

## **Personal Accident Insurance – Insurance Product Information Document**

**Type of Policy:** Personal Accident Insurance

### **Basic Cover Provided:**

If death or bodily injury to an Insured Person is caused solely by violent accidental external and visible means, the Insurer (People's Insurance PLC) will pay the benefits as follows, if it is specified in the Policy Schedule.

1. Death – The Capital Sum Insured specified in the Policy Schedule.
2. Permanent Total Disablement – The Capital Sum Insured specified in the Policy Schedule.
3. Permanent Partial Disablement – Percentage of the Capital Sum Insured as specified in the Policy.
4. Temporary Total Disablement for a longer period than one week - Weekly compensation specified in the Policy Schedule.
5. Temporary Partial Disablement for a longer period than one week - Weekly compensation specified in the Policy Schedule.

*(For more details about the basic cover, please refer page no. 02 “ Table of permanent disablement” of the policy wording)*

### **Additional Covers (which can be obtained by payment of an additional premium):**

1. Motorcycling cover - *Deletion of the “Exception No. 01” of the policy wording*
2. Strike Riots & Civil Commotion - *Please refer the endorsement attached to the policy - “SRCC Endorsement – SR - 07”*
3. Terrorism - *Please refer the endorsement attached to the policy “Terrorism Endorsement – TR 13”*
4. Any other additional cover as specified in your Policy

### **Key feature(s):**

- Cover is operative 24 hours, worldwide

### **Provisions:**

1. Total sum payable under the policy will not exceed the Capital Sum Insured
2. Claims for disappearance are payable only after 12 months with appropriate evidence.

*Please refer page no 02, point no. 02 under “Provisions” section*

### **What is not covered (Exceptions)**

1. Motor Cycling (if not obtained as an additional cover) Racing of any kind (other than on foot)/ Professional sports on snow or ice / Mountaineering with ropes and / or guides, Underwater activities, Pot holing / Past time activities involving exceptional risk of accident
2. Flying or any aerial activity except as passenger in a properly licensed power driven aircraft. The word Passenger does not mean any member of the aircrew or a technician working in or upon an aircraft.
3. Childbirth or pregnancy notwithstanding that such event may have been accelerated or induced by accident.
4. Being under the influence of alcohol, Intentional self-injury or suicide, Deliberate exposure to exceptional danger except in an effort to save human life.
5. War
6. Riot & Strike and Terrorism (if not obtained as additional covers)
7. Whilst on duty or service in any armed force.
8. Persons who are below the lower age limit (18 years) and above the upper age limit (65 years)
9. a) Ionizing radiations from or contamination by radioactivity from any nuclear fuel or from any nuclear installation, reactor or other nuclear assembly or nuclear fuel  
b) The radioactive, toxic explosive or other hazardous or contaminating properties of any nuclear installation, reactor or other nuclear assembly or nuclear component thereof  
c) any weapon of war employing atomic or nuclear fission and / or fusion or other like reaction or radioactive force or matter.

*For more details please refer page no 01 & 02, "Exceptions" section of the policy wording*

### **Mode of Payment of Premium:**

Annual Premium has to be paid for the Policy (unless mentioned otherwise in the Policy Schedule) and for any subsequent renewals.

### **Importance of having Nominees:**

It is essential to nominate beneficiaries at the time of policy issuance. Changes to nominations can be made during the policy period as per policy terms. This eliminates any disputes when settling a claim.

### **Claims Procedure and Required Documents:**

1. Insured should inform the incident to our contact center 0112-206306 within the time period stated in the policy.
2. Insurer request the claim form and other required documents from the Insured.
3. Insured should submit the duly completed claim form and other requested documents.  
If it is necessary insured may request to have an opinion from medical practitioner appointed by the insurer.
4. Insurer scrutinizes the documents and decides the liability of the claim.  
If the liability is in order, the Insurer issue the offer letter informing approved amount and loss voucher requesting other required documents for claim settlement.  
If liability cannot be admitted, the Insurer issue the rejection letter.

#### Required Documents:

##### A. Death Claims

1. Duly filled Claim form
2. Death Certificate
3. Postmortem Report & Inquest Proceedings
4. Police Investigation report if applicable

##### B. Permanent Disablement

1. Duly filled Claim form
2. Medical Examination Report
3. Diagnostic Card and other medical reports
4. Police Investigation report if applicable

##### C. Temporary Disablement

1. Duly filled Claim form
2. Diagnosis card and other medical reports
3. Medical Certificate
4. Medical Leave confirmation from employer

*Please refer page no 03, point no 05, under “Conditions” section of the policy wording*

### **Fraud:**

If any claim under this policy shall be in any respect fraudulent or if any fraudulent means, or devices be used by the Insured or anyone acting on his behalf or if any destruction, injury or damage be occasioned by the willful act or with the connivance of the Insured, all benefits under this policy shall be forfeited.

*Please refer page no 03, point no 07, under “Conditions” section of the policy wording*

## **Obligations of the Policyholder:**

### **Obligations of the policyholder in disclosing material facts**

- At the time of purchase:- Disclose all material facts requested in the Proposal Form, truly and accurately, to avoid any claim rejection.
- During the policy term:- Notify the Insurer of any significant changes in risk or personal information.

*Please refer page no 03, point no 03, under “Conditions” section of the policy wording*

### **Obligations of the policyholder when a claim is made**

- When making a claim:- Provide all necessary documents and details as mentioned in the Claim Procedure along with the Claim Form.

*Please refer page no 03, point no 05, under “Conditions” section of the policy wording*

- Payment of Premium:- Should be as per the Premium Payment Warranty in the Policy  
*Please refer page no 04, point no 11, under “Conditions” section of the policy wording*

## **Complaints Procedure:**

We are committed to serve you with passion and willing to receive your feedback. If you are not satisfied with our services, you can lodge a complaint by below methods;

- By telephone - Customer Care Officer - 011 2126136
- By email - [pilassist@peoplesinsurance.lk](mailto:pilassist@peoplesinsurance.lk)
- By WhatsApp - 0716230048
- By fax - 011 2126109
- By post - Customer Care Officer, People's Insurance PLC, No. 07, Havelock Road, Colombo 05
- Via online - Complaint Submission Form is available on our website [www.peoplesinsurance.lk](http://www.peoplesinsurance.lk) → Please click on the "Complaints" tab
- By visiting

Below information to be provided when lodging a complaint;

- I. Complaint in brief
- II. Your name and contact details
- III. References: Policy No. / Claim No.
- IV. Any supporting documents

The Trilingual Complaints Handling Procedure can be downloaded from our website - [www.peoplesinsurance.lk](http://www.peoplesinsurance.lk) → Please click on the "Complaints" tab

### **Dispute Resolution:**

If you are not satisfied with the resolution given by us for a complaint lodged, you have the option to use following Alternative Dispute Resolution (ADR) mechanisms.

- I. Address your concerns to:- Insurance Ombudsman of Sri Lanka  
No. 1, Bethesda Place, Colombo 05.  
[info@insuranceombudsman.lk](mailto:info@insuranceombudsman.lk)  
011 2505542 / 011 250 5041
  
- II. Arbitration:- As per the Arbitration Clause in the Policy
- III. Address your concerns to:- Director Investigations  
Insurance Regulatory Commission of Sri Lanka  
Level 11, East Tower, World Trade Centre  
Colombo 01  
011 2396184-9 / 011 2335167  
[investigation@ircsl.gov.lk](mailto:investigation@ircsl.gov.lk) / [info@ircsl.gov.lk](mailto:info@ircsl.gov.lk)

*Please refer page no 04 & 05, "Complaints Procedure" section of the policy wording*

### **A Few Things to Remember**

#### **Cancellation of the Insurance:**

This Insurance may be terminated at any time at the request of the Insured, in which case the Insurer will retain the customary short period rate for the time the Policy has been in force, subject to no claims being made. This Insurance may also at any time be terminated at the option of the Insurer on notice to that effect being given to the Insured, in which case the Insurer shall be liable to repay on demand a ratable proportion of the premium for the unexpired term from the date of the cancellation.

*Please refer page no 03, point no 08, under "Conditions" section of the policy wording*

The due observance and fulfilment of the terms and conditions of this Policy shall be conditions precedent to any liability of the Insurer to make any payment under this policy.

#### **Important Notes:**

1. This Insurance Product Information Document (IPID) is intended to provide a summary of the main cover and additional covers (if applicable) and key features of the Policy and is not personalized to your specific individual needs. Please note that all matters of whatever nature pertaining to this Insurance (including but not limited to claims, interpretation of terms and conditions and litigation etc.) shall be governed by the terms, conditions and exclusions of the Policy which shall prevail over the contents of this document.

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(A Subsidiary of People's Leasing & Finance PLC and People's Bank) - Company No. PB 3754 PQ



**For Further Information:**

If you require any further information, you can make a request via

- Telephone - 0112126126
- Email - [pilassist@peoplesinsurance.lk](mailto:pilassist@peoplesinsurance.lk)
- Visiting any of our offices island wide