

## Mediclaim Insurance Policy(Individual) POLICY SCHEDULE

IRDA UIN NO.: OICHLIP446V032021

**Policy No.** : 182100/48/2023/1819 **Prev. Policy No.** : 182100/48/2022/1681  
**Cover Note No.** : - **Cover Note Date** : -  
**Insured's Code** : 68084185 **Issue Office Code** : 182100  
**Insured Name** : ULHAS MADHUKAR RUDRAWAR (GSTIN: 0) **Issue Office Name** : DO II AURANGABAD (GSTIN: 27AAACT0627R4ZW)  
**Address** : MAIN ROAD. OPP. NAGARPALIKA, AT, POST-MAJALGAON, DIST-BEED - BEED MAHARASHTRA 431131 **Address** : OFFICE NO.1 AND 2 [P] 3RD FLOOR, ABC EAST, BESIDE PROZONE MALL, MIDC AREA, CHIKALTHANA AURANGABAD MAHARASHTRA 431003  
**Tel./Fax/Email** : / / 0 / NA **Tel./Fax/Email** : 0240-2331985, 2332454 / 0240--2332454 / santosh.k@orientalinsurance.co.in

### Agent/Broker Details

**Dev.Off.Code** :  
**Agent/Broker** : LC0000000281 JAINUINE INSURANCE BROKERS PVT LTD  
**Address** : F-63 FIRST FLOOR, GOLANI MARKET, JALGAON, JALGAON, MAHARASHTRA, 425001  
**Tel/Fax/Email** : 02572225747//

Period of Insurance : FROM 00:00 ON 30/07/2022 TO MIDNIGHT OF 29/07/2023

Collection No. & Dt. : DC\_I\_IND 8718001683 - 26/07/2022 GST INVOICE NO :2721242385 UIN :0

Gross Premium : 32,444 Service Tax : 5,840 Stamp Duty : .5 Total : 38,284

Co-insurance Details : Nil

### TPA Details :

TPA ID : YA0000000334  
TPA Name : M/S MD INDIA HEALTH INSURANCE TPA PVT. LTD.  
Address : MD INDIA HOUSE, SURVEY NO.147/8 Sr. Bo. 46/1, Espace, A2 Blg, 4th floor, Pune Nagar Road, Vadgaonsheri, Pune 411014 customercare@mdindia.com, info@mdindia.com  
Telephone No : PUNE 411038 Toll Free No. : 1800 209 7777, 1800 209 7800  
FAX No. :

Particulars of the Persons covered : Number of persons covered : 1

| Sr. No. | Name of The Persons     | Gender | Date of Birth | Age | Relationship With Proposer | Pre-Existing Diseases | Sum Insured (INR) | Co-Pay (%) | PA Capital Sum Insured (INR) |
|---------|-------------------------|--------|---------------|-----|----------------------------|-----------------------|-------------------|------------|------------------------------|
| 1       | ULHAS MADHUKAR RUDRAWAR | M      | 27/04/1959    | 63  | Self                       | NO                    | 6,00,000          |            |                              |

### Nominee Details

Place : AURANGABAD

Date : 26/07/2022



IRDA-REGNO-556

For and on behalf of  
The Oriental Insurance Company Limited

In case of any query regarding the Policy please call Toll Free No. 1800 11 8485 and 011 33208485.

Authorised Signatory

CIN: U66010DL1947GOI007158 All the Amounts mentioned in this policy are in Indian Rupee

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IRDA Regn. No. 556 - Now you can buy and renew selected policies online at www.orientalinsurance.org.in

Attached to and forming part of policy number 182100/48/2023/1819

| Name Of the Nominee | Relationship With the Insured | Age Of the Nominee | M/F/TG* |
|---------------------|-------------------------------|--------------------|---------|
|---------------------|-------------------------------|--------------------|---------|

Total Premium in words : Indian Rupees Thirty-Eight Thousand Two Hundred Eighty-Four Only

The insurance under this policy is extended to cover risks of :  
Domiciliary Hospitalisation Cover.

Deductible : Nil

The insurance under this policy is subject to conditions, clauses, warranties, endorsements as per forms attached.

The policy shall pay for hospitalisation expenses for medical/surgical treatment taken as an in-patient at any Nursing Home/Hospital in INDIA as defined in the policy.

In the event of a claim under the policy exceeding Rs. 1 lac or a claim for refund of premium exceeding Rs. 1 lac, the insured will comply with the provisions of the AML policy of the Company. The AML policy is available in all our operating offices as well as Company's website.

Warranted that in case the person covered under the policy has lodged any claim under the previous policy and the sum insured is enhanced under the current policy, for a further claim for the same disease during the current policy, the earlier limit of Sum Insured shall be applicable and not the enhanced sum insured.

Warranted that in case of dishonour of premium cheque(s) the Company shall not be liable under the policy and the policy shall be void abinitio (from inception).

**"We at Oriental continuously strive to ensure that you get the best possible treatment from our network hospitals. Please contact your TPA or any of the Oriental offices for our preferred hospitals in your area before going for a treatment. This will help us serve you in the best possible manner"**

In witness whereof the undersigned being authorised by and on behalf of the Company has/have herein to set his/their hands at DO II AURANGABAD (GSTIN: 27AAACT0627R4ZW) on 26-JUL-22.

**1.Claim to be reported within 48 hrs of admission but before discharge.**

**2.Claim documents to be submitted within 15 days of discharge.**

**For complete details please refer to policy condition.**

#### Policy History Data

| Policy No.          | Period From | Period To | Insurer Name                        | Sum Insured |
|---------------------|-------------|-----------|-------------------------------------|-------------|
| 182100/48/2019/1972 | 30-JUL-18   | 29-JUL-19 | OIC DO II A'BAD                     | 6,00,000    |
| 182100/48/2020/1922 | 30-JUL-19   | 29-JUL-20 | The Oriental Insurance Company Ltd. | 6,00,000    |
| 182100/48/2021/2231 | 30-JUL-20   | 29-JUL-21 | The Oriental Insurance Company Ltd. | 6,00,000    |
| 182100/48/2022/1681 | 30-JUL-21   | 29-JUL-22 | The Oriental Insurance Company Ltd. | 6,00,000    |

#### Claim History Data

| Policy no. | Claimant Name | Claim No. | Claim OS | Claim Paid |
|------------|---------------|-----------|----------|------------|
|------------|---------------|-----------|----------|------------|

Place : AURANGABAD



IRDA-REGNO-556

Date : 26/07/2022

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"In case of grievance related to any issue related to this policy the same may be addressed to the office In-Charge or the Grievance Officer at above policy address. If the grievance remains pending, it may be escalated to Grievance Officer of the concerned Regional Office REGIONAL OFFICE, 4TH FLOOR, S.K.TOWERS, NELSON SQUARE, CHHINDWARA ROAD. The next escalation in case grievance remains unresolved is CSD, Head Office, situated at Oriental House, A-25/27, Asaf Ali Road, New Delhi-110002. If the insured is not satisfied with the resolution/reply provided by the company, he/she may approach the Office of Insurance Ombudsman, within his/her jurisdiction. The list of offices of Ombudsman is available on Company's portal."

For and on behalf of  
The Oriental Insurance Company Limited

Entered By : RAJESH ACCEL  
Examined By : KANCHUMARTI BHARAT BABU

Authorised Signatory

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Place : AURANGABAD  
Date : 26/07/2022



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