



UNITED INDIA INSURANCE COMPANY LIMITED
REGISTERED & HEAD OFFICE: 24, WHITES ROAD, CHENNAI-600014

GROUP PERSONAL ACCIDENT POLICY

Who can be covered under the policy?

Members of a Group, employees of an Organization etc. may be covered under a Group Personal Accident Policy.

The following two types of policies can be issued.

Type 'A' : Covering employees of a firm / company / Association or Club (i.e. with employer - employee relationship)

These are further divided into two types:-

- i. Named employees and
- II . Unnamed employees

Type 'B' : Covering members of an Institution/Society/Association/ Club (i.e. with no employer - employee relationship.)

This group can also be bifurcated into:-

- i. Groups where members could be named and identified.
- ii. Others.

'ON DUTY' COVERS:

If cover is required only for the restricted hours of duty (not for 24 hours) the same can be offered. The cover is meant for employees, taken out by employer for accident to employees during working hours.

'OFF DUTY' COVERS:

If cover is required for only for the restricted hours when the employee is not at work and / or not on official duty the same can be offered and appropriate premium charged.

The GROUP Personal Accident policy covers the Individual following an accident against the risks detailed below:

COVERAGE

- i. Death within twelve calendar month of occurrence of an injury -the Capital Sum insured chosen by the proposer
- ii. Permanent Total Disablement following an accident-Loss of Sight of both eyes, or the actual loss by physical separation of two entire hands or two entire feet, or one-entire hand and one entire foot or of such loss of sight of one eye and such loss of one entire foot, Use of hands or two feet, or of one hand one foot or such loss of sight of one eye and such loss of use of one hand or one foot -the capital sum insured chosen by the proposer
- iii. Permanent Partial Disablement-the sight of one eye or of the actual loss by physical separation of one entire hand or one entire foot, Total and irrecoverable loss of use of a hand or a foot without physical separation fifty percent (50%) of the capital sum insured chosen by the proposer

Note : For the purpose of clause (ii) and (iii) above, physical separation of a hand or feet means separation at or above the wrist and or the foot at or above the ankle respectively.

1. In case of an accident, as a direct consequence thereof immediately permanently totally and absolutely, disable the insured from engaging in any employment or occupation of any description whatsoever, then a lump sum equal to hundred percent (100%) of the Capital Sun insured will be covered.
2. In case the Injury be the sole and direct cause of the total and irrecoverable loss of use of the actual loss by physical separation of the following then the percentage of the Capital Sum insured as indicated below shall be payable.

No.	Description	Percentage of Capital sum insured
i	Loss of toes-all	20
	Both great phalanges	5
	One great phalanx	2
	Other than great if more than one toe lost each	1
ii	Loss of hearing – both ears	50
iii	Loss of hearing One ear	15
iv	Loss of four fingers and thumb of one hand	40
v	Loss of four fingers	35
vi	Loss of thumb	

	- Both phalanges	25
	- One phalanx	10
vii	Loss of index finger	
	- Three phalanges	10
	- Two phalanges	8
	- One phalanx	4
viii	Loss of middle finger	
	- Three phalanges	6
	- Two phalanges	4
	- One phalanx	2
ix	Loss of ring finger	
	- Three phalanges	5
	- Two phalanges	4
	- One phalanx	2
x	Loss of little finger	
	- Three phalanges	4
	- Two phalanges	3
	- One phalanx	2
xi	Loss of Metacarpals	
	- First or second (additional)	3
	- Third, fourth or fifth (additional)	2
xii	Any other permanent partial disablement	% as assessed by the Doctor

- If such injury shall be the sole and direct cause of temporary total disablement, then so long as the insured shall be totally disabled from engaging in any employment or occupation of any description whatsoever a sum at the rate of one percent (1%) of the capital sum insured stated in the schedule herein per week, but in any case not exceeding Rs.5000/- per week in all under all policies per week in any case not exceeding 25% of the Monthly Salary.
- The compensation payable under the foregoing sub-clauses above shall not be payable for more than 100 weeks in respect of any one injury calculated from the date of commencement of the disablement and in no case shall exceed the Capital sum insured.
- In the event of Death of the insured person due to accident outside her/his residence we shall reimburse expenses incurred for transportation of insured's dead body to the place of residence subject to a maximum of 2% of capital sum insured or Rs.2,500/- whichever is less.

- In the event of death or permanent total disablement of the insured due to accident the policy shall also provide compensation towards Education Fund for the dependent children as below :
 - 1.1 If the insured person has one dependent child below the age of 23 years, an amount equal to 10% of the CSI subject to a maximum of Rs.5,000/-
 - 1.2 If the insured person has more than one dependent child below the age of 23 years, and amount equal to 10% of CSI subject to a maximum of Rs.10,000/-

The payment as above will be made along with the CSI of the same person/s who is/are entitled to receive the CSI

The age limit of 23 years shall apply on the date of accident and not at the beginning of the policy year.

- Medical Expenses following an accident can be covered as an extension under the policy on payment of additional premium.
- The policy may be extended to include payment of medical expenses up to 10% of the sum insured or 50% of the admissible claim amount or the actual expenses incurred towards medical expenses whichever is lower by charging 20% extra premium. The medical benefits are in addition to benefits provided under the policy.

EXCEPTIONS

The policy does not cover the following:

- Compensation under more than one of the foregoing sub-clauses in respect of the same period of disablement.
- Any other payment after a claim under one of the sub-clauses has been admitted and become payable.
- Payment of weekly compensation until the total amount shall have been ascertained and agreed.
- Payment of compensation in respect of death, injury or disablement of insured (a) from intentional self-injury, suicide or attempted suicide (b) whilst under the influence of intoxicating liquor or drugs (c) whilst engaging in aviation or Ballooning, whilst mounting / dismounting from or traveling in

any Balloon or aircraft other than as a passenger (fare-paying or otherwise) in any duly Licenced Standard type of aircraft anywhere in the world (d) directly or indirectly caused by venereal disease or insanity (e) arising or resulting from the insured committing any breach of the law with criminal intent.

- Payment of compensation in respect of Death, Injury or disablement of the insured due to arising out of or directly or indirectly connected with or traceable to war invasion, act of foreign enemy, Hostilities (whether war be declared or not) War, Rebellion, Revolution, Insurrection, Mutiny, Military or usurped Power, Seizure, Capture Arrests, Restraints and Detainment of all Kings, Princes and people of whatever nation, condition or quality so ever.
- Payment of compensation in respect of Death of, or bodily injury or any disease or illness of the insured.
- Directly or indirectly caused by or contributed to by or arising from ionising radiation or contamination by radio active substance 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.
- directly or indirectly caused by or contributed to by or arising from nuclear weapon materials

For detailed exclusions, please see the policy and log on to our website www.uiic.co.in

WHAT TO DO IN CASE OF CLAIMS:

Upon occurrence of loss, notice of claim shall be made to the Policy issuing office immediately

Fatal Claims-

- Submit Claim form, original policy (for cancellation), Investigation report, Death certificate, Postmortem report (Coroner's report/inquest report-, Where ever necessary-FIR/Police report)
- Payment shall be made to the assignee of the policy. If there is no assignee, payment shall be made to the legal representatives identified-Will/Probate/ Succession certificate

Injury/disability claims

- Disability/education Grant/Medical Expenses claims
- Claim form duly completed

- Report of attending doctor
- Diagnostic reports (X rays, reports confirming injury)
- Original Medical Bills
- FIR/Police report wherever necessary
- Leave certificate from the Employer

IRDA REGULATIONS : This policy is subject to IRDA (Health Insurance) Regulations 2013 and IRDA (Protection of Policyholders' Interest) Regulations 2002 as amended from time to time.

IMPORTANT NOTICE

The Company may revise any of the terms, conditions and exceptions of this insurance including the premium payable on renewal in accordance with the guidelines/rules framed by the Insurance Regulatory and Development Authority (IRDA) and after obtaining prior approval from the Authority. We shall notify you of such changes at least three months before the revision are to take effect.

The Company may also withdraw the insurance as offered hereunder after following the due process as laid down by the IRDA and after obtaining prior approval of the IRDA and we shall offer to cover you under such revised/new terms, conditions, exceptions and premium for which we shall have obtained prior approval from the Authority

This Prospectus shall form part of the proposal form. Please sign in token of having noted the contents of Prospectus.

For full details, please log on to www.uiic.co.in or visit our office.

Signature

Name

Place

Date