TITLE INSURANCE

POLICY WORDINGS

Property:

Insured Use: Development of ……… specified in Planning Permission number ………

Insured: …… and all successors in title of the foregoing including any appointed society relating to the development, including but not limited to any purchaser, mortgagee, transferee, chargee, tenant, assignee, trustee, beneficial owner or successor for the time being of the Property or any part of the Property and/or the rights therein or associated therewith.

Commencement Date:

Expiry Date:

Sum Insured:

Premium:

Excess: (1% of Sum Insured or 5% of the claim payout whichever is greater)

Contract of Insurance

The Insurer will indemnify the Insured from the Commencement Date against Loss and Expenses sustained by the Insured as a result of the Insured Risks subject to the terms of this Policy including the Conditions and Exclusions.

This Policy is a contract between the Insurer and the Insured and is conditional on payment of the Premium.
Loss

Losses sustained in the event of a claim or Order due to any or all of the Insured Risks, such loss being:

1. at the date of an Order or Settlement, the adverse difference between the Market Value assuming that there is no Insured Risk and the Market Value subject to an Order or Settlement
2. the cost of any alteration, demolition and re-instatement of the Property (which includes any part of a building or construction on or forming part of the Property) required by an Order
3. the cost of works to the Property (including planning costs, architects’ and surveyors’ fees) for the purpose of the Insured Use begun or contracted for before the commencement of proceedings relating to the Insured Risk to the extent that such cost is rendered abortive by an Order or Settlement and insofar as it is not reflected in the value of the Property with the Insured Use so far as it had progressed
4. sums payable pursuant to a Settlement
5. compensation or damages awarded against the Insured in respect of the Insured Risks including Expenses
6. any other costs and expenses incurred with the written consent of the Insurer including costs and expenses incurred by with the Insurer’s prior written agreement in taking or defending any action at law or otherwise in connection with an Insured Risk.

Insured Risk

The Insured is covered for third party challenges based on the following matters which were not discovered prior to the Commencement Date:

1. The Title to the Property belonging to someone other than the Insured
2. Title to the Property is not good and marketable
3. Descriptions and plans in historic deeds to the Property are inadequate and/ or due to the number of historic deeds in the chain of title to the Property it is impossible to confirm that the occupational extent of the Property matches the legal extent
4. There are missing deeds or errors in the drafting and/or execution of links in the chain of the Title to the Property
5. The Property or part of the Property has encroached upon an adjoining owner’s property
6. A previous owner or the vendor of the Property sold or disposed of the Property
   (i) Where the Title to the Property has been transferred by way of a gift; or
   (ii) Where a payment for the transfer of the Title to the Property has been made and that payment was at less than the market value of the Property as stated in the ready reckoner (as published by the respective State governments each year) at the date of the transfer;

   where the transfer is made with an intent to defeat or delay the creditors of the transferor(s) as stipulated in Sec. 53 of the Transfer of Property Act 1882 and in any of the above situations the transfer of the Property is set aside by a Court having competent jurisdiction holding such transfer to be null and void
7. An Adverse Entry that would have been identified in the Searches
8. If the Property is leasehold and the Borrower’s lease is inconsistent with the ownership of the Property or any superior lease and a head lessor establishes or attempts to establish an adverse interest after the Commencement Date provided that:
   8.1. There has been no breach of the headleases by the Borrower other than non-payment of rent where the Landlord is absent, and
   8.2. That the Insured has not communicated with the Insurer’s written consent with any party considered to be entitled to enforce an adverse interest or applied to the Lands Tribunal or to a Court in respect of an adverse interest
9. If the property is leasehold and the lease is defective and as a result the **Insured** does not have a good and marketable title
10. A right of occupation pursuant to an inferior interest in the **Property**

11. There are errors or omissions in the drafting and / or registration of the title interest pursuant to which the **Property** is held which results in the unenforceability of provisions which benefit the **Insured** or adversely impacts on the **Insured**’s obligations pursuant to the title document and / or registration of the title document

12. The local authority takes enforcement action because of a failure on part of a predecessor in title to comply with the terms and conditions of the building permissions, local development control regulations and local town planning laws including where the developer is required to make certain non-monetary contributions and perform certain acts towards social services due to the new development and due to such failure on part of a predecessor in title, the property insured by the **Insurer** is adversely affected

13. Where an occupancy certificate, issued by the local town planning authority certifying that a building is constructed as per the sanctioned plans and is fit for occupancy, is not available in a situation where the **Property** includes land and structure constructed on such land and both the land and structure are owned by the **Insured**

14. The **Property** does not benefit from necessary legally constituted **Rights** required in connection with the **Insured Use**

15. A **Right** is incapable of being exercised because the title to the route thereof is burdened by rights, restrictions, covenants and reservations in favour of third parties

16. Where there is no organisation of flat owners and there is a challenge by third parties to common parts of the **Property**

17. The **Insured Use** constitutes a breach of **Burdens**

18. The title to the **Property** may be subject to unknown **Burdens** or variations or discharge of burdens which may have been imposed in historic deeds executed prior to the **Commencement Date**

19. A third party has the benefit of legally constituted rights, exceptions, reservations, and conditions over the **Property** which prevents the **Property** being used for the **Insured Use**

20. An historic transaction is subject to an act of forgery or fraud by a third party that adversely affects the **Insured’s Rights** and/or the **Title** to the **Property**

**Exclusions:**

1. Changes in the **Insured Use** of the **Property**.
2. Defects in the **Title** charges encumbrances adverse claims or other such matters affecting the **Property** that would fall within the **Insured Risks** but which:

   2.1.1. The **Insured** agreed to or allowed to happen before, on or after the **Commencement Date**;
   2.1.2. The **Insured** was aware of but omitted to take steps/actions to safeguard its rights in the **Property**;
   2.1.3. The **Insured** knew about on the **Commencement Date** and which the **Insured** did not tell the **Insurer** about prior to the **Commencement Date**;
   2.1.4. are created or are attached to the **Property** after the **Commencement Date** that do not form part of the **Insured Use**; and/or
   2.1.5. would not have happened or been created had the **Title** or any interest in the mortgage been acquired for value in good faith by the **Insured**

3. Any statutory rights relating to precious metals coal petroleum and other substances which may be on or under the **Property** and any rights to use the **Property** for any purpose in connection with those substances including but without limitation extraction
4. Public utility undertakers (or a private corporation which is a successor public utility) having statutory rights to carry out works affecting the Property
5. Any one or more of the following:

5.1.1. Environmental contaminants or hazardous waste or any pollution or contamination of the Property or part of the Property;
5.1.2. the Property or any part of the Property being situated within a flood plain as determined by reference to the information from time to time published by the Environment Agency;
6. Any defects in the Title charges encumbrances adverse claims or other such matters affecting the Property or any losses not directly attributable to any matter covered by this Policy
7. Any physical damage to the Property.
8. Any defects in the Title charges encumbrances adverse claims or other such matters affecting the Property or any losses that would normally be covered by a householder’s buildings insurance policy.
9. Any claim arising from the insolvency of the Insured or the directors of a limited company that is the Insured provided however that this exclusion will not apply to Insured Risk 6 of this policy
10. Any claim arising from the lack of any operating licence, certificates or statutory consents for the use of the Property
11. Any claim arising from any rights which were being exercised on under or over the Property at the Commencement Date
12. Any claim arising out of the failure to pay the reasonable proportion of the costs of maintaining or repairing the access ways pipes cables and/or conduits
13. Any claim arising due to a misrepresentation by the Insured during the title due diligence conducted by the Insured’s lawyers
14. Claims arising out of missing government records or incorrect recording of data maintained by the government or other authorities in charge of maintaining records where Searches are conducted and relied upon by the Insurer
15. Any claims affecting the title which are derived from political matters and/or fraud, duress, undue influence and changes in law (including but not limited to planning law) and regulations by governmental agencies or third parties acting as agents of any such agencies or in such matters on behalf of such agencies
16. Any claims relating to tribal rights over agricultural lands.

1. Definitions:

Throughout this Policy certain words and expressions are printed in bold type and they have the meanings set out below:-

1.1 Insurer means HDFC ERGO General Insurance Company Limited.
1.2 The Insured means the party referred to in the Policy Schedule
1.3 Adverse Entry means any inaccuracy or omission in the Searches which reduces the Market Value of the Property.
1.4 Burden means a restrictive covenant, exception, reservations or condition as constituted under a statute, which is valid and subsisting and which restricts or adversely impacts on the Insured Use of the Property
1.5 Expenses means costs and expenses incurred:
   a) by the Insurer to defend, minimise, mitigate or defeat a claim, or to reduce or eradicate the Insured Risks or the effect or potential effect of the Insured Risks, or to negotiate a Settlement with a third party
   b) by the Insured and payable to third parties in order to pursue defend or settle a claim which has been accepted by the Insurer provided that these amounts are approved by the Insurer in writing
HDFC ERGO General Insurance

Sum Insured means the amount stated in the Policy Schedule as may be reduced in accordance with clause 3.8 of the How to Claim section of this Policy. This is the total amount of money that the Insured is insured for under this Policy and the maximum amount (including Interest and Expenses).

1.6 Order means a final order, judgement or injunction or interdict or decree from a Court of competent jurisdiction made in respect of the Insured Risks or the date on which the Insurer consents to a settlement in writing.

1.7 Market Value means the value at which the Property determined as per the Ready Reckoner of property issued by the state government at the date of acceptance of a claim.

1.8 Notification means a notice to the Insurer by the Insured under this Policy relating to any matter covered or which the Insured believes to be covered by this Policy that may result in a claim.

1.9 Policy means this policy for the provision of title insurance the Policy Schedule, any substituted schedule and any endorsement, which shall be as one Policy.

1.10 Person means any person firm company association partnership limited liability partnership government state or agency of a state cooperative society.

1.11 Rights means a right to connect to from within the Property, renew, maintain, repair or use access routes, services for gas water sewerage telecommunication services and/or electricity required by the Property over third party lands in connection with the Insured Use.

1.12 Searches means any one or more of the following searches in respect of the Property:

1.12.1 Searches at the local Sub-registrar of Assurances to see if documents creating encumbrance in respect of the Property are registered in terms of the Registration Act;

1.12.2 Searches at the Office of Talathi i.e. the village officer in charge of maintaining land records, or any equivalent body in the concerned state;

1.12.3 In case the property is a land, enquiry with the local Town Planning Authority to check whether there are any reservations / restrictions on use of the land;

1.12.4 Searches at the Registrar of Companies, wherever applicable relating to the Property that would have been carried out by a prudent solicitor/lawyer acting for the Insured in connection with the granting of a deed and/or mortgage in the location in which the Property is situated.

1.13 Settlement means a settlement of the claim entered into by the Insurer with or on behalf of the Insured.

1.14 Title means all rights recorded in writing and the legal documents by which a Person owns the Property.

2 Conditions:

2.1 The Insurers liability to make payments under this Policy will be strictly conditional upon compliance with the terms and conditions of this Policy. Failure by the Insured to disclose all material circumstances and to ensure that all representations of fact (including the assumptions on which this Policy is issued) are correct may invalidate the Policy or lead to additional terms or conditions being applied to the Policy or to any payment due under the Policy being reduced.

2.2 Where any Loss covered under this Policy is also covered by another policy (or would be but for the existence of this Policy) the Insured must submit a claim under that insurance policy before claiming from the Insurer. The Insurer will only be liable to pay a rateable proportion of any Loss.

2.3 The existence of this Policy or any related information shall not be disclosed to any third party other than bona fide purchasers and tenants, their lenders and respective advisors without the prior written consent of the Insurer.

2.4 The Insured must take all reasonable care to prevent any matters occurring which might give rise to a claim and if a claim is made then the Insured must not do or fail to do anything which will increase the amount of the claim. If the Insured does or fails to do anything which may adversely affect the right to recover any sum from Person for any matter covered by this Policy the Insurer may deduct from any payment otherwise due to
the Insured under this Policy the amount by which the value of the right is reduced or the Insurer may recover that amount from the Insured if the Insurer has previously made a payment in respect of that matter

2.5 If the Insurer agrees to indemnify or defend the Insured under this Policy in respect of any claim it will immediately be subrogated to any rights contractual or otherwise which the Insured may have in connection with that claim, regardless of whether or not actual payment to the Insured or a third party has been made by the Insurer. If the Insurer asks, the Insured must transfer all of the Insured's rights and remedies against any person or property that might, in the Insurer's opinion, be necessary to perfect this right of subrogation.

2.6 The Insured shall at its own expense provide information and assistance to the Insurer in relation to the defence of a claim or conduct of any proceedings which the Insurer considers necessary or desirable to prevent or reduce loss or damage to the Insured or to obtain relief indemnity or contribution from any other party to which the Insurer is or may be entitled to by subrogated rights or otherwise.

2.7 The Policy and Schedule and any endorsements to it given in writing by the Insurer shall be the entire contract between the Insured and the Insurer with respect to all matters referred to in it. Any claim that the Insured makes against the Insurer must be made under this Policy and will be subject to its terms.

2.8 In the event that any provision of the Policy is held to be invalid or unenforceable, such provision may be severed from and will not be taken to have affected the remaining provisions of the Policy.

2.9 If the Insurer grants the Insured any time or indulgence or if the Insurer fails to enforce any provision of the Policy or any of its rights under it, the Insurer will not be taken to have waived its right to enforce the provisions of the Policy or its rights under it.

2.10 No variation to this Policy shall be effective unless made in writing and signed by or on behalf of the parties.

2.11 If, by virtue of any law or regulation which is applicable to the Insurer at the inception of this Policy or becomes applicable at any time thereafter, providing coverage to the Insured is or would be unlawful because it breaches an embargo or sanction, the Insurer shall provide no coverage or benefit and have no liability whatsoever nor provide any defence to the Insured or make any payment of defence costs or provide any form of security on behalf of the Insured, to the extent that it would be in breach of such law or regulation.

2.12 In circumstances where it is lawful for the Insurer to provide coverage under the Policy, but the payment of a valid and otherwise collectable claim may breach an embargo or sanction, then the Insurer will take all reasonable measures to obtain the necessary authorisation to make such payment.

2.13 In the event of any law or regulation becoming applicable during the Policy period which will restrict the ability of the Insurer to provide coverage as specified in paragraph 2.11 then both the Insured and the Insurer shall have the right to cancel this Policy in accordance with the laws and regulations applicable to the Policy provided that in respect of cancellation by the Insurer a minimum of 30 days’ notice in writing be given.

2.14 In the event of cancellation by either the Insured or the Insurer, the Insurer shall retain the pro rata proportion of the premium during the first 12 months that the Policy has been in force and thereafter the Insurer shall retain the whole premium. However, in the event that the incurred claims at the effective date of cancellation exceed the earned or pro rata premium (as applicable) due to the Insurer, and in the absence of a more specific provision in the Policy relating to the return of premium, any return premium shall be subject to mutual agreement. Notice of cancellation by the Insurer shall be effective even though the Insurer makes no payment or tender of return premium.

2.15 No delay or failure on the part of the Insured in enforcing any provision in this Policy shall be deemed to be a waiver or create a precedent or in any way prejudice the rights of the Insured under this Policy.

3 How to Claim

3.1 Person(s) to be notified For Notification of a claim or circumstances which could give rise to a claim
3.2 The Insured must submit a Notification to the Insurer about any matter which may lead to a loss liability or claim under this Policy within 45 days of it first coming to the Insured’s attention.

3.3 The Insured must submit the claim with all necessary supporting documents within 90 days after the Insured has submitted a Notification to the Insurer.

3.4 No admission offer promise payment or indemnity shall be made or given by or on behalf of the Insured without the prior written consent of the Insurer.

3.5 In the event of a claim or Loss or any occurrence for which there may be liability under this Policy the Insurer may at its discretion and at its own cost pursue or defend any action at law or otherwise or make an application to a court of competent jurisdiction in default of which the Insurer will indemnify the Insured in the terms of the Contract of Insurance.

3.6 The Insurer shall have full discretion in the conduct of any proceedings and may cease any said action or application or defence at any time by:

3.6.1 paying to the Insured an amount up to the Sum Insured (after deduction of any sum already paid under this Policy) or any lesser amount for which a claim can be settled.

3.6.2 making a settlement out of court in the name of or on behalf of the Insured.

3.6.3 paying or otherwise settling with the Insured the amount of Loss provided for under this Policy whereupon the Insurer shall relinquish control of such claim and shall be under no further liability to the Insured in connection therewith except for costs and expenses relating to matters arising prior to the date of such payment or settlement and for which the Insurer is responsible in accordance with this Policy.

3.7 The Insurer may at its discretion and at its own cost make settlement with parties other than the Insured and may take any other action which the Insurer considers necessary to prevent or minimise its loss whether or not it is liable in the terms of this Policy and by so doing the Insurer will not be taken to have conceded any liability or waived any of the terms or conditions of this Policy.

3.8 Irrespective of the number of claims made under this Policy, the total liability of the Insurer including Interest and Expenses shall not exceed in the aggregate the Sum Insured. Any payments the Insurer makes to the Insured under this Policy will reduce the Sum Insured by an equivalent amount.
3.9 The **Insured** must at the expense of the **Insurer** do and concur in doing and permit to be done all things reasonably practicable to minimise **Loss** to the **Insurer** and will permit the **Insurer** at its discretion to use the **Insured**'s name for the purposes of any action or proceedings in connection with a claim under this **Policy** provided that the **Insurer** will keep the **Insured** informed of such actions or proceedings and will ensure that in doing so it complies with the **Insured**'s regulatory obligations any policies and procedures of the **Insured** of which it is informed.

3.10 The **Insurer** has the right to select the legal representative to act in any matter in connection with this **Policy**. Once such legal representative is appointed the **Insurer** will not be liable for costs expenses or fees associated with any other legal representative.

3.11 The **Insurer** may at its discretion pursue any litigation (including appeals) to final determination by a court of competent jurisdiction and the **Insurer** shall not be liable to indemnify the **Insured** in respect of **Loss** prior to such final determination.

3.12 If the **Insured** shall make any claim knowing the same to be false or fraudulent as regards amount or otherwise this **Policy** shall become void and all claims hereunder shall be forfeited.

3.13 If any **Person** makes a claim against the **Insured** that the **Insured** thinks is covered by this **Policy** the **Insured** must not make any admissions or pay any money to the **Person** making the claim. The **Insured** must not spend any money in connection with that claim before notifying the **Insurer**.

3.14 If the **Insured** does or fails to do anything which may adversely affect the right to recover any sum from any Person for any matter covered by this **Policy** the **Insurer** may deduct from any payment otherwise due to the **Insured** under this **Policy** the amount by which the value of the right is reduced or the **Insurer** may recover that amount from the **Insured** if the **Insurer** has previously made a payment in respect of that matter.

3.15 After the **Insurer** has made a payment to the **Insured** under this **Policy** if the **Insurer** is able to recover any money from any third party the **Insurer** can keep this money. The **Insurer** will repay to the **Insured** any amount received in excess of the sums incurred by the **Insurer** but only to the extent that the **Insured** is required to repay to the **Insured** in order to comply with regulatory or statutory obligations. If the **Insured** receives from any other **Person** any payment in respect of the same matter the **Insured** must immediately pay to the **Insurer** the sum received from that other **Person**.

4. Non Invalidation

The **Insured**'s interest in this **Policy** shall not be prejudiced by any act omission or default of any other party unless such party acted on behalf of the **Insured** or with the knowledge and consent of the **Insured** or if the **Insured** was aware of the act omission or default but did not inform the **Insurer**.

5. Applicable Law

This **Policy** will be subject to the relevant laws of India. Subject to clause 6 (Arbitration) below, for any dispute under this policy the courts of Mumbai, Maharashtra will have exclusive jurisdiction to hear and determine any such dispute.

6. Arbitration

Any dispute regarding any aspect of this policy including but not limited to the validity or interpretation of this policy or any matter relating to cover or quantum hereunder which cannot be resolved by agreement within 30 days, shall be referred to binding arbitration by either party, upon giving seven (7) days’ notice to the other party.
The place of arbitration shall be India, the language of the arbitration shall be English, the law applicable to and in
the arbitration shall be Indian law and the arbitration process will be in accordance with the provisions of the
Arbitration & Conciliation Act 1996, as amended from time to time. The Insurer and Insured will be responsible
for their own costs and expense incurred in the arbitration.

7. Cancellation & Renewal:

This policy is written on a Multi-Year Pre-Paid basis and may not be cancelled by insured or by insurer, except
that insurer may cancel the policy for:
a. Material change in risk or exposure by written notice; or
b. Intentional concealment or misrepresentation of a material fact relating to this policy or fraud by insured or any
additional insured by written notice.
Insurer will give 30 day notice to insured before effective date of cancellation, if the policy has to be cancelled for
above reasons and no premiums shall be refunded.
The Company shall be under no obligation to renew the policy on expiry of the period for which premium has
been paid. The Company reserves the right to offer revised rates, terms and conditions at renewal based on claim
experience and a fresh assessment of the risk. This policy may be renewed only by mutual consent and subject
to payment in advance of the total premium at the rate in force at the time of renewal. The Company, however,
shall not be bound to give notice that the policy is due for renewal or to accept any renewal premium. Unless
renewed as herein provided, this policy shall automatically terminate at the expiry of the period for which premium
has already been paid.
GRIEVANCE REDRESSAL PROCEDURE

If you have a grievance that you wish us to redress, you may contact us with the details of your grievance through:

- **Call Center (Toll free helpline)**
  1800 2 700 700 (accessible from any Mobile and Landline within India)
  1800 226 226 (accessible from any MTNL and BSNL Lines)

- **Emails** – grievance@hdfcergo.com

- **Designated Grievance Officer in each branch.**

- **Company Website** – [www.hdfcergo.com](http://www.hdfcergo.com)

- **Fax**: 022 - 66383699

- **Courier**: Any of our Branch office or corporate office

You may also approach the Complaint & Grievance (C&G) Cell at any of our branches with the details of your grievance during our working hours from Monday to Friday.

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:
The Complaint & Grievance Cell,
HDFC ERGO General Insurance Company Ltd.
D-301, 3rd Floor, Eastern Business District (Magnet Mall),
LBS Marg, Bhandup (West), Mumbai- 400078.

In case you are not satisfied with the response/resolution given/offered by the C&G cell, then you can write to the Principal Grievance Officer of the Company at the following address:

To the Principal Grievance Officer
HDFC ERGO General Insurance Company Limited
D-301, 3rd Floor, Eastern Business District (Magnet Mall),
LBS Marg, Bhandup (West), Mumbai- 400078.

e-mail: principalgrievanceofficer@hdfcergo.com

You may also approach the nearest Insurance Ombudsman for resolution of your grievance. The contact details of Ombudsman offices are mentioned below if your grievance pertains to:

- 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

You may also refer our website [www.hdfcergo.com](https://www.hdfcergo.com/customer-care/grievances.html) for detailed grievance redressed procedure.
### Names of Ombudsman and Addresses of Ombudsmen Centres

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<thead>
<tr>
<th>Ombudsman Name</th>
<th>Address Details</th>
<th>Contact Details</th>
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<tbody>
<tr>
<td>Shri Raj Kumar Srivastava</td>
<td>Office of the Insurance Ombudsman, 2nd Floor, Janak Vihar Complex, 6, Malviya Nagar, Opp. Airtel, Near New Market,</td>
<td>Tel.: 0755-2769201/9202 Fax: 0755-2769203 Email: <a href="mailto:bimalokpal.bhopal@gbic.co.in">bimalokpal.bhopal@gbic.co.in</a></td>
</tr>
<tr>
<td>Shri B.N. Mishra</td>
<td>Office of the Insurance Ombudsman, 62, Forest Park, Bhubaneswar-751 009.</td>
<td>Tel.: 0674-2596455/2596003 Fax: 0674-2596429 Email: <a href="mailto:bimalokpal.bhubaneswar@gbic.co.in">bimalokpal.bhubaneswar@gbic.co.in</a></td>
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<tr>
<td>Shri Manik Sonawane</td>
<td>Office of the Insurance Ombudsman, S.C.O. No.101-103, 2nd Floor, Batra Building, Sector 17-D, Chandigarh-160 017.</td>
<td>Tel.: 0172-2706468/2705861 Fax: 0172-2708274 Email: <a href="mailto:bimalokpal.chandigarh@gbic.co.in">bimalokpal.chandigarh@gbic.co.in</a></td>
</tr>
<tr>
<td>Shri Virander Kumar</td>
<td>Office of the Insurance Ombudsman, Fathima Akhtar Court, 4th Floor, 453 (old 312), Anna Salai, Teynampet, Chennai-600 018.</td>
<td>Tel.: 011-23237539/23232481 Fax: 011-</td>
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<tr>
<td>Smt. Sandhya Baliga</td>
<td>Office of the Insurance Ombudsman, 2/2 A, Universal Insurance Bldg., Asaf Ali Road, New Delhi-110 002.</td>
<td>Tel.: 011-23237539/23232481 Fax: 011-</td>
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<td><strong>23220858</strong>  <strong>Email: <a href="mailto:bimalokpal.delhi@gbic.co.in">bimalokpal.delhi@gbic.co.in</a></strong></td>
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<td><strong>Insurance Ombudsman,</strong>  <strong>Office of the Insurance Ombudsman,</strong>  <strong>“JeevanNivesh”, 5th Floor,</strong>  <strong>Near PanbazarOverbridge, S.S. Road,</strong></td>
<td><strong>Shri G.Rajeswara Rao,</strong>  <strong>Office of the Insurance Ombudsman,</strong>  <strong>6-2-46, 1st Floor, Moin Court,</strong>  <strong>A.C. Guards, Lakdi-Ka-Pool,</strong></td>
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<td><strong>GUWAHATI-781 001 (ASSAM).</strong></td>
<td><strong>HYDERABAD-500 004.</strong></td>
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<td><strong>Tel.:</strong> 0361-2132204/5  <strong>Fax :</strong> 0361-2732937</td>
<td><strong>Tel :</strong> 040-65504123/23312122  <strong>Fax: 040-23376599</strong>  <strong>Email: <a href="mailto:bimalokpal.hyderabad@gbic.co.in">bimalokpal.hyderabad@gbic.co.in</a></strong></td>
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<td><strong>Email: <a href="mailto:bimalokpal.guwahati@gbic.co.in">bimalokpal.guwahati@gbic.co.in</a></strong></td>
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<td><strong>Shri P.K.Vijayakumar,</strong>  <strong>Office of the Insurance Ombudsman,</strong>  <strong>2nd Floor, CC 27/2603, Pulinit Bldg.,</strong>  <strong>Opp. Cochin Shipyard, M.G. Road,</strong></td>
<td><strong>Shri K.B. Saha,</strong>  <strong>Office of the Insurance Ombudsman,</strong>  <strong>4th Floor, C.R. Avenue,</strong>  <strong>Hindustan Building. Annexe,</strong></td>
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<td><strong>ERNAKULAM-682 015.</strong></td>
<td><strong>KOLKATA-700 072.</strong></td>
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<td><strong>Tel :</strong> 0484-2358759/2359338  <strong>Fax :</strong> 0484-2359336</td>
<td><strong>Tel :</strong> 033-22124339/22124340  <strong>Fax :</strong> 033-22124341  <strong>Email: <a href="mailto:bimalokpal.kolkata@gbic.co.in">bimalokpal.kolkata@gbic.co.in</a></strong></td>
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<td><strong>Email: <a href="mailto:bimalokpal.ernakulam@gbic.co.in">bimalokpal.ernakulam@gbic.co.in</a></strong></td>
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<td><strong>Shri N.P. Bhagat,</strong>  <strong>Office of the Insurance Ombudsman,</strong>  <strong>Jeevan Bhawan, Phase-2,</strong></td>
<td><strong>Shri A.K. Dasgupta,</strong>  <strong>Office of the Insurance Ombudsman,</strong>  <strong>3rd Floor, Jeevan Seva Annexe,</strong></td>
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<td>Lucknow-226 001</td>
<td>6th Floor, Nawal Kishore Road, Hazaratganj,</td>
<td>Tel: 0522-2231331/2231330 Fax: 0522-2231310</td>
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<td><strong>MUMBAI-400 054.</strong></td>
<td>Email: <a href="mailto:bimalokpal.lucknow@gbic.co.in">bimalokpal.lucknow@gbic.co.in</a></td>
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<td>S.V. Road, Santacruz(W),</td>
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<td>Tel: 022-26106928/26106552 Fax: 022-26106052</td>
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<td>Email: <a href="mailto:bimalokpal.mumbai@gbic.co.in">bimalokpal.mumbai@gbic.co.in</a></td>
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<td>Shri A.K. Jain,</td>
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<td>Email: bimalokpal.jaipurbic.co.in</td>
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<td>Shri A.K. Sahoo,</td>
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<td>Office of the Insurance Ombudsman,</td>
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<td>Bengaluru – 560025</td>
<td>24th Main Road, Jeevan Soudha Bldg.</td>
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<td>JP Nagar, 1st Phase,</td>
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<td><strong>OFFICE OF THE GOVERNING BODY OF INSURANCE COUNCIL</strong></td>
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<td>Smt. RammaBhasin, Secretary General,</td>
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<td>Shri Y.R. Raigar, Secretary</td>
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