



Mrs Nita Satish Baldava ADARSH NAGAR SAILU NA NA SAILU MAHARASHTRA-431503 Contact No.: 9404503200

Policy No : 2805203641854603000

Intermediary Code	Intermediary Name	Intermediary Contact Number
21038464	JAINUINE INSURANCE BROKER PVT	

Renewal of Your Optima Restore Floater Insurance Policy

Dear Mrs Nita Satish Baldava,

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 http://www.hdfcergo.com/our-hospitals-network.aspx

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

Warm Regards,

Sharn

Authorized Signatory

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 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 Proposer NITA SATISH BALDAVA has paid Rs.51448 (Rupees FIFTY-ONE THOUSAND FOUR HUNDRED FORTY-EIGHT) towards premium for Policy No. 2805203641854603000 issued to MRS NITA SATISH BALDAVA for period 06-Mar-2023 to 05-Mar-2024.

For and on behalf of HDFC ERGO General Insurance Company Limited

Asharmon

Authorized Signatory

*Note

Location: Mumbai

Date: 03/03/2023

- 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.

Location: Mumbai Date: 03/03/2023



Policy Schedule - Optima Restore Floater

Policy Number		2805 2036 4185 4603 000										
Policy Holder's Name	;		Mrs Nita Satish Baldava									
Policy Holder's Addre				ADARSH NAGAR SAILU NA NA SAILU MAHARASHTRA-431503								
Policy Holder State N			Maharashtra & 27				Place of Supply			MAHARASHTRA		
GSTIN/ UIN (if any) o												
First policy inception			06/03/201	06/03/2018 Policy Issuance Date 03/03/202						23		
Policy Period			From 00:	From 00:01 hrs on 06/03/2023 To 24:00 hrs on 05/03/2024								
Issuing/Servicing Office			Policy Issuing Office : 2ND FLOOR , MALPANI S OBEROI TOWER, OPPOSITE GOVERNMENT MILK DAIRY, RAMANAND COLONY, JALNA ROAD, AURANGABAD -431001, MAHARASHTRA AURANGABAD, 431001.									
GSTIN			27AABCL	27AABCL5045N1Z8								
EIA Number												
Intermediary Name	ame		JAINUINE	JAINUINE INSURANCE BROKER PVT LTD Intermediary Contact No								
Intermediary Code			21038464					em Of Accident and Health insurance Services/9971				
						NO	menclature Code			Services/s	9971	
Insured Person Deta	ails						1	T				
Particulars / Member	ן טו	Baby Shr Balo	iber 1 ushti Satish Java / 001127734	Member 2 Mr Satish Baldava / 2020010001127735	Member 3 NITA SATIS BALDAVA 202001000112	/	Member 4		Member 5 Member 6			
Date of Birth (Age)		20/08/1	998 (24)	13/03/1970 (52)	21/09/1972 (-		-		-	
Relationship to Policy	/ Holder		ighter	Husband	Self	,	-	1	-		-	
Base Sum Insured (₹))		0	1	1	150	0000					
Multiplier Benefit SI (0000					
Protector Rider	.,											
Sum Insured (₹)							-					
Total Sum Insured (₹)						250	0000					
	1	- >				200						
Other Riders and Be	enefits (र	()										
Protector Rider Hospital Daily Cash F (Max. 30 days)	Rider SI	-										
Critical Advantage Ri	der SI				[
(\$)			-	-	-		-		-		-	
IPA Rider SI			-	-	-		-		-		-	
my: health Critical Illr Sum Insured (Rs.)	ness											
my: health Critical Illr Plan	ness											
Unlimited Restore Be	enefit				-	١	No				·	
Nominee Details												
Nominee Name : Mr	Satish Ba	Idava				Re	lationship to Poli	cvholder: H	lusbar	nd		
			tive of the p	olicyholder. For all oth	er Insured Perso			,				
Premium Calculatio	on (<)											
Net Premium Discounts					CGST@9%	<u></u>	,				<u> </u>	
					SGST/UTGST	<u>@</u> 9%)					
Loadings Taxable Premium		0 IGST@0%				0						
Gross Premium				43600 Any other Cess or Taxes 51448						0		
Gross Premium (in w	orde)	Run	oos Fifty_On	e Thousand Four Hun								
			Only) naid	vide e-stamp Certificat		/303/	2022/1381 dated	20/03/202	2			
The stamp duty of Rs. 1/- (Rupees One Only) paid vide e-stamp Certificate No. LOA/CSD/303/2022/1381 dated 29/03/2022. Original for Recipient/ Duplicate for Supplier Whether tax is payable on reverse charge basis: No												
					aliay de averes	141	t oxoluciona)					
Member ID No.	al Condit	Name	eter the lea	flet attached in the po Exclusion Type				Exclusion	1	Dortobility/	Banawal Banafit	
		Name		Exclusion Type	Applicabl on SI			Duration (Years)	n i)			
2020010001127734	Baby	Shrushti Baldava	Satish						For Rs 1000000(Rupees Ten Lakhs) Sec 5 A (i) and Sec 5 A (ii) Sec 5 A (iii) of the policy wording is waived.			
2020010001127736	NITA S	ATISH B/							For Rs 1000000(Rupees Ten Lakhs) Sec 5 A (i) and Sec 5 A (ii) Sec 5 A			
2020010001127735	Mr ۹	Ir Satish Baldava For Rs 100000 Sec 5 A (i) and		s 1000000 A (i) and S	wording is waived. (Rupees Ten Lakhs) Sec 5 A (ii) Sec 5 A							
(iii) of the policy wording is waive						wording is waived.						



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Authorized Signatory

Policy Schedule - Optima Restore Floater

Claim Administrator : HDFC ERGO GENERAL INSURANCE COMPANY LTD

For and on behalf of HDFC ERGO General Insurance Company Limited

Location: Mumbai Date: 03/03/2023

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

SCHEDULE OF BENEFITS			
In-patient Treatment	Upto 150000		
Pre-Hospitalization	Upto 1500000 for 60 days		
Post-Hospitalization	Upto 1500000 for 180 days		
Day Care Procedures	Upto 150000		
Domiciliary Treatment	Upto 1500000		
Organ Donor	Upto 150000		
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.8,000 per policy, at the end of each year at renewal.		



HDFC ERGO Policy No	.: 2805203641854603000
Insured Name	Gender
Baby Shrushti Satish Baldava	Female
Nita Satish Baldava	Female
Mr Satish Baldava	Male

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.