

CHOLAMANDALAM MS GENERAL INSURANCE COMPANY LIMITEDRegistered Office: 2nd Floor, "DARE House", 2, N.S.C. Bose Road, Chennai – 600 001.

Toll free: 1800 208 9100, T: +91 (0) 44 4044 5400, F: +91 (0) 44 4044 5550

Email: customercare@cholams.murugappa.com; website: www.cholainsurance.com

IRDA Regn. No.123; PAN AABCC6633K CIN U66030TN2001PLC047977

**CUSTOMER INFORMATION SHEET**

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

Sl. No.	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy Clause Number
1	Product Name	MONEY IN SAFE AND IN TRANSIT	
2	Unique Identification Number (UIN) allotted by IRDAI	IRDAN123RP0070V01200203	
3	Structure	Indemnity basis	
4	Interests Insured	This Policy is intended to protect offices and industrial / business establishments against loss of money whilst in transit and in storage. "Money" means cash, bank drafts, currency notes, treasury notes, cheques, postal orders, money orders and current postage stamps belonging to the Insured.	
5	Sum Insured	SI should represent estimated total annual amount of the money in transit Separate sum insured also needs to be given for the maximum amount of money held in safe and in counter. (Single carrying limit, which is the company's limit of liability for any one loss, is also required to be specified in the policy)	
6	Policy Coverage	The Policy offers cover against loss of cash/cheques/bank drafts/postal orders/postal stamps etc. while in direct transit from the Bank to the Insured's premises or places of disbursement or vice versa. in the personal custody of the Insured or the authorized employees upto a period of not more than 48 hours from the time of collection. whilst secured in locked safe/strong room in the Insured's premises as a result of burglary, housebreaking, robbery or hold up. Money in safe implies money secured in a locked safe or locked strong room on premises outside business hours and includes money kept in till	
7	Add-on cover	Nil	
8	Loss Participation	Deductible as stated in the Policy Schedule	
9	Exclusions	<p>The Company shall not be liable in respect of</p> <ol style="list-style-type: none"> Shortage due to error or omission Loss of money from any person other than the Insured or authorised employee of the Insured. Loss of money where the Insured or his authorised employee is involved as principal or accessory, unless the loss is due to fraud, dishonesty or infidelity of cash carrying employee and covered specifically. Loss occurring on the premises, after business hours, unless the money is in a locked safe or strong-room, unless any other storage is specifically approved by the Company in writing and incorporated in the Schedule. Loss occasioned by Riot, Strike and Terrorist Activity, unless specifically covered Money carried under contract of affreightment and theft of money from unattended vehicle. Loss of money from safe or strong-room following use of the key to the safe or strong-room or any duplicate thereof belonging to the Insured, unless it has been obtained by force or threat or violence due to nuclear weapons material; 	
10	Special conditions and warranties (if any)	<p>It is warranted that:</p> <ol style="list-style-type: none"> All Money not paid out on the day on which it is received from the Bank is secured in a locked safe or strong room after business hours. a complete record of the amount of Money in the safes be kept in a secure place other than in any of the said safes and that the liability of the Company will be limited to the amount of the Money shown by such record to be in the 	

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		<p>safes at the time of the loss but not exceeding in all the limits as set out in the Schedule hereto.</p> <p>c) Armed guard(s) armed with fire arms guns shall accompany any shipments or transfer of Money when the amount involved is in excess of the amount specified in the Policy Schedule.</p> <p>d) The Insured shall take all ordinary and reasonable precautions for the safety of the Money.</p> <p>e) Cash boxes or till drawers after business hours to be kept with their contents in a safe or strong room;</p> <p>f) safe or strong room keys or duplicates thereof at all times be kept away from the portion of the premises in which such safe or strong room is situate and always out of sight of the public;</p> <p>g) The premises if left unattended:</p> <p>i) All locks, bolts and other protective devices are in full operation and the premises fully secured.</p> <p>ii) All keys including those relating to safes or strong rooms and notes of combination lock to safes or strong rooms are removed from the premises.</p> <p>iii) The room in which Money is kept is also securely locked.</p>	
11	Admissibility of Claim	<p>The Insured shall take all reasonable steps to safeguard the property insured against accident, loss or damage. The Insured shall exercise reasonable care that only competent employees are employed and shall take all reasonable precautions to prevent all accidents and shall comply with all statutory or other regulations.</p> <p>Upon the happening of any event giving rise to a claim under this Policy:</p> <p>a) The insured shall give immediate notice thereof in writing to the nearest office of the company with copy to the Policy Issuing Office as well as lodge forthwith a complaint with the Police.</p> <p>b) The Insured shall deliver to the company, within 14 days of the date on which the event shall have come to his knowledge, a detailed statement in writing, with an estimate of the intrinsic value of the property lost/damaged.</p> <p>c) The Insured shall tender to the Company all information, assistance and proofs in connection with any claim hereunder as the Company may require</p> <p>YOU shall lodge a complaint with the Police at the earliest after happening of the incident and take all practicable steps to apprehend the guilty person and recover the property lost.</p>	
12	Policy Servicing - Claim Intimation and Processing	<p>For queries related to policy / claim servicing, please contact us at our Toll free number 1800-208-9100 or write to us at customercare@cholams.murugappa.com. Claim intimations be sent to notifyclaim@cholams.murugappa.com</p> <p>Documents required for Claim processing:</p> <p>Claim form,</p> <p>FIR/FR,</p> <p>Proof in support of Cause of Loss/Operation of Insured peril,</p> <p>Books of Accounts,</p> <p>Stock Register,</p> <p>Repair / Reinstatement Bills,</p> <p>Proof of Reinstatement,</p> <p>KYC documents PAN, ROC certificate, Aadhar, GST Registration Cert Etc.,</p> <p>Any other Document,</p> <p>Turn Around Time for claims settlement is 21 working days.</p>	

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13	Grievance Redressal and Policyholders Protection	<p>GRIEVANCES If You have a grievance about any matter relating to the Policy, or Our decision on any matter, or the claim, You can address Your grievance as follows:</p> <p>1. Our Grievance Redressal Officer You can send Your grievance in writing by post or email to Our Grievance Redressal Officer at the following address: In case of any grievance the insured person may contact the company through Website: www.cholainsurance.com Toll free: 1800 208 9100 E-Mail: customercare@cholams.murugappa.com Courier: Manager, Customer Care Chola MS General Insurance Company Limited. Hari Nivas Towers First Floor, #163, Thambu Chetty Street, Parry's Corner, Chennai - 600 001.</p> <p>Insured person may also approach the grievance cell at any of the company's branches with the details of grievance. If insured person is not satisfied with the redressal of grievance through one of the above methods, insured person may contact the grievance officer at GRO@cholams.murugappa.com For details of grievance officer, kindly refer the link www.cholainsurance.com If Insured Person is not satisfied with the redressal of grievance through above methods, the insured person may also approach the office of Insurance Ombudsman of the respective area/region for redressal of grievance as per Insurance Ombudsman Rules 2017. Grievance may also be lodged at IRDAI Integrated Grievance Management system https://bimabharosa.irdai.gov.in/</p> <p>2. Consumer Affairs Department of IRDAI a. In case it is not resolved within 15 days or if You are unhappy with the resolution You can approach the Grievance Redressal Cell of the Consumer Affairs Department of IRDAI by calling Toll Free Number 155255 (or) 1800 4254 732 or sending an e-mail to complaints@irdai.gov.in. You can also make use of IRDAI's online portal – Bima Bharosa Portal by registering Your complaint at https://bimabharosa.irdai.gov.in/</p> <p>b. You can send a letter to IRDAI with Your complaint on a Complaint Registration Form available by clicking here. You must fill and send the Complaint Registration Form along with any documents by post or courier to General Manager, Insurance Regulatory and Development Authority of India (IRDAI), Consumer Affairs Department - Grievance Redressal Cell, Sy.No.115/1, Financial District, Nanakramguda, Gachibowli, Hyderabad-500032.</p> <p>c. You can visit the portal https://bimabharosa.irdai.gov.in/ for more details.</p> <p>3. Insurance Ombudsman You can approach the Insurance Ombudsman depending on the nature of grievance and financial implication, if any. Information about Insurance Ombudsmen, their jurisdiction and powers is available on the website of the Insurance Regulatory and Development Authority of India (IRDAI) at www.irdai.gov.in, or of the General Insurance Council at https://www.cioins.co.in/ombudsman, or on company website www.cholainsurance.com.</p>	
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14	Obligations of Policyholder	Maintenance of Books and Keys: The Insured shall keep a daily record of the amount of cash contained in the safe or strong-room and such record shall be deposited in a secure place other than the said safe or strong-room, and produced as documentary evidence in support of a claim under this Policy. The keys of the safe or strong-room shall not be left on the premises out of business hours unless the premises are occupied by the Insured or any authorised employee of the Insured in which case such keys if left on the premises shall be deposited in a secure place not in the vicinity of the safe or strong-room.	
Declaration by the Policyholder:			
I have read the above and confirm having noted the details			
Place:			
Date:			Signature of the Policyholder:

Note:

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