

SCOPE OF COVER

A. The policy provides for payment of specified amount (benefit) on happening of specified contingency due to the accident. An Accident may include events like:

- Rail, Road, Air Accident
- Injury due to any collision / fall
- Injury due to bursting of gas cylinder
- Snake bite, Frost bite
- Burn injury, Drowning, Poisoning, etc.

This is only an illustrative list, not an exhaustive list.

B. If at any during the currency of this policy, the insured shall sustain 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 representatives, as the case may be, the sum or sums as under:

(1) If such injury shall within twelve calendar months of its occurrence be the sole and direct cause of the death of the insured: **The Capital Sum Insured.**

(2) If such injury shall within Twelve calendar months of its occurrence be the sole and direct cause of the total and irrecoverable loss of:

Ø Sight of both eye, or of the actual loss by physical separation of two entire hands or two entire feet, or of one entire hand and one entire foot, or loss of sight of one of eye and loss of one entire foot/one hand: **The Capital Sum Insured.**

Ø Use of two hands or two feet, or of one hand one foot, or loss of sight of one eye and loss of use of one hand or one foot: **The Capital Sum Insured.**

(3) If such injury shall within twelve calendar months of its occurrence be the sole and direct cause of the total and irrecoverable loss of:

Ø The sight of one eye, or of the actual loss by physical separation of one entire hand or of one entire foot: **Fifty percent (50%) of the Capital Sum Insured.**

Ø Total and irrecoverable loss of use of a hand or a foot without physical separation: **Fifty percent (50%) of the Capital Sum Insured.**

NOTE: For the purpose of Clause (2) and Clause (3) above/ physical separation means “Amputation at or above the wrist and that of the foot at or above the ankle respectively”.

(4) If such injury shall, as a direct consequence thereof immediately permanently totally and absolutely, disable the insured 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.

(5) 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 of the actual loss by physical separation of the following, then the percentage of Capital Sum Insured as indicated below shall be payable:

Kindly find the Insurance Company and contact personal details:

M/s. Iffco Tokia General Insurance Company Limited

Name: Mr. Gaurav Sharma

Contact No.: 081300019970

Email ID: gaurav.sharma@iffcotokio.co.in

Address: Commerce House, 1st Floor, Plot No. 11, Race Course Rd, Bungalow Colony, New Palasia, Palasia, Indore, Madhya Pradesh 452001