

Customer Information Sheet

Contaminated Product Insurance Policy

This document provides only key information about your policy. Please refer to the policy document for detailed terms and conditions.

Sr. No.	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy / Clause Number
1	Product Name	Contaminated Product Insurance Policy	NA
2	Unique Identification Number (UIN) allotted by IRDAI	IRDAN125CP0002V01201920	NA
3	Structure	State basis of Sum / Limit Insured - Indemnity Basis	NA
4	Interests Insured	Companies anywhere in the supply chain of topical and ingestible products including but not limited to Pharma Companies.	NA
5	Sum Insured / Motor Insured Declared Value Scope	<<as per policy schedule>>	Policy Schedule
6	Policy Coverage	The events covered under the policy are: a) Accidental Contamination b) Malicious Product Tamper c) Adverse Publicity d) Government Recall e) Intentionally Impaired Ingredients Also covers Events arising from a Cyber Event	3.1 Insured Event
		Costs Indemnified a. Examination costs b. Media and general advertising costs c. Finding tracing and sorting d. Examination costs after an Insured Event e. Transportation f. Storage g. Disposal and/or destruction where necessary h. Reworking, repacking, relabeling and redistribution i. Additional staffing costs j. Retail slotting fees and cancellation fees k. Out-of-pocket expenses l. Cost of independent consultants m. Costs incurred by public authority n. Third Party Recall o. Legal costs p. Replacement costs q. Loss of Gross Profit r. Rehabilitation and Marketing costs s. Decontamination Costs t. Loss reduction	2.2 Costs

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7	Add-on Cover	<<as per policy schedule>>	Policy Schedule
8	Loss Participation	<<as per policy schedule>>	Policy Schedule
9	Exclusions	This policy will not pay for any loss arising out of, or in any way connected with:	5. Exclusions
		<ul style="list-style-type: none"> • Asbestos - asbestos or asbestos containing materials. • Breach of warranty - any breach of warranty or any breach of guarantee of fitness for purpose whether written or implied when caused solely by such breach. • Carcinogens - any accidental contamination arising out of carcinogens, regardless of whether such carcinogens are shown to have other non-carcinogenic effects. • Cross liabilities • Deterioration, decomposition, or transformation • Employees - Injury to any Employee arising out of and in the course of the employment or engagement of such person by the Named Insured. • Excess - the amount of the Excess specified in the policy schedule • Failure of documentation - any failure to maintain documentation of the manufacturing process required by any existing governmental or regulatory standards. • Fines or penalties • First Discovery prior to sale • Fraudulent or Illegal Acts • Genetic engineering, hormone treatment • Intentional breach of regulation • Knowledge prior to Inception Date • Liability for third party losses - any compensation or damages payable to any third party (including without limitation claimant cost and expenses and defence costs) solely in respect of Injury or Property Damage (including any economic or financial loss suffered by a third party arising out of the Injury or Property Damage). • Nuclear radiation • Products in air and water craft • Punitive damages • Redesign • Terror • War 	
10.	Special Conditions and Warranties (if any)	<<as per policy schedule>>	Policy Schedule
11.	Admissibility of Claim	<ul style="list-style-type: none"> • Mention the broad principle of admissibility / denial of claims [Example: Reporting of loss occurrence; Duty of care & loss minimization; Exclusion of Willful Negligence] <p>1. Intimation of a claim or any circumstances which may give rise to any claim should be reported immediately</p>	NA

Sr. No.	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy / Clause Number												
		<p>2. No admission, offer, promise or payment of liability without Insurer consent.</p> <p>3. Provide documents in support of your claims</p> <p>4. Provide all such information and assistance to company which is required.</p> <p>5. Company has right to defend the claim for Insured.</p> <ul style="list-style-type: none"> • Include a sample claim calculation process for retail products <p>Claim shall be paid as per following calculation:-</p> <table border="1" data-bbox="322 363 893 560"> <thead> <tr> <th data-bbox="322 363 790 400">Head</th> <th data-bbox="790 363 893 400">Example</th> </tr> </thead> <tbody> <tr> <td data-bbox="322 400 790 432">Liability / Expenses as covered under the policy (a)</td> <td data-bbox="790 400 893 432">100000</td> </tr> <tr> <td data-bbox="322 432 790 464">Defense cost (b) (wherever applicable)</td> <td data-bbox="790 432 893 464">20000</td> </tr> <tr> <td data-bbox="322 464 790 496">total loss amount (c = a+b)</td> <td data-bbox="790 464 893 496">120000</td> </tr> <tr> <td data-bbox="322 496 790 528">Deductible (d)</td> <td data-bbox="790 496 893 528">10000</td> </tr> <tr> <td data-bbox="322 528 790 560">Net Payable amount (c-d)</td> <td data-bbox="790 528 893 560">110000</td> </tr> </tbody> </table>	Head	Example	Liability / Expenses as covered under the policy (a)	100000	Defense cost (b) (wherever applicable)	20000	total loss amount (c = a+b)	120000	Deductible (d)	10000	Net Payable amount (c-d)	110000	
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12.	Policy Servicing - Claim Intimation and Processing	<ul style="list-style-type: none"> • Toll free / IVRS number of the Insurer: 120 6234 6234 / 022-6234 6234 • Website: www.hdfcergo.com Email : care@hdfcergo.com • Details of designated company officials to be contacted in time of claim Liability Claims Manager – email ID - care@hdfcergo.com • Turn Around Time (TAT) for claims settlement <ol style="list-style-type: none"> 1. Registration of claim – T +1 days 2. List of requirements – 7 days from registration 3. Claim settlement / Denial = T+30 days (T = date of receipt of last documents) <ul style="list-style-type: none"> • Escalation Matrix when TAT is not satisfied <p>Email to – liabilityclaims@hdfcergo.com</p>	NA												
13.	Grievance Redressal and Policyholders Protection	<p>If You have a grievance about any matter relating to the Policy, or Our decision on any matter, or the claim, You can address Your grievance as follows:</p> <p>Our Grievance Redressal Officer</p> <p>If you have a grievance that you wish us to redress, you may contact us with the details of your grievance through:</p> <ul style="list-style-type: none"> • Call Centre - 120 6234 6234 / 022-6234 6234 • Emails – grievance@hdfcergo.com • Contact Details for Senior Citizens: 022 6242 6226 Email ID: seniorcitizen@hdfcergo.com Designated Grievance Officer in each branch. • Company Website – www.hdfcergo.com • Courier - Any of our Branch office or corporate office 	Grievance Redressal Procedure												

Sr. No.	Title	Description (Please refer to applicable Policy Clause Number in next column)	Policy / Clause Number
		<p>You may also approach the Complaint & Grievance (C&G) Redressal Cell at any of our branches with the details of your grievance during our working hours from Monday to Friday.</p> <p>If you are not satisfied with our redressal of your grievance through one of the above methods, you may contact our Head of Customer Service at</p> <p style="text-align: center;">The Complaint & Grievance Redressal Cell, HDFC ERGO General Insurance Company Limited D-301, 3rd Floor, Eastern Business District (Magnet Mall), LBS Marg, Bhandup (West), Mumbai – 400078, Maharashtra</p> <p>In case you are not satisfied with the response / resolution given / offered by the C&G cell, then you can write to the Chief Grievance Officer of the Company at the following address</p> <p style="text-align: center;">To the Chief Grievance Officer HDFC ERGO General Insurance Company Limited D-301, 3rd Floor, Eastern Business District (Magnet Mall), LBS Marg, Bhandup (West), Mumbai - 400078, Maharashtra e-mail: cgo@hdfcergo.com</p> <p>Grievance may also be lodged at IRDAI Integrated Grievance Management System- https://bimabharosa.irdai.gov.in</p> <p>You may also approach the nearest Insurance Ombudsman for resolution, if your grievance is not redressed by the Company. The contact details of Ombudsman offices are below if your grievance pertains to:</p> <ul style="list-style-type: none"> • Insurance claim that has been rejected or dispute of a claim on legal construction of the policy • Delay in settlement of claim • Dispute with regard to premium • Non-receipt of your insurance document <p>You may also refer Our website www.hdfcergo.com https://www.hdfcergo.com/customer-voice/grievances for detailed grievance redressal procedure.</p>	
14.	Obligations of the Policyholder	<ul style="list-style-type: none"> • To disclose all information correctly sought by the insurer at time of filling the proposal form • In case of any change / modification / addition to the already declared information the same shall be brought to the notice of the Insurer immediately • Non-disclosure of material information may affect the claim settlement. <p>Disclosure of other material information during the policy period</p>	NA

Declaration by the Policy Holder:

I have read the above and confirm having noted the details.

Place: _____

Date: _____

(Signature of the Policyholder)

Note:

In case of any conflict, the terms and conditions mentioned in the policy document shall prevail.