



IFFCO-TOKIO GENERAL INSURANCE CO. LTD.
Regd: Office: "IFFCO Sadan" C-1 Distt. Centre, Saket, New Delhi-110017

KISAN SURAKSHA BIMA YOJNA

UIN: IRDAI/HLT/ITGI/P-P/V.I/07/2016-17

PROSPECTUS

Kisan Suraksha Bima Yojna policy provides following benefits to the buyers of Insured company's products:

TABLE OF BENEFITS		PERCENTAGE OF CAPITAL SUM INSURED
1.	Death resulting solely due to an accident	100
2.	a) Loss of sight (both eyes) b) Loss of two limbs c) Loss of one limb and one eye	Resulting solely due to an accident 50 50 50
3.	a) Loss of sight of one eye b) Loss of one limb	Resulting solely due to an Accident 25 25
4.	Permanent Total and absolute disablement resulting solely due to an accident	50

This policy will be applicable only where the **Insured Person** i.e. the end user of the product is a **farmer**.

- For a minimum purchase of Insured's products worth a specified amount in a given period, buyer will get an Insurance cover upto a limit.
- **Premium will be INR 0.25 per Rs. 1000 /- of Sum Insured**
- Sum Insured will be in multiple of Rs. 1000 /- maximum upto Rs. 100,000 per Insured person.
- **Cover Duration:** 12 months from the 31st day of issue of cash receipt or debit memo.

Below is an example (Values mentioned are only for explanation)

- A customer buys a product worth of Rs. 300 /-, he or she will get an Insurance cover of Rs. 2,000 /-
- Maximum Sum Insured per buyer will be Rs. 1,00,000 /-
- Premium will be INR 0.50 per Rs. 2000 /- of Sum Insured
- Cover Duration: 12 months from the 31st day of issue of cash receipt or debit memo.

Intermediary Commission: Commission will be as decided by the Authority based on the intermediary category from time to time. The present rate of commission is as below:

Agents including Individual Agents, Micro Agents, Corporate Agents: 15%

Brokers: 17.5%

Evidence of cover:

The serially numbered printed Cash Receipt or the Debit Note (when Insured's product is purchased against Credit) shall be the sole evidence of insurance. No other document or certificate shall be issued by ITGI. The serially numbered printed Cash Receipt or Debit Memo is not negotiable and the person whose name appears in this document shall be deemed to be the Insured person. However the serially numbered printed cash receipt or debit note to be valid must contain the following information:

- Name of the buyer; **i.e. insured person.**
- Father/husband name of Buyer's; **i.e. insured person.**
- Full Postal Address of buyer; **i.e. insured person.**
- Date of issue of the bill;
- Quantity with brand of Insured's product;
- Name of nominee; and

vii. Signature/Thumb impression of buyer; **i.e. insured person.**

Claim Procedure and Requirements

- i) Intimation of claim:** An event, which might become a claim under the policy, must be reported to ITGI as soon as possible. In case of death, written notice also of death must, unless reasonable cause is shown, be given before internment/ 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 sight or amputation. Based on the circumstances of the case the insurer may condone the case with delay in intimation beyond one calendar month. A written statement of the claim will be required and a claim form will be provided.
- ii)** All certificates, information and evidence from a Medical Attendant or otherwise required by ITGI shall be furnished by Insured, Insured personal representative in the manner and form as ITGI may prescribe. In such claims Insured legal representative, Nominee, beneficiary will allow ITGI representative to carry out examination and ascertain details if and when ITGI may reasonably require and in the event of death get the post-mortem examination done in respect of body of Insured Person.

For claim purpose, the following documents must be submitted within 2 months of the happening of such event:

i. In case of death

- a. Claim Form
- b. Purchase Bill in original
- c. Copy of FIR
- d. Post Mortem Report

ii. In case of injury claim:

- a. Claim Form
- b. Purchase Bill in original
- c. Copy of FIR if any
- d. Photograph and Medical Certificate from Govt. hospital doctors confirming extent of disability.

General Exclusions:

ITGI will not pay for any compensation in respect of death, injury or disablement of the Insured Person.

1. As consequence of war, invasion, act of foreign enemy, hostilities (whether war be declared or not) civil war, rebellion, revolution, insurrection, mutiny military or usurped power, confiscation, seizure, capture, restraint, nationalisation, civil commotion or loot or pillage in connection herewith.
2. Directly or indirectly caused by contributed to by or arising from:
 - a) Ionising radiation or contamination by radioactivity from any nuclear fuel or from any nuclear waste or from the combustion of nuclear fuel. For the purpose of this exclusion, combustion shall include any self-sustaining process of nuclear fission.

- b) The radioactive, toxic, explosive or the hazardous properties of any nuclear assembly or nuclear component.
3. Compensation under more than one of the benefits mentioned in respect of same period of disablement, subject to higher compensation being payable.
4. Any other payment after a claim under benefit 1 in “Table of benefits” has been admitted and becomes payable.
5. Any payment in case of more than one claim under Benefits 2, 3 and 4 in “Table of benefits” during any one period of insurance by which ITGI’s liability in that period would exceed sum payable under benefit (1) of Table of Benefits stated.
6. Any existing disablement prior to the date of purchase of Insured’s product.
7. Payment of compensation in respect of injury as a direct consequence of:
 - a. Committing or attempting suicide, intentional self-injury.
 - b. Whilst under influence of intoxicating liquor.
 - c. Drug addiction or alcoholism.
 - d. Whilst engaging in Aviation or Ballooning or whilst dismounting from or travelling in any balloon or aircraft other than as passenger (fare paying or otherwise) in any duly licensed standard type of aircraft.
 - e. Pregnancy or childbirth.
 - f. Venereal disease or insanity.
 - g. Contracting any illness directly or indirectly arising from or attributable to HIV and/or any HIV related illness including AIDS and/or any mutant derivative or variation of HIV or AIDS.
 - h. Committing any breach of law with criminal intent.
 - i. Death due to ailment or other natural causes.

Cancellation:

The policyholder may cancel his/her policy at any time during the term, by giving 7 days’ notice in writing. The Insurer shall

- a. refund proportionate premium for unexpired policy period, if the term of policy up to one year and there is no claim (s) made during the policy period.
- b. refund premium for the unexpired policy period, in respect of policies with term more than 1 year and risk coverage for such policy years has not commenced.

We may cancel the Policy at any time on grounds of mis-representation, non-disclosure of material facts, fraud by the Insured Person, by giving 15 days’ written notice. There would be no refund of premium on cancellation on grounds of mis-representation, non-disclosure of material facts or fraud.

Renewal of Policy

The policy shall be renewable, except in case of established fraud or non-disclosure or misrepresentation by You/ the Insured person, provided the product is not withdrawn and also subject to the following conditions:

- i. The Company shall send renewal notices to the Policyholder, at least 30 days in advance from Policy due date.

- ii. Renewal shall not be denied on the ground that the insured person had made a claim or claims in the preceding policy years
- iii. Request for renewal along with requisite premium shall be received by the Company before the end of the policy period
- iv. At the end of the policy period, the policy shall terminate and can be renewed within the Grace Period of 30 days to maintain continuity of benefits without break in policy. Coverage is not available during the grace period.
- v. Sum Insured can be enhanced at the time of renewal for which fresh proposal form and medical reports will be required to be submitted. However the waiting periods will apply afresh for the enhanced sum insured. In case increase in Sum Insured is requested by You, We may underwrite to the extent of increased Sum Insured.

Free look period

The Free Look Period shall be applicable at the inception of the Policy and not on renewals.

You/the insured shall be allowed a period of thirty days from date of receipt of the Policy document to review the terms and conditions of the Policy, and to return the same if not acceptable.

If the insured has not made any claim during the Free Look Period, the insured shall be entitled to

A refund of the premium paid less any expenses incurred by Us on medical examination of the insured person and the stamp duty charges; or

Where the risk has already commenced and the option of return of the Policy is exercised by the insured person, a deduction towards the proportionate risk premium for period of cover or

Where only a part of the insurance coverage has commenced, such proportionate premium commensurate with the insurance coverage during such period.

Nomination

The policyholder is required at the inception and renewal of the policy to make a nomination for the purpose of payment of claims under the policy in the event of death of the policyholder. Any change of nomination shall be communicated to Us in writing and such change shall be effective only when an endorsement on the policy is made. In the event of death of the policyholder, we will pay the nominee {as named in the Policy Schedule/Policy Certificate/Endorsement (if any)} and in case there is no subsisting nominee, to the legal heirs or legal representatives of the policyholder whose discharge shall be treated as full and final discharge of its liability under the policy.

Provision for Senior Citizens:

Separate channel to address the related claims and grievances of senior citizen are mentioned below:

Claims/ Grievance: seniorcitizengrievance@iffcotokio.co.in

Toll free: 1800-103-5498

Address: Chief Grievance Officer
IFFCO-Tokio General Insurance Co Ltd
IFFCO Tower, Plot no. 3
Sector -29, Gurgaon – 122001

Get in touch with us

In case of any query, the You may contact Us through:

Company Website: www.iffcotokio.co.in

Toll free: 1800-103-5499

E-mail: support@iffcotokio.co.in

Address : IFFCO-Tokio General Insurance Co Ltd
IFFCO Tower, Plot no. 3

Sector -29, Gurgaon – 122001

Grievance or Complaint:

In case of any grievance, You may contact Us through:

Website: <https://www.iffcotokio.co.in/customer-services/grievance-redressal>

Toll free: 1800-103-5499

E-mail: support@iffcotokio.co.in

Address: IFFCO-Tokio General Insurance Co Ltd
IFFCO Tower, Plot no. 3
Sector -29, Gurgaon – 122001

Insured person may also approach the grievance cell at any of the company's branches with the details of grievance. The list of branches with addresses are available at <https://www.iffcotokio.co.in/contact-us>

If Insured person is not satisfied with the redressal of grievance through one of the above methods, insured person may contact the grievance officer at chiefgrievanceofficer@iffcotokio.co.in

For updated details of grievance officer, kindly refer the link

<https://www.iffcotokio.co.in/contact-us/customer-services/grievance-redressal>

Grievance may also be lodged at Grievance Portal of IRDAI- 'Bima Bharosa' and tracked through your mobile number.

- <https://bimabharosa.irdai.gov.in/Home/Home>

Automatic Termination of Insurance

The coverage for the Insured Person(s) shall automatically terminate in the case of his/ her (Insured Person) demise or exhaustion of Sum Insured. However, the cover shall continue for the remaining Insured Persons till the end of Policy Period, unless otherwise advised by the Group policy holder. Provided no claim has been made, and termination takes place on account of death of the insured person, due to reasons apart from what stands covered under the policy, pro-rata refund of premium of the deceased insured person for the balance period of the policy will be effective.