

Claim Intimation and Submission Procedure	
Insurance Company: "Oriental Insurance Co. Ltd." (OICL)	
Group Personal Accident Policy for "Salary Package Account Holders of State Bank of India"	
OICL Policy No. 580000/48/2026/72	Policy period- 04.04.2025 (0000 Hrs) till 03.04.2026 (2359 Hrs)

(A) CLAIM PROCESS

1. The claim process consists of 2 stages:
 - (a) Submission of Intimation to OICL
 - (b) Submission of the Claim Form & other documents to OICL
2. In the event of death of the Salary Package account holder, an intimation as per **Annexure 4** is to be given by claimant to the insurance Company within 90 days of the death.
3. The intimation can also be sent through the following channels:
(Applicable both in case of Death and Disability)
 - (a) Fax No. **022-22820590**, Toll Free No. **1800-123-8733 / 1800-11-8485**
 - (b) **WhatsApp Chatbot : 8657923021**
 - (c) Email ID: sbigpa.claims@orientalinsurance.co.in / pote.ninad@orientalinsurance.co.in / paihelpdesk@rathi.com
4. Following details are to be provided for intimation:
 - i. Name of the deceased Salary Package Account Holder
 - ii. SBI Salary Package Account No
 - iii. Date of Accident
 - iv. Date of Death
 - v. Place of accident
 - vi. Details of accident
 - vii. Name of the Claimant, their Mobile No. and Email ID
 - viii. Name and Code of the SBI Branch/es where salary account and claimant's account maintained.
 - ix. Name of the Unit/ organization with Contact number and email address.
 - x. Personnel / Employee / Force number
5. A system generated reference number would be advised to claimant by Insurance Company.
6. Within 90 days of Intimation, the claimant needs to submit following documents to Insurance Company.

I) Personal Accidental & Air Accidental Insurance (death) claim:

- a) Completely filled Claim Intimation form (**Annexure 4**)
- b) Claim Form duly signed by the claimant. (**Annexure 5**)
- c) Branch Manager Certificate on Bank letter head. (**Annexure 6**)
- d) NEFT form by Nominee/Claimant/ Legal heir. (**Annexure 7**)
- e) Attested Legible Copy of Police F.I.R (*For Armed forces: Defence Authority report in case FIR is not available*)
- f) Attested Legible Copy of Postmortem Report
- g) Attested Legible Copy of Death Certificate
- h) PAN card copy of the Claimant. If not available, then Form 60 to be submitted.
- i) Original Cancelled Cheque of Bank Account in the Name of the Claimant / or Photocopy of the first page of the Bank Passbook containing the Name of Account Holder, Bank Account Number, IFSC Code

- j) Copy of Other suitable documents to prove legal heirship in case claimant is not a nominee/ joint account holder as per Bank's record. In case of multiple heirs, consent form from all legal heirs.
- k) For Air Accident: Bank statement indicating purchase of Air ticket using SBI Debit card/ Internet Banking (where applicable)
- l) Copy of Viscera Report/chemical analysis report in case where postmortem report shows the cause of death is poisoning or alcohol or any substance abuse.
- m) Copy of Aadhar Card of the Nominee/Legal Heir/Claimant
- n) Copy of Pan Card of the Nominee/Legal Heir/Claimant
- o) Certified Copy of Final Police Investigation Report in case of train accident/drowning/murder/Gunshot Injury except terrorist and Naxal attack
- p) Any other case specific requirement by insurance company

ii) Disability Claims (Undernoted forms are required)

- a) Intimation as per **Annexure 4**
- b) Disability Claim form as per **Annexure 8**
- c) Medical Certificate as per **Annexure 9**
- d) Branch Certificate as per **Annexure 10**
- e) Disability certificate from unit
- f) Attested FIR copy with incident.

iii) Documents for add-on-cover (Accidental Death)

(Add on covers will be applicable only if PAI claim is found admissible)

In addition to documents applicable for submission of PAI claims, undernoted Certificates/ documents are also required:

i. Cost of Plastic Surgery / Burn

- a) Treating doctor's/ Surgeon Certificate
- b) Original Discharge Summary containing all relevant details.
- c) All original bills and their receipts
- d) Copies of all reports and prescriptions
- e) First prescription/ consultation letter from the Doctor
- f) Original Money Receipt duly signed with revenue stamp.

ii. Transportation of Imported Medicine

- a) Medical Practitioner's prescription
- b) Copy of medicine invoice
- c) Invoices copy of freight expenses mentioning details of medicine imported, country of origin from which it is being imported, date and price of the medicine and freight expenses.

iii. Death after Coma after accident (more than 48 hrs)-

- a) Medical certificate mentioning the duration of coma (start and end of coma period) supported by discharge summary and indoor case papers

iv. Air Ambulance

- a) Attending Doctor's advice/ note with reason for shifting of the patient
- b) Original invoice and receipt for the Air Ambulance mentioning date of travel, sector (from/ to place) and total amount

v. Child Higher Education Cover (for Graduation) age between 18-25 Year –25% of entitled PAI cover maximum ₹ 8 lakh (₹ 10 lakh in case of Girl Child), in case of DSP/CAPSP/ICGSP Pension accounts maximum ₹ 5 lakh for one girl child.

- a) Copy of admission confirmation and certificate from educational institute stating details of full-time course in a recognized college in India for Graduation along with duration of course and date of enrollment.
- vi. Girl Child Cover for Marriage (Age 18-25 Years) – 20 % of entitled PAI Cover. (If PAI claim is found admissible), Maximum 10 Lakh for two girl children (5 lakh each) or ₹ 5 lakh for 1 Girl Child.
- a) Birth certificate/ Date of birth proof of girl child.
b) Document showing relationship with deceased Salary Account holder.
- vii. Family Transportation: (Travelling cost incurred by immediate 2 family members to reach place of accident)
- a) Original bill, receipt and travel ticket showing date of travel, Sector (from/ to) and amount incurred.
b) Copy of proof of the immediate family member such as Ration Card.
- viii. Repatriation of mortal remains:
- a) Original Bill and receipt for transport of mortal remains, showing date and sector (From/to)
- ix. Ambulance charge:
- a) All related original bills and their receipts.
- x. Xpress Credit Loan insurance cover for SBI loan accounts (Defence/CAPF/Police Personnel Covered under DSP/CAPSP/ICGSP/PSP only) death in action against Anti National Activities/Terrorist /Naxalite/ Foreign enemy/Ambush.
- xi. Additional PAI cover for DSP/CAPSP/ICGSP/PSP, death in action against Anti National Activities/Terrorist /Naxalite/ Ambush/Foreign enemy.
- xii. Additional Cover for all Salary Packages, death while performing duties on foreign soil. (Covers at Serial No (xi) or (xii) are exclusive to each other and both will not be available together)
7. Claimant should submit the Claim Form completed in all respects, with relevant documents mentioned under **Para 4** above, directly to OICL. **The system generated Claim Number/ Salary Account No. should be mentioned on the Claim Form while sending the physical documents.** The Claim No. can be used for any queries/further follow up with the OICL claim department.
8. However, claim application received by the SBI Bank Branch having the Salary Account, should be forwarded to OICL Mumbai Office along with a detailed covering letter.
9. **The total period for intimation and claim submission is 180 days maximum i. e. period for intimation + claim submission = 90 + 90 = 180 maximum (from date of death).**
10. All claims shall be entertained by OICL where accident has occurred within the period of policy and death has occurred:
- a) Within the period of policy or
b) Within 12 months of date of accident, in the event where death occurs after the expiry of policy.

Contact Details and Escalation Matrix
“The Oriental Insurance Co. Ltd.” (OICL)

Claim documents are to be sent to:

“The Oriental Insurance Co. Ltd.” (OICL)
 SBI GPA Claims Cell
 Mumbai Regional Office 1, 2nd Floor, Oriental House, 7 J. Tata Road, Churchgate,
 Mumbai-400020.

Status of the claims can be sought, using system generated claim number/ Account Number, by any of the following channels:

Sr. No.	Channel	Details
1	Email ID	sbigpa.claims@orientalinsurance.co.in
2	Land Line Number	022-22820494 / 22049076 / 22825619
3	Toll Free No	18001238733 / 1800-11-8485
4	Fax No.	022-22820590

Escalation Matrix (OICL) - Contact Details

Escalation Level	Name	Designation	Email I'd	Contact No.
1 st Escalation	Ms. Deepa Balasubramaniam –	Dy. Manager	deepa.b@orientalinsurance.co.in	8655960610 / 8655960611
2 nd Escalation	Ms. Manasi Kadam	Dy. Manager	manasi.kadam@orientalinsurance.co.in	8655960610 / 8655960611
3 rd Escalation	Mr. Ninad Pote	Regional Manager	pote.ninad@orientalinsurance.co.in	8655960610 / 8655960611

Grievance Redressal Mechanism
“The Oriental Insurance Co. Ltd.” (OICL)

Escalation Level 1

- i. If claimant is not satisfied with Insurance Company’s services, he/she can lodge a online complaint with OICL or send email to Ms. Olivia N. Assistant Manager at **olivia.nameirakpam@orientalinsurance.co.in**.
- ii. After investigating the matter internally and subsequent closure, the Insurance Company will send their response within a period of 15 days from the date of receipt of the complaint. In case the resolution is likely to take longer time, they will inform the claimant of the same through an interim reply.

Escalation Level 2

For lack of a response or if the resolution still does not meet Claimants expectations, Claimant can write to the Regional Manager OICL, at **pote.ninad@orientalinsurance.co.in**.

Escalation Level 3

Within 30 days of lodging a complaint with OICL, if satisfactory response is not received from the Insurance Company, grievance may be raised with the Internal Ombudsman of OICL (list available at <https://orientalinsurance.org.in/list-of-ombudsman> or Insurance Regulatory and Development Authority (IRDA) may be approached on address mentioned hereunder:

General Manager
Insurance Regulatory and Development Authority of India (IRDAI)
Consumer Affairs Department – Grievance Redressal Cell.
 Sy.No.115/1, Financial District, Nanakramguda,
Gachibowli, Hyderabad – 500 032
 Email ID: nonlifecomplaints.pvt@irda.gov.in
 Toll Free Number: 155255 or 1800 4254 732
 Email ID: complaints@irda.gov.in

If the claimant is not satisfied with the Insurer Company’s redressal of his grievance, through any of the above methods the claimant may approach the nearest **Insurance Ombudsman** for resolution of the grievance. The details of Insurance ombudsman are available on Insurance Regulatory and Development Authority (IRDA) website: www.irdai.gov.in. The complainant may register his grievance through IRDA online, at www.policyholder.gov.in/igms_complaint_logging.aspx. The guidelines for taking up the complaint with the Insurance Ombudsman, along with their address are available on the consumer education website of the IRDA, <http://www.policyholder.gov.in/ombudsman.aspx>.