

## LIBERTY SECURE FUTURE CONNECT GROUP POLICY PROSPECTUS

### Introduction:

This product is offered to Person/s who have availed of loan/s.

### Key Features:

#### Sum Insured

- a. Fixed Sum Insured Basis.
  - b. Minimum Sum Insured – INR 25,000
  - c. Maximum Sum Insured - INR 15,00,00,000
  - d. Pre medical checkup required for Sum Insured in excess of INR 3 crores.
2. The SI cannot be increased / reduced during the policy period.
  3. Eligibility
    - a. Entry Age
      - i. Minimum Age of Entry – 18 years
      - ii. Maximum Age of Entry – 65 years
    - b. Nationality – Indian Nationals
    - c. Policy can only be issued once the Loan has been disbursed
    - d. The loan should be based in India irrespective of where the applicants reside.
    - e. 'Involuntary Loss of Job' cover is available only for salaried applicant/s & for employment in India only.
  4. Waiting Period – 90 days from the inception of first policy
  5. Tenure – 1,2,3,4 or 5 years
  6. Premium Payment
    - a. Premium for the entire policy period to be collected upfront
    - b. Premium to be calculated as per premium table – Plan selected, Options sought, Age of the applicant/s and/or Co-applicants/s, Sum Insured, Policy Period, Loan Period, salaried type of employment & waiver of survival period and any other optional covers opted.
    - c. In case of more than one applicant, completed Age of the applicants as on their last birthday will be considered for premium computation
  7. Coverage –In case of joint applicants, all or any of the applicants/co-applicants, subject to their eligibility, may be insured.

### Pre-Policy checkup:

Proposals where the age of the applicant is above 50 years and/or the Sum Insured is above INR 3 crores followed by health check-up may be accepted as per the board approved underwriting policy of the Company. This is not applicable for all subsequent renewal(s) involving age slab changes. The health check-up will be carried out at our network list of diagnostic centers as available on our website. The result of these tests will be valid for a period of 3 months from the date of tests. If the proposal is accepted we shall refund 50% of the health check-up cost.

#### 1. List of tests applicable for the member above 50 years of age:

FME	RUA	FBS	CBC
Lipid profile	LFT	RFT	HbA1c
TMT	PSA (for male)	PAP smear (for female)	USG
Chest X-Ray			

FME – Full Medical examination, RUA (Routine Urine Analysis), FBS (Fasting Blood Sugar), CBC (Complete Blood Count), Lipid profile, TMT (Tread Mill Test), LFT (Liver Function Test), RFT (Renal Function Test), HbA1c, PSA (Prostate Specific Antigen for Males), PAP Smear (females only), USG Abdomen -males & females (Ultrasonogram).

## 2. List of tests for proposals with SI above INR 3 crores:

Sum Insured (INR)	Entry Age			
	20 – 35	36 – 45	46 – 55	56 & Above
Above 3 Crores	Health Form + FME + CBC + RUA + Chest X-ray + Lipid Profile + LFT	Health Form + FME + CBC + RUA + Chest X-ray + Lipid Profile + LFT + HbA1c + TMT	Health Form + FME + CBC + RUA + Chest X-ray + Lipid Profile + LFT + HbA1c + TMT + RFT + USG + Tumour Markers	Health Form + FME + CBC + RUA + Chest X-ray + Lipid Profile + LFT + HbA1c + TMT + RFT + USG + PAP Smear + Tumour Markers

Tumour marker test to be included

- Carcinoembryonic Antigen (CEA)
- Prostate-specific Antigen (PSA)

The Company reserves the rights to prescribe further tests based on the Medical Reports of the applicant/s.

### Benefits:

- Critical Illness
- Personal Accident
- Involuntary Loss of Job

### 1. Critical Illness: Options

List of Critical Illness	Option A	Option B	Option C	Option D	Option E
Cancer of Specified Severity	✓	✓	✓	✓	✓
First Heart Attack of Specified Severity	✓	✓	✓	✓	✓
Open Chest CABG	✓	✓	✓	✓	✓
Open Heart Replacement or Repair of Heart Valves	✓	✓	✓	✓	✓
End Stage Renal failure	✓	✓	✓	✓	✓
Stroke Resulting in Permanent Symptoms	✓	✓	✓	✓	✓
Major Organ/ Bone Marrow Transplant	✓	✓	✓	✓	✓
Permanent Paralysis of Limbs	✓	✓	✓	✓	✓

Multiple Sclerosis with Persisting Symptoms	✓		✓	✓	✓	✓
Coma of Specified Severity.			✓	✓	✓	✓
Motor Neurone Disease with Permanent Symptoms			✓	✓	✓	✓
Primary Pulmonary Arterial Hypertension				✓		✓
Pulmonary Artery Graft Surgery				✓		✓
Muscular Dystrophy				✓		✓
Systemic Lupus Erythematosus with Lupus Nephritis				✓		✓
Pneumonectomy				✓		✓
Medullary Cystic Disease				✓		✓
End Stage Liver Disease					✓	✓
Surgery of Aorta					✓	✓
Benign Brain Tumor					✓	✓
Parkinson's Disease					✓	✓
Alzheimer's Disease					✓	✓
Major Burns					✓	✓
Deafness					✓	✓
Loss of Speech					✓	✓

## **Claims Settlement Process Applicable To Critical Illness Section**

In the event of a claim arising out of an Insured Event covered under this Section, the Insured Event as described above shall be intimated to the Company within 30 (thirty) days from the date of first diagnosis of the Illness, date of surgical procedure or date of occurrence of the medical event as the case may be. However, the Company may condone the delay on merits of the claim subject to getting satisfied that the delay in notification was due to reasons beyond the control of the Insured Person/s/Nominee.

### **Specific Exclusion applicable for Critical Illness Section:**

- a) The Company shall not be liable to make any payment under this Policy in connection with or in respect of any Insured Event, as stated in this Section, occurred or suffered before the commencement of Period of Insurance or arising within the first 90 days of the commencement of the Period of Insurance.
- b) Pre-existing Conditions and any complications arising from the same will not be covered until 48 months of continuous coverage have elapsed, since inception of your first Policy with Us.
- c) If the Insured does not submit a medical certificate from the Doctor evidencing diagnosis of Illness or Injury or occurrence of the medical event or the undergoing of the medical / surgical procedure in relation to the claim of the particular insured Person.
- d) Any medical procedure or treatment, which is not medically necessary or not performed by a Doctor.
- e) Treatment relating to birth defects and external congenital Illness or condition.
- f) Birth control procedures and hormone replacement therapy.
- g) Any treatment/surgery for change of sex or any cosmetic surgery or treatment/surgery /complications/Illness arising as a consequence thereof.
- h) Treatment by a family member and self-medication or any treatment that is not scientifically recognized.
- i) Any sexually transmitted diseases or any condition directly caused by or associated with Human T-Cell Lymphotropic Virus Type III (III LB III) or Lymphadenopathy Associated Virus (LAV) or the Mutants Derivative or Variations Deficiency Syndrome or any Syndrome or condition of a similar kind commonly referred to as AIDS, related complex syndrome (ARCS) and all diseases/illness/injury caused by and/or related to HIV.
- j) Any condition directly or indirectly caused by or associated with any sexually transmitted disease, including Genital Warts, Syphilis, Gonorrhoea, Genital Herpes, Chlamydia, Pubic Lice and Trichomoniasis, whether or not arising out of conditions listed under j above
- k) Any Critical Illness arising out of use, abuse or consequence or influence of any substance (substances that are abused like illegal drugs, opioids, marijuana etc) intoxicant, drug, alcohol or hallucinogen.
- l) Any mental Illness, psychiatric or psychological disorders.

m) Any illness which is not a part of the listed Critical Illness as mentioned under Section I of Part 2 of the Policy and/or not opted by the Insured/Insured Person/s.

### Specific Condition applicable for Critical Illness Section

The cover under this Policy, for the specific Insured Person, shall terminate in the event of claim in respect of that Insured Person becoming admissible and accepted by the Company under this Section. In consequence thereof no benefit shall be payable under any other Section of this Policy

### 2. Personal Accident:

Coverage	Option A	Option B
Accidental Death	100% of CSI	100% of CSI + 100% of CSI in case of Accidental death whilst travelling in the listed public carriers
Permanent Total Disability	100% of CSI	100% of CSI + 100% of CSI in case of Permanent total disability due to accident whilst travelling in the listed public carriers
Performance of Funeral Ceremony	Rs. 5000	Rs. 5000

Death/ Permanent Total Disability: If an Insured Person/s suffers an accident during the Policy Period and this is the sole and direct cause of his Death/ Permanent total disability in one of the ways as detailed in the table below, within 12 months of such accidental Bodily Injury sustained, then We will pay the Sum Insured as applicable.

“Public Carrier” means shared passenger transportation service which is available for use by the general public and which operates on a scheduled timetable.

Listed public carriers: Bus, ferry, hovercraft, ship, taxi, train, tram, underground train, commercial helicopter or aircraft.

Permanent Total Disablement shall mean

Permanent Total Disability – Table of Benefits	
Loss of	% of Sum Insured
Limbs (both hands or both feet or one hand and one foot)	100%
Loss of a limb and an eye	100%
Complete and irrecoverable loss of sight of both eye	100%
Complete and irrecoverable loss of speech & hearing of both ears	100%

The geographical scope of this benefit will be worldwide; however the claims shall be settled in India in Indian rupees.

In the event of We making payment for a claim for Performance of Funeral Expenses, We will indemnify towards

- i. Expenses incurred for preparation for burial or cremation service of mortal remains
- ii. Our liability to make payment will be as per the amount mentioned in the Policy Schedule during the full policy period

**Claim Settlement Applicable to Personal Accident Section:**

- (i) Upon the happening of any Injury giving rise or likely to give rise to a claim under this Policy, the Injury as described above shall be intimated to the Company as soon as possible but not later than 30 days from the date of its occurrence. However, the Company may condone the delay on merits of the claim subject to getting satisfied that the delay in notification was due to reasons beyond the control of the Insured/Insured Person/s/Nominee.
- (ii) The Insured Person/s shall deliver to the Company, within 30 days of the date of occurrence of the Insured Event, a detailed statement in writing as per the claim form and any other material particular, relevant to the making of such claim.
- (iii) The Insured Person/s shall tender to the Company all reasonable information, assistance and proofs in connection with any claim hereunder.
- (iv) Proof satisfactory to the Company shall be furnished in connection with all matters upon which a claim is based and as deemed necessary any medical or other agent of the Company shall be allowed to examine the Insured Person/s on the occasion of any alleged Injury.

**Specific Exclusion applicable for Personal Accident Section:**

- (i) Payment under more than one of the categories specified (Death or Permanent Total Disablement) in the Benefit Payable in respect of the Insured Person/s.
- (ii) Payment of compensation in respect of Insured Event which occurs whilst the Insured Person/s is operating or learning to operate any aircraft, or performing duties as a member of the crew on any aircraft, or Scheduled Airlines or is engaging in aviation or ballooning, or whilst the Insured Person/s is mounting into, or dismounting from or traveling in any balloon or aircraft other than as a passenger (fare-paying or otherwise) in any Scheduled Airline anywhere in the world;
- (iii) Payment of Compensation in respect of death, injury or disablement of Insured Person (a) from engaging in or participation in adventure sports including but not limited to winter sports, skydiving/parachuting, hang gliding, bungee jumping, scuba diving, mountain climbing (where ropes or guides are customarily used), riding or driving in races or rallies using a motorized vehicle or bicycle, caving or pot-holing, hunting or equestrian activities, skin diving or other underwater activity, rafting or canoeing involving white water rapids, yachting or boating outside coastal waters, participation in any Professional Sports, any bodily contact sport or any other hazardous or potentially dangerous sport for which the Insured Person/s is untrained, unless specifically covered under the Policy (b) directly or indirectly caused by venereal disease or insanity;
- (iv) Payment of compensation in respect of death or Permanent Total Disablement arising from or resulting directly or indirectly from any Illness to the Insured Person/s.

- (v) No sum shall be payable under this Section in case of any Permanent Total Disability for which medical care, treatment, or advice was recommended by or received from a Doctor or from which the Insured Person/s suffered or which was present before the commencement of the Policy Period.
- (vi) We shall not be deemed to provide cover and shall not be liable to pay any claim or provide any benefit hereunder to the extent that the provision of such cover, payment of such claim or provision of such benefit would expose us to any sanction, prohibition or restriction under United Nations resolutions or the trade or economic sanctions, laws or regulations of the European Union, United Kingdom or United States of America.

**Specific Condition applicable for Personal Accident Section:**

The cover under this Policy, for the specific Insured Person, shall terminate in the event of claim in respect of that Insured Person becoming admissible and accepted by the Company under this Section. In consequence thereof no benefit shall be payable under any other Section of this Policy

**3. Involuntary Loss of Job**

Loss of job with benefit amount equal to three (3) equated monthly installments (EMIs) payable as declared at proposal stage corresponding to the loan insured. However, if the Sum Insured opted is less than the Loan Amount, then the EMI payable will be in proportion to the Sum insured opted and will not be the actual EMI corresponding to the Loan amount. In any case, the EMI payable cannot exceed the actual EMI. 'Involuntary Loss of Job' cover is payable once during the policy period and is available only for salaried person employed in India.

**Claims Settlement applicable to Involuntary Loss of Job Section:**

In the event of a claim arising out of an Insured Event covered under this Section, the Insured Event as described below shall be intimated by the Insured/Insured Person/s to the Company within thirty (30) days from the date of termination from employment of the Insured Person/s or his dismissal, temporary suspension or retrenchment from employment as the case may be. Insured event: For the purposes of this Section and the determination of the Company's liability under it, Insured Event in relation to any Insured Person/s, shall mean termination from employment of the Insured Person/s or his dismissal, temporary suspension or retrenchment from employment imposed on him by the employer during the Policy Period as per the employer's rules/regulations or executed / implemented by the employer in compliance of any laws for the time being in force or any directives by any Public Authority.

**Specific Exclusion applicable for Involuntary Loss of Job Section:**

- 1.The Company shall not be liable to make any payment under this Section in the event of termination, dismissal, temporary suspension or retrenchment from employment of the Insured Person/s being attributed to any dishonesty or fraud or poor performance on the part of the Insured Person/s or his willful violation of any rules of the employer or laws for the time being in force or any disciplinary action against the Insured Person/s by the employer.
- 2.The Company shall not be liable to make any payment under this Policy in connection with or in respect of:
  - a) Self employed Persons;

- b) Any claim relating to unemployment from a job which is casual, temporary, seasonal or contractual in nature or any claim relating to an employee not on the direct rolls of the employer;
  - c) Any voluntary unemployment;
  - d) Unemployment at the time of inception of the Policy Period or arising within the first 90 days of inception of the Policy Period.
3. Any unemployment from a job under which no salary or any remuneration is provided to the Insured Person.
4. Any suspension from employment on account of any pending enquiry being conducted by the employer/ Public Authority.
5. Any unemployment due to resignation, retirement whether voluntary or otherwise.
6. Any unemployment due to non-confirmation of employment after or during such period under which the Insured was under probation.

**Specific Condition applicable for Involuntary Loss of Job Section:**

1. A claim under this section shall become admissible provided the period of termination, dismissal, temporary suspension or retrenchment from employment of the Insured Person/s shall not be less 30 consecutive days (“Retrenchment Period”).
2. The benefit under this section is available for salaried employees and for employment in India Only
3. The cover as described under this Section, for specific Insured Person/s, shall terminate in the event one claim in respect of that Insured Person/s becoming admissible and accepted by the Company under this Section and the Company admitting liability against Section 3 for the Insured Person/s.

**Optional Covers:**

The Insured Person/s can choose to avail of the following optional cover (s) under this Policy:

1. **30 days survival period under Critical Illness cover:** By this option, the coverage under Critical Illness is available only if the Insured Person/s survives for 30 days from the date of first diagnosis or occurrence of the opted Critical Illness under the Policy.
2. **Deletion of ‘Involuntary Loss of Job’ cover:** By this option Involuntary Loss of Job cover stands deleted for the Insured Person/s.
3. **Selection of Option B of Personal Accident cover**  
It is agreed and declared that Option B would cover 100% of CSI as available under Option A + 100% of CSI in case of Accidental death or Permanent Total Disability whilst the Insured Person/s is/are travelling as a fare paying passenger in any of the listed public carriers like Bus, ferry, hovercraft, ship, taxi, train, tram, underground train, commercial helicopter or Scheduled Airline as described in the Certificate of Insurance to this Policy.



“Public Carrier” means shared passenger transportation service which is available for use by the general public and which operates on a scheduled timetable

#### 4. Permanent Partial Disability cover under Personal Accident cover:

If an Insured Person/s suffers an accident during the Policy Period and this is the sole and direct cause of his Permanent Partial Disability in one of the ways detailed in the table below, within 12 months of such accidental Bodily Injury sustained, then We will pay a percentage of the Sum Insured as mentioned in the table below:

<b>Permanent Partial Disability – Table of Benefits</b>	
<b>Loss of</b>	<b>% of CSI</b>
Each arm at the shoulder joint	70%
Each arm to a point above elbow joint	65%
Each arm below elbow joint	60%
Each hand at the wrist	55%
Each thumb	20%
Each index finger	10%
Each other finger	5%
Each leg above center of the femur	70%
Each leg up to a point below the femur	65%
Each leg to a point below the knee	50%
Each leg up to the center of tibia	45%
Each foot at the ankle.	40%
Each big toe	5%
Each other toe	2%
Each eye	50%
Hearing in each ear	30%
Sense of smell	10%
Sense of taste	5%
Any other Permanent Partial Disability	Percentage as assessed by Registered medical practitioner

The compensation under more than one event as stated above, for same period of disability shall not exceed the Capital Sum Insured stated under this cover.

In case of multiple claims under Permanent Partial Disability arising due to multiple events during the Policy period, the total claim payable amount shall not exceed the Capital Sum Insured stated under this cover.

#### 5. Child Education Benefit

If the Insured Person/s suffers an Accident during the Policy Period for which a valid claim has been admitted for Accidental Death or Permanent Total Disability, We as Insurer will make payment towards child education benefit of the Insured Person(s)' dependent child

/children to the extent of the Sum Insured mentioned against this benefit as specified in the Certificate of Insurance to this Policy.

In case of one child, the benefit payable would be the maximum Sum Insured specified under this option and in the case of more than one child, the benefit will be equally divided subject to 2 dependent children being provided the stated benefit.

**“Dependent Child”** refers to a child (natural or legally adopted) below 25 years of age, who is financially dependent on the Insured Person and does not have his/her independent source of income.

The benefit chosen should be in the range of INR 25,000 to INR 500,000 in multiples of INR 25,000.

The Policy covers individual members who are applicant/co-applicants of the loan. In case where both wife and husband are the joint applicants of loan, the cover will be given to each insured member as specified in the Policy Schedule.

**Claims Procedure:**

In the event of a claim under ‘Child Education Benefit’, the following documents are required:

- i. Proof of number of dependent child /children substantiated by proof of identity documents
- ii. Age proof of the dependent child /children

**5. Deletion of ‘Personal Accident’ cover**

Section II of Part 2 of the Policy relating to Personal Accident coverage stands deleted for the Insured Person/s. This option can be selected only if Section I of Part 2 of the Policy ‘Critical Illness’ is opted.

**6. Deletion of ‘Critical Illness’ cover**

Section I of Part 2 of the Policy relating to Critical Illness coverage stands deleted for the Insured Person/s. This option can be selected only if Section II of Part 2 of the Policy ‘Personal Accident’ is opted.

**General Exclusions:**

The Company shall not be liable for any loss or damage under this Policy

1. arising or resulting from the Insured Person committing any breach of the law with criminal intent.
2. due to, or arising out of, or directly or indirectly connected with or traceable to, war, invasion, act of foreign enemy, hostilities (whether war be declared or not) civil war, rebellion, revolution, insurrection, mutiny, military or usurped power, seizure, capture, arrests, restraints and detainment of all Heads of State and citizens of whatever nation and of all kinds and acts of terrorism, Riots, Strike, Malicious Acts etc.

3. directly or indirectly caused by or contributed to by or arising from ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste or from the combustion of nuclear fuel. For the purpose of this exclusion, combustion shall include any self-sustaining process of nuclear fission.
4. directly or indirectly caused by or contributed to by or arising from nuclear weapon materials.
5. directly or indirectly caused by or contributed to by or arising out of usage, consumption or abuse of alcohol and/or drugs.
6. arising out of or as a result of any act of self-destruction or self inflicted injury, attempted suicide or suicide.
7. Due to any sexually transmitted diseases. Acquired Immune Deficiency Syndrome (AIDS), AIDS related complex syndrome (ARCS) and all diseases caused by and/ or related to the HIV.
8. arising out of or resulting directly or indirectly due to or as a consequence of pregnancy or treatment traceable to pregnancy and childbirth, abortion, Miscarriage and its consequences, tests and treatment relating to infertility and invitro fertilization.
9. arising out of or resulting directly or indirectly while serving in any branch of the Military or Armed Forces of any country during war or warlike operations.
10. arising out of or resulting directly or indirectly caused by, resulting from or in connection with any act of terrorism/sabotage regardless of any other cause or event contributing concurrently or in any other sequence to the loss. The Policy also excludes loss, damage, cost or expenses of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing, suppressing or in any way relating to action taken in respect of any act of terrorism/sabotage.
11. Due to Any Claim of the Insured Person while driving any vehicle without a valid Driving License.
12. Arising out of any mental Illness, psychiatric or psychological disorders.

## **General Terms & Conditions:**

### **1. Cancellation/Termination**

This Policy will terminate at the expiration of the period for which premium has been paid or on the Expiration Date shown in Policy Schedule.

#### Cancellation by Insurer

The Policy shall be void and all premium paid hereon shall be forfeited to the Company, in the event of misrepresentation, fraud, mis-description or non-disclosure of any material fact.

The Company may, in the event of non-cooperation of the Insured cancel this Policy, by giving 15 days notice in writing by Registered Post Acknowledgment due to the Insured/ Insured Person/s at his / their last known address in which case the Company shall be liable to repay a

rateable proportion of the premium for the unexpired term from the date of the cancellation subject to there being no claim made/ reported under the Policy.

**Cancellation by Insured**

The Insured may elect to cancel the Policy by giving 15 days notice in writing to the Company. If no claim has been made under the Policy then the Company shall from the date of receipt of notice cancel the Policy and refund the premium.

In respect of long term Policy (Policy issued for a period more than one year), or in the event of full prepayment of the Loan by the Insured Person, the Company shall from the date of receipt of notice/prepayment, cancel the Policy as per the rates mentioned below

Policy Period (in Years)	2	3	4	5
Return Premium Factors				
Years of cancellation	% Return of Premium			
1	50%	67%	75%	80%
2	-	33%	50%	60%
3	-	-	25%	40%
4	-	-	-	20%
5	-	-	-	-

In respect of Policy issued for a period of one year, or in the event of full prepayment of the Loan by the Insured Person, the Company shall from the date of receipt of notice/prepayment, cancel the Policy as per the rates mentioned below:

Cancellation date up to (X months) from Policy Period Start Date	Refund of Premium payable during 1 year of policy commencement
Up to 1 month	75.00%
Up to 3 months	50.00%
Up to 6 months	25.00%
Up to 12 months	0.00%

In event of part prepayment of the Loan, no refunds of premium shall be made under this Policy. No refunds of premium will be made under the Policy during the last year of the Policy Period.

Upon making any refund of premium under this Policy in accordance with the terms and conditions hereof in respect of the Insured Person, the cover provided through Certificate of Insurance in respect of that Insured Person shall forthwith terminate and the Company shall not be liable hereunder.

Notwithstanding anything contained herein or otherwise, no refunds of premium shall be made in respect of the Insured where any claim has been admitted by the Company or has been lodged with the Company.

**2. Renewal**

The Company will not ordinarily refuse to renew the Policy except on grounds of misrepresentation, fraud, non-disclosure or non-cooperation on the part of the Insured. The Company shall not be bound to give notice that such renewal premium is due.

This Policy will automatically terminate on the Policy Period end date. During the loan tenure, all Renewal and requisite premium shall be given to Us on or before the Policy Period end date. The Insured shall give the Company written notice along with Renewal Application, of any material changes to the risk insured under the Policy. If no such written notice is received by us along with renewal application it shall be deemed that there is no material change to the risk.

Any revision or modification in a policy which is approved by the Authority shall be notified to each policy holder at least three months prior to the date when such revision or modification comes into effect.

This Policy is only sold with the loans and cannot be renewed once the loan is closed by the Insured Person/s.

### **3. Continuity Benefits**

In case a customer wishes to renew the Policy with Us after the loan is closed, we shall provide subject to acceptance by the Company, the continuity benefit by offering a similar standalone product pertaining to the section which the customer wishes to renew, reserving the benefits accrued.

Grace Period of 30 days for renewing the Policy is provided under this Policy. However no coverage shall be available for expenses incurred during the period of such break.

Insured Person/s could avail of policy renewal in terms of the applicable Portability norms governing such renewals and the same would be renewed in accordance with the Company's underwriting policy.

### **4. Withdrawal of Product:**

In case the product is found to be financially unviable or is deficient in any manner, the Company shall, in terms of IRDAI ( Health Insurance) Regulations 2016, have the option to withdraw this product from the market subject to prior approval of such withdrawal from the Regulatory Authority. Any withdrawal of the product would be duly intimated to existing customers, who on expiry of the existing Policy, will have an option to obtain renewal under similar product/s available with Us. The Company shall allow the benefits of Portability in all such cases.

### **5. Claim Procedure**

It is a condition precedent to the Company's liability that upon the discovery or happening of any loss that may give rise to a claim under this Policy, the Insured/Insured Person shall undertake the following:

The claim has to be intimated to any of the Company's or through agents in writing.

The following information should be furnished by the Insured/Insured Person/s while intimating a claim:

1. Insured Person's/Nominee's contact numbers
2. Policy Number
3. Location, Date and Time of Accident
4. Nature and cause of loss
5. Whether Police authorities has been informed

The claim documents to be dispatched at below address:

Liberty General Insurance Limited,  
The Capitol, 2<sup>nd</sup> and 3<sup>rd</sup> Floor,

New D.P.Road, Near Ashoka Hotel,  
Vishal Nagar, Pimple Nilakh,  
Pune- 411027, Maharashtra.

Alternatively, claim documents can also be sent to your nearest branch.

Claims processing and settlement will be as per Protection of Policy Holder's Interest, Regulation 2017.

In the event of a claim arising out of an Insured Event covered under Critical Illness Section, the Insured shall arrange for submission of the following documents to the Company:

1. Certificate from the attending Doctor of the Insured Person confirming, inter alia,
  - i. name of the Insured Person/s;
  - ii. name, date of occurrence and medical details of the Insured Event
  - iii. confirmation that the Insured Event does not relate to any Pre-Existing Illness or any Illness or Injury which existed within the first 90 days of commencement of Period of Insurance.
2. Certificate, if applicable, from the Bank/Financial Institution stating the amortization schedule, the EMI Amounts, Principal Outstanding, etc.
3. Duly completed claim forms;
4. Photocopy of Discharge Certificate/ Card from the hospital/ Doctor;
5. Photocopy of investigation test reports, indoor case papers;
6. Additional documents will be called for when the above listed documents do not properly corroborate admissibility of the claim under respective benefits as per the Policy terms. .

In the event of a claim arising out of an Accidental injury covered under Personal Accident Section the following documents are required:

1. Duly completed claim form;
2. Doctor's Report;
3. First Information Report , Investigation Report and Final Police report, wherever necessary;
4. Death certificate, wherever applicable;
5. Investigation Reports like Laboratory test, X-rays and reports essential of confirmation of the Injury etc.;
6. Disability certificate from a Doctor or hospital confirming the extent and nature of disability;
7. Post mortem report, if the same was conducted;
8. Bills and receipt towards expenses relevant to funeral ceremony
9. Certificate, from the Insured / Nominee (in case of death) stating the amortization schedule, the EMI Amount, Principal Outstanding, etc.
10. Proof of travel in listed public carrier where the Insured Person has Option B coverage
11. Additional documents will be called for when the above listed documents do not properly corroborate admissibility of the claim under respective benefits as per the Policy terms. .

In the event of a claim under 'Involuntary loss of job' section, the following documents are required:

1. Duly completed claim form;
2. Certificate if applicable from the Bank stating the amortization schedule, the EMI Amounts, Principal Outstanding, etc.
3. Certificate from the employer of the Insured Person/s confirming the termination, dismissal temporary suspension or retrenchment from employment of the Insured Person/s furnishing the date of termination, dismissal, temporary suspension or retrenchment from employment

of the Insured Person/s with the reasons for the same. In case of temporary suspension the period of suspension should also be mentioned in such certificate.

4. Additional documents will be called for when the above listed documents do not properly corroborate admissibility of the claim under respective benefits as per the Policy terms. In the event of the original documents being provided to any other Insurance Company or to a reimbursement provider, We shall accept verified photocopies of such documents attested by such other Insurance Company/ reimbursement provider.
5. We are entitled to verify medical records of the case retained by the Hospital as and when required for verification of claim.  
If required, the Insured Person must give consent to obtain Medical opinion from any Medical Practitioner at Our expense. If required, the Insured person must agree to be examined by a medical practitioner of our choice at Our expenses.
6. We shall make the payment of claim that has been admitted as payable by Us under the Policy terms and conditions within 30 days of submission of all necessary documents / information and any other additional information required for the settlement of the claim. All claims will be settled in accordance with the applicable regulatory guidelines, including IRDA (Protection of Policyholders Interest Regulation), 2017. In case of delay in payment of any claim that has been admitted as payable by Us under the Policy terms and condition, beyond the time period as prescribed under IRDA (Protection of Policyholders Interest Regulation), 2017 , we shall pay interest at a rate which is 2% above the bank rate prevalent at the beginning of the financial year in which the claim is reviewed by Us For the purpose of this clause, 'bank rate' shall mean the existing bank rate as notified by Reserve Bank of India, unless the extent regulation requires payment based on some other prescribed interest rate.

**Premium Payable:** Premium for this Policy depends on the cover option selected, age, policy term, Sum Insured, Loan Period, salaried employment status, waiver of survival period. The same is as per enclosed rate chart.

**General Note:**

For a full version of the terms and conditions, the Proposer may contact any of our branches or get in touch with our agent / intermediary.