

## Customer Information Sheet

### Signature Plus Professional Indemnity Insurance Policy for Design and Construction Projects

This document provides only key information about your policy. Please refer to the policy document for detailed terms and conditions.

Sr. No.	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy / Clause Number
1	Product Name	<b>Signature Plus Professional Indemnity Insurance Policy for Design and Construction Projects</b>	NA
2	Unique Identification Number (UIN) allotted by IRDAI	IRDAN125CP0004V01201920	NA
3	Structure	State basis of Sum / Limit Insured - Indemnity Basis	NA
4	Interests Insured	Infrastructure development companies, large turnkey contractors, design and build contractors, PMC companies and other contractors involved in infrastructural projects, including principals where required.	NA
5	Sum Insured	<<as per policy schedule>>	Policy Schedule
6	Policy Coverage	Covers professional liability and advancement of defence costs.	Insuring Clause
		<b>1. Professional Liability-</b> arising from performance of professional services in respect of the project. <b>2. Advancement of Defence Costs -</b> Insuring Clause now provides for defence costs to be paid in advance for claims covered under the policy.	2.2 Costs
7	Add-on Cover	<<as per policy schedule>>	Policy Schedule
8	Loss Participation	<<as per policy schedule>>	Policy Schedule
9	Exclusions	This policy will not pay for any loss or defence cost arising out of, or in any way connected with  <b>1. Anti Competitive Practices -</b> claims arising due to price fixation or pricing discrimination <b>2. Contractual Liability &amp; Commercial Risk -</b> Liability assumed by the insured <b>3. Employer's Liability -</b> Bodily or mental injury of any employee of the insured <b>4. Fraud &amp; dishonesty -</b> Any willful, malicious or dishonest act committed or allegedly committed by the insured, unless otherwise covered. <b>5. Licensing Inquiries -</b> Deliberately fail to comply with national or local regulations. <b>6. Management Liability -</b> the Insured acting in the capacity of a director or officer.	5. Exclusions

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		<p><b>7. Owners &amp; Occupiers Liability</b> – ownership, management, control or occupation of real property by the Insured.</p> <p><b>8. Penalties &amp; Punitive Damages</b> –</p> <p>a) any fines or other penalties; or</p> <p>b) any exemplary, aggravated, multiple or punitive damages.</p> <p><b>9. Prior Matters</b></p> <p><b>10. Product Defects</b> - any defect in any product or good unless such defect arises out of the performance of Professional Services.</p> <p><b>11. Related Parties</b></p> <p><b>12. Uninsurable Amounts</b> - amounts uninsurable at law</p> <p><b>13. War &amp; Terrorism</b> - consequence of any war, invasion, sabotage, acts of foreign enemies</p> <p><b>14. Aircraft, Watercraft &amp; Motor vehicles</b> - operation, ownership, maintenance or use of aircraft or watercraft</p>													
10.	Special Conditions and Warranties (if any)	<<as per policy schedule>>	Policy Schedule												
11.	Admissibility of Claim	<ul style="list-style-type: none"><li>Mention the broad principle of admissibility / denial of claims [Example: Reporting of loss occurrence; Duty of care &amp; loss minimization; Exclusion of Willful Negligence]</li><li>1. Intimation of a claim or any circumstances which may give rise to any claim should be reported immediately</li><li>2. No admission, offer, promise or payment of liability without Insurer consent.</li><li>3. Provide documents in support of your claims</li><li>4. Provide all such information and assistance to company which is required.</li><li>5. Company has right to defend the claim for Insured.</li><li>Include a sample claim calculation process for retail products</li></ul> <p>Claim shall be paid as per following calculation:-</p> <table><tr><th>Head</th><th>Example</th></tr><tr><td>liability as covered under the policy (a)</td><td>100000</td></tr><tr><td>Defense cost (b) (wherever applicable)</td><td>20000</td></tr><tr><td>total loss amount (c = a+b)</td><td>120000</td></tr><tr><td>Deductible (d)</td><td>10000</td></tr><tr><td>Net Payable amount (c-d)</td><td>110000</td></tr></table>	Head	Example	liability as covered under the policy (a)	100000	Defense cost (b) (wherever applicable)	20000	total loss amount (c = a+b)	120000	Deductible (d)	10000	Net Payable amount (c-d)	110000	NA
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12.	Policy Servicing - Claim Intimation and Processing	<ul style="list-style-type: none"><li>Contact us- 022 6158 2020/ 022 6234 6234</li><li>Website: www.hdfcergo.com</li><li>Email : care@hdfcergo.com</li><li>Details of designated company officials to be contacted in time of claim Liability Claims Manager – email ID - care@hdfcergo.com</li><li><b>Turn Around Time (TAT)</b> for claims settlement</li></ul>	NA												

Sr. No.	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy / Clause Number
		<ol style="list-style-type: none"> <li>1. Registration of claim – T +1 days</li> <li>2. List of requirements – 7 days from registration</li> <li>3. Claim settlement / Denial = T+30 days (T = date of receipt of last documents) <ul style="list-style-type: none"> <li>• Escalation Matrix when TAT is not satisfied</li> </ul> </li> </ol> <p>Email to – liabilityclaims@hdfcergo.com</p>	
13.	Grievance Redressal and Policyholders Protection	<p>If You have a grievance about any matter relating to the Policy, or Our decision on any matter, or the claim, You can address Your grievance as follows:</p> <p><b>Our Grievance Redressal Officer</b></p> <p>If you have a grievance that you wish us to redress, you may contact us with the details of your grievance through:</p> <ul style="list-style-type: none"> <li>• Contact us- 022 6158 2020/ 022 6234 6234</li> <li>• Emails – grievance@hdfcergo.com</li> <li>• Contact Details for Senior Citizens: 022 6242 6226   Email ID: seniorcitizen@hdfcergo.com</li> </ul> <p>Designated Grievance Officer in each branch.</p> <ul style="list-style-type: none"> <li>• Company Website – www.hdfcergo.com</li> <li>• Courier - Any of our Branch office or corporate office</li> </ul> <p>You may also approach the Complaint &amp; Grievance (C&amp;G) Redressal Cell at any of our branches with the details of your grievance during our working hours from Monday to Friday</p> <p>If you are not satisfied with our redressal of your grievance through one of the above methods, you may contact our Head of Customer Service at</p> <p><b>The Complaint &amp; Grievance Redressal Cell, HDFC ERGO General Insurance Company Limited D-301, 3rd Floor, Eastern Business District (Magnet Mall), LBS Marg, Bhandup (West), Mumbai – 400078, Maharashtra</b></p> <p>In case you are not satisfied with the response / resolution given / offered by the C&amp;G cell, then you can write to the Chief Grievance Officer of the Company at the following address</p> <p><b>To the Chief Grievance Officer HDFC ERGO General Insurance Company Limited D-301, 3rd Floor, Eastern Business District (Magnet Mall), LBS Marg, Bhandup (West), Mumbai - 400078, Maharashtra e-mail: cgo @hdfcergo.com</b></p> <p>Grievance may also be lodged at IRDAI Integrated Grievance Management System- <a href="https://bimabharosa.irdai.gov.in">https://bimabharosa.irdai.gov.in</a></p> <p>You may also approach the nearest Insurance Ombudsman for resolution, if your grievance is not redressed by the Company. The contact details of Ombudsman offices are below if your grievance pertains to:</p>	Grievance Redressal Procedure

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		<ul style="list-style-type: none"> <li>Insurance claim that has been rejected or dispute of a claim on legal construction of the policy</li> <li>Delay in settlement of claim</li> <li>Dispute with regard to premium</li> <li>Non-receipt of your insurance document</li> </ul> <p>You may also refer Our website <a href="http://www.hdfcergo.com">www.hdfcergo.com</a> <a href="https://www.hdfcergo.com/customer-voice/grievances">https://www.hdfcergo.com/customer-voice/grievances</a> for detailed grievance redressal procedure.</p>	
14.	Obligations of the Policyholder	<ul style="list-style-type: none"> <li>To disclose all information correctly sought by the insurer at 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> <p>Disclosure of other material information during the policy period.</p>	NA

**Declaration by the Policy Holder:**

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

Place: \_\_\_\_\_

Date: \_\_\_\_\_

(Signature of the Policyholder)

**Note:**

In case of any conflict, the terms and conditions mentioned in the policy document shall prevail.

