

PART - A

<u>Edelweiss Life – Group Critical Illness Rider</u> (A Group, Non-Linked, Non-Par, Pure Risk Premium, Health Insurance rider)

UIN NO: 147B013V03

PART - A

FORWARDING LETTER

Date:	
Name of Master Policyholder:	Name of the PFA/ Corporate Agent/ Relationship Manager/ Broker:
Address:	Code/License no:
Contact details:	Contact No:
Master Policy No:	
Dear Mr/ Ms,	
Thank you for choosing Edelweiss Life as your pre	ferred life insurance partner.
We are enclosing herewith your Master Policy for	the members of the Group.

To help us to provide you prompt and efficient service at all times, please quote your Group Policy Number in all future correspondence. This Master Policy is important and must be kept safely as it contains all important details of the plan you have opted for.

Cancellation in the Free Look Period by Master Policyholder:

In case you do not agree with any of the provisions stated in the Policy Document, you have the option to return the Policy Document to us stating the reasons thereof in writing, within fifteen (15) days from the date of receipt of the Policy Document and period of 30 days in case of electronic policies and policies obtained through distance mode. On receipt of your letter along with the original Policy Document, we shall refund an amount as mentioned in the Free Look Clause of the Policy Terms and Conditions. The Policy once returned shall not be revived at any point of time and a new proposal will have to be made for a new Policy.

To exercise the Free Look option, you would need to send the original Policy Document along with a request letter to us at our Corporate Office address provided below. You are required to maintain the acknowledgement received from the Company as a proof of submission.

Cancellation in the Free Look Period by Insured Member:

In case the Insured Member does not agree with any of the provisions stated in the Certificate of Insurance, the Insured Member have the option to return the Certificate of Insurance to us stating the reasons thereof in writing, within fifteen (15) days from the date of receipt of the Certificate of Insurance and period of 30 days in case of electronic policies and policies obtained through distance mode. On receipt of your letter along with the original Certificate of Insurance, we shall refund an amount as mentioned in the Free Look Clause of the Policy Terms and

Conditions. The Certificate of Insurance once returned shall not be revived at any point of time and a new proposal will have to be made for a new Policy.

To exercise the Free Look option, you would need to send the original Certificate of Insurance along with a request letter to us at our Corporate Office address provided below. You are required to maintain the acknowledgement received from the Company as a proof of submission.

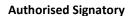
In case you have any queries or need any assistance, please call our Service Expert at 1800 2121 212 between 9:00 am to 9:00 pm, 7 days a week or write to us at corp-care@edelweisslife.in

We look forward to a long and happy association with you and as a part of our corporate philosophy; we will constantly endeavor to provide you our best service and support at all times.

We look forward to a warm and enduring relationship with your organization.

Regards,

For Edelweiss Life Insurance Company Limited





Edelweiss Life Insurance Company Limited Registered & Corporate Office: 6th Floor, Tower 3, Wing 'B', Kohinoor City, Kirol Road, Kurla (W), Mumbai 400070.

<u>Rider Policy Document - Edelweiss Life - Group Critical Illness Rider</u>
(A Group, Non-Linked, Non-Par, Pure Risk Premium, Health Insurance rider)

UIN No: 147B013V03

POLICY PREAMBLE

This document is the evidence of a contract of insurance between Edelweiss Life Insurance Company Limited ('the Company') and the Master Policyholder as described in the Policy Schedule given below. This Policy is based on the Proposal made by the within named Master Policyholder and submitted to the Company along with the required documents such as signed quotation sheet, Member Data, declarations, statements, other information. This Policy is effective upon receipt and realisation, by the Company, of the consideration payable under the Policy. This Policy is written under and will be governed by the applicable laws in force in India and all Premiums and Benefits are expressed and payable in Indian Rupees.



RIDER SCHEDULE

Group Master Policy Number	Plan Name & UIN No
	Group Critical Illness Rider & 147B013V03

Master Policy Holder	
Policy Commencement Date	
Risk Commencement Date	
Annual Renewal Date	
No. Of Insured Members (As On Policy Commencement Date)	
Total Sum Assured – (As On Policy Commencement Date)	
Mode Of Premium	
Rider Premium (Annual)	
Applicable Taxes	
Total Premium (Annual)	
Modal Premium	
Modal Premium plus Applicable Taxes	
Spouse Cover Option	Ý N
Special Conditions	

Consolidated Stamp Duty paid: Rs.<< F	OI-STMP-DUTY	/-AMT>>/- I	paid by Pay Order, vide Mudranl	creceipt no: dated	

For Edelweiss Life Insurance Company Limited

Authorised Signatory

This Policy Document is signed using a digital signature for and on behalf of Edelweiss Life Insurance Company Limited.

We request you to go through the Policy Document and check for the accuracy of information provided therein. In case you notice any mistake you may return the Policy Document to us for necessary correction.

PART B DEFINITIONS

Defined Term Meaning			
Accident	An accident means sudden, unforeseen and involuntary event caused by external, visible and violent means.		
Active- At-Work Clause	"All employees who have availed more than 10 continuous days of leave on grounds of sickness in the last one year (including the date of commencement of coverage) before the date of commencement of the policy or for new employees before the date of joining the group (including date of joining the group) are considered as not Active-at-work."		
means a person qualifying as Doctor/Certified Physician and also holds either Post of Diploma or Post Graduate degree in Specialist field being recognized by MCI or of the restates of India, if so required and acting within the scope of the license of registration gradim/her. The following are fields currently recognised by MCI. Anesthesiology, Aviation Medicine, Anatomy, Biochemistry, Biophysics, Cardiology, Hematology, Clinical Pathology, Clinical Pharmacology, Community Medicine, Derma Venerology and Leprosy, Endocrinology, Family Medicine, Forensic Medicine, General Medicine, Gastroenterology, Medical Genetics, Medical Oncology, Microbiology, Neonatology, Neurology, Neuroradiology, Nuclear Medicine, Nutrition, Obstetrics & Gynecology, Occul Health, Ophthalmology, Orthopedics, Oto-Rhino Laryngology, Pathology, Paerophysical Medicine, Radio diagnosis, Radiological Physics, Radio therapy, Rheumatology, Sports Medicine, Radio diagnosis, Radiological Physics, Radio therapy, Rheumatology, Sports Medicine, Virology.			
Day Care Centre	A day care centre means any institution established for day care treatment of illness and / or injuries or a medical setup with a hospital and which has been registered with the local authorities, wherever applicable, and is under supervision of a registered and qualified medical practitioner AND must comply with all minimum criterion as under:- 1. has qualified nursing staff under its employment 2. has qualified medical practitioner (s) in charge 3. has a fully equipped operation theatre of its own where surgical procedures are carried out 4. maintains daily records of patients and will make these accessible to the Insurance company's authorized personnel.		
Day Care Treatment	Day care treatment means medical treatment, and/or surgical procedure which is: 1. undertaken under General or Local Anesthesia in a hospital/day care centre in less than 24 hours because of technological advancement, and 2. which would have otherwise required a hospitalization of more than 24 hours. Exclusions Treatment normally taken on an out-patient basis is not included in the scope of this definition.		
Doctor/Certified Physician	Means a person who holds a degree of a recognized medical institute and is registered by Medical Council of India or of the respective states of India, if so required and acting within the scope of the license of registration granted to him/her. The definition would include Physician, Specialist, Anaesthetist and Surgeon and specifically excludes doctors / practitioners in non-allopathic fields		
Free Cover Limit (FCL)	Free Cover Limit (FCL) is decided at the time of quotation/ Renewal and is based on Group size and Sum Assured with a pre-defined formula. In case of members crossing FCL, the acceptance would be as per the Underwriting Guidelines of the Company.		
Grace Period	Grace period means the specified period of time immediately following the premium due date during which a payment can be made to renew or continue a policy in force without loss of continuity benefits such as waiting periods and coverage of pre existing diseases. Coverage is not available for the period for which no premium is received.		
Hospital	A hospital 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 enactments specified under the Schedule of Section 56(1) of the said Act OR complies with all minimum criteria as under:		

	1. has qualified nursing staff under its employment round the clock;		
	2. has at least 10 inpatient beds, in towns having a population of less than 10,00,000 and		
	atleast 15 inpatient beds in all other places		
	3. has qualified medical practitioner (s) in charge round the clock;4. has a fully equipped operation theatre of its own where surgical procedures are carried out		
	4. has a fully equipped operation theatre of its own where surgical procedures are carried out5. maintains daily records of patients and makes these accessible to the Insurance company's		
	authorized personnel.		
	Hospitalization means admission in a Hospital for a minimum period of 24 consecutive 'In-Patient		
Hospitalization	Care' hours except for specified procedures/ treatments, where such admission could be for a		
liospitalization	period of less than 24 consecutive hours		
	Illness means a sickness or a disease or pathological condition leading to the impairment of		
	normal physiological function and requires medical treatment.		
	a. Acute condition - Acute condition is a disease, illness or injury that is likely to respond quickly		
	to treatment which aims to return the person to his or her state of health immediately before		
	suffering the disease/illness/injury which leads to full recovery.		
	b. Chronic condition - A chronic condition is defined as a disease, illness, or injury that has one or		
Illness	more of the following characteristics:		
	• it needs ongoing or long-term monitoring through consultations, examinations, check-ups,		
	and /or tests		
	it needs ongoing or long-term control or relief of symptoms		
	it requires your rehabilitation or for you to be specially trained to cope with it		
	it continues indefinitely		
	it recurs or is likely to recur.		
	Injury means accidental physical bodily harm excluding illness or disease solely and directly		
Injury	caused by external, violent, and visible and evident means which is verified and certified by a		
	Medical Practitioner.		
Medical Advice	Medical Advice means any consultation or advice from a Medical Practitioner including the		
	issuance of any prescription or follow-up prescription.		
	Medically necessary treatment means any treatment, tests, medication, or stay in hospital or part		
NA o di o o llu	of a stay in hospital which		
Medically	- must not exceed the level of care necessary to provide safe, adequate and appropriate medical care in scope, duration, or intensity;		
-			
Treatment			
	 must have been prescribed by a medical practitioner, must conform to the professional standards widely accepted in international medical practice. 		
	or by the medical community in India.		
	Medical practitioner means 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 its scope and jurisdiction of license.		
Medical	The Medical practitioner should not be		
Practitioner	The policyholder/insured person himself/herself; or		
	• An authorised insurance intermediary (or related persons) involved with selling or servicing		
	the insurance contract in question; or		
	Employed by or under contractual engagement with the insurance company;		
	Related to the policyholder/insured person by blood or marriage		
	Pre-existing Disease means any condition, ailment, injury or disease:		
	a) That is/are diagnosed by a physician within 48 months prior to the effective date of the policy		
Pre-Existing	issued by the insurer or its reinstatement or		
Disease	b) For which medical advice or treatment was recommended by, or received from, a physician		
	within 48 months prior to the effective date of the policy issued by the insurer or its reinstatement.		
0 10 10	Qualified nurse means a person who holds a valid registration from the Nursing Council of India		
Qualified Nurse	or the Nursing Council of any state in India.		
Rider	Edelweiss Life - Group Critical Illness Rider issued by Us and appended to the Policy		
Rider Premium	The premium payable for the Rider as specified in the Schedule		

Rider Sum Assured	Sum Assured opted under the Rider as specified in the Schedule
Surgery or Surgical Procedure	Surgery or Surgical Procedure 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 from suffering and prolongation of life, performed in a hospital or day care centre by a medical practitioner.



PART C

BENEFITS

Eligible Conditions						
	A person is eligible to become an Insured if he/she satisfies all the following criterias:					
Eligible	i) The person is a valid and existing member of the Group;					
Members	ii) The person is not less than Age 18 and not more than Age 69 on the proposed Effective Date;					
	iii) The person is Your employee OR has taken a loan or other credit facility from You OR is Your					
	account holder OR holds membership of Your organization/association.					

Applicability of a Rider:

9.

If Rider Premium has been received and the Schedule specifies that a Rider is in force under the Base Policy, then the

enefit under the Ride				
Death Benefit		NIL		
Critical Illness Be				
	When payable	Amount Payable		
	-	The Rider Sum Assured in lumpsum.		
	ed below when the Policy and			
	rce AND the Insured survives for bllowing the confirmed date of			
diagnosis We will				
		be terminated and cover under the Base Policy along with		
		the term. You are required to pay the Premiums for the		
	her Riders opted, if any.			
<u>Waiting Period:</u> We will not be liable to make any payment under this Rider if the critical illness has occurre				
	n the date of issuance or the revivo			
Critical Illness		otion & Conditions for applicability sed by the uncontrolled growth & spread of malignant ce		
	sarcoma. Exclusions The following are excluded: - 1. All tumors which are	ancy. The term cancer includes leukemia, lymphoma an histologically described as carcinoma in situ, benign, process, low malignant potential, neoplasm of unknown behavio		
	or non-invasive, including but no	ot limited to: Carcinoma in situ of breasts, Cervical dysplas		
	CIN-1, CIN -2 and CIN-3.			
Cancer of	2. Any non-melanoma s	kin carcinoma unless there is evidence of metastases		
Specified Severity	lymph nodes or beyond;			
openied eete.it,	3. Malignant melanoma t	that has not caused invasion beyond the epidermis;		
		ate unless histologically classified as having a Gleason sco		
		sed to at least clinical TNM classification T2N0M0		
	5. All Thyroid cancers h	istologically classified as T1N0M0 (TNM Classification)		
	below.			
	6. Chronic lymphocytic le	eukaemia less than RAI stage 3		
	7. Non-invasive papillary	cancer of the bladder histologically described as TaNOMO $$		
of a lesser classification				
	8. All Gastro-Intestinal S	Stromal Tumors histologically classified as T1N0M0 (TN		

All tumors in the presence of HIV infection.

	1	The set 1 1 1		
(ii)	The actual undergoing of heart surgery to correct blockage or narrowing in one coronary artery(s), by coronary artery bypass grafting done via a sternotomy through the breast bone) or minimally invasive keyhole coronary artery bypass produced by a coronary angiography and the realization of has to be confirmed by a cardiologist. The following are excluded:			
			gioplasty and/or any other intra-arterial procedure	
		The first occurrence of	of heart attack or myocardial infarction which means the death of a uscle as a result of inadequate blood supply to the relevant area.	
	Myocardial	1. A history of Myocardial Infarction (cocardial Infarction should be evidenced by all of the following criteria: typical clinical symptoms consistent with the diagnosis of Acute for e.g. typical chest pain)	
(iii)	infarction (First Heart Attack-of specified severity)		eristic electrocardiogram changes infarction specific enzymes, Troponins or other specific biochemical	
	,,,	Exclusions The following are excl	luded: Coronary Syndromes	
		2. Any type of a3. A rise in card	diac biomarkers or Troponin T or I in absence of overt ischemic heart in intra-arterial cardiac procedure.	
(iv)	Kidney Failure Requiring Regular Dialysis	End stage renal disease presenting as chronic irreversible failure of both kidneys to function, as a result of which either regular renal dialysis (hemodialysis or peritoneal dialysis) is instituted or renal transplantation is carried out. Diagnosis has to be confirmed by a specialist medical practitioner.		
(v)	Major Organ / Bone Marrow Transplant	The actual undergoing 1. One of the resulted from irreversil 2. Human bone transplant has to be co		
	1		luded: cell transplants slets of langerhans are transplanted	
	Stroke Resulting	Any cerebrovascular incident producing permanent neurological sequelae. This includes infarction of brain tissue, thrombosis in an intracranial vessel, haemorrhage and embolisation from an extracranial source. Diagnosis has to be confirmed by a specialist medical practitioner and evidenced by typical clinical symptoms as well as typical findings in CT Scan or MRI of the brain. Evidence of permanent neurological deficit lasting for at least 3 months has to be produced.		
(vi)	in Permanent Symptoms	Exclusions The following are excluded: 1. Transient ischemic attacks (TIA) 2. Traumatic injury of the brain 3. Vascular disease affecting only the eye or optic nerve or vestibular functions.		
3.	If the Insured men	nber survives the term	No Amount becomes payable	
4	Grace Period		Grace period will be same as the base plan to which this rider is attached.	

Spouse cover option

- 1. An Insured's spouse may also be covered as an Insured under the rider if We have received Premium for the same and We have issued a Certificate of Insurance to the Insured member's spouse.
- 2. If the Insured member dies when the spouse cover option is in force under the Base Policy, then cover for the Insured member's spouse as an Insured under the Policy will continue to be in effect even after the Insured member's death till the end of base policy term.
- 3. If the Insured member ceases to be a member of the Group during the term of the base Policy, cover for the Insured member's spouse under the base Policy and all applicable Riders shall immediately and automatically terminate. If spouse cover is compulsory under Your scheme, then Premium for covering the Insured member's spouse as an Insured will be adjusted against the Premium required to be paid for new members of the Group.

Exclusions

We will not be liable to make any payment under this Rider if the disability of the Insured Member is directly or indirectly due to or caused, occasioned, accelerated or aggravated by any of the following:

- Any Pre-Existing Disease
- Unreasonable failure to seek or follow medical advice.
- Living abroad (living outside India for more than 13 consecutive weeks in any 12 months). This exclusion does not
 apply if the Insured is medically examined and/or has undergone tests in India after the occurrence of the event,
 and is available for medical examination or other reasonable tests in India to confirm the occurrence of an insured
 event
- War or hostilities (whether war be declared or not).
- Civil war, rebellion, revolution, civil unrest or riot.
- Participation in any armed force or peace keeping activities.
- An act of any person acting on their own or on behalf of or in connection with any group or organization to influence by force any group, corporation or government by terrorism, kidnapping or attempted kidnapping, attack, assault, or any other violent means.
- An intentional or self-inflicted act.
- Drug-taking other than under the direction of a qualified medical practitioner, abuse of alcohol or the taking of poison.
- Nuclear fusion, nuclear fission, nuclear waste or any radioactive or ionising radiation.
- Deliberate participation of the Inssured in an illegal or criminal act.

PART D

Surrender Benefit:				
You may surrender the Policy by giving Us a written request provided that all due				
	In case of surrender of master policy, the Company shall give an option to individual members of the group, on such surrender, to continue as an individual Policy and the Company shall continue to be responsible to serve such members till their coverage is terminated.			

Revival

If you have discontinued paying the Premium under the Base Policy and the Rider, then the Rider will automatically lapse along with the Base Policy and it can be revived only in accordance with the terms of the base Policy to which the Rider is attached.

If you have discontinued paying only the Rider premium, the Rider will automatically lapse and the Rider cannot be revived in future.

Free Look

If you are not satisfied with the terms and conditions of the policy, then you can return the policy within 15 days of receiving your policy and period of 30 days in case of electronic policies and policies obtained through distance mode stating the reason for your objection. The Premium paid will be refunded after deducting proportionate risk premium for the period on cover, stamp duty charges and cost of medical expenses.

Specific Rider Terms & Conditions

- 1. The benefits under a Rider which is in force shall be available for Rider Term specified in the Schedule
- 2. <u>Termination of the Rider:</u> The Rider shall terminate immediately and automatically on the occurrence of the earliest of the following:
- (i) The Insured member's death;
- (ii) On Payment of Benefits under this Rider;
- (iii) The Member ceases to be an eligible member of the group;
- (iv) The expiry of the Rider Term;
- (v) The Base Policy being surrendered, terminated, or discontinued.
- (vi) The Rider being surrendered, terminated or discontinued separately.
- This Rider Contract shall be governed by the general terms and conditions of the Base Policy.

Premium adjustment for Members leaving/joining the Group

- **Members Joining the Group:** Pro-rata Premium for the remaining rider term based on rate charged to the Group will be collected.
- **Members exiting the Group:** Pro-rata Premium for the remaining rider term based on rate charged to the Group will be refunded provided no benefit has been paid for the insured member under this rider.

<u>PART – E</u>

Not Applicable.



PART - F

GENERAL TERMS AND CONDITIONS

All the general Terms and conditions like Claim Procedure, Nomination, Assignment, Validity/ Non-disclosure, etc will be same as mentioned in the policy contract of Base Plan to which this Rider is appended to.



PART - G

Grievance Redressal Mechanism:

We have established a Grievance Redressal Mechanism to assist in the resolution of any complaint, grievance, or dispute in respect of the Policy. You are requested to submit your complaint at any of the below mentioned touch points:

- Toll free customer care number: 1-800-2121-212 (Mon-Sat 10 AM TO 7 PM).
- Email us at: GRO@edelweisslife.in
- Write to us at: Customer Care, Edelweiss Life Insurance Company Ltd, 6th Floor, Tower 3, Wing 'B', Kohinoor City, Kirol Road, Kurla (W), Mumbai 400070.
- You can lodge your grievance/complaint at any of our branches/offices

Details of Grievance Redressal officer:

+91-22-71013322 (Between 10 am to 7 pm on Monday to Friday, except public holidays), Email id:

GRO@edelweisslife.in. We will respond with a resolution within 15 calendar days

In case the resolution does not meet your expectations or if you have not received any reply, you may approach the Policyholder's Protection and Grievance Redressal Department on the following contact details:

- IRDAI Grievance Call Centre (Bima Bharosa Shikayat Nivaran Kendra) (IGCC) Toll free No: 155255 / 1800 425 4732
- Email ID: complaints@irdai.gov.in
- Register online at: https://bimabharosa.irdai.gov.in/LoginAdmin/Login

Address for sending the complaint through courier / letter:

Policyholder's Protection and Grievance Redressal Department Insurance Regulatory and Development Authority of India Survey No. 115/1 Financial District Nanakramguda Gachibowli Hyderabad – 500 032, Telangana

At any point of time, if the resolution does not meet your expectation or if you have not received any reply within a period of one month from the date of receipt of complaint by the Company, you may approach the Insurance Ombudsman for redressal as per Rule 13 and 14 of the Insurance Ombudsman Rules, 2017 ('Insurance Ombudsman Rules').

Powers of Insurance Ombudsman under Rule 13 of the Insurance Ombudsman Rules:

The Ombudsman shall receive and consider the following complaints or disputes relating to:

- a. delay in settlement of claims, beyond the time specified in the Regulations, framed under Insurance Regulatory and Development Authority of India Act, 1999;
- b. any partial or total repudiation of claims by the Company;
- c. disputes over Premium paid or payable in terms of insurance Policy;
- d. misrepresentation of Policy terms and conditions at any time in the Policy Document or Policy contract;
- e. legal construction of insurance policies in so far as the dispute relates to claim;
- f. policy servicing related grievances against the Company and their agents and intermediaries;
- g. issuance of life insurance Policy including health insurance policy which is not in conformity with the Proposal Form submitted by the Proposer;
- h. non-issuance of insurance Policy after receipt of Premium in life insurance including health insurance; and
- i. any other matter resulting from the violation of provisions of the Insurance Act, 1938 as amended from time to time or the Regulations, circulars, guidelines or instructions issued by the IRDAI from time to time or the terms and conditions of the Policy contract, in so far as they relate to issues mentioned at clauses (a) to (f) as mentioned above.

Manner in which complaint is to be made in accordance with Rule 14 of the Insurance Ombudsman Rules:

- 1. Any person who has a grievance against the Insurer/Company/Us, may himself or through his legal heirs make a complaint in writing to the Ombudsman within whose territorial jurisdiction the branch or office of the Company, complaint against or the residential address or place of residence of the complainant is located.
- 2. The complaint shall be in writing duly signed by the complainant or through his legal heirs, Nominee or

Assignee and shall state clearly the name and address of the complainant, the name of the branch or office of the insurer against which the complaint is made, the fact giving rise to complaint, supported by documents, the nature and extent of the loss caused to the complainant and the relief sought from the Ombudsman.

- 3. No complaint to the Insurance Ombudsman shall lie unless:
 - (a) the complainant makes a written representation to the Company named in the complaint and
 - i. either the Company had rejected the complaint; or
 - ii. the complainant had not received any reply within a period of one month after the Company received the
 - complainant's representation; or
 - iii. the complainant is not satisfied with the reply given to him by the Company;
 - (b) The complaint is made within one year
 - i. after the order of the Company rejecting the representation is received; or
 - ii. after receipt of decision of the Company which is not to the satisfaction of the complainant;
 - iii. after expiry of a period of one month from the date of sending the written representation to the Company if the Company named in the complaint fails to furnish reply to the complainant.
- 4. The Insurance Ombudsman shall be empowered to condone the delay in filing a complaint as mentioned above under
 - (3) (b), as he may consider necessary, after calling for objections of the Company against the proposed condonation and after recording reasons for condoning the delay and in case the delay is condoned, the date of condonation of delay shall be deemed to be the date of filing of the complaint, for further proceedings under the Insurance Ombudsman Rules.
- 5. No complaint before the Insurance Ombudsman shall be maintainable on the same subject matter on which proceedings are pending before or disposed of by any court or consumer forum or arbitrator.

The list of the Ombudsman with their addresses is given below:

Office of the Insurance Ombudsman,	Office of the Insurance Ombudsman,
Jeevan Prakash Building, 6th floor,	2 nd Floor, Janak Vihar Complex,
Tilak Marg, Relief Road,	6, Malviya Nagar, Opp. Airtel Office, Near New Market,
AHMEDABAD-380 001.	BHOPAL-462 003.
Tel.: 079-25501201/02/05/06	Tel.:- 0755-2769201/9202
10 073 23301201702703700	101 0733 270320173202
Email: bimalokpal.ahmedabad@cioins.co.in	Email: bimalokpal.bhopal@cioins.co.in
Office of the Insurance Ombudsman	Office of the Insurance Ombudsman,
62, Forest Park,	SCO No.101-103, 2nd Floor, Batra Building, Sector 17-D,
BHUBANESHWAR-751 009.	CHANDIGARH-160 017.
Tel.: 0674-2596455/2596461	Tel.: 0172-2706196/2706468
Email: <u>bimalokpal.bhubaneshwar@cioins.co.in</u>	Email: bimalokpal.chandigarh@cioins.co.in
Office of the Insurance Ombudsman,	Office of the Insurance Ombudsman,
Fathima Akhtar Court, 4 th Floor, 453 Anna Salai, Teynampet,	2/2 A, Universal Insurance Bldg., Asaf Ali Road,
CHENNAI-600 018.	NEW DELHI-110 002.
Tel.: 044-24333668/24335284	Tel.: 011- 23232481/23213504
Email: bimalokpal.chennai@cioins.co.in	Email: bimalokpal.delhi@cioins.co.in
Office of the Insurance Ombudsman,	Office of the Insurance Ombudsman,
Jeevan Nivesh, 5 th Floor, Nr. Panbazar over bridge, S.S. Road,	6-2-46, 1st Floor, "Moin Court", Lane Opp. Saleem
GUWAHATI-781 001 (ASSAM).	Function Palace, A. C. Guards,
Tel.: 0361- 2632204 / 2602205	Lakdi-Ka-Pool,
	HYDERABAD-500 004.
Email: bimalokpal.guwahati@cioins.co.in	Tel.: 040-23312122
	Email: bimalokpal.hyderabad@cioins.co.in
Office of the Insurance Ombudsman,	Office of the Insurance Ombudsman,
2nd Floor, Pulinat Bldg., Opp. Cochin Shipyard, M.G. Road,	Hindustan Building, Annexe, 4 th Floor, 4, C.R.Avenue,
ERNAKULAM-682 015.	KOLKATA - 700072
Tel: 0484-2358759/2359338	Tel: 033-22124339/22124340
Email: bimalokpal.ernakulam@cioins.co.in	Email: <u>bimalokpal.kolkata@cioins.co.in</u>

Office of the Insurance Ombudsman,	Office of the Insurance Ombudsman,
6th Floor, Jeevan Bhawan, Phase-II,	3 rd Floor, Jeevan Seva Annexe, S.V. Road, Santacruz(W),
Nawal Kishore Road, Hazratganj,	MUMBAI-400 054.
<u>LUCKNOW-226 001.</u>	Tel: 022- 69038821/23/24/25/26/27/28/28/29/30/31
Tel : 0522 -2231331/2231330	
	Email: bimalokpal.mumbai@cioins.co.in
Email: bimalokpal.lucknow@cioins.co.in	
Office of the Insurance Ombudsman,	Office of the Insurance Ombudsman,
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You may refer to the list of Ombudsman with their addresses on https://cioins.co.in/Ombudsman