



3317202406299504000

MR SOHRAB DAVINDER SINGH
FLAT 2 BLOCK-3S SHRI BALAJI AGORA
RESIDENCY B/H AGORA MALL S P RING ROAD
AHMEDABAD, GUJARAT, 382424
Contact No : 8306016874

Thank you for choosing HDFC ERGO as your preferred insurance partner. We welcome you to be a part of our family !

Your Personal Accident Insurance Policy no 3317202406299504000 is confirmed on the basis of the information and declaration given by you. The details of coverage are mentioned in the enclosed policy schedule of insurance.

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

Now you can view your policy details and health card at your fingertips. Download our Mobile App now and experience convenience today!!"

For HDFC ERGO General Insurance Company Ltd.



Vivek Rasgotra
Senior Vice President Operations and Services Group

TAX CERTIFICATE

Dear Sohrab Davinder Singh,

Subject : Certificate for the purpose of deduction under section 80 D of Income Tax (Amendment) Act, 1986

This is to certify that we have received an amount of ₹ 753 towards premium for , Policy No. 3317202406299504000 issued to SOHRAB DAVINDER SINGH for the period 19/07/2022 to 18/07/2023.

Note : This is subject to the provisions of Section 80D of income tax (Amendment) Act, 1986 as amended from time to time.

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 policy holder.

Date : 14/07/2022

Policy Issuing Office: Mumbai

For HDFC ERGO General Insurance Company Ltd.



Duly Constituted Attorney



3317202406299504000

MR SOHRAB DAVINDER SINGH FLAT 2 BLOCK-3S SHRI BALAJI AGORA RESIDENCY B/H AGORA MALL S P RING ROAD AHMEDABAD, GUJARAT, 382424 Contact No : 8306016874	Policy No.	:3317 2024 0629 9504 000		
	Period of Insurance	:From 19/07/2022 00:01 hrs To 18/07/2023 Midnight		
	Invoice No.	:202406299504000		
	Proposer Name	:Mr Sohrab Davinder Singh		
	HSN Code	:997133		
	Customer Id	:100941010738		
	Annual Income	:3000000		
	Occupation	:Others		
	Loan Account No.			
	Lending Institution			
Email ID	:sales.jainuine@gmail.com			
Payment Details	: 90200008767788, Bank Name: BizDirect			

my:health Koti Suraksha - Insured Person's Details & Sum Insured

Insured's Name	Relation with policy holder	Gender	DOB	Nominee Name	Nominee Relationship	1st Policy Inception	Sum Insured	Occupation	Annual Income	Pre Existing Disease
Sohrab Davinder Singh	Self	M	15/12/1985	Davinder	FATHER	19/07/2018	As mentioned below	Others	3000000	No

The nominee must be an immediate relative of the policyholder. For all other Insured Persons the policy holder shall be the nominee

Schedule of Coverage

Section B. Personal Accident

Section B.I Base Coverages

Section #	Covers	Member 1 Self Base Sum Insured / Sum Insured	Member 2	Member 3	Member 4
1	Accidental Death	5000000/5000000			
i	Disappearance	5000000/5000000			
ii	Comatose Benefit	2500000/2500000			
Optional Cover under Accidental Death					
i	Burns	50000/50000			
2	Permanent Disablement (Table D)	5000000/5000000			
3	Temporary Total Disability	1560000/1560000			
I	Temporary Total Disability - Accident Only	15000 per Week, 104 Weeks/15000 per Week, 104 Weeks			
II	Temporary Total Disability - Accident & Illness	0/0			
4	Broken Bones	100000/100000			
5	Emergency Medical Expenses	100000/100000			
Optional Covers under Emergency Medical Expenses					
i	Emergency Medical Expenses - Global (\$100 Deductible)	0/0			
ii	Co-Payment (in percentage)	0/0			
6	Hospital Cash - Accident Only	3000 per Day, 30 Days/3000 per Day, 30 Day			
Optional Covers under Hospital Cash - Accident Only					
i	Companion Benefit	0/0			
ii	Hospital Cash - ICU	0/0			
iii	Time Deductible modification Option	0/0			
iv	Hospital Cash - Global	0/0			
7	Chauffeur Benefit	0/0			

Section B III. Optional Covers under Section 2 – Personal Accident

i	Preventive Health Check Up	0/0			
ii	Last Rites	10000/10000			
iii	Dependent Child Education Benefit	500000/500000			
iv	Renewal Premium Benefit	0/0			
v	Parental Care Benefit	50000/50000			
vi	Medical Evacuation	0/0			

Waiting Periods Applicable to Temporary Total Disablement Illness and Emergency Medical Expenses under Section.B

Section B.IV	Pre-existing Conditions	48months
Section B.IV	Listed illness & procedures	24 Months
Section B.IV	General Waiting Period	30 days from Policy inception date

The Policy Wording attached herewith includes all the standard coverage's offered by the Company to its customers. Your entitlement for coverage/benefits shall be restricted to the coverage/benefits as mentioned in this Policy Schedule issued to you. Please read the Policy Wording in conjunction with the Policy Schedule. For any clarification, please call our toll free number. The Maximum Compensation in respect of an Insured Person under the policy shall not exceed 10 times the Annual Income (as declared in the Proposal Form). Income proof for availing the compensation at the time of claim is mandatory. Income proof shall mean the previous year's returns filed with the Income Tax Department.

Premium Details (₹)		
	Particulars	Premium
A	Basic Premium	6,950.00
B	Optional Cover Premium	320.00
C	Net Premium (A+B)	7,270.00
D	GST 18% : Central Tax 9% (₹654.5) + State Tax 9% (₹654.5)	1,309.00
E	Gross Premium (C+D)	8,579.00

Special Conditions		

For Claim/Policy related queries call us at +91- 22 6234 6234/+91- 120 6234 6234 or Visit Help Section on www.hdfcergo.com for policy copy/tax certificate/make changes/register & track claim.

The policy is valid subject to payment received by us. If the premium is not realised the policy shall be void from inception. Consolidated stamp duty for this Insurance Policy is paid by Demand Draft, vide Receipt/Challan noLOA NO. CSD/366/2022/2430 dated 06/06/2022 as prescribed in Government of Maharashtra Order No. Mudrank-2017/CR.97/M-1, dated the 09th January 2018". Goods & Services Tax Registration No: 24AABCL5045N1ZE. GST for this invoice is not payable under reverse charge basis.

Branch :206, sec fl. shopper plaza iv,opp. bsnl tel exch rd, navarangpura ahmedabad

Broker Name : JAINUINE INSURANCE BROKER PVT LTD
 Broker Code : 21038464

For HDFC ERGO General Insurance Company Ltd.



Duly Constituted Attorney

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