# CHOLAMANDALAM MS GENERAL INSURANCE COMPANY LIMITED

Registered Office: 2nd Floor "DARE House", 2, N.S.C. Bose Road, Chennai - 600 001 T: +91 (0) 44 4044 5400, F: +91 (0) 44 4044 5550 IRDA Regn. No.123 | PAN AABCC6633K | CIN: U66030TN2001PLC047977



# POLICY SCHEDULE CUM TAX INVOICE

ITEM NO.	Employees' Compensation Insurance UIN: IRDAN123RP0032V02200203							
1	INSURED DETAILS							
	Name	Tirupati Fibers						
	Additional Insured Name	NA						
	Mobile Number	8055565559         naser@jainuineinsurance.co.in         NA         GINNING AND PRESSING         Gut no 130 1 B sillod road , BHOKARDAN S.O , AURANGABAD , MAHARASHTRA         431114         Gut no 130 1 B sillod road , BHOKARDAN S.O , AURANGABAD , MAHARASHTRA         431114						
	Email ID							
	Industry							
	Business/Profession							
	Registered Address							
	Communication Address							
	PAN	AADFT1155A	27AADFT1155A1ZO					
2	INSURANCE DETAILS							
		2712/004 47765 /000 /00	Policy Period					
2.1	Policy Number	2712/00147765/000/00		From	18:26	27/07/2024		
	Previous Policy Number	2712/00133647/000/08		То	23:59	26/10/2024		
2.2	Estimated Total Salaries,Wages and Other Money Earnings (INR)	3,60,000						
2.3	Scope of Cover	Table A						
2.4.1	Coverage Details/Law Applicable	Employee compensation Act 2010 (as amended from workmen's compensation Act 1923), Fatal Accidents Act, 1855 and Common Law						
2.4.2	Principal for the project	NA						
2.5	Classification Codes	106 , 98						
2.6	Endorsement Numbers	NA						
2.7	Extensions	Medical Expense Limit Opted : INR 2,00,000 Medex Aggregate Limit : Not Selected Medex Aggregate Limit Per Person : Not Selected						
2.8	Specific Exclusions	<ul> <li>((Notwithstanding any provision to the contrary, this policy/insurance excludes any loss, damage, liability, expense, fines, penalties or any other amount directly or indirectly caused by, in connection with, or in any way involving or arising out of ar of the following including any fear or threat thereof, any action taken or failure to take action in controlling, preventing, suppressing or in any way responding to suc whether actual/ alleged/ threat or perceived of:</li> <li>Any infectious disease, virus, bacterium or other microorganism (whether asymptomatic or not); or</li> <li>Coronavirus (COVID-19) including any mutation or variation thereof; or</li> <li>Pandemic or epidemic, as declared as such by the World Health Organization cany governmental authority.</li> <li>If the insurer alleges that, by reason of this exclusion, any amount is not covered by this policy/insurance, the burden of proving the contrary shall rest on the insured"</li> </ul>						
	DETAILS OF PREMIUM AND CO-INSURANCE							
2.9	Payment Receipt	PY000004364602	CGS	T (9%)		INR 158		
	Payment Date	27/07/2024 09:59:08		Г (9%)		INR 158		
	Net Premium	INR 1,750		(18%)		INR 0		
		NOT APPLICABLE		Kerala Cess(1%)				
	Co-Insurance				Premium	INR 0 INR 2,065		

3	EMPLOYEE DETAILS									
	Estimated Number of Employees	Occupation	Wages and	Total Salaries Other Money nings	Con	ontracto tractor Applica	Name (if		Place or Places Employmen	
	7	SKILLED AND UNSKILLED	15000						oati Fibers Gut n od road Bhokaro 14	
		Commercial Traveller	15000						oati Fibers Gut n od road Bhokaro 14	
4	INTERMEDIARY	DETAILS								
	Intermediary Na	me JAINI	JINE INSURAN	ICE BROKERS I	PRIVATE L	IMITED	)			
	Intermediary Co	<b>de</b> 2001	49210153 <b>Co</b>	ntact Numbe	r	985004	19400			
5	COMPANY DETA	LS								
	GSTIN									
	GST Invoice Number	271200147	7650000					er non-life insurance ing reinsurance services)		
	Branch Address	h Address AURANGABAD BRANCH OFFICE - Shop No- 4, Plot No- 33, Rokdiya Hanuman Colony, Opp. LMS Jeweller Jalna road, Aurangabad - 431005								
	Note: The certificate of Insurance/Policy schedule is an important document issued based on your declaration. We request you to verify the details and ensure that everything is in order. In case of any discrepancies, please contact us within 15 days from the date of issuance of policy.									
	In witness whereo	of, the Insure	r has caused th	5						
	Place : Chennai			for (	holamar	ndalam	MS Genera	l Insu	irance Company	<sup>,</sup> Limited,
	Date : 27 July 2024								Authorized S	₩ Gignatory
6	TERMS AND CON	IDITIONS								
6.1	<ol> <li>Employee compensation Act 2010 (as amended from Workmen's compensation Act 1923) and subsequent amendments of the said Act prior to the date of the issue of the policy provided that the insurance granted hereunder is not extended to include: any interest and/or penalty imposed on the insured on account of his/their failure to comply with the requirements laid down under the Employee compensation Act 2010 (as amended from Workmen's compensation Act 1923)</li> <li>The Fatal Accidents Act, 1855 and subsequent amendments of the said Act prior to the date of the issue of the Policy provided that the Insurance granted hereunder is not extended to include:any interest and/or penalty imposed on the Insured on account of his/ their failure to comply with the requirements laid down under The Fatal Accidents Act, 1855</li> <li>Common Law</li> <li>Work involved in live Transmission &amp; Distribution lines are absolutely excluded from scope of cover</li> </ol>									
6.2	<ol> <li>The coverage is for all or none basis. The number of employees / workers on the roll (including Contractor and Sub Contractor wherever applicable) at no point of time should be more than the number of employees / workers insured at that point of time. Else admission of liability under the policy will be prejudiced</li> <li>The liability of the company shall not exceed the amount arrived at as per provisions of W C Act considering the actual wages declared by the insured under policy and which is the basis for premium computation. If the actual compensation awarded by the authority as per W C Act exceeds the liability of the insurer as above, the difference shall have to be borne by the insured this is not applicable for Common law awards</li> <li>All contractors &amp; sub contractors employees are not covered unless they are declared in the proposal form or endorsed from time to time</li> <li>Premium computation is based on the average monthly income declared by the insured and its subject to adjustment depending on actual disbursement of actual wages / salaries</li> <li>Workmens Compensation Amendment Act 1923 renamed as The Employees Compensation (Amendment) act, 2009 wherever Workman or workmen is mentioned in the entire Act, the same need to be read as Employee</li> <li>In consideration of the payment of an additional premium it is hereby understood and agreed that this Policy subject to its terms provisions and conditions is extended to indemnify the Insured in respect of the reasonable medical surgical and hospital expenses (including cost of conveyance to hospital) incurred by the Insured in connection with any case of injury to which the indemnity granted under this policy applies</li> </ol>									
	<b>Risk Location</b>									
		k Address 1		Risk Address 2	Are	ea	City		State	Pin code
	Tirupati Fibers Gu Bhokardan	it no 130 1 B	sillod road		BHOKAR S.O	DAN	AURANGAE	BAD	MAHARASHTRA	431114

7	SPECIFIC CONDITIONS / WARRANTIES				
	<ol> <li>The coverage is for all or none basis. The number of employees / workers on the roll (including Contractor and Sub Contractor wherever applicable) at no point of time should be more than the number of employees / workers insured at that point of time. Else admission of liability under the policy will be prejudiced</li> <li>The liability of the company shall not exceed the amount arrived at as per provisions of W C Act considering the actual wages declared by the insured under policy and which is the basis for premium computation. If the actual compensation awarded by the authority as per W C Act exceeds the liability of the insurer as above, the difference shall have to be borne by the insured. This is not applicable for Common law awards.</li> <li>All contractors &amp; sub contractors employees are not covered unless they are declared in the proposal form or endorsed from time to time</li> <li>Premium computation is based on the average monthly income declared by the insured and its subject to adjustment depending on actual disbursement of actual wages / salaries.</li> <li>Workmens Compensation Amendment Act 1923 renamed as The Employees Compensation (Amendment) act, 2009 wherever Workman or workmen is mentioned in the entire Act, the same need to be read as Employee</li> <li>In consideration of the payment of an additional premium it is hereby understood and agreed that this Policy subject to its terms provisions and conditions is extended to indemnify the Insured in respect of the reasonable medical surgical and hospital expenses (including cost of conveyance to hospital) incurred by the Insured in connection with any case of injury to which the indemnity granted under this policy applies</li> <li>Warranted that in case of a claim, if the declared wages is found to be less than the actual wages then three times the difference of the premium charged and the actual premium payable shall be charged prior to settlement of the claim</li> </ol>				
EXCLUSION					
	Any employment compensation in excess of the actual sum insured for workmen compensation ordinance (not to				
1	apply in respect of common law awards)				
	Losses suffered in the course of manufacturing and /or supplying and/or producing storing, filling, breaking down, transporting -				
	(a) Fireworks, ammunition, fuses, cartridges, powder, nitro-glycerine, celluloid, pyroxylin or any explosives.				
	(b) Gases and/or air under pressure in containers.				
2	(c) Butane, methane, propane, and other liquefied gases				
	(d) Petrochemicals and chemicals of a "toxic"(as defined under India's Public Liability Act1991), noxious, explosives and/or highly flammable nature.				
	(e) Celluloid and pyroxylin.				
	(f) Asbestos and/or asbestos products.				
	(It is understood and agreed, however, that the manufacturing, storage, transport and/or handling of any of the above mentioned substances other than (f) which is merely incidental to the operation and/or trade of the Original Insured not otherwise excluded, is hereby covered).				
3	Losses suffered in the course of the construction, maintenance and demolition of towers, steeples, bridges, flyovers and other walkways and road bridges longer than 300 meters and road bridges with unsupported span longer than 100 meters, nor to losses arising from incidental work undertaken by contractors predominantly engaged in other activities.				
4	Occupational Disease absolutely				
5	Terrorism liability absolute exclusion.				
6	Contractors predominantly engaged in wrecking or demolition of buildings and/or collection or removal scrap metal.				
7	Excavation and tunneling work in connection with mining, quarrying and for tunnelling work exceeding 200 metres. However, this exclusion shall only apply where more than 20 people are working at the same location at any one time.				
8	Underground and/or underwater mines and/or underground services in connection therewith. However, this exclusion shall only apply where more than 20 people are working at the same location at any one time. This exclusion shall only apply to basement work unless the activities are otherwise excluded.				
9	Sub aqueous works.				
10	Quarrying involving the use of explosives.				
11	Drilling for, producing, refining and/or distributing oil or gas (other than general retail distributors whose main occupation is not otherwise excluded).				
12	Losses suffered on or in connection with offshore rigs				
13	Losses suffered in the course of shipbuilding, ship repairing and ship breaking other than pleasure crafts, stevedoring and/or harbour / longshore work.				
14	Aircraft crews in respect of flight risk. However, this exclusion shall not apply to aircraft which are set aside for non fare paying executive use and which are crewed by six persons or less.				
15	Ship crews other than on inland vessels or on vessels operating within territorial waters. However, this exclusion shall not apply to a vessel crewed by six persons or less.				
16	Service in any kind of armed forces (including, but not limited to military, police, security services).				
17	Operations of railways, other than sidings				
18	Employees employed on a permanent basis in USA and/or Canada.				
19	Professional sports teams.				

20	Fire crackers manufacturers.					
21	Excluding Liability arising from compressed air sickness unless specifically opted under the policy.					
22	Excluding injury or death due to war or war like operations, act of terrorism, radioactive contamination, nuclear and allied perils.					
23	Injury or death due to intoxication &/or under influence of alcohol & drug abuse is excluded					
24	Adequate safety measures to be followed while working on site. Willful act or negligence is excluded.					
GRIEVANO	CE REDRESSAL					
1	In the event of the Insured being aggrieved by					
	(a) Any partial or total repudiation of claims by an insurer					
	(b) Any dispute in regard to premium paid or payable in terms of the Policy					
	(c) Any dispute on the legal construction of Policy in so far as such disputes relate to claims					
	(d) Delay in settlement of claims					
	(e) Non-issue of any insurance document to customers after receipt of premium,					
	wherever permissible subject to provisions of Redressal of Public Grievances Rules, 1998 approach the Insurance Ombudsman having jurisdiction for appropriate relief.					
2	If the company shall disclaim liability to the Insured or any claim hereunder and such claim shall not within 12 calendar months from the date of such disclaimer have been made the subject matter of suit in a court of law, then the claim shall for all purpose be deemed to have been abandoned and shall not thereafter be recoverable hereunder.					
3	The due observance and fulfilment of the terms, conditions and endorsements of this Policy 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.					
4	The Company shall not be bound to issue any renewal notice nor shall be bound to accept the renewal premium there under.					
5	No interest shall be payable by the Company in respect of any claim under this Insurance where the interest payment is imposed on the Insured by virtue of any delay whatsoever from Insured's side. For avoidance of any doubt, Company remains liable to pay any interest amount where there is a delay from Company's side					
CLAIM INT	TIMATION / MECHANISM OF GRIEVANCE REDRESSAL					
1	As an esteemed customer of our Company, You can contact us to register complaint/ grievance, if any including servicing of Policy, claims etc. with regard to the insurance of Policy issued to you. The contact details of our office are given below for your reference.					

# **Employees' Compensation Insurance**

UIN: IRDAN123RP0032V02200203

WHEREAS the Insured carrying on the Business described the Schedule and no other for the purpose of this insurance by a proposal and declaration which shall be the basis of this contract and is deemed to be incorporated herein has applied to the Company for the insurance hereinafter contained and has paid or agreed to pay the Premium as consideration for such insurance.

NOW THIS POLICY WITNESSETH that if at any time during the period of Insurance any employee in the Insured's immediate service shall sustain personal injury by accident or disease arising out of and in the course of his employment by the Insured in the Business and if the Insured shall be liable to pay compensation for such injury either under :

the Law(s) set out in the Schedule

or at

Common Law

then subject to the terms exceptions and conditions contained herein or endorsed hereon the Company will indemnify the Insured against all sums for which the Insured shall be so liable and will in addition be responsible for all costs and expenses incurred with its consent in defending any claim for such compensation.

PROVIDED ALWAYS that in the event of any change in the Law(s) or the substitution of other legislation therefor this Policy shall remain in force but the liability of the company shall be limited to such sum as the Company would have been liable to pay if the Law(s) had remained unaltered.

# EXCEPTION

The Company shall not be liable under the Policy in respect of :

a) any injury by accident or disease directly attributable to war invasion act of foreign enemy hostilities (whether war be declared or not) civil war mutiny insurrection rebellion revolution or military or usurped power

b) the Insured's liability to employees of contractors to the Insured.

c) any liability of the insured which attaches to virtue to an agreement but which would not have attached in the absence of such agreement

d) any sum which the Insured would have been entitled to recover from any party but for an agreement between the Insured and such party.

# CONDITIONS

1. This Policy and the Schedule shall be read together as one contract and any word or expression to which a specific meaning has been attached in any part of this Policy or of the Schedule shall bear such specific meaning wherever it may appear.

2. Every notice or communication to be given or made under this Policy shall be delivered in writing to the Company.

3. The Insured shall take reasonable precautions to prevent accidents and disease and shall comply with all statutory obligations.

4. In the event of any occurrence which may give rise to a claim under this Policy the Insured shall as soon as possible give notice thereof to the Company with full particulars. Every letter claim writ summons and process shall be notified or forwarded to the Company immediately on receipt. Notice shall also be given to the company immediately the Insured shall have knowledge of any impending prosecution inquest or fatal enquiry in connection with any such occurrence as aforesaid.

5. No admission offer promise or payment shall be made by or on behalf of the Insured without the consent of the Company which shall be entitled if it so desires to take over and conduct in his name the defense or settlement of any claim or to prosecute in his name for its own benefit any claim for indemnity or damages or otherwise and shall have full discretion in the conduct of any proceedings and in the settlement of any claim and the Insured shall give all such information and assistance as the Company may require.

6. The first premium and all renewal premiums that may be accepted are to be regulated by the amount of wages and salaries and other earnings paid by the Insured to employees during each Period of Insurance. The name of every employee together with the amount of wages salary and other earnings shall be properly recorded and the Insured shall at all times allow the Company to inspect such records and shall supply the Company with a correct account of all such wages salaries and other earnings paid during any period of Insurance with one month from expiry date of such Period of Insurance. If the amount so paid shall differ from the amount on which premium has been paid the difference in premium shall be met by a further proportionate payment to the Company or by a refund by the Company as the case may be.

7. The Company may cancel this Policy by sending seven days notice by registered letter to the Insured at his last known address and in such event the premium shall be adjusted in accordance with Condition 6.

8. The parties to the contract may mutually agree and enter into a separate Arbitration Agreement to settle any and all disputes in relation to this policy. Arbitration shall be conducted under and in accordance with the provisions of the Arbitration and Conciliation Act, 1996.

9. The due observance and fulfillment of the terms, conditions and endorsements of this Policy so far as they relate to anything to be done or not to be done by the Insured and the truth of the statements and answers in the Proposal shall be conditions precedent to any liability of the Company to make any payment under this Policy.

#### GRIEVANCES

If You have a grievance about any matter relating to the Policy, or Our decision on any matter, or the claim, You can address Your grievance as follows:

#### 1. OUR GRIEVANCE REDRESSAL OFFICER

You can send Your grievance in writing by post or email to Our Grievance Redressal Officer at the following address: In case of any grievance the insured person may contact the company through

- Website : www.cholainsurance.com
- Toll free: 1800 208 9100E-Mail: customercare@cholams.murugappa.comFax: 044 -4044 5550Courier: Cholamandalam MS General Insurance Company Limited, Customer services, Head Office Dare House 2nd<br/>floor, No 2 N.S.C. Bose Road, Chennai 600 001

Insured person may also approach the grievance cell at any of the company's branches with the details of grievance. 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 GRO@cholams.murugappa.com

For details of grievance officer, kindly refer the link www.cholainsurance.com

If any Grievances / issues on Health insurance related claims pertaining to Senior Citizens, Insured can register the complaint / grievance in 'Senior Citizen Channel' which shall be processed on Fast Track Basis by dedicated personnel.

If Insured Person is not satisfied with the redressal of grievance through above methods, the insured person may also approach the office of Insurance Ombudsman of the respective area/region for redressal of grievance as per Insurance Ombudsman Rules 2017.

Grievance may also be lodged at IRDAI Integrated Grievance Management system https://igms.irda.gov.in/

# 2. CONSUMER AFFAIRS DEPARTMENT OF IRDAI

a. In case it is not resolved within 15 days or if You are unhappy with the resolution You can approach the Grievance Redressal Cell of the Consumer Affairs Department of IRDAI by calling Toll Free Number 155255 (or) 1800 4254 732 or sending an email to complaints@irdai.gov.in. You can also make use of IRDAI's online portal - Integrated Grievance Management System (IGMS) by registering Your complaint at igms.irda.gov.in.

b. You can send a letter to IRDAI with Your complaint on a Complaint Registration Form available by clicking here. You must fill and send the Complaint Registration Form along with any documents by post or courier to General Manager, Insurance Regulatory and Development Authority of India (IRDAI), Consumer Affairs Department- Grievance Redressal Cell, Sy.No.115/1,Financial District, Nanakramguda, Gachibowli, Hyderabad-500032.

c. You can visit the portal http://www.policyholder.gov.in for more details.

# 3. INSURANCE OMBUDSMAN

You can also approach the Insurance Ombudsman, depending on the nature of grievance and the financial implication, if any. Information about Insurance Ombudsmen, their jurisdiction and powers is available on the website of the Insurance Regulatory and Development Authority of India (IRDAI) at www.irdai.gov.in, or of the General Insurance Council at www.generalinsurancecouncil.org.in, the Consumer Education Website of the IRDAI at http://www.policyholder.gov.in, or from any of Our Offices.

Please find below the latest/updated link of the Ombudsman offices <u>https://www.cioins.co.in/Ombudsman</u>

# INFORMATION ABOUT US

Cholamandalam MS General Insurance company Limited HO: Dare House 2nd Floor, No. 2 NSC Bose Road, Chennai – 600 001. Toll Free : 1800 208 9100 SMS: "CHOLA" TO 56677 \*(Premium SMS charges apply) Email –customercare@cholams.murugappa.com Web site: www.cholainsurance.com

Forming part of the Policy No.PINS27120000009665

UIN: IRDAN123RP0032V02200203

Call Toll Free: **1800 208 5544** | SMS **CHOLA** to 56677 | Visit **www.cholainsurance.com** | Email **customercare@cholams.murugappa.com** 

Disclaimer: The Company may contact you for matters related to your policy or to provide details of products & services offered. To opt out from the facility, please register under Do Not Call section on our website.