

Schedule of Travel Guard Policy

Issued at Hyderabad

Schedule Number:	7100464343	Date Issued:	30/06/2022
Insurance Plan:	Travel Guard Policy SilverPlus Without Sublimits	Producer Code:	0008731003
Zone:	WORLDWIDE INCLUDING USA & CANADA	Applicant Phone No:	9949992911
Travel Dates:	From: 31/07/2022 To: 27/08/2022	Applicant Name:	BURAGADDA REVATHI ROHINI
Duration:	28 Days		
Applicant Address:	6-3-885/405, LEGEND APRTS THAKUR MANSION LANE, SOMAJIGUDA, 500082, HYDERABAD Place of supply -TELANGANA State code -36		

PREMIUM		
Premium	INR	9,897.00
UGST/SGST @ 9%	INR	891.00
CGST @ 9%	INR	891.00
TOTAL PREMIUM	INR	11,679.00

IMPORTANT: Any Pre-Existing Medical condition/ Ailments declared or undeclared will be excluded from the policy. The Coverage provided is subject to the details and declaration made in the proposal to the company and attached Policy Wording.

BENEFITS	MAXIMUM COVERAGE	DEDUCTIBLE
Accidental Death and Dismemberment Benefit (24 hrs)	\$ 10,000	
Accidental Death and Dismemberment Benefit (Common Carrier)	\$ 5,000	
Accident and Sickness Medical Expense Reimbursement	\$ 100,000	\$ 100
Sickness Dental Relief	\$ 400	\$ 150
Emergency Medical Evacuation Benefit	Included*	
Repatriation of Remains	Included*	
Baggage Delay Benefit (After first 12 hrs.)	\$ 100	
Checked Baggage Loss Benefit	\$ 750	
Loss of Passport Benefit	\$ 250	\$ 30
Personal Liability Benefit	\$ 150,000	\$ 200
Flight Delay	\$ 100	
Hijack	\$ 500	
Automatic extension of policy upto 7 days	Available*	
Fraudulent Charges (Payment Card Security)	\$ 500	
Home Burglary (In ₹)	₹ 100,000	
Trip Cancellation	\$ 500	\$ 50
Trip Curtailment	\$ 500	\$ 50
Missed Connection / Missed departure	\$ 500	\$ 50
Bounced hotel / Airline booking	\$ 500	\$ 50
Emergency cash advance	\$ 750	

NOTES
 *Included under the overall limit of Accident & Sickness Medical Expenses Reimbursement.
 Under annual multi-trip, entry age is up to 70 years. Renewals are applicable beyond 71 years and policy terms & conditions shall commence only in case of renewals.
 Notice of a medical condition /event must be provided to your assistance contact (see below) at time of care or as soon as possible after emergency care; failure to do so may affect benefits and coverage.
This plan is without sublimits

Insured #	Insured Name	Passport Number	Date of Birth	Assignee
1	Mrs BURAGADDA REVATHI ROHINI	Z4586951	17/06/1959	MADASU RAMESH NAIDU

The benefits mentioned in this table are applicable for every single insured individually covered under this policy.

For TATA-AIG General Insurance Company Limited

Authorized Signatory

Agent/Broker Name - JAINUINE INSURANCE
 BROKERS PVT LTD
 Agent/Broker License Code - 376
 Agent/Broker :Contact No - 18002667780

Declaration:
 I/We declare and state that all statements and information furnished in the Proposal to the company and as captured in the above schedule of Insurance are true and complete. If found that the said statements and information furnished/stated is incorrect or untrue in any respect or manner whatsoever, I agree and acknowledge that the Insurance company shall not be liable in any manner whatsoever in respect of the insurance coverage under this policy.

Insurance Stamp Duty Paid: ₹1/- vide receipt/Challan No. LOA/CSD/318/2022/1601 dated 08/04/2022

Signature of the Insured/ Proposer: _____



WITH YOU ALWAYS

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Address for Claims/Reimbursement Claim (For Insureds only)	Assistant Contact (For Insureds only)	US Medical Claims (For Providers Only)
Claims Department Tata AIG General Insurance company Ltd. A-501, 5th Floor, Building No. 4, Infinity Park Gen. A.K. Vaidya Marg, Dindoshi, Malad(E), Mumbai, India-400 097. Visit our website : www.tataaiginsurance.in OR Email at customersupport@tata-aig.com OR call our 24x7 toll-free helpline 1800-266-7780 (Accessible from all lines) OR 1800- 11-9966(Accessible from MTNL/BSNL lines)	For excluding the Americas Policies: Call: +91 – 022 68227600 Email : EA.TATAclaims@europ-assistance.in For the Americas Policies: Please call: +1-833-440-1575 (Toll free within US & Canada) Email : tata.aig@europ-assistance.in	Plan Type: Travel Guard Policy SilverPlus Without Sublimits Policy Certificate #: 7100464343 Mail Medical Claims to:  Global Medical Management Europ Assistance India Star Hub Building number 2, floor 7, Near ITC Maratha, Andheri E, Mumbai - 400 059 Please call: +1-833-440-1575 (Tollfree within US and Canada) Email id- tata.aig@europ-assistance.in



WITH YOU ALWAYS

Signed for & on Behalf of TATA-AIG General Insurance Company Ltd.

Authorized Signatory

RECEIPT

Receipt No. : 106001032264336

Receipt Date : 05/07/2022

Policy No : 7100464343 0 00

Received with thanks from RAMESH NAIDU MADASU a sum of ₹ **11,678.00** (Rupees Eleven Thousand Six Hundred Seventy Eight And Paise Zero Only) vide Cheque no. 029113 dated 28/06/2022 drawn on AXIS BANK LTD ,PAYABLE AT PAR branch NARSINGI towards

Sr. No.	Policy Number	Total Premium (₹)	Utilized from the receipt for policy (₹)	Balance (₹)
1	7100464343 0 00	11,679.00	11,678.00	0.00

Note:

1. This is a computer generated receipt and does not require a signature.
2. Upon issuance of this Receipt, all previously issued temporary receipts, if any, related to this Policy shall be considered null and void.
3. Amounts received by cheque shall be subject to realisation.
4. Any amount received in excess of the Premium is being/shall be refunded by the Company.

GSTIN : 36AABCT3518Q1ZX - TELANGANA Service Accounting Code : 997136

Revenue (consolidated) Stamp Duty duly paid vide challan No.LOA_NO.CSD/270/2022/727 date 10/02/2022 for applicable cases.