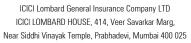


GROUP PERSONAL ACCIDENT KEY INFORMATION SHEET

DISCLAIMER NOTE: The information mentioned below is illustrative and not exhaustive. The information must be read in conjunction with the policy wordings. In case of any conflict between the Key Information Sheet and the policy wordings, the terms and conditions mentioned in the policy wordings shall prevail.

S. No	Title	Description	Refer to Policy Wordings
1	Product Name	Group Personal Accident	
2	covered under the	The policy covers the Insured Person (or his Nominee/ legal heir, as the case may be) for the occurrence of any Insured Event, as specifically described, under different Benefit(s) (and Extensions - if any) arising due to an Injury sustained by the Insured Person during the Policy Period but not exceeding the Sum Insured as specified under the respective Benefits (and Extensions - if any) under Policy Schedule. The cover is for 24 hours or as mentioned in Part 1 of the policy and on a worldwide basis.	Part I of the Policy
3	Coverage and Optional Add-ons	Benefits: Death Permanent Total Disablement Permanent Partial Disablement Temporary Total Disablement Temporary Total Disablement Extensions: Cover for Expenses related to Burns Modification of residential accommodation & vehicle: Repatriation of Mortal Remains Ambulance Charges Transportation Allowance (Compassionate visit) Travel Expenses for Medical Treatment Catastrophe Evacuation: Cost of Clothing Damage Loss of Job Cover Improved Disability Benefit/ Dismemberment Daily Cash Allowance: Carriage of Dead Body On Duty Cover Children's Education Grant Accidental Hospitalization Expenses Mysterious disappearance Treatment outside India (along with travelling cost & boarding & lodging of the attendant): Medical Expenses Out Patient Department (OPD) expenses Loss/damage to School Bag/Books Widowhood Cover Purchase of Blood Prosthesis & Artificial Limbs Broken Bones Legal Expenses	Part II of the policy Clause No. 2 (Benefits) and Clause No. 3 (Extensions)
4	What are the major Exclusions in the Policy		Part I and Part II (Clause 4) of the policy Indicative list of Exclusions
5	Payout Basis	Reimbursement claims of covered benefits upto specified sum insured as per the scope of cover	Part II of the policy clause 4 (i, ii, iii and iv)- Claim Administration
6	Terms of Renewal	 (i) The Policy can be renewed as a separate contract under the then prevailing ICICI Lombard Group Personal Accident Insurance product or its nearest substitute (in case the product ICICI Lombard Group Personal Accident Insurance is withdrawn by the Company) approved by IRDA. (ii) The policy shall ordinarily be renewable except on grounds of fraud, moral hazard or misrepresentation or non- cooperation by the insured. 	Clause 10- Terms of renewal
7	Cancellation	 The Policy shall be void and all premium paid hereon shall be forfeited to the Company, in the event of misrepresentation, mis-description or non-disclosure of any material fact. Insured or the Company may cancel this Policy by giving the Company or the insured, as the case may be, 15 days written notice for the cancellation of the Policy, and then the Company shall refund premium on short term rates (if initiated by the insured) or pro rata rates (if initiated by the Company) for the unexpired 	Part III of the policy Clause 9- Cancellation/ Termination





Policy Period. The Company shall follow the short period scale unless otherwise mutually agreed.



GROUP PERSONAL ACCIDENT

UIN-ICIPAGP22077V062122 Misc 05

Part I of Policy: Policy Schedule

Policy No. 4005/245696396/00/000 (TRUE COPY) Issued at MUMBAI

1. Name of the Insured: SHREEYASH COLLAGE OF ENGINEERING AND TECHNOLOGY

2. Mailing Address of the Insured: Gut No 258, Shreeyash Prathisthan Campus, Satar Parisar, Beed By Pass,

Aurangabad

Aurangabad

Maharashtra Pin- 431001

3. Intermediary Details: Agency Code1: **ILG52791**

> Agency Name: JAGANNATH NAMDEO AMLE

Agent's mobile no.: 9881730613

Agent's E-mail ID: jaggu8087@gmail.com

From: 22/04/2022 Time: 00:00 Hours

To Midnight of 21/04/2023

5. Total number of persons to be insured: 102

102,000,000.00 6. Total Capital Sum Insured:

7. Details of Persons to be insured: As per annexure attached

Premium:

4. Period of Insurance:

Premium Break Up	(Rs.)	Premium (Rs.)
Stamp Duty	(Rs.)	50.00
*Total Premium	(Rs.)	35,182.14

^{*}Premium value mentioned above is inclusive of taxes applicable

9. Conditions/Endorsements

- 1. The policy is issued on Named basis.
- 2.Risk Category: I & II.
- 3.Age Limit 18-65 Years.
- 4. Premium for Addition & deletion to be charged on Pro Rata.
- 5. The coverage is a worldwide cover.
- 6. A = Accidental Death only â⿬â¿¿ 100%
- |(B = (A) + Loss of Two Limbs, Two eyes or one limb and one eye ââċ¬ïċ½100%, Loss of One Limb or One Eye ââċ¬ïċ½ 50%, Permanent Total Disablement (PTD) from injuries other than those named above Ţâċ¬ïċ½100%
- C = (A) + (B) + Permanent Par al Disablement (PPD)
- D1-(A) + (B) + (C) + Temporary Total Disablement (TTD) 1% of S.I. Or Rs.5,000/=per week or actual weekly salary which ever is less
- 10. Accidental Hospitalization expenses Payable upto Rs.100,000 or actual whichever is less
- 11. Animal/Snake/Insect Bite Covered except Mosquito bite
- 12. Carriage of Dead Body 2% of SI subject to max to Rs 2500/-
- 13. Children Education Welfare Fund for dependent children incase of Death of Employee- upto 10,000/- per child (Restricted to 2 children)
- 14. Risk Category I & II are covered
- 15. Premium to be charged on prorata scale for addition/ deletion endorsement
- 16. Terrorism is covered in the policy except for that arising out of Nuclear, Biological and/or Chemical means which is out side the scope of the policy.
- 17. Any endorsements will be from the date of addition and not from the inception of the policy.
- 18. Premium shall not be refunded for deletion if any claim is paid during the policy.

10. Exclusions

- Suicide, attempt to Suicide or intentionally selfÁ¿Ä¢Á¢â¿¿Ä¬Á¯Ä¿Ä½ inflicted injury, sexually transmitted conditions, mental 1. disorder, anxiety, stress or depression.
- 2.Being under influence of drugs, alcohol, or other intoxica on or hallucinogens.
- 3. Participation in actual or attempted felony, riot, civil commotion, crime misdemeanor.
- 4.Committing any breach of law of land with criminal intent.
- 5.Death or disablement resul ng from Pregnancy or childbirth.
- 6. Perils of the sea are excluded from the scope of the policy.
- 7. Drivers are excluded from the policy.
- 8. Professional sports team in respect of specific benefit for inability to perform.
- 9. Participation in any kind of motor speed contest.
- While engaged in aviation, or whilst mounting or dismounting from or traveling in any aircraft. (Not applicable for fare Paying Passengers).
- 11. Underground mining & contractor specializing in tunneling.
- 12. Naval, military or air force personnel.
- 13. Radioactivity, Nuclear risks, ionizing radiation.
- 14. Risk Category III people are out of the scope of the policy.
- Persons working in mines, explosives, Electrical installations on high tension lines, Racing, Circus People, skiing, mountaineering, big 15.game hunting, ballooning, hang gliding, river rafting, winter sports, skiing, ice hockey, polo & such other persons engaged in occupation of similar hazard.



Subject otherwise to terms and conditions of Group Personal Accident Insurance Policy.

Signed for and on behalf of the ICICI Lombard General Insurance Company Limited, at Mumbai on this date 22/04/2022.

Authorized Signatory ICICI Lombard General Insurance Company Ltd.

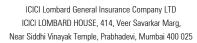
GSTIN Reg. No: 27AAACI7904G1ZN IL GIC GSTIN Address : 414, ICICI LOMBARD HOUSE, VEER SAVARKAR MARG, NEAR SIDDHI VINAYAK TEMPLE MAIN GATE, PRABHADEVI, MUMBAI,

400025, MAHARASHTRA

HSN/SAC code: 997133 - GENERAL INSURANCE SERVICES

"The stamp duty of Rs. 50.0000 paid in cash or by demand draft or by pay order, vide Reciept/challan no. CSD232202184 dated 06/01/2022."

Policy shall stand cancelled ab initio in the event of non realisation of the premium





Note :- The policy could be subject to certain changes in terms and conditions including change in premium rate" - this would be applicable to all group product

ICICI Lombard General Insurance Company Limited

IRDA Reg. No. 115
Mailing Address:
401 & 402, 4th Floor, Interface 11,
New Linking Road, Malad (West),
Mumbai - 400 064.

CIN: L67200MH2000PLC129408
Registered Office:
ICICI Lombard House, 414, Veer Savarkar Marg,
Near Siddhi Vinayak Temple, Prabhadevi,
Mumbai - 400 025.

Toll free No. : 1800 2666

Alternate No.: +9192236 22666 (chargeable)

Email: customersupport@icicilombard.com

Website : www.icicilombard.com