



Dear Sir / Madam,

09.10.2021

Reg : Link-K Monthly Bulletin - October 2021

With the advent of electric vehicles, the future of Motor Insurance market in India is set to change drastically. With the scarcity of Petroleum products and dominance of few countries in supplying petrol, countries are aggressively looking for alternate technology/ options like electric vehicles, alternate cheaper fuels, solar powered or any other similar technology. May be down the line after 10 - 15 years the vehicle insurance market may transform completely.

The NITI Aayog has recommended privatisation of state - owned insurer United India Insurance Company as the government aims to move ahead with its new public sector enterprise (PSE) policy for Atmanirbhar Bharat. The policy think tank has suggested that the public sector insurer be considered for privatization in the banking, insurance and financial services sector, which has been classified as "strategic" in the PSE policy, said an official.

With insurance claims going through the roof amid the Covid 19 pandemic, insurance companies are sitting on almost one third of the claims submitted by patients since the pandemic hit the country in the beginning of the financial year 2020-21. Over 3.06 lakh Covid claims for Rs 10,703 crore are pending before insurance companies as on August 6, indicating the pressure being faced by insurers despite Delhi High Court and insurance regulator IRDAI directing the insurance firms to complete the settlement of Covid claims in an hour after discharge.

Happy reading

Thanking you for the opportunity given to serve you,

Yours faithfully  
For Link-K Insurance Broker Co. (Pvt.) Ltd

**V.P. Mohankumar**  
Principal Officer and Managing Director

## LIFE

1

LIC listing likely by Q4 FY22  
LIC starts working on allotment of IPO  
Union Cabinet approves LIC share sale  
Govt. to invite Merchant bankers bids

## NON-LIFE INSURANCE

2

Non-life insurer's record growth in premium  
ICICI Lombard reports decline in net profit  
Star Health to raise funds by an initial share sale  
IRDAI nods to raise premium on Corona Kavach Policy  
IRDAI allows non-life insurers to offer home treatment as add on cover  
Group Health Insurance cost rises  
Insurers settle 80 per cent claims

## GENERAL

3

GIC records Rs. 771 crore loss  
Finance Ministry to infuse more capital in general insurers  
General insurers to recover, as Covid cases fall, jabs rise  
PhonePe gets IRDAI license to serve as direct insurance broker  
Insurance products for Indian consumers  
Insurers likely to spike up premiums  
Only 14% of Covid deaths had insurance cover  
Drop in out-of-pocket expenses for policyholders

## LEGAL

4

Subhash V/s. National Insurance Co. Ltd  
Col. S.L Narula v/s. United India Insurance Co. Ltd

## CLAIMS

5

CLAIMS SETTLED THROUGH LINK-K (With both Public and Private Sector insurers)  
Claim due to Explosion to the Electrostatic Precipitator (ESP)  
Loss of Container with consignment

## LIGHTER MOMENTS

6

Are you taking all the credit for your success?  
Did I read that sign right?  
சிரித்து சிந்தியுங்கள் இல்லைன்னா சிந்தித்து சிரியுங்கள்



### **LIC listing likely by Q4 FY22:**

Public listing of Life Insurance Corporation of India, which is likely to be the largest for Indian markets, is expected in the fourth quarter of the ongoing financial year, department of investment and public asset management secretary TK Pandey said.

### **LIC starts working on allotment of IPO.:**

The Life Insurance Corporation (LIC) has started creating a database of policyholders who would be eligible for the reserved 10 per cent of the allotment in its IPO. The database is being created to obviate duplication among policyholders so that each of them is given a chance to become a shareholder of India's largest insurance firm, said an official.

### **Union Cabinet approves LIC share sale:**

The stage is set for the country's biggest IPO with the Union Cabinet approving share sale of the state run insurance behemoth Life Insurance Corporation of India (LIC)

### **Govt. to invite Merchant bankers bids**

The government is likely to invite bids from merchant bankers for managing LIC disinvestment as it moves ahead with plans to launch the IPO by January, an official said. The department of Investment and Public Asset Management (DIPAM) had in January appointed actuarial firm Milliman Advisors LLP India to assess the embedded value of LIC ahead of the IPO, which is touted to be the biggest public issue in Indian Corporate history.



The official further said the Budget amendments to the LIC Act have been notified and the actuarial firm would work out the embedded value of the life insurer in the next couple of weeks.

Under the embedded value method, insurance companies present value of future profit is also included in its present net asset value.

We will invite bids for appointment of merchant bankers in the next couple of weeks, the official said, adding discussions are going on with institutional investors.

We are hoping to get regulatory approvals by November end, the official said. Up to 10 per cent of the LIC IPO issue size would be reserved for policyholders.

The LIC Amendment Act has been made part of the Finance Act, thereby bringing the required legislative amendment for launching IPO of the country's largest life insurer.



## NON-LIFE INSURER'S

### **Non-life insurer's record growth in premium:**

Non-life insurers, which include general, standalone, and specialized public sector, have recorded 19.46 percent year on year growth in premium in July.

In July, non-life insurers - 33 in total earned premiums to the tune of Rs. 20,171 crore, against Rs. 16,885 crore in the same month last year.

On a year to date (YTD) basis (April - July), insurers saw their premiums go up 15.49 per cent to Rs. 64,607.25 crore, against Rs. 55,939.85 crore in the same period last year.

General Insurers, who cover risks emanating from a whole host of segments, such as motor, health, crop, fire, marine, and others, reported 17.61 per cent YOY growth in premiums in the reporting month to Rs. 16,469 crore versus Rs. 14,003 crore. Further, on a YTD basis, premiums earned by them surged 12.9 per cent to Rs. 56,280.58 crore. On the other hand, standalone health insurers have reported 27.49 percent YOY growth in premiums in July over the same period last year, driven by robust demand for health products during the pandemic.

### **ICICI Lombard reports decline in net profit:**

Private sector general insurer ICICI Lombard has reported a 62 per cent decline in net profit at Rs. 151.63 crore in April - June quarter of FY 22 as its underwriting losses mounted on account of higher Covid claims.

### **Star Health to raise funds by an initial share sale:**

Star Health and Allied Insurance Company has filed preliminary papers with SEBI to raise funds through an initial share sale. The IPO comprises a fresh issue of equity worth Rs. 2,00 crore and an offer for sale of up to 6.01 crore shares by promoters and existing shareholders, according to the draft prospectus. The selling shareholders included Safecrop Investments India LLP, Konark Trust and MMPL Trust (promoter and promoter group) and existing investors Apis Growth 6 Ltd, Mio IV Star, University of Notre Dame DU Lac, Mio Star, ROC Capital Pty Ltd, Venkatasamy Jagannathan, Sai Sathish and Berjis Minoo Desai. The public offer includes a reservation for eligible employees.

### **IRDAI nods to raise premium on Corona Kavach Policy:**

BIG development for general insurance companies and for the customer. The pressure on general insurance companies is likely to come down. This will have a positive impact on ICICI Lombard General Insurance Company Ltd and the New India Assurance Co. Ltd.



In the second wave of Coronavirus Pandemic, the claims received by the General Insurance Companies increased significantly. Even the direction by Insurance and Regulatory Development Authority of India (IRDA) to launch health insurance cover exclusively for the



treatment of Covid 19 Corona Kavach at low premiums created pressure. As a result of which, the general insurance companies created such terms and conditions on the policy that it became unviable for customers to get this policy.

### **IRDAI allows non-life insurers to offer home treatment as add on cover :**

The Indian Insurance Regulatory IRDAI has allowed non - life insurers to offer "homecare / domiciliary treatment" or treatment at home as an add on cover afresh or to their existing policies. In a circular to all non-life insurers including standalone health insurers the Insurance Regulatory and Development Authority of India (IRDA) has said companies have to file their products with it, if home treatment is offered as an add on cover.

According to IRDAI, homecare treatment is one taken at home for an ailment that normally needs hospitalization provided that a medical practitioner advises the insured home treatment, there is a continuous active line of treatment with the health status of the insured monitored daily by a medical practitioner during the duration of home treatment, and that records of daily monitoring of the insured patient and the treatment given are recorded and signed by a medical practitioner.

Norms for settlement of claims should be mentioned in the policy document and prospectus, it said. IRDAI said that insurers can offer the cover to their existing policy holders by charging an additional premium for the residual period of time. Reacting to the development, Liberty General Insurance Ltd.'s CEO and Whole Time Director Roopan Asthana said that the "add-on cover has to be priced right taking into account the data and possible scenarios.

### **Group Health Insurance cost rises:**

Rising Covid claims are pushing up the cost of group health insurance for employers by 25% to 40% in the wake of the second wave of the pandemic. This, even as new demand for employee health cover is coming from smaller employers like small and medium sized enterprises (SMEs) and MNCs with less than 50 employees.

### **Insurers settle 80 per cent claims:**

After the second wave of Covid 19 swept India in April - May, Insurance companies settled about 80 percent, or more than 15.39 lakh health claims exceeding Rs. 15,000 crore as on June 22, said a top IRDAI official.

Over 19.11 lakh Covid health claims have been reported as on June 22 as far as medical insurance or hospitalization is concerned.

While in terms of death claims, which is handled by life insurers, about 55,276 claims have been intimated and, nearly 88 per cent, or 48,484 claims amounting to Rs. 3,592 crore, have already been settled, said TL Alamelu, Member (Non-Life), IRDAI, while inaugurating 13th Global Insurance E-summit organized by industry chamber Assocham.



# GENERAL

## **GIC records Rs. 771 crore loss:**

The second wave of Covid 19 has taken a major toll on the earnings of the General Insurance Corporation of India. The national reinsurer has recorded Rs. 999 crore of claims in its life reinsurance book during the first quarter of FY22 as death claims surged due to the second wave of the pandemic.

The spike in deaths resulted in a sharp jump in the combined ratio to 340%. The combine ratio reflects the percentage of claims and expenses to premium. In addition, the corporation provided an additional Rs 500 crore for losses on account of cyclone Tauktae and cyclone Yaas.

The corporation has reported a loss of Rs. 771 crore as compared to a profit of Rs. 1260 crore in the quarter ended March 2021. GIC Chairman Devesh Srivastava said, "the life insurance industry has had a setback due to Covid, although the future looks brighter, we took a very conservative approach as the aftermath of Covid is not fully known.

## **Finance Ministry to infuse more capital in general insurers:**

In a bid to improve financial health of state - owned general insurance companies, the Finance Ministry will infuse Rs. 3,000 crore capital into them. The proposal to provide capital support to three public sector general insurance companies - Oriental Insurance Company Ltd, National Insurance Company Limited and United India Insurance Co. Ltd has already been approved by the Union Cabinet.

The cabinet had also proposed to increase the authorised share capital of National Insurance Company to Rs. 7,500 crore and that of United India Insurance Co. Ltd and Oriental Insurance Company to Rs. 5,000 crore each to give effect to the capital infusion decision. The government had halted the

merger process of three National Insurance, Oriental Insurance and United India Insurance.

Recently, the government sought Parliament approval for gross additional expenditure of Rs. 6.28 lakh crore for 2020-21 as part of second and final batch of supplementary demands for grants. This included Rs. 3,000 crore for providing additional funds towards recapitalization of insurance companies.

## **General insurers to recover, as Covid cases fall, jabs rise:**

India's normal insurance coverage sector is about to regularly get well from excessive loss ratios, which hit the solvency margins of high gamers within the first half of 2021, on the again of decreasing vaccinations, ICICI Securities has stated.

PhonePe gets IRDAI license to serve as direct insurance broker:

Digital payments platform PhonePe said on Monday it has been issued an insurance booking license from the Insurance Regulatory and Development Authority of India (IRDAI)

Last year, PhonePe entered insurtech sector with a limited insurance corporate agent license which restricted the company to partnering with only three insurance companies in India.

## **Insurance products for Indian consumers:**

GunjanGhai, Vice President and Head of Insurance, states this license to be a big milestone in the company's insurance journey. This move to broking will give us further momentum and accelerate our growth in this space.

PhonePe forayed into the insurance segment in Journey 2020 as a corporate agent and has since launched offerings across general insurance, term insurance and health insurance.

The platform is India's leading digital payment platform having more than 300 million registered users. Using PhonePe, users can send and receive money, recharge mobile, DTH, data cards, pay at stores, make utility payments, buy gold and make investments.

### **Insurers likely to spike up premiums:**

The health insurance segment, which witnessed a 30.9 per cent jump in the June quarter, and terms cover plans of life insurers are likely to witness a spike in premium in the next couple of months in the wake of huge claims and losses, amid the Covid Pandemic. This year, life insurance Covid claims have seen a jump of 4 - 5 times when compared to the last year. "As a result, insurance companies have experienced losses, with even big ones that were making profits for 10 years in a row. Health claims have also shot up with the Covid second wave hitting insurers hard, said an insurance source.

With the third Covid wave expected any time, prices will be rising again for sure. There is no way insurance companies will be able to sustain at current prices as the provisions made were getting exhausted in the second wave itself. The rise will be different for various companies and segments, he said. I have burnt fingers in the Covid health claims, said an official of a PSU general insurer.

### **Only 14% of Covid deaths had insurance cover:**

While the country reported over 3.91 lakh deaths due to Covid 19 pandemic, only 14 per cent of them - 55,276 deaths have made insurance claims so far, indicating the poor life insurance penetration in the country.

Out of 55,276 claims intimated to the insurance firms, nearly 88 per cent 48,484 claims amounting to Rs. 3,593 crore have already been settled, said L. Alamelu, Member (non-life), Insurance companies have settled about 80 per cent over 15.39 lakh of health claims exceeding an amount of Rs. 15,000 crore as on June 22. Over 19.11 lakh Covid health claims have been reported as on June 22 as far as medical insurance or hospitalization is concerned, Alamelu said.

The repudiated claims for health cover are just about 4 per cent while in life it is just about 0.66 per cent, which is negligible, she said.

Alamelu said these figures showcase the opportunity available for insurers. Now we are grappling with the problem that most of these people have spent a good amount of their savings. It has even taken many

below the poverty line, they have gone into debts, sold their assets, pledged their jewellery and have been pushed back to the worst times, she said while addressing an Assocham event.

She said both the insurance industry and the regulator have worked together to design new policies to cater to the demands of new and unprecedented situation. We have also eased some processes and procedures to make it easier for servicing the policyholders, Alamelu said.

### **Drop in out-of-pocket expenses for policy holders:**

Insured people are seeing a drop in out-of-pocket expenses for Covid treatment in recent months, but they still have to shell out about 30 per cent of the claim amount.

Data with the Insurance Regulatory and Development Authority of India (IRDAI) reveal that on an average, about 71.4 per cent of the claim amount for Covid 19 treatment is settled by insurers, while the remaining 29 per cent has to be paid out of pocket by the policyholder.

The data reveal that of the average claim amount of Rs. 1.33 lakh, as much as Rs. 95,512 is settled through insurance.

Earlier, out of pocket expenses were higher, and could be to the tune of about 40 - 45 per cent, insurers say that there are various factors that lead to out-of-pocket expenses for customers during Covid treatment. However, it has come down significantly due to lower costs of consumables and standardized treatment protocols.







### **Subhash V/s. National Insurance Co. Ltd**

Mr. Subhash, the complainant has stated that his motor cycle was stolen on 03.11.2015 and though he had submitted all the required documents to the insurer, his claim was repudiated by the insurance company on the ground of delay in intimation. The complainant stated that his motorcycle bearing registration number UP 16 AA 9544 was stolen on 03.11.2015. Immediately, the incident of theft of the vehicle was reported to the insurer on telephone and to the police on 21.11.2015. Thereafter, he approached the insurer to submit written intimation to the policy issuing office but they refused to receive the letter and directed him to approach their Claim Hub. The complainant further stated that the officials of the insurer had harassed him a lot and made him run from one office to another for submission of intimation letter, hence, alleged delay in submission of intimation to the insurer was not his fault alone. The insurer stated that incident of theft

occurred pm 03.11.2015 but the complainant had submitted intimation letter to them on 08.12.2015 i.e. after 34 days. The complainant was asked to explain reasons of undue delay in intimation but he could not give any convincing reply. The complainant admitted that there was some delay in intimation to the insurer and to the police but the incident of theft was confirmed by the police in their final report dated. 31.12.2015, hence, repudiation of the claim was not justified. Ongoing through the documents exhibited and the oral submissions, it is observed that the incident of theft had actually occurred as confirmed by the Police Authorities also in their final investigation report dt. 31.12.2015. However, there was some negligence on the part of complainant as he did not inform the insurer in writing, immediately after theft of the vehicle. Considering the fact that theft of the vehicle cannot be disputed, The Insurance Company is directed to settle the claim on substandard basis instead of repudiation.

### **Col. S.L Narula v/s. United India Insurance Co. Ltd :**

Mr.S.L. Narula, the complainant has stated in his complaint that a Mediclaim for treatment of his son had not been

settled by the insurance company till date. The complaint stated that his son met with an accident on 24.09.2017 and was admitted in ICU of Kailash Hospital on the same day. The complainant had found a health card (corporate policy purchased by the employer of his son) in the wallet of his son and the same was handed over to the hospital for availing cashless treatment. M/s. Med Save, the TPA in this case, sanctioned cashless treatment up to Rs. One lakh as sum insured under the policy was Rs one lakh only.

When, the expenses of treatment exceeded the limit of one lakh, the hospital asked the complainant to pay balance amount. At that time, when he again searched documents of his son, he came to know that his son had also purchased another policy (Individual Mediclaim Policy) with sum insured of Rs. 3 lakhs from the same insurer. Accordingly, he handed over health card of the second policy to the hospital. In order to avail cashless benefit under second policy, the hospital discharged the patient on 29.09.2017 at about 7 pm and readmitted him on the same day after two hours.

This exercise was done only in records as patient remained admitted in the ICU during the intervening period of two hours. The claim papers for Rs. 2,06,188 were submitted to the TPA who sanctioned Rs. One Lakh only and disallowed balance amount of Rs. 1,06,188 in view of sum insured under the policy. Later, another claim of Rs. 94,800 for the hospitalization period from 29.09.2017 to 03.10.2017 was submitted to E-meditek, the TPA of second policy which was approved and paid by them. Since, the insurer was same in both the policies, the complainant approached the insurer several time requesting them to settle the claim for unpaid amount of Rs. 1,06,188 under the second policy but failed to get any relief.

The insurer stated that the TPA of the second policy had advised the complainant to submit original / certified documents for hospitalization which were submitted by him to M/s. Med Save the TPA of corporate policy, so as to enable them to process reimbursement of balance amount of Rs. 1,06,188 but the complainant failed to submit the same, hence his claim could not be settled by the TPA of the second policy (Individual Mediclaim policy).

The complainant stated that he was unable to understand as to why his claim had not been settled till date, when both the policies were issued by the same insurer. The insurer admitted that due to lack of co-ordination between the two TPAs, the claim for balance amount could not been settled. However, the insurer assured that the claim would be settled within one week from the date of receipt of required documents





## CLAIMS SETTLED THROUGH LINK-K (With both Public and Private Sector insurers)

**Period : 01.04.2020 to 31.03.2021**

Despite pandemic lockdown and closure of insurance company offices throughout the country as well as the insureds offices, we were able to service our clients with our Link-K teams untiring efforts and co-ordination with the clients and insurers in procuring various documents and effects smooth settlement of the claims. SL.No. 6 pertaining to mediclaim insurance mostly from Covid 19 claims. We attended all the phone calls from clients and assisted them in getting admission in various hospitals in Coimbatore, Chennai and also in Karnataka and co-ordinated with various TPA's for settling the claims. SL.No. 8 relates to Trade Credit Insurance policy, we have to co-ordinate with the insurer M/s. New India, HO, Mumbai, Atradius the re-insurer whose HO at Hongkong, various Debt Collecting Agencies and Credit Rating Agencies. Most of their staff and officers were working from home. We convinced them by sending required documents through mail and discussed over Google / Zoom meets and arranged for approval of credit limits as well as claim settlement.

S.NO.	DEPARTMENT	CLAIM AMOUNT
1	FIRE	47,09,600
2	MARINE	13,60,512
3	MOTOR	34,02,604
4	ENGINEERING	17,52,536
5	PERSONAL ACCIDENT	26,34,598
6	MEDICLAIM	43,59,702
7.	MISCELLANEOUS	46,86,328
8.	TRADE CREDIT INSURANCE	1,93,75,513
	<b>TOTAL</b>	<b>4,22,81,393</b>

## Claim due to Explosion to the Electrostatic Precipitator (ESP) :

A claim was reported by one of our major clients reporting damages due to explosion to the Electrostatic Precipitator (ESP) with accessories attached to the Boiler while pre-commissioning activities of the cogeneration Plant on 15.03.2020 covered under the Storage Cum Erection policy issued by M/s. United India Insurance Company Ltd.

The Project comprised of 1x21 MW Bagasse based Cogeneration plant undergoing erection activity. Our client had awarded the work to eight to twelve contractors comprising of civil works, Boiler and ESP, Turbo Generator, Generator Transformers, Fuel handling system, Ash handling system etc., The total value of the contract was around 75 crores and the erection job was in progress. The erection work was completed by six to seven contractors while the other contractors were continuing with the erection activity awarded to them. The Boiler, ESP and its accessories contract was under erection and testing, and that's when the collapse of the ESP happened when the contractors were carrying pre-commissioning testing activities for Boiler and its accessories. The total tonnage of the collapse of ESP and its associated parts as opined by the contractor was around 450MT and the loss was estimated to be 7.5 crores.

No sooner the claim was reported to us, we lost no time in contacting the Insurer as it was during the Covid 19 lockdown period and a surveyor was deputed to inspect and assess the loss from Mumbai by the competent authority of the Insurer. The Link Team made themselves available at the site to coordinate and assist the Insured, Insurer and the surveyor alike during every visit of the surveyor

at the damaged site. At every step up the way, the Link Team coordinated with all concerned in obtaining the necessary documents, seeking clarifications for queries raised and also assisting in disposal of the salvage until the final settlement.

Due to the high project cost and unforeseen loss our client represented for an interim advance payment

during end August, 2020 which was taken up with the Insurer and an amount of Rs.1,75,00,000/- was paid by the Insurer after obtaining the interim report from the surveyor in the month of December,2020 to ease the financial constraints due to the loss and also help them continue with completion of the Project uninterrupted.

Thus, the testing and commissioning of the Unit was completed and commissioning certificate submitted by early September, 2021 by our client. This enabled the Insurer to arrive at the final amount of claim payable which was arrived at Rs.4.55 (approx.)crores including the salvage value of around 58.80(approx.) lakhs realised as against a claim bill of 5.08 crores preferred. The balance claim amount was settled after adjusting the interim payment, Salvage and RIV Premium to the entire satisfaction of our client.

A claim of this magnitude settled by the Insurer due to untiring efforts and coordination of the LINK Team at every stage and cooperation of our client and Insurer is worth a mention here especially when the whole process was during the Pandemic threat at its peak which posed a major hurdle and threat in taking the claim forward as it involved travel within and outside the State.

As per 06.10.2021 report from the insured that the plant has achieved 100% of its installed capacity.

As the saying goes 'All's well that ends well and undoubtedly the settlement of this claim also ended well.

#### **LOSS OF CONTAINER WITH COSIGNMENT :**

One of our client reported loss of container with consignment of One hundred and fifty cotton bales booked from Pipavav to Tuticorin by Ship. The consignments were covered in two Invoices and was stuffed in one container and boarded in the Vessel "M.V.SSL Mumbai". The ship encountered bad weather/rough sea on May 15th and 16th due to cyclone Tauktae resulting in few containers falling off the hatch top from its original slot and falling into the sea. Unfortunately our client's container happened to be one of them to have with met with such a calamity

resulting in total loss of the consignment valued at Rs.35 lakhs.

As soon as the claim was notified to us we took up the matter with the Insurer for appointment of survey but the vessel had left New Mangalore Port prior to the appointment of survey .However a survey was arranged by the transporter and the report submitted by this surveyor enabled the Insurer's surveyor to conclude the admissibility and assessment of the claim.

All the documents requested by the surveyor were made available by coordinating with our client at every Stage, obtaining them at various phases and forwarding the same to the surveyor. There was some delay in submission of documents to the surveyor due to the prevalent pandemic situation then as the courier services were suspended completely for a while and there was no way to reach them to the surveyor.

The stowage plan sent to the surveyor had been signed by the Chief Officer of the ship who had marked the containers with Serial numbers which were on the deck at the time of mishap. The stowage plan diagram had the damaged containers and the missing containers marked clearly. The container was lost during the voyage and hence deemed not delivered. Since the claim was classified under Non delivery of Goods the question of salvage did not arise.

The claim was hence settled taking into account value of two Invoices plus 10% less excess and the amount payable was arrived at to be slightly more than Rs.35 lakhs.



# LIGHTER Moments



## Are you taking all the credit for your success?

While the battle of Kurukshetra was at its peak, Arjuna and Karna were fighting each other. It was a battle to witness, a flurry of arrows were being exchanged and even the gods were witnessing this epic battle between the two warriors.

Arjuna would shoot his arrows and the impact of these arrow was so intense that Karna's chariot would go back by 25 - 30 feet. People who witnessed this were amazed by the skills of Arjuna.

Karna was no less. When he shot arrows, Arjuna's chariot would also shake and go back by three - four feet.

More than anyone else, Krishna would applaud Karna every time his arrow hit Arjuna's chariot. But not once did he applaud Arjuna's skills.

At the end of the day, Arjuna asked Krishna O Lord, I have shot so many arrows at Karna's chariot, it was being displaced like a feather in the wind, but not once did you appreciate me. Rather, you would appreciate Karna's skill despite his arrows just displacing my chariot a little.

Krishna smiled and replied: Arjuna, remember, your chariot is protected by Hanuman on your flag at the top, you have me as your charioteer in the front and you have Sheshnag at its wheels, yet the whole chariot would still sway and get displaced whenever the valiant Karna hit us with his arrows. But Karna's chariot is not protected by any such force. He is on his own, yet he fights valiantly.

It is said that after the battle of Kurukshetra was over, Krishna refused to get off the chariot till Arjuna got down. Once Krishna alighted from the chariot, it caught fire and was reduced to dust.

Krishna said, O Arjuna, your chariot was destroyed by Karna a long time ago, I was still protecting it. Never in your life, have the arrogance to say that you have achieved great heights. It you have achieved great heights; it is due to the divine will. IT is divine intervention that has always protected you, cleared your path and given you right opportunities at the right time.





