

# JANATA PERSONAL ACCIDENT POLICY



**UNITED INDIA INSURANCE COMPANY LIMITED**  
CIN: U93090TN1938GOI000108

## CUSTOMER INFORMATION SHEET (CIS)

This document provides only key information about Janata Personal Accident Insurance. Please refer to the policy wordings for detailed terms and conditions.

SL.NO	TITLE	DESCRIPTION	POLICY / CLAUSE NUMBER
1	<b>Product Name</b>	JANATA PERSONAL ACCIDENT POLICY	NA
2	<b>Unique Identification Number (UIN) allotted by IRDAI</b>	IRDAN545RP0054V01199900	NA
3	<b>Structure</b>	Fixed Benefit Policy	NA
4	<b>Interests insured</b>	Any person irrespective of sex, occupation and profession in the age group of 10 to 70 years	
5	<b>Sum Insured / Scope</b>	Minimum sum insured of <b>Rs. 25,000/-</b> per person per annum and  The maximum sum insured is to be limited to <b>Rs. 1,00,000/-</b> per person per annum.  <i>Rs.25,000/- to 1,00,000/- in multiples of Rs.25,000/-</i>	
6	<b>Policy Coverage (What the policy covers)</b>	a) Accidental Death of the insured – <b>100% of Sum Insured</b>  b) Permanent Total Disablement due to accident- <b>100% of Sum Insured.</b>  c) Total and irrecoverable loss of sight of one eye or one limb due to accident - <b>50% of the Capital Sum Insured.</b>  d) Permanently and totally disabling the Insured from any employment or occupation due to an accident. – <b>100% of Sum Insured</b>	
7	<b>Add-on-Cover</b>	Nil	
8	<b>Loss Participation</b>	Nil	
9	<b>Exclusions (What the policy does not covers)</b>	1. Compensation under more than one of the Sub- clause (a), (b), (c) or (d) in respect of same injury or disablement.  2. Any payment in excess of sum insured.	Provisions - 1 to 6

		<p>3. Payment of compensation in respect of any disability already existing on the date of commencement of this policy.</p> <p>4. Payment of compensation in respect of death, injury or disablement of the insured from</p> <p>(a) intentional self-injury, suicide or attempted suicide.</p> <p>(b) Whilst under the influence of intoxicating liquor or drug.</p> <p>(c) Whilst racing on wheels, hunting Big Games Shooting, Mountaineering or hills engaged in winter sports, skiing &amp; ice hockey.</p> <p>(d) Directly or indirectly caused by insanity.</p> <p>(e) Arising or resulting from insured committing any breach of the law criminal intent.</p> <p>5. Payment of compensation in respect of death, injury or disablement due to</p> <p>a) War, invasion, or Civil war.</p> <p>b) Mutiny, civil commotion, rebellion, or military actions.</p> <p>6. Payment of compensation in respect of death of or bodily injury caused by radiation or nuclear weapons.</p>	
10	<b>Special Conditions and Warranties (if any)</b>	Nil	
11	<b>Admissibility of Claim</b>	<ul style="list-style-type: none"> <li>✚ Immediate claim intimation on death / Injury of the insured person to be given to the Insurer and submit all supporting documents for processing the claim.</li> <li>✚ The Insured must provide satisfactory proof for all claims.</li> <li>✚ The Company's medical/other agent shall be allowed to examine the Insured for injuries and, in the case of death, to make a post-mortem examination (if necessary).</li> <li>✚ Required documents must be submitted within 14 days of a written request.</li> <li>✚ For claims involving loss of sight, the Insured must undergo necessary treatment at their own expense.</li> <li>✚ Payments for death or permanent total disablement will only be made upon cancellation and discharge of this Policy.</li> <li>✚ The company will not pay any claims that are fraudulent or supported by fraudulent statements.</li> </ul>	<p>Condition - 1</p> <p>Condition - 2</p> <p>Condition - 4</p>

12	<b>Policy Servicing – Claim Intimation and Processing</b>	Policy issuing office details as mentioned in Policy Schedule	Policy Schedule
13	<b>Grievance Redressal and Policyholders’ Protection</b>	<p>In case of any grievance, you may contact UIIC through</p> <p>a. Website: <a href="http://www.uiic.co.in">www.uiic.co.in</a></p> <p>b. Toll Free Number: 1800 425 333 33</p> <p>c. E-Mail: <a href="mailto:customercare@uiic.co.in">customercare@uiic.co.in</a></p> <p>You may also approach the grievance cell at any of our branches with details of the grievance. Alternatively, you may lodge a complaint at the IRDAI Integrated Grievance Management System (<a href="https://igms.irda.gov.in/">https://igms.irda.gov.in/</a>) OR approach the Office of the Insurance Ombudsman in your respective Area/Region or lodge a complaint in Bima Bharosa Portal</p>	NA
14	<b>Obligations of the Policyholder</b>	The Insured has to provide correct details of Age, Occupation and present disablement if any.	

**Note:** In case of any conflict between the CIS and the policy document, the terms and conditions mentioned in the policy shall prevail.

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

Place:

Date:

Signature of the Policyholder.