

### Customer Information Sheet

This document provides only key information about your policy. Please refer to the policy document for detailed terms and conditions. In case of any conflict, the terms and conditions mentioned in the policy document shall prevail.

SI No	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy Clause Number
1	Product Name	<b>Acko All in One Secure Policy</b>	
2	Unique Identification Number (UIN) allotted by IRDAI	IRDAN157RPMS0005V01202526	
3	Structure	<p>Benefit Based Sections:</p> <p><b>In Section I:</b></p> <ul style="list-style-type: none"> <li>Garage Cash</li> <li>Loss of Income Due to Damage of Vehicle</li> </ul> <p><b>In Section II:</b></p> <ul style="list-style-type: none"> <li>Business shutdown</li> <li>Loss of Income</li> </ul> <p><b>In Section IV:</b></p> <ul style="list-style-type: none"> <li>Personal Accident</li> <li>HospiCash Benefit Due to Self-Hospitalization</li> <li>Critical Illness</li> </ul> <p><b>Section VI</b></p> <ul style="list-style-type: none"> <li>Rescinding of Offer Letter</li> <li>Breakdown Assistance Services</li> </ul> <p>Indemnity Based Sections:</p> <p><b>In Section I:</b></p> <ul style="list-style-type: none"> <li>Key Replacement Cover</li> </ul> <p><b>In Section III:</b></p> <ul style="list-style-type: none"> <li>Digital theft of Funds</li> <li>Identity Theft</li> <li>Fraudulent Charge on Loss of Card</li> <li>ATM Assault and Robbery</li> <li>Loss of Wallet coverage</li> </ul> <p><b>In Section IV:</b></p> <ul style="list-style-type: none"> <li>EMI Protection</li> <li>Trip Cancellation</li> </ul> <p><b>In Section V:</b></p> <ul style="list-style-type: none"> <li>Theft &amp; Burglary</li> <li>Robbery</li> <li>Damage</li> <li>Breakdown</li> </ul> <p><b>Section VI</b></p> <ul style="list-style-type: none"> <li>Terrorism cover</li> <li>Temporary Resettlement Expenses Cover</li> <li>Personal Liability Cover</li> </ul>	

		<ul style="list-style-type: none"><li>• Brokerage Expenses</li><li>• Delay in Salary Payment</li></ul> <p><b>Reinstatement Value (Modified Indemnity) Based section</b></p> <ul style="list-style-type: none"><li>• Section II.4. Home Building and Home Content Cover</li></ul>					
4	Interests Insured	Individual Customer and Group Customers.					
5	Sum Insured	To be specified as per Policy Schedule					
6	Policy Coverage	<p><b><u>Section I. Motor related Covers</u></b></p> <p><b>1. Key Replacement Cover</b></p> <p>If You have opted for this cover, Acko shall reimburse the insured, subject to the terms and limits specified in the Policy Schedule/Certificate for the cost incurred towards replacing the Insured Vehicle's key if the key is lost, stolen or damaged, or repairing the lock-set, if the lock-set or key is damaged.</p> <p><b>2. Garage Cash</b></p> <p>If You have opted for this cover, In case your vehicle is under repair in authorized garage due to accidental damage to the vehicle, Acko will pay a fixed amount as a daily allowance as mentioned in the Policy Schedule/Certificate of Insurance as per the class or type of vehicle.</p> <p><b>3. Loss of Income Due to Damage of Vehicle</b></p> <p>If You have opted for this cover, Acko will pay a fixed amount as per the type/class of vehicle in case the Insured Person suffers a loss of income where his vehicle is damaged due to below given covered Perils and is under repair for at least number of days mentioned in the Policy Schedule/Certificate of Insurance or in the event of theft, if the vehicle is not recovered within 90 days from the date of theft.</p> <p><b><u>Section II. Home and Business related Covers</u></b></p> <p><b>4. Home Building and Home Content Cover</b></p> <p>We give insurance cover for physical loss or damage, or destruction caused to Insured Property by the following unforeseen events occurring during the Policy Period.</p> <p>The events covered are given in Column A and those not covered in respect of these events are given in Column B.</p> <table><tr><th>COLUMN A</th><th>COLUMN B</th></tr><tr><td><b>We cover</b> physical loss or damage, or destruction caused to the Insured</td><td><b>We do not cover</b> any loss or damage, or destruction caused to the Insured</td></tr></table>	COLUMN A	COLUMN B	<b>We cover</b> physical loss or damage, or destruction caused to the Insured	<b>We do not cover</b> any loss or damage, or destruction caused to the Insured	<p>I.1</p> <p>I.2</p> <p>I.3</p> <p>II.4</p>
COLUMN A	COLUMN B						
<b>We cover</b> physical loss or damage, or destruction caused to the Insured	<b>We do not cover</b> any loss or damage, or destruction caused to the Insured						

Property by	Property
1. Fire	caused by burning of Insured Property by order of any Public Authority.
2. Explosion or Implosion	-
3. Lightning	-
4. Earthquake, volcanic eruption, or other convulsions of nature	-
5. Storm, Cyclone, Typhoon, Tempest, Hurricane, Tornado, Tsunami, Flood and Inundation	-
6. Subsidence of the land on which Your Home Building stands, Landslide, Rockslide	caused by a. normal cracking, settlement or bedding down of new structures, b. the settlement or movement of made up ground, c. coastal or river erosion, d. defective design or workmanship or use of defective materials, or e. demolition, construction, structural alterations or repair of any property, or groundworks or excavations.
7. Bush fire, Forest fire, Jungle fire	-
8. Impact damage of any kind, i.e., damage caused by impact of, or collision caused by any external physical object (e.g. vehicle,	caused by pressure waves caused by aircraft or other aerial or space devices travelling at sonic or supersonic speeds.

		falling trees, aircraft, wall etc.)		
		9. Missile testing operations	-	
		10. Riot, Strikes, Malicious Damages	caused by a. temporary or permanent dispossession, confiscation, commandeering, requisition or destruction by order of the government or any lawful authority, or b. temporary or permanent dispossession of Your Home by unlawful occupation by any person.	
		11. Bursting or overflowing of water tanks, apparatus and pipes.	-	
		12. Leakage from automatic sprinkler installations.	a. Repairs or alterations in Your Home or the building in which Your Home is located, b. Repairs, removal or extension of any sprinkler installation, or c. Defects in the construction known to You.	
		13. Theft within 7 (seven)days from the occurrence of and proximately caused by any of the above Insured Events.	if it is of any article or thing outside Your Home, or of any article or thing attached from the outside of the outer walls or the roof of Your Home, unless securely mounted.	
		5. Business Shutdown		
		If You opted for this cover, Acko will pay You the Sum		

		<p>Insured as mentioned in the Policy Schedule/Certificate of Insurance for physical loss or damage, or destruction caused to Insured's shops by the following unforeseen events resulting in interruption of business of the Insured for minimum number of days occurring during the Policy Period as mentioned in the Policy Schedule/Certificate of Insurance.</p> <p>The perils covered under this Cover would include:</p> <ul style="list-style-type: none"> <li>• Earthquake</li> <li>• Storm, Cyclone, Typhoon, Flood and Inundation</li> <li>• Subsidence and landslide including rockslide</li> <li>• Fire</li> <li>• Lightning</li> <li>• Riot, Strike and Malicious damage</li> </ul> <p>The Sum Insured will be payable as per the waiting period defined in the Policy Schedule/Certificate of Insurance.</p> <p><b>6. Loss of Income</b></p> <p>If You have opted for this cover, Acko will cover You for the following:</p> <p>i. <b>Loss of Income of Insured Person:</b> In the event of the Insured Person suffer loss of income due to loss of employment arising out of termination, dismissal, permanent suspension, retrenchment, Redundancy as per the Employer's rules/regulations on the Date of Relieving during the Policy period/Policy Period/Cover Period, We will pay a fixed amount equal to the Insured Person's ongoing EMI or percentage of EMI which is due towards outstanding amount of Loan up to the Sum Insured as mentioned in the Policy Schedule/Certificate of Insurance on a monthly basis for the number of months as mentioned in the Policy Schedule/Certificate of Insurance.</p> <p>ii. <b>Concurrent Loss of Income:</b> In the event Insured Person and his/her Spouse (henceforth mentioned as "Both") suffers loss of income during the Policy Period/Policy Period/Cover Period due to termination, dismissal, permanent suspension, retrenchment, Redundancy from their respective employments, imposed on Both by their respective employers as per the employer's rules/regulations on the date of relieving during the Policy Period/Cover Period, We will pay a fixed amount equal to the Insured Person's ongoing EMI or percentage of EMI which is due towards outstanding amount of Loan up to the Sum Insured as mentioned in the Policy Schedule/Certificate of Insurance on a monthly basis for an additional number of months equal to the number mentioned against this cover (Loss of</p>	<p>II.5</p> <p>II.6</p>
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		<p>Income) of Insured Person in the Policy Schedule/Certificate of Insurance.</p> <p><u>Section III. Cyber Protection related Covers</u></p> <p><b>7. Digital Theft of Funds</b></p> <p>If You opted for this cover, Acko will indemnify you for any direct financial loss that you sustain and is not compensated for by the issuing bank, financial institution or mobile wallet company, caused:</p> <ol style="list-style-type: none"> <li>As a result of a theft of funds due to unauthorized access to your bank account, credit or debit card or mobile wallet(s) by a third party, leading to theft of funds. This may occur wholly or partially through your personal device or smart home device or otherwise by digital or electronic means, and/or.</li> <li>As a consequence of you being a victim of phishing or email spoofing, Theft and Burglary provided that: <ol style="list-style-type: none"> <li>You report the theft to the issuing bank, financial institution or mobile wallet company within 7 days of discovery of the theft of funds or you lodge a report with National Cyber Crime Reporting Portal detailing the theft of funds within 7 days of discovery, and</li> <li>You provide evidence that your bank, financial institution or the mobile wallet company is not fully reimbursing you and you have made all reasonable efforts to obtain reimbursement.</li> </ol> </li> </ol> <p>We will also indemnify you for unrecovered losses after you have exhausted recovery options from your bank, wallet company, or financial institution for any reasonable and necessary costs you incur for prosecution of a criminal case against the third party responsible for theft of funds, phishing or email spoofing.</p> <p>In cases where expressly mentioned in your Policy Schedule / Certificate of Insurance, we will also cover for any penalties imposed by bank(s) or financial institution(s) for non-maintenance of minimum balance or missed loan EMI; provided that the account balance before such financial loss was above the required threshold and it fell short directly as a result of the covered incident.</p> <p>We will not cover for Financial Loss from any transactions involving physical money / cash / currency or currency equivalent, including withdrawal of money from Automated Teller Machine (A.T.M).</p> <p><b>8. Identity Theft</b></p> <p>If You opted for this cover, Acko will indemnify you against the following losses resulting from Identity Theft:</p> <ol style="list-style-type: none"> <li>Any direct financial losses including, provided that:</li> </ol>	III.7
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		<p>i. You have reported to us and the local police within 7 days of discovery of the identity theft, and</p> <p>ii. You can provide confirmation from your employer that the lost wages are not otherwise being compensated or reimbursed elsewhere.</p> <p>b. Reasonable and necessary costs incurred by you for credit monitoring and identity theft monitoring services.</p> <p>c. Reasonable and necessary costs incurred by you for prosecution of a criminal case against a third party for committing identity theft against you.</p> <p>d. Reasonable fees, costs and expenses for psychological counselling or treatment related to identity theft subject to the applicable sub-limit stated in the Policy Schedule / Certificate of Insurance.</p> <p>We will not cover for Financial Loss as a result of physical loss/ theft of card, phone, laptop or any other digital device/ payment authorization instrument.</p> <p><b>9. Fraudulent Charge on Loss of Card</b></p> <p>If You opted for this cover, Acko will reimburse the unauthorized charges up to the Sum Insured as mentioned in the Policy Schedule/Certificate of Insurance that You are responsible for on Your Lost credit/debit card, up to the timeline defined in the Policy Schedule/Certificate of Insurance to Your first reporting the event to Your debit/credit card issuer(s) and upto 7 days post reporting of the event to Your debit/credit card issuer.</p> <p><b>10. Atm Assault and Robbery</b></p> <p>If You have opted for this cover, Acko will reimburse You for the following up to the Sum Insured as specified in the Policy Schedule/Certificate of Insurance if the event specified occurs within the Policy Period:</p> <ol style="list-style-type: none"> <li><b>ATM Robbery</b> – We will reimburse You for the money You withdrew from any ATM around the world using Your Credit/Debit card if You lose such Money in a Robbery event that occurs within the timeline mentioned in the Policy Schedule/Certificate of Insurance of the withdrawal of the money.</li> <li><b>Bodily Injury</b> – We will reimburse You for reasonable emergency first aid charges for bodily injury during a Robbery that is covered in (1) of this clause “ATM Robbery”.</li> </ol> <p><b>11. Lost Wallet Coverage</b></p> <p>If You opted for this cover, Acko will reimburse You for the following, up to the sums specified below and always limited to the Sum Insured as specified in the Policy</p>	<p>III.8</p> <p>III.9</p> <p>III.10</p>
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		<p>schedule/Certificate of Insurance when Your wallet is lost or stolen during the Policy Period:</p> <ol style="list-style-type: none"> <li>1. Replacement costs for the Lost or stolen wallet not exceeding amount mentioned in your Policy Scheule/Certificate of Insurance.</li> <li>2. Application fees for applying for new Personal papers and/or Payment cards.</li> <li>3. Money and/or cheque(s) up to amount of Rs 500 provided that there is valid claim under 1 and 2 above.</li> </ol> <p><u>Section IV. Health and Travel related Covers</u></p> <p><b>12. Personal Accident</b></p> <p>If You have opted for this cover, the following Benefits shall trigger in the event of the Insured Person suffering an Injury due to an Accident. Claims under this coverage category will be admissible subject to the fulfilment of the following conditions with respect to the Insured Person's Injury:</p> <ol style="list-style-type: none"> <li>i. The date of Accident is within the Policy Period as specified in the Policy Schedule / Certificate of Insurance</li> <li>ii. Hospitalization is certified as Medically Necessary by the treating Medical Practitioner</li> </ol> <p><b>12.1. Accidental Death Benefit</b></p> <p>If an Insured Person suffers an Injury due to an Accident that occurs during the Policy Period and that Injury solely and directly results in the Insured Person's death within 365 days from the date of the Accident, We will pay the Sum Insured.</p> <p>If a claim is accepted under this Benefit in respect of an Insured Person and the amount due under this Benefit and claims already admitted under Benefit 12.1.(Accidental Death Benefit), Benefit 12.2(Permanent Total Disability), Benefit 12.3 (Permanent Partial Disability) in respect of the Insured Person will cumulatively exceed the Common Death or Disability Sum Insured, then Our maximum, total and cumulative liability under any and all such claims will be limited to the Common Death or Disability Sum Insured.</p> <p>On the acceptance of a claim under this Benefit and payment being made under any applicable Cover Options, all cover under this Section shall immediately and automatically cease in respect of that Insured Person.</p> <p><b>12.2 Permanent Total Disability</b></p> <p>If an Insured Person suffers an Injury due to an Accident that occurs during the Policy Period and that Injury solely and directly results in the Permanent Total Disability of the Insured Person which is of the nature specified in the table</p>	<p>III.11</p> <p>IV.12</p>
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		<p>below, within 365 days from the date of the Accident, We will pay the Sum Insured:</p> <p>For the purpose of this Benefit:</p> <ol style="list-style-type: none"> <li>1. <b>Limb</b> means a hand at or above the wrist or a foot above the ankle;</li> <li>2. <b>Physical separation of one hand or foot</b> means separation at or above wrist and/or at or above ankle, respectively.</li> </ol> <p>This Benefit will be payable provided that:</p> <ol style="list-style-type: none"> <li>a. The Permanent Total Disability continues for a period of at least 180 days from the commencement of the Permanent Total Disability, and the Disability Certificate issued by the treating Medical Practitioner at the expiry of the 180 days confirms that there is no reasonable medical hope of improvement.</li> <li>b. If the Insured Person suffers Injuries resulting in more than one of the Permanent Total Disabilities specified in the table above, then Our maximum, total and cumulative liability under this Benefit shall be limited to the Sum Insured specified against this Benefit in the Policy Schedule / Certificate of Insurance.</li> <li>c. If a claim is accepted under this Benefit in respect of an Insured Person and the amount due under this Benefit and claims already admitted under Benefit 12.1 (Accidental Death Benefit), Benefit 12.2 (Permanent Total Disability), Benefit 12.3 (Permanent Partial Disability) in respect of the Insured Person will cumulatively exceed the Common Death or Disability Sum Insured then Our maximum, total and cumulative liability under any and all such claims will be limited to the Common Death or Disability Sum Insured.</li> <li>d. If We have admitted a claim for Permanent Total Disability in accordance with this Benefit, then We shall not be liable to make any payment under the Policy on the death of the Insured Person, if the Insured Person subsequently dies;</li> <li>e. On the acceptance of a claim under this Benefit, all cover under this Policy shall immediately and automatically cease in respect of that Insured Person after the payment of any other applicable Cover Options.</li> </ol> <p><b>12.3 Permanent Partial Disability</b></p> <p>If an Insured Person suffers an Injury due to an Accident that occurs during the Policy Period and that Injury solely and directly results in the Permanent Partial Disability of the Insured Person which is of the nature specified in the table below within 365 days from the date of the Accident,</p> <p><b>12.4. Child Education Cover</b></p>	
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		<p>We will pay the amount specified in the Policy Schedule / Certificate of Insurance at the frequency specified in the Policy Schedule / Certificate of Insurance in respect of each surviving Dependent Child, irrespective of whether the child is an Insured Person under this Policy.</p> <p>For the purpose of this Benefit:</p> <ul style="list-style-type: none"> <li>• <b>Dependent Child</b> means a child of the Insured Person who is less than Age 25 and does not have any independent source of income.</li> </ul> <p>This Benefit will be payable provided that:</p> <ol style="list-style-type: none"> <li>a. We have accepted a claim under the Benefit 12.1 (Accidental Death Benefit) or Benefit 12.2 (Permanent Total Disability) in respect of that Insured Person</li> <li>b. The amount payable under this Benefit will be in addition to the amount payable under the Benefit 12.1 (Accidental Death Benefit) or any other applicable Benefits;</li> <li>c. We shall not be liable to accept a claim under this Benefit in respect of more than 2 Dependent Children of the Insured Person.</li> </ol> <p><b>13. HospiCash Benefit Due to Self Hospitalization</b></p> <p>If You have opted for this cover, and an Insured Person requires Hospitalization due to an Illness or Injury, as specified in the Policy Schedule / Certificate of Insurance, suffered or contracted during the Coverage Period, then We will pay the fixed lump sum amount specified against this Benefit in the Policy Schedule / Certificate of Insurance, for each continuous and completed period of 24 hours of Hospitalisation.</p> <p>This benefit will be payable provided that:</p> <ol style="list-style-type: none"> <li>a. Our liability to make any payment under this benefit shall commence only after a continuous and completed 24 hours of Hospitalization of the Insured Person for each claim.</li> <li>b. This Benefit shall not be payable in respect of the Insured Person for more than the maximum number of days specified in the Policy Schedule / Certificate of Insurance for each Policy Period.</li> <li>c. Only one fixed lumpsum allowance amount is payable of Hospitalization, regardless of number of the Illnesses contracted/Injuries sustained.</li> </ol> <p><b>14. Critical Illness</b></p> <p>If You opted for this cover, the following Benefits shall</p>	IV.13
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		<p>trigger in the event that the Insured Person is diagnosed to be suffering from a Critical Illness specified below . Claims under this coverage category will be admissible subject to the fulfilment of the following conditions with respect to the Insured Person's diagnosis:</p> <ol style="list-style-type: none"> <li>The Insured Person is First Diagnosed to be suffering from the Critical Illness during the Coverage Period</li> <li>Such Critical Illness also first occurs or first manifests itself during the Coverage Period as a first incidence;</li> <li>The Insured Person is specified to be covered with respect to such Critical Illness or Surgical Procedure, as stated in the Policy Schedule / Certificate of Insurance.</li> <li>First Diagnosis of the Critical Illness should have occurred during the Insured Person's life-time, i.e, no payment under any Benefit shall be made if such First Diagnosis of the Critical Illness is made post-mortem.</li> <li>All the test reports and medical reports required to support the diagnosis of the Critical Illness or the Surgical Procedure, the stage and form of such Critical Illness, and for Us to make a claims assessment, including any claim documentation required under Section 3 of the Policy, should be available before the death of the Insured Person and in a form suitable for sharing with Us.</li> </ol> <p>We will pay the percentage of Sum Insured as is specified against such Critical Illness under this Benefit in the Policy Schedule / Certificate of Insurance, if the Critical Illness or Surgical Procedure is covered under the Policy for the Insured Person, and provided that:</p> <ol style="list-style-type: none"> <li>The Insured Person survives the applicable Survival Period as specified in the Policy Schedule / Certificate of Insurance.</li> <li>The Critical Illness contracted has not arisen within the applicable Waiting Period specified in the Policy Schedule / Certificate of Insurance against this Benefit (or against any Critical Illness), from the Risk Commencement Date.</li> </ol> <p><b>15. EMI Protection</b></p> <p>If You opted for this cover, in case an Insured Person is unable to pay the EMI Amounts payable under his/her Loan due to an Illness or Injury, as specified in the Policy Schedule / Certificate of Insurance, suffered or contracted during the Coverage Period , then We will pay an amount equal to the EMI Amount which is due on the Insured's outstanding Loan in the number of months immediately</p>	<p>IV.14</p> <p>IV.15</p>
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		<p>following the date of such occurrence, as is specified in the Policy Schedule / Certificate of Insurance, subject to this amount not exceeding the amount specified in the Policy Schedule / Certificate of Insurance.</p> <p><b>16. Trip Cancellation</b></p> <p>If You have opted for this cover, Acko shall indemnify the Insured for the financial loss incurred by the insured arising out of cancellation of the trip for which loan is availed by the Insured following unexpected events, upto before the departure of the Trip solely attributable to and/or arising out of:</p> <ul style="list-style-type: none"> <li>• Sickness or injury of the Insured or immediate family member which requires medical attention /consultation resulting in hospitalization for a minimum of 48 hours.</li> <li>• Death or imminent death from an unforeseen illness or injury of your immediate family member.</li> <li>• Natural Calamities of which you were not aware at the time of purchase of the policy at your place of residence or your departure city or one of Your destination(s) as per your itinerary.</li> <li>• A Terrorist attack which occurs in your place of residence or your departure city, or in a city which is a scheduled destination for your Covered Trip provided that the act of Terrorism occurs within 15 days prior to your departure.</li> <li>• In case of loss of passport due to theft/robbery/burglary etc. and reissue of new passport has not happened prior to travel date (Applicable only to international travel).</li> </ul> <p>Subject to the maximum liability of the Company as specified in Policy Schedule/Certificate of Insurance, Acko shall pay to the Insured:</p> <ul style="list-style-type: none"> <li>• The payments made for accommodation and travel in advance by You which are non-recoverable after initiation of cancellation of the same.</li> <li>• Official cancellation charges of accommodation and travel tickets paid in advance of a proposed journey, if any The Sum Insured will be payable as per the waiting period defined in the policy certificate.</li> </ul> <p><u>Section V. Asset Protection related Covers</u></p> <p><b>17. Theft and Burglary</b></p> <p>If You opted for this cover, In the event of any Theft and Burglary of an Insured Asset occurring during the Policy Period, then We will pay the Insured as per the applicable settlement option specified in specific conditions (related to claim settlement), up to the Sum Insured or fixed benefit specified in the Policy Schedule/Certificate.</p> <p>This cover will be payable provided that the Insured provides Us with a certified copy of the police report filed,</p>	<p>IV.16</p> <p>V.17</p>
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		<p>and an Invoice for proof of ownership, or care, custody and control of the Insured Asset.</p> <p><b>18. Robbery</b></p> <p>If You opted for this cover, In the event of any Robbery of an Insured Asset occurring during the Policy Period, then We will pay the Insured as per the applicable settlement option specified conditions (related to claim settlement), up to the Sum Insured or fixed benefit specified in the Policy schedule/Certificate of insurance.</p> <p>This cover will be payable provided that the Insured provides Us with a certified copy of the police report filed, and an Invoice for proof of ownership, or care, custody and control of the Insured Asset.</p> <p><b>19. Damage</b></p> <p><b>19.1. Comprehensive Accidental Damage</b></p> <p>If You opted for this cover, In the event of any Physical Damage or Liquid Damage to an Insured Asset due solely and directly to any external, involuntary and unforeseeable cause arising during the Policy Period, then We will pay the Insured as per the applicable settlement option specified conditions (related to claim settlement), up to the Sum Insured or fixed benefit specified in the Policy Schedule/Certificate of Insurance.</p> <p><b>19.2. Accidental Screen Only Damage</b></p> <p>If You opted for this cover, In the event of the Screen Damage to an Insured Asset, such as cellular device, television set, tablet computer, laptop, or similar categories of equipment, due solely and directly to any external, involuntary and unforeseeable cause arising during the Policy Period, then We will pay the Insured as per the applicable settlement option specified conditions (related to claim settlement), up to the Sum Insured or fixed benefit specified in the Policy Schedule/Certificate of Insurance.</p> <p><b>20. Breakdown</b></p> <p>If You opted for this cover, In the event of any Breakdown of an Insured Asset, during the Policy Period, We will pay the Insured as per the applicable settlement option specified conditions (related to claim settlement), up to the Sum Insured or fixed benefit specified in the Policy Schedule/Certificate of Insurance and within the start and end date of the Policy Period specified in the Schedule/Certificate.</p> <p>This cover will be payable provided that:</p> <ol style="list-style-type: none"> <li>Cover is valid only on Insured Asset which are repaired within India.</li> </ol>	<p>V.18</p> <p>V.19</p> <p>V.20</p>
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		<p>b. Such breakdown/defects of the Insured Asset are covered within the Manufacturer's Warranty/Seller's Warranty, if any.</p> <p><u>Section VI. Add- on Covers</u></p> <p>This section will be subject to an additional premium over and above the base covers. It cannot be taken on a standalone basis. At least one cover from Sections I to V must be selected mandatorily in order to opt for add-on covers.</p> <p><b>21. Terrorism Cover</b></p> <p>If You opted for this Add-on cover, Acko will provide coverage for physical loss or damage, or destruction caused to Insured property by the Act of Terrorism occurring during the Policy Period.</p> <p>Coverage, exclusions and excess under this section will be as per Terrorism clause attached in the Annexure to the policy wordings.</p> <p>This cover will be subject to:</p> <ul style="list-style-type: none"> <li>It can only be opted if insured has opted for <b>Section II.4 "Home Building and Home Content Cover"</b> in this policy in that case "Exclusion no. 13 of 4.2.4 will stand deleted.</li> <li>All the terms and conditions of <b>Section II.4 "Home Building and Home Content Cover"</b> will be applicable.</li> </ul> <p><b>22. Temporary Resettlement Expenses Cover</b></p> <p>If You opted for this Add-on cover, it is hereby agreed and declared that, following the operation of an insured events covered under Home building and Home contents resulting in an admissible loss, the insurance under this Policy upto the amount mentioned in the policy schedule/certificate of insurance shall reimburse for temporary resettlement expenses incurred by the Insured if his/her home building is deemed uninhabitable as a result of a covered peril.</p> <p>For this cover, temporary resettlement expense should include following:</p> <ol style="list-style-type: none"> <li>Boarding and Lodging cost</li> <li>Storage/procurement costs for household items</li> <li>Movers and Packers cost to alternate accommodation</li> </ol> <p>This cover will be subject to:</p> <ul style="list-style-type: none"> <li>It can only be opted if insured has opted for <b>Section II.4 "Home Building and Home Content Cover"</b> in this policy.</li> <li>All the terms and conditions of <b>Section II.4 "Home Building and Home Content Cover"</b> will be applicable.</li> </ul> <p><b>23. Personal Liability</b></p> <p>If You opted for this Add-on cover, Acko will cover the</p>	<p>VI.21</p> <p>VI.22</p>
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		<p>compensation and Litigation Expenses (incurred with Our prior written consent) upto the amount mentioned in the Policy Schedule/Certificate of Insurance during the Policy Period which You may become legally liable to pay on account of accidental Death or bodily Injury to any third party or accidental damage to physical property owned by anyone other than You and/or Your Family as a result of physical loss or damage or destruction to Your Insured Property.</p> <p>This cover will be subject to:</p> <ul style="list-style-type: none"> <li>It can only be opted if insured has opted for <b>Section II.4 “Home Building and Home Content Cover”</b> in this policy.</li> <li>All the terms and conditions of <b>Section II.4 “Home Building and Home Content Cover”</b> will be applicable.</li> </ul>	VI.23
		<p><b>24. Brokerage Expenses</b></p> <p>If You opted for this Add-on cover, Acko Covers actual brokerage expense up to the amount mentioned in the Policy schedule/Certificate of Insurance, incurred for searching alternative accommodation in case your home becomes uninhabitable due to occurrence of Insured Events covered under Home Building and Home Contents.</p> <p>This cover will be subject to:</p> <ul style="list-style-type: none"> <li>It can only be opted if insured has opted for <b>Section II.4 “Home Building and Home Content Cover”</b> in this policy.</li> <li>All the terms and conditions of <b>Section II.4 “Home Building and Home Content Cover”</b> will be applicable.</li> <li>The maximum amount payable will be equivalent to one month's rent of the insured's home.</li> </ul>	VI.24
		<p><b>25. Delay In Salary Payment</b></p> <p>If You opted for this Add-on cover, Acko will cover penalty and/or additional interest levied by a financier in the event the Insured Person has defaulted monthly EMI payment on the due date as a result of delay in receipt /credit of salary for that particular month by the employer.</p> <p>This cover will be subject to:</p> <ul style="list-style-type: none"> <li>Salary payment must be delayed for the minimum number of days mentioned in the Policy schedule/Certificate of Insurance from the due date.</li> <li>The insured must be a full-time salaried employee with a valid employment contract.</li> <li>The employer must have had a track record of regular salary payments prior to the incident.</li> <li>Coverage is applicable only if the employer is registered and regulated in India.</li> <li>Claim must be supported by: <ul style="list-style-type: none"> <li>a. Employment proof and last 3 salary slips</li> <li>b. Employer confirmation or legal notice</li> <li>c. Bank statement showing salary non-receipt</li> </ul> </li> </ul>	VI.25



		<p>d. FIR or Insolvency proceedings (if applicable)</p> <p><b>26. Rescinding of Offer Letter</b></p> <p>If You opted for this Add-on cover, In case an Insured Person's employment offer letter is rescinded by the Prospective employer and the Insured Person is rendered un-employed, We will pay a fixed amount equal to the Insured Person's ongoing EMI or percentage of EMI as mention in your Policy schedule/Certificate of Insurance which is due towards outstanding amount of Loan.</p> <p>This cover will be subject to:</p> <ul style="list-style-type: none"> <li>• The Insured Person must have received a written and unconditional offer letter from a recognized employer specifying the role, remuneration, and confirmed date of joining.</li> <li>• A formal written communication from the employer withdrawing the offer must be provided. The withdrawal must occur prior to the date of joining mentioned in the offer letter.</li> <li>• The benefit is payable only if the Insured Person has an active loan account with EMIs due.</li> <li>• The benefit is payable only once during the policy period.</li> <li>• Insured person should be unemployed and not have any other source of income.</li> </ul> <p><b>27. Breakdown Assistance Services</b></p> <p>If You opted for this Add-on cover, Acko will provide assistance services in the event of a breakdown of the insured asset or property. The services offered may include, but are not limited to, the following:</p> <ul style="list-style-type: none"> <li>• Vehicle health check-up and related diagnostic or maintenance services</li> <li>• Health check-up or diagnostic services for Insured Asset or home contents</li> <li>• Wellness programs, including annual health check-ups</li> </ul> <p>Please not for detailed coverage refer the Policy wordings.</p>	<p>VI.26</p> <p>VI.27</p>
7	Add-on Cover	Not Applicable	
8	Loss Participation	<p>Please specify following as per Policy Schedule/Certificate of Insurance:</p> <p>Co-Payment:</p> <p>Sub-Limit:</p> <p>Deductible:</p>	
9	Exclusions	<p><b>General Exclusions:</b></p> <p>We do not cover losses and expenses for any loss or damage or destruction of the Insured Property that is directly or indirectly as a result of or is caused by or arising from events, stated below:</p> <ol style="list-style-type: none"> <li>1. Any breach of the law by the Insured Person with a criminal intent.</li> </ol>	<p>3. General Exclusions applicable to the Policy</p>

		<p>2. 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 citizens of whatever nation, riots or civil commotion.</p> <p>3. Any Injury sustained while performing duty in army, navy, air force, paramilitary force, police or any other such institution, except to the extent it is expressly covered under any Benefit.</p> <p>4. Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste or from nuclear weapon materials or from the combustion of nuclear fuel. For the purpose of this exclusion, combustion shall include any self-sustaining process of nuclear fission.</p> <p>5. Usage, consumption or abuse of alcohol and/or narcotic substances.</p> <p>6. Participation (aggravation) in any kind of strike, processions, riots etc whether peaceful or violent.</p> <p>7. Any act of self-destruction or self-inflicted injury, attempted suicide or suicide.</p> <p>8. Any Injury / Illness occurring whilst working in underground mines or explosives magazines, or involving electrical installation with high tension supply, or as jockeys or circus personnel.</p> <p>9. 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.</p> <p>10. Any consequential or indirect losses or expenses related to any Insured Event.</p> <p>11. Any tests and treatment relating to infertility and in vitro fertilization.</p> <p>12. Any Injury / Illness occurring whilst engaging in any Adventure Sports, either as an instructor/ trainer, or as a participant.</p> <p><i>For specific exclusion, kindly refer to the policy wordings</i></p>	
10	Special Conditions and Warranties	As mentioned in the Policy Schedule/Certificate of Insurance	
11	Admissibility of Claim	<p>Procedure to be followed:</p> <p>a. Notify Us on Our email ID: <a href="mailto:hello@acko.com">hello@acko.com</a> or at Our website <a href="http://www.acko.com/gi">www.acko.com/gi</a>, or contact number: <b>1800 266 2256</b> immediately, but in any case, within the number of days as specified in Schedule/Certificate of such event;</p> <p>b. Claims made in respect of an Insured under any of Insuring Clauses applicable to the Insured shall subject to the availability of the Sum Insured, &amp;</p>	4.General conditions (Point.20)

		<p>applicable Sub-limits, Co-payment, and Deductible specified in the Policy Schedule/Certificate of Insurance against the Insuring Clause(s).</p> <p>c. We shall make the payment of claim that has been admitted as payable by Us under the Policy within 15 days of submission of all necessary documents and information and any other additional information required for the settlement of the claim.</p> <p>d. All claims will be investigated (as required) and settled in accordance with the applicable regulatory guidelines including the IRDAI(Protection of Policyholders' Interests, Operations and Allied Matters of Insurance Regulations, 2024).</p> <p>e. In case survey report is required, the surveyor shall submit the survey report to Us within fifteen days of allocation. We shall decide on the claim within seven days of receipt of the survey report or after expiry of fifteen days from allocation of the claim to the surveyor whichever is earlier.</p> <p>f. Upon acceptance of an offer of settlement by You, payment of the amount due shall be made within 7 days from the date of acceptance of the offer by Us.</p> <p>g. In the event the claim is not settled within 15 days of the stipulated time, We shall be liable to pay interest at a rate, which is 2% above the bank rate from the date of intimation till the date of actual payment.</p> <p>For any section wise claim admissibility please refer to Policy wordings</p>	
12	Policy Servicing- Claim Intimation and Processing	<p>Company Officials: Acko General Insurance Limited, 2nd floor, #36/5, Hustlehub One East, 27th Main Rd, Sector 2, HSR Layout, Bengaluru, Karnataka - 560102</p> <ul style="list-style-type: none"> <li>• Our website: <a href="http://www.acko.com/gi">http://www.acko.com/gi</a></li> <li>• Email: <a href="mailto:hello@acko.com">hello@acko.com</a></li> <li>• Toll Free: 1800 266 2256</li> </ul>	4
13	Grievance Redressal and Policyholders Protection	<p>For resolution of any query, insured may contact the company on our helpline number 1800 266 2256 or may write an e-mail at <a href="mailto:hello@acko.com">hello@acko.com</a></p> <p>For resolution of grievance, insured may contact the company on our toll-free helpline number 1800 210 4990 (Operating hours: 10 AM – 7 PM, all days of the week).</p> <p>You can also write to <a href="mailto:grievance@acko.com">grievance@acko.com</a> Your complaint will be acknowledged by us within 24 working hours.</p> <p>If in case you are dissatisfied with the decision/resolution provided through details indicated above on your Complaint or have not received any response within 14 working days, you may write or email to Chief Grievance Officer:</p>	5

		<p>Email: <a href="mailto:gro@acko.com">gro@acko.com</a></p> <p>Postal Address: Acko General Insurance Limited 36/5 Hustlehub One East, Somasandrapalya, 27th Main Road Sector 2, HSR Layout, Karnataka Bangalore – 560102</p> <p>The Chief Grievance Officer will provide a final response within 7 days of receipt of the escalation. If in case your issue remains unresolved within 14 days of lodging a complaint with us and you wish to pursue other avenues for redressal of grievances, you may approach IRDAI by calling on the Toll-Free no. 155255 or you can register an online complaint on the website <a href="https://irdai.gov.in/igms1">https://irdai.gov.in/igms1</a></p> <p>Insurance Ombudsman for Redressal, whose details are given below: General Manager Consumer Affairs Department- Grievance Redressal Cell Website: <a href="https://cioins.co.in/Ombudsman">https://cioins.co.in/Ombudsman</a></p> <p>In the event of an unsatisfactory response from the Grievance Officer, You may register a complaint in the Integrated Grievance Management System (IGMS) of the IRDAI.</p>	
14	Obligation of the Policy Holder	<ul style="list-style-type: none"> <li>• To disclose all information correctly sought correctly by insurer at the time of filling the proposal form.</li> <li>• In case of any change/ modification/ addition to the already declared information the same shall be brought to the notice of the insurer immediately.</li> <li>• Non- disclosure of material information may affect the claim settlement.</li> </ul>	

Declaration by the Policy Holder:

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

Place:

Date:

(Signature of the Policyholder)