATED VIRUS (LAV) or the mutants derivatives or variations thereof or in any way related to Acquired Immune Deficiency Syndrome or any Syndrome or condition of a similar kind howsoever it may be named.	
10	Special conditions and warranties (if any)	<p><u>(a) NOTIFICATION EXTENSION CLAUSE:</u> The clause extends cover from claims made during the policy period to include claims made after the policy period but subject to the maximum time limit laid down under the Indian Limitation Act in force from time to time.</p> <p><u>(b) EXTENDED CLAIM REPORTING CLAUSE:</u> The Company will allow a time limit not exceeding 90 days from the date of expiry or cancellation of the policy provided no insurance is in force during this extended reporting period of the same interest, for notification of claims for accidents which had taken place during the period of insurance.</p> <p><u>(c) CLAIM SERIES CLAUSE:</u> A Claims Series Event shall be defined as a series of two or more claims arising from one specific common cause and shall be deemed to be one claim and date of loss shall be the date when the first claim of the Claims Series Event is made in writing against the Insured</p> <p>1. The insurer can cancel the policy only on the ground of established Fraud, by giving minimum notice of 7 days of retail policy holder. However, you can cancel the policy at any time during the policy period by informing the Company. In the event of cancellation, the company will refund proportionate premium for the unexpired policy period, if the term of the policy is up to one year and there is no claim(s) made during the policy period.</p> <p>2. Multiple policies involving Bank or other lending or financing entity If there is more than one insurance policy covering the same risk, the insurer will not apply contribution clause. Under insurance will be applied on an overall basis taking into consideration the sum insured under all policies and comparing it with the value at risk.</p>	5a. Notification extension clause 5b. Extended claim reporting clause 6. Claims series clause 8. General Conditions

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11	Admissibility of Claim	<p><u>Admissibility of Claim:</u> The claim will be admissible as per the terms and conditions of the policy.</p> <p><u>Denial of Claim:</u> A claim under the policy can be denied -</p> <ul style="list-style-type: none"> • if the claim is false or fraudulent or if you support a claim with any false or fraudulent statement or documents. The policy will also be cancelled. • If the acts / Services rendered by Professionals while under the influence of intoxicants or narcotics. • For Losses which fall under the policy exclusions. • If the loss happens outside India. <p><u>Duties Following an Accident</u></p> <ul style="list-style-type: none"> ➤ No admission, offer, promise or payment shall be made or given by or on behalf of the Insured without the written consent of the Company. ➤ The Insured shall give all such information and assistance as the Company may reasonably require 	As per Policy wording General Conditions
12	Policy Servicing – Claim intimation and Processing	<p>For queries related to policy/claim servicing, please contact us at 18602580000 /18604250000 or write to us at care@royalsundaram.in.</p> <ul style="list-style-type: none"> ➤ The Insured shall give written notice to the Company as soon as reasonably practicable of any claim made against the Insured (or any specific event or circumstance that may give rise to a claim being made against the Insured) <p>The company will assign a surveyor to investigate the claim and estimate the damage.</p> <p>Documents required to be submitted by insured for Claim processing:</p> <ul style="list-style-type: none"> ➤ Claim form, ➤ Detailed note on the event leading to the loss, Any Legal notice / summon received from the aggrieved party, ➤ Defense initiated from your end, if so what are the grounds, Post Mortem Report in case of Death Claim, ➤ Disability certificate in case of Disability claims, ➤ KYC documents PAN, ROC certificate, Aadhaar, GST Registration Certificate Etc., ➤ Any other Document based on nature of claim <p>All amounts expended by the Company in the defense settlement or payment of any claim will reduce the limits of indemnity specified in the Schedule of the Policy.</p> <p>The Court decides the liability amount and the same will be settled by the Insurance Company.</p>	

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13	Grievance Redressal and Policyholders Protection	<p>1. In case of any grievance You may contact the company through Website: https://www.royalsundaram.in/customer-service Contact Numbers: 1860 258 0000, 1860 425 0000 E-mail: manager.care@royalsundaram.in Sr. Citizen can email us at: seniorcitizengrievances@royalsundaram.in Fax: 044-7117 7140 Courier: Grievance Redressal Unit Royal Sundaram General Insurance Co. Limited Vishranthi Melaram Towers, No.2/319, Rajiv Gandhi Salai (OMR) Karapakkam, Chennai – 600097.</p> <p>You may also approach the grievance cell at any of the company's branches with the details of grievance. If You are not satisfied with the redressal of grievance through one of the above methods, You may contact the grievance officer</p> <p>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.</p> <p>For updated details of grievance officer, kindly refer the link http://www.royalsundaram.in.</p> <p>If You are not satisfied with the redressal of grievance through above methods, the You may also approach the office of Insurance Ombudsman of the respective area/region for redressal of grievance as per Insurance Ombudsman Rules 2017. Grievance may also be lodged at IRDAI Integrated Grievance Management system https://bimabharosa.irdai.gov.in.</p> <p>2. Consumer Affairs Department of IRDAI</p> <p>a. In case if it is not resolved within 15 days or if You are unhappy with the resolution, You can approach the Grievance Redressal Cell of the Consumer Affairs Department of IRDAI by calling Toll Free Number 155255 (or) 1800 4254 732 or sending an e-mail to complaints@irdai.gov.in. You can also make use of IRDAI's online portal – Bima Bharosa Portal by registering Your complaint at https://bimabharosa.irdai.gov.in/</p> <p>b. You can send a letter to IRDAI with Your complaint on a Complaint Registration Form available by clicking here. You must fill and send the Complaint Registration Form along with any documents by post or courier to General Manager, Insurance Regulatory and Development Authority of India (IRDAI), Consumer Affairs Department - Grievance Redressal Cell, Sy.No.115/1, Financial District, Nanakramguda, Gachibowli, Hyderabad-500032.</p> <p>c. You can visit the portal https://bimabharosa.irdai.gov.in/ for more</p>	9. General Conditions – Grievance Redressal Procedure

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		<p>details.</p> <p>3. <u>Insurance Ombudsman</u></p> <p>You can approach the Insurance Ombudsman depending on the nature of grievance and financial implication, if any. Information about Insurance Ombudsmen, their jurisdiction and powers is available on the website of the Insurance Regulatory and Development Authority of India (IRDAI) at www.irdai.gov.in or of the General Insurance Council at https://www.cioins.co.in/ombudsman or on company website www.royalsundaram.in.</p>	
14	Obligations of the Policy holder	<p>a) Make true statements and full disclosure in the proposal and claim documents. Non-disclosure or withhold of any material information may affect the claim settlement.</p> <p>b) The Insured shall give notice as soon as reasonably practicable of any fact, event or circumstance which materially changes the information supplied to the Company at the time when this policy was effective, and the Company may amend the terms of this policy according to the materiality of such change.</p>	8. General Conditions

Declaration by the Policyholder:

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

Place:

Date:

Signature of the Policyholder

Note: In case of any conflict, the terms and conditions mentioned in the policy document shall prevail.