



2805204204541401000

Mr Shubham Vyankatesh Kabra  
 SHASTRI NAGAR  
 SAILU PARBHANI  
 PARBHANI  
 MAHARASHTRA - 431503  
 Contact No.: 9423959697  
 Email: shubhamkabra2@gmail.com

Policy No : 2805 2042 0454 1401 000

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

### Renewal of Your Optima Restore Floater Insurance Policy

Dear Mr Shubham Vyankatesh Kabra ,

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](http://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,



Authorized Signatory

Location: Mumbai

Date: 03/08/2022

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](mailto: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. SHUBHAM VYANKATESH KABRA has paid Rs. 18672 (Rupees Eighteen Thousand Six Hundred Seventy-Two And Zero Paise Only) towards premium for Optima Restore Floater Policy No. 2805204204541401000 issued to MR. SHUBHAM VYANKATESH KABRA for period of 29/06/2022 to 28/06/2023.

For and on behalf of HDFC ERGO General Insurance Company Limited

Location: Mumbai

Date: 03/08/2022



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.
5. 80D benefit is applicable for only Self, Spouse, Dependent Children and Dependent parents.

Policy Schedule - Optima Restore Floater

Policy Number	2805 2042 0454 1401 000		
Policy Holder's Name	Mr Shubham Vyankatesh Kabra		
Policy Holder's Address	SHASTRI NAGAR SAILU PARBHANI PARBHANI MAHARASHTRA - 431503		
Policy Holder State Name & Code	Maharashtra(27)	Place of Supply	MAHARASHTRA
GSTIN/ UIN (if any) of Policy Holder			
First policy inception date	29/06/2018	Policy Issuance Date	03/08/2022
Policy Period	From 00:01 hrs on 29/06/2022 To 24:00 hrs on 28/06/2023		
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		
GSTIN	27AABCL5045N1Z8		
EIA Number	Not provided		
Intermediary Name	BROKER : JAINUINE INSURANCE BROKER PVT LTD	Intermediary Contact No	-
Intermediary Code	21038464	Description/ Harmonized System Of Nomenclature Code	Accident and Health insurance Services/9971

Insured Person Details						
Particulars / Member ID	Member 1 Shubham Vyankatesh Kabra / 2021110010109347	Member 2 RADHARANI S KABRA / 2022210017936338	Member 3	Member 4	Member 5	Member 6
Date of Birth (Age)	07/05/1995 (27)	15/05/1995 (27)	-	-	-	-
Relationship to Policy Holder	Self	Wife	-	-	-	-
Base Sum Insured (₹)	1000000					
Multiplier Benefit SI (₹)	500000					
Protector Rider Sum Insured (₹)	-					
Total Sum Insured (₹)	1500000					

Other Riders and Benefits (₹)						
Protector Rider	-					
Hospital Daily Cash Rider SI (Max. 30 days)	-					
Critical Advantage Rider SI (\$)	-	-	-	-	-	-
IPA Rider SI	-	-	-	-	-	-
my: health Critical Illness Sum Insured (Rs.)						
my: health Critical Illness Plan						
Unlimited Restore Benefit	No					

Nominee Details	
Nominee Name : Radharani S Kabra	Relationship to Policyholder: Spouse
The nominee must be an immediate relative of the policyholder. For all other Insured Persons the policy holder shall be the nominee.	

Premium Calculation (₹)			
Net Premium	15824	CGST@9%	1424
Discounts	0	SGST/UTGST@9%	1424
Loadings	0	IGST@18%	0
Taxable Premium	15824	Any other Cess or Taxes	0
Gross Premium	18672		
Gross Premium (in words)	Rupees Eighteen Thousand Six Hundred Seventy-Two And Zero Paise Only		

The stamp duty of Rs. 1/- ( Rupees One And Zero Paise Only ) paid vide e-stamp Certificate No. LOA NO. CSD/418/2022/3270 dated 27/07/2022.  
 I/ We hereby declare that though our aggregate turnover in any preceding financial year from 2017-18 onwards is more than the aggregate turnover notified under sub-rule (4) of rule 48, we are not required to prepare an invoice in terms of the provisions of the said sub-rule  
 Original for Recipient/ Duplicate for Supplier  
 Whether tax is payable on reverse charge basis: No

Policy Schedule - Optima Restore Floater

Exclusion(s) / Special Condition(s) (Refer the leaflet attached in the policy document w.r.t. exclusions) :						
Member ID No.	Name	Exclusion Type	Applicable on SI	Health Condition	Exclusion Duration (Years)	Portability/ Renewal Benefit
2021110010109347	Shubham Vyankatesh Kabra					For Rs 1000000(Rupees Ten 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.  For Rs 300000(Rupees Three Lakhs) Sec 5 A (i) and Sec 5 A (ii) Sec 5 A (iii) of the policy wording is waived.

Claim Administrator : HDFC ERGO General Insurance Company Ltd

For and on behalf of HDFC ERGO General Insurance Company Limited

Location: Mumbai


Date: 03/08/2022



Authorized Signatory

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

SCHEDULE OF BENEFITS	
In-patient Treatment	Upto 1000000
Pre-Hospitalization	Upto 1000000 for 60 days
Post-Hospitalization	Upto 1000000 for 180 days
Day Care Procedures	Upto 1000000
Domiciliary Treatment	Upto 1000000
Organ Donor	Upto 1000000
Daily Cash for choosing Shared Accommodation	Rs.800 per day, Maximum Rs.4,800
Ambulance (per hospitalization limit)	Upto Rs.2,000 per Hospitalization
Emergency Air Ambulance Cover	Covered upto rs. 2.5 Lacs per hospitalization and maximum upto sum insured in an year
E-Opinion in respect of a Critical Illness	One per policy year
Restore Benefit	100% of Basic SI (for any illness or any insured person)
Multiplier Benefit	Bonus of 50% of the Basic SI for every claim free policy year, maximum upto 100%. In case of claim, accumulated bonus will be reduced by 50%
Preventive Health Check-up (Floater)	Upto a maximum of Rs.5,000 per policy, at the end of each year at renewal.

	
Policy No.: 2805204204541401000	
Insured Name	Gender
Shubham Vyankatesh Kabra	M
Radharani S Kabra	F

**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. Alternatively you may write to us at Healthclaims@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.