

## THE NEW INDIA ASSURANCE COMPANY LIMITED

Head Office: New India Assurance Bldg. 87, M.G. Road, Fort, Mumbai – 400 001 CIN No: L66000MH1919GOI000526/ IRDAI Regn. No.190

# CONTRACTORS PLANT & MACHINERY CUSTOMER INFORMATION SHEET

#### **Annexure B**

This document provides only key information about your policy.

Please refer to the policy document For detailed terms and conditions

| Sr. | Title  | Description   | Policy          |
|-----|--|---|-----------------|
| No. |  |   | Schedule/Clause |
| 1   | Product Name   | Policy Schedule   |                 |
| 2   | Unique<br>Identification<br>Number (UIN)<br>Allotted By<br>IRDAI | IRDAN190CP0060V01201819   |                 |
| 3   | Structure  | Indemnity based.  | Policy Schedule |
| 4   | Interests<br>Insured   | This policy covers all different types of machinery used for handing material or construction. The policy can be taken by any one of the following parties, either individually or jointly:  The owner of the machine  The contractor / user of the construction machinery The financial institutes who have an interest in the construction machinery.   | Policy Schedule |
| 5   | Sum Insured  | As stated in the policy schedule.   | Policy Schedule |
| 6   | Coverages  | The policy covers sudden, accidental, external damage to the insured machinery due to any cause other than those specifically excluded in the policy.  The policy covers the machinery whilst they are in operation or at rest or whilst being dismantled for the purpose of cleaning or overhauling or whilst being shifted within the premises or during subsequent re-erection, but in any case only after successful commissioning.  Please refer to policy document for complete list. |                 |
| 7   | Add On Covers  | <ol> <li>The policy can be extended to cover</li> <li>Third party liability - personal injury and property damage.</li> <li>Damage to owner's surrounding property.</li> </ol> Please refer to policy document for complete list.   | Policy Schedule |
| 8   | Loss<br>Participation  | The policy is subject to a compulsory excess.   | Policy Schedule |



| 9  | Exclusions   | The mair | n exclusions of the policy are:-   |                  |
|----|--|----------|--|------------------|
| J  | LACIASIONS   | 1.       | Loss or damage due to any internal electrical or mechanical breakdown, defective lubrication, lack of oil or coolant although any consequent external damage is payable. |                  |
|    |  |          | Loss or damage to replaceable parts or attachments such as bits, drills, knives, dies, moulds etc.   |                  |
|    |  |          | Loss or damage whilst in transit from one location to another.   |                  |
|    |  |          | Loss due to wear and tear, corrosion, rust, deterioration, atmospheric conditions.   |                  |
|    |  | 5.       | Loss or damage during testing operating or whilst being used for a purpose other than designed for.  |                  |
|    |  |          | Loss or damage to machinery working under ground.  |                  |
|    |  |          | Loss or damage for which the supplier or manufacturer is   |                  |
|    |  |          | responsible either by law or under contract.   |                  |
|    |  | Please r | refer to policy document for complete list.  |                  |
| 10 | Special Conditions and Warranties  |          | As per the respective policy clauses.  | Policy Schedule- |
| 11 | Admissibility of In case of any such incident which falls under the scope of the claim the following steps should be followed: |          |  |                  |
|    |  | 1.       | Please inform the insuring office by phone, letter or fax.   |                  |
|    |  | 2.       | Take all necessary steps to minimise the loss.   |                  |
|    |  | 3.       | Obtain estimate of repair from repairer of your choice.  |                  |
|    |  |          | Submit this repair estimate and claim form to the surveyor deputed by the insurance company.   |                  |
|    |  |          | After getting clearance from the surveyor, proceed for repairing machine or ordering for replacement as the case may be.   |                  |
|    |  | 6.       | Submit actual bills of repair/replacement with proof of payment to the surveyor.   |                  |
| 12 | Policy Servicing   | •        | Helpline / Toll free -1800-209-1415  | Policy schedule  |
|    |  | •        | website www.newindia.co.in   |                  |
| 13 | Grievances/Comp  | •        | Visit the Servicing Branch mentioned in the policy   |                  |
|    | laints   |          | document   |                  |
|    |  | •        | Toll free: 1800-209-1415 or on company   |                  |
|    |  |          | website www.newindia.co.in   |                  |
|    |  |          |  |                  |
|    |  |          |  |                  |
|    |  |          | Ombudsman - Website Link : <a href="https://www.cioins.co.in/">https://www.cioins.co.in/</a>   |                  |
|    |  | •        | You can send Your grievance in writing by post or email  |                  |
|    |  | •        | Grievance Redressal Officer Address :  |                  |
|    |  |          |  |                  |



|    |                                 | The New India Assurance Co. Ltd.,  |  |
|----|---------------------------------|--|--|
|    |                                 | Head Office, 87, M. G. Road, Fort,   |  |
|    |                                 | Mumbai - 400 001,  |  |
|    |                                 | e-mail::customer.relation@newindia.co.in   |  |
| 14 | Obligations Of the Policyholder | Make true and full disclosure in the proposal and related documents Give immediate notice of loss to Us Inform the respective authorities. |  |
|    |                                 | <ul> <li>Make true and full disclosures in claim form.</li> </ul>  |  |
|    |                                 | <ul> <li>Give all documents supporting the claim. Give full<br/>cooperation for inspection and Investigation of<br/>claim.</li> </ul>      |  |

### NOTE:

- The information must be read in conjunction with the Prospectus and Policy Document/Schedule.
- In case of any conflict between the CIS and the Policy Document the terms and conditions mentioned in the Policy Document shall prevail.

## **Declaration by the Policyholder**

| I have read the above and confirm having noted the details |                                 |  |  |  |
|--|---------------------------------|--|--|--|
|  |                                 |  |  |  |
| Place:   |                                 |  |  |  |
| Date:  |                                 |  |  |  |
| Date.  | (Signature of the Policyholder) |  |  |  |
|  |                                 |  |  |  |