



Mr Sandesh Subhash Zambad FULZAN PLOT NO 27-28, NEAR KAMGAR CHOWK N 2 CIDCO AURANGABAD MAHARASHTRA - 431001 Contact No.: 9325877333 Email: sandeshzambad@gmail.com

Policy No : 2805 2035 7937 2002 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 Sandesh Subhash Zambad,

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 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,

Kargotra

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. 1
- 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 MR. SANDESH SUBHASH ZAMBAD has paid Rs. 37352 (Rupees Thirty-Seven Thousand Three Hundred Fifty-Two And Zero Paise Only) towards premium for Optima Restore Floater Policy No. 2805203579372002000 issued to MR. SANDESH SUBHASH ZAMBAD for period of 20/08/2022 to 19/08/2023.

For and on behalf of HDFC ERGO General Insurance Company Limited

Location: Mumbai Date: 20/08/2022

Razotra

Authorized Signatory

\*Note

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

Location: Mumbai Date: 20/08/2022

# Policy Schedule - Optima Restore Floater



Policy Number			2805	203	5 7937 2002 000										
Policy Holder's Name			Mr Sandesh Subhash Zambad												
Policy Holder's Address		FU	FULZAN PLOT NO 27-28, NEAR KAMGAR CHOWK N 2 CIDCO AURANGABAD MAHARASHTRA - 431001												
Policy Holder State N					Maharashtra(27) Place of Supply MAHARASHTRA								SHTRA		
	I/ UIN (if any) of Policy Holder														
First policy inception date				25/07/2020 Policy Issuance Date 20/08/2022							22				
Policy Period			From	From 20:32 hrs on 20/08/2022 To 24:00 hrs on 19/08/2023											
Issuing/Servicing Off	g/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			27AA	27AABCL5045N1Z8											
EIA Number			5000	5000031493565											
Intermediary Name		BF			PVILID				Intermediary Contact No -						
Intermediary Code			2103				Description/ Harmonized System Nomenclature Code			em Of	m Of Accident and Health insurance Services/9971				
Insured Person Det	ails														
			Member 1		Member 2	M	lember 3		Member 4		Memb	per 5	Member 6		
Particulars / Member	ID	SUBI	SANDESH HASH ZAME / 0010000816	ESH ZAMBAD Zambad / Master Kaveer Sandesh Zambad / Sandesh Zambad / Sandesh Zambad 2020010000816300		d /	2020010000816298								
Date of Birth (Age)		21	/12/1988 (33	3)	28/10/1992 (29)	29/0	08/2016 (5)		30/07/2019 (3)		-		-		
Relationship to Policy			Self		Wife		Son		Daughter		-		-		
Base Sum Insured (₹	)						2	2000	0000						
Multiplier Benefit SI (	₹)						2	2000	0000						
Protector Rider							20	150	61.00						
Sum Insured (₹)		305861.88													
Total Sum Insured (₹	)						43	058	361.88						
Other Riders and B	onofite (	₹)													
Protector Rider						-		On	ted						
Hospital Daily Cash I	Rider SI							00							
(Max. 30 days) Critical Advantage R									-						
(\$)			-		-		-		-		-		-		
IPA Rider SI			-		-		-		-		-		-		
my: health Critical Illi Sum Insured (Rs.)	ness														
my: health Critical Illi Plan	ness														
Unlimited Restore Be	enefit	No													
Nominee Details		1													
Nominee Name : Mrs Netal Sandesh Zambad Relationship to Policyholder: Wife															
The nominee must be an immediate relative of the policyholder. For all other Insured Persons the policy holder shall be the nominee.															
Premium Calculation				<u> </u>											
Net Premium		1			3165/	I CGS	T@0%						2849		
Discounts							r/UTGST@	9%					2849		
Loadings				0  IGST@18%							0				
Taxable Premium							other Cess c	or Ta	axes				0		
Gross Premium					37352										
Gross Premium (in w	/ords)		Rupees Thi	rty-S	even Thousand Three		ed Fifty-Two	o Ar	nd Zero Paise Or	nly					
The stamp duty of Re	s. 1/- ( Ru	pees	One And Ze	ero Pa	aise Only ) paid vide e	-stamp	Certificate	No.	LOA NO. CSD/4	18/2022/3	3270 da	ated 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															
Whether tax is payab	ole on rev	erse c	charge basis	: No											
Exclusion(s) / Spec	ial Condi	ition(s	s) (Refer the	e leat	flet attached in the p	olicy d	ocument w	/.r.t	. exclusions) :						
Member ID No.		Na	ime		Exclusion Type		Applicable on SI	Н	ealth Condition	Exclusion Duration (Years)		Portability/	Renewal Benefit		
2020010000816301	00816301 SANDESH SUBHAS ZAMBAD										For Rs 2000000(Rupees Twenty Lakhs) Sec 5 A (i) and Sec 5 A (ii) of the policy wording is waived and Se 5 A (iii) is reduced to 1 year.				



## Policy Schedule - Optima Restore Floater

Member ID No.	Name	Exclusion Type	Applicable	Health Condition	Exclusion	Portability/ Renewal Benefit
			on SI		Duration	
					(Years)	
2020010000816300	Mrs Netal Sandesh Zambad					For Rs 2000000(Rupees Twenty Lakhs) Sec 5 A (i) and Sec 5 A (ii) of the policy wording is waived and Sec 5 A (iii) is reduced to 1 year.
2020010000816299	Master Kaveer Sandesh Zambad					For Rs 2000000(Rupees Twenty Lakhs) Sec 5 A (i) and Sec 5 A (ii) of the policy wording is waived and Sec 5 A (iii) is reduced to 1 year.
2020010000816298	Baby Veera Sandesh Zambad					For Rs 2000000(Rupees Twenty Lakhs) Sec 5 A (i) and Sec 5 A (ii) of the policy wording is waived and Sec 5 A (iii) is reduced to 1 year.

Claim Administrator : HDFC ERGO General Insurance Company Ltd

For and on behalf of HDFC ERGO General Insurance Company Limited

Kargotra Authorized Signatory

Location: Mumbai Date: 20/08/2022

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

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	SCHEDULE OF BENEFITS					
In-patient Treatment	Upto 2000000					
Pre-Hospitalization	Upto 2000000 for 60 days					
Post-Hospitalization	Upto 2000000 for 180 days					
Day Care Procedures	Upto 2000000					
Domiciliary Treatment	Upto 2000000					
Organ Donor	Upto 2000000					
Daily Cash for choosing Shared Accommodation	Rs.1000 per day, Maximum Rs.6,000					
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.10,000 per policy, at the end of each year at renewal.					



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Insured Name	Gender	
Sandesh Subhash Zambad	М	
Mrs Netal Sandesh Zambad	F	
Master Kaveer Sandesh Zambad	М	
Baby Veera Sandesh Zambad	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.