HDFC ERGO General Insurance Company Limited





Mr Harish Subhash Agrawal

-

PLOTNO 55 RAVINDRA NAGAR MOHADI ROAD JALGAON JALGAON MAHARASHTRA - 425001 Contact No.: 9923387999

Email: vallabh.ind@rediffmail.com

Policy No: 2805 2036 3847 3502 000

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

Renewal of Your Optima Restore Floater Insurance Policy

Dear Mr Harish Subhash Agrawal,

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 https://www.hdfcergo.com/locators/cashless-hospitals-network

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

Warm Regards,

Location: Mumbai

Date: 05/04/2022

Kargotta Authorized Signatory

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 MR. HARISH SUBHASH AGRAWAL has paid Rs. 24832 (Rupees Twenty-Four Thousand Eight Hundred Thirty-Two And Zero Paise Only) towards premium for Optima Restore Floater Policy No. 2805203638473502000 issued to MR. HARISH SUBHASH AGRAWAL for period of 14/04/2022 to 13/04/2023.

For and on behalf of HDFC ERGO General Insurance Company Limited

Location: Mumbai Date: 05/04/2022

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.
- 80D benefit is applicable for only Self, Spouse, Dependent Children and Dependent parents.



Policy Schedule - Optima Restore Floater

Policy Number		2805 2036 3847 3502 000								
Policy Holder's Name			Mr Harish Subhash Agrawal							
Policy Holder's Addres			PLOTNO 55 RAVINDRA NAGAR MOHADI ROAD JALGAON JALGAON MAHARASHTRA - 425001							
Policy Holder State Name & Code			Maharash	Maharashtra(27) Place of Supply MAHARASHTRA						
GSTIN/ UIN (if any) of		lolder								
First policy inception date		31/03/2016 Policy Issuance Date 05/04/2022				22				
Policy Period			From 00:01 hrs on 14/04/2022 To 24:00 hrs on 13/04/2023							
Issuing/Servicing Office				2ND FLOOR , MALPANI S OBEROI TOWER, OPPOSITE GOVERNMENT MILK DAIRY, RAMANAND COLONY, JALNA ROAD, AURANGABAD -431001, MAHARASHTRA AURANGABAD Tel : +91-22-66383600						
			JALNA R	OAD, AURANGABAD	-431001, MAHARAS	SHTRA AURANGA	ABAD Tel:	+91-22-663836	00	
GSTIN			27AABCL	.5045N1Z8						
EIA Number			Not provided							
Intermediary Name			JAINUINE INSURANCE BROKER PVT LTD Intermediary Contact No			-				
Intermediary Code			21038464		Description/ Harmonized System (em Of Accident			
					N	omenclature Code	!	Services	/9971	
nsured Person Deta	ils					,		·		
nourou i oroon bota		Memb	ner 1	Member 2	Member 3	Member 4		Member 5	Member 6	
	_	HARISH S		Mrs Bhavna Harish			h	WOMBO! O	Wichingor C	
Particulars / Member I	D	AGRA		Agrawal /	AGRAWAI /	agrawal /				
		20200926		202009262819137	202111000803346		3464			
Date of Birth (Age)		13/11/19		08/10/1978 (43)	07/03/2003 (19)	15/10/2004 (1		-	-	
Relationship to Policy	Holder	Se	_ ,	Wife	Son	Daughter		_	-	
Base Sum Insured (₹)			···			00000				
Multiplier Benefit SI (₹	:)					00000				
· · · · · · · · · · · · · · · · · · ·	. /				41	00000				
Protector Rider						-				
Sum Insured (₹)										
Total Sum Insured (₹)					14	.00000				
Other Riders and Be	nefits (₹	₹)				-				
Hospital Daily Cash R	idor CI									
nospitai Daliy Cash R (Max. 30 days)	lider Si					-				
	d = " Cl			<u> </u>	I		1			
Critical Advantage Ric (\$)	Jei Si	-	•	-	-	-		-	-	
IPA Rider SI			•	-	-	-		-	-	
Nominee Details										
Nominee Name : Mrs						Relationship to Poli				
The nominee must be	an imme	ediate relati	ve of the p	olicyholder. For all oth	er Insured Persons	the policy holder sh	nall be the	nominee.		
Premium Calculation	n (₹)				·					
Net Premium	II (\)			2104/	4 CGST@9%				18	
Discounts					SGST/UTGST@9	0/			18	
DISCOUNTS						%			18	
a a alta ara					0 IGST@18%					
Loadings						T				
Taxable Premium				21044	4 Any other Cess or	Taxes				
Taxable Premium Gross Premium				2104 ⁴ 24832	Any other Cess or					
Taxable Premium Gross Premium Gross Premium (in wo				21044 24832 Four Thousand Eight	4 Any other Cess or 2 Hundred Thirty-Two	And Zero Paise O				
Taxable Premium Gross Premium Gross Premium (in wo The stamp duty of Rs.	. 1/- (Ru _l	pees One A	And Zero P	2104 ⁴ 24832	4 Any other Cess or 2 Hundred Thirty-Two	And Zero Paise O		dated 28/03/202	22.	
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Faxable Premium Gross Premium Gross Premium (in wo The stamp duty of Rs. Driginal for Recipient/ Whether tax is payable Exclusion(s) / Specia Member ID No.	. 1/- (Ru Duplicat e on reve al Condi	pees One A re for Suppl erse charge tion(s) (Re Name	And Zero Pier basis: No fer the lea	21044 24832 Four Thousand Eight aise Only) paid vide e	4 Any other Cess or 2 Hundred Thirty-Two e-stamp Certificate N olicy document w. Applicable	And Zero Paise O lo. LOA/CSD/303/2	Exclusion Duration	Portability For Rs 25000(F	// Renewal Benefit Rupees Twenty-Five 5 A (i) and Sec 5 A	
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HDFC ERGO General Insurance Company Limited



Policy Schedule - Optima Restore Floater

Member ID No.	Name	Exclusion Type	Applicable	Health Condition	Exclusion	Portability/ Renewal Benefit
		,,	on SI		Duration	
					(Years)	
202009262819137	Mrs Bhavna Harish Agrawal					For Rs 50000(Rupees Fifty Thousand) Sec 5 A (i) and Sec 5 A (i Sec 5 A (iii) of the policy wording is waived.
						For Rs 25000(Rupees Twenty-Five Thousand) Sec 5 A (i) and Sec 5 A (ii Sec 5 A (iii) of the policy wording is waived.
						For Rs 225000(Rupees Two Lakhs Twenty-Five Thousand) Sec 5 A (i) and Sec 5 A (ii) Sec 5 A (iii) of the policy wording is waived.
						For Rs 200000(Rupees Two 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.
2021110008033463	CHIRAYU HARISH AGRAWAI					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.
2021110008033464	rishita harish agrawal					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.

Claim Administrator: HDFC ERGO General Insurance Company Ltd

For and on behalf of HDFC ERGO General Insurance Company Limited

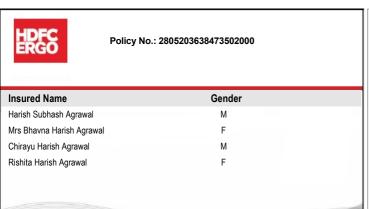
Authorized Signatory

Location: Mumbai

Date: 05/04/2022

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





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.

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.