

#### **BOUNDARY CONDITION**



Age Criteria - 18 years to 69 years



Offers 7 options from a minimum coverage of ₹15 Lakhs to a maximum of ₹1 Cr

## **KEY FEATURES**



The cover provided is applicable 24 hours a day, 7 day a week, 365/ 366 days of the year



Option to cover only "Self " or "Self & Family i.e. Spouse + max 2 children"



No health check up required



The individual stands protected by this Personal Accident cover in India and any other location worldwide



Easy payment by Credit Card & Cheque



Cumulative bonus of 5% increase in Sum Insured on renewals, applicable to the basic Sum Insured for Accidental Death & Permanent Disability

## **KEY BENEFITS**



**Accidental Death:** 100% of the Sum Insured is paid in case of loss of life in an accident



**Broken Bones:** Pays up to the maximum Sum Insured in the event of bodily injury resulting in broken bones due to an accident



**Last Rites:** Pays a benefit towards the cost of the funeral of the Insured person, if an accident causes loss of life



**Permanent Disability:** Pays a benefit up to the maximum Sum Insured, if the Insured is permanently disabled due to an accident



**Temporary Total Disablement:** Pays a weekly benefit upto maximum of 52 weeks if an accident causes disablement that prevents the Insured person from engaging in or giving attention to his/her usual occupation. (1 week time deductible applicable)



**Hospital Cash:** Optional benefit provides a daily benefit of ₹1,000 up to a maximum of 30 days in case of hospitalization due to an Accident

## **NEGATIVE LIST**

- Armed Forces (Army/ Navy/ Air Force)
- Para military Forces (BSF, RAF, CRPF, etc)
- Professional Sports Persons
- Hazardous Sports (Bungee jumping, Jet-Skiing, Para-gliding, etc)
- Merchant Navy
- Airline Pilots
- Off-shore Workers (Oil rigs/ Drilling platforms)

## **EXCLUSIONS**

Bodily Injury / Sickness caused:

- Intentionally
- Due to Civil War or Foreign War
- Under the influence of Alcohol /drug
- Due to AIDS / HIV
- Due to active participation in violent labour disturbance / public disorder
- On duty with military or police force or paramilitary organization
- Due to participation in hazardous sports



Customer Service No: 022 - 6234 6234 / 0120 - 6234 6234



Email: care@hdfcergo.com



Submit all the requisite documents at the nearest HDFC ERGO General Insurance Office.

## PREMIUM DETAILS

IPA Plan 1 (APPHC) Premium for 1 year with GST							
Sum Insured	15 Lakhs	20 Lakhs	25 Lakhs	35 Lakhs	50 Lakhs	75 Lakhs	1 Cr
Self Plan	3325	4209	5089	6865	9504	13917	18535
Self + Spouse	4699	6004	7380	10061	14082	20783	26630
Self + Spouse + 1 Child	4699	6004	7380	10061	14082	20783	26630
Self + Spouse + 2 Children	4699	6004	7380	10061	14082	20783	26630

IPA Plan 1 (APPHC) Premium for 2 year with GST							
Sum Insured	15 Lakhs	20 Lakhs	25 Lakhs	35 Lakhs	50 Lakhs	75 Lakhs	1 Cr
Self Plan	6418	8124	9822	13233	18342	26860	35773
Self + Spouse	9069	11588	14243	19417	27179	40112	51396
Self + Spouse + 1 Child	9069	11587	14243	19417	27179	40112	51396
Self + Spouse + 2 Children	9069	11587	14243	19417	27179	40112	51396

IPA Plan 1 (APPHC) Premium for 3 year with GST							
Sum Insured	15 Lakhs	20 Lakhs	25 Lakhs	35 Lakhs	50 Lakhs	75 Lakhs	1 Cr
Self Plan	9277	11743	14199	19128	26515	38828	51714
Self + Spouse	13110	16751	20589	28069	39289	57986	74298
Self + Spouse + 1 Child	13110	16751	20589	28069	39289	57986	74299
Self + Spouse + 2 Children	13110	16751	20589	28069	39289	57986	74298

<sup>\*</sup>Family Cover: 50% of the Sum Insured in case of Accidental Death or Permanent Disability of the spouse & 10% of the Sum Insured in case of Accidental Death or Permanent Disability of the children (max.2)

## **HDFC ERGO General Insurance Company Limited**



## PERSNAL ACCIDENT INSURANCE - PROPOSAL FORM

Name of Bank:

Cheque No.

Plan 1 (for internal reference only) (All fields are mandatory and fill in CAPITALS only) HDFC Bank office use only Application No. HDEC ERGO Location Code: HE Representative: Pre-Issuance Post-Issuance: Customer Service: Sales Quality Tele sales DSΔ CVM DΤ Welcome call MFR Doc Ex code: BDR / TSE Code TL Code HE SM Code: City: (\*Mandatory field) EMI Option: Yes Name of Proposer (First Name) (Middle Name) (Last Name) Female Sex: Occupation: Clerical/Administrative Professional - Service / Business Engineer/Worker/Supervisor Driver/Daily Wage Labourer Persons engaged in military service, professional sports, mine workers, fire workers, fire fighters, water vessel crew, oil field/oil rig workers, structural workers, window cleaners, junk/salvage workers, saw mill workers, security guards and similar hazardous occupations are excluded under the plan City: PAN No State Tel. (Res.): Mobile: Email: PREMIUM DETAILS & POLICY PERIOD Rupees (in words) Y | Y | Y | to | D | D | M | M | Y | Y | Y | Y Proposed Policy Period: SOURCES OF FUND (Please Specify) Annual Gross Income ₹ Name of the Bank Account Holder Bank Account No: Name of Bank MICR Code (9 digit MICR code number of the bank and branch appearing on the cheque issued by the bank) IFSC Code (11 character code appearing on your cheque leaf): Account: Savings Current Any refund due on the premium payment / any payment/claims will be directly credited to my aforesaid Bank Account.\* \*As per the IRDAI, its mandatory that all payments made to the insured only through electronic mode. Please provide the details of the persons to be covered Existing Injury/ First Name of Surname of Relationship of Nominee Date of Birth Disability /Sickness (attach Name of Nominee Insured Person Insured Person to Insured Person separate sheet if required) Self Spouse Dependent Dependent Please fill in your payment details below for either Credit Card or Cheque option : ☐ Master Card Expiry Date Credit Card Please pay by crossed cheque (Account Payee Only) in the name of "HDFC ERGO General Insurance Company Limited" Cheque

Branch and city:

Amount (₹):

Name of Insurance Company	Name of Insurance Company Accidental Death Sum Insured		Policy Period	Benefits Covered
	₹			
	₹			

Non-disclosure or misrepresentation of the above information, whether deliberate or not, shall make this policy voidable at the Company option and no claim shall be admitted under this policy.

- I accept the Terms and Conditions of the insurance policy.
- I/We hereby declare on my behalf and on behalf of all persons proposed to be insured that the above statements are true and complete in all respects to the best of my knowledge and that I/We am/are authorized to propose on behalf of these other persons.
- I understand that the information provided by me will form the basis of insurance policy, is subject to the Board approved underwriting policy of the Insurance company and that the policy will come into force only after full receipt of the premium chargeable
- I/We further declare that I/We will notify in writing any change occurring in the occupation or general health of the life to be insured/ proposer after the proposal has been submitted but before
- communication of the risk acceptance by the company.

  I/we declare and further consent to the company, seeking medical information from any doctor or from a hospital who at anytime has attended on the life to be insured/ proposer or from any past or present employer concerning anything which affects the physical and mental health of the life to be assured/proposer and seeking information from any insurance company to which an application for insurance on the life to be assured/ proposer has been made for the purpose of underwriting the proposal and/or claim settlement.
- I/We authorize the company to share information pertaining to my proposal including the medical records for the sole purpose of proposal underwriting and/or claims settlement and with any Governmental and/or Regulatory Authority.
- I authorize HDFC ERGO General Insurance and associate partners to contact me via email, phone,
- The Proposer agrees that the receipt of the Proposal Form by HDFC ERGO along with the premium payment does not tantamount to the acceptance of the Proposal for insurance by HDFC ERGO and does not result in a concluded contract of insurance.

The acceptance of the Proposal for insurance shall be at the Company's sole and absolute discretion. In the event of acceptance of the Proposal for insurance by HDFC ERGO, such acceptance shall be specifically intimated to the Proposer by HDFC ERGO along with the date from which the insurance cover shall become effective. The Proposer agrees that, in the event of acceptance of the Proposal for insurance by HDFC ERGO and the issuance of a Policy of Insurance by HDFC ERGO, the Policy Effective Date shall commence fifteen (15) days from the date of receipt of the premium by HDFC ERGO. HDFC ERGO shall not be liable for any claim in respect of an event giving rise to a claim covered under the Policy of Insurance that has occurred during this period of fifteen (15) days. Your proposal form will be considered after HDFC ERGO General Insurance Company Limited receives premium payment. To facilitate payments of the insurance premium to HDFC ERGO General Insurance Limited.

The Maximum Compensation in respect of an Insured Person under the policy shall not exceed 5 times the Annual Income (as declared in the Proposal Form). Income proof for availing the compensation at the time of claim is mandatory. Income proof shall mean the previous year's returns fled with the Income Tax

FRAUD WARNING: Any person who, knowingly and with intent to defraud the insurance company or any other person, files a proposal for insurance containing any false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which will render the policy voidable at the sole discretion of the insurance company and result in a denial of

ANTI-REBATING WARNING: As per Section 41 of the Insurance Act 1938, as amended, the practice of rebating is prohibited, as follows: No person shall allow or offer to allow, either directly or indirectly, as an inducement to any person to take out or renew or continue an insurance policy in respect of any kind of risk relating to lives or property in India, any rebate of the whole or part of the commission payable or any rebate of the premium shown on the policy, nor shall any person taking out or renewing or continuing a policy accept any rebate, except such rebate as may be allowed in accordance with the published prospectus or tables of the insurer. Violations of Section 41 of the Insurance Act 1938, as amended, shall be punishable with a fine which may extend to ₹10 Lakhs.

Mode of Payment: Cheque, Demand Draft & Credit Card. Payment by Cash will not be accepted.

Signature of the Proposer (As per Bank Record)

# **HDFC ERGO General Insurance Company Limited**



1800 2666 400



hdfcergo.com



**HDFC ERGO Mobile App** 

HDFC ERGO General Insurance Company Limited. IRDAI Reg. No. 146. CIN: U66030MH2007PLC177117. Registered & Corporate Office: 1st Floor, HDFC House, 165-166 Backbay Reclamation, H. T. Parekh Marg, Churchgate, Mumbai – 400 020. Customer Service Address: D-301, 3rd Floor, Eastern Business District (Magnet Mall), LBS Marg, Bhandup (West), Mumbai - 400 078. Customer Service No: 022 - 6234 6234 / 0120 - 6234 6234 | care@hdfcergo.com | www.hdfcergo.com. For more details on the risk factors, terms and conditions, please read the policy document carefully before concluding a sale. Trade Logo displayed above belongs to HDFC Ltd and ERGO International AG and used by the Company under license. UIN: Personal Accident Insurance - IRDA/NL-HLT/HDFC-ERGOGI/P-H/V.I/257/13-14. UID No. 3002.