



न्यायालय मुख्य आयुक्त

COURT OF CHIEF COMMISSIONER FOR PERSONS WITH DISABILITIES (DIVYANGJAN)

दिव्यांगजन सशक्तिकरण विभाग / Department of Empowerment of Persons with Disabilities (Divyangjan)

सामाजिक न्याय और अधिकारिता मंत्रालय / Ministry of Social Justice and Empowerment

भारत सरकार/ Government of India

Diary No. DNO/26/CCPD/6113

Dated: 21/09/2026

In the matter of—

PRAKASH KATARIYA

(Complainant)

Versus

The CEO & MD,

SBI General Insurance Company Limited

Hearing: A preliminary hearing was conducted on 28.04.2026. The following parties/representatives were present during the hearing:

Sl.No.	Name of the parties/Representatives	For Complainant/ Respondent	Mode of Attendance
1.	Shri Prakash Katariya	Complainant	Online
2.	Advocate Mayur Narang	For Respondent	Online

Gist of the Complaint

The Complainant submitted that he had obtained an accidental insurance policy from SBI General Insurance Company Limited for the period from 15.02.2025 to 14.02.2026, with a sum insured of ₹20,00,000/-. He stated that he met with an accident on 14.10.2025 and, thereafter, was issued a disability certificate by a competent Government Medical Board certifying 40% permanent low vision. His insurance claim was rejected by the Respondent vide letter dated 30.12.2025. The Complainant contended that the rejection of his claim was contrary to the terms and spirit of the policy, particularly the provision relating to “entire and irrecoverable loss of sight”. He alleged that the Respondent had adopted an unduly restrictive interpretation of Permanent Total Disability by treating only complete loss of vision as qualifying for the benefit, while disregarding the permanent nature and functional impact of his visual impairment.

Submissions of the Respondent

The Respondent, represented by Adv. Mayur Narang, submitted that the Complainant had suffered an

5वीं मंजिल, एनआईएसडी भवन, प्लॉट न०. जी-2, सेक्टर-10, द्वारका, नई दिल्ली-110075; दूरभाष: 011-20892364, 20892275
5th Floor, NISD Building, Plot No.G-2, Sector-10, Dwaraka, New Delhi-110075;Tele# 011-20892364,
20892275

E-mail: ccpd@nic.in; Website: www.ccdisabilities.nic.in

(पया भविष्य मे पत्राचार के लिए उपरोक्त फाईल/केस संख्या अवश्य लिखें)

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accident on 14.10.2025 and was subsequently issued a disability certificate certifying 40% permanent low vision. It was submitted that the Respondent did not dispute the existence or permanent nature of the disability; however, the certified disability did not amount to total loss of vision. The Respondent submitted that the relevant policy provision covered Permanent Total Disability and, in respect of loss of sight, specifically prescribed "entire and irrecoverable loss of sight". According to the Respondent, the said expression contemplated complete loss of sight in both eyes and, therefore, a disability certificate showing 40% low vision did not fall within the specified contractual coverage. It was further submitted that the insurance policy constituted a contract between the parties and that the rights and liabilities were required to be determined strictly in accordance with the terms and conditions of the policy. The Respondent further submitted that the claim had been examined on the basis of the documents furnished by the Complainant and that the reasons for repudiation had been communicated to him through various e-mails. It was contended that the dispute essentially related to interpretation and application of the contractual terms of the insurance policy and did not constitute discrimination against the Complainant on the ground of disability. It was also submitted that the policy was a general accidental insurance policy and was not a product specifically designed for persons with disabilities.

Observations of the Court

The Court considered the submissions made by the Complainant and the Respondent. The Court noted that the Respondent did not dispute the disability certificate issued by the competent Government Medical Board or the permanent nature of the Complainant's visual impairment. The principal issue raised by the Respondent was that the certified 40% permanent low vision did not amount to the "entire and irrecoverable loss of sight" contemplated under the relevant policy provision. The Court further observed that the matter involved consideration not only of the terms and conditions of the insurance policy but also of the applicable legal provisions relating to persons with disabilities and the principles governing interpretation and application of insurance coverage in such circumstances. The issues raised by the Complainant, therefore, warranted detailed examination on the basis of the pleadings, documents and applicable legal provisions.

Accordingly, the Court found the complaint fit for admission and further proceedings. The matter is accordingly admitted. The case is adjourned. The next date of hearing shall be intimated separately.

Yours faithfully,

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(VIKAS TRIVEDI)

Dy. Chief Commissioner

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