

## Customer Information Sheet

## Film and Television Producers Package Policy

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>Film and Television Producers Package Policy</b>	NA
2	Unique Identification Number (UIN) allotted by IRDAI	IRDAN125RP0011V01201213	NA
3	Structure	As per policy schedule	Policy wordings.
4	Interests Insured	As per policy schedule	Policy schedule.
5	Sum Insured	As per policy schedule	Policy schedule.
6	Policy Coverage	The product is intended to provide a packaged insurance solution for producers engaged in film and television production like Motion Picture or Television Production, or a Series of Television Episodes, or any other production on film or tape, comprising of cast, props and sets, film, equipment, money and liability exposure.	Policy wordings
7	Add-on Cover	As per policy schedule	Policy schedule
8	Loss Participation	As per policy schedule	Policy schedule
9	Exclusions	<p>The coverage does not insure against loss directly or indirectly caused by or resulting from:</p> <p>A. Any person(s) accepted for insurance under this Section taking part in flying other than as a passenger;</p> <p>B. The inability of any insured female to perform as a result of pregnancy, menstruation, child birth or condition pertaining thereto;</p> <p>C. Any insured person(s) taking part in any hazardous stunt without the written consent of the Company;</p> <p>D. Any insured person(s) under nine (9) years of age who contracts mumps, chicken pox, measles, German measles, whooping cough, scarlet fever, tonsillitis, diphtheria;</p> <p>E. Any person(s) under the age of six (6) years of age or over the age of sixty five (65) years of age;</p> <p>F. Loss of money, securities or other consideration surrendered as a ransom payment by the Insured as a result of kidnapping or alleged kidnapping.</p>	Policy wording

Sr. No.	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy / Clause Number
10.	Special Conditions and Warranties (if any)	As per policy schedule	Policy schedule
11.	Admissibility of Claim	<ul style="list-style-type: none"> <li>• Following are the key parameters leading to admissibility or denial of claims: <ul style="list-style-type: none"> <li>- The policy shall cover losses to your insured property due to unforeseen and sudden physical damage by any cause not excluded.</li> <li>- The policy shall exclude losses as specified in the exclusion/exception/excluded causes of section of the policy wording.</li> <li>- The coverage is subject to compliance of policy clause/conditions/warranties.</li> </ul> </li> <li>• Duty of care &amp; loss minimization post-accident <ul style="list-style-type: none"> <li>- If You suffer a loss because of an insured event/peril/causes, You must make a claim for Your financial loss at Your cost.</li> <li>- The procedure for making a claim is given below.</li> </ul> </li> </ul> <p>1. Immediate notice to Us</p> <ol style="list-style-type: none"> <li>a. As soon as any sudden, unforeseen and physical loss or damage occurs to insured property due to insured event/peril/causes and/or does not fall under exclusion, You must immediately give notice to Us of the loss or damage. This is necessary for Us to survey/ investigate the loss or damage, as may be required.</li> <li>b. You can give notice to any of Our offices or call centres.</li> <li>c. You must state in this notice <ol style="list-style-type: none"> <li>i. the Policy Number,</li> <li>ii. Your name</li> <li>iii. details of report to the police that You made,</li> <li>iv. details of report to any Authority that You made,</li> <li>v. details of the Insured Event,</li> <li>vi. a brief statement of the loss,</li> <li>vii. particulars of any other insurance of insured property,</li> <li>viii. details of loss or damage under any Optional Cover or Add-ons,</li> <li>ix. submit photographs of loss or physical damage, wherever possible.</li> </ol> </li> </ol>	NA
		<p>2. Steps to prevent loss and damage</p> <ol style="list-style-type: none"> <li>a. You must take all reasonable steps to prevent further loss or damage to insured property.</li> <li>b. Until We have inspected insured property and have given Our consent, <ol style="list-style-type: none"> <li>i. You must not sell, give away or dispose of any damaged items of any property for which You are making a claim;</li> </ol> </li> </ol>	

Sr. No.	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy / Clause Number
		<p>ii. You must not wash or clean, or remove any damaged item or debris, except for any urgent necessity;</p> <p>iii. You must not carry out repairs, unless such repairs are urgent and You cannot contact Us.</p> <ul style="list-style-type: none"> <li>- Act as if not insured and try all possible measures to minimize the loss.</li> <li>- Inform fire brigade / police or any other govt statutory body, if applicable</li> <li>- Seek the assistance of the insurance surveyor or any other agencies appointed for loss minimization efforts and also in claim procedure</li> <li>- Take photos or videos of damaged property and preserve all damaged property for detailed inspection by the surveyors</li> <li>- Preserve documentary evidence for assessment of quantum of loss.</li> </ul> <p>The loss will be assessed by the surveyors/us as per the claim bill, supporting documents provided and in accordance with policy terms and conditions.</p> <p>The assessment will be subject to following deduction, if any, a) betterment, b) depreciation, c) applicable salvage value, d) underinsurance/average clause, e) policy excess / deductible / franchise etc, f) reinstatement premium.</p>	
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: <a href="http://www.hdfcergo.com">www.hdfcergo.com</a> Email : <a href="mailto:care@hdfcergo.com">care@hdfcergo.com</a></li> <li>• Turn Around Time (TAT) in working hours / days</li> <li>- Surveyor appointment- 24 hours from claim intimation</li> <li>- Survey report- 15 days from allotment of survey</li> <li>- Decision of claim to insured - 7 days from survey report</li> <li>• Customer Escalation Matrix</li> </ul> <p>Level 1 In case the Complainant has not received a response or is not satisfied with the response / resolution given / offered, then the Customer can write to: The Complaints &amp; Grievance Cell HDFC ERGO General Insurance Company Limited D-301, 3rd Floor, Eastern Business District (Magnet Mall), LBS Marg, Bhandup (West), Mumbai – 400078, Maharashtra e-mail: <a href="mailto:grievance@hdfcergo.com">grievance@hdfcergo.com</a></p>	NA

Sr. No.	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy / Clause Number
		Level 2 In case the Complainant has not received a response or is not satisfied with the response / resolution given / offered by the C&G cell, then the Customer can write to the Chief Grievance Officer of the Company at the following address 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	
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>1. 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 Designated Grievance Officer in each branch.</li> <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>	Grievance Redressal Procedure of Policy

Sr. No.	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy / Clause Number
		<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> <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>	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.