

## All RISK INSURANCE POLICY

**PREAMBLE:** ICICI Lombard General Insurance Company Limited ("the Company"), having received a Proposal and the premium from the Policy holder 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 Policy holder 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 amount will be paid by the Company.

Policy Holder Name	ICICI BANK LTD	Policy No.	4001/R/ICICIBANKLTD/169479965/00/000
Mailing Address	ICICI BANK LTD LAXMI TOWERS GBLOCK BKC BANDRA EAST MUMBAI MAHARASHTRA , MUMBAI, MAHARASHTRA - 400025, INDIA	Period of Insurance	00:00 of 12-Apr-2019 To Midnight of 11-Apr-2021
Mobile Number	9820063473	Policy Issuing Office	Mumbai
Landline Number	NA	Policy Issued On	17-Apr-2019
Name of Insured	As per Individual Certificate	Geographical Limits	Within India
Insured Mailing Address	As per Individual Certificate	Basis of Valuation	As per Individual Certificate
Insured Contact Number	As per Individual Certificate	Total Sum Insured	As per Individual Certificate
Insured Email Id	As per Individual Certificate		

### Detail of the sum Insured

Sr. No.	Risk SI Component	Make/Manufacturer	Model	Coverage	Sum Insured (₹)	Unique Identification Number	Invoice number	Date of Purchase	Year of Manufacture
1	As per Individual Certificate								

### Premium Details (₹)

Basic Premium	Service tax	Swachh Bharat Cess	Krishi Kalyan Cess	Total Premium
00.00	00.00	00.00	00.00	00.00


Service Tax Reg. No	Service Tax Code	Category	
GIS/Mumbai-I/1528/2001	AAACI7904GST001	General Business Services 00440005	The stamp duty of ₹ 0.5 paid vide receipt/ challan no. 0 dated 17-Apr-2019

### Intermediary Details

Agency Name	ICICI BANK MUMBAI VILEPARLE WEST	Agency Code	201861518286	Mobile No.	9820063473	Email Id	jigs.tailor@gmail.com
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Clauses / Conditions / Warranties / Exclusions: As per Individual Certificate

Subject otherwise to terms and conditions of All Risk Insurance Policy.

<p>For ICICI Lombard General Insurance Company Ltd.</p>  <p style="text-align: center;">Authorised Signatory</p>	<p><b>Important:</b> Insurance benefit shall become voidable at the option of the company, in the event of any untrue or incorrect statement, misrepresentation non-description of any material particular in the proposal form/ personal statement, declaration and connected documents, or any material information has been withheld by beneficiary or anyone acting on beneficiary's behalf to obtain insurance benefit. Refer to policy wordings for the terms and conditions. All disputes are subject to the jurisdiction of Mumbai High Court only. For claims, please call us at our toll free no. 1800 2666 or e-mail to us at customersupport@icicilombard.com write to us at ICICI Lombard House, 414 Veer Savarkar Marg, Near Siddhi Vinayak Temple, Prabhadevi, Mumbai - 400 025.</p>
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This policy has been issued based on the details furnished by the policyholder. Please review the details furnished in the policy certificate and confirm that same are in order. In case of any discrepancy/ variation, you are requested to call us immediately at our toll free no. 1800 2666 or write to us at customersupport@icicilombard.com. In the absence of any communication from you within the period of 15 days of receipt of this document, the policy would be deemed to be in order and issued as per your proposal. All refunds and claim payment will be done through NEFT only. This policy certificate is to be read with the policy wordings, as one contract or any word or expression to which a specific meaning has been attached in any part of this policy shall bear the same meaning wherever it may appear.

## ICICI Lombard General Insurance Company Limited

IRDA Reg. No. 115  
Toll free no : 1800 2666

CIN: L67200MH2000PLC129408

UIN: IRDAN115P0001V01200102

**Mailing Address:**  
401 & 402, 4th Floor Interface 11, New Linking Road,  
Malad (West), Mumbai - 400 064

**Registered Office:**  
ICICI Lombard House 414, Veer Savarkar Marg Near  
Siddhi Vinayak Temple, Prabhadevi, Mumbai 400025

Alternate no : +918655 222 666 (chargeable)  
E-mail: customersupport@icicilombard.com  
Website: www.icicilombard.com

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