



UNITED INDIA INSURANCE COMPANY LIMITED

BRANCH OFFICE, CHANGANACHERRY, THOTTUPARAMBIL BUILDINGS, 2ND FLOOR, HEAD POST
OFFICE JN., MC ROAD, EMAIL: 100506@uiic.co.in
KOTTAYAM - 686101 KERALA
PH: (0481) 2422363, (0481) 2424545 FAX: EMAIL:

MICRO-INSURANCE PRODUCT-GROUP ROAD SAFETY POLICY POLICY NO.: 1005064721P113319625

PERIOD OF INSURANCE
From 00:00 Hrs of 17/03/2022
To Midnight of 16/03/2023

Insured

MR CHAIRMAN - TOMS COLLEGE OF ENGINEERING
TOMS COLLEGE OF ENGINEERING, MATTAKARA P.O., KOTTAYAM

686564
KOTTAYAM
KERALA

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

Agent Name : FALIJOSE
Agent Code : AGD0110913
Mobile/Landline Number/Email : 9400195883

The genuineness of the policy can be verified through "Verify Your Policy" link at www.uiic.co.in.

For any Information, Service Requests, Claim intimation and Grievances please write to 100506@uiic.co.in

Download Customer App(www.uiic.co.in). REGD. & HEAD OFFICE, 24, WHITES ROAD, CHENNAI - 600014.
Website: <http://www.uiic.co.in>

Printed By : PRA38093 @ 23/03/2022 11:16:51 AM



Paw. Aj
Director
TOMS COLLEGE OF ENGINEERING
Mattakara P.O.
KOTTAYAM, KERALA - 686 564

This document is digitally signed

Signer: N MOHAN SANKAR
Date: Wed, Mar 23, 2022 11:18:52 IST
Location: United India Insurance Company Ltd
Reason: Signing Policy for UIIC





MICRO-INSURANCE PRODUCT-GROUP ROAD SAFETY POLICY SCHEDULE

Policy No.:	1005064721P113319625	Previous Policy No.	1005064720P113993853
Name of Insured/ID:	MR CHAIRMAN - TOMS COLLEGE OF ENGINEERING /23080029360		
Tel.(O):	Fax: 0	Tel.(R):	Mobile:
Business/Occupation :	0	Email:	
Period of Insurance:	From 00:00 Hours of 17/03/2022 To MIDNIGHT of 16/03/2023		

Coinurance	UIIC 100506 : 100%
Premium:	Seven thousand rupees only

Policy Variant	No of Members	Type of Cover	Total Sum Insured (₹)
UnNamed	100	Cover A	5,000,000.00

Assignee Details	
Name Of Assignee	Relationship

Net Premium:	7,000.00
CGST(9%):	630.00
SGST(9%):	630.00
Stamp Duty:	3.00
Total :	8,260.00
Receipt No :	10110050621115079216
Receipt Date:	23/03/2022

Agency/Broker Code :	AGD0110913
Dev. Officer Code :	
Direct Business :	

Special Condition : ACCIDENTAL DEATH/PTD COVER FOR EMPLOYEES DUE TO RTA IN INDIA: RS.50000/- PER EMPLOYEE. TREATMENT EXPENSE ONLY FOR RTA RELATED ACCIDENTS ON THE ROAD : RS.50000/- PER EMPLOYEE. NO. OF EMPLOYEES COVERED: 100 AS PER LIST ATTACHED.

Customer GST/UIN No.:		Office GST No.:	32AAACU5552C1ZS
SAC Code:	997139	Invoice No. & Date:	4721I113319625 & 23/03/2022
Amount Subject to Reverse Charges-NIL			

Anti Money Laundering Clause:-In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

LET US JOIN THE FIGHT AGAINST CORRUPTION. PLEASE TAKE THE PLEDGE AT <https://pledge.cvc.nlc.in>.

Date of Proposal and Declaration: 17/03/2022

IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at BO CHANGANACHERRY 100506 on this 16th day of March 2022 .

For and On behalf of
United India Insurance Co. Ltd.

Affix Policy
Stamp here.

Duly Constituted Attorney(s)

Underwritten By - PRA38093 (BO UW CUM CASHIER) , Approved By -
BHA29695(RO UNDERWRITER)

MICRO-INSURANCE PRODUCT-GROUP ROAD SAFETY POLICY**(GROUP ROAD SAFETY POLICY WITH MEDICAL EXPENSES ARISING OUT OF ROAD ACCIDENT)**

WHEREAS the Insured named in the Schedule herein (hereinafter called the "Insured") has made or caused to be made to UNITED INDIA INSURANCE COMPANY LIMITED (hereinafter called the "Company") a written proposal as per the Schedule hereto (warranting the truth of the statements contained therein) which is the basis of this Contract and is deemed to be incorporated herein and has paid to the Company the premium herein stated for the insurance of the risks hereinafter specified occurring during the period as stated in the Schedule or during any further period for which the Company may accept payment for the renewal or extension of this policy.

NOW THIS POLICY WITNESSETH that subject to terms, conditions and exclusions and definitions herein contained or endorsed or otherwise expressed hereon, the Company will indemnify the Insured as hereinafter mentioned :

There are two combinations under the policy applicable for covering various sections:-

1. SCHEME - "A" "SECTIONS I AND II"
2. SCHEME - "B" "SECTIONS I, II, & III"

SECTION I - PERSONAL ACCIDENT

If the Insured / Insured person shall sustain any bodily injury resulting solely and directly from an Accident caused by outward, violent and visible means, then the Company shall pay to the Insured the sum hereinafter set forth, that is to say:

- (a) If such injury shall within twelve Calendar months of its occurrence be the sole and direct cause of the death of an insured person, the Capital Sum Insured mentioned in the Schedule hereto.
- (b) If such injury shall within twelve Calendar months of its occurrence be the sole and direct cause of the total and irrecoverable loss of sight of both eyes or both hands or both feet, or of the actual loss of one eye and such loss of one of two entire hands or two entire feet, or of the one entire hand and one entire foot, or of such loss of sight of one eye and such loss of one entire hand or such loss of one entire foot of an insured person, the Capital Sum Insured mentioned in the Schedule hereto.
- (c) If such injury shall within twelve Calendar months of its occurrence be the sole and direct cause of the total and irrecoverable loss of sight of one eye or of the actual loss of one entire hand or one entire foot of an insured person, fifty percent (50%) of the Capital Sum Insured mentioned in the Schedule hereto.
- (d) If such injury shall as a direct consequence thereof immediately, permanently, totally and absolutely disable an insured person from engaging in, being occupied with, or giving attention to paid employment or occupation of any description whatsoever, the Capital Sum Insured mentioned in the Schedule hereto.

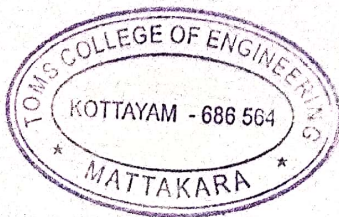
SECTION II - MEDICAL EXPENSES FOR BODILY INJURY CAUSED BY AND ARISING OUT OF ROAD ACCIDENT

Further, subject to the terms, conditions, exclusions and definitions contained herein or endorsed or otherwise expressed hereon, the Company undertakes that if during the period stated in the Schedule or during the continuance of this policy by renewal, any insured person shall sustain any bodily injury RESULTING SOLELY AND DIRECTLY FROM road accident which would normally give rise to a Third Party claim under Motor Policies / Motor Vehicle Act (hereinafter called INJURY) and if such INJURY shall require any such person upon the advice of a duly qualified physician / Medical Specialist / Medical Practitioner (hereinafter called Medical Practitioner) or of a duly qualified surgeon (hereinafter called Surgeon) to incur Hospitalisation expenses for medical / surgical treatment at any Nursing Home / Hospital in India as herein defined (hereinafter called HOSPITAL) as an inpatient, the Company will pay to the Insured person the amount of such expenses as would fall under different heads mentioned below which are reasonably and necessarily incurred in respect thereof by or on behalf of such insured person but not exceeding the sum insured in aggregate in any one policy period as defined hereinafter:

- a) Room, Boarding expenses as provided by the Hospital / Nursing Home.
- b) Nursing Expenses.
- c) Surgeon's, Anaesthetist's, Medical Practitioner's, Consultant's, Specialist's fee.
- d) Anaesthesia, Blood, Oxygen, Operation Theatre Charges, Surgical Appliances, Medicines and Drugs, Diagnostic Material, X-Ray, Artificial Limbs, Cost of Organs, and similar expenses.
- e) Ambulance Charges for carrying the insured person from the spot of accident to the Hospital / Nursing Home

SECTION III - EXTENSION TO COVER MEDICAL EXPENSES FOR ACCIDENT ARISING DURING AND IN THE COURSE OF EMPLOYMENT

It is hereby agreed and declared that notwithstanding anything to the contrary contained in this policy, this insurance is extended to cover the hospital expenses necessarily incurred and expended in connection with any accident up to the Capital Sum Insured per person for injuries sustained whilst in the course of and out of employment (as defined under Workmen's Compensation Act, 1923). It is imperative that this extension is offered only if Section I covering Personal Accident is covered.



Paw. AJ
 Director
 TOMS COLLEGE OF ENGINEERING
 Mattakara P.O.
 KOTTAYAM, KERALA - 686 564

TERMS AND CONDITIONS APPLICABLE UNDER SECTIONS I, II, & III

1. **Hospital / Nursing Home** - shall be deemed to mean any institution in India established for the treatment of injuries / disease, which has been registered either as a Hospital or Nursing Home with the local authorities and is under the supervision of a registered and medical practitioner.
The term Hospital shall not include an establishment which is a place of rest, a place for the aged, a place for drug addicts, a place for alcoholics, a hotel or a similar place. In case the Hospital / Nursing Home is not registered with the local authorities, the minimum requirement to be fulfilled are that it should have
 - a) A fully equipped Operating Theatre of its own.
 - b) Fully qualified Nursing staff under its employment round the clock.
 - c) Fully qualified Physician / Surgeon should be in charge round the clock.
2. **Surgical Operation** - means manual and / or operative procedure for repair of injuries, diagnosis, relief of suffering and prolongation of life.
3. **Road Accident** - Accident caused by or arising out of use of motor vehicles as defined in the Motor Vehicle (Amendment) Act, 1994. Accident shall mean collision between two vehicles, against external object, skidding of vehicle resulting in bodily injury, which would normally give rise to Third Party claim under Motor Policies / Motor Vehicle Act.
4. **Injury Series Clause** - for the purpose of this policy where several bodily injuries are attributable directly or indirectly to the same road accident, all such bodily injuries shall be treated together and all the admissible hospital expenses arising out of such bodily injuries shall be treated as one claim.
5. **Medical Practitioner** - means a person who holds a Degree / Diploma of a Recognised Institution and is registered by the Medical Council of the respective State / Union Territory in India. The term Medical Practitioner would include Physician, Specialist, and Surgeon.
6. **Qualified Nurse** - means a person who holds a Certificate of a recognised Nursing Council and who is employed on the recommendation of attending Medical Practitioner.
7. **Period of Insurance** - the period of insurance means the period commencing from the inception date till five years or ten years as the case may be.
8. **Policy Period** - Policy Period is defined as the period of 12 months each commencing from the date of inception from which the risk has commenced.
9. **Indemnity Limits** - the limit of indemnity will be restricted to the Sum Insured selected by the Insured person as mentioned in the Schedule and will apply to each policy during the period of insurance separately.
10. **Pre-Existing Condition** - means such injury which has been in existence at the time of proposing this insurance. Pre-existing condition also means any injury or its symptoms which existed prior to the effective date of this insurance, whether or not the insured person had knowledge that the symptoms were related to the injury. Complications arising from pre-existing injury will be considered part of that pre-existing condition.

EXCLUSIONS:

Provided always that the Company shall not be liable under this policy for

1. Compensation under more than one of the sub-clauses (a), (b), (c), or (d) of Section I in respect of same injury or disablement.
2. Payment of compensation in respect of injury or disablement directly or indirectly arising out of or contributed to by or traceable to any disability existing on the date of issue of this policy.
3. Payment of compensation in respect of death, injury or disablement arising out of or resulting from the Insured's
 - a) Intentional self-injury, suicide or attempted suicide.
 - b) Being under the influence of intoxicating liquor or drug.
 - c) Insanity (Directly or Indirectly caused by insanity).
 - d) Committing any breach of law with criminal intent.
4. Payment of compensation in respect of death, injury or disablement of the Insured from or due to or 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), civil war, rebellion, revolution, insurrection, mutiny, military or usurped power, seizure, capture, arrests, restraints and detentions of all kinds, princes and people of whatsoever nation.
5. Payment of compensation in respect of death or bodily injury to the Insured directly or indirectly caused by or contributed to by or arising from or traceable to, ionising radiation or contamination by radioactivity from any source whatsoever, or from nuclear weapons material.

Any hospitalisation expenses incurred because of bodily injury resulting directly or indirectly, proximately or remotely, from any accident other than road accident as defined in this policy. Policy No :1005064721P113319625

7. Expenses on vitamins and tonics unless forming part of the Hospitalisation treatment for injury as certified by the attending Physician.
8. Naturopathy Treatment.

CONDITIONS

1. Every notice or communication to be given or made under this policy shall be delivered in writing at the address as shown in the policy schedule.
2. Upon the happening of any event which may give rise to a claim under this policy the Insured shall forthwith give notice thereof to the Company. Unless reasonable cause is shown, the Insured should, within one calendar month after the event which may give rise to a claim under the policy, give written notice to the Company with full particulars of the claim.

NOTE: waiver of this condition may be considered in extreme cases of hardship where it is proved to the satisfaction of the Company that under the circumstances in which the Insured was placed it was not possible for him or any other person to give such notice or file claim within the prescribed time-limit.

3. In the event of a claim admissible under Hospital Expenses of policy because of a road accident, the Insured shall lodge forthwith a complaint to the nearest Police Station, unless it is not practicable to do so on account of reason(s) beyond the control of the insured, in which case a report / complaint should be sent by the Insured to the Police Station having jurisdiction as soon as possible, and in any case within 7 days time, mentioning therein the circumstances of the occurrence including the circumstances if any for not taking immediate steps to report the said accident to the Police. Submission of the Police Report shall be a condition precedent to any liability of the Company to make payment under this policy.
4. If the Proposer is a owner / driver of Motor Vehicle, then it is essential that the Proposer or his / her driver holds a valid driving licence issued by the Competent Authority as per the Motor Vehicle (Amendment) Act, 1994.
5. The premium payable under this Policy shall be paid in advance. No receipt for premium shall be valid except on the official form of the Company signed by a duly authorised Official of the Company. The due payment of premium and the observance and fulfilment of the terms, provisions, conditions and endorsements of this policy by the Insured in so far as they relate to anything to be done or complied with by the Insured shall be a condition precedent to any liability of the Company to make any payment under this Policy. No waiver of any terms, provisions, conditions and endorsements of this Policy shall be valid unless made in writing and signed by an authorised Official of the Company.
6. In the event of a claim being admissible the Insured has to submit claim forms and other documents as listed below:

IN CASE OF CLAIMS ARISING DUE TO ROAD ACCIDENTS:

- a) Attested copy of F.I.R. / Panchnama
- b) Newspaper cuttings (if applicable).
- c) Photographs if any.

SECTION I: (IN CASE OF DEATH / PERMANENT TOTAL DISABLEMENT CLAIMS OF PERSONAL ACCIDENT)

- a) The Post-mortem Report.
- b) Death Certificate.
- c) Insurance Certificate (to be surrendered to the Company)
- d) In the case of permanent total/partial disability claims like loss of eyes or limbs, a certificate from the attending Surgeon / Physician giving complete details of injury in extent of loss of use of organs, etc.

SECTION II: (COVERING HOSPITALISATION EXPENSES ARISING OUT OF ROAD ACCIDENT)

- a) The original hospitalisation / nursing home bills, receipts, cash memos, prescriptions, X-rays, pathological reports.
- b) A certificate from the attending physician stating the nature and extent of injury.
- c) Any additional information and assistance as the Company may require.

SECTION III: (COVERING HOSPITAL EXPENSES DUE TO ACCIDENT ARISING DURING AND IN COURSE OF EMPLOYMENT)

- a) Proof of employment showing employer-employee relationship, and attested copy of attendance register.
- b) Salary Payment / Disbursement Register.



P. Anil
Director
TOMS COLLEGE OF ENGINEERING
Mattakara P.O.
KOTTAYAM, KERALA - 686 564

The Insured / Insured persons should allow any representative of the Company to examine the injured either at the residence or Hospital / Nursing Home at all reasonable times and should co-operate with the Company if any claim reduction measures are suggested. Provided that in the case of a claim by death or permanent total disablement, all sums will be payable on the delivery of this policy cancelled and discharged.

7. No sum payable under this Policy shall carry interest.
8. The Company shall not be liable to make any payment under this Policy in respect of any claim, if such claim be in any manner fraudulent or supported by any fraudulent statement or device, whether by the Insured or by any person acting on behalf of the Insured.
9. MIS-DESCRIPTION: This policy shall be void and all premium paid hereon shall be forfeited by the Company in the event of misrepresentation, mis-descriptions, or non-disclosure of any material facts / particulars.
10. SUBROGATION: The Insured and any claimant under this Policy shall at the expense of the Company do and concur in doing and permit to be done all such acts and things as may be necessary or reasonably required by the Company for the purpose of enforcing any rights and remedies, or of obtaining relief or indemnity from other parties to which the Company shall be, or would become entitled or subrogated upon the Company paying for or making good any loss or damage under this Policy whether such acts and things shall be or become necessary or required before or after the indemnification of the Insured by the Company.
11. The Company may at any time cancel the Policy on grounds of misrepresentation, fraud, non-disclosure of material fact or non-cooperation by the Insured by sending fifteen days notice in writing by Registered A/D to the Insured at his last known address in which case the Company shall return to the Insured a proportion of the last premium corresponding to the unexpired period of insurance if no claim has been paid under the policy. The Insured may at any time cancel this policy and in such event the Company shall allow refund of premium at Company's short period rates provided no claim has occurred upto the date of cancellation.
12. If any difference shall arise shall arise as to the quantum to be paid under this Policy (liability being otherwise admitted) such difference shall independently of all other questions be referred to the decision of a sole arbitrator to be appointed in writing by the parties in difference, or if they cannot agree upon a single arbitrator within 30 days of any party invoking arbitration, the same shall be referred to a panel of three arbitrators, comprising of two arbitrators, one to be appointed by each of the parties to the dispute / difference, and the third arbitrator to be appointed by such two arbitrators, and arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act 1996.

It is clearly agreed and understood that no difference or dispute shall be referable to arbitration as hereinbefore provided, if the Company has disputed or not accepted liability under or in respect of this policy

It is hereby expressly stipulated and declared that it shall be a condition precedent to any right of action or suit upon this policy that the award by such arbitrator / arbitrators of the amount of the loss or damage shall be first obtained.

It is also hereby expressly agreed and declared that If the Company shall disclaim liability to the Insured for any claim herein under, and such claim shall not, within 12 calendar months from the date of such disclaimer have been made the subject matter of a suit in a court of law, then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable hereunder.

13. All medical / surgical treatments under this Policy shall have to be taken in India and admissible claims thereof shall be payable in Indian currency only.

14. Contribution Clause applicable to Section II covering Hospitalisation Expenses:

If at the time of the happening of any loss or damage covered by this Policy there shall be subsisting any other insurance of any nature whatsoever covering the same, whether effected by the Insured or not, then the Company shall not be liable to pay or contribute more than its rateable proportion of any loss or damage.



UNITED INDIA INSURANCE COMPANY LIMITED

BRANCH OFFICE, CHANGANACHERRY, THOTTUPARAMBIL BUILDINGS, 2ND FLOOR, HEAD POST OFFICE JN., MC ROAD, email:
100506@uiic.co.in

KOTTAYAM - 686101 KERALA
PH: (0481) 2422363, (0481) 2424545 FAX: EMAIL:

GROUP PERSONAL ACCIDENT TAILOR MADE POLICY
POLICY NO.: 1005064221P113249154

(DUPLICATE)

PERIOD OF INSURANCE
From 00:00 Hrs of 08/03/2022
To Midnight of 07/03/2023

Insured

MR CHAIRMAN - TOMS COLLEGE OF ENGINEERING
TOMS COLLEGE OF ENGINEERING, MATTAKARA P.O., KOTTAYAM

686564
KOTTAYAM
KERALA

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

Agent Name : FALI JOSE
Agent Code : AGD0110913
Mobile/Landline Number/Email : 9400195883

The genuineness of the policy can be verified through "Verify Your Policy" link at www.uiic.co.in.

For any Information, Service Requests, Claim intimation and Grievances please write to 100506@uiic.co.in

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Website: <http://www.uiic.co.in>

Printed By : PRA38093 @ 22/03/2022 10:46:50 AM



Paw. Aj
Director
TOMS COLLEGE OF ENGINEERING
Mattakara P.O.
KOTTAYAM, KERALA - 686 564

This document is digitally signed

Signer: N MOHAN SANKAR
Date: Tue, Mar 22, 2022 10:46:50 IST
Location: United India Insurance Company Ltd
Reason: Signing Policy for UIIC





**GROUP PERSONAL ACCIDENT TAILOR MADE POLICY
SCHEDULE**

Policy No.:	1005064221P113249154	Prev.Pol.No.:	1005064220P113987743
Name of Customer /ID	MR CHAIRMAN - TOMS COLLEGE OF ENGINEERING/23080029360		Mobile:
Tel.(O):	Fax:	Tel.(R):	9846353148
Business/Occupation :	None		
Period of Insurance:	From 00:00 Hours of 08/03/2022 To MIDNIGHT of 07/03/2023		

Coinsurance | UIIC 100506 : 100%

Premium : Thirty-eight thousand one hundred thirty-six rupees only

INSURED DETAILS:

Risk Category	No. of Person/Category	Covers	Premium	Loading/Discount	Caculated Amount
RiskCategory I	750	Table II Death PTD	48,750.00		
		Medical Expenses	9,750.00		

Total No Of Person	750	Total Sum Insured for the Group	₹75000000
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Special Conditions:-	ACCIDENTAL DEATH/PTD COVER FOR STUDENTS: RS.100000/- . ACCIDENTAL TREATMENT BENEFIT FOR THE STUDENTS IN THE HOSPITAL:RS.25000/- PER YEAR PER STUDENT. TOTAL NO.OF STUDENTS COVERED:750 AS PER STUDENTS LIST ATTACHED.
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Net Premium:	38,136.00
CGST(9%):	3,432.00
SGST(9%):	3,432.00
Stamp Duty:	5.00
Total :	45,000.00
Receipt Number :	10110050621115001504
Receipt Date:	22/03/2022
Agency/Broker Code :	AGD0110913
Dev. Officer Code :	
Direct Business :	

Customer GST/UIN No.:		Office GST No.:	32AAACU5552C1ZS
SAC Code:	997133	Invoice No. & Date:	42211113249154 & 22/03/2022
Amount Subject to Reverse Charges-NIL			

Anti Money Laundering Clause:-In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

LET US JOIN THE FIGHT AGAINST CORRUPTION. PLEASE TAKE THE PLEDGE AT <https://pledge.cvc.nic.in>.

Date of Proposal and Declaration: 08/03/2022

IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at BO CHANGANACHERRY 100506 on this 17th day of March 2022 .

For and On behalf of
United India Insurance Co. Ltd.

Affix Policy
Stamp here.

Duly Constituted Attorney(s)

Underwritten By - PRA38093 (BO UW CUM CASHIER) , Approved By -
BHA29695(RO UNDERWRITER)

PERSONAL ACCIDENT POLICY (GROUP TAILOR MADE)

WHEREAS the Insured named in the Schedule herein has made or caused to be made to the United India Insurance Co. Ltd., (herein after called 'the Company') written proposal dated as stated in Schedule herein (Warranting the truth of the statements contained therein) which is the basis of this contract and is deemed to be incorporated herein and has paid to the Company the Premium herein started for the insurance hereinafter for the period started in the Schedule.

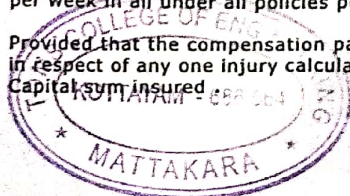
NOW THIS POLICY WITNESSETH that subject to the terms, provisions, exclusions, definitions and conditions contained herein or endorsed or otherwise expressed hereon the Company will pay the insured as hereinafter mentioned :

1. If at anytime during the currency of this policy the insured shall sustain any bodily injury resulting solely and directly from accident caused by external violent and visible means, then the company shall pay to the insured or his legal personal representative(s) as the case may be the sum or sums hereinafter set forth that is to say :-
 - a) If such injury shall within twelve calendar month of its occurrence be the sole and direct cause to the death of the insured persons the Capital Sum insured stated in the Schedule herein.
 - b) If such injury shall within twelve calendar months of its occurrence be the sole and direct cause of the total and irrecoverable loss of :
 - i. 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, the capital sum insured stated in the Schedule herein.
 - ii. 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 stated in the Schedule herein.
 - c) If such injury shall within twelve calendar months of its occurrence be the sole and direct cause of the total and irrecoverable loss of :
 - i. The sight of one eye or of the actual loss by physical separation of one entire hand or one entire foot, fifty percent (50%) of the capital sum insured stated in the Schedule herein.
 - ii. Total and irrecoverable loss of use of a hand or a foot without physical separation, fifty percent (50%) of the capital sum insured stated in the Schedule herein.
- Note :** For the purpose of clause (b) and (c) above, physical separation of a hand or feet means separation of hands at or above the wrist and or of the foot at or above the ankle respectively.
- d) If such injury shall as a direct consequence thereof immediately permanently totally and absolutely, disable the insured person from engaging in any employment or occupation of any description whatsoever, then a lump sum equal to hundred percent (100%) of the Capital Sum insured.
 - e) If such injury shall within twelve calendar months of its occurrence be the sole and direct cause of the total and irrecoverable loss of use or the actual loss by physical separation of the following then the percentage of the Capital Sum insured as indicated below shall be payable:

Sl No.	Item	% of Capital Sum Insured
i	a. Loss of toes -all	20
	b. Greet -both phalanges	5
	c. Greet -one phalanx	2
	d. Other than greet, of more than one toe lost each	1
ii	Loss of hearing -both ears	50
iii	Loss of hearing -one ear	15
iv	Loss of 4 fingers and thumb of one hand	40
v	Loss of 4 fingers	35
vi	a. Loss of thumb -both phalanges	25
	b. Loss of thumb -one phalanx	10
vii	a. Loss of index finger -three phalanges	10
	b. Loss of index finger -two phalanges	8
	c. Greet -one phalanx	4
viii	a. Loss of middle finger - 3 phalanges	6
	b. Loss of middle finger - 2 phalanges	4
	c. Loss of middle finger - 1 phalanx	2
ix	a. Loss of ring finger - 3 phalanges	5
	b. Loss of ring finger - 2 phalanges	4
	c. Loss of ring finger - 1 phalanx	2
x	a. Loss of little finger - 3 phalanges	4
	b. Loss of little finger - 2 phalanges	3
	c. Loss of little finger - 1 phalanx	2
xi	a. Loss of metacarpals - first or second (additional)	3
	b. Loss of metacarpals - third, fourth or fifth (additional)	2
xii.	any other permanent partial disablement	% as assessed by the Doctor

- f) If such injury shall be the sole and direct cause of temporary total disablement, then so long as the Insured person 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.

Provided that the compensation payable under the foregoing sub-clauses (f) 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.



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- g) In the event of Death of the Insured person due to accident as defined in the policy outside her/his residence the company shall reimburse expenses incurred for transportation of Insured persons dead body to the place of residence subject to a maximum of 2% of capital sum insured or Rs.2,500/- which ever is less.
- h) In the event of death or permanent total disablement of the Insured due to accident as defined in the Insured due to accident as defined in the tariff, the policy shall also provide compensation towards Education Fund for the dependent children as below :
- 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/-.
 - If the insured person has more than one dependent child below the age of 23 years, an amount equal to 10% of the 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

Note: 1. The benefit under this extension will be available on the basis of the original CSI only and not on the cumulative Bonus.

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

Provided that there be an any other subsisting PA Insurance/s in the name of the Insured and benefit under this Regulation becoming payable under all such policies, the total amount so payable shall be limited to a maximum of Rs.5000/- in case there is one dependent child and Rs.10,000/- in case there is more than one dependent child. The amount so payable shall be borne by all the policies in proportion to the original sum insured.

EXCEPTION

PROVIDED ALWAYS THAT

The company shall not be liable under this policy for:

- Compensation under more than one of the foregoing sub-clauses in respect of the same period of disablement.
 - Any other payment to the same person after a claim under one of the sub-clauses (a), (b), (c) or (d) has been admitted and become payable.
 - Any payment in case of more than one claim under this Policy during any one period of insurance by which the maximum liability of the company in that period would exceed the sum payable under sub-clause (a) of the Policy.
 - 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 Licensed 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.
- Standard type of aircraft means any aircraft duly licensed to carry passengers (for hire or otherwise) by appropriate authority irrespective of whether such an aircraft is privately owned or chartered or operated by a regular airline or whether such an aircraft has a single engine or multiengine.
- 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 persons
 - directly or indirectly caused by or contributed to by or arising from ionising radiation or contamination by radio activity sustains 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.

Provided also that the due observance and fulfillment of the terms and conditions of this Policy (which conditions and all endorsements hereon are to be read as part of this policy) shall so far as they relate to anything to be done or not to be done by the insured be a condition precedent to any liability of the company under this Policy.

- Pregnancy Exclusion Clause :** The Insurance under this Policy shall not extend to cover death disablement resulting directly or indirectly from pregnancy or in consequence thereof.

CUMULATIVE BONUS

Compensation payable under clause (a) (b) (c) and (d) of the policy viz. death, loss of limb(s) sight and permanent total disablement arising out of accidental injuries shall be increased by 5% thereof in respect of each completed year, during which, the policy shall have been in force, prior to the occurrence of an accident for which capital sum becomes payable but amount of such increase shall not exceed 50% of the capital sum insured stated in the schedule herein.

This clause shall not in any way alter the annual character of the Insurance for the right of the company to decline to renew or to cancel this policy as hereinafter provided. The earned cumulative bonus will not be lost if the policy is renewed within 90 days after its expiry

CONDITION

- Upon the happening of any event, which may give rise to claim under this Policy, written notice with full particulars must be given to the company immediately. In case of death, written notice also of the death must, unless reasonable cause is shown, be so given

before interment, cremation and in any case, within one calendar month after the death, and in the event of loss of sight or amputation of limbs, written notice thereof must also be given within one calendar month after such loss of a sight or amputation. Satisfactory Proof to the Company shall be furnished of all matter upon which a claim is based. Any medical or other agent of the Company shall be allowed to examine the Persons of the Insured on the occasion of any alleged injury or disablement when and so often as the same may reasonably be required on behalf of the company and in the event of death to make a post-mortem examination of the body of the Insured persons. Such evidence as the company may from time to time require shall be furnished and a post-mortem examination report if necessary be furnished within the space of fourteen days after demand in writing and in the event of a claim in respect of loss of sight of the Insured person(s) shall undergo at the Insured's expense such operation or treatment as the company may reasonably deem desirable provided that in case of claim by death or permanent total disablement, all sums payable hereunder shall be payable only on the delivery of this policy for cancellation and discharge and in the case of a temporary total disablement only upon the termination of such disablement.

In the case of permanent partial disablement all sums payable hereunder shall be payable on the delivery of this policy for reduction of the sum insured by the amount admission under the claim.

3. The Company shall not be liable to make any payment under this policy in respect of any claim if such claim be in any manner fraudulent or supported by any fraudulent statement or device, whether by the Insured or by any person on behalf of the Insured persons.
4.
 - a) The Insured shall give immediate notice to the Company on any change in his business or occupation.
 - b) The Insured shall on tendering any premium for the renewal of this policy give notice in writing to the Company of any disease physical defect or infirmity with which any of the Insured person(s) have become affected since the Payment of the last preceding premium.
5. This policy may be renewed by mutual consent every year and in such event, the renewal premium shall be paid to the Company on or before the date of expiry of the policy or of the subsequent renewal thereof. The Company shall not, however be bound to give notice that such Renewal Premium is due.
6. The Company may at any time cancel the Policy on grounds of misrepresentation, fraud, non-disclosure of material fact or non-cooperation by the Insured by sending fifteen days notice in writing by Registered A/D to the Insured at his last known address in which case the Company shall return to the Insured a proportion of the last premium corresponding to the unexpired period of Insurance if no claim has been paid under the policy. The Insured may at any time cancel this policy and in such event the Company shall allow refund of premium at Company's short period rates provided no claim has occurred upto the date of cancellation.
7. The Company shall not be bound to take notice or be affected by any notice of any trust, charge, lien, assignment or other dealing with or relating to this policy but the receipt of the Insured shall in all cases be an effective discharge to the Company.
8. If any dispute or difference shall arise as to the quantum to be paid under this policy (liability being otherwise admitted) such difference shall independently of all other questions be referred to the decision of a sole arbitrator to be appointed in writing by the parties to or if they cannot agree upon a single arbitrator within 30 days of any party invoking arbitrators, comprising of two arbitrators, one to be appointed by each of the parties to the dispute/difference and the third arbitrator to be appointed by such two arbitrators and arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996.

It is clearly agreed and understood that no difference or dispute shall be referable to arbitration as hereinbefore provided, if the Company has disputed or not accepted liability under or in respect of this policy.

It is hereby expressly stipulated and declared that it shall be a condition precedent to any right of action or suit upon this policy that the award by such arbitrator/arbitrators of the amount of the loss or damage shall be first obtained

It is also hereby expressly agreed and declared that If the Company shall disclaim liability to the Insured for any claim herein under, and such claim shall not, within 12 calendar months from the date of such disclaimed have been made the subject matter of a suit in a court of law, then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable hereunder.

DEFINITIONS:

1 ACCIDENT

Accident - An accident is a sudden, unforeseen and involuntary event caused by external and visible and violent means
"Acute condition" - Acute condition is a disease, illness or injury that is likely to respond quickly to treatment which aims to return the person to his or her state of health immediately before suffering the disease/illness/injury which leads to full recovery.
B. "Chronic condition" - A chronic condition is defined as a disease, illness, or injury that has one or more of the following characteristics -
I. It needs ongoing or long-term monitoring through consultations, examinations, check-ups and/or tests -
II. It needs ongoing or long-term control or relief of symptoms
III. It requires your rehabilitation or for you to be specially trained to cope with it
IV. It continues indefinitely
V. It comes back or is likely to come back.

2 CONGENITAL ANOMALY

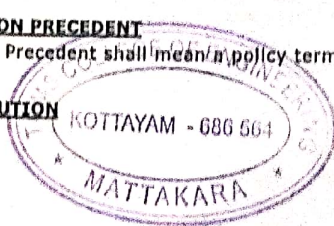
Congenital Anomaly refers to a condition(s) which is present since birth, and which is abnormal with reference to form, structure or position.

- a. Internal Congenital Anomaly
Which is not in the visible and accessible parts of the body.
- b. External Congenital Anomaly
Which is in the visible and accessible parts of the body.

3 CONDITION PRECEDENT

Condition Precedent shall mean a policy term or condition upon which the Insurer's liability under the policy is conditional upon.

4 CONTRIBUTION



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Contribution is essentially the right of an Insurer to call upon other Insurers liable to the same Insured to share the cost of an Indemnity claim on a rateable proportion.

- 5 **DAY CARE CENTRE**
Day Care centre means any institution established for day care treatment of illness and/or injuries or a medical set-up within a hospital and which has been registered with the local authorities, wherever applicable, and is under the supervision of a registered and qualified medical practitioner AND must comply with all minimum criteria as under :
a. Has qualified nursing staff under its employment
b. Has qualified Medical Practitioner(s) in charge
c. Has a fully equipped operation theatre of its own where surgical procedures are carried out-
d. Maintains daily records of patients and will make these accessible to the Insurance Company's authorized personnel.
- 6 **DAY CARE TREATMENT** - Day Care treatment means the medical treatment and/or surgical procedure which is -(I). Undertaken under General or Local Anesthesia in a hospital/day care centre in less than 24 hrs because of technological and (II) which would have otherwise required a hospitalisation of more than 24 hours. Treatment normally taken on an out-patient basis is not included in the scope of this definition.
- 7 **DEDUCTIBLE**
Deductible is a cost sharing requirement under a Personal Accident Insurance Policy that provides that the Insurer will not be liable for a specified rupee amount in case of Indemnity policies and for a specified number of days/hours in case of hospital cash policies which will apply before any benefits are payable by the Insurer. A deductible does not reduce the sum insured.
- 8 **HOSPITAL/NURSING HOME**
A Hospital means any institution established for in-patient care and day care treatment of illness and/or injuries and which has been registered as a Hospital with the local authorities under the Clinical establishments (Registration and Regulation) Act, 2010 or under the enactments specified under the Schedule of Section 56(1) of the said Act OR complies with all minimum criteria as under
- Has qualified nursing staff under its employment round the clock.
- Has at least 10 in-patient beds in towns having a population of less than 10 lacs and at least 15 in-patient beds in all other places;
- Has qualified medical practitioner(s) in charge round the clock;
- Has a fully equipped Operation Theatre of its own where surgical procedures are carried out;
- Maintains daily records of patients and makes these accessible to the Insurance company's authorized personnel.
The term 'Hospital / Nursing Home' shall not include an establishment which is a place of rest, a place for the aged, a place for drug-addicts or place for alcoholics, a hotel or a similar place.
- 9 **HOSPITALISATION**
Means admission in a Hospital/Nursing Home for a minimum period of 24 In-patient care consecutive hours except for specified procedures/treatments, where such admission could be for a period of less than 24 consecutive hours.
- 10 **INJURY**
Injury means accidental physical bodily harm excluding illness or disease solely and directly caused by external, violent and visible and evident means which is verified and certified by a Medical Practitioner.
- 11 **IN-PATIENT CARE**
In-patient care means treatment for which the insured person has to stay in a hospital for more than 24 hours for a covered event.
- 12 **INTENSIVE CARE UNIT**
The term "Intensive Care" unit means an identified section, ward or wing of a hospital which is under the constant supervision of a dedicated Medical Practitioner(s), and which is specially equipped for the continuous monitoring and treatment of patients who are in a critical condition, or require life support facilities and where the level of care and supervision is considerably more sophisticated and intensive than in the ordinary and other wards.
- 13 **MEDICAL ADVISE**
Medical Advise - Any consultation or advice from a Medical Practitioner including the issue of a any prescription or repeat prescription.
- 14 **MEDICAL EXPENSES**
Medical expenses - Medical Expenses means those expenses that an Insured person has necessarily and actually incurred for medical treatment on account of illness or Accident on the advice of a Medical Practitioner, as long as these are no more than would have been payable if the Insured Person had not been insured and no more than other hospitals or doctors in the same locality would have charged for the same medical treatment.
- 15 **MEDICALLY NECESSARY**
Medically Necessary treatment is defined as any treatment, tests, medication, or stay in hospital or part of a stay in hospital which
a. Is required for the medical management of the illness or injury suffered by the insured;
b. Must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration or intensity;
c. Must have been prescribed by a Medical Practitioner;
d. Must conform to the professional standards widely accepted in International medical practice or by the medical community in India.
- 16 **MEDICAL PRACTITIONER**
A Medical Practitioner is a person who holds a valid registration from the Medical Council of any State of India or Medical Council of India or Council for Indian Medicine or for Homeopathy set up by the Government of India or a State Government and is thereby entitled to practice medicine within its jurisdiction; and is acting within the scope and jurisdiction of licence.

The term Medical Practitioner would include Physician, Specialist and Surgeon. (The Registered Practitioner should not be the insured or close family members such as parents, in-laws, spouse and children).
- 17 **NOTIFICATION OF CLAIM**

Notification of claim is the process of notifying a claim to the insurer or TPA by specifying the timelines as well as the address/telephone number to which it should be notified.

18 ROOM RENT

Room rent shall mean the amount charged by a hospital for the Occupancy of a bed on per day (24 hours) basis and shall include associated medical expenses.

19 SUBROGATION

Subrogation shall mean the right of the insurer to assume the rights of the insured person to recover expenses paid out under the policy that may be recovered from any other source.

20 SURGERY OR SURGICAL PROCEDURE

Surgery or Surgical Procedure means manual and/or operative procedure(s) required for treatment of an illness or injury, correction of deformities and defects, diagnosis and cure of diseases, relief of suffering or prolongation of life, performed in a hospital or day care centre by a Medical Practitioner.

Communicable Disease Exclusion Clause:

1. Notwithstanding any provision, clause or term of this insurance contract to the contrary, this insurance Contract excludes any loss, cost, damage, liability, claim, fines, penalty or expense or any other amount of whatsoever nature, whether directly or indirectly and/or in whole or in part, related to, caused by, contributed to by, resulting from, as a result of, as a consequence of, attributable to, arising out of, arising under, in connection with, or in any way involving (this includes all other terms commonly used and/or understood to reflect or describe nexus and/or connection from one thing to another whether direct or indirect):

1.1 a Communicable Disease and/or the fear or threat (whether actual or perceived) of a Communicable Disease and/or the actual or alleged transmission of a Communicable Disease regardless of any other cause or event contributing and/ or occurring concurrently or in any sequence thereto, and

1.2 a pandemic or epidemic, as declared by the World Health Organisation or any governmental authority.

2. As used herein, Communicable Disease means: any infectious, contagious or communicable substance or agent and/or any infectious, contagious or communicable disease which can be caused and/or transmitted by means of substance or agent where:

2.1 the disease includes, but is not limited an illness, sickness, condition or an interruption or disorder of body functions, systems or organs, and

2.2 the substance or agent includes, but is not limited to, a virus, bacterium, parasite, other organism or other micro-organism (whether asymptomatic or not); including any variation or mutation thereof, whether deemed living or not, and

2.3 the method of transmission, whether direct or indirect, includes but not limited to, airborne transmission, bodily fluid transmission, transmission through contact with human fluids, waste or the like, transmission from or to any surface or object, solid, liquid or gas or between organisms including between humans, animals, or from any animal to any human or from any human to any animal, and

2.4 the disease, substance or agent is such:

2.4.1 that causes or threatens damage or can cause or threaten damage to human health or human welfare, or

2.4.2 that causes or threatens damage to or can cause or threaten damage to, deterioration to, contamination of, loss of value of, loss of marketability of or loss of use or usefulness of, tangible or intangible property. For avoidance of doubt, Communicable Disease includes but is not limited to Coronavirus Disease 2019 (Covid -19) and any variation or mutation thereof.

3. For further avoidance of doubt, any contingent or other business interruption loss, cost, damage, loss of income, loss of use, increased cost of working and/or extra expense arising out of or attributable to:

3.1 any partial or complete closure of and/or slowdown in, including but not limited to any closure by or under the advisories of public, military, government or civil authorities, or any denial of access to insured premises, or customer and or supplier premises (including service / utility providers), or

3.2 change in consumer behaviour, or

3.3 an absence of infected employees or employees suspected of being infected shall not be covered by this insurance Contract. .

4. For still further avoidance of doubt, loss, cost, damage, liability, claim, fines, penalty or expense or any other amount excluded hereby, includes but is not limited to any cost to identify, clean-up, detoxify, disinfect, decontaminate, mitigate, remove, evacuate, repair, replace, monitor, sanitize or test: (1) for a Communicable Disease or (2) any tangible or intangible property covered by this [insurance Contract] that is affected by such Communicable Disease.

5. It is clarified that (1) no other prior, concurrent or subsequent provision, clause, term or exception of this insurance Contract (including (but not limited to) any prior, concurrent or subsequent endorsement and/or any provision, clause, term, buy back or exception that operates, or is intended to operate, to extend the coverage of, or protections provided by, this insurance Contract) by whatever name called like any coverage extension, additional coverage, global extension, exception to any exclusion); (2) any change in the law, clause or similar provision; (3) any follow the fortunes clause or similar provision; and/or (4) no change in the law or any regulation (to the extent permitted by applicable law), shall operate to provide any insurance, coverage or protection under this insurance Contract that would otherwise be excluded through the exclusion set forth in this [Endorsement][Clause].

6. If the insurer alleges that by reason of this [Endorsement][Clause] any amount is not covered by this insurance Contract the burden of proving the contrary shall rest in the insured.

Pandemic /Epidemic Specific Exclusion Clause:

Notwithstanding any provision, clause or term of this Contract, this insurance Contract excludes any first party and/or third party actual or alleged loss, injury, sickness, disease, death, medical payment, defence cost, cost, damage, liability, claim, fines, penalty, compensation, expenses or any amount of whatsoever nature, whether directly or indirectly and/or in whole or in part, arising out of (this includes all other terms commonly used and/or understood to reflect or describe, direct or indirect nexus and/or connection between one thing and another), intentional or unintentional violation of

a. The provisions of Disaster Management Act, 2005 as amended from time to time

b. The provisions of The Epidemic Diseases Act 1897 as amended from time to time

c. The provisions of any act dealing with public health and/or public safety

d. The rules, regulations, orders, guidelines, policies, notification etc issued from time to time under any of the above acts.

Disclosure to Information Norm

The policy shall be void and all premium paid hereon shall be forfeited to the Company, in the event of mis-representation, mis-description, or non-disclosure of any material fact.



Paw. Aj
Director
TOMS COLLEGE OF ENGINEERING
Mattakara P.O.
KOTTAYAM, KERALA - 686 564



UNITED INDIA INSURANCE COMPANY LIMITED

BRANCH OFFICE, CHANGANACHERRY, THOTTUPARAMBIL BUILDINGS, 2ND FLOOR, HEAD POST OFFICE JN., MC ROAD, email:

100506@uiic.co.in

KOTTAYAM - 686101 KERALA

PHONE: (0481) 2422363, (0481) 2424545 FAX: EMAIL:

STANDARD FIRE AND SPECIAL PERILS POLICY

POLICY NO.: 1005061119P116147285

UIN NO. IRDAN545RP0002V01200708

PERIOD OF INSURANCE

From 00:00 Hrs of 10/03/2020

To Midnight of 09/03/2021

Insured

MR CHAIRMAN - TOMS COLLEGE OF ENGINEERING
TOMS COLLEGE OF ENGINEERING, MATTAKARA P.O., KOTTAYAM

686564

KOTTAYAM

KERALA

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

Agent Name

: FALI JOSE

Agent Code

: AGD0110913

Mobile/Landline Number/Email

: 9400195883

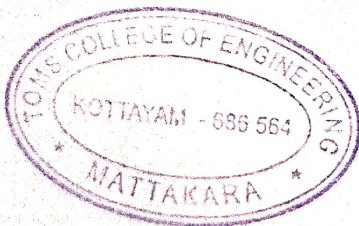
The genuineness of the policy can be verified through "Verify Your Policy" link at www.uiic.co.in.

For any Information, Service Requests, Claim intimation and Grievances please write to 100506@uiic.co.in

Regd Office: 24 Whites Road, Chennai-600014, Head Office: No.19, Lane IV, Nungambakkam High Road, Chennai-600034.

Website: <http://www.uiic.co.in>

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Director
TOMS COLLEGE OF ENGINEERING
Mattakara P.O.
KOTTAYAM, KERALA - 686 564

Paw. Aj



POLICY NO.:1005061119P116147285
UIN NO. IRDAN545RP0002V01200708



STANDARD FIRE AND SPECIAL PERILS POLICY SCHEDULE

Policy Number	1005061119P116147285		Prev. Pol. No.	1005061118P115963941	
Insured Details	Name	MR CHAIRMAN - TOMS COLLEGE OF ENGINEERING / 23080029360		Tel (R)	Mobile 9846353148
	Tel (O)	Fax:		Email	info@toms.ac.in
Business / Occupation	None			To	Midnight of 09/03/2021
Period of Insurance	From	00:00 Hrs of 10/03/2020			

CO-INSURANCE DETAILS:
UIC 100506 : 100%

Risks Covered	Risk/Rate Code No.	Block No.	Sum Insured(₹)	Premium(In ₹)
Building:	1/6	1	20,000,000.00	4,000.00
Stocks(s)/			0.00	0.00
Contents(s):				

The risk(s) covered is / are as under

1 6 Schools, Colleges(1005)

Add on Description:	Sum Insured(₹)	Premium(₹)
Earthquake	20,000,000.00	2,000.00
STFI Cover	20,000,000.00	3,000.00
Total Addon Premium:₹		5,000.00

Description Of Risk: Schools, Colleges(1005)
Brief Description Of Risk: ENGINEERING COLLEGE BUILDING
Occupancy Name: ENGINEERING COLLEGE

The property is situated at:
TOMS COLLEGE OF ENGINEERING, MATTAKARA P.O., KOTTAYAM
KOTTAYAM STATE-KERALA PIN-686564

Stamp Duty Applicability : No

Annual Basic Premium:	4,000.00
Total Add on Premium:	5,000.00
Policy Premium :	9000
Less Long Term Discount:	0.00
Less Staff Discount:	0.00
Net Premium:	9,000.00
CGST(9%):	810.00
SGST(9%):	810.00
Kerala Flood Cess(1%):	90.00
Stamp Duty:	1.00
Total:	10,710.00
Receipt No:	10110050619117317461
Receipt Date:	16/03/2020

Agency/Broker Code: AGD0110913
Dev. Officer Code:

The Sum(s) Insured is/are as under:-

Srl.	Description Of Property	Sum Insured(₹)	Escalation Sum Insured(₹)
1	COLLEGE BUILDING	20,000,000.00	0.00

Deductibles: 5% of claim amount subject to a minimum of ₹10,000/-

Voluntary Deductible Details :

AOG Perils Deductible Amount(₹)	Other Perils Deductible Amount(₹)
0.00	0.00

Total Sum Insured(₹):20,000,000.00

Total Sum Insured(In words): Two crores rupees only

List of Add-On Covers

- 1 Earthquake
- 2 STFI Cover

Description Of Property Covered

1.) Location No. 1 Occupancy No. 1-

Address:TOMS COLLEGE OF ENGINEERING, MATTAKARA P.O., KOTTAYAM KOTTAYAM STATE-KERALA PIN-686564						Total Sum Insured	Basic Premium
SLNo	Constr. Type	Risk Code/ Rate Code	Description of Risk			20,000,000.00	4,000.00
1	Non-kutchra	1/6	Schools, Colleges(1005)				
Break-up of Sum Insured							
SLNo	Building	Plant & Machinery	Furniture And Other Contents	Stocks	Stocks In Process	Other Specific Items	
1	20,000,000.00	0.00	0.00	0.00	0.00		0.00
Add-On Cover Details							
SLNo	Add-On Cover	Sum Insured	Premium				
1	Earthquake	20,000,000.00	2,000.00				
2	STFI Cover	20,000,000.00	3,000.00				

The Insurance under this Policy is subject to clauses (as listed):

Subject to the list of warranties as applicable :

Customer GST/UTN No.:		Office GST No.:	32AAACU5552C1ZS
SAC Code:	9971	Invoice No. & Date:	1119116147285 & 16/03/2020
Amount Subject to Reverse Charges-NIL			

Anti Money Laundering Clause:-In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

LET US JOIN THE FIGHT AGAINST CORRUPTION. PLEASE TAKE THE PLEDGE AT <https://pledge.cvc.nic.in>.

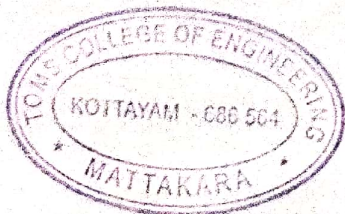
Date of Proposal and Declaration: 10/03/2020

IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at BO CHANGANACHERRY 100506 on this 16th day of March 2020.

For and On behalf of
United India Insurance Co. Ltd.

Affix Policy Stamp here.

Duly Constituted Attorney(s)
Underwritten By - PRA38093 (BO UNDERWRITER)



P.A.J. AJ
Director
TOMS COLLEGE OF ENGINEERING
Mattakara P.O.
KOTTAYAM, KERALA - 686 564

**STANDARD FIRE AND SPECIAL PERILS POLICY
(MATERIAL DAMAGE)**

IN CONSIDERATION OF the Insured named in the Schedule hereto having paid to the United India Insurance Company Limited (hereinafter called the Company) the full premium mentioned in the said schedule, THE COMPANY AGREES, (Subject to the Conditions and Exclusions contained herein or endorsed or otherwise expressed hereon) that if after payment of the premium the Property Insured described in the said Schedule or any part of such Property be destroyed or damaged by any of the perils specified hereunder during the period of insurance named in the said schedule or of any subsequent period in respect of which the Insured shall have paid and the Company shall have accepted the premium required for the renewal of the policy, the Company shall pay to the Insured the value of the Property at the time of the happening of its destruction or the amount of such damage or at its option reinstate or replace such property or any part thereof

- I. Fire :** Excluding destruction or damage caused to the property insured by
- 1) its own fermentation, natural heating or spontaneous combustion.
 - ii) its undergoing any heating or drying process.
- b) burning of property insured by order of any Public Authority.
- II. Lightning**
- III. Explosion/Implosion :** Excluding loss, destruction or damage
- a) to boilers (other than domestic boilers), economizers or other vessels, machinery or apparatus (in which steam is generated) or their contents resulting from their own explosion/implosion,
 - b) caused by centrifugal forces.
- IV. Aircraft Damage :** Loss, Destruction or damage caused by Aircraft, other aerial or space devices and articles dropped there from excluding those caused by pressure waves.
- V. Riot, Strike and Malicious Damage:** Loss of or visible physical damage or destruction by external violent means directly caused to the property insured but excluding those caused by
- a) total or partial cessation of work or the retardation or interruption or cessation of any process or operations or omissions of any kind.
 - b) Permanent or temporary dispossession resulting from confiscation, commandeering, requisition or destruction by order of the Government or any lawfully constituted Authority.
 - c) Permanent or temporary dispossession of any building or plant or unit or machinery resulting from the unlawful occupation by any person of such building or plant or unit or machinery or prevention of access to the same.
 - d) Burglary, housebreaking, theft, larceny or any such attempt or any omission of any kind of any person (whether or not such act is committed in the course of a disturbance of public peace) in any malicious act.
- If the Company alleges that the loss / damage is not caused by any malicious act, the burden of proving the contrary shall be upon the insured.
- VI. Storm, Cyclone, Typhoon, Tempest, Hurricane, Tornado, Flood and Inundation :** Loss, destruction or damage directly caused by Storm, Cyclone, Typhoon, Tempest, Hurricane, Tornado, Flood or Inundation excluding those resulting from earthquake, Volcanic eruption or other convulsions of nature. (Wherever earthquake cover is given as an "add on cover" the words "excluding those resulting from earthquake volcanic eruption or other convulsions of nature" shall stand deleted.
- VII. Impact Damage:** Loss of or visible physical damage or destruction caused to the property insured due to impact by any Rail/ Road vehicle or animal by direct contact not belonging to or owned by
- a) the Insured or any occupier of the premises or
 - b) their employees while acting in the course of their employment.
- VIII. Subsidence and Landslide including Rock slide:** Loss, destruction or damage directly caused by Subsidence of part of the site on which the property stands or Land slide/Rock slide excluding:
- a) the normal cracking, settlement or bedding down of new structures
 - b) the settlement or movement of made up ground
 - c) coastal or river erosion
 - d) defective design or workmanship or use of defective materials
 - e) demolition, construction, structural alterations or repair of any property or ground works or excavations.
- IX. Bursting and/or overflowing of Water Tanks, Apparatus and Pipes**
- X. Missile Testing operations**
- XI. Leakage from Automatic Sprinkler Installations :** Excluding loss, destruction or damage caused by
- a) Repairs or alterations to the buildings or premises
 - b) Repairs, Removal or Extension of the Sprinkler Installation
 - c) Defects in construction known to the Insured.
- XII. Bush Fire:** Excluding loss, destruction or damage caused by Forest Fire. PROVIDED that the liability of the Company shall in no case exceed in respect of each item the sum expressed in the said Schedule to be insured thereon or in the whole the total Sum Insured hereby or such other sum or sums as may be substituted therefor by memorandum hereon or attached hereto signed by or on behalf of the Company.

A) GENERAL EXCLUSIONS

1. Standard Fire and Special Perils Policy (except dwellings with individual owners)
5% of claim amount subject to a minimum of ₹10,000/-
2. Loss, destruction or damage caused by war, invasion, act of foreign enemy hostilities or war like operations (whether war be declared or not), civil war, mutiny, civil commotion assuming the proportions of or amounting to a popular rising, military rising, rebellion, revolution, insurrection or military or usurped power.

3. Loss, destruction or damage directly or indirectly caused to the property insured by
 - a) ionizing radiations or contamination by radioactivity from any nuclear fuel or from any nuclear waste from the combustion of nuclear fuel
 - b) the radio active toxic, explosives or other hazardous properties of any explosive nuclear assembly or nuclear component thereof
4. Loss, destruction or damage caused to the insured property by pollution or contamination excluding
 - a) pollution or contamination which itself results from a peril hereby insured against.
 - b) any peril hereby insured against which itself results from pollution or contamination
5. Loss, destruction or damage to bullion or unset precious stones, any curios or works of art for an amount exceeding Rs. 10000/-, goods held in trust or on commission, manuscripts, plans, drawings, securities, obligations or documents of any kind, stamps, coins or paper money, cheques, books of accounts or other business books, computer systems records, explosives unless otherwise expressly stated in the policy.
6. Loss, destruction or damage to the stocks in Cold Storage premises caused by change of temperature.
7. Loss, destruction or damage to any electrical machine, apparatus, fixture, or fitting arising from or occasioned by over-running, excessive pressure, short circuiting, arcing, self heating or leakage of electricity from whatever cause (lightning included) provided that this exclusion shall apply only to the particular electrical machine, apparatus, fixture or fitting so affected and not to other machines, apparatus, fixtures or fittings which may be destroyed or damaged by fire so set up.
8. Expenses necessarily incurred on (i) Architects, Surveyors and Consulting Engineer's Fees and (ii) Debris Removal by the Insured following a loss, destruction or damage to the Property insured by an Insured peril in excess of 3% and 1% of the claim amount respectively.
9. Loss of earnings, loss by delay, loss of market or other consequential or indirect loss or damage of any kind or description whatsoever.
10. Loss, or damage by spoilage resulting from the retardation or interruption or cessation of any process or operation caused by operation of any of the perils covered.
11. Loss by theft during or after the occurrence of any insured peril except as provided under Riot, Strike, Malicious and Terrorism Damage cover.
12. Any Loss or damage occasioned by or through or in consequence directly or indirectly due to earthquake, Volcanic eruption or other convulsions of nature.
13. Loss or damage to property insured if removed to any building or place other than in which it is herein stated to be insured, except machinery and equipment temporarily removed for repairs, cleaning, renovation or other similar purposes for a period not exceeding 60 days.
14. Loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any act of terrorism regardless of any other cause or event contributing concurrently or in any other sequence to the loss are excluded.
For the purpose of this warranty an act of terrorism means an act, including but not limited to the use of force or violence and/ or the threat thereof, of any person or group(s) of persons whether acting alone or on behalf of or in connection with any organisation(s) or Government(s) committed for political, religious, ideological or similar purpose including the intention to influence any Government and/ or to put the public, or any section of the public in fear.
The Warranty also excludes loss, damage, cost or expense of whatsoever nature directly or indirectly caused by, resulting from or in connection with any action taken in controlling, preventing suppressing or in any way relating to action taken in respect of an act of terrorism.
If the Company alleges that by reason of this exclusion, any loss, damage, cost or expenses is not covered by this insurance the burden of proving the contrary shall be upon the Insured.
In the event any portion of this exclusion is found to be invalid or unenforceable, the remainder shall remain in full force and effect.

B) GENERAL CONDITIONS

1. THIS POLICY shall be voidable in the event of mis-representation, mis-description or non-disclosure of any material particular.
2. All insurances under this policy shall cease on expiry of seven days from the date of fall or displacement of any building or part thereof or of the whole or any part of any range of buildings or of any structure of which such building forms part.
PROVIDED such a fall or displacement is not caused by insured perils, loss or damage which is covered by this policy or would be covered if such building, range of buildings or structure were insured under this policy.
Notwithstanding the above, the Company subject to an express notice being given as soon as possible but not later than seven days of any such fall or displacement may agree to continue the insurance subject to revised rates, terms and conditions as may be decided by it and confirmed in writing to this effect.
3. Under any of the following circumstances the insurance ceases to attach as regards the property affected unless the Insured, before the occurrence of any loss or damage, obtains the sanction of the Company signified by endorsement upon the policy by or on behalf of the Company:-
 - a) If the trade or manufacture carried on be altered, or if the nature of the occupation or of other circumstances affecting the building insured or containing the insured property be changed in such a way as to increase the risk of loss or damage by Insured Perils.
 - b) If the building insured or containing the insured property becomes unoccupied and so remains for a period of more than 30 days. (this condition is not applicable to dwellings)
 - c) If the interest in the property passes from the insured otherwise than by will or operation of law.
4. This insurance does not cover any loss or damage to property which, at the time of the happening of such loss or damage, is insured by or would, but for the existence of this policy, be insured by any marine policy or policies except in respect of any excess beyond the amount which would have been payable under the marine policy or policies had this insurance not been effected.
5. This insurance may be terminated at any time at the request of the Insured, in which case the Company will retain the premium at customary short period rate for the time the policy has been in force. This insurance may also at any time be terminated at the option of the Company, on 15 days' notice to that effect being given to the Insured, on grounds of mis-representation, fraud, non-disclosure of material facts or non-cooperation of the Insured, in which case the Company shall be liable to repay on demand a rateable proportion of the premium for the unexpired term from the date of the cancellation.
6.
 - i) On the happening of any loss or damage the Insured shall forthwith give notice thereof to the Company and shall within 15 days after the loss or damage, or such further time as the Company may in writing allow in that behalf, deliver to the Company
 - a) claim in writing for the loss or damage containing as particular an account as may be reasonably practicable of all the several articles or items or property damaged or destroyed, and of the amount of the loss or damage thereto respectively, having regard to their value at the time of the loss or damage not including profit of any kind.
 - b) Particulars of all other insurances, if any.
The Insured shall also at all times at his own expense produce, procure and give to the Company all such further particulars, plans, specification books, vouchers,

invoices, duplicates or copies thereof, documents, investigation reports (internal/external), proofs and information with respect to the claim and the origin and cause of the loss and the circumstances under which the loss or damage occurred, and any matter touching the liability or the amount of the liability of the Company as may be reasonably required by or on behalf of the Company together with a declaration on oath or in other legal form of the truth of the claim and of any matters connected therewith.

No claim under this policy shall be payable unless the terms of this condition have been complied with.

(ii) In no case whatsoever shall the Company be liable for any loss or damage after the expiry of 12 months from the happening of the loss or damage unless the claim is the subject of pending action or arbitration; it being expressly agreed and declared that if the Company shall disclaim liability for any claim hereunder and such claim shall not within 12 calendar months from the date of the disclaimer have been made the subject matter of a suit in a court of law then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable hereunder.

7. On the happening of loss or damage to any of the property insured by this policy, the Company may
- enter and take and keep possession of the building or premises where the loss or damage has happened.
 - take possession of or require to be delivered to it any property of the Insured in the building or on the premises at the time of the loss or damage.
 - keep possession of any such property and examine, sort, arrange, remove or otherwise deal with the same.
 - sell any such property or dispose of the same for account of whom it may Concern.

The powers conferred by this condition shall be exercisable by the Company at any time until notice in writing is given by the insured that he makes no claim under the policy, or if any claim is made, until such claim is finally determined or withdrawn, and the Company shall not by any act done in the exercise or purported exercise of its powers hereunder, incur any liability to the Insured or diminish its rights to rely upon any of the conditions of this policy in answer to any claim.

If the Insured or any person on his behalf shall not comply with the requirements of the Company or shall hinder or obstruct the Company, in the exercise of its powers hereunder, all benefits under this policy shall be forfeited.

The Insured shall not in any case be entitled to abandon any property to the Company whether taken possession of by the Company or not.

8. If the claim be in any respect fraudulent, or if any false declaration be made or used in support thereof or if any fraudulent means or devices are used by the Insured or any one acting on his behalf to obtain any benefit under the policy or if the loss or damage be occasioned by the willful act, or with the connivance of the Insured, all benefits under this policy shall be forfeited.
9. If the Company at its option, reinstate or replace the property damaged or destroyed, or any part thereof, instead of paying the amount of the loss or damage, or join with any other Company or Insurer(s) in so doing, the Company shall not be bound to reinstate exactly or completely but only as circumstances permit and in reasonably sufficient manner, and in no case shall the Company be bound to expend more in reinstatement than it would have cost to reinstate such property as it was at the time of the occurrence of such loss or damage nor more than the sum insured by the Company thereon. If the Company so elect to reinstate or replace any property the insured shall at his own expense furnish the Company with such plans, specifications, measurements, quantities and such other particulars as the Company may require, and no acts done, or caused to be done, by the Company with a view to reinstatement or replacement shall be deemed an election by the Company to reinstate or replace.
- If in any case the Company shall be unable to reinstate or repair the property hereby insured, because of any municipal or other regulations in force affecting the alignment of streets or the construction of buildings or otherwise, the Company shall, in every such case, only be liable to pay such sum as would be requisite to reinstate or repair such property if the same could lawfully be reinstated to its former condition.
10. If the property hereby insured shall at the breaking out of any fire or at the commencement of any destruction of or damage to the property by any other peril hereby insured against be collectively of greater value than the sum insured thereon, then the Insured shall be considered as being his own insurer for the difference and shall bear a rateable proportion of the loss accordingly. Every item, if more than one, of the policy shall be separately subject to this condition.
11. If at the time of any loss or damage happening to any property hereby insured there be any other subsisting insurance or insurances, whether effected by the Insured or by any other person or persons covering the same property, this Company shall not be liable to pay or contribute more than its rateable proportion of such loss or damage.
12. The Insured shall at the expense of the Company do and concur in doing, and permit to be done, all such acts and things as may be necessary or reasonably required by the Company for the purpose of enforcing any rights and remedies or of obtaining relief or indemnity from other parties to which the Company shall be or would become entitled or subrogated, upon its paying for or making good any loss or damage under this policy, whether such acts and things shall be or become necessary or required before or after his indemnification by the Company.
13. If any dispute or difference shall arise as to the quantum to be paid under this policy (liability being otherwise admitted) such difference shall independently of all other questions be referred to the decision of a sole arbitrator to be appointed in writing by the parties to or if they cannot agree upon a single arbitrator within 30 days of any party invoking arbitration, the same shall be referred to a panel of three arbitrators, comprising of two arbitrators, one to be appointed by each of the parties to the dispute/difference and the third arbitrator to be appointed by such two arbitrators and arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996.
- It is clearly agreed and understood that no difference or dispute shall be referable to arbitration as hereinbefore provided, if the Company has disputed or not accepted liability under or in respect of this policy.
- It is hereby expressly stipulated and declared that it shall be a condition precedent to any right of action or suit upon this policy that the award by such arbitrator/ arbitrators of the amount of the loss or damage shall be first obtained.
14. Every notice and other communication to the Company required by these conditions must be written or printed.
15. At all times during the period of insurance of this policy the Insurance cover will be maintained to the full extent of the respective sum insured in consideration of which upon the settlement of any loss under this policy, pro-rata premium for the unexpired period from the date of such loss to the expiry of period of insurance for the amount of such loss shall be payable by the insured to the Company. The additional premium referred above shall be deducted from the net claim amount payable under the policy. This continuous cover to the full extent will be available notwithstanding any previous loss for which the company may have paid hereunder and irrespective of the fact whether the additional premium as mentioned above has been actually paid or not following such loss. The intention of this condition is to ensure continuity of the cover to the insured subject only to the right of the company for deduction from the claim amount, when settled, of pro-rata premium to be calculated from the date of loss till expiry of the policy.
- Notwithstanding what is stated above, the Sum Insured shall stand reduced by the amount of loss in case the insured immediately on occurrence of the loss exercises his option not to reinstate the sum insured as above.

EARTHQUAKE(Fire and Shock)

ADD ON COVERS

Policy may be extended to cover the above subject to following endorsement wordings:

If option to delete STFI peril is exercised

POLICY NO.:1005061119P116147285

UIN NO. IRDAN54SRP0002V01200708

"In consideration of the payment by the Insured to the Company of the sum of ₹ 2,000.00 as additional premium, it is hereby agreed and declared that notwithstanding anything stated in the printed exclusions of this policy to the contrary, this Insurance is extended to cover loss or damage (including loss or damage by fire) to any of the property Insured by this policy occasioned by earthquake including Landslide / Rockslide resulting therefrom but excluding flood or overflow of the sea, lakes, reservoirs and rivers caused by Earthquake.

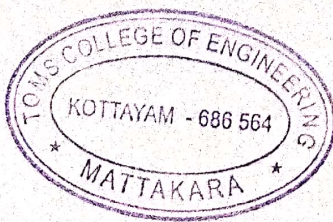
Provided always that all the conditions of this policy shall apply (except in so far as they may be hereby expressly varied) and that any reference therein to loss or damage by fire shall be deemed to apply also to loss or damage directly caused by any of the perils which this insurance extends to include by virtue of this endorsement."

If option to delete STFI peril is not exercised

In consideration of the payment by the Insured to the Company of the sum of ₹ 3,000.00 additional premium, it is hereby agreed and declared that notwithstanding anything stated in the printed exclusions of this policy to the contrary, this Insurance is extended to cover loss or damage (including loss or damage by fire) to any of the property Insured by this policy occasioned by or through or in consequence of earthquake including flood or overflow of the sea, lakes, reservoirs and rivers and/or Landslide / Rockslide resulting therefrom.

Paw. AJ

Director
TOMS COLLEGE OF ENGINEERING
Mattakara P.O.
KOTTAYAM, KERALA - 686 564





UNITED INDIA INSURANCE COMPANY LIMITED

BRANCH OFFICE, CHANGANACHERRY, THOTTUPARAMBIL BUILDINGS, 2ND FLOOR, HEAD POST OFFICE JN., MC ROAD, email:
100506@ulic.co.in

KOTTAYAM - 686101 KERALA
PH: (0481) 2422363, (0481) 2424545 FAX: EMAIL:

MICRO-INSURANCE PRODUCT-GROUP ROAD SAFETY POLICY
POLICY NO.: 1005064719P115513418

PERIOD OF INSURANCE
From 17:30 Hrs of 27/02/2020
To Midnight of 26/02/2021

Insured

MR CHAIRMAN - TOMS COLLEGE OF ENGINEERING
TOMS COLLEGE OF ENGINEERING, MATTAKARA P.O., KOTTAYAM

686564
KOTTAYAM
KERALA

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

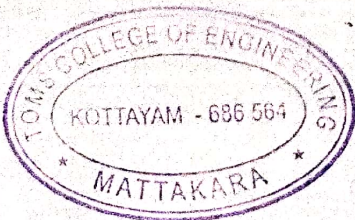
Agent Name : FALI JOSE
Agent Code : AGD0110913
Mobile/Landline Number/Email : 9400195883

The genuineness of the policy can be verified through "Verify Your Policy" link at www.ulic.co.in.

For any Information, Service Requests, Claim intimation and Grievances please write to 100506@ulic.co.in

Download Customer App(www.ulic.co.in). REGD. & HEAD OFFICE, 24, WHITES ROAD, CHENNAI - 600014.
Website: <http://www.ulic.co.in>

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Paw. AJ
Director
TOMS COLLEGE OF ENGINEERING
Mattakara P.O.
KOTTAYAM, KERALA - 686 564





**MICRO-INSURANCE PRODUCT-GROUP ROAD SAFETY POLICY
SCHEDULE**

Policy No.:	1005064719P115513418	Previous Policy No.	
Name of Insured/ID:	MR CHAIRMAN - TOMS COLLEGE OF ENGINEERING /23080029360		
Tel.(O):		Fax:	0
Tel.(R):		Mobile:	
Business/Occupation :	0	Email:	
Period of Insurance:	From 17:30 Hours of 27/02/2020 To MIDNIGHT of 26/02/2021		

Coinsurance	UIIC 100506 : 100%
Premium:	Six thousand eight hundred twenty-five rupees only

No of Members	Total Sum Insured	Type of Cover
195	4,875,000.00	Cover A

Assignee Details	
Name Of Assignee	Relationship

Net Premium:	6,825.00
CGST(9%):	614.00
SGST(9%):	614.00
Kerala Flood Cess(1%):	68.00
Stamp Duty:	1.00
Total :	8,121.00
Receipt No :	10110050619116598880
Receipt Date:	03/03/2020

Agency/Broker Code :	AGD0110913
Dev. Officer Code :	
Direct Business :	

{spcFinancierDtls}

Customer GST/UIN No.:		Office GST No.:	32AAACU5552C1ZS
SAC Code:	9971	Invoice No. & Date:	4719115513418 & 03/03/2020
Amount Subject to Reverse Charges-NIL			

Anti Money Laundering Clause:-In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

LET US JOIN THE FIGHT AGAINST CORRUPTION. PLEASE TAKE THE PLEDGE AT <https://pledge.cvc.nic.in>.

Date of Proposal and Declaration: 27/02/2020
IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at BO CHANGANACHERRY 100506 on this 28th day of February 2020 .

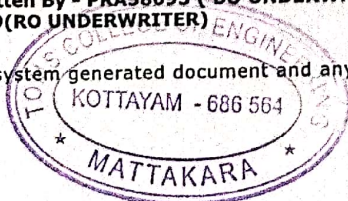
For and On behalf of
United India Insurance Co. Ltd.

[Signature]

Duly Constituted Attorney(s)

Underwritten By - PRA38093 (BO UNDERWRITER) , Approved By -
ALE25619(RO UNDERWRITER)

This is a system generated document and any manual alteration / correction / overwriting in the document will make it invalid.



Director
TOMS COLLEGE OF ENGINEERING
Mattakara P.O.
KOTTAYAM, KERALA - 686 564

Affix Policy
Stamp here.

[Signature]





UNITED INDIA INSURANCE COMPANY LIMITED

BRANCH OFFICE, CHANGANACHERRY, THOTTUPARAMBIL BUILDINGS, 2ND FLOOR, HEAD
POST OFFICE JN., MC ROAD, EMAIL: 100506@uiic.co.in

KOTTAYAM - 686101 KERALA

PH: (0481) 2422363, (0481) 2424545 FAX: EMAIL:

MICRO-INSURANCE PRODUCT-GROUP ROAD SAFETY POLICY POLICY NO.: 1005064718P115964847

PERIOD OF INSURANCE
From 14:43 Hrs of 08/03/2019
To Midnight of 07/03/2020

Insured

MR PRINCIPAL TOMS COLLEGE OF ENG

TOMS COLLEGE OF ENGINEERING FOR STARTUPS, MATTAKARA P.O., KOTTAYAM

686564
KOTTAYAM
KERALA

IMPORTANT NOTICE: KINDLY UPDATE YOUR AADHAAR NO. AND PAN/FORM 60. PLEASE IGNORE IF ALREADY UPDATED.

Agent Name : FALI JOSE
Agent Code : AGD0110913
Mobile/Landline Number/Email : 9400195883

LET US JOIN THE FIGHT AGAINST CORRUPTION.
PLEASE TAKE THE PLEDGE AT <https://pledge.cvc.nic.in>

For any Information, Service Requests, Claim intimation and Grievances please write to 100506@uiic.co.in

REGD. & HEAD OFFICE, 24, WHITES ROAD, CHENNAI - 600014
Website: <http://www.uiic.co.in>

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Paw. Aj
Director
TOMS COLLEGE OF ENGINEERING
Mattakara P.O.
KOTTAYAM, KERALA - 686 564



MICRO-INSURANCE PRODUCT-GROUP ROAD SAFETY POLICY SCHEDULE

Policy No.:	1005064718P115964847	Previous Policy No.	
Name of Insured/ID:	MR PRINCIPAL TOMS COLLEGE OF ENG /23049062913		
Tel.(O):	Fax: 0	Tel.(R):	Mobile:
Business/Occupation :	0	Email:	
Period of Insurance:	From 14:43 Hours of 08/03/2019 To MIDNIGHT of 07/03/2020		

Coinsurance	UIIC 100506 : 100%
Premium:	Five thousand eight hundred eighty rupees only

Policy Variant	No of Members	Type of Cover	Total Sum Insured (₹)
UnNamed	84	Cover A	4,200,000.00

Assignee Details	
Name Of Assignee	Relationship

Net Premium:	₹5,880.00
CGST(9%):	529.00
SGST(9%):	529.00
Stamp Duty:	3.00
Total :	₹6,938.00
Receipt No :	10110050618116701721
Receipt Date:	08/03/2019

Agency/Broker Code :	AGD0110913
Dev. Officer Code :	
Direct Business :	

Special Condition : MEDICAL TREATMENT :RS.50000/-

Customer GST/UIN No.:		Office GST No.:	32AAACU5552C1ZS
SAC Code:	9971	Invoice No. & Date:	4718I115964847 & 08/03/2019
Amount Subject to Reverse Charges-NIL			

Anti Money Laundering Clause:-In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

Date of Proposal and Declaration: 08/03/2019

IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at BO CHANGANACHERRY 100506 on this 08th day of March 2019 .

For and On behalf of
United India Insurance Co. Ltd.

Affix Policy
Stamp here.

Duly Constituted Attorney(s)
Underwritten By - PRA38093 (BO UNDERWRITER)

MICRO-INSURANCE PRODUCT-GROUP ROAD SAFETY POLICY

(GROUP ROAD SAFETY POLICY WITH MEDICAL EXPENSES ARISING OUT OF ROAD ACCIDENT)

WHEREAS the Insured named in the Schedule herein (hereinafter called the "Insured") has made or caused to be made to UNITED INDIA INSURANCE COMPANY LIMITED (hereinafter called the "Company") a written proposal as per the Schedule hereto (warranting the truth of the statements contained therein) which is the basis of this Contract and is deemed to be incorporated herein and has paid to the Company the premium herein stated for the insurance of the risks hereinafter specified occurring during the period as stated in the Schedule or during any further period for which the Company may accept payment for the renewal or extension of this policy.

NOW THIS POLICY WITNESSETH that subject to terms, conditions and exclusions and definitions herein contained or endorsed or otherwise expressed hereon, the Company will indemnify the Insured as hereinafter mentioned :

There are two combinations under the policy applicable for covering various sections:-

1. SCHEME - "A" "SECTIONS I AND II"
2. SCHEME - "B" "SECTIONS I, II, & III"

SECTION I - PERSONAL ACCIDENT

If the Insured / Insured person shall sustain any bodily injury resulting solely and directly from an Accident caused by outward, violent and visible means, then the Company shall pay to the Insured the sum hereinafter set forth, that is to say:

- (a) If such injury shall within twelve Calendar months of its occurrence be the sole and direct cause of the death of an insured person, the Capital Sum Insured mentioned in the Schedule hereto.
- (b) If such injury shall within twelve Calendar months of its occurrence be the sole and direct cause of the total and irrecoverable loss of sight of both eyes or both hands or both feet, or of the actual loss of one eye and such loss of one of two entire hands or two entire feet, or of the one entire hand and one entire foot, or of such loss of sight of one eye and such loss of one entire hand or such loss of one entire foot of an insured person, the Capital Sum Insured mentioned in the Schedule hereto.
- (c) If such injury shall within twelve Calendar months of its occurrence be the sole and direct cause of the total and irrecoverable loss of sight of one eye or of the actual loss of one entire hand or one entire foot of an insured person, fifty percent (50%) of the Capital Sum Insured mentioned in the Schedule hereto.
- (d) If such injury shall as a direct consequence thereof immediately, permanently, totally and absolutely disable an insured person from engaging in, being occupied with, or giving attention to paid employment or occupation of any description whatsoever, the Capital Sum Insured mentioned in the Schedule hereto.

SECTION II - MEDICAL EXPENSES FOR BODILY INJURY CAUSED BY AND ARISING OUT OF ROAD ACCIDENT

Further, subject to the terms, conditions, exclusions and definitions contained herein or endorsed or otherwise expressed hereon, the Company undertakes that if during the period stated in the Schedule or during the continuance of this policy by renewal, any insured person shall sustain any bodily injury RESULTING SOLELY AND DIRECTLY FROM road accident which would normally give rise to a Third Party claim under Motor Policies / Motor Vehicle Act (hereinafter called INJURY) and if such INJURY shall require any such person upon the advice of a duly qualified physician / Medical Specialist / Medical Practitioner (hereinafter called Medical Practitioner) or of a duly qualified surgeon (hereinafter called Surgeon) to incur Hospitalisation expenses for medical / surgical treatment at any Nursing Home / Hospital in India as herein defined (hereinafter called HOSPITAL) as an inpatient, the Company will pay to the Insured person the amount of such expenses as would fall under different heads mentioned below which are reasonably and necessarily incurred in respect thereof by or on behalf of such insured person but not exceeding the sum insured in aggregate in any one policy period as defined hereinafter:

- a) Room, Boarding expenses as provided by the Hospital / Nursing Home.
- b) Nursing Expenses.
- c) Surgeon's, Anaesthetist's, Medical Practitioner's, Consultant's, Specialist's fee.
- d) Anaesthesia, Blood, Oxygen, Operation Theatre Charges, Surgical Appliances, Medicines and Drugs, Diagnostic Material, X-Ray, Artificial Limbs, Cost of Organs, and similar expenses.
- e) Ambulance Charges for carrying the insured person from the spot of accident to the Hospital / Nursing Home

SECTION III - EXTENSION TO COVER MEDICAL EXPENSES FOR ACCIDENT ARISING DURING AND IN THE COURSE OF EMPLOYMENT

It is hereby agreed and declared that notwithstanding anything to the contrary contained in this policy, this insurance is extended to cover the hospital expenses necessarily incurred and expended in connection with any accident up to the Capital Sum Insured per person for injuries sustained whilst in the course of and out of employment (as defined under Workmen's Compensation Act, 1923). It is imperative that this extension is offered only if Section I covering Personal Accident is covered.




 Director
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 Mattakara P.O.
 KOTTAYAM, KERALA - 686 564

TERMS AND CONDITIONS APPLICABLE UNDER SECTIONS I, II, & III

1. **Hospital / Nursing Home** - shall be deemed to mean any institution in India established for the treatment of injuries / disease, which has been registered either as a Hospital or Nursing Home with the local authorities and is under the supervision of a registered and medical practitioner.

The term Hospital shall not include an establishment which is a place of rest, a place for the aged, a place for drug addicts, a place for alcoholics, a hotel or a similar place. In case the Hospital / Nursing Home is not registered with the local authorities, the minimum requirement to be fulfilled are that it should have

- a) A fully equipped Operating Theatre of its own.
 - b) Fully qualified Nursing staff under its employment round the clock.
 - c) Fully qualified Physician / Surgeon should be in charge round the clock.
2. **Surgical Operation** - means manual and / or operative procedure for repair of injuries, diagnosis, relief of suffering and prolongation of life.
 3. **Road Accident** - Accident caused by or arising out of use of motor vehicles as defined in the Motor Vehicle (Amendment) Act, 1994. Accident shall mean collision between two vehicles, against external object, skidding of vehicle resulting in bodily injury, which would normally give rise to Third Party claim under Motor Policies / Motor Vehicle Act.
 4. **Injury Series Clause** - for the purpose of this policy where several bodily injuries are attributable directly or indirectly to the same road accident, all such bodily injuries shall be treated together and all the admissible hospital expenses arising out of such bodily injuries shall be treated as one claim.
 5. **Medical Practitioner** - means a person who holds a Degree / Diploma of a Recognised Institution and is registered by the Medical Council of the respective State / Union Territory in India. The term Medical Practitioner would include Physician, Specialist, and Surgeon.
 6. **Qualified Nurse** - means a person who holds a Certificate of a recognised Nursing Council and who is employed on the recommendation of attending Medical Practitioner.
 7. **Period of Insurance** - the period of insurance means the period commencing from the inception date till five years or ten years as the case may be.
 8. **Policy Period** - Policy Period is defined as the period of 12 months each commencing from the date of inception from which the risk has commenced.
 9. **Indemnity Limits** - the limit of indemnity will be restricted to the Sum Insured selected by the insured person as mentioned in the Schedule and will apply to each policy during the period of insurance separately.
 10. **Pre-Existing Condition** - means such injury which has been in existence at the time of proposing this insurance. Pre-existing condition also means any injury or its symptoms which existed prior to the effective date of this insurance, whether or not the insured person had knowledge that the symptoms were related to the injury. Complications arising from pre-existing injury will be considered part of that pre-existing condition.

EXCLUSIONS:

Provided always that the Company shall not be liable under this policy for

1. Compensation under more than one of the sub-clauses (a), (b), (c), or (d) of Section I in respect of same injury or disablement.
2. Payment of compensation in respect of injury or disablement directly or indirectly arising out of or contributed to by or traceable to any disability existing on the date of issue of this policy.
3. Payment of compensation in respect of death, injury or disablement arising out of or resulting from the Insured's
 - a) Intentional self-injury, suicide or attempted suicide.
 - b) Being under the influence of intoxicating liquor or drug.
 - c) Insanity (Directly or indirectly caused by insanity).
 - d) Committing any breach of law with criminal intent.
4. Payment of compensation in respect of death, injury or disablement of the Insured from or due to or 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), civil war, rebellion, revolution, insurrection, mutiny, military or usurped power, seizure, capture, arrests, restraints and detentions of all kings, princes and people of whatsoever nation.
5. Payment of compensation in respect of death or bodily injury to the Insured directly or indirectly caused by or contributed to by or arising from or traceable to, ionising radiation or contamination by radioactivity from any source whatsoever, or from nuclear weapons material.

hospitalisation expenses incurred because of bodily injury resulting directly or indirectly, proximately or remotely, from any accident other than road accident as defined in this policy.

expenses on vitamins and tonics unless forming part of the Hospitalisation treatment for injury as certified by the attending physician.

8. Naturopathy Treatment.

CONDITIONS

1. Every notice or communication to be given or made under this policy shall be delivered in writing at the address as shown in the policy schedule.
2. Upon the happening of any event which may give rise to a claim under this policy the Insured shall forthwith give notice thereof to the Company. Unless reasonable cause is shown, the Insured should, within one calendar month after the event which may give rise to a claim under the policy, give written notice to the Company with full particulars of the claim.

NOTE: waiver of this condition may be considered in extreme cases of hardship where it is proved to the satisfaction of the Company that under the circumstances in which the insured was placed it was not possible for him or any other person to give such notice or file claim within the prescribed time-limit.

3. In the event of a claim admissible under Hospital Expenses of policy because of a road accident, the Insured shall lodge forthwith a complaint to the nearest Police Station, unless it is not practicable to do so on account of reason(s) beyond the control of the insured, in which case a report / complaint should be sent by the insured to the Police Station having jurisdiction as soon as possible, and in any case within 7 days time, mentioning therein the circumstances of the occurrence including the circumstances if any for not taking immediate steps to report the said accident to the Police. Submission of the Police Report shall be a condition precedent to any liability of the Company to make payment under this policy.
4. If the Proposer is a owner / driver of Motor Vehicle, then it is essential that the Proposer or his / her driver holds a valid driving licence issued by the Competent Authority as per the Motor Vehicle (Amendment) Act, 1994.
5. The premium payable under this Policy shall be paid in advance. No receipt for premium shall be valid except on the official form of the Company signed by a duly authorised Official of the Company. The due payment of premium and the observance and fulfilment of the terms, provisions, conditions and endorsements of this policy by the Insured in so far as they relate to anything to be done or complied with by the Insured shall be a condition precedent to any liability of the Company to make any payment under this Policy. No waiver of any terms, provisions, conditions and endorsements of this Policy shall be valid unless made in writing and signed by an authorised Official of the Company.
6. In the event of a claim being admissible the Insured has to submit claim forms and other documents as listed below:

IN CASE OF CLAIMS ARISING DUE TO ROAD ACCIDENTS:

- a) Attested copy of F.I.R. / Panchnama
- b) Newspaper cuttings (if applicable).
- c) Photographs if any.

SECTION I: (IN CASE OF DEATH / PERMANENT TOTAL DISABLEMENT CLAIMS OF PERSONAL ACCIDENT)

- a) The Post-mortem Report.
- b) Death Certificate.
- c) Insurance Certificate (to be surrendered to the Company)
- d) In the case of permanent total/partial disability claims like loss of eyes or limbs, a certificate from the attending Surgeon / Physician giving complete details of injury in extent of loss of use of organs, etc.

SECTION II: (COVERING HOSPITALISATION EXPENSES ARISING OUT OF ROAD ACCIDENT)

- a) The original hospitalisation / nursing home bills, receipts, cash memos, prescriptions, X-rays, pathological reports.
- b) A certificate from the attending physician stating the nature and extent of injury.
- c) Any additional information and assistance as the Company may require.

SECTION III: (COVERING HOSPITAL EXPENSES DUE TO ACCIDENT ARISING DURING AND IN COURSE OF EMPLOYMENT)

- a) Proof of employment showing employer-employee relationship, and attested copy of attendance register.
- b) Salary Payment / Disbursement Register.



Paw. AJ

Director
TOMS COLLEGE OF ENGINEERING
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The Insured / Insured persons should allow any representative of the Company to examine the injured either at the residence or Hospital / Nursing Home at all reasonable times and should co-operate with the Company if any claim reduction measures are suggested. Provided that in the case of a claim by death or permanent total disablement, all sums will be payable on the delivery of this policy cancelled and discharged.

7. No sum payable under this Policy shall carry interest.
8. The Company shall not be liable to make any payment under this Policy in respect of any claim, if such claim be in any manner fraudulent or supported by any fraudulent statement or device, whether by the insured or by any person acting on behalf of the insured.
9. MIS-DESCRIPTION: This policy shall be void and all premium paid hereon shall be forfeited by the Company in the event of misrepresentation, mis-descriptions, or non-disclosure of any material facts / particulars.
10. SUBROGATION: The Insured and any claimant under this Policy shall at the expense of the Company do and concur in doing and permit to be done all such acts and things as may be necessary or reasonably required by the Company for the purpose of enforcing any rights and remedies, or of obtaining relief or indemnity from other parties to which the Company shall be, or would become entitled or subrogated upon the Company paying for or making good any loss or damage under this Policy whether such acts and things shall be or become necessary or required before or after the indemnification of the Insured by the Company.
11. The Company may at any time cancel the Policy on grounds of misrepresentation, fraud, non-disclosure of material fact or non-cooperation by the insured by sending fifteen days notice in writing by Registered A/D to the insured at his last known address in which case the Company shall return to the insured a proportion of the last premium corresponding to the unexpired period of insurance if no claim has been paid under the policy. The insured may at any time cancel this policy and in such event the Company shall allow refund of premium at Company's short period rates provided no claim has occurred upto the date of cancellation.
12. If any difference shall arise as to the quantum to be paid under this Policy (liability being otherwise admitted) such difference shall independently of all other questions be referred to the decision of a sole arbitrator to be appointed in writing by the parties in difference, or if they cannot agree upon a single arbitrator within 30 days of any party invoking arbitration, the same shall be referred to a panel of three arbitrators, comprising of two arbitrators, one to be appointed by each of the parties to the dispute / difference, and the third arbitrator to be appointed by such two arbitrators, and arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act 1996.

It is clearly agreed and understood that no difference or dispute shall be referable to arbitration as hereinbefore provided, if the Company has disputed or not accepted liability under or in respect of this policy

It is hereby expressly stipulated and declared that it shall be a condition precedent to any right of action or suit upon this policy that the award by such arbitrator / arbitrators of the amount of the loss or damage shall be first obtained.

It is also hereby expressly agreed and declared that If the Company shall disclaim liability to the Insured for any claim herein under, and such claim shall not, within 12 calendar months from the date of such disclaimer have been made the subject matter of a suit in a court of law, then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable hereunder.

13. All medical / surgical treatments under this Policy shall have to be taken in India and admissible claims thereof shall be payable in Indian currency only.

14. Contribution Clause applicable to Section II covering Hospitalisation Expenses:

If at the time of the happening of any loss or damage covered by this Policy there shall be subsisting any other insurance of any nature whatsoever covering the same, whether effected by the Insured or not, then the Company shall not be liable to pay or contribute more than its rateable proportion of any loss or damage.



UNITED INDIA INSURANCE COMPANY LIMITED

BRANCH OFFICE, CHANGANACHERRY, THOTTUPARAMBIL BUILDINGS, 2ND FLOOR, HEAD
POST OFFICE JN., MC ROAD, EMAIL: 100506@uiic.co.in
KOTTAYAM - 686101 KERALA
PH: (0481) 2422363, (0481) 2424545 FAX: EMAIL:

MICRO-INSURANCE PRODUCT-GROUP ROAD SAFETY POLICY POLICY NO.: 1005064718P102213016

PERIOD OF INSURANCE
From 16:18 Hrs of 14/05/2018
To Midnight of 13/05/2019

Insured

MR ER. TOM T JOSEPH

CHAIRMAN, TOMS COLLEGE OF ENGINEERING FOR STARTUPS, MATTAKARA P.O., KOTTAYAM

686564
KOTTAYAM
KERALA

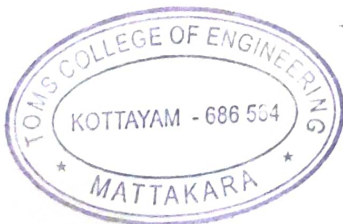
Agent Name : FALI JOSE
Agent Code : AGD0110913
Mobile/Landline Number/Email : 9400195883

LET US JOIN THE FIGHT AGAINST CORRUPTION.
PLEASE TAKE THE PLEDGE AT <https://pledge.cvc.nic.in>

For any Information, Service Requests, Claim intimation and Grievances please write to 100506@uiic.co.in

REGD. & HEAD OFFICE, 24, WHITES ROAD, CHENNAI - 600014
Website: <http://www.uiic.co.in>

Printed By : REJ38491 @ 15/05/2018 5:25:22 PM



Paw. AJ
Director
TOMS COLLEGE OF ENGINEERING
Mattakara P.O.
KOTTAYAM, KERALA - 686 564



MICRO-INSURANCE PRODUCT-GROUP ROAD SAFETY POLICY SCHEDULE

Policy No.:	1005064718P102213016	Previous Policy No.	
Name of Insured/ID:	MR ER. TOM T JOSEPH /23049062913		
Tel.(O):	Fax: 0	Tel.(R):	Mobile:
Business/Occupation :	0	Email:	
Period of Insurance:	From 16:18 Hours of 14/05/2018 To MIDNIGHT of 13/05/2019		

Coinsurance	UIIC 100506 : 100%
Premium:	Three thousand three hundred fifty-eight rupees only

Policy Variant	No of Members	Type of Cover	Total Sum Insured (₹)
UnNamed	95	Cover A	2,375,000.00

Assignee Details	
Name Of Assignee	Relationship

Net Premium:	₹ 3,358.00
CGST(9%):	₹ 302.00
SGST(9%):	₹ 302.00
Stamp Duty:	₹ 1.00
Total :	₹ 3,962.00
Receipt No :	10110050618102282782
Receipt Date:	15/05/2018

Agency/Broker Code :	AGD0110913
Dev. Officer Code :	
Direct Business :	

Special Condition : STUDENTS

Customer GST No.:		Office GST No.:	32AAACU5552C1ZS
SAC Code:	9971	Invoice No. & Date:	47181102213016 & 15/05/2018
Amount Subject to Reverse Charges-NIL			

Anti Money Laundering Clause:-In the event of a claim under the policy exceeding ₹ 1 lakh or a claim for refund of premium exceeding ₹ 1 lakh, the insured will comply with the provisions of AML policy of the company. The AML policy is available in all our operating offices as well as Company's web site.

Date of Proposal and Declaration: 14/05/2018

IN WITNESS WHEREOF, the undersigned being duly authorised has hereunto set his/her hand at BO CHANGANACHERRY 100506 on this 14th day of May 2018 .

For and On behalf of
United India Insurance Co. Ltd.

Duly Constituted Attorney(s)
Underwritten By - PRA38093 (BO UNDERWRITER)

Affix Policy
Stamp here.

MICRO-INSURANCE PRODUCT-GROUP ROAD SAFETY POLICY**(GROUP ROAD SAFETY POLICY WITH MEDICAL EXPENSES ARISING OUT OF ROAD ACCIDENT)**

WHEREAS the Insured named in the Schedule herein (hereinafter called the "Insured") has made or caused to be made to UNITED INDIA INSURANCE COMPANY LIMITED (hereinafter called the "Company") a written proposal as per the Schedule hereto (warranting the truth of the statements contained therein) which is the basis of this Contract and is deemed to be incorporated herein and has paid to the Company the premium herein stated for the insurance of the risks hereinafter specified occurring during the period as stated in the Schedule or during any further period for which the Company may accept payment for the renewal or extension of this policy.

NOW THIS POLICY WINTESSETH that subject to terms, conditions and exclusions and definitions herein contained or endorsed or otherwise expressed hereon, the Company will indemnify the Insured as hereinafter mentioned :

There are two combinations under the policy applicable for covering various sections:-

1. SCHEME - "A" "SECTIONS I AND II"
2. SCHEME - "B" "SECTIONS I, II, & III"

SECTION I - PERSONAL ACCIDENT

If the Insured / Insured person shall sustain any bodily injury resulting solely and directly from an Accident caused by outward, violent and visible means, then the Company shall pay to the Insured the sum hereinafter set forth, that is to say:

- (a) If such injury shall within twelve Calendar months of its occurrence be the sole and direct cause of the death of an insured person, the Capital Sum Insured mentioned in the Schedule hereto.
- (b) If such injury shall within twelve Calendar months of its occurrence be the sole and direct cause of the total and irrecoverable loss of sight of both eyes or both hands or both feet, or of the actual loss of one eye and such loss of one of two entire hands or two entire feet, or of the one entire hand and one entire foot, or of such loss of sight of one eye and such loss of one entire hand or such loss of one entire foot of an insured person, the Capital Sum Insured mentioned in the Schedule hereto.
- (c) If such injury shall within twelve Calendar months of its occurrence be the sole and direct cause of the total and irrecoverable loss of sight of one eye or of the actual loss of one entire hand or one entire foot of an insured person, fifty percent (50%) of the Capital Sum Insured mentioned in the Schedule hereto.
- (d) If such injury shall as a direct consequence thereof immediately, permanently, totally and absolutely disable an insured person from engaging in, being occupied with, or giving attention to paid employment or occupation of any description whatsoever, the Capital Sum Insured mentioned in the Schedule hereto.

SECTION II - MEDICAL EXPENSES FOR BODILY INJURY CAUSED BY AND ARISING OUT OF ROAD ACCIDENT

Further, subject to the terms, conditions, exclusions and definitions contained herein or endorsed or otherwise expressed hereon, the Company undertakes that if during the period stated in the Schedule or during the continuance of this policy by renewal, any insured person shall sustain any bodily injury RESULTING SOLELY AND DIRECTLY FROM road accident which would normally give rise to a Third Party claim under Motor Policies / Motor Vehicle Act (hereinafter called INJURY) and if such INJURY shall require any such person upon the advice of a duly qualified physician / Medical Specialist / Medical Practitioner (hereinafter called Medical Practitioner) or of a duly qualified surgeon (hereinafter called Surgeon) to incur Hospitalisation expenses for medical / surgical treatment at any Nursing Home / Hospital in India as herein defined (hereinafter called HOSPITAL) as an inpatient, the Company will pay to the Insured person the amount of such expenses as would fall under different heads mentioned below which are reasonably and necessarily incurred in respect thereof by or on behalf of such Insured person but not exceeding the sum insured in aggregate in any one policy period as defined hereinafter:

- a) Room, Boarding expenses as provided by the Hospital / Nursing Home.
- b) Nursing Expenses.
- c) Surgeon's, Anaesthetist's, Medical Practitioner's, Consultant's, Specialist's fee.
- d) Anaesthesia, Blood, Oxygen, Operation Theatre Charges, Surgical Appliances, Medicines and Drugs, Diagnostic Material, X-Ray, Artificial Limbs, Cost of Organs, and similar expenses.
- e) Ambulance Charges for carrying the insured person from the spot of accident to the Hospital / Nursing Home

SECTION III - EXTENSION TO COVER MEDICAL EXPENSES FOR ACCIDENT ARISING DURING AND IN THE COURSE OF EMPLOYMENT

It is hereby agreed and declared that notwithstanding anything to the contrary contained in this policy, this insurance is extended to cover the hospital expenses necessarily incurred and expended in connection with any accident up to the Capital Sum Insured per person for injuries sustained whilst in the course of and out of employment (as defined under Workmen's Compensation Act, 1923). It is imperative that this extension is offered only if Section I covering Personal Accident is covered.



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TERMS AND CONDITIONS APPLICABLE UNDER SECTIONS I, II, & III

1. **Hospital / Nursing Home** - shall be deemed to mean any institution in India established for the treatment of injuries / disease, which has been registered either as a Hospital or Nursing Home with the local authorities and is under the supervision of a registered and medical practitioner.
The term Hospital shall not include an establishment which is a place of rest, a place for the aged, a place for drug addicts, a place for alcoholics, a hotel or a similar place. In case the Hospital / Nursing Home is not registered with the local authorities, the minimum requirement to be fulfilled are that it should have
 - a) A fully equipped Operating Theatre of its own.
 - b) Fully qualified Nursing staff under its employment round the clock.
 - c) Fully qualified Physician / Surgeon should be in charge round the clock.
2. **Surgical Operation** - means manual and / or operative procedure for repair of injuries, diagnosis, relief of suffering and prolongation of life.
3. **Road Accident** - Accident caused by or arising out of use of motor vehicles as defined in the Motor Vehicle (Amendment) Act, 1994. Accident shall mean collision between two vehicles, against external object, skidding of vehicle resulting in bodily injury, which would normally give rise to Third Party claim under Motor Policies / Motor Vehicle Act.
4. **Injury Series Clause** - for the purpose of this policy where several bodily injuries are attributable directly or indirectly to the same road accident, all such bodily injuries shall be treated together and all the admissible hospital expenses arising out of such bodily injuries shall be treated as one claim.
5. **Medical Practitioner** - means a person who holds a Degree / Diploma of a Recognised Institution and is registered by the Medical Council of the respective State / Union Territory in India. The term Medical Practitioner would include Physician, Specialist, and Surgeon.
6. **Qualified Nurse** - means a person who holds a Certificate of a recognised Nursing Council and who is employed on the recommendation of attending Medical Practitioner.
7. **Period of Insurance** - the period of insurance means the period commencing from the inception date till five years or ten years as the case may be.
8. **Policy Period** - Policy Period is defined as the period of 12 months each commencing from the date of inception from which the risk has commenced.
9. **Indemnity Limits** - the limit of indemnity will be restricted to the Sum Insured selected by the insured person as mentioned in the Schedule and will apply to each policy during the period of insurance separately.
10. **Pre-Existing Condition** - means such injury which has been in existence at the time of proposing this insurance. Pre-existing condition also means any injury or its symptoms which existed prior to the effective date of this insurance, whether or not the insured person had knowledge that the symptoms were related to the injury. Complications arising from pre-existing injury will be considered part of that pre-existing condition.

EXCLUSIONS:

Provided always that the Company shall not be liable under this policy for

1. Compensation under more than one of the sub-clauses (a), (b), (c), or (d) of Section I in respect of same injury or disablement.
2. Payment of compensation in respect of injury or disablement directly or indirectly arising out of or contributed to by or traceable to any disability existing on the date of issue of this policy.
3. Payment of compensation in respect of death, injury or disablement arising out of or resulting from the Insured's
 - a) Intentional self-injury, suicide or attempted suicide.
 - b) Being under the influence of intoxicating liquor or drug.
 - c) Insanity (Directly or indirectly caused by insanity).
 - d) Committing any breach of law with criminal intent.
4. Payment of compensation in respect of death, injury or disablement of the Insured from or due to or 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), civil war, rebellion, revolution, insurrection, mutiny, military or usurped power, seizure, capture, arrests, restraints and detentions of all kings, princes and people of whatsoever nation.
5. Payment of compensation in respect of death or bodily injury to the Insured directly or indirectly caused by or contributed to by or arising from or traceable to, ionising radiation or contamination by radioactivity from any source whatsoever, or from nuclear weapons material.

hospitalisation expenses incurred because of bodily injury resulting directly or indirectly, proximately or remotely, from any accident other than road accident as defined in this policy.

Expenses on vitamins and tonics unless forming part of the Hospitalisation treatment for injury as certified by the attending Physician.

8. Naturopathy Treatment.

CONDITIONS

1. Every notice or communication to be given or made under this policy shall be delivered in writing at the address as shown in the policy schedule.
2. Upon the happening of any event which may give rise to a claim under this policy the Insured shall forthwith give notice thereof to the Company. Unless reasonable cause is shown, the Insured should, within one calendar month after the event which may give rise to a claim under the policy, give written notice to the Company with full particulars of the claim.

NOTE: waiver of this condition may be considered in extreme cases of hardship where it is proved to the satisfaction of the Company that under the circumstances in which the insured was placed it was not possible for him or any other person to give such notice or file claim within the prescribed time-limit.

3. In the event of a claim admissible under Hospital Expenses of policy because of a road accident, the Insured shall lodge forthwith a complaint to the nearest Police Station, unless it is not practicable to do so on account of reason(s) beyond the control of the insured, in which case a report / complaint should be sent by the insured to the Police Station having jurisdiction as soon as possible, and in any case within 7 days time, mentioning therein the circumstances of the occurrence including the circumstances if any for not taking immediate steps to report the said accident to the Police. Submission of the Police Report shall be a condition precedent to any liability of the Company to make payment under this policy.
4. If the Proposer is a owner / driver of Motor Vehicle, then it is essential that the Proposer or his / her driver holds a valid driving licence issued by the Competent Authority as per the Motor Vehicle (Amendment) Act, 1994.
5. The premium payable under this Policy shall be paid in advance. No receipt for premium shall be valid except on the official form of the Company signed by a duly authorised Official of the Company. The due payment of premium and the observance and fulfilment of the terms, provisions, conditions and endorsements of this policy by the Insured in so far as they relate to anything to be done or complied with by the Insured shall be a condition precedent to any liability of the Company to make any payment under this Policy. No waiver of any terms, provisions, conditions and endorsements of this Policy shall be valid unless made in writing and signed by an authorised Official of the Company.
6. In the event of a claim being admissible the Insured has to submit claim forms and other documents as listed below:

IN CASE OF CLAIMS ARISING DUE TO ROAD ACCIDENTS:

- a) Attested copy of F.I.R. / Panchnama
- b) Newspaper cuttings (if applicable).
- c) Photographs if any.

SECTION I: (IN CASE OF DEATH / PERMANENT TOTAL DISABLEMENT CLAIMS OF PERSONAL ACCIDENT)

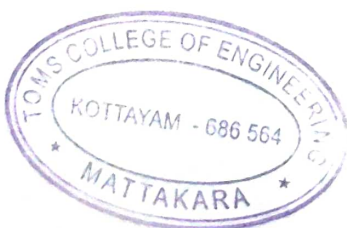
- a) The Post-mortem Report.
- b) Death Certificate.
- c) Insurance Certificate (to be surrendered to the Company)
- d) In the case of permanent total/partial disability claims like loss of eyes or limbs, a certificate from the attending Surgeon / Physician giving complete details of injury in extent of loss of use of organs, etc.

SECTION II: (COVERING HOSPITALISATION EXPENSES ARISING OUT OF ROAD ACCIDENT)

- a) The original hospitalisation / nursing home bills, receipts, cash memos, prescriptions, X-rays, pathological reports.
- b) A certificate from the attending physician stating the nature and extent of injury.
- c) Any additional information and assistance as the Company may require.

SECTION III: (COVERING HOSPITAL EXPENSES DUE TO ACCIDENT ARISING DURING AND IN COURSE OF EMPLOYMENT)

- a) Proof of employment showing employer-employee relationship, and attested copy of attendance register.
- b) Salary Payment / Disbursement Register.



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Policy No : 1005064718P102213016

The Insured / Insured persons should allow any representative of the Company to examine the injured either at the residence or Hospital / Nursing Home at all reasonable times and should co-operate with the Company if any claim reduction measures are suggested. Provided that in the case of a claim by death or permanent total disablement, all sums will be payable on the delivery of this policy cancelled and discharged.

7. No sum payable under this Policy shall carry interest.
8. The Company shall not be liable to make any payment under this Policy in respect of any claim, if such claim be in any manner fraudulent or supported by any fraudulent statement or device, whether by the insured or by any person acting on behalf of the insured.
9. MIS-DESCRIPTION: This policy shall be void and all premium paid hereon shall be forfeited by the Company in the event of misrepresentation, mis-descriptions, or non-disclosure of any material facts / particulars.
10. SUBROGATION: The Insured and any claimant under this Policy shall at the expense of the Company do and concur in doing and permit to be done all such acts and things as may be necessary or reasonably required by the Company for the purpose of enforcing any rights and remedies, or of obtaining relief or indemnity from other parties to which the Company shall be, or would become entitled or subrogated upon the Company paying for or making good any loss or damage under this Policy whether such acts and things shall be or become necessary or required before or after the indemnification of the Insured by the Company.
11. The Company may at any time cancel the Policy on grounds of misrepresentation, fraud, non-disclosure of material fact or non-cooperation by the insured by sending fifteen days notice in writing by Registered A/D to the insured at his last known address in which case the Company shall return to the insured a proportion of the last premium corresponding to the unexpired period of insurance if no claim has been paid under the policy. The insured may at any time cancel this policy and in such event the Company shall allow refund of premium at Company's short period rates provided no claim has occurred upto the date of cancellation.
12. If any difference shall arise as to the quantum to be paid under this Policy (liability being otherwise admitted) such difference shall independently of all other questions be referred to the decision of a sole arbitrator to be appointed in writing by the parties in difference, or if they cannot agree upon a single arbitrator within 30 days of any party invoking arbitration, the same shall be referred to a panel of three arbitrators, comprising of two arbitrators, one to be appointed by each of the parties to the dispute / difference, and the third arbitrator to be appointed by such two arbitrators, and arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act 1996.

It is clearly agreed and understood that no difference or dispute shall be referable to arbitration as hereinbefore provided, if the Company has disputed or not accepted liability under or in respect of this policy

It is hereby expressly stipulated and declared that it shall be a condition precedent to any right of action or suit upon this policy that the award by such arbitrator / arbitrators of the amount of the loss or damage shall be first obtained.

It is also hereby expressly agreed and declared that If the Company shall disclaim liability to the Insured for any claim herein under, and such claim shall not, within 12 calendar months from the date of such disclaimer have been made the subject matter of a suit in a court of law, then the claim shall for all purposes be deemed to have been abandoned and shall not thereafter be recoverable hereunder.

13. All medical / surgical treatments under this Policy shall have to be taken in India and admissible claims thereof shall be payable in Indian currency only.

14. Contribution Clause applicable to Section II covering Hospitalisation Expenses:

If at the time of the happening of any loss or damage covered by this Policy there shall be subsisting any other insurance of any nature whatsoever covering the same, whether effected by the Insured or not, then the Company shall not be liable to pay or contribute more than its rateable proportion of any loss or damage.
