

CUSTOMER INFORMATION SHEET/KNOW YOUR POLICY

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

SI No	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy Clause Number
1	Name of Insurance Product	Group Domestic Travel Insurance Policy	
2	Policy number		
3	Type of Insurance Product/ Policy	Benefit	
4	Sum Insured (Basis) (Along with amount)	As mentioned in the policy schedule Amount: As mentioned in your Policy schedule	
5	Policy Coverage	Base Benefit:	Section C
		In-built Benefits	(I)
		Accidental Medical Expense Reimbursement	1
		Accidental Hospital Fixed Allowance	2
		Accidental Death Benefit	3
		Personal Accident (Common Carrier)	4
		Loan Protector	5
		Personal Liability	6
		Trip Delay	7
		Carrier Cancellation	8
		Loss of Checked-in Baggage	9
		Missed Carrier	10
		Missed Event	11
		Cancellation of Carrier by Insured Person	12
		Fare Lock	13
		Fare Dip	14
		Home Insurance Cover	15
		Travel with Pet Cover	16
		Cover Benefits	(II)
		Hospital Daily Allowance	1
		Compassionate Visit	2
		Compassionate Visit Stay	3
		OPD Treatment	4
		Convenient Travel Option	5
		Ambulance Transportation Cover	6
		Illness Cover	7
		Pre-Existing Illness Cover	8
		Permanent Total Disability	9
		Permanent Partial Disability	10

		Total Temporary Disability	11
		Repatriation of Mortal Remains	12
		Evacuation (Medical & Catastrophe)	13
		Mobility Cover	14
		Child Education Cover	15
		Disappearance	16
		Funeral Expense	17
		Physiotherapy	18
		Outstanding Bills Protection Benefit	19
		Modification of Vehicle/Home	20
		Chauffeur Benefit	21
		Hijack Daily Allowance	22
		Delay of Checked-in Baggage	23
		Denied Boarding - Carrier	24
		Loss of Baggage and Personal Effects	25
		Electronic Equipment Cover	26
		Financial Emergency Cash	27
		Trip Cancellation & Interruption	28
		Trip Curtailment	29
		Missed Connection	30
		Denied Hotel Accommodation	31
		Emergency Hotel Requirement	32
		Fire and Allied Perils (Home Building & Contents)	33
		Inconvenience Due to Non-confirmation of the Waiting List Ticket	34
6	Exclusions (what the policy does not cover)	Exclusions: <ol style="list-style-type: none"> Suicide or attempted suicide, intentional self-inflicted Injury or acts of self-destruction, whether the Insured Person is medically sane or insane. Medical or surgical treatment except as necessary solely and directly as a result of an Accident. Certification of disability by a Medical Practitioner who shares the same residence as the Insured Person or who is a member of the Insured Person's family. Death, disability or illness directly or indirectly caused by or associated with any venereal disease or sexually transmitted disease. Death, disability or illness resulting directly or indirectly, contributed or aggravated or prolonged by childbirth or from pregnancy or a consequence thereof including ectopic pregnancy unless specifically arising due to Accident. Death, disability or illness caused by participation of the Insured Person in any flying activity, except as a bona fide passenger on a public aircraft, which is operating under a valid license from the relevant authority for the transportation of passengers. Death, disability or illness or Injury arising from or 	Section D

		<p>caused by ionizing radiation or contamination by radioactivity from any nuclear fuel (explosive or hazardous form) or resulting from or from any other cause or event contributing concurrently or in any other sequence to the loss, claim or expense from any nuclear waste from the combustion of nuclear fuel, nuclear, chemical or biological attack.</p> <p>h. Any change of profession after inception of the Policy which results in the enhancement of Our risk under the Policy, if not accepted and endorsed by Us on the Certificate of Insurance.</p> <p>i. Any journey where the Insured Person is travelling as a commercial driver, operator or crew member in, or carrying out any testing or repairs on a Common Carrier.</p> <p>j. Any intentional illegal or unlawful act or confiscation, detention, destruction by customs or other authorities or any breach of government regulation.</p> <p>k. Any failure to take reasonable precautions to avoid a claim under the Policy following a mass media or government issued warning.</p> <p>l. Any event arising from or caused due to use, abuse or a consequence or influence of an abuse of any substance, intoxicant, drug, alcohol or hallucinogen.</p> <p>m. Any breach of law or participation of the Insured Person in an actual or attempted felony, riot, crime, misdemeanour or civil commotion with criminal intent.</p> <p>n. Any act of foreign invasion, act of foreign enemies, hostilities, warlike operations (whether war be declared or not or while performing duties in the armed forces of any country during war or at peace time), and participation of the Insured Person in any naval, military or air-force operation, civil war, public defence, rebellion, revolution, insurrection, military or usurped power.</p> <p>o. Engaging in any Hazardous Activities, testing of any kind of Common Carrier, engaging in manual work during a journey, engaging in any offshore work activity, mining, tunnelling or any work involving electrical installation with high tension supply, aerial photography, ammunition, explosives, firearms or flight duty, except as a fare-paying passenger.</p> <p>p. Any journey commenced when You are not fit to travel or are travelling against the advice of a Medical Practitioner.</p> <p>q. Any journey commenced to obtain medical care, treatment or advice of any kind whether this is the sole purpose of Your journey or not.</p> <p>r. Chemical attack or weapons means the emission, discharge, dispersal, release or escape of any solid,</p>	
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		<p>liquid or gaseous chemical compound which, when suitably distributed, is capable of causing any illness, incapacitating disability or death.</p> <p>s. Biological attack or weapons means the emission, discharge, dispersal, release or escape of any pathogenic (disease producing) microorganisms and/or biologically produced toxins (including genetically modified organisms and chemically synthesized toxins) which are capable of causing any illness, incapacitating disability or death.</p>	
7	Waiting Period	Applicable as per Policy Schedule	
8	<p>Financial limits of coverage</p> <p>Sub-limit (It is a pre- defined limit and the insurance company will not pay any amount in excess of this limit)</p> <p>Co-payment (It is a specified amount/percentage of the admissible claim amount to be paid by policyholder/insured).</p> <p>Deductible (It is a specified amount: up to which an insurance company will not pay any claim, and which will be deducted from total claim amount (if claim amount is more than the</p>	<p>The policy will pay only up to the limits specified hereunder for the following diseases/procedures:</p> <p>Sublimit : Not Applicable</p> <p>Co-payment - Please specify as per the policy Schedule.</p> <p>Deductible - Please specify as per the policy Schedule</p>	

	specified amount) Any other limit (as applicable)		
9	Claims/Claims Procedure (Applicable to Base and Optional benefits)	<p>Details of procedure to be followed for cashless service as well as for reimbursement of claim including pre and post hospitalization.</p> <p>Turn Around Time (TAT) for claims settlement:</p> <p>i. TAT for preauthorization of cashless facility 1 hour</p> <p>ii. TAT for cashless final bill authorization: 3 hours</p> <p>Cashless claim facility can be availed in all network hospitals. The list of network hospitals are available on our website or can be checked at the customer care centre.</p> <p>For reimbursement of a claim, please submit all necessary documents on our App or email to us. We may ask for original hard copy of the documents in some cases.</p> <p>Please find the important links/numbers below :-</p> <p>i. Network Hospital Details: Acko App or www.acko.com/gi</p> <p>ii. Helpline Number: 1800 266 2256</p> <p>Hospitals which are backlisted or from where no claims will be accepted by the insurer: Acko App or www.acko.com/gi</p> <p>Downloading getting the claim form: Acko App or www.acko.com/gi</p> <p>Methods of Intimation/Notifications:</p> <p>A claim notification can be made using one of the following communication channels:</p> <ul style="list-style-type: none"> • Call Contact No. 1800-266-2256 • Email notification to central email address mailto:hello@acko.com • By letter/ Fax to our office • By completing a manual claim form along with written claim intimation and mailing it to corporate office • Via the website www.acko.com/gi whenever available 	Section 7
10	Policy Servicing	<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"> • Our website: www.acko.com/gi • Email: hello@acko.com • Toll Free: 1800 266 2256 	
11	Grievances/Complaints	<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 hello@acko.com</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>Senior Citizens Support:</p>	Section E(3)

		<p>Phone: 080-62370023 Email: grievance.healthseniorcitizen@acko.com Complaints will be acknowledged within 24 hours of receipt. A final resolution will be provided within 14 days from receipt of the complaint you can also write to grievance@acko.com. 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: Email: gro@acko.com 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 https://irdai.gov.in/igms1 Insurance Ombudsman for Redressal, whose details are given below: General Manager Consumer Affairs Department- Grievance Redressal Cell Website: https://cioins.co.in/Ombudsman</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>	
12	Things to remember	<p>In case of Health Segment Free Look cancellation: You may cancel the insurance policy if you do not want it, within 30 days from the beginning of the policy. Policy renewal: Except on grounds of fraud, moral hazard or misrepresentation or non-cooperation, renewal of your policy shall not be denied, provided the policy is not withdrawn. Moratorium Period: After completion of five continuous years under the policy no look back to be applied. This period of five years is called as moratorium period. The moratorium would be applicable for the sums insured of the first policy and subsequently completion of five continuous years would be applicable from date of enhancement of sums insured only on the enhanced limits.</p>	Section E (II)
13	Your Obligations	Please disclose all pre-existing disease/s or condition/s before buying a policy. Non-disclosure may affect the claim	

		settlement.	
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Declaration by the Policy Holder;

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

Place:

Date:

(Signature of the Policyholder)

Note:

Please go through our website <https://www.acko.com/gi/download/> for the product related documents including the Customer Information sheet are available on the website of the insurer.