

Date: 20/08/2021

To,
Mrs.ANJALI NISHIKANT KATHOKE
PLOT NO 5-A,GOVT PRESS CO OP HOUSING , JAITALA
Nagpur, Nagpur,
Maharashtra-440028,
India
+91-9722240084

Subject: Policy Number: **0000000014159575-02**(Please use this when making any enquiries)

Dear Customer,

Welcome to SBI General. Thank you for choosing SBI General's "**Private Car Insurance Policy - Package(Annual)**" Policy. We are delighted to have you as our esteemed customer. We enclose the following documents pertaining to your policy:

- Policy Schedule
- Policy clauses & wordings
- Premium Receipt
- Grievance redressal letter
- Product specific attachment

Please ensure the safety of these documents as they form part of our contract with you.

We have taken care that the documents reflect details of risk and cover as proposed by you. Some of the most important facts that we have relied on in issuing your policy are:

Make of vehicle	Maruti Suzuki
Model	Wagon R
Variant	1.0 VXI+ (O)
Year of Manufacture	2014
No Claims Bonus (NCB)	50.0%
Insured Declared Value	182,250.00

If any of the above captured information is incorrect, we request you to get in touch with our customer care team so that it may be changed.

We recommend that you read the policy documentation carefully and contact us if there is anything you would like to discuss. It is important to us that we have all of your personal and other details recorded accurately so that we can provide you with fast and efficient service. Please contact us to update these details as necessary.

SBI General is ready to assist you in relation to this product and all your general insurance needs. For your convenience, you are able to choose how to contact SBI in several convenient ways:

By email: customer.care@sbigeneral.in

By phone: **1800-22-1111**(For MTNL/BSNL users) or **1800-102-1111** (for other users)

Or visit us to the SBI General Branch that is nearest to you:

SBI General Insurance Company Limited
101-301,Natraj,Junction of Western Express Highway and Andheri-Kurla Road,
Andheri East,Mumbai,Mumbai,
Maharashtra-400069,
1000000108

We thank you for your business and the trust you have placed in us purchasing this general insurance policy.

Yours Sincerely,



Authorized Signatory

PRIVATE CAR CERTIFICATE OF INSURANCE CUM POLICY SCHEDULE

Important Note: 1) The Validity of this Certificate of Insurance cum Schedule is subject to realization of the premium cheque. 2) This Insurance Policy cover is valid subject to availability of Complete and Correct Registration Number within 15 days from the Date of Commencement of this Policy.

Policy Issuing Office	:	“Natraj” 301, Junction of Western Express Highway & Andheri Kurla - Road, Andheri (East), Mumbai - 400 069.			
Policy Number	:	0000000014159575-02	Policy Servicing Branch	:	Nagpur
Insured Name	:	Mrs. ANJALI NISHIKANT KATHOKE			
Business or Profession	:	profession			
Address	:	PLOT NO 5-A,GOVT PRESS CO OP HOUSING, JAITALA Nagpur, Nagpur-440028, Maharashtra			
Customer Contact Details	:	+91-9722240084			
Period of Insurance	:	From: 28/08/2021 00:00hrs to: 27/08/2022 Midnight			
Geographical Area	:	India			

INSURED MOTOR VEHICLE DETAILS		INSURED'S DECLARED VALUE(IDV) (in Rs.)	
Make	Maruti Suzuki	Vehicle	182,250
Model & Variant	Wagon R&1.0 VXi+ (O)	Trailer	0
Year of Manufacturing	2014	Non Electrical Accessories	0
Registration Number	MH 49 U 0197	Electrical Accessories	0
Engine Number	1764339	CNG / LPG Kit	0
Chassis Number	744647FE	Total IDV	182,250.00
Cubic Capacity/KW	998		
Seating Capacity (Including Driver)	5		
Type of Body	HATCHBACK		
RTO Location Name	Nagpur		

LIMITATION AS TO USE : As per Motor Vehicle Rules, 1989,
The Policy covers use of the vehicle for any purpose other than : a) Hire or Reward, b) Carriage of Goods (other than samples or personal luggage), c) Organized racing, d) Pace Making, e) Speed testing f) Reliability Trials, g) Any purpose in connection with Motor Trade.

DRIVERS CLAUSE: Any Person including the Insured Provided that a person driving holds an effective driving license at the time of the accident and is not disqualified from holding or obtaining such a license; provided also that the person holding an effective learner's license may also drive the vehicle and that such a person satisfies the requirements of Rule 3 of the Central Motor Vehicle Rules, 1989.

LIMITS OF LIABILITY: a. Under Section II-1(i) of the Policy-Death of or bodily injury to any person so far as it is necessary to meet the requirements of the Motor Vehicle Act, 1988. b. Under Section II (1)(ii) of the Policy-Damage to property other than property belonging to the insured or held in trust or in the custody or control of the insured up to the limits specified Upto Rs.750000/- c. PA Cover for owner-driver under Section-III CSI - Rs.1500000 /-.

Deductible under Section-I: (i) Compulsory deductible Rs.1000/- (ii) Voluntary deductible Rs. 0 /- (iii) Additional Compulsory deductible Rs. ___/-.

Special Conditions: Warranted all damages existing prior to inception of risk are excluded from the scope of policy.

PUC-Warranty: Warranted that the insured named herein/owner of the vehicle holds a valid Pollution Under Control (PUC) Certificate and/or valid fitness certificate, as applicable, on the date of commencement of the Policy and undertakes to renew and maintain a valid and effective PUC and/or fitness Certificate, as applicable, during the subsistence of the Policy. Further, the Company reserves the right to take appropriate action in case of any discrepancy in the PUC or fitness certificate.

NO CLAIM BONUS:

The Insured is entitled for a No Claim Bonus (NCB) on the Own Damage section of the Policy, if no claim is made or pending during the preceding year(s), as follows: The preceding year - 20%; Preceding two consecutive years - 25%; Preceding three consecutive years - 35%; Preceding four consecutive years - 45%; Preceding five consecutive years - 50%. **The No Claim Bonus will only be allowed provided the Policy is renewed within 90 days of the expiry date of the previous policy.**

INTERMEDIARY DETAILS

Intermediary Name	:	BUSHRA HUSAIN	Intermediary Code	:	0048616
Contact Details	:	Mobile No	:	+91-9404592786	Landline No
			:		

NOMINATION DETAILS

Name of the Nominee	Date of Birth	Relationship with Proposer	Name of Appointee (if Nominee is Minor)
MR NISHIKANT KATHOKE	01/06/1975	Husband	

PREMIUM COMPUTATION TABLE

SURAKSHA AUR BHAROSA DONO

OWN DAMAGE SECTION					LIABILITY SECTION			
Cover	Sum Insured	No. of persons	PREMIUM (Rs.)	Deductible	Cover	Sum Insured	No. of persons	PREMIUM (Rs.)
Own Damage Premium for Vehicle & Accessories (Amount will be including all tariff covers & discounts & Other Loading / Discount)	182,250.00		1,453.90		Basic Third Party Liability Premium	Unlimited		2,072.00
SBIG Add on Covers					Trailers			0.00
Basic Road side Assistance			0.00		Bi fuel kit (CNG/LPG)			0.00
Depreciation Re-imbursement			0.00		Geographical Extension			0.0
Return to Invoice			0.00		Driving Tuition			0.00
Engine Guard			0.00		Additional Covers			
Cover for Consumables			0.00		PA cover - Owner Driver	1500000		325.00
Protection of NCB	0		0.00		PA cover - Unnamed Passengers (SI/Person)	100000	5	250.00
EMI Protector	0.00		0.00		PA cover- Paid Driver	30000	1	15.00
Cover for Key Replacements			0.00		Legal Liability Cover			
Inconvenience Allowance (SI/Day)	0		0.00		LL - Driver		1	50.00
Loss of Personal Belongings	0		0.00		LL - Employees		0.0	0.00
Enhanced PA cover - Owner Driver	0		0.00		LL - Soldier / Sailor / Airman		0.0	0.00
Enhanced PA cover - Unnamed Passengers (SI/Person)	0	0	0.00		Less Discounts			
Enhanced PA cover - Paid Driver	0	0	0.00		TPPD - Third Party Property Damage Discount			0.0
Hospital Cash cover - Owner Driver	0.00	0	0.00		Use confined to Own Premises			0.00
Hospital Cash cover - Unnamed Passengers (Benefit/Person)	0.00	0	0.00		Vintage Car			0.00
Hospital Cash cover - Paid Driver	0.0	0	0.00					
Additional Roadside Assistance			0.00					
Tyre and Rim Guard cover								
NCB Details								
No Claim Bonus			50.0% - Rs.1705.55					
Total Own Damage Premium (A)			1,453.90		Total Third Party Liability Premium (B)			2,712.00
Subject to I.M.T Endorsement Nos. : IMT22 IMT28 IMT16 IMT17					TOTAL POLICY PREMIUM (A+B)			4,165.90
EMI Protector Deductible: No					Taxes as applicable			749.86
Subject to SBIG Add-On Endorsement Nos.: SBIG0100					Kerala Flood Cess @ 1%			0.00
Hire Purchase/ Lease /Hypothecated with :					Total Premium Collected			4,916.00

Premium Collection details: Receipt No.:20126531, Receipt Date:20/08/2021

For claims, Please contact us at Toll Free number MTNL/BSNL users - 1800-22-1111 Other users - 1800-102-1111	For Road side Assistance Service, Name - N.A
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I/We hereby certify that the Policy to which this Certificate relates as well as this Certificate of Insurance are issued in accordance with the provisions of chapter X and Chapter XI of M.V. Act, 1988.

For and on behalf of SBI General Insurance Co. Ltd



Authorized Signatory



Consolidated Stamp Duty Rs. 0.5 paid towards Insurance Policy Stamps vide Order No. CSD/89/2020/1688 Dated 2021-08-20 13:09:55.0 of General Stamp Office, Mumbai

IMPORTANT NOTICE: The Insured is not indemnified if the vehicle is used or driven otherwise than in accordance with this schedule. Any payment made by the Company by reason of wider terms appearing in the certificate in order to comply with the Motor Vehicle Act, 1988 is recoverable from the Insured. See the clause headed "AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY". For legal interpretation English version will be good.

Policy printed by: 100001 on Date: 20-08-2021 Time: 01:11:03 PM IST

Disclaimer:

Please examine this Policy including attached Schedules / Annexure if any. In the event of any discrepancy please contact the office of the Company immediately, it being noted that this Policy shall be otherwise considered as being entirely in order. Please find claims settlement & grievance redressal procedure document attached herein for ready references...

Branch Office Address: 101-301,Natraj,Junction of Western Express Highway and Andheri-Kurla Road,Andheri East,Mumbai, Mumbai,India, Maharashtra -400069	Reference No:	000031639809	
	OF Receipt No:	20126531	
	Date:	20/08/2021	
	Branch Code:	00016	
	Party/Depositor ID:	0000000022228653	
RECEIPT			
Received with thanks from ANJALI NISHIKANT KATHOKE an amount of Rs.4916(Rupees Four Thousand Nine Hundred and Sixteen) by Internetbanking No: Dated : Drawn on Bank : Branch:			
Party ID	Quote/Policy/Claim No.	Name of Party	Amount(Rs.)
0000000022228653	0000000055265519	ANJALI NISHIKANT KATHOKE	4916
		TOTAL	4916

Disclaimer

- 1)Receipt subject to realisation of instrument submitted
- 2)Kindly refer to the policy document for time of commencement of cover

For and on behalf of
SBI General Insurance Co. Ltd.



Authorized Signatory

PRIVATE CAR PACKAGE POLICY

ENDORSEMENT WORDINGS

Attached to and forming part of the Schedule to the Policy No: **0000000014159575-02**

ENDORSEMENT DESCRIPTION
<p>IMT 17 - PA to Paid Drivers</p> <p>IMT 17. PERSONAL ACCIDENT COVER TO PAID DRIVERS, CLEANERS AND CONDUCTORS : (Applicable to all classes of vehicles)</p> <p>In consideration of the payment of an additional premium, it is hereby understood and agreed that the insurer undertakes to pay compensation on the scale provided below for bodily injury as hereinafter defined sustained by the paid driver/cleaner/conductor in the employ of the insured in direct connection with the vehicle insured whilst mounting into dismounting from or travelling in the insured vehicle and caused by violent accidental external and visible means which independently of any other cause shall within six calendar months of the occurrence of such injury result in :-</p> <p>Details of Injury Scale of Compensation</p> <p>i) Death 100%</p> <p>ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye 100%</p> <p>iii) Loss of one limb or sight of one eye 50%</p> <p>iv) Permanent Total Disablement from injuries other than named above 100%</p> <p>Provided always that</p> <p>(1) compensation shall be payable under only one of the items (i) to (iv) above in respect of any such person arising out of any one occurrence and total liability of the insurer shall not in the aggregate exceed the sum of Rs.....* during any one period of insurance in respect of any such person.</p> <p>(2) no compensation shall be payable in respect of death or injury directly or indirectly wholly or in part arising or resulting from or traceable to (a) intentional self injury suicide or attempted suicide physical defect or infirmity or (b) an accident happening whilst such person is under the influence of intoxicating liquor or drugs.</p> <p>(3) such compensation shall be payable only with the approval of the insured named in the policy and directly to the injured person or his/her legal representative (s) whose receipt shall be a full discharge in respect of the injury of such person.</p> <p>Subject otherwise to the terms exceptions conditions and limitations of this policy.</p> <p>* The Capital Sum Insured (CSI) per person is to be inserted.</p>
<p>IMT22 - Compulsory Deductible</p> <p>Notwithstanding anything to the contrary contained in the policy it is hereby understood and agreed that the insured shall bear under Section 1 of the policy in respect of each and every event (including event giving rise to a total loss/constructive total loss) the first Rs....* (or any less expenditure which may be incurred) of any expenditure for which provision has been made under this policy and/or of any expenditure by the insurer in the exercise of his discretion under Condition no ...** of this policy .</p> <p>If the expenditure incurred by the insurer shall include any amount for which the insured is responsible hereunder such amount shall be repaid by the insured to the insurer forthwith.</p> <p>For the purpose of this Endorsement the expression "event" shall mean an event or series of events arising out of one cause in connection with the vehicle insured in respect of which indemnity is provided under this policy.</p> <p>Subject otherwise to the terms conditions limitations and exceptions of this Policy.</p> <p>* (i) to insert amount as appropriate to the class of vehicle insured as per GR.40 of the tariff.</p> <p>(ii) in respect of a vehicle rated under the Tariff for Private Car and in respect of a motorised two wheeler not carrying passengers for hire or reward, if any deductible in addition to the compulsory deductible provided in this endorsement is voluntarily borne by the insured, the sum representing the aggregate of the compulsory and the voluntary deductibles is to be inserted.</p> <p>** to insert Condition no 3 in respect of a vehicle rated under Tariff for Private Car/Two wheelers or Condition no 4 in respect of a vehicle rated under the Tariff for Commercial Vehicles.</p>
<p>SBIG0100 - Break in Insurance - Pre - Existing damages.</p> <p>Warranted all damages existing prior to inception of risk are excluded from the scope of policy.</p>
<p>IMT28 - Legal Liability to Driver</p> <p>In consideration of an additional premium of Rs. 50/- notwithstanding anything to the contrary contained in the policy it is hereby understood and agreed that the insurer shall indemnify the insured against the insured's legal liability under the Workmen's Compensation Act, 1923, the Fatal Accidents Act, 1855 or at Common Law and subsequent amendments of these Acts prior to the date of this Endorsement in respect of personal injury to any paid driver and/or conductor and/or cleaner whilst engaged in the service of the insured in such occupation in connection with the vehicle insured herein and will in addition be responsible for all costs and expenses incurred with its written consent.</p> <p>Provided always that</p> <p>(1) this Endorsement does not indemnify the insured in respect of any liability in cases where the insured holds or subsequently effects with any insurer or group of insurers a Policy of Insurance in respect of liability as herein defined for insured's general employees;</p> <p>(2) the insured shall take reasonable precautions to prevent accidents and shall comply with all statutory obligations;</p> <p>* (3) the insured shall keep record of the name of each paid driver conductor cleaner or persons employed in loading and/or unloading and the amount of wages and salaries and other earnings paid to such employees and shall at all times allow the insurer to inspect such records on demand.</p> <p>(4) in the event of the Policy being cancelled at the request of the insured no refund of the premium paid in respect of this Endorsement will be allowed.</p> <p>Subject otherwise to the terms conditions limitations and exceptions of the Policy except so far as necessary to meet the requirements of the Motor Vehicles Act, 1988.</p> <p>*In case of Private cars/ motorised two wheelers (not used for hire or reward) delete this para.</p>
<p>IMT16 - PA to Unnammed Passenger</p>

In consideration of the payment of an additional premium it is hereby understood and agreed that the insurer undertakes to pay compensation on the scale provided below for bodily injuries hereinafter defined sustained by any passenger other than the insured and/or the paid driver attendant or cleaner and/or a person in the employ of the insured coming within the scope of the Workmen's Compensation Act, 1923 and subsequent amendments of the said Act and engaged in and upon the service of the insured at the time such injury is sustained whilst mounting into, dismounting from or traveling in but not driving the insured motor car and caused by violent, accidental, external and visible means which independently of any other cause shall within three calendar months of the occurrence of such injury result in:

Details of Injury	Scale of Compensation
i) Death	100%
ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye	100%
iii) Loss of one limb or sight of one eye	50%
iv) Permanent Total Disablement from injuries other than named above	100%

Provided always that:-

(1) Compensation shall be payable under only one of the items (i) to (iv) above in respect of any such person arising out of any one occurrence and total liability of the insurer shall not in the aggregate exceed the sum of Rs.....* during any one period of insurance in respect of any such person.

(2) No compensation shall be payable in respect of death or injury directly or indirectly wholly or in part arising or resulting from or traceable to (a) intentional self injury suicide or attempted suicide physical defect or infirmity or (b) an accident happening whilst such person is under the influence of intoxicating liquor or drugs.

(3) Such compensation shall be payable only with the approval of the insured named in the policy and directly to the injured person or his/her legal representative(s) whose receipt shall be a full discharge in respect of the injury of such person.

(4) Not more than....** persons/passengers are in the vehicle insured at the time of occurrence of such injury.

Subject otherwise to the terms exceptions conditions and limitations of this policy.

* The Capital Sum Insured (CSI) per passenger is to be inserted.

** The registered sitting capacity of the vehicle insured is to be inserted.

IMT 17 - PA to Paid Drivers

IMT 17. PERSONAL ACCIDENT COVER TO PAID DRIVERS, CLEANERS AND CONDUCTORS : (Applicable to all classes of vehicles)

In consideration of the payment of an additional premium, it is hereby understood and agreed that the insurer undertakes to pay compensation on the scale provided below for bodily injury as hereinafter defined sustained by the paid driver/cleaner/conductor in the employ of the insured in direct connection with the vehicle insured whilst mounting into dismounting from or traveling in the insured vehicle and caused by violent accidental external and visible means which independently of any other cause shall within six calendar months of the occurrence of such injury result in :-

Details of Injury	Scale of Compensation
i)Death	100%
ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye	100%
iii)Loss of one limb or sight of one eye	50%
iv)Permanent Total Disablement from injuries other than named above	100%

Provided always that

(1) compensation shall be payable under only one of the items (i) to (iv) above in respect of any such person arising out of any one occurrence and total liability of the insurer shall not in the aggregate exceed the sum of Rs.....* during any one period of insurance in respect of any such person.




(2) no compensation shall be payable in respect of death or injury directly or indirectly wholly or in part arising or resulting from or traceable to (a) intentional self injury suicide or attempted suicide physical defect or infirmity or (b) an accident happening whilst such person is under the influence of intoxicating liquor or drugs.

(3) such compensation shall be payable only with the approval of the insured named in the policy and directly to the injured person or his/her legal representative(s) whose receipt shall be a full discharge in respect of the injury of such person.

Subject otherwise to the terms exceptions conditions and limitations of this policy.

. * The Capital Sum Insured (CSI) per person is to be inserted.

GST INVOICE

GST Invoice No:	55257708	GST Invoice Date:	20/08/2021												
GST No. (SBI General)	27AAMCS8857L1ZC	SBI General State	Maharashtra												
SBI General Branch Address:	SBI General Insurance Company Limited 101-301,Natraj, Junction of Western Express Highway and Andheri-Kurla Road, Andheri East,Mumbai,Mumbai, Maharashtra-400069, 1000000108														
Details of Policy Holder:															
Name:	Mrs.ANJALI NISHIKANT KATHOKE														
Address:	PLOT NO 5-A, GOVT PRESS CO OP HOUSING, JAITALA Nagpur, Nagpur, Maharashtra-440028,India														
Policy Holder State	Maharashtra	Place of Supply:	Maharashtra												
		Whether Invoice under Reverse Charge:	No												
GST No./Unique No:		Policy Number	0000000014159575-02												
Insurance Product Name	HSN Code	Premium (without Taxes)	KFC		CGST		SGST/ UTGST		IGST						
			Rate	Amount	Rate	Amount	Rate	Amount	Rate	Amount					
Private Motor 3 & 4 wheeler	997134	4,165.90	1%	0.00	9%	374.93	9%	374.93	0%	0.00					
<table border="1"> <tr> <td>Total Invoice Value (In Figures)</td> <td>4,916.00</td> <td rowspan="2">  Authorized Signatory </td> </tr> <tr> <td>Taxes Applicable</td> <td>749.86</td> </tr> </table>											Total Invoice Value (In Figures)	4,916.00	 Authorized Signatory	Taxes Applicable	749.86
Total Invoice Value (In Figures)	4,916.00	 Authorized Signatory													
Taxes Applicable	749.86														

PRIVATE CAR CERTIFICATE OF INSURANCE CUM POLICY SCHEDULE

POLICY WORDINGS

Whereas the Insured by a proposal and declaration dated as stated in the Schedule which shall be the basis of this contract and is deemed to be incorporated herein has applied to SBI GENERAL INSURANCE COMPANY LIMITED (hereinafter called "the Company") for the insurance hereinafter contained and has paid the premium mentioned in the Schedule as consideration for such insurance in respect of accidental loss or damage occurring during the period of insurance.

NOW THIS POLICY WITNESSETH:

That subject to the Terms Exceptions and Conditions contained herein or endorsed or expressed hereon;

SECTION I - LOSS OF OR DAMAGE TO THE VEHICLE INSURED

1)The Company will indemnify the Insured against loss or damage to the vehicle insured hereunder and / or its accessories whilst thereon

- i. by fire explosion self-ignition or lightning ;
- ii. by burglary housebreaking or theft ;
- iii. by riot and strike;
- iv. by earthquake (fire and shock damage);
- v. by flood typhoon hurricane storm tempest inundation cyclone hailstorm frost;
- vi. by accidental external means;
- vii. by malicious act;
- viii. by terrorist activity;
- ix. whilst in transit by road rail inland-waterway lift elevator or air;
- x. by landslide rockslide.

Subject to a deduction for depreciation at the rates mentioned below in respect of parts replaced:

- (1) For all rubber/ nylon / plastic parts, tyres , tubes, and batteries , air bags- 50%
- (2) For fibre glass components - 30%
- (3) For all parts made of glass - Nil
- (4) Rate of depreciation for all other parts including wooden parts will be as per the following schedule.

AGE OF VEHICLE	% OF DEPRECIATION
Not exceeding 6 months	NIL
Exceeding 6 months but not exceeding 1 year	5%
Exceeding 1 year but not exceeding 2 years	10%
Exceeding 2 years but not exceeding 3 years	15%
Exceeding 3 years but not exceeding 4 years	25%
Exceeding 4 years but not exceeding 5 years	35%
Exceeding 5 years but not exceeding 10 years	40%
Exceeding 10 years	50%

5) Rate of Depreciation for Painting: In the case of painting, the depreciation rate of 50% shall be applied only on the material cost of total painting charges. In case of a consolidated bill for painting charges, the material component shall be considered as 25% of total painting charges for the purpose of applying the depreciation.

2)The Company shall not be liable to make any payment in respect of

- a)consequential loss, depreciation, wear and tear, mechanical or electrical breakdown, failures or breakages
- b)damage to Tyres and Tubes unless the vehicle is damaged at the same time in which case the liability of the Company shall be limited to 50% of the cost of replacement.
- c)any accidental loss or damage suffered whilst the Insured or any person driving the vehicle with the knowledge and consent of the Insured is under the influence of intoxicating liquor or drugs.

3)In the event of the vehicle being disabled by reason of loss or damage covered under this Policy, the Company will bear the reasonable cost of protection and removal to the nearest repairer and re-delivery to the Insured but not exceeding in all, Rs.1500/- in respect of any one accident.

4)The Insured may authorise the repair of the vehicle necessitated by damage for which the Company may be liable under this Policy provided that:

- a)the estimated cost of such repair including replacements, if any, does not exceed Rs.500/-;
- b)the Company is furnished forthwith with a detailed estimate of the cost of repairs; and
- c)the Insured shall give the Company every assistance to see that such repair is necessary and the charges are reasonable.

SUM INSURED - INSURED'S DECLARED VALUE (IDV)

The Insured's Declared Value (IDV) of the vehicle will be deemed to be the 'SUM INSURED' for the purpose of this Policy which is fixed at the commencement of each Policy period for the insured vehicle.

The IDV of the vehicle (and accessories if any fitted to the vehicle) is to be fixed on the basis of the manufacturer's listed selling price of the brand and model as the vehicle insured at the commencement of insurance/renewal and adjusted for depreciation (as per schedule below).

The schedule of age-wise depreciation as shown below is applicable for the purpose of Total Loss/Constructive Total Loss (TL/CTL) claims only

THE SCHEDULE OF DEPRECIATION FOR FIXING IDV OF THE VEHICLE	
AGE OF THE VEHICLE	% OF DEPRECIATION FOR FIXING IDV
Not exceeding 6 months	5%
Exceeding 6 months but not exceeding 1 year	15%
Exceeding 1 year but not exceeding 2 years	20%

Exceeding 2 years but not exceeding 3 years	30%
Exceeding 3 years but not exceeding 4 years	40%
Exceeding 4 years but not exceeding 5 years	50%

IDV of vehicles beyond 5 years of age and of obsolete models of the vehicles (i.e. models which the manufacturers have discontinued to manufacture) is to be determined on the basis of an understanding between the Company and the Insured.

IDV shall be treated as the 'Market Value' throughout the policy period without any further depreciation for the purpose of Total Loss (TL) / Constructive Total Loss (CTL) claims.

The insured vehicle shall be treated as a CTL if the aggregate cost of retrieval and / or repair of the vehicle, subject to terms and conditions of the Policy, exceeds 75% of the IDV of the vehicle.

SECTION II - LIABILITY TO THIRD PARTIES

1) Subject to the limits of liability as laid down in the Schedule hereto the Company will indemnify the Insured in the event of an accident caused by or arising out of the use of the vehicle against all sums which the Insured shall become legally liable to pay in respect of :-

- i) death of or bodily injury to any person including occupants carried in the vehicle (provided such occupants are not carried for hire or reward) but except so far as it is necessary to meet the requirements of Motor Vehicles Act, the Company shall not be liable where such death or injury arises out of and in course of employment of such person by the Insured.
- ii) damage to property other than property belonging to the Insured or held in trust or in the custody or control of the Insured.

2) The Company will pay all costs and expenses incurred with its written consent.

3) In terms of and subject to the limitations of the indemnity granted by this Section to the Insured, the Company will indemnify any driver who is driving the vehicle on the Insured's order or with Insured's permission provided that such driver shall as though he/she was the Insured observe fulfill and be subject to the terms exceptions and conditions of this Policy in so far as they apply.

4) In the event of the death of any person entitled to indemnity under this Policy the Company will in respect of the liability incurred by such person indemnify his/her personal representative in terms of and subject to the limitations of this Policy provided that such personal representative shall as though such representative was the Insured observe fulfill and be subject to the terms exceptions and conditions of this Policy in so far as they apply.

5) The Company may at its own option

- a. arrange for representation at any Inquest or Fatal Inquiry in respect of any death which may be the subject of indemnity under this Policy and
- b. undertake the defence of proceedings in any Court of Law in respect of any act or alleged offence causing or relating to any event which may be the subject of indemnity under this policy.

AVOIDANCE OF CERTAIN TERMS AND RIGHT OF RECOVERY

Nothing in this Policy or any endorsement hereon shall affect the right of any person indemnified by this Policy or any other person to recover an amount under or by virtue of the provisions of the Motor Vehicles Act, 1988.

But the Insured shall repay to the Company all sums paid by the Company which the Company would not have been liable to pay but for the said provisions.

APPLICATION OF LIMITS OF INDEMNITY

In the event of any accident involving indemnity to more than one person, any limitation by the terms of this Policy and/or of any Endorsement thereon of the amount of any indemnity shall apply to the aggregate amount of indemnity to all persons indemnified and such indemnity shall apply in priority to the Insured.

SECTION III - PERSONAL ACCIDENT COVER FOR OWNER-DRIVER

The Company undertakes to pay compensation as per the following scale for bodily injury/ death sustained by the owner-driver of the vehicle in direct connection with the vehicle insured or whilst driving or whilst mounting into/dismounting from the insured vehicle or whilst traveling in it as a co-driver, caused by violent accidental external and visible means which independent of any other cause shall within six calendar months of such injury result in:

Nature of injury	Scale of compensation
(i) Death	100%
(ii) Loss of two limbs or sight of two eyes or one limb and sight of one eye	100%
(iii) Loss of one limb or sight of one eye	50%
(iv) Permanent total disablement from injuries other than named above	100%

Provided Always that:

- A) Compensation shall be payable under only one of the items (i) to (iv) above in respect of the owner-driver arising out of any one occurrence and the total liability of the Company shall not in the aggregate exceed the sum of Rs. 15 lakhs during any one period of insurance.
- B) No compensation shall be payable in respect of death or bodily injury directly or indirectly wholly or in part arising or resulting from or traceable to (1) intentional self injury suicide or attempted suicide physical defect or infirmity or (2) an accident happening whilst such person is under the influence of intoxicating liquor or drugs.
- C) Such compensation shall be payable directly to the insured or to his/her legal representatives whose receipt shall be the full discharge in respect of the injury to the Insured.

This cover is subject to

- (a) the owner-driver is the registered owner of the vehicle insured herein;
- (b) the owner-driver is the Insured named in this Policy.
- (c) the owner-driver holds an effective driving license, in accordance with the provisions of Rule 3 of the Central Motor Vehicles Rules, 1989, at the time of the accident.

Section IV - EMI Protector

This section is applicable if it is shown on Your schedule.

What Is Covered

In consideration of the payment of an additional premium by the Insured as mentioned in the schedule and realization thereof by the Company, We will pay the Equated Monthly Installment (herein referred as EMI) payable by You to Financial Institution shown in the Policy schedule for the period insured vehicle is in Garage for repair, provided insured vehicle is damaged by a covered peril mentioned in Section 1 of the Policy and the extent of damage is such that the actual repair time is more than 21 days as certified by surveyor appointed to assess the loss. Actual repair time will be counted from the next calendar day of assessment of loss by surveyor and shall end on the day vehicle is ready for re-inspection or delivery. Our liability will be limited to maximum 2 months EMI or sum insured as mentioned in the schedule, whichever is less. Indemnity period of 2 months will be counted from the date of commencement of actual repair time as defined therein. You will have to submit EMI schedule certified by financier along with EMI payment track record in the last one year immediately preceding the date of loss.

What Is Not Covered

We will not pay

- 1) If claim under section 1 is not valid & admissible
- 2) If the vehicle has undergone is total loss or theft is reported
- 3) For more than one covered incident during the Policy period
- 4) Any other consequential loss or charges associated with the loan payment such as late payment charges, pre- payment charges or other documentation charges

Subject otherwise to terms, conditions, limitations and exceptions of the Policy.

- 1) Authorized Workshop/ Garage/ Service Station- A motor vehicle repair workshop/ garage/ service station authorized by Us.
- 2) Equated Monthly Installment (EMI) means the amount of monthly payment required to repay the principal amount of loan and interest by You as mentioned in the amortization chart referred in the loan agreement (or amendments thereto) between the qualified Financial Institution and You prior to the date of loss or damage under this Policy.
- 3) Financial Institution: An institution as defined under section 45I of Reserve Bank of India Act 1934 and shall include a non banking financial company as defined under section 45I of Reserve Bank of India Act 1934.
- 4) We, Us, Our, Ourselves means SBI General Insurance Company Limited
- 5) You, Your, Yourself- Means or refers to person or persons described in the schedule as the Insured. In case schedule refers to an entity other than individual, then representative of such entity would be deemed as You, Your, Yourself.

GENERAL EXCEPTIONS
(Applicable to all Sections of the Policy)

The Company shall not be liable under this Policy in respect of

- 1) any accidental loss or damage and/or liability caused sustained or incurred outside the geographical area;
- 2) any claim arising out of any contractual liability;
- 3) any accidental loss damage and/or liability caused sustained or incurred whilst the vehicle insured herein is being used otherwise than in accordance with the 'Limitations as to Use' or 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.
- 4) (a) any accidental loss or damage to any property whatsoever or any loss or expense whatsoever resulting or arising there from or any consequential loss
(b) any liability of whatsoever nature directly or indirectly caused by or contributed to by or arising from ionising radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel. For the purpose of this exception combustion shall include any self-sustaining process of nuclear fission.
- 5) Any accidental loss or damage or liability directly or indirectly caused by or contributed to by or arising from nuclear weapons material.
- 6) Any accidental loss damage and/or liability directly or indirectly or proximately or remotely occasioned by contributed to by or traceable to or rising 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, military or usurped power or by any direct or indirect consequence of any of the said occurrences and in the event of any claim hereunder the Insured shall prove that the accidental loss damage and/or liability arose independently of and was in no way connected with or occasioned by or contributed to by or traceable to any of the said occurrences or any consequences thereof and in default of such proof, the Company shall not be liable to make any payment in respect of such a claim.

DEDUCTIBLE

The Company shall not be liable for each and every claim under Section - I (loss of or damage to the vehicle insured) of this Policy in respect of the deductible stated in the Schedule.

CONDITIONS

This Policy and the Schedule shall be read together and any word or expression to which a specific meaning has been attached in any part of this Policy or of the Schedule shall bear the same meaning wherever it may appear.

- 1) Notice shall be given in writing to the Company immediately upon the occurrence of any accidental loss or damage in the event of any claim and thereafter the insured shall give all such information and assistance as the Company shall require. Every letter claim writ summons and/or process or copy thereof shall be forwarded to the Company immediately on receipt by the Insured. Notice shall also be given in writing to the Company immediately the Insured shall have knowledge of any impending prosecution, inquest or fatal inquiry in respect of any occurrence which may give rise to a claim under this Policy. In case of theft or criminal act which may be the subject of a claim under this Policy the Insured shall give immediate notice to the police and co-operate with the Company in securing the conviction of the offender.
- 2) No admission offer promise payment or indemnity shall be made or given by or on behalf of the Insured without the written consent of the Company which shall be entitled if it so desires to take over and conduct in the name of the Insured the defence or settlement of any claim or to prosecute in the name of the insured for its own benefit any claim for indemnity or otherwise and shall have full discretion in the conduct of any proceedings or in the settlement of any claim and the insured shall give all such information and assistance as the Company may require.
- 3) The Company may at its own option repair reinstate or replace the vehicle or part thereof and/or its accessories or may pay in cash the amount of the loss or damage and the liability of the Company shall not exceed:
 - (a) For total loss / constructive total loss of the vehicle - the **Insured's Declared Value (IDV)** of the vehicle (including accessories thereon) as specified in the Schedule less the value of the wreck.
 - (b) For partial losses, i.e. losses other than Total Loss/Constructive Total Loss of the vehicle - actual and reasonable costs of repair and/or replacement of parts lost/damaged subject to depreciation as per limits specified.
- 4) The Insured shall take all reasonable steps to safeguard the vehicle from loss or damage and to maintain it in efficient condition and the Company shall have at all times free and full access to examine the vehicle or any part thereof or any driver or employee of the insured. In the event of any accident or or breakdown, the vehicle shall not be left unattended without proper precautions being taken to prevent further damage or loss and if the vehicle be driven before the necessary repairs are effected any extension of the damage or any further damage to the vehicle shall be entirely at the Insured's own risk.
- 5) The Company may cancel the Policy by sending seven days notice by recorded delivery to the Insured at Insured's last known address and in such event will return to the Insured the premium paid less the pro rata portion thereof for the period the Policy has been in force or the Policy may be cancelled at any time by the Insured on seven days' notice by recorded delivery and provided no claim has arisen during the currency of the Policy, the Insured shall be entitled to a return of premium less premium at the Company's Short Period rates for the period the Policy has been in force. Return of the premium by the Company will be subject to retention of the minimum premium of Rs.100/- (or Rs.25/- in respect of vehicles specifically designed/modified for use by blind/handicapped/mentally challenged persons). Where the ownership of the vehicle is transferred, the Policy cannot be cancelled unless evidence that the vehicle is insured elsewhere is produced.
- 6) If at the time of occurrence of an event that gives rise to any claim under this Policy there is in existence any other insurance covering the same liability, the Company shall not be liable to pay or contribute more than its ratable proportion of any compensation, cost or expense.
- 7) If any dispute or difference shall arise as to the quantum to be paid under this Policy (liability being otherwise admitted), such difference shall independent of all other questions be referred to the decision of a sole arbitrator to be appointed in writing by the parties to the dispute or if they cannot agree upon a single arbitrator within 30 days of any party invoking Arbitration, the same shall be referred to a panel of three arbitrators two arbitrators one to be appointed by each of the parties to the dispute / difference, and a third arbitrator to be appointed by such two arbitrators who

shall act as the presiding arbitrator and Arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996.

It is clearly agreed and understood that no dispute or difference shall be referable to Arbitration as hereinbefore provided, if the Company has disputed or not accepted liability under or in respect of this Policy.

It is hereby expressly stipulated and declared that it shall be condition precedent to any right of action or suit upon this Policy that the award by such arbitrator/ arbitrators of the amount of the loss or damage shall be first obtained.

It is also hereby further expressly agreed and declared that if the Company shall disclaim liability to the Insured for any claim hereunder and such claim shall not, within twelve calendar months from the date of such disclaimer have been made the subject matter of a suit in a court of law, then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable hereunder.

8) 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.

9) 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:-

- a) Death Certificate in respect of the Insured
- b) Proof of title to the vehicle
- c) Original Policy

CLAIM SETTLEMENT

The Company will settle the claim under this Policy within 30 days from the date of receipt of necessary documents required for assessing the claim. In the event that the Company decides to reject a claim made under this Policy, the Company shall do so within a period of thirty days of the Survey Report or the additional Survey Report, as the case may be, in accordance with the provisions of Protection of Policyholders' Interest Regulations 2017.

GRIEVANCE REDRESSAL PROCEDURE

Dear Customer

We value your relationship and are committed to offer you best in class customer service. However if you are dissatisfied with the services rendered by us during any of your interactions with us or on resolution provided by us on your service request or complaint, we request you to register your concern with our Customer Care Team by following the steps mentioned below. We will acknowledge receipt of your concerns within next 72 working hours & will respond to you as soon as possible upon completion of the investigation.

Step 1:

Call us at Toll free nos: 1800 - 102- 1111 & 1800-22-1111 from Monday to Saturday(08.00 am - 8.00 pm) or write to us at customer.care@sbgeneral.in. If you don't hear from us within 48 hrs please follow step 2

Step 2:

If you are dissatisfied with the resolution provided, please Email to Head - customer care at head.customercare@sbgeneral.in

If after having followed Steps 1 & Step 2 your issue remains unresolved for more than 30 days from the date of filing your first complaint, you may approach the Insurance Ombudsman for Redressal of your Grievance.

The list of Insurance Ombudsman offices along with their area of jurisdiction is attached herewith.

Names of Ombudsman and Addresses of Ombudsmen Centres

Ombudsman Offices	
Areas of Jurisdiction	Addresses of the Ombudsman Offices
State of Gujarat and Union Territories of Dadra & Nagar Haveli and Daman and Diu.	AHMEDABAD 2nd Floor, Shree JayshreeAmbica Chambers, Nr. C U Shah College, 5, Navyug Colony, Ashram Road, AHMEDABAD-380014 Tel: 27546150, Fax: 079-27546142 Email: insombalhd@rediffmail.com
States of Madhya Pradesh and Chhattisgarh.	BHOPAL JanakVihar Complex, 2nd Floor, 6, Malviya Nagar, Opp. Airtel, Bhopal - 462 011. Tel:- 0755-2769200/201/202 Fax:- 0755-2769203 Email:-bimalokpalbhopal@airtelmail.in
State of Orissa.	BHUBANESWAR 62, Forest Park, BHUBANESWAR-751 009. Tel: 2535220, Fax: 0674-2531607 Email:susantamishra@yahoo.com, ioobbsr@vsnl.net
States of Punjab, Haryana, Himachal Pradesh, Jammu & Kashmir and Union territory of Chandigarh.	CHANDIGARH S.C.O No.101,102 & 103, 2nd Floor, Batra Building, Sector 17 D, CHANDIGARH-160 017 Tel: 2706196 EPBX:0172-2706468 Fax: 0172-2708274 Email: ombchd@yahoo.co.in
State of Tamil Nadu and Union Territories - Pondicherry Town and Karaikal (which are part of Union Territory of Pondicherry).in	CHENNAI Fatima Akhtar Court , 4th Floor, 453 (Old 312) Anna Salai, Teynampet, CHENNAI-600 018 Tel: 24333678, 24333668, 24335284 Fax: 044-24333664Email:insombud@md4.vsnl.net.in
States of Delhi and Rajasthan.	DELHI 2/2 A, Universal Insurance Bldg, Asaf Ali Road, NEW DELHI-110 002 Tel: 23239611, Fax: 011-23230858 Email: nsombudsmandel@netcracker.com
States of Andhra Pradesh, Karnataka and Union Territory of Yanam - a part of the Union Territory of Pondicherry.	HYDERABAD 6-2-46, YeturuTowers,Lane Opp. Saleem Function Palace, A C Guards, Lakdi-Ka-Pool, HYDERABAD-500 004 Tel: 55574325, Fax:040-23376599 Email:insombud@hd2.vsnl.net.in

State of Kerela and Union Territory of (a) Lakshadweep (b) Mahe- a part of Union Territory of Pondicherry.	KOCHI 2nd Floor, CC 27/2603 PulinatBldg, Opp. Cochin Shipyard, M G Road, ERNAKULAM-682 015 Tel: 2373334, 2350959, Fax:0484-2373336 Email:insuranceombudsmankochi@hclinfinet.com
States of West Bengal, Bihar, Sikkim, Jharkhand and Union Territories of Andaman and Nicobar Islands.	KOLKATA Hindustan Bldg. Annexe, 4, C.R. Avenue, 4th Floor, KOLKATA - 700 072. TEL : 033-22124346/22124339 Fax : 033-22124341 Email:-insombudsmankolkata@gmail.com
States of Uttar Pradesh and Uttaranchal.	LUCKNOW JeevanBhavan, Phase 2, 6th floor, Nawal Kishore Road, Hazaratganj, LUCKNOW-226001 Tel: 0522-2201188, 2231330, 2231331 Fax:0522-2231310 E-mail: ioblko@sancharnet.in
States of Maharashtra and Goa.	MUMBAI 3rd Floor, JeevanSevaAnnexe (above MTNL), S V Road, Santacruz (W),Mumbai-400 054 Tel: 26106889, EPBX:022-26106889 Fax:022-26106052, 26106980 Email:ombudsman.i@hclinfinet.com
States of Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.	GUWAHATI 'JeevanNivesh', 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati - 781001(ASSAM). Tel:- 0361-2132204/2131307/2132205 Fax:- 0361-2732937 Email:- ombudsmanghy@rediffmail.com

Address and contact number of Governing Body of Insurance Council

Secretary General
Governing Body of Insurance Council
JeevanSevaAnnexe, 3rd Floor (Above MTNL)
S. V. Road, Santacruz (W), Mumbai - 400 054
Tel: 022-6106889
Fax: 022-6106980, 6106052
Email: inscoun@vsnl.net

Integrated Grievance Management System

IRDA has launched the Integrated Grievance Management System (IGMS). IGMS is a grievance redress monitoring tool for IRDA. Policyholders who have grievances should register their complaints with the Grievance Redress Channel of the Insurance Company first. If policyholders are not able to access the insurance company directly for any reason, IGMS provides a gateway to register complaints with insurance companies.

Complaints shall be registered with insurance companies first and only if need be, be escalated them to IRDA (Consumer Affairs Department).

Website: http://www.policyholder.gov.in/Integrated_Grievance_Management.aspx

Toll Free Number of IRDA Grievance Call Centre: 155255

Timings: 8 AM to 8 PM -- (Monday to Saturday)

To, Date: 20/08/2021

SBI General Insurance Company Ltd
101-301 Natraj Junction of Western Express Highway and Andheri-Kurla Road Andheri East Mumbai Maharashtra 400006

Dear Sir/Madam,

Sub: Confirmation of No Claim Bonus (NCB) Declaration
Ref: Our Policy Number-000000014159575-02

We have received a Motor Insurance Proposal, which was earlier insured by your organization as informed by the Proposer to us.

Insured Name	ANJALI NISHIKANT KATHOKE	NCB % applied on the policy	45
Vehicle Insured	Maruti Suzuki-Wagon R	Vehicle Registration Number	MH 49 U 0197
Type of Cover	Comprehensive	Your Policy No. / Covernote No.	000000014159575-01
Policy Start Date	28/08/2020	Policy End Date	27/08/2021

The proposer has declared his entitlement for 50.0 % on his previous policy with you and he has not filed any claim in the expired policy. However, as the proposer is unable to furnish NCB reserving letter from your office as proof of NCB Entitlement that may be availed as per provisions of the India Motor Tariff. We have accepted the proposal and permitted the claimed NCB as per declaration submitted to us by the proposer.

Accordingly, we would request you to:

Confirm that the information mentioned above is correct:	Yes / No
If No, please state nature of incorrect information and the actual position thereof:	
State whether any claim under OD/Liability has been reported:	OD/Liability Claim
If Yes, date & amount of claim lodged:	

This letter is being sent as per GR 27 of India Motor Tariff. We request you to kindly provide us with the desired information by filling up the same in the original & sending it to us.

An early response will be highly appreciated. Please note you are required to respond to this letter within 30 days of receipt of this letter. In case we do not receive a response from you within this time frame, it shall be deemed that you have confirmed that the information provided by the Proposer (as contained herein) is true and correct.

Yours faithfully,
For SBI General Insurance Company Limited



Authorised Signatory

NCB Confirmation by previous insurer
Previous Policy No.:
Reference: SBI General Policy No :0000000014159575-02/

To,
The Manager,
SBI General Insurance Co. Ltd
101-301, Natraj, Junction of Western Express Highway and Andheri-Kurla Road,
Andheri East, Mumbai, Mumbai,
Maharashtra-400069,
1000000108.

We confirm that the insured is eligible / Not Eligible (Strike Out) for _____ % NCB at renewal.

For & On Behalf of
SBI General Insurance Company Ltd

Seal, Name & Designation of the Officer