

Claim Process for Personal Accidental Insurance
SBI Gold/ Pride/ Platinum/ Premium/ Signature Debit Card
(Visa/MasterCard)

1. Policy No: **4112-400401-23-7001805-00-000**
(Please note: Policy number must be mentioned on every communication to the insurance company.)
2. The claimant (s) must submit *Personal Accident Insurance Intimation Form Claim Form* within **90 days from date of the accidental death of the Cardholder** though speed/registered post/courier/by email/ by hand /tele-call at below address:

LIBERTY GENERAL INSURANCE,
4th Floor Liberty Health 360,
The Capitol New DP Road,
Vishal Nagar Pune,
Maharashtra.
PIN 411027.

Email: pa&benefitclaims@libertyinsurance.in

Cc: Shanker Ingvale@libertyinsurance.in Mob: 08657365921
alka.chaudhary@libertyinsurance.in Mob: 08291823806
madhavi@allianceinsurance.in; Mob: 07208984685

Call centre No.: 1800 2666 5844

3. Fill the Card Claim Form attached.
4. Fill the Details and share by email to above furnished email IDs.

S.No.	Details Required	
1	Product Type*	GPA
2	Policy Number*	4112-400401-23-7001805-00-000
3	Family ID of Insured member	
4	Policy period	8 th Aug 2023 to 7 th Aug 2024
5	Insured/ Corporate Name*	SBI
6	Insured member / Deceased Name*	
7	Date of Birth(dd-mmm-yy)	
8	City*	
9	Date of Loss* (dd-mmm-yy)	
10	Time of Loss	
11	Details of Loss/ How accident has occurred*	
12	Benefit type TTD/PPD/PTD/Death	
13	Claimant Name*	
14	Loss Amount (approx.)	
15	Contact Person*	
16	Loss Place (City)*	
17	Complete address of loss place*	

18	Contact Number*	
19	Email ID	
20	Type of Card * (please √)	Gold
	MasterCard	Platinum
	Visa	Business Pride
		Business Premium
		Signature
21	Account Number*	
22	Type of Account	SB / CA
23	a) Account Maintained with Branch* b) Branch Code Number*	a) b) Code No:
24	Date of last successful financial transaction done through the debit card*	

Other Terms & Conditions:

- 1) Personal Accidental (Death) Insurance: This insurance covers the Debit Cardholder (VISA/ MasterCard) for accidental death only, to the extent as applicable on the type of Debit Card held. This policy covers Accidental Death of the insured person occurred due to any bodily injury solely & directly from accident caused by external violent & visible means.
- 2) This Insurance Cover becomes operational when the Card is used at least once (on any channel, viz ATM/PoS/eCommerce during the last 90 days (Successful Financial transaction) from the date of accident.
- 3) In case of Death due to Air Accident, Insurance Cover will only be available to the Cardholder subject to a condition that the air ticket should have been purchased by using the Debit Card.
- 4) The personal accident (Death) cover will be available for the beneficiaries in case of death in terrorist action/Naxalite action and it will also cover death of Defence (Army/ Navy/ Air- Force)/ Paramilitary/ Police/ Indian Coast Guard personnel on/off duty.
- 5) Insurance Company after receipt of the application will initiate the process of claim settlement. The insurance company will acknowledge the Claim. All the correspondence related to claim will be directly taken up with the claimant (s) without involving Bank.
- 6) All the settlement/disputes will be between the claimant(s) and the insurance company and the Bank will not be a party to such disputes.
- 7) The claim settlement will be entirely the responsibility of the Insurance Company and Bank will have no liability towards any claim/ dispute.
- 8) The insurance Company shall, on receipt of complete set of documents, process the claim. Any requirement / deficiencies in the documents submitted shall be sought within 15 working days of receipt of the claim. All the documents being in order, the Insurance Company will settle the claim within 30 working days from the date of receipt of last document. In case of delay beyond 30 days, the Insurance Company shall pay interest as per the IRDA regulations.
- 9) The claimant(s) has to submit Personal Accident Insurance Intimation Form (intimation letter) within 90 days of the accidental death of the Cardholder through speed post/registered post / courier/ by hand.
- 10) The Personal Accident Claim Form duly filled in all respects with necessary document as per check list should be submitted within 90 days thereafter (i.e., period for intimation + claim = 90 days + 90 days = 180 days).
- 11) If the Debit Card holder is having more than one eligible Debit Card issued to him under one or more accounts, only one higher variant of the Debit Card will be considered for the

claim purpose. Only the Gold/Platinum/Business Gold/ Business Platinum/Signature Debit Card (VISA/MasterCard) used at least once (on any channel, viz ATM/ Point of Sale/ e-Commerce during the last 90 days (Successful Financial transaction) from the date of accident will be considered as eligible for the claim.

12) All claims where accident has occurred within the period of the policy and death has occurred, both (i) within the period of policy or (ii) after the expiry of policy shall be entertained by the Insurance Company. Further, as per IRDA guidelines, no claims should be rejected on account of delayed intimation and documents without ascertaining and recording the reasons for the said delay and satisfying themselves that the claim would otherwise have been rejected even if it had been reported in time.

13) The beneficiary on death of eligible Debit Cardholder shall be as follows:

a. Nominee, registered with the Bank for Savings Account in which the Debit Card has been issued in single name (Bank's role will be limited only to certify the name of nominee as per records of the Bank)

b. In cases where the nominee's name is not available but the Savings Account in which the Debit Card is issued, is a joint account, then the beneficiary will be the surviving joint account holder(s) for the purpose of insurance claim. (Bank's role will be limited only to certify the names of surviving joint account holder(s) as per Bank records)

c. In cases other than a) and b) above the claim shall be settled as per the procedure of insurer. The identification of legal heirs and the authenticity of the claim would be the responsibility of Insurer.

14) Any other supporting document / information, if required to deal with the claim would be asked for.