



Welcome to your Policy.

## Saral Suraksha Bima Policy, Zuno General Insurance Limited

### Customer Information Sheet/ Know Your Policy

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

S No	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy Clause Number
1	Name of the Insurance Product/Policy	Saral Suraksha Bima Policy, Zuno General Insurance Limited	
2	Policy Number	<Policy Number>	
3	Type of Insurance Product/Policy	Benefit	
4	Sum Insured	Individual Sum Insured <Sum Insured opted>	
5	Policy Coverage (What the Policy Covers)	<p>Expenses in respect of:</p> <ul style="list-style-type: none"><li>1. <b>Base Covers:</b> The covers listed below are in-built Policy benefits and shall be available to all Insured Persons in accordance with the procedures set out in this Policy.</li><li>• <b>Accidental Death</b> – Benefit equal to 100% of Sum Insured shall be payable on death of the insured person or due to an Injury sustained in an Accident during the Policy Period, provided that the Insured Person's death occurs within 12 months from the date of the Accident.</li><li>• <b>Permanent Total Disablement</b> – Benefit equal to 100% of Sum Insured shall be payable, if an insured Person suffers Permanent Total Disablement of the nature specified below, solely and directly due to an Accident during the Policy Period, provided that the Permanent Total Disablement occurs within 12 months from the date of the Accident:<ul style="list-style-type: none"><li>a) Total and irrecoverable loss of sight of both eyes or</li><li>b) Physical separation or loss of use of both hands or feet or</li><li>c) Physical separation or loss of use of one hand and one foot or</li><li>d) loss of sight of one eye and Physical separation or loss of use of hand or foot</li><li>e) If such Injury shall as a direct consequence thereof, permanently, and totally, disables the Insured Person from engaging in any employment or occupation of any description whatsoever.</li></ul></li><li>• <b>Permanent Partial Disablement</b> – Percentage of Sum Insured shall be payable if the Insured Person suffers Permanent Partial Disablement solely and directly due to an Accident during the Policy Period provided that the Permanent Partial Disablement shall occur within 12 months of the date of the Accident.</li></ul>	<p>Section 4.1</p> <p>Section 4.1(a)</p> <p>Section 4.1(b)</p> <p>Section 4.1(c)</p>

	<p>Kindly refer policy wording Section 4.1(c) for percentage of sum insured payable based on the loss suffered.</p> <p><b>Cumulative Bonus</b> - Sum insured (excluding cumulative bonus) shall be increased by 5% in respect of each claim free policy year, provided the policy is renewed without a break subject to maximum of 50% of the sum insured. If a claim is made in any particular year, the cumulative bonus accrued may be reduced at the same rate at which it has accrued.</p>	
	<p><b>2. <u>Optional Covers:</u></b> The covers listed below are optional benefits and shall be available to Insured Persons in accordance with the terms set out in the Policy, if the listed cover is opted.</p> <ul style="list-style-type: none"> <li>• <b>Temporary Total Disablement</b> – If the Insured Person sustains an Injury in an Accident during the Policy Period and which completely incapacitates the Insured Person from engaging in any employment or occupation of any description whatsoever which the Insured Person was capable of performing at the time of the Accident (Temporary Total Disablement), the company shall pay the benefit as specified in the policy schedule, till the time the insured person is able to return to work, provided that: The period of temporary total disablement shall exceed four consecutive weeks from the date of accident, however, the benefit shall be reckoned from the date of accident and shall be payable for the entire duration of disablement. the compensation payable under this benefit mentioned under Section 4.2(a) shall not be payable for more than 100 weeks in respect of any one Injury calculated from the date of commencement of disablement and in no case shall exceed the Sum Insured. The Temporary Total Disablement is certified in writing by the treating Medical Practitioner to have commenced within 30 days from the date of the Accident. The compensation shall be paid by the company at quarterly intervals, after ascertaining the amount payable. If the period of temporary total disablement is for less than a quarter or three months, the compensation may be paid at the end of the disablement period. During the course of payment under this benefit, the company shall have right to call for a certification from an independent medical practitioner with regard to the continuity of temporary total disability specified under this section. The insured shall notify the company immediately on resuming to his occupation/employment. Where it is found that the insured resumed to his occupation/employment without notifying to the company and received the compensation under this cover, the company shall have right to claim the recovery of such benefit paid. Note: For the purpose of this benefit, “week” is a period of seven consecutive calendar days</li> </ul>	<p>Section 4.2</p> <p>Section 4.2(a)</p>

		<ul style="list-style-type: none"> <li>• <b>Hospitalisation Expenses due to Accident</b> – The Company shall indemnify medical expenses incurred for hospitalisation arising due to accident during the policy period, up to the limit of 10% of the base sum insured, specified in the policy schedule. The following other expenses necessitated due to injury shall also be covered under the optional cover specified under Section 4.2(b): <ul style="list-style-type: none"> <li>a) Dental treatment.</li> <li>b) Plastic surgery.</li> <li>c) All the day care treatments.</li> <li>d) Expenses incurred on road Ambulance subject to a maximum of Rs.2,000/- per hospitalization.</li> </ul> </li> </ul> <p>Note: Kindly refer policy wording section 4.2(b) for detailed list of hospitalisation expenses covered. The expenses that are not covered under the section 4.2(b) are placed under List-I of Annexure-B.</p>	Section 4.2(b)
		<ul style="list-style-type: none"> <li>• <b>Education Grant</b> – In case of Death or Permanent Total Disability of the insured person, the company shall pay a one-time educational grant of 10% of the Base Sum insured (specified in the policy schedule), per child to all dependent children of the Insured provided that: <ul style="list-style-type: none"> <li>a) Such Dependent Child/ Children(s) is/are pursuing an educational course as a full time student in an educational institution.</li> <li>b) Age of the child or children as the case shall not be more than 25 completed years</li> </ul> </li> </ul> <p>Note: The benefits payable under each of the optional covers 4.2(a), 4.2(b) and 4.2(c) are independent and over and above the base sum insured. Claim admissibility under the optional covers "Temporary total disablement" and "hospitalization due to accident" is independent of claim admissibility under the base covers.</p> <p><i>For more details, please refer to the policy wordings.</i></p>	Section 4.2(c)
6	Exclusions  What the policy does not cover	<p>Following are excluded from the policy (applicable to all sections of the policy) –</p> <ul style="list-style-type: none"> <li>• Any claim for death or disablement (whether of a permanent nature or of a temporary nature), hospitalisation of the insured person, directly or indirectly due to War (whether declared or not) and war like occurrence or invasion, acts of foreign enemies, hostilities, civil war, rebellion, revolutions, insurrections, mutiny, military or usurped power, seizure, capture, arrest, restraints and detainment of all kinds.</li> <li>• Any claim for death, disablement (whether of a permanent nature or of a temporary nature), hospitalization of Insured Person</li> </ul>	<p>Section 6 (i)</p> <p>Section 6 (ii)</p>

		a) from intentional self-injury unless in self-defence or to save life, suicide or attempted suicide;	Section 6(ii)(a)
		b) whilst under the influence of intoxicating liquor or drugs or other intoxicants except where the insured is not directly responsible for the injury / accident though under influence of intoxication.	Section 6(ii)(b)
		c) whilst engaging in aviation or ballooning, or whilst mounting into, or dismounting from or travelling in any balloon or aircraft other than as a passenger (fare-paying or otherwise) in any Scheduled Airlines in the world. [Standard type of aircraft means any aircraft duly licensed to carry passengers (for hire or otherwise) by appropriate authority irrespective of whether such an aircraft is privately owned or chartered or operated by a regular airline or whether such an aircraft has a single engine or multiengine;] arising or resulting from the Insured Person committing any breach of law with criminal intent.	Section 6(ii)(c)
		<ul style="list-style-type: none"> <li>Any claim for death, disablement (whether of a permanent nature or of a temporary nature), hospitalization of Insured Person due to participation as a professional in hazardous or adventure sports, including but not limited to, para-jumping, rock climbing, mountaineering, rafting, motor racing, horse racing or scuba diving, hand gliding, sky diving, deep-sea diving.</li> </ul>	Section 6 (iii)
		<ul style="list-style-type: none"> <li>Any claim resulting or arising from or any consequential loss directly or indirectly caused by or contributed to or arising from: <ul style="list-style-type: none"> <li>a) Ionizing radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel or from any nuclear waste from combustion (including any self-sustaining process of nuclear fission) of nuclear fuel.</li> </ul> </li> </ul>	Section 6 (iv)
		<ul style="list-style-type: none"> <li> <ul style="list-style-type: none"> <li>b) Nuclear weapons material</li> </ul> </li> </ul>	Section6(iv)(a)
		<ul style="list-style-type: none"> <li> <ul style="list-style-type: none"> <li>c) The radioactive, toxic, explosive or other hazardous properties of any explosive nuclear assembly or nuclear component thereof.</li> </ul> </li> </ul>	Section6(iv)(b) Section 6(iv)(c)
		<ul style="list-style-type: none"> <li> <ul style="list-style-type: none"> <li>d) Nuclear, chemical and biological terrorism</li> </ul> </li> </ul>	Section6(iv)(d)
		<ul style="list-style-type: none"> <li>Any loss arising out of the Insured Person's actual or attempted commission of or wilful participation in an illegal act or any violation or attempted violation of the law.</li> </ul>	Section 6(v)
		<p>Following are excluded from the policy (applicable to Hospitalisation Expenses due to Accident 4.2(b)) –</p> <ul style="list-style-type: none"> <li>Investigation &amp; Evaluation (Code- Excl04)</li> <li>Expenses related to any admission primarily for diagnostics and evaluation purposes.</li> <li>Any diagnostic expenses which are not related or not incidental to the current diagnosis and treatment.</li> </ul>	6.1

		<ul style="list-style-type: none"> <li>Dietary supplements and substances that can be purchased without prescription, including but not limited to Vitamins, minerals and organic substances unless prescribed by a medical practitioner as part of hospitalization claim or day care procedure (Code- Excl14)</li> <li>Expenses incurred for treatment of accidental injuries which does not warrant hospitalization.</li> <li>Any expenses incurred on Domiciliary Hospitalization and OPD treatment. Treatment taken outside the geographical limits of India. vi. All expenses listed in Annexure-B (List I) of the Policy.</li> </ul> <p><i>For details of what is not covered in your policy, kindly refer to the policy wordings.</i></p>	
7	Waiting Period	Not applicable	
8	Financial limits of coverage	The policy will pay only up to limits specified hereunder for the following diseases/procedures:	
	i) Sub-limits	Not Applicable	
	ii) Co-payment	Not Applicable	
	iii) Deductible	Not Applicable	
	iv) Any other limits	Not Applicable	
9	Claims/Claims Procedures	<p>Notification of claims:</p> <ol style="list-style-type: none"> <li>Intimation about an event or occurrence that may give rise to a claim under this policy must be given within 30 days of its happening.</li> <li>Claims for insurance benefits must be submitted to the Company not later than one (1) month after the completion of the treatment or after transportation of the mortal remains/ burial in the event of Death.</li> <li>If any treatment for which a claim may be made is to be taken and that treatment requires Hospitalisation in an Emergency, the company shall be informed within 24 hours of the admission of the insured person in Hospital.</li> </ol> <p>Important links:</p> <ol style="list-style-type: none"> <li>Network hospital details: <a href="https://www.hizuno.com/cashless-hospital-network">https://www.hizuno.com/cashless-hospital-network</a> Helpline number: 1800 12000</li> <li>Hospitals from which claims will not be accepted by us (Blacklisted hospitals) <a href="https://www.hizuno.com/downloads">https://www.hizuno.com/downloads</a></li> <li>Download claim form: <a href="https://www.hizuno.com/claims">https://www.hizuno.com/claims</a></li> </ol>	Section 7
10	Policy Servicing	<p>Call Centre Number: Toll Free – 1800 120000 Paid Landline – 022 423 12000</p>	

		<b>Corporate Headquarters</b> Zuno General Insurance Limited 2nd Floor, Tower 3, B Wing, Kohinoor City Mall, Kohinoor City, Kirol Road,, Kurla (W), Mumbai 400070 Contact Number 022 432 12000  For Branch office Addresses – kindly follow the link below: <a href="https://www.hizuno.com/contact-us">https://www.hizuno.com/contact-us</a>	
11	Grievances/ Complaints	<p>Any Grievance of the Complainant sent in a written communication to the Company at any of the touch points as mentioned, shall be addressed within 14 days of the receipt of the complaint.</p> <p>Escalation Matrix:</p> <p>Step 1 Call: 180012000 Email: <a href="mailto:support@hizuno.com">support@hizuno.com</a></p> <p>Step 2 If the response is not as per Complainant's expectations he/she may contact the Grievance Cell at the below touchpoints:</p> <ul style="list-style-type: none"> <li>Email: <a href="mailto:grievance@hizuno.com">grievance@hizuno.com</a></li> <li>Address: Zuno General Insurance Limited, Kohinoor City Mall, Tower 3, Kirol Road, Kurla West, Mumbai 400070</li> </ul> <p>Step 3 If the response is not as per Complainant's expectations he/she may contact the Company's Grievance Redressal Officer at:</p> <ul style="list-style-type: none"> <li>Email: <a href="mailto:grievanceofficer@hizuno.com">grievanceofficer@hizuno.com</a></li> <li>Address: Edelweiss General Insurance Company Limited, Kohinoor City Mall, Tower 3, Kirol Road, Kurla West, Mumbai 400070</li> </ul> <p>Step 4 If the Complainant is not still not satisfied with the response or does not receive a response from the Company within 14 days, the Complainant may approach the Grievance Cell of the IRDAI on the following contact details:</p> <ul style="list-style-type: none"> <li>IRDAI Grievance Call Centre (IGCC) TOLL FREE NO: 155255; Email ID: <a href="mailto:complaints@irda.gov.in">complaints@irda.gov.in</a></li> <li>Register online at: <a href="http://www.igms.irda.gov.in/">http://www.igms.irda.gov.in/</a></li> <li>Address for communication for complaints by fax/paper: Consumer Affairs Department, Insurance Regulatory and Development Authority of India Sy. No. 115/1, Financial District, Nanakramguda, Gachibowli Hyderabad – 500032</li> </ul> <p>Step 5 If the complaint/grievance has still not been resolved, the Complainant may approach the Office of the Insurance Ombudsman established by the Central Government of India as</p>	Section 10

		per Rule 13 and Rule 14 of the Insurance Ombudsman Rules, 2017 ('Ombudsman Rules').	
12	Things to remember	<p><b>Free look cancellation:</b> You may cancel the insurance policy if you do not want it, within 15 days from the date of commencement of the policy and the company shall refund the premium on short term rates for the unexpired Policy Period as per the rates defined in Policy wording Section 8.11 Cancellation</p> <p>Process of cancellation: Policyholder can call or mail us stating the reason of cancellation. Post that we will process your cancellation request and refund the premium back to the source or the NEFT details shared by you.</p> <p><b>Policy renewal:</b> Except on grounds of fraud, moral hazard or misrepresentation or non-cooperation, renewal of your policy shall not be denied, provided the policy is not withdrawn.</p> <p><b>Migration and Portability:</b> Not Applicable</p> <p><b>Change in Sum Insured:</b> Not Applicable</p> <p><b>Moratorium Period:</b> Not Applicable</p>	<p>General T&amp;C section point 8.11</p> <p>General T&amp;C section point 8.13</p>
13	Your Obligations	<p>Please disclose all pre-existing disease/s or condition/s before buying the policy. Non-disclosure may affect the claim settlement.</p> <p>Material facts for the purpose of this policy shall mean all relevant information sought by the company in the proposal form and other connected documents to enable it to take informed decision in the context of underwriting the risk.</p>	General T&C section point 8.1

Declaration by the Policyholder:

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

Place: <Place from where purchase is made>

Date:

Signature of the Policyholder  
<Name of Policyholder>