Registered Office: 2nd Floor, "Dare House" No.2, NSC Bose Road, Chennai - 600 001. Toll Free: 1800 208 5544 | Ph: 044 4044 5400 | Fax: 044 4044 5500 | PAN AABCC6633K | CIN: U66030TN2001PLC047977 | IRDAI Regn. No.123 | REACH US THROUGH WHATSAPP 7305234433



This docum	nent provides only	v key information about your p	olicy. Please refer to the	ne policy document for de	tail terms and condi	tions.	
Sl. No.	Title	Description (Please refer to	applicable Policy Claus	e number in next column)			Policy / Clause Number
1.	Product Name	Motor Private Car Liability Policy for three years					
2.	Unique Identification Number (UIN) allotted by IRDAI	IRDAN123RP0014V01201819					
3.	Structure				third parties and Personal Accident for Owner-driver		
4.	Interest Insured	This policy covers the insure party liability arising out of a			ing the following de	etails against Thire	d As per policy Schedule cum
		Regn. No.	Make	Model	Variant	Year of manufacturing	certificate of Insurance
		As per Motor Vehicle Act 198 cover before operating their	vehicles on Road.		e atleast Third party	liability insurance	
5.	Motor Insured Declared Value Scope	requirements of this Ch (a) Is issu (b) Insure subsection (2) (i) Again to any person inc or damage to an public place; (ii) Again.	ty of the third party – of Third party Death napter, a policy of insui- ed by a person who is of is the person or classi- st any liability which n luding owner of the go y property of a third po- st the death of or bodil woods vehicle, caused b ent cover for Owner-d	Upto Rs.7.5 lacs / bodily injury –Section rance must be a policy whi an authorised insurer, and es of persons specified in hay be incurred by him in r bods or his authorised repro- arty caused by or arising o y injury to any passenger o y or arising out of the use <u>river</u>	ch - the policy to the of espect of the death esentative carried ir ut of the use of the f a transport vehicle	extent specified in of or bodily injury the motor vehicle motor vehicle in o , except gratuitou.	Accident for Owner-driver n y e a s
6.	Policy Coverage						
		Coverage				Policy period	third parties and Personal
		<ol> <li>Liability to Third parties: We will indemnify you for accident caused by or arising out of the use of the vehicle insured against all sums which you will become legally liable for:-         <ul> <li>(i) death of or bodily injury to any person including occupants carried in the vehicle.</li> <li>(ii) damage to property other than property belonging to you or held in trust or in the custody or control of you.</li> </ul> </li> <li>The Company will also pay all costs and expenses incurred with its written consent.</li> <li>Legal liability for death or bodily injury to employees whilst travelling/getting in or alighting from insured's vehicle (including paid driver).</li> </ol>					Accident for Owner-driver Policy schedule for policy period
		Compulsory Personal Accident (CPA) cover for Owner-Driver:- The CPA cover offers compensation upto Rs.15 lakhs for personal injuries suffered by the registered Owner of the Insured Vehicle whilst driving, travelling or alighting into/out of the Insured Vehicle.         One year or three years					
			Details of injury		Scale of compensatio	n	
		(i) Death	:	a linely and sight of an	100%		
		(ii) Loss of two limbs or s (iii) Loss of one limb or si		e limb and sight of one ey	e 100% 50%		
			· ·	other than named above	100%		
			-		1		

Registered Office: 2nd Floor, "Dare House" No.2, NSC Bose Road, Chennai - 600 001. Toll Free: 1800 208 5544 | Ph: 044 4044 5400 | Fax: 044 4044 5500 | PAN AABCC6633K | CIN: U66030TN2001PLC047977 | IRDAI Regn. No.123 | REACH US THROUGH WHATSAPP 7305234433



Sl. No.	Title	Description (Please refer to applicable Policy Clause number in next column)	Policy / Clause Number
7.	Add-on Covers	Add-on covers are not applicable for `Motor Private Car Liability Policy for three years'	
8.	Loss Participation	Not applicable as this is liability only policy.	
9.	Special	<ul> <li>Compulsory Personal Accident (CPA) cover for Owner-Driver</li> <li>(1) intentional self-injury suicide or attempted suicide physical defect or infirmity or</li> <li>(2) an accident happening whilst such person is under the influence of intoxicating liquor or drugs.</li> <li>GENERAL EXCEPTIONS</li> <li>1. The Company shall not be liable in respect of any claim arising whilst the vehicle insured herein <ul> <li>(a) being used otherwise than in accordance with the "Limitations as to Use"</li> <li>or</li> <li>(b) being driven by or is for the purpose of being driven by him/her in the charge of any person other than a Driver as stated in the Driver's Clause.</li> </ul> </li> <li>2. The Company shall not be liable in respect of any claim arising out of any contractual liability.</li> <li>3. Except so far as is necessary to meet the requirements of the Motor Vehicles Act, the Company shall not be liable in respect of and in the course of employment of a person in the employment of the insured or in the employment of any person who is indemnified under this policy or bodily injury sustained by such person arising out of and in the course of such employment.</li> <li>4. Except so far as is necessary to meet the requirements of the Motor Vehicles Act, the Company shall not be liable in respect of death or bodily injury to any person (other than a passenger carried by reason of or in pursuance of a contract of employment) being carried in or upon or entering or mounting or alighting from the Motor Vehicle at the time of the occurrence of the event out of which any claim arises.</li> <li>5. The Company shall not be liable in respect of any liability directly or indirectly or proximately or remotely occasioned by contributed by or traceable to or arising out of or in connection with War, Invasion, the Act of foreign enemies, hostilities or warlike operations (whether before or after declaration of war), Civil War, Mutiny, Rebellion Miltary or usurped power or by any direct or indirect oscequences of any of the said</li></ul>	Personal Accident for Owner-driver General Exceptions
	conditions and warranties if any	<ol> <li>It is hereby warranted the coverage under this Policy commences only from the Risk Start time and Date as mentioned in the Policy schedule. No Liability shall attach under this Policy in respect of any Accident/Loss prior to the time and date of commencement of Period of Insurance.</li> <li>If this policy is preceded by break-in insurance, it is expressly agreed and understood that there will be no liability for any loss or damage that has occurred prior to the date of commencement mentioned in the schedule.</li> <li>Special conditions:         <ol> <li>The insured shall take all reasonable steps to maintain the insured vehicle in efficient condition and the company shall have at all times free and full access to examine the insured vehicle or any part thereof or any driver or employee of the insured.</li> </ol> </li> </ol>	Policy Schedule Conditions
		<ul> <li>2. The company can cancel the Motor Third Party Liability only in case of double insurance or Total Loss of the insured vehicle.         <ol> <li>In the event of cancellation due to double insurance, the refund of premium will be as follows:-</li> <li>If double insurance (both policies) is with Chola MS</li> <li>If double insurance where one policy is with Chola MS</li> <li>If double insurance where one policy is with Chola MS</li> <li>If Chola MS policy is commencing later (RSD is later)</li> <li>If Chola MS policy is commencing earlier (RSD is earlier) and is requested to be cancelled, premium will</li> </ol> </li> </ul>	

Registered Office: 2nd Floor, "Dare House" No.2, NSC Bose Road, Chennai - 600 001. Toll Free: 1800 208 5544 | Ph: 044 4044 5400 | Fax: 044 4044 5500 | PAN AABCC6633K | CIN: U66030TN2001PLC047977 | IRDAI Regn. No.123 | REACH US THROUGH WHATSAPP 7305234433



5l. No.	Title	y key information about your policy. Please refer to the policy document for detail terms and conditions.           Description (Please refer to applicable Policy Clause number in next column)		
		be refunded proportionately for the unexpired policy period		
		<ul> <li>In the event of Total Loss of the insured vehicle, the insured can cancel the Statutory Third Party Liability insurance policy after requiring the insured to either cancel the road registration of the wreck and submit documentary evidence in original thereof or alternatively evidence in original a statutory Motor Third Party Liability insurance policy covering the wreck effective the date of damage.</li> </ul>		
		<ol> <li>Multiple policies involving Bank or other lending or financing entity         If at the time of any claim, in case there is more than one Insurance Policy issued to the insured covering         the insured vehicle, the insurer will not apply Contribution clause.     </li> </ol>		
		4. The due observance and fulfillment of the terms, conditions and endorsements of this Policy in so far as they relate to anything to be done or complied with by the insured and the truth of the statements and answers in the said proposal shall be conditions precedent to any liability of the Company to make any payment under this Policy.		
		5. In the event of the death of the sole insured, this policy will not immediately lapse but will remain valid for a period of three months from the date of the death of insured or until the expiry of this policy (whichever is earlier). During the said period, legal heir(s) of the insured to whom the custody and use of the Motor Vehicle passes may apply to have this Policy transferred to the name(s) of the heir(s) or obtain a new insurance policy for the Motor Vehicle.		
		Where such legal heir(s) desire(s) to apply for transfer of this policy or obtain a new policy for the vehicle such heir(s) should make an application to the Company accordingly within the aforesaid period. All such applications should be accompanied by:-		
11.		<ul> <li>a) Death Certificate in respect of the insured</li> <li>b) Proof of title to the vehicle</li> <li>c) Original Policy</li> </ul>		
11.	Admissibility of Claim	<ul> <li>Admissibility of Claim:-</li> <li>A claim under the Motor Insurance policy becomes admissible if         <ul> <li>The third party liability arises due to accidental collision of the insured vehicle</li> <li>The policy of insurance is in force at the time of accident</li> <li>The insured vehicle is driven in within the specified geographical limits</li> <li>The driver at the time of accident is not under the influence of drugs/alcohol and holds a valid driving license.</li> <li>Complying all other requirements in accordance with the Motor Vehicle Act 1988 and as amended in 2019</li> <li>There shall be no breach of policy terms and conditions.</li> </ul> </li> </ul>		
		<ul> <li>2. <u>Denial of claims:</u></li> <li>We have mentioned below few instances in consequence of which a claim may be denied under the policy.</li> <li>a) If Fraudulent means are adopted for settlement of claim.</li> <li>b) If the vehicle insured is used for Commercial purpose</li> <li>c) If the insured /driver / user does not hold an effective driving license at the time of the accident and is disqualified from holding or obtaining such a license.</li> </ul>		
12.	Policy Servicing - Claim	<ul> <li>d) If the driver is under the influence of drugs / alcohol.</li> <li>Policy Servicing: For queries related to policy / claim servicing, please contact us at our Toll free number 1800 208 5544 or write to us at customercare@cholams.murugappa.com.</li> </ul>		
	Intimation and Processing	Claim Intimation can be given by         1. insured : -         ✓         in writing by post to the below mentioned address or         Cholamandalam MS General Insurance Company Limited, Hari Nivas Towers, Thambu Chetty Street,         Chennai - 600 001.         ✓       by mail to customer.services@cholams.murugappa.com or         ✓       by clicking web link @ customerportal.cholainsurace.com or         ✓       contact our toll free number @1800 208 5544		
		Claim can be also be intimated to us by the following Authorities apart from insured 2. DAR (Detailed Accident report) by Police Authorities		

Registered Office: 2nd Floor, "Dare House" No.2, NSC Bose Road, Chennai - 600 001. Toll Free: 1800 208 5544 | Ph: 044 4044 5400 | Fax: 044 4044 5500 | PAN AABCC6633K | CIN: U66030TN2001PLC047977 | IRDAI Regn. No.123 | REACH US THROUGH WHATSAPP 7305234433



. No. Title Description (Please refer to applicable Policy Clause number in next column)				
			Clause Number	
	1	3. MACT Court / Labour Court by Notice by Claimant – The person who can file a claim for hospitalization		
		expenses, in case of accidental injury, permanent total or partial disability and loss of income ie., if the		
		person is unable to earn due to bodily injury.		
		A. List of claim Documents to be submitted : -		
		1. Claim Form		
		2. Driving license		
		3. Fitness		
		4. FIR, Police Panchanama, Police charge sheet		
		<ol> <li>Post Mortem Report</li> <li>MLC/AR (Medico Legal certificate / Accident Register)</li> </ol>		
		7. MVI (Motor Vehicle Inspection Report)		
		8. Repair / replacement bill		
		9. Any other documents directly related to claim settlement		
		10. Accident details including the names of the injured person		
		Documentation to be submitted by claimant:-		
		The claimant should gather and document evidence to support the claim - like photographs, Police reports, medical		
		records, Employment/income proof of injured/deceased third party, Age proof of victim/claimant or any other		
		relevant information that substantiates the damages or injuries suffered. In case of property damage one will need		
		original bills, estimate and final repair bills and surveyor's report wherever applicable to estimate the loss.		
		Claim Processing:		
		B. Investigation and Evaluation:		
		We will investigate the claim to assess its validity and the extent of the damages. We may also conduct		
		interviews with the claimant, witnesses, or involved parties. Based on the investigation, we will evaluate the		
		claim and determine the appropriate compensation amount.		
		Settlement or Adjudication:		
		Once the evaluation is complete, we may offer a settlement to the claimant before Tribunal. If both parties		
		agree before the Tribunal on the settlement amount, the claim is resolved amicably. In case where an amicable		
		settlement could not be arrived at, the claim may proceed before Tribunal / Court which will be decided on		
		merits of the case. For Compulsory PA Claim: - The claim has to be intimated to the company by the insured/claimant immediately.		
		<b>TAT (Turnaround time for settlement of claim):</b> We will pay the claim within maximum period of 30 days from the date of receipt of Award. For any escalations please contact our		
		Toll Free: 1800 208 5544 E-mail Id: customercare@cholams.murugappa.com		
13.	Grievance	If You have a grievance about any matter relating to the Policy, or Our decision on any matter, or the claim, You can	Mechanisr	m
	Redressal and	address Your grievance as follows:	for	'
	Policyholders		complaints	s
	Protection	1. Our Grievance Redressal Officer	/Grievance	З
		You can send Your grievance in writing by post or email to Our Grievance Redressal Officer at the following	Redressal	
		address or call our Toll Free @1800 208 5544:		
		Courier/Post : Manager, Customer Care Cholamandalam MS General Insurance Company Limited,		
		Hari Nivas Towers First Floor, #163,		
		Thambu Chetty Street, Parry's Corner, Chennai - 600 001.		
		E-Mail: customercare@cholams.murugappa.com		
		You may also approach the grievance cell at any of the company's branches with the details of grievance. If		
		You are not satisfied with the redressal of grievance through one of the above methods. You may contact the		
		grievance officer at GRO@cholams.murugappa.com. For details of grievance officer, kindly refer the link		

Registered Office: 2nd Floor, "Dare House" No.2, NSC Bose Road, Chennai - 600 001. Toll Free: 1800 208 5544 | Ph: 044 4044 5400 | Fax: 044 4044 5500 | PAN AABCC6633K | CIN: U66030TN2001PLC047977 | IRDAI Regn. No.123 | REACH US THROUGH WHATSAPP 7305234433



### **Customer Information Sheet**

Sl. No.	Title	Description (Please refer to applicable Policy Clause number in next column)	Policy Clause Number	/
		<ul> <li>Consumer Affairs Department of IRDAI         <ul> <li>In case if the grievance 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 igms.irda.gov.in.</li> <li>You can send a letter to IRDAI with Your complaint na 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.</li> <li>You can also visit the portal https://www.policyholder.gov.in for more details.</li> </ul> </li> <li>Insurance Ombudsman         <ul> <li>If You are still not satisfied with the redressal of grievance through above methods, You may also approach the office of Insurance Ombudsman of the respective area/region for redressal of grievance as per Insurance Ombudsman are available at IRDAI website www.irdai.gov.in or General Insurance Council website https://www.cioins.co.in/ombudsman or on company website www.cholainsurance.com. Grievance may also be lodged at IRDAI https://policyholder.gov.in/igms-complaint-logging.</li> </ul></li></ul>		
14.	Obligations of Policyholder	<ul> <li>Insured to disclose all material information (such as Details about the Vehicle - Registration No., Make, Model, Variant, Year of manufacturing, Engine No., Chassis No., place of registration, Financier and nominee details, add-on covers required) at time of filling the proposal form.</li> <li>In case of any change / modification / addition to the already declared information the same should be brought to the notice of the insurer immediately.</li> <li>Non-disclosure of material information may affect the claim settlement.</li> <li>This policy has been issued upon declaration by the Insured that a valid Pollution under Control (PUC) Certificate is held on the date of commencement of the Policy. The insured undertakes to renew and maintain a valid and effective PUC and/or fitness Certificate, as applicable, during the subsistence of the Policy.</li> </ul>		

Declaration by the Policyholder;

I have read the above and confirm having noted the details. Place: Date:

(Signature of the Policyholder)

<u>Note:</u> i.

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