



CLAM SETTLEMENT PROCESS OF PRADHAN MANTRI SURAKSHA BIMA YOJANA

(PMSBY) (Accident Insurance)

Eligibility:

Life cover and Disability cover for the death or disability on account of an accident. The risk cover will be provided to the person from his/her age of 18 years (Completed) till attaining age 70 years (nearer birthday) as on the annual renewal date. i.e. eligibility will cease on attaining age 70 years (nearer birthday) or on closure of account with the Bank or insufficiency of balance to keep the insurance in force.

Benefits:

In case of death,

Claim amount of Rs 2,00,000/- is payable on death of a member to his / her Nominee(s) by the designated office of concerned Insurance Company.

In case of disability,

Type-1: Claim amount of Rs 2,00,000/- is payable to Policy Holder in case of (1) Total and irrevocable loss of both eyes OR (2) loss of use of both hands or feet OR (3) loss of sight of one eye and loss of use of hand or foot.

Type-2: Claim amount of Rs 1,00,000/- is payable to Policy Holder in case of (1) Total and irrevocable loss of sight of one eye OR (2) loss of use of one hand or foot.

IMPORTANT:

1. Claim forms should not be submitted directly to the Insurance Company.
2. Policy holder should share the insurance details with the respective nominee/family members.
3. Passbook entry / Bank statement entry is the proof of your policy.
Acknowledgement of your physical application form is also considered as the policy certificate.

4. If the policy holder enrolled in both PMJJBY, PMSBY in case of life lost due to accident nominee shall claim under both schemes.

Timeline for claim?	Within 30 days of the accident resulting in claim
Who can claim?	In case of death of the policy holder, Nominee shall claim. In case of Disability, Policy holder shall claim
Where to approach?	Bank where the policy holder enrolled in the scheme
Required Documents and Informations	<ol style="list-style-type: none"> 1. Policy holder's Death Certificate (Original and Xerox copy) 2. Policy Holder's Savings Bank Account Passbook indicates Account Number and IFSC code (Original and Xerox copy) 3. Policy Number 4. Aadhaar number of the Policy Holder (Original and Xerox copy) 5. Date of Enrollment in Scheme 6. Discharge Voucher given by Bank 7. Date of Death of the Policy Holder 8. Details of Accident (Day, Date, Time of Occurrence, Place of Occurrence, Cause of Death and Details of Injury) report. 9. Name, Address and Contact Details of Hospital /Attending Doctors 10. Mention, when the Medical Officer of Insurance Company can visit the Insured Person? 11. Name of the Nominee, Relationship of the Nominee to Deceased Person 12. Address and Mobile Number of the

	<p>Nominee</p> <p>13. Aadhaar Number of the Nominee</p> <p>14. Savings Bank Passbook (Xerox copy) indicates Account Number and Indian Financial System Code (IFSC) of the Bank OR Xerox copy of cancelled cheque of the Nominee</p>
Additional Documents	<p>In case of Death,</p> <ul style="list-style-type: none"> ❖ Original FIR / Panchnama, Post mortem report and Death Certificate <p>In case of Disability,</p> <ul style="list-style-type: none"> ❖ Original FIR / Panchnama, Post mortem report and Disability Certificate from Civil Surgeon
Process Involved with Beneficiary	<ol style="list-style-type: none"> 1. Nominee or the Insured Person to approach concern bank or insurance company or insurance agents and collect Claim Form and Discharge Voucher for PMSBY. 2. Nominee or Insured Person (Depends on the case) to submit duly completed Claim Form, Discharge Voucher along with additional documents and Xerox copy of Nominee's Bank Account Details.
Time limit for Policy holder / Nominee to submit Claim Form to Bank	<p>Within 30 days of the accident resulting in claim</p>
Process Involved with Bank	<p>The authorized official of the Bank shall check the account / auto-debit particulars and verify the account details, nomination, debiting of premium / remittance to insurer and certify the correctness of the information given in the claim form, and forward the case to the insurance company concerned within 30 days of the submission of the</p>

	claim.
Time limit for Bank Process	Bank to forward duly completed claim form to Insurance Company within 30 days of receiving the Claim Request from Policy holder / Nominee
Process Involved with Insurance Company	<ol style="list-style-type: none"> 1. Insurer will verify and confirm that premium has been remitted for the insured and the insured is included in the list of insured persons in the master policy. 2. Claim shall be processed by the insurance Company which has issued the master policy for the Bank within 30 days of its receipt from the Bank. 3. The admissible Claim amount will be remitted to the Bank Account of the insured or the nominee, as the case may be. 4. In case of death of an insured who has not named his/ her nominee the admissible claim amount shall be paid to the legal heirs of the insured on production of Succession Certificate/ Legal Heir certificate from the Competent Court/ authority.
Time limit for Insurance Company	Insurance Company to approve claim and disburse money is 30 days from the receipt of the claim from the Bank.