HDFC ERGO General Insurance Company Limited





Mr Pushkar Sanjay Dusane A-7 SHITAL PARADISE ,SATYAM SWEETS , GOVIND NAGAR , NASHIK, CIDCO COLONY Nashik NASHIK MAHARASHTRA-422009 Contact No.: 9422119393

Policy No: 2805203585343602000

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

Renewal of Your Optima Restore Individual Insurance Policy

Dear Mr Pushkar Sanjay Dusane,

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.

Village

Warm Regards,

Location: Mumbai Date: 12/06/2022

Authorized Signatory Note:

- 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 PUSHKAR SANJAY DUSANE has paid Rs.9782 (Rupees NINE THOUSAND SEVEN HUNDRED EIGHTY-TWO) towards premium for Policy No. 2805203585343602000 issued to MR PUSHKAR SANJAY DUSANE for period 14-Jun-2022 to 13-Jun-2023.

For and on behalf of HDFC ERGO General Insurance Company Limited

Location: Mumbai Date: 12/06/2022

Authorized Signatory

*Note

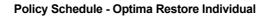
- 1. This is subject to the provisions of Section 80D of Income Tax Act, 1961 as amended from time to time.
- 2. This certificate must be surrendered to the company in case of cancellation of this policy. In event of incorrect representation of this declaration the liability shall be upon the Policyholder.
- 3. Please note that this certificate will not be issued if the premium payment has been made in cash.
- 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

Delieus Numele en		2005 202	F 0F24 2C02 000									
Policy Number Policy Holder's Name		2805 2035 8534 3602 000										
·		Mr Pushkar Sanjay Dusane A-7 SHITAL PARADISE ,SATYAM SWEETS , GOVIND NAGAR , NASHIK, CIDCO COLONY Nashik NASHIK										
Policy Holder's Address	MAHARASHTRA-422009											
Policy Holder State Name & Code		Maharashtra & 27				Place of Supply			MAHARASHTRA			
GSTIN/ UIN (if any) of Policy Holder												
First policy inception date	14/06/2020 Policy Issuance Date 12/06/2022											
Policy Period Issuing/Servicing Office	From 00:01 hrs on 14/06/2022 To 24:00 hrs on 13/06/2023 AURANGABAD											
GSTIN		27AABCL5045N1Z8										
EIA Number		Z1AADULDU4DIN1Z8										
Intermediary Name	JAINUINE INSURANCE BROKER PVT LTD Intermediary Contact No											
Intermediary Name Intermediary Code									Of Accident and Health insurance			
					Nomenclature Code				Services/9971			
Insured Person Details		<u> </u>						·				
	Meml	per 1	Member 2	Member 3	Member 4				er 5	Member 6		
Particulars / Member ID	PUSHKAF											
T dittodiaro / Worldon	DUS/											
Date of Birth (Age)	20200100		_							_		
Relationship to Policy Hold			-	-		<u> </u>		-		-		
Base Sum Insured (₹)	500		-							-		
Multiplier Benefit SI (₹)	500		-		$\overline{}$							
Protector Rider	300	000	-		-	-				-		
Sum Insured (₹)	-		-	-		-		-		-		
Total Sum Insured (₹)	1000	0000	_			_				_		
Other Riders and Benefi Protector Rider								_		T		
Hospital Daily Cash Rider		•	-	-		-				-		
(Max. 30 days)		-	-	-		-		-		-		
Critical Advantage Rider S (\$)		-	-	-		-		-		-		
IPA Rider SI		-	-	-		-		-		-		
my: health Critical Illness Sum Insured (Rs.)												
my: health Critical Illness Plan												
Unlimited Restore Benefit	N	0	No	No		No		No		No		
Nominee Details												
Nominee Name : Mr Sanja						nship to Poli						
The nominee must be an i	mmediate relat	ive of the p	olicyholder. For all othe	er Insured Person	ns the po	licy holder sh	nall be the r	nomine	ee.			
Premium Calculation (₹)												
Net Premium				CGST@9%						746		
Discounts		0 SGST/UTGST@9%						746				
Loadings			0	IGST@0%						C		
Taxable Premium			8290	Any other Cess	or Taxes	3				0		
Gross Premium			9782									
Gross Premium (in words)	Rupe	es Nine Th	ousand Seven Hundre	d Eighty-Two								
The stamp duty of Rs. 1/-			vide e-stamp Certificat	e No. LOA/CSD/	303/2022	2/1381 dated	29/03/2022	2.				
Original for Recipient/ Dup												
Whether tax is payable on												
Exclusion(s) / Special Co		fer the lea										
Member ID No.	Name		Exclusion Type	Applicable on SI	e Health	h Condition	Exclusion Duration (Years)	F	Portability/ Renewal Benefit			
2020010001484927	PUSHKAR SAN DUSANE	JAY					,	Sec 5	Rs 300000(Rupees Three Lakhs) 5 A (i) and Sec 5 A (ii) Sec 5 A of the policy wording is waived.			

HDFC ERGO General Insurance Company Limited





Claim Administrator: HDFC ERGO GENERAL INSURANCE COMPANY LTD

For and on behalf of HDFC ERGO General Insurance Company Limited

Location: Mumbai

Date: 12/06/2022

Authorized Signatory

"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 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.