

## CUSTOMER INFORMATION SHEET

**This document provides only key information about your policy. Please refer to the policy document for detailed terms and conditions.**

| Sl. No . | Title                                                | Description (Please refer to applicable Policy Clause Number in next column)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Policy / Clause Number |  |             |    |                             |               |    |                            |               |    |                  |               |    |                                     |               |    |                                   |               |    |                       |               |    |              |               |    |                                           |               |    |                                 |               |     |                                                  |               |    |
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| 1        | Product Name                                         | Golfer's Insurance                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | NA                     |  |             |    |                             |               |    |                            |               |    |                  |               |    |                                     |               |    |                                   |               |    |                       |               |    |              |               |    |                                           |               |    |                                 |               |     |                                                  |               |    |
| 2        | Unique Identification Number (UIN) allotted by IRDAI | IRDAN132RPMS0010V01201112                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | NA                     |  |             |    |                             |               |    |                            |               |    |                  |               |    |                                     |               |    |                                   |               |    |                       |               |    |              |               |    |                                           |               |    |                                 |               |     |                                                  |               |    |
| 3        | Structure                                            | Indemnity                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | NA                     |  |             |    |                             |               |    |                            |               |    |                  |               |    |                                     |               |    |                                   |               |    |                       |               |    |              |               |    |                                           |               |    |                                 |               |     |                                                  |               |    |
| 4        | Interests Insured                                    | Risks in relation to use of Golfing Equipments                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | NA                     |  |             |    |                             |               |    |                            |               |    |                  |               |    |                                     |               |    |                                   |               |    |                       |               |    |              |               |    |                                           |               |    |                                 |               |     |                                                  |               |    |
| 5        | Sum Insured                                          | <div><div>&lt;&lt;&lt;</div><table><thead><tr><th colspan="2">Section</th><th>Sum Insured</th></tr></thead><tbody><tr><td>1.</td><td>Damage to Golfing Equipment</td><td>&lt;&lt; INR XXX &gt;&gt;</td></tr><tr><td>2.</td><td>Theft of Golfing Equipment</td><td>&lt;&lt; INR XXX &gt;&gt;</td></tr><tr><td>3.</td><td>Public Liability</td><td>&lt;&lt; INR XXX &gt;&gt;</td></tr><tr><td>4.</td><td>Personal Accident Cover for Insured</td><td>&lt;&lt; INR XXX &gt;&gt;</td></tr><tr><td>5.</td><td>Personal Accident Cover for Caddy</td><td>&lt;&lt; INR XXX &gt;&gt;</td></tr><tr><td>6.</td><td>Hospitalization Cover</td><td>&lt;&lt; INR XXX &gt;&gt;</td></tr><tr><td>7.</td><td>Dental Cover</td><td>&lt;&lt; INR XXX &gt;&gt;</td></tr><tr><td>8.</td><td>Accidental Damage to Third Party Property</td><td>&lt;&lt; INR XXX &gt;&gt;</td></tr><tr><td>9.</td><td>Hole in One {For Amateurs Only}</td><td>&lt;&lt; INR XXX &gt;&gt;</td></tr><tr><td>10.</td><td>Reimbursement of subscriptions and pre-paid fees</td><td>&lt;&lt; INR XXX &gt;&gt;</td></tr></tbody></table><div>&gt;&gt;&gt;</div><div>Disclaimer: Only opted coverage will be reflected</div></div> | Section                |  | Sum Insured | 1. | Damage to Golfing Equipment | << INR XXX >> | 2. | Theft of Golfing Equipment | << INR XXX >> | 3. | Public Liability | << INR XXX >> | 4. | Personal Accident Cover for Insured | << INR XXX >> | 5. | Personal Accident Cover for Caddy | << INR XXX >> | 6. | Hospitalization Cover | << INR XXX >> | 7. | Dental Cover | << INR XXX >> | 8. | Accidental Damage to Third Party Property | << INR XXX >> | 9. | Hole in One {For Amateurs Only} | << INR XXX >> | 10. | Reimbursement of subscriptions and pre-paid fees | << INR XXX >> | NA |
| Section  |                                                      | Sum Insured                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                        |  |             |    |                             |               |    |                            |               |    |                  |               |    |                                     |               |    |                                   |               |    |                       |               |    |              |               |    |                                           |               |    |                                 |               |     |                                                  |               |    |
| 1.       | Damage to Golfing Equipment                          | << INR XXX >>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                        |  |             |    |                             |               |    |                            |               |    |                  |               |    |                                     |               |    |                                   |               |    |                       |               |    |              |               |    |                                           |               |    |                                 |               |     |                                                  |               |    |
| 2.       | Theft of Golfing Equipment                           | << INR XXX >>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                        |  |             |    |                             |               |    |                            |               |    |                  |               |    |                                     |               |    |                                   |               |    |                       |               |    |              |               |    |                                           |               |    |                                 |               |     |                                                  |               |    |
| 3.       | Public Liability                                     | << INR XXX >>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                        |  |             |    |                             |               |    |                            |               |    |                  |               |    |                                     |               |    |                                   |               |    |                       |               |    |              |               |    |                                           |               |    |                                 |               |     |                                                  |               |    |
| 4.       | Personal Accident Cover for Insured                  | << INR XXX >>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                        |  |             |    |                             |               |    |                            |               |    |                  |               |    |                                     |               |    |                                   |               |    |                       |               |    |              |               |    |                                           |               |    |                                 |               |     |                                                  |               |    |
| 5.       | Personal Accident Cover for Caddy                    | << INR XXX >>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                        |  |             |    |                             |               |    |                            |               |    |                  |               |    |                                     |               |    |                                   |               |    |                       |               |    |              |               |    |                                           |               |    |                                 |               |     |                                                  |               |    |
| 6.       | Hospitalization Cover                                | << INR XXX >>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                        |  |             |    |                             |               |    |                            |               |    |                  |               |    |                                     |               |    |                                   |               |    |                       |               |    |              |               |    |                                           |               |    |                                 |               |     |                                                  |               |    |
| 7.       | Dental Cover                                         | << INR XXX >>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                        |  |             |    |                             |               |    |                            |               |    |                  |               |    |                                     |               |    |                                   |               |    |                       |               |    |              |               |    |                                           |               |    |                                 |               |     |                                                  |               |    |
| 8.       | Accidental Damage to Third Party Property            | << INR XXX >>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                        |  |             |    |                             |               |    |                            |               |    |                  |               |    |                                     |               |    |                                   |               |    |                       |               |    |              |               |    |                                           |               |    |                                 |               |     |                                                  |               |    |
| 9.       | Hole in One {For Amateurs Only}                      | << INR XXX >>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                        |  |             |    |                             |               |    |                            |               |    |                  |               |    |                                     |               |    |                                   |               |    |                       |               |    |              |               |    |                                           |               |    |                                 |               |     |                                                  |               |    |
| 10.      | Reimbursement of subscriptions and pre-paid fees     | << INR XXX >>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                        |  |             |    |                             |               |    |                            |               |    |                  |               |    |                                     |               |    |                                   |               |    |                       |               |    |              |               |    |                                           |               |    |                                 |               |     |                                                  |               |    |
| 6        | Policy Coverage                                      | <ul style="list-style-type: none"><li><b>Section 1- Damage to Golfing Equipment</b><br/>The Company will pay for damage to the Insured Golfing equipment occurring anywhere within the territorial limits.</li><li><b>Section 2- Theft of Golfing Equipment</b><br/>The Company will pay for loss or damage to the insured equipment arising from theft or attempted theft other than from a motor vehicle occurring anywhere within the territorial limits.</li><li><b>Section 3- Public Liability</b><br/>The Company will indemnify the Insured against its legal liability (including Defense Costs) to pay Damages for third party civil Claims arising out of Bodily Injury or Property Damage caused by The Insured whilst playing or practicing golf on any recognized golf course anywhere within the territorial limits.</li><li><b>Section 4 - Personal Accident Cover for Insured</b></li></ul>                                                                                                                                                                                                                                                                          | Clause A               |  |             |    |                             |               |    |                            |               |    |                  |               |    |                                     |               |    |                                   |               |    |                       |               |    |              |               |    |                                           |               |    |                                 |               |     |                                                  |               |    |

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|  |  | <p>The Company will pay the Insured or the nominee in the event of an Accidental Bodily Injury, sustained by the Insured whilst playing or practicing golf on any recognized golf course anywhere in the world, resulting in:</p> <p><u>Coverage</u> - A. Accidental Death<br/>B. Permanent Total Disablement<br/>C. Permanent Partial Disablement</p> <ul style="list-style-type: none"> <li>• <b>Section 5- Personal Accident Cover for Caddy</b><br/>Following an Accidental Bodily Injury sustained by the Insured's Caddy on any recognized golf course anywhere in the world during the Policy Period which results in any of the events listed in the Table of Events, the Company will pay Insured or the nominee such percentage stated against the event in the Table of Events of the sum insured stated in the Schedule.</li> <li>• <b>Section 6- Hospitalization Cover</b><br/>The Company will reimburse the Insured, Reasonable and Customary Medical Expenses incurred in the event Insured is hospitalized on the advice of a Medical Practitioner because of accidental Bodily Injury sustained during the Policy Period whilst playing or practicing golf on any recognized golf course anywhere in the world.</li> <li>• <b>Section 7- Dental Cover</b><br/>The Company will indemnify the Insured for each and every loss in respect of any emergency dental pain relief while struck by a golf ball whilst playing or practicing golf on any recognized golf course or driving range anywhere within the territorial limits.</li> <li>• <b>Section 8- Accidental Damage to Third Party Property</b><br/>The Company will indemnify the Insured for each and every loss in respect of accidental damage to third party property struck by a golf ball which was hit by the Insured whilst playing or practicing golf on any recognized golf course or driving range anywhere within the territorial limits provided that the incident is reported to the recognized golf club secretary or driving range official by the Insured within 7 (seven) days of the occurrence.</li> <li>• <b>Section 9 - Hole in One {For Amateurs Only}</b><br/>In the event of completion by the insured of any hole in one stroke gross during: Any organized tournament, and or for normal golf rounds (completed 18 holes) within a recognized golf course. The company shall pay for the immediate expenses for celebration to the insured on production by the insured to the company written confirmation from the secretary of the recognized golf club or course stating that the hole in one has been performed to the satisfaction of the recognized golf club or course, together with the insured's original score card fully completed and duly signed by the playing partner and the golf club or course secretary along with the original bills of expenditure for the celebration.</li> <li>• <b>Section 10- Reimbursement of subscriptions and pre-paid fees</b><br/>The Company will reimburse the Insured for subscriptions or fees pre-paid to any one of the Insured's golf club should the Insured suffer any accident or illness declaring itself following an accident, whilst playing golf during the period of insurance causing the Insured to remain unable to play golf for more than fifty days, such repayment being paid pro rata up to the Insured's annual subscription of fees up to a maximum amount as mentioned in the Policy Schedule.</li> </ul> |  |
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| 7                                                                                      | Add-on Cover / Optional Cover | No Add-ons available under this product.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | NA          |        |           |                 |               |               |                                                                                        |              |                    |               |    |
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| 8                                                                                      | Loss Participation            | <p>&lt;&lt;INR XX&gt;&gt;</p> <p><b>Illustration</b></p> <table><tr><th>Description</th><th>Amount</th></tr><tr><td>Policy SI</td><td>INR 1,00,00,000</td></tr><tr><td>Claim Amount:</td><td>INR 57,00,000</td></tr><tr><td>Policy Deductible:<br/>5% of the claim amount,<br/>applicable on each and<br/>every claim</td><td>INR 2,85,000</td></tr><tr><td>Net Payable amount</td><td>INR 54,15,000</td></tr></table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Description | Amount | Policy SI | INR 1,00,00,000 | Claim Amount: | INR 57,00,000 | Policy Deductible:<br>5% of the claim amount,<br>applicable on each and<br>every claim | INR 2,85,000 | Net Payable amount | INR 54,15,000 | NA |
| Description                                                                            | Amount                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |             |        |           |                 |               |               |                                                                                        |              |                    |               |    |
| Policy SI                                                                              | INR 1,00,00,000               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |             |        |           |                 |               |               |                                                                                        |              |                    |               |    |
| Claim Amount:                                                                          | INR 57,00,000                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |             |        |           |                 |               |               |                                                                                        |              |                    |               |    |
| Policy Deductible:<br>5% of the claim amount,<br>applicable on each and<br>every claim | INR 2,85,000                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |             |        |           |                 |               |               |                                                                                        |              |                    |               |    |
| Net Payable amount                                                                     | INR 54,15,000                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |             |        |           |                 |               |               |                                                                                        |              |                    |               |    |
| 9                                                                                      | Exclusions                    | <p><b>Special Exclusions</b></p> <p><b>&lt;&lt;&lt; Exclusion applicable to Section 1- Damage to Golfing Equipment</b><br/>The Company shall not be liable under this Section for:</p> <ol style="list-style-type: none"><li>1. The first 10a of each and every loss under this section in respect of any one occurrence.</li><li>2. Theft or attempted theft of The Insured equipment.</li><li>3. Loss or damage caused by moth, vermin, atmospheric or climatic conditions, mechanical or electrical failure, any process of cleaning restoring or alteration.</li><li>4. Loss of or damage to golf balls trinkets, trophies, medals, coins, money, credit or charge cards, documents, stamps. &gt;&gt;&gt;</li></ol> <p><b>&lt;&lt;&lt; Exclusions applicable to Section 2- Theft of Golfing Equipment</b><br/>The Company shall not be liable under this Section in respect of:</p> <ol style="list-style-type: none"><li>1. The first 10% in respect of any loss other than where a total loss of all equipment arises.</li><li>2. Theft or attempted theft of the Insured equipment left unattended in the open other than within the confines of any recognized golf course or driving range.</li><li>3. Loss of or damage to golf balls trinkets, trophies, medals, coins, money, credit or charge cards, documents, stamps. &gt;&gt;&gt;</li></ol> <p><b>&lt;&lt;&lt; Exclusions Applicable to Section 3- Public Liability</b><br/>The Company shall not be liable under this section for:</p> <ol style="list-style-type: none"><li>1. Loss or destruction or damage to property belonging to or in the care custody or control of The Insured.</li><li>2. Bodily injury to The Insured or any person under a contract of service or apprenticeship with The Insured and arising out of and in the course of his employment by The Insured other than a person who is temporarily employed as a caddy to The Insured.</li><li>3. The ownership possession or use (other than use as a passenger having no right of control) of any mechanically propelled driven vehicle other</li></ol> | Clause A    |        |           |                 |               |               |                                                                                        |              |                    |               |    |

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|  |  | <p>than the use of a motorized pull type golf trolley whilst in use on any recognized golf course.</p> <ol style="list-style-type: none"> <li>4. Any agreed assumption of risk by the Insured, save to the extent that liability would have attached in the absence of such agreement.</li> <li>5. Any Accident arising out of the deliberate, willful or intentional non-compliance with any statutory provision.</li> <li>6. Damage to property belonging to the recognized golf club or driving range on which The Insured is playing or practicing golf. &gt;&gt;&gt;</li> </ol> <p><b>&lt;&lt;&lt; Exclusions Applicable for Sections 4, 5 6 &amp; 7</b></p> <p>The Company will not pay for any compensation, benefit or expenses in respect of Death, Injury or Disablement, Accidental Medical Expenses or Dental Coverage of the Insured person as a consequence of the following:</p> <ol style="list-style-type: none"> <li>I. Intentional self injury (including but not limited to the use or misuse of any intoxicating drugs or alcohol]</li> <li>II. Accident while under the influence of alcohol or drugs.</li> <li>III. Participation in an actual or attempted felony, riot, crime, misdemeanor or civil commotion</li> <li>IV. Any accident of which a contributing cause was Your actual or attempted commission of, or willful participation in, an illegal act or any violation or attempted violation of the law or Your resistance to arrest.</li> <li>V. Curative treatments or interventions that You carry out or have carried out on Your body</li> <li>VI. Pregnancy and childbirth, miscarriage, abortion or complications arising out of any of these</li> <li>VII. Any existing disablement prior to the inception of the policy</li> <li>VIII. Venereal or sexually transmitted diseases, HIV (Human Immunodeficiency Virus} or HIV related illness including AIDS (Acquired Immune Deficiency Syndrome) and / or mutant derivatives or variations however caused.</li> <li>IX. Any medical expenses, services, supplies or treatment or hospital stay which were not recommended or approved as medically necessary by a Physician.</li> <li>X. Any expense incurred which is not exclusively medical in nature</li> <li>XI. Expenses incurred for emergency medical evacuation &gt;&gt;&gt;</li> </ol> <p>• <b>&lt;&lt;&lt; Exclusions Applicable to Section 8- Accidental Damage to Third Party Property</b></p> <p>The Company shall not be liable for:</p> <ol style="list-style-type: none"> <li>1. Loss or destruction or damage to property belonging to or in the care custody or control of The Insured.</li> <li>2. Any incident not reported in the manner described above within 7 (seven) days of the incident or the occurrence.</li> <li>3. Damage to property belonging to the recognised golf club or driving range on which the Insured is playing or practicing golf.</li> <li>4. More than 3 (three) claims during any one period of insurance. &gt;&gt;&gt;</li> </ol> <p><b>General Exclusions</b></p> <p>No indemnity is available hereunder and no payment will be made by the Company for any claim directly or indirectly caused by, based on, arising out of or howsoever attributable to any of the following:</p> <ol style="list-style-type: none"> <li>1. War, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, rebellion, revolution, insurrection military or</li> </ol> |  |
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|                                           |                                            | <p>usurped power of civil commotion or loot or pillage in connection herewith.</p> <p>2. Loss or damage caused by depreciation or wear and tear.</p> <p>3. Consequential loss of any kind or description.</p> <p>4. Any legal liability of whatsoever nature directly or indirectly caused by or contributed to by or arising from:</p> <p>a. Ionising radiations or contaminations by radioactivity from any nuclear fuel or from any nuclear wastes from the combustion of nuclear fuel.</p> <p>b. The radioactive toxic explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.</p> <p>c. Arising out or in connection with any willful malicious or criminal act of the Insured person.</p> <p>d. Any claim caused by or to, or arising from the failure of any computer hardware or software or other electrical equipment.</p> <p>e. Any loss or damage or cost or expense of whatsoever nature directly or indirectly caused or occasioned by or happening through or in consequence of terrorism or any action taken in controlling, preventing or suppressing any acts of terrorism or in any way relating thereto.</p> |             |        |                     |       |                                   |      |                              |     |                   |             |                                           |      |    |
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| 10                                        | Special Conditions and warranties (if any) | <<Any Special Conditions or Warranties >>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | NA          |        |                     |       |                                   |      |                              |     |                   |             |                                           |      |    |
| 11                                        | Admissibility of Claim                     | <p>1. Broad principle of Admissibility or Denial of claim</p> <ul style="list-style-type: none"><li>Insurance is a contract between 2 entities &amp; loss governing contracts as well as tort shall be underlying guideline for admission or denial of claim.</li><li>Further specific terms and conditions as well as warranties incorporated in the contract shall also play a major role</li><li>Insured is expected to exhibit reasonable duty of due care and diligence failing with a claim may get rejected.</li><li>Insurance is a contract of utmost good faith and any mis-declaration or omission to state material facts can prejudice a claim.</li></ul> <p>2. Sample Claim Calculation (only applicable for Market value or RIV basis of settlement)</p> <table><tr><th>Description</th><th>Amount</th></tr><tr><td>Gross Loss Assessed</td><td>10000</td></tr><tr><td>Less: Depreciation, if applicable</td><td>1000</td></tr><tr><td>Less: Salvage, if applicable</td><td>500</td></tr><tr><td><b>Gross Loss</b></td><td><b>8500</b></td></tr><tr><td>Less: Under Insurance*, if applicable 20%</td><td>1700</td></tr></table>                                   | Description | Amount | Gross Loss Assessed | 10000 | Less: Depreciation, if applicable | 1000 | Less: Salvage, if applicable | 500 | <b>Gross Loss</b> | <b>8500</b> | Less: Under Insurance*, if applicable 20% | 1700 | NA |
| Description                               | Amount                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |             |        |                     |       |                                   |      |                              |     |                   |             |                                           |      |    |
| Gross Loss Assessed                       | 10000                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |             |        |                     |       |                                   |      |                              |     |                   |             |                                           |      |    |
| Less: Depreciation, if applicable         | 1000                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |             |        |                     |       |                                   |      |                              |     |                   |             |                                           |      |    |
| Less: Salvage, if applicable              | 500                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |             |        |                     |       |                                   |      |                              |     |                   |             |                                           |      |    |
| <b>Gross Loss</b>                         | <b>8500</b>                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |             |        |                     |       |                                   |      |                              |     |                   |             |                                           |      |    |
| Less: Under Insurance*, if applicable 20% | 1700                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |             |        |                     |       |                                   |      |                              |     |                   |             |                                           |      |    |

|                                                          |                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                     |      |                             |      |                  |      |             |        |                                   |              |                              |              |            |              |                                                          |     |  |
|----------------------------------------------------------|----------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|------|-----------------------------|------|------------------|------|-------------|--------|-----------------------------------|--------------|------------------------------|--------------|------------|--------------|----------------------------------------------------------|-----|--|
|                                                          |                                                    | <table><tr><td>Gross Assessed Loss</td><td>6800</td></tr><tr><td>Less: Excess, if applicable</td><td>1000</td></tr><tr><td>Net Loss Payable</td><td>5800</td></tr></table><br><b>Calculation of Under Insurance -</b> <table><tr><td>Description</td><td>Amount</td></tr><tr><td>Value at risk of Insured property</td><td>Rs. 5,00,000</td></tr><tr><td>Sum Insured opted by Insured</td><td>Rs. 4,00,000</td></tr><tr><td>Difference</td><td>Rs. 1,00,000</td></tr><tr><td>Under Insurance % (Rs. 1,00,000 divided by Rs. 5,00,000)</td><td>20%</td></tr></table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Gross Assessed Loss | 6800 | Less: Excess, if applicable | 1000 | Net Loss Payable | 5800 | Description | Amount | Value at risk of Insured property | Rs. 5,00,000 | Sum Insured opted by Insured | Rs. 4,00,000 | Difference | Rs. 1,00,000 | Under Insurance % (Rs. 1,00,000 divided by Rs. 5,00,000) | 20% |  |
| Gross Assessed Loss                                      | 6800                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                     |      |                             |      |                  |      |             |        |                                   |              |                              |              |            |              |                                                          |     |  |
| Less: Excess, if applicable                              | 1000                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                     |      |                             |      |                  |      |             |        |                                   |              |                              |              |            |              |                                                          |     |  |
| Net Loss Payable                                         | 5800                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                     |      |                             |      |                  |      |             |        |                                   |              |                              |              |            |              |                                                          |     |  |
| Description                                              | Amount                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                     |      |                             |      |                  |      |             |        |                                   |              |                              |              |            |              |                                                          |     |  |
| Value at risk of Insured property                        | Rs. 5,00,000                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                     |      |                             |      |                  |      |             |        |                                   |              |                              |              |            |              |                                                          |     |  |
| Sum Insured opted by Insured                             | Rs. 4,00,000                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                     |      |                             |      |                  |      |             |        |                                   |              |                              |              |            |              |                                                          |     |  |
| Difference                                               | Rs. 1,00,000                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                     |      |                             |      |                  |      |             |        |                                   |              |                              |              |            |              |                                                          |     |  |
| Under Insurance % (Rs. 1,00,000 divided by Rs. 5,00,000) | 20%                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                     |      |                             |      |                  |      |             |        |                                   |              |                              |              |            |              |                                                          |     |  |
| 12                                                       | Policy Servicing – Claim Intimation and Processing | <ul style="list-style-type: none"><li>Toll free / IVRS number: 1800 220 233 / 1860-500-3333 / 022-67837800</li><li>Website: <a href="https://generalicentralinsurance.com">https://generalicentralinsurance.com</a></li><li>Email: <a href="mailto:GCclaims@generalicentral.com">GCclaims@generalicentral.com</a></li><li>Details of designated company officials to be contacted in time of claim –</li></ul> <p>&lt;&lt;&lt; Branch Policy - Branch Manager &amp; Policy Servicing Office address and contact details<br/>For example –<br/><i>Branch Manager</i><br/>Address - Off Code- 3N, 3rd Floor, No. 310, Radhe Arcade, Near Diwan Ballubhai High School, Maninagar, Maninagar, Gujarat<br/>Pincode:380008.<br/>Phone: +91 079-25464166 &gt;&gt;&gt;</p> <p>&lt;&lt;&lt;Direct Policy –<br/>Generali Central Insurance Company Limited (Formerly known as Future Generali India Insurance Company Limited),<br/>Ph: 1800 220 233 / 1860-500-3333 / 022-67837800<br/>Email: <a href="mailto:GCclaims@generalicentral.com">GCclaims@generalicentral.com</a><br/>Address: Generali Central Insurance Company Limited, Unit 801 and 802, 8th floor, Tower C, Embassy 247 Park, L.B.S. Marg, Vikhroli (W), Mumbai - 400 083&gt;&gt;&gt;</p> <ul style="list-style-type: none"><li>Details of procedure to be followed for reimbursement of claim<ul style="list-style-type: none"><li>- Intimate claims immediately upon occurrence of any event.</li><li>- To intimate claim, send email to <a href="mailto:GCclaims@generalicentral.com">GCclaims@generalicentral.com</a> or call at our helpline number 1800-220-233/1860-500-3333.</li><li>- Customer to use the same claim number for all communications.</li><li>- Surveyor appointment as per regulatory guidelines.</li><li>- Preserve all records of damages, purchases invoices, reinstatement invoices, reports of police and other authorities concerned, photographs &amp; any other documents may be called for.</li></ul></li></ul> | NA                  |      |                             |      |                  |      |             |        |                                   |              |                              |              |            |              |                                                          |     |  |

|       |                                                   | <ul style="list-style-type: none"><li>- Do not take any actions that may compromise your claim as well as deny any opportunity to assess the claim.</li><li>- Upon completion of all formalities, Insurance company shall confirm decision on acceptance of liability.</li><li>- If claim is admissible and KYC/AML documents are already available with Insurer; claims payment shall be processed by NEFT mode of payment.</li></ul> <ul style="list-style-type: none"><li>• <b>Turn Around Time (TAT) for claims settlement</b></li></ul> <table><tr><th>S. No</th><th>Stages of claim</th><th>Times lines for settlement of claims</th></tr><tr><td>1.</td><td>Appointment of surveyor, if applicable.</td><td>Immediately, in any case within 24 hours of the receipt of intimation from the insured</td></tr><tr><td>2.</td><td>Submission of survey report</td><td>within 15 days of appointment subject to all documents required to conclude assessment being submitted on the same day of intimation. If else, 15 days from the receipt of last document</td></tr><tr><td>3</td><td>Settlement of claim</td><td>Within 7 days of receipt of survey report or 22 days from submission of all documents required to assess a claim.</td></tr></table> <ul style="list-style-type: none"><li>• Escalation Matrix when TAT is not satisfied:<br/><a href="https://generalcentralinsurance.com/customer-service/grievance-redressal">generalcentralinsurance.com/customer-service/grievance-redressal</a></li></ul> | S. No | Stages of claim | Times lines for settlement of claims | 1. | Appointment of surveyor, if applicable. | Immediately, in any case within 24 hours of the receipt of intimation from the insured | 2. | Submission of survey report | within 15 days of appointment subject to all documents required to conclude assessment being submitted on the same day of intimation. If else, 15 days from the receipt of last document | 3 | Settlement of claim | Within 7 days of receipt of survey report or 22 days from submission of all documents required to assess a claim. |  |
|-------|---------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|-----------------|--------------------------------------|----|-----------------------------------------|----------------------------------------------------------------------------------------|----|-----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---------------------|-------------------------------------------------------------------------------------------------------------------|--|
| S. No | Stages of claim                                   | Times lines for settlement of claims                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |       |                 |                                      |    |                                         |                                                                                        |    |                             |                                                                                                                                                                                          |   |                     |                                                                                                                   |  |
| 1.    | Appointment of surveyor, if applicable.           | Immediately, in any case within 24 hours of the receipt of intimation from the insured                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |       |                 |                                      |    |                                         |                                                                                        |    |                             |                                                                                                                                                                                          |   |                     |                                                                                                                   |  |
| 2.    | Submission of survey report                       | within 15 days of appointment subject to all documents required to conclude assessment being submitted on the same day of intimation. If else, 15 days from the receipt of last document                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |       |                 |                                      |    |                                         |                                                                                        |    |                             |                                                                                                                                                                                          |   |                     |                                                                                                                   |  |
| 3     | Settlement of claim                               | Within 7 days of receipt of survey report or 22 days from submission of all documents required to assess a claim.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |       |                 |                                      |    |                                         |                                                                                        |    |                             |                                                                                                                                                                                          |   |                     |                                                                                                                   |  |
| 13.   | Grievance Redressal and Policy holders Protection | <ul style="list-style-type: none"><li>• State the brief details of Protection of Policyholder's Interest - <a href="https://generalcentralinsurance.com/policies">https://generalcentralinsurance.com/policies</a></li><li>• Details of Grievance Redressal Officer of the Insurer - <a href="mailto:gcicare@generalcentral.com">gcicare@generalcentral.com</a></li><li>• Bima Bharosa Portal - <a href="http://bimabharosa.irdai.gov.in">bimabharosa.irdai.gov.in</a></li><li>• Ombudsman - <a href="https://www.cioins.co.in/Ombudsman">https://www.cioins.co.in/Ombudsman</a></li></ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | NA    |                 |                                      |    |                                         |                                                                                        |    |                             |                                                                                                                                                                                          |   |                     |                                                                                                                   |  |
| 14.   | Obligations of the Policyholder                   | <ul style="list-style-type: none"><li>• To disclose all information correctly sought by the insurer at time of filling the proposal form</li><li>• In case of any change / modification / addition to the already declared information the same shall be brought to the notice of the Insurer immediately</li><li>• Non-disclosure of material information may affect the claim settlement.</li></ul> <p>Material information is very subjective and below are few examples:</p> <ul style="list-style-type: none"><li>• Risk location</li><li>• Security measures</li><li>• Risk occupancy</li><li>• Case specific material facts or risk details</li></ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | NA    |                 |                                      |    |                                         |                                                                                        |    |                             |                                                                                                                                                                                          |   |                     |                                                                                                                   |  |

Declaration by the Policyholder.

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

Place:

Date:

(Signature of the Policyholder)



(Authorized Signatory, where policyholder is a juridical person)  
(Stamp of the legal entity)

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**Note:**

- i. Website link for documents: - <https://generalicentralinsurance.com/customer-service/downloads>
- ii. In case of any conflict, the terms and conditions mentioned in the policy document shall prevail.

**Generali Central Insurance Company Limited (Formerly known as Future Generali India Insurance Company Limited) | Registered Office:** Unit No. 801 & 802, 8<sup>th</sup> Floor, Tower C, Embassy 247 Park, LBS Marg, Vikhroli (West), Mumbai – 400083 | **IRDAI Regn. No.:** 132 | **CIN:** U66030MH2006PLC165287 | **Website:** <https://generalicentralinsurance.com> | **Email ID:** [gcicare@generalicentral.com](mailto:gcicare@generalicentral.com) | **Toll-free Phone:** 1800 220 233 / 1860 500 3333/ 022 6783 7800