



2805204117706501000

Mrs Sonal Vishal Ladniya
 H No 4-26-177/15, Muthiyar Vihar - B,
 Jyotinagar, Aurangabad, Aurangabad
 Maharashtra-431001
 Contact No.: 9420193771

Policy No : 2805204117706501000

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

Renewal of Your Optima Restore Individual Insurance Policy

Dear Mrs Sonal Vishal Ladniya ,

Welcome to HDFC ERGO General Insurance Company Limited. We are pleased to issue you Renewal of Your Optima Restore Individual 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: 05/04/2022

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 SONAL VISHAL LADNIYA has paid Rs.22614 (Rupees TWENTY-TWO THOUSAND SIX HUNDRED FOURTEEN) towards premium for Policy No. 2805204117706501000 issued to MRS SONAL VISHAL LADNIYA for period 06-Apr-2022 to 05-Apr-2023.

Location: Mumbai

Date: 05/04/2022

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 Individual

Policy Number	2805 2041 1770 6501 000		
Policy Holder's Name	Mrs Sonal Vishal Ladniya		
Policy Holder's Address	H NO 4-26-177/15, MUTHIYAN VIHAR - B, Jyotinagar, Aurangabad, 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	02/04/2019	Policy Issuance Date	05/04/2022
Policy Period	From 00:01 hrs on 06/04/2022 To 24:00 hrs on 05/04/2023		
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 Mrs Rajkumari Suresh Agrawal / 202009252816956	Member 2	Member 3	Member 4	Member 5	Member 6
Date of Birth (Age)	06/03/1963 (59)	-	-	-	-	-
Relationship to Policy Holder	Mother	-	-	-	-	-
Base Sum Insured (₹)	500000	-	-	-	-	-
Multiplier Benefit SI (₹)	300000	-	-	-	-	-
Protector Rider Sum Insured (₹)	-	-	-	-	-	-
Total Sum Insured (₹)	800000	-	-	-	-	-

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 : Mr Suresh Agrawal	Relationship to Policyholder: Husband
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	19164	CGST@9%	1725
Discounts	0	SGST/UTGST@9%	1725
Loadings	0	IGST@0%	0
Taxable Premium	19164	Any other Cess or Taxes	0
Gross Premium	22614		
Gross Premium (in words)	Rupees Twenty-Two Thousand Six Hundred Fourteen		
The stamp duty of Rs. 1/- (Rupees One Only) paid vide e-stamp Certificate No. LOA/CSD/303/2022/1381 dated 29/03/2022.			
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
202009252816956	Mrs Rajkumari Suresh Agrawal					For Rs 300000(Rupees Three Lakhs) Sec 5 A (i) and Sec 5 A (ii) Sec 5 A (iii) of the policy wording is waived.


Claim Administrator : HDFC ERGO GENERAL INSURANCE COMPANY LTD

For and on behalf of HDFC ERGO General Insurance Company Limited

Location: Mumbai


Date: 05/04/2022


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



Policy No.: 2805204117706501000

Insured Name	Gender
Mrs Rajkumari Suresh Agrawal	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.

HDFC ERGO General Insurance Company Limited. IRDAI Reg. No.146 CIN: U66030MH2007PLC177117. Registered & Corporate Office: 1st Floor, HDFC House, 165-166 Backbay Reclamation, H. T. Parekh Marg, Churchgate, Mumbai – 400 020. Health Claim Services Address : HDFC ERGO General Insurance Company Limited Stellar IT Park, Tower-1 , 5th Floor, C - 25, Noida, Sector 62, 201301, Uttar Pradesh. Service No. 022-62346234/ 0120-62346234Email: healthclaims@hdfcergo.com.Trade Logo displayed above belongs to HDFC Ltd and ERGO International AG and used by the Company under license.