



2805203650750802000

Mr Manishkumar Madanlal Chachani
 Behind Hotel Angethi Plot No 86
 Krushnai Vidya Nagar Jalna Road
 Aurangabad Maharashtra-431001
 Contact No.: 9823038660

Policy No : 2805203650750802000

Intermediary Code	Intermediary Name	Intermediary Contact Number
21038464	JAINUINE INSURANCE BROKER PVT LTD	

Renewal of Your Optima Restore Floater Insurance Policy

Dear Mr Manishkumar Madanlal Chachani ,

Welcome to HDFC ERGO General Insurance Company Limited. We are pleased to issue you Renewal of Your Optima Restore Floater Insurance Policy. We advise you to retain your Policy Kit during the entire term of the Policy (including renewals).

Please note that the Policy has been issued to you based on the declarations, details and documents received from/on behalf of you in/along with the Proposal Form submitted to us.

Please visit our website www.hdfcergo.com for more information about our Company, Grievance handling and any other support. To know the updated list of our network hospitals please visit <http://www.hdfcergo.com/our-hospitals-network.aspx>

We value your relationship with us and assure you our best services at all times and we look forward to serve you.

Warm Regards,



Authorized Signatory

Location: Mumbai

Date: 05/03/2022

Note:

1. Please update us with your latest contact details (in case of any change) so that same can be updated in our records.
2. You can either email us on care@hdfcergo.com or call on our Customer care no. 022 6234 6234 / 0120 6234 6234.
3. *The Copy of the proposal form has been sent on your registered email id if policy is purchased through website.

Certificate for the purpose of deduction under Section 80 D of Income Tax Act, 1961*

This is to certify that the Proposer MANISHKUMAR MADANLAL CHACHANI has paid Rs.65799 (Rupees SIXTY-FIVE THOUSAND SEVEN HUNDRED NINETY-NINE) towards premium for Policy No. 2805203650750802000 issued to MR MANISHKUMAR MADANLAL CHACHANI for period 20-Mar-2022 to 19-Mar-2023.

Location: Mumbai

Date: 05/03/2022

For and on behalf of HDFC ERGO General Insurance Company Limited



Authorized Signatory

*Note

1. This is subject to the provisions of Section 80D of Income Tax Act, 1961 as amended from time to time.
2. This certificate must be surrendered to the company in case of cancellation of this policy. In event of incorrect representation of this declaration the liability shall be upon the Policyholder.
3. Please note that this certificate will not be issued if the premium payment has been made in cash.
4. In case of dishonor of the premium instrument, the policy will be deemed cancelled ab initio.
5. 80D benefit is applicable for only Self, Spouse, Dependent Children and Dependent parents.

Policy Schedule - Optima Restore Floater

Policy Number	2805 2036 5075 0802 000		
Policy Holder's Name	Mr Manishkumar Madanlal Chachani		
Policy Holder's Address	BEHIND HOTEL ANGETHI PLOT NO 86 KRUSHNAI VIDYA NAGAR Jalna Road AURANGABAD MAHARASHTRA-431001		
Policy Holder State Name & Code	Maharashtra & 27	Place of Supply	MAHARASHTRA
GSTIN/ UIN (if any) of Policy Holder			
First policy inception date	20/03/2018	Policy Issuance Date	05/03/2022
Policy Period	From 00:01 hrs on 20/03/2022 To 24:00 hrs on 19/03/2023		
Issuing/ Servicing Office	AURANGABAD		
GSTIN	27AABCL5045N1Z8		
EIA Number			
Intermediary Name	JAINUINE INSURANCE BROKER PVT LTD	Intermediary Contact No	
Intermediary Code	21038464	Description/ Harmonized System Of Nomenclature Code	Accident and Health insurance Services/9971

Insured Person Details						
Particulars / Member ID	Member 1 Mr Shravan Manishkumar Chechani / 2020010001230672	Member 2 Miss Pranjali Manishkumar Chechani / 2020010001230673	Member 3 Mrs Madhulika Manishkumar Chechani / 2020010001230674	Member 4 MANISHKUMAR MADANLAL CHACHANI / 2020010001230675	Member 5	Member 6
Date of Birth (Age)	21/11/1999 (22)	10/10/1996 (25)	17/04/1970 (51)	02/08/1970 (51)	-	-
Relationship to Policy Holder	Son	Daughter	Wife	Self	-	-
Base Sum Insured (₹)	2500000					
Multiplier Benefit SI (₹)	2000000					
Protector Rider Sum Insured (₹)	-					
Total Sum Insured (₹)	4500000					

Other Riders and Benefits (₹)						
Protector Rider	-					
Hospital Daily Cash Rider SI (Max. 30 days)	-					
Critical Advantage Rider SI (\$)	-	-	-	-	-	-
IPA Rider SI	-	-	-	-	-	-

Nominee Details	
Nominee Name : Mrs Madhulika Chechani	Relationship to Policyholder: Wife
The nominee must be an immediate relative of the policyholder. For all other Insured Persons the policy holder shall be the nominee.	

Premium Calculation (₹)			
Net Premium	55762	CGST@9%	5018.5
Discounts	0	SGST/UTGST@9%	5018.5
Loadings	0	IGST@0%	0
Taxable Premium	55762	Any other Cess or Taxes	0
Gross Premium	65799		
Gross Premium (in words)	Rupees Sixty-Five Thousand Seven Hundred Ninety-Nine		
The stamp duty of Rs. 1/- (Rupees One Only) paid vide e-stamp Certificate No. LOA/CSD/225/2021/6304 dated 28/12/2021.			
Original for Recipient/ Duplicate for Supplier			
Whether tax is payable on reverse charge basis: No			

Exclusion(s) / Special Condition(s) (Refer the leaflet attached in the policy document w.r.t. exclusions) :						
Member ID No.	Name	Exclusion Type	Applicable on SI	Health Condition	Exclusion Duration (Years)	Portability/ Renewal Benefit
2020010001230672	Mr Shravan Manishkumar Chechani					For Rs 1000000(Rupees Ten Lakhs) Sec 5 A (i) and Sec 5 A (ii) Sec 5 A (iii) of the policy wording is waived. For Rs 500000(Rupees Five Lakhs) Sec 5 A (i) and Sec 5 A (ii) Sec 5 A (iii) of the policy wording is waived. For Rs 500000(Rupees Five Lakhs) Sec 5 A (i) of the policy wording is waived and Sec 5 A (ii) is reduced to 1 year and Sec 5 A (iii) is reduced to 2 years.

Policy Schedule - Optima Restore Floater

Exclusion(s) / Special Condition(s) (Refer the leaflet attached in the policy document w.r.t. exclusions) :						
Member ID No.	Name	Exclusion Type	Applicable on SI	Health Condition	Exclusion Duration (Years)	Portability/ Renewal Benefit
2020010001230675	MANISHKUMAR MADANLAL CHACHANI					<p>For Rs 1000000(Rupees Ten Lakhs) Sec 5 A (i) and Sec 5 A (ii) Sec 5 A (iii) of the policy wording is waived.</p> <p>For Rs 500000(Rupees Five Lakhs) Sec 5 A (i) and Sec 5 A (ii) Sec 5 A (iii) of the policy wording is waived.</p> <p>For Rs 500000(Rupees Five Lakhs) Sec 5 A (i) of the policy wording is waived and Sec 5 A (ii) is reduced to 1 year and Sec 5 A (iii) is reduced to 2 years.</p>
2020010001230674	Mrs Madhulika Manishkumar Chechani					<p>For Rs 1000000(Rupees Ten Lakhs) Sec 5 A (i) and Sec 5 A (ii) Sec 5 A (iii) of the policy wording is waived.</p> <p>For Rs 500000(Rupees Five Lakhs) Sec 5 A (i) and Sec 5 A (ii) Sec 5 A (iii) of the policy wording is waived.</p> <p>For Rs 500000(Rupees Five Lakhs) Sec 5 A (i) of the policy wording is waived and Sec 5 A (ii) is reduced to 1 year and Sec 5 A (iii) is reduced to 2 years.</p>
2020010001230673	Miss Pranjal Manishkumar Chechani					<p>For Rs 1000000(Rupees Ten Lakhs) Sec 5 A (i) and Sec 5 A (ii) Sec 5 A (iii) of the policy wording is waived.</p> <p>For Rs 500000(Rupees Five Lakhs) Sec 5 A (i) and Sec 5 A (ii) Sec 5 A (iii) of the policy wording is waived.</p> <p>For Rs 500000(Rupees Five Lakhs) Sec 5 A (i) of the policy wording is waived and Sec 5 A (ii) is reduced to 1 year and Sec 5 A (iii) is reduced to 2 years.</p>

Claim Administrator : HDFC ERGO GENERAL INSURANCE COMPANY LTD

For and on behalf of HDFC ERGO General Insurance Company Limited

Location: Mumbai

Date: 05/03/2022



Authorized Signatory

"For detailed policy terms and conditions please visit our website <https://www.hdfcergo.com/download/policy-wordings>"



Policy No.: 2805203650750802000

Insured Name	Gender
Mr Shravan Manishkumar Chechani	Male
Manishkumar Madanlal Chachani	Male
Mrs Madhulika Manishkumar Chechani	Female
Miss Pranjal Manishkumar Chechani	Female

Terms and Conditions

(1) This card would be valid till your relationship with HDFC ERGO General Insurance Company Limited / This card is invalid if the policy is cancelled (2) In case of renewal please refer original policy number (3) This card is issued for the purpose of identification only and does not entail automatic cashless facility at the network hospital. (4) A photo ID issued by any government authority is to be produced to avail cashless facility. (5) Please apply for cashless facility 48 hours prior to admission in case of planned admissions and within 24 hours of admission in case of emergency.(6) All terms and conditions of the policy would be applicable while processing your cashless request. (7) In case your cashless facility is denied due to any reason, please submit the claim for reimbursement. Denial of cashless facility does not indicate rejection of the claim. (8) Please read policy documents carefully for detailed terms and conditions. For claim status visit help section on our web site www.hdfcergo.com. Alternatively you may write to us at Healthclaims@hdfcergo.com.

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