



Credit / Debit / ATM Card Package Insurance Policy

Preamble

ICICI Lombard General Insurance Company Limited (“the Company”), having received a Proposal and the premium from the Insured named in the Schedule referred to herein below, and the said Proposal and Declaration together with any statement, report or other document leading to the issue of this Policy and referred to therein having been accepted and agreed to by the Company and the Insured as the basis of this contract do, by this Policy agree, in consideration of and subject to the due receipt of the subsequent premiums, as set out in the Schedule with all its Parts, and further, subject to the terms and conditions contained in this Policy, as set out in the Schedule with all its Parts, that on proof to the satisfaction of the Company of the compensation having become payable as set out in Part I of the Schedule to the title of the said person or persons claiming payment or upon the happening of an event upon which one or more benefits become payable under this Policy, the Sum Insured/ appropriate benefit will be paid by the Company.

PART I OF THE SCHEDULE

Policy No. 4049/412257094/00/000

Issued at: Mumbai

1. Name of the Bank/Client : Revolut Payments India Private Limited
2. Insured Persons : Card Holders of Revolut India
3. Mailing address of the Bank/Client : 10th floor, G block, BKC, seat 4,
Cabin 3, Parinee Crescenzo Bandra Kurla
Complex, Bandra East, Mumbai,
Maharashtra - 400005
4. Period of Insurance : 26th Sep 2025 to 25th Sep 2026

Benefits under the Policy

Covers	Sum Insured (INR)
Card Liability Cover (Lost Card Liability, Counterfeit/Skimming/Phishing and Online Fraud Protection).	1,00,000



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General Conditions

- The insurance cover is valid only up to the mentioned number of cards. Any increase in no of cards, additional premium to be paid via endorsement.
- Loss incurred due to gross negligence on part of the Insured Person, including but not limited to insufficient measures taken by the Insured Person to keep the PIN, Password etc safe including without limitation recording of the PIN, Password in an intelligible form by the Insured Person.
- Any claim due to deliberate breach of law would not be payable.
- Documents to be submitted within 30 days of claim intimation to ICICI Lombard.
- All the mentioned covers are valid only for the duration of trip and 30 days after the trip ends
- Trip, here, is defined as the period starting from the point the insured person leaves his residence for his scheduled flight and continues during the entire journey and ends when the insured person reaches his/her residence / office from the place of start.
- For Lost card liability, counterfeit and online protection - In case of one person holding multiple cards, then only one claim will be paid on FIFO basis. Their passport number and name will be unique identifier factor

Card Liability Cover (Lost Card, Counterfeiting/Skimming/Phishing and Online Fraud Protection)

Loss card Liability

- Period – 15 days pre-reporting and 15 days post-reporting, including the date of reporting
- Any PIN based transactions (like ATM, Internet and telephone etc.) are covered only in case the Pin is acquired under duress by unauthorized person.
- For lost card liability: Claim has to be reported by card holder to Card issuer within 7 days from the date of card loss
- The Insured must cancel the Card as soon as practicable, but in any event not more than 48 hours, after receipt of notification of the unauthorized access or theft.
- Pre-Delivery Fraud and loss of card in transit is not covered.
- Terrorism is not covered.
- Any claim due violation of law is not payable.
- Claim to be intimated to ICICI Lombard within 60 days of fraud incidence date.
- FIR to be mandatorily submitted in case of lost card. For counterfeit cases happened in foreign location, passport copy of the card holder and flight ticket will be required.



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Counterfeit Cards

- Skimming - Any Fraudulent Use of a Card(s) where property, labor or services are sold and delivered by a merchant to an individual purporting to be the cardholder using telephone, fax machines, postal services or a computer based system or network
- Losses arising out of duplicate or counterfeit cards as issued by the Revolut created without the Card Holder's Knowledge.
- For counterfeit card: Claim has to be reported by cardholder to Revolut within 7 days from the date of notification of fraud to customer via card statement, SMS, net banking, etc.
- Counterfeit Card shall mean a Card which has been embossed or printed so as to pass off as a Card issued by the Bank / Card issuer which is subsequently altered or modified or tampered with without consent.
- The Insured must cancel the Card as soon as practicable, but in any event not more than 48 hours, after receipt of notification of the unauthorized access or theft.
- Pin based transactions are covered.
- Reporting Period - 15 days pre-reporting and 15 days post reporting Cover.
- Claim to be intimated to ICICI Lombard within 60 days from the date of incident.

Online Fraud Protection

- Internet Banking Frauds is defined as fraudulent transactions being made on the internet by use of lost/stolen/clone cards.
- Phishing/ account takeover - Any fraudulent loss or damage arising due to Information obtained by Unauthorized Access to sensitive information such as usernames, passwords and any card details by masquerading as a trustworthy entity in an electronic communication which is not owned, operated or contracted by the Insured or the Insured's Card processor.
- The policy covers all online fraudulent utilization of Travel Cards using the authorized CVV (Card Verification Value Code) issued to the Cardholder by Revolut.
- Covers Liability arising out of any loss or damage of Card transactions using the authorized PIN issued to the Cardholder by Revolut.
- Claim has to be reported by cardholder to card issuer within 7 days from the date of notification of fraud to customer via card statement, SMS, net banking, etc.
- Reporting Period - 15 days pre-reporting and 15 days post reporting



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- The Company will not make any payment for any claim directly or indirectly arising from, or occasioned by, or due to:
 1. Loss incurred by the cardholder because of misuse of travel card at any site not having authorized VeriSign Security status or any other equivalent security status at any point in time for the entire period of the insurance.
 2. Any failed/ duplicate/ declined transactions by host website/ authorized bank
 3. Any errors made by the host Website/ authorized bank. (for sites not having authorized VeriSign security status)
- Claim to be intimated to ICICI Lombard within 60 days from the date of incident.

Claim Intimation Clause

For any claims please - Notify us immediately on toll free number 18002666 or on our website (www.icicilombard.com) or drop a letter to the customer Support department at our registered office address along with the Policy No.

Mailing Address ICICI Lombard General Insurance Company Limited,
ICICI Lombard House 414, Veer Savarkar Marg, Siddhi Vinayak Temple, Prabhadevi, Mumbai
400025

Visit Us at: www.icicilombard.com • E-Mail Us at: customersupport@icicilombard.com •
Toll Free Number: 1800 2666. • CIN No. L67200MH2000PLC129408 • IRDA Registration No.
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Declaration

Are you or any of the proposed applicants/beneficial owner a PEP or Family member/ Close relatives/Associates of PEPs *?*

Yes

No



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If yes, please give details (Nature of relationship and position held by PEP):.....

Definition

“Politically Exposed Persons” (PEPs) are individuals who have been entrusted with prominent public functions by a foreign country, including the heads of States or Governments, senior politicians, senior government or judicial or military officers, senior executives of state-owned corporations and important political party officials;”.

I/We hereby give my/our consent to the Company to verify and obtain my/our identity/address proof through Central KYC Registry or UIDAI or through any other modes for the purpose of undertaking KYC.

I/We hereby declare and confirm that the premium has been paid out of legally acquired sources of income and the subsequent premiums if any, will continue to be paid out of legally declared and assessed source of income

PART II OF THE SCHEDULE

Definitions

“Accident” is a sudden, unforeseen and involuntary event caused by external, visible and violent means.

“ATM” shall mean Automated Teller Machines of Banks, which have been approved by Reserve Bank of India.

“Bank” shall mean an entity licensed as a Bank under Banking Regulation Act, 1949 and permitted by the Reserve Bank of India to carry on banking business in India.

“Bodily Injury” means any accidental physical bodily harm solely and directly caused by external, violent and visible and evident causes but does not include any sickness or disease.



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“Burglary” means any theft following upon actual forcible and violent entry of and/or exit from the Insured Property with an intent to commit a felony therein and includes housebreaking.

“Business or Business Purposes” means any full or part time, permanent or temporary, activity undertaken in the premises with a view to profit or gain.

“Card” shall mean any Credit Card/ Debit Card /ATM Card issued by the Bank mentioned in Part I of the Schedule.

“Cardholders” shall mean such persons to whom a Card has been issued by the Insured.

“Company” means ICICI Lombard General Insurance Company Limited.

“Contents” means the following not used for Business or Business Purposes, so long as they are owned by the Insured and or family of insured and/or for which the insured and/or family of insured are legally responsible for –

- i) Electronic equipment, household appliances, household goods such as furniture, kitchen utensils, fixtures, fittings and interior decorations;
- ii) personal effects such as clothes and other articles of personal nature likely to be worn used or carried but excluding money but including jewelry and valuables.

“Damage” shall mean loss or damage.

“Disease” means an alteration in the state of the body or of some of its organs, interrupting or disturbing the performance of the vital functions, and causing or threatening pain and weakness, malady, illness, sickness or disorder.

“Deductible” or “Excess” means the amount of expenses or loss to be borne by the Insured before the compensation under the Policy shall become payable and such expenses or loss shall not be reimbursed by the Company.

“Domestic staff” means such persons employed by the Insured to perform duties in connection with the maintenance or use of the insured property. This includes



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persons who perform household or domestic services or duties of a similar nature for the insured. This does not include persons while performing duties in connection with the insured's business.

“EDC” means Electronic Data Capturing Machine used for Card Transactions.

“Employee” means any person employed under a contract of service or apprenticeship during or prior to commencement of the Period of Insurance and for the avoidance of doubt shall include agents or consultants or sub-contractors or independent professional advisers of the Insured.

“Hold-up” means when a person having some weapon threatens the Insured or its/his domestic staff and there exists a possibility of actual physical threat to the person of the Insured or its/his domestic staff.

“Hospital/ Nursing Home” 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 10,00,000 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.

“Insured” - means the person named in Part I of the Schedule and the Cardholders of the Insured.

“Kutchha Construction” means buildings having walls and/or roofs of wooden planks, thatched leaves, grass, bamboo, plastic, cloth, asphalt, canvass, tarpaulin or the like.



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“Medical Practitioner”

- is a person who holds a valid registration from the Medical Council of any State 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.

“Merchant Establishment” shall mean establishments wherever located which honour the Card.

“Offices” shall mean the premises or the portion of the premises at the Business address occupied by Insured for the Business or Profession and used solely as offices.

“Period of Insurance” means the period from Commencement of Insurance Cover to the end of the Insurance Cover as per Part I of the Schedule.

"PIN" shall mean specific personal identification number assigned to the Cardholder by the Bank named in Part I of the Schedule in connection with the Card.

“Policy” means insured’s proposal, the schedule, Company’s covering letter to the insured, insuring clauses, definitions, exclusions, conditions and other terms contained herein and any endorsement attaching to or forming part hereof, either at inception or during the period of insurance.

“Professional Sport” means a sport that would remunerate the sportsman in excess of 50% of his or her total annual income.

“Proposals” shall mean any signed proposal in form of letters and declarations, written statements and any information in addition hereto supplied to the Company by or on behalf of the Insured.

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“Public Authority” means any governmental, quasi-governmental organization or any statutory body or duly authorized organization with the power to enforce laws, exact obedience, command, determine or judge.

“Qualified Nurse” is a person who holds a valid registration from the Nursing Council of India or the Nursing Council of any state in India.

“Rail Accident” means accident occurring on account of collision between trains or collision of trains against external objects, or derailment of train resulting in bodily injury.

“Reasonable Medical charges” - means the charges for services or supplies, which are the standard charges for the specific provider and consistent with the prevailing charges in the geographical area for identical or similar services, taking into account the nature of the illness / injury involved .

“Residential Premises” means insured’s private residence, which is used or occupied mainly for domestic purposes by insured and/or insured’s family and/or insured’s domestic staff whether owned by insured or insured’s family or otherwise.

“Replacement Cost” means the cost, on the date of the loss or damage, of the lower of:

- Repairing the property with materials of similar kind and quality; or
- Replacing the property with new articles of similar kind, quality and usefulness; without any deduction for depreciation.

“Riot” refers to the violent disturbance of the public peace by three or more persons assembled for a common purpose.

“Road Accident” means an accident caused by or arising out of collision between two or more motor vehicles or collision of a motor vehicle against any external object, skidding of motor vehicle resulting in death or bodily injury, which would give rise to third Party claims. “Schedule” means the schedule, and any annexure to it, attached to and forming part of this Policy.



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“Strike” refers to cessation of work or a temporary stoppage of normal and regular activity or work undertaken by some persons in support of the demands made on their employer, as for higher pay or improved conditions.

“Sum Insured” means and denotes the amount of cover available as stated in Part I of the Schedule or any revisions thereof based on claim settled, as stated in the scope of cover of the policy and, where appropriate, as more particularly described and limited per item insured in any annexure to the Schedule. This is the maximum compensation that the

Company will pay for each and every claim with respect to individual cover under the Policy.

“Surgeon” means an individual whose profession or occupation is to cure diseases or injuries of the body by manual operation.

“Surgical Operation” 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 center by a Medical Practitioner.

“Terrorism/Terrorist activity” means any actual or threatened use of force or violence directed at or causing damage, Injury, harm or disruption, or commission of an act dangerous to human life or property, against any individual, property or government, with the stated or unstated objective of pursuing economic, ethnic, nationalistic, political, racial or religious interests, whether such interests are declared or not. Robberies or other criminal acts, primarily committed for personal gain and acts arising primarily from prior personal relationships between perpetrator(s) and victim(s) shall not be considered Terrorist activity. Terrorism shall also include any act, which is verified or recognized by the relevant Government as an act of terrorism.

“Valuables” means photographic, audio, video, computer and any other electronic equipment, telecommunications and electrical equipment, telescopes, binoculars, antiques, watches, jewellery, furs and articles made of precious stones and metals.



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“Works of Art” means and includes all those items, which are listed under Part I of the Schedule and excludes easily breakable items like porcelain, pottery and the like.

“War” means war, whether declared or not, or any warlike activities, including use of military force by any sovereign nation to achieve economic, geographic, nationalistic, political, racial, religious or other ends.

In this Policy, all references made to the Insured in masculine gender will also include the feminine gender.

General Conditions of the Policy

1. Reasonable Precaution: The Insured shall take all reasonable precautions for the safety of the Insured / Insured’s property to prevent injury/ illness/ diseases / Damage.
2. The Insured shall maintain all records, registers and books of accounts reasonably required in an accurate manner.
3. All cover under this policy shall cease if any alteration to the Insured’s property / position be made whereby the risk of Damage or injury is increased unless and until such alteration shall be agreed by the Company in writing.
4. Claim Procedure & Requirements: Upon the happening to an event giving rise or which may give rise to a claim:
 - a) The Insured or his representative shall forthwith give notice to the Company with full particulars.

A claim in writing shall also be delivered by the Insured at his/her own expense to the Company with detailed particulars and proofs, explanation, statement of witnesses as may be required together with particulars of other insurance covering the same risk.

- b) In the event of a claim under this policy, all certificates, information, and evidences or otherwise required by the Company shall be furnished at the expenses of the Insured or his/her legal representative/ assignee and shall be in such form and of such nature as the Company may prescribe.



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- b) Immediate action must be taken to minimize loss and avoid interruption or interference with the Business or Profession and to prevent further damage or injury.

Every letter, claim, writ, summons, process information or any verbal notice of claim shall be forwarded to the Company by the Insured upon receipt. The Insured shall give all necessary information and assistance to enable the Company to settle or resist any claim or to institute proceedings.

5. Claim control

- a) The Company shall have sole control of all claim procedures and settlements.
- b) No admission offer, payment, or indemnity shall be made or given by or on behalf of Insured without Company's written consent.
- c) The Company shall have full discretion in conduct of any proceedings and in settlement of any claim, and the Insured shall give all such assistance and information as the Company may require.

- 6. In the event of any claim being in any respect fraudulent or if any fraudulent means or devices are used by the Insured or anyone acting on behalf of Insured to obtain any benefit under this policy or if any loss or damage is occasioned by the wilful act or with the connivance on Insured, all benefits, under this Policy shall be forfeited.

- 7. No sum payable under this Policy shall carry any interest or penalty.

- 8. The due observance and fulfilment of the terms conditions and endorsement of this policy in so far as they relate to anything to be done or complied with by Insured should be a condition precedent to any liability of the Company to make any payment under this policy.

- 9. If the Company alleges that by reason of any of the terms and conditions, exclusions, etc. any loss, damage, cost or expenses is not covered by this Policy, the onus of proving the contrary shall be upon the Insured.

- 10. This Policy shall be voidable in the event of mis-representation, mis-description or non-disclosure of any material particular by the Insured.

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11. 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 by 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.

12. 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 of or 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.
 - (c) If the interest in the property passes from the Insured otherwise than by will or operation of law.
13. 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.
14. Cancellation/termination



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Cancellation

The Insured Person may also give 15 days notice in writing, to the Company, for the cancellation of this Policy, in which case the Company shall from the date of receipt of notice cancel the Policy and refund the premium for the period this Policy has been in force as per the refund grid applicable.

The short period scales shall be as follows:

Period of risk	Annual Rate Premium to be retained
Upto one month	25% of the annual rate premium
Upto three months	50% of the annual rate premium
Upto six months	75% of the annual rate premium
Exceeding six months	Full annual rate.

Termination

Disclosure to information norm

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

17. (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. 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.



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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 expiration 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.

18. On the happening of loss or damage to any of the property insured by this policy, the Company may

- (a) enter and take and keep possession of the building or premises where the loss or damage has happened.
- (b) 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.
- (c) keep possession of any such property and examine, sort, arrange, remove or otherwise deal with the same.
- (d) sell any such property or dispose of the same for account of whom it may concern.



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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 Covers 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.

19. 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 reinstate or replace 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.



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20. 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.
22. 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.
23. 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. (Applicable to Commercial entities only)
24. Every notice and other communication to the Company required by these conditions must be written or printed.
25. 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



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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.

26. In the event the Insured having multiple Cards issued by the Bank named in Part I of the Schedule, the Insurance Policy shall be applicable only for the Card, which has the highest limit of Indemnity. In event multiple cards have been issued to the Insured by the Bank named in Part I of the Schedule, the Insured will be eligible for the insurance benefit under this Policy only with respect to the highest value Card and not in respect of the multiple Cards.

General Exclusions of the Policy

The Company shall not be liable for:

1. Damage directly or indirectly occasioned by or happening through or in consequence of war, invasion, act of foreign enemy, hostilities (whether war be declared or not), civil war, Rebellion, revolution, insurrection, military or usurped power, confiscation, nationalisation, civil commotion or loot or pillage in connection herewith.
2. Any damage arising from or in consequence of requisition by or under the order of any Public authority.
3. Damage to any property whatsoever or any loss or expense whatsoever resulting or arising there from or any consequential loss.
4. Any legal liability of whatever nature, directly or indirectly caused by or contributed to by or arising from ionising radiation of or contention by radio activity from any nuclear fuel or from any nuclear waste from combustion of nuclear fuel or any weapon having nuclear components.



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5. Damage caused by wear and tear or depreciation.
6. Loss of interest, consequential loss, delay, loss of market.
7. Any Loss or damage arising out of Terrorism/terrorist activity is not covered under any sections of this comprehensive policy.

General Conditions applicable to all Sections

Contribution

- If at the time when any Claim arises under this Policy, there is any other insurance which covers (or would but for the existence of this Policy) and the amount to be claimed exceeds the sum insured under a single policy after considering the deductibles or co-pay, in the same Claim (in whole or in part), then We shall not be liable to pay or contribute more than Our rateable proportion of any Claim.
- However, this condition shall not be applicable for all the benefit based covers under the Policy, as applicable

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.

Free Look Up period

- You would be given a period of 15 days (Free Look Period) from the date of receipt of the Policy to review its terms and conditions. Where the Policy Holder disagrees to any of the terms or conditions of the Policy, he has the option to return the Policy stating the reasons for his objection, when he shall be entitled to a refund of the premium paid, subject only to a deduction of the expenses incurred by Us on the stamp duty charges.

Renewal

- Renewal defines the terms on which the contract of insurance can be renewed on mutual consent with a provision of grace period for treating the renewal continuous for the purpose of all waiting periods.



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Terms of Renewal

- The Policy can be renewed under the then prevailing CREDIT/DEBIT/ATM CARD PACKAGE INSURANCE POLICY product or its nearest substitute (in case the CREDIT/DEBIT/ATM CARD PACKAGE INSURANCE POLICY product is withdrawn by the Company) approved by IRDA.
- This policy shall ordinarily be renewable except on grounds of fraud, moral hazard or misrepresentation or non-cooperation by the insured
- Renewal Premium - Premium payable on renewal and on subsequent continuation of cover are subject to change with prior approval from IRDA.
- Maximum Renewal Age – There will be life-long renewal without any age restriction for the cover.

Grace Period

- The Policy may be renewed by mutual consent and in such event the renewal premium should be paid to Us on or before the date of expiry of the Policy and in no case later than the Grace Period of 30 days from the expiry of the Policy. We will not be liable for any Claim which occurs during the Grace Period.

Settlement/Rejection of Claim

- The settlement of claims would be done by Us within 30 days after the receipt of last necessary documents, any rejections if done, would be provided with proper reasons by Us.

Penal interest provision shall be as per Regulation 9(6) of (Protection of Policyholders' Interests) Regulations, 2002.

Notices

Any notice, direction or instruction given under this Policy shall be in writing and delivered by hand, post, to-

In Your case, at the last known address specified in the Schedule

In Our case:

ICICI Lombard General Insurance Company Limited
ICICI Lombard House



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414, Veer Savarkar Marg
Near Siddhi Vinayak Temple,
Prabhadevi, Mumbai 400 025
Notice and instructions will be deemed served 7 days after posting or immediately upon receipt in the case of hand delivery, facsimile or e-mail.

Customer Service

If at any time You require any clarification or assistance, You may contact any of Our offices at the address specified, during normal business hours.

Grievances

For resolution of any query or grievance, Insured may contact the respective branch office of the Company or may call toll free no.1800-2666 or may approach us at the sub section “Grievance Redressal” on our website www.icicilombard.com (Customer Support section). However, if the resolution provided by us is not satisfactory you may approach Insurance Regulatory and Development Authority (IRDAI) through the Bima Bharosa Portal - <https://bimabharosa.irdai.gov.in/> or IRDAI Grievance Call Centre(IGCC) at their toll free no. 1800 4254 732 / 155255.

You may also approach Insurance Ombudsman, subject to vested jurisdiction, for the redressal of grievance. Details of Insurance Ombudsman offices are available at IRDA website: www.irdaindia.org, or on the Company’s website at www.icicilombard.com.

The updated ombudsman details are mentioned below:

S no.	Name of office of insurance Ombudsman	Territorial Area of jurisdiction
1	AHMEDABAD Insurance Ombudsman Office of the Insurance Ombudsman, Jeevan Prakash Building, 6th floor, Tilak Marg, Relief Road, Ahmedabad – 380 001. Tel.: 079 - 25501201/02/05/06	Gujarat, Dadra & Nagar Haveli, Daman and Diu.

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	Email: bimalokpal.ahmedabad@cioins.co.in	
2	BENGALURU Insurance Ombudsman Office of the Insurance Ombudsman, Jeevan Soudha Building, PID No. 57-27-N-19 Ground Floor, 19/19, 24th Main Road, JP Nagar, 1st Phase, Bengaluru – 560 078. Tel.: 080 - 26652048 / 26652049 Email: bimalokpal.bengaluru@cioins.co.in	Karnataka
3	BHOPAL Insurance Ombudsman Office of the Insurance Ombudsman, 1st floor, "Jeevan Shikha", 60-B, Hoshangabad Road, Opp. Gayatri Mandir, Bhopal – 462 011. Tel.: 0755 - 2769201 / 2769202 Email: bimalokpal.bhopal@cioins.co.in	Madhya Pradesh, Chattisgarh.
4	BHUBANESHWAR Insurance Ombudsman Office of the Insurance Ombudsman, 62, Forest park, Bhubaneswar – 751 009. Tel.: 0674 - 2596461 / 2596455 Email: bimalokpal.bhubaneswar@cioins.co.in	Odisha.
5	CHANDIGARH	Punjab,

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	<p>Insurance Ombudsman Office Of The Insurance Ombudsman, Jeevan Deep Building SCO 20-27, Ground Floor Sector- 17 A, Chandigarh – 160 017. Tel.: 0172 - 4646394 / 2706468 Email: bimalokpal.chandigarh@cioins.co.in</p>	<p>Haryana (excluding Gurugram, Faridabad, Sonapat and Bahadurgarh), Himachal Pradesh, Union Territory of Jammu & Kashmir, Ladakh & Chandigarh.</p>
6	<p>CHENNAI Insurance Ombudsman Office of the Insurance Ombudsman, Fatima Akhtar Court, 4th Floor, 453, Anna Salai, Teynampet, CHENNAI – 600 018. Tel.: 044 - 24333668 / 24333678 Email: bimalokpal.chennai@cioins.co.in</p>	<p>Tamil Nadu, Pondicherry Town and Karaikal (which are part of Pondicherry).</p>
7	<p>DELHI Insurance Ombudsman Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Building, Asaf Ali Road, New Delhi – 110 002. Tel.: 011 – 23237539 Email: bimalokpal.delhi@cioins.co.in</p>	<p>Delhi & following District of Haryana – Gurugram, Faridabad, Sonapat and Bahadurgarh</p>
8	<p>ERNAKULAM Insurance Ombudsman</p>	<p>Kerala, Lakshadweep,</p>

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	<p>Office of the Insurance Ombudsman, 2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard, M. G. Road, Ernakulam - 682 015. Tel.: 0484 - 2358759 / 2359338 Fax: 0484 - 2359336 Email: bimalokpal.ernakulam@cioins.co.in</p>	<p>Mahe-a part of Puducherry.</p>
9	<p>GUWAHATI Insurance Ombudsman Office of the Insurance Ombudsman, Jeevan Nivesh, 5th Floor, Nr. Panbazar over bridge, S.S. Road, Guwahati – 781001(ASSAM). Tel.: 0361 - 2632204 / 2602205 Email: bimalokpal.guwahati@cioins.co.in</p>	<p>Assam, Meghalaya, Manipur, Mizoram, Arunachal Pradesh, Nagaland and Tripura.</p>
10	<p>HYDERABAD Insurance Ombudsman Office of the Insurance Ombudsman, 6-2-46, 1st floor, "Moin Court", Lane Opp. Saleem Function Palace, A. C. Guards, Lakdi-Ka-Pool, Hyderabad - 500 004. Tel.: 040 - 23312122 Email: bimalokpal.hyderabad@cioins.co.in</p>	<p>Andhra Pradesh, Telangana, Yanam and Part of Territory of Puducherry.</p>
11	<p>JAIPUR</p>	<p>Rajasthan.</p>

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	<p>Insurance Ombudsman Office of the Insurance Ombudsman, Jeevan Nidhi – II Bldg., Gr. Floor, Bhawani Singh Marg, Jaipur - 302 005. Tel.: 0141- 2740363/2740798 Email: Bimalokpal.jaipur@cioins.co.in</p>	
12	<p>KOLKATA Insurance Ombudsman Office of the Insurance Ombudsman, Hindustan Bldg. Annexe, 4th Floor, 4, C.R. Avenue, KOLKATA - 700 072. Tel.: 033 - 22124339 / 22124340 Fax : 033 - 22124341 Email: bimalokpal.kolkata@cioins.co.in</p>	<p>West Bengal, Sikkim, Andaman & Nicobar Islands.</p>
13	<p>LUCKNOW Insurance Ombudsman Office of the Insurance Ombudsman, 6th Floor, Jeevan Bhawan, Phase-II, Nawal Kishore Road, Hazratganj, Lucknow - 226 001. Tel.: 0522 - 4002082 / 3500613 Email: bimalokpal.lucknow@cioins.co.in</p>	<p>Districts of Uttar Pradesh : Laitpur, Jhansi, Mahoba, Hamirpur, Banda, Chitrakoot, Allahabad, Mirzapur, Sonbhadra, Fatehpur, Pratapgarh, Jaunpur, Varanasi, Gazipur, Jalaun, Kanpur, Lucknow, Unnao, Sitapur, Lakhimpur, Bahraich, Barabanki, Raebareli, Sravasti, Gonda, Faizabad, Amethi, Kaushambi, Balrampur, Basti, Ambedkarnagar, Sultanpur, Maharajgang, Santkabirnagar, Azamgarh, Kushinagar, Gorkhpur, Deoria, Mau, Ghazipur, Chandauli, Ballia, Sidharathnagar.</p>

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14	<p>MUMBAI Insurance Ombudsman Office of the Insurance Ombudsman, 3rd Floor, Jeevan Seva Annexe, S. V. Road, Santacruz (W), Mumbai - 400 054. Tel.: 022 - 69038800/27/29/31/32/33 Email: bimalokpal.mumbai@cioins.co.in</p>	<p>Goa, Mumbai Metropolitan Region Excluding (Navi Mumbai & Thane).</p>
15	<p>NOIDA Insurance Ombudsman Office of the Insurance Ombudsman, Bhagwan Sahai Palace 4th Floor, Main Road, Naya Bans, Sector 15, Distt: Gautam Buddh Nagar, U.P-201301. Tel.: 0120-2514252 / 2514253 Email: bimalokpal.noida@cioins.co.in</p>	<p>State of Uttaranchal and the following Districts of Uttar Pradesh: Agra, Aligarh, Bagpat, Bareilly, Bijnor, Budaun, Bulandshehar, Etah, Kanooj, Mainpuri, Mathura, Meerut, Moradabad, Muzaffarnagar, Oraiyya, Pilibhit, Etawah, Farrukhabad, Firozbad, Gautambodhanagar, Ghaziabad, Hardoi, Shahjahanpur</p>
16	<p>PATNA Insurance Ombudsman Office of the Insurance Ombudsman, 2nd Floor, Lalit Bhawan, Bailey Road, Patna 800 001. Tel.: 0612-2547068 Email: bimalokpal.patna@cioins.co.in</p>	<p>Bihar, Jharkhand.</p>
17	<p>PUNE Insurance Ombudsman</p>	<p>Maharashtra, Area of Navi Mumbai and Thane</p>

ICICI Lombard General Insurance Company Limited
Lombard House, 414, Veer Savarkar Marg,
Prabhadevi, Mumbai – 400025
Commercial: IRDAN115CP0028V01201920



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<p>Office of the Insurance Ombudsman, Jeevan Darshan Bldg., 3rd Floor, C.T.S. No.s. 195 to 198, N.C. Kelkar Road, Narayan Peth, Pune – 411 030. Tel.: 020-24471175 Email: bimalokpal.pune@cioins.co.in</p>	<p>(excluding Mumbai Metropolitan Region).</p>
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The updated details of Insurance Ombudsman are available on IRDA website:
www.irdaindia.org, on the website of General Insurance Council:
www.generalinsurancecouncil.org.in, website of the Company www.icicilombard.com or from
any of the offices of the Company.

Note - In case of renewal of the policy, policy benefit and terms & conditions of policy including premium may be subject to change

ICICI Lombard General Insurance Company Limited
Lombard House, 414, Veer Savarkar Marg,
Prabhadevi, Mumbai – 400025
Commercial: IRDAN115CP0028V01201920



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COMPANY CONTACT DETAILS:-

Toll-free number: 1800-2-666

You may also write to us at the following address:

Postal Address:

ICICI Lombard General Insurance Company Limited
ICICI Lombard House
414, Veer Savarkar Marg
Near Siddhi Vinayak Temple,
Prabhadevi, Mumbai 400 025
E-mail: insuranceonline@icicilombard.com