

| CUSTOMER INFORMATION SHEET                                                                                                       |                                                    |                                                                            |
|----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|----------------------------------------------------------------------------|
| This document provides key information about your policy. Please refer to the policy document for detailed terms and conditions. |                                                    |                                                                            |
| <b>Insured's Name.</b> _____<br><b>Policy No.</b> _____<br><b>Policy Period</b> _____                                            |                                                    |                                                                            |
| Sl No                                                                                                                            | Title                                              | Policy Clause Number                                                       |
| 1                                                                                                                                | Product Name                                       | Compulsory Personal Accident (Owner-Driver) under Motor Insurance Policies |
| 2                                                                                                                                | Unique Identification Number(UIN)                  | IRDAN137RP0026V01201819                                                    |
| 3                                                                                                                                | Structure                                          | Benefit                                                                    |
| 4                                                                                                                                | Interest Insured                                   | Name of the owner driver i.e. Insured                                      |
| 5                                                                                                                                | Sum Insured                                        | Rs. 15,00,000/- in words: Rupees Fifteen lacs only/-                       |
| 6                                                                                                                                | Policy Coverage                                    | 2. Coverages                                                               |
| 7                                                                                                                                | Add On Covers                                      | NIL                                                                        |
| 8                                                                                                                                | Loss Participation                                 | NIL                                                                        |
| 9                                                                                                                                | Exclusions                                         | 3. General Exceptions                                                      |
| 10                                                                                                                               | Special conditions and warranties (if any)         | Conditions                                                                 |
| 11                                                                                                                               | Admissibility of claim                             |                                                                            |
| 12                                                                                                                               | Policy servicing - Claim intimation and processing |                                                                            |
| 13                                                                                                                               | Grievance redressal and policy holder's protection |                                                                            |
| 14                                                                                                                               | Obligations of the policy holder                   |                                                                            |

Declaration by the Policy Holder;

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

Place:

Date:

(Signature of the Policyholder)

Note:

- Insurer shall provide web-link where the product related documents including the Customer Information sheet are available on the website of the insurer.
- In case of any conflict, the terms and conditions mentioned in the policy document shall prevail.
- Insurer to take confirmation of the policyholder regarding receiving of the Customer Information Sheet.