



2805203636575103000

Mr Shyam Trilokchand Agrawal
C-15 TOWN CENTER B/H CIDCO
BUSSTAND N-1 CIDCO Aurangabad
AURANGABAD
MAHARASHTRA-431001
Contact No.: 9689930232

Policy No : 2805203636575103000

| Intermediary Code | Intermediary Name | Intermediary Contact Number |
|-------------------|-------------------|-----------------------------|
| | | |

Renewal of Your Optima Restore Floater Insurance Policy

Dear Mr Shyam Trilokchand Agrawal ,

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.

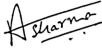
Please visit our website www.hdfcergo.com for more information about our Company, Grievance handling and any other support. To know the updated list of our network hospitals please visit <http://www.hdfcergo.com/our-hospitals-network.aspx>

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

Warm Regards,

Location: Mumbai

Date: 13/05/2023



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 SHYAM TRILOKCHAND AGRAWAL has paid Rs.34952 (Rupees THIRTY-FOUR THOUSAND NINE HUNDRED FIFTY-TWO) towards premium for Policy No. 2805203636575103000 issued to MR SHYAM TRILOKCHAND AGRAWAL for period 14-May-2023 to 13-May-2024.

For and on behalf of HDFC ERGO General Insurance Company Limited

Location: Mumbai

Date: 13/05/2023



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 2036 3657 5103 000 | | |
| Policy Holder's Name | Mr Shyam Trilokchand Agrawal | | |
| Policy Holder's Address | C-15 TOWN CENTER B/H CIDCO BUSSTAND N-1 CIDCO Aurangabad AURANGABAD MAHARASHTRA-431001 | | |
| Policy Holder State Name & Code | Maharashtra & 27 | Place of Supply | MAHARASHTRA |
| GSTIN/ UIN (if any) of Policy Holder | | | |
| First policy inception date | 29/04/2016 | Policy Issuance Date | 13/05/2023 |
| Policy Period | From 00:01 hrs on 14/05/2023 To 24:00 hrs on 13/05/2024 | | |
| Issuing/Serviceing Office | Policy Issuing Office : 2ND FLOOR , MALPANI S OBEROI TOWER, OPPOSITE GOVERNMENT MILK DAIRY, RAMANAND COLONY, JALNA ROAD, AURANGABAD -431001, MAHARASHTRA AURANGABAD, 431001. | | |
| GSTIN | 27AABCL5045N1Z8 | | |
| EIA Number | | | |
| Intermediary Name | | | |
| Intermediary Code | | Intermediary Contact No | |
| | | Description/ Harmonized System Of Nomenclature Code | Accident and Health insurance Services/9971 |

| Insured Person Details | | | | | | |
|------------------------------------|--|--|--|--|----------|----------|
| Particulars / Member ID | Member 1 SHYAM TRILOKCHAND AGRAWAL / 202009252816052 | Member 2 Mrs Sangeeta Shyam Agrawal / 202009252816053 | Member 3 Master Naman Shyam Agrawal / 202009252816054 | Member 4 Baby Priyanshi Shyam Agrawal / 202009252816055 | Member 5 | Member 6 |
| Date of Birth (Age) | 23/03/1979 (44) | 17/10/1980 (42) | 27/01/2003 (20) | 25/01/2006 (17) | - | - |
| Relationship to Policy Holder | Self | Wife | Son | Daughter | - | - |
| Base Sum Insured (₹) | 1500000 | | | | | |
| Multiplier Benefit SI (₹) | 1000000 | | | | | |
| Protector Rider Sum Insured (₹) | - | | | | | |
| Total Sum Insured (₹) | 2500000 | | | | | |

| 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 : Mrs Sangeeta Shyam Agrawal | 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 (₹) | | | |
|---|--|-------------------------|------|
| Net Premium | 31178.93 | CGST@9% | 2666 |
| Discounts | 1558.93 | SGST/UTGST@9% | 2666 |
| Loadings | 0 | IGST@0% | 0 |
| Taxable Premium | 29620 | Any other Cess or Taxes | 0 |
| Gross Premium | 34952 | | |
| Gross Premium (in words) | Rupees Thirty-Four Thousand Nine Hundred Fifty-Two | | |
| 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 | | | |

| 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 |
| 202009252816052 | SHYAM TRILOKCHAND AGRAWAL | | | | | For Rs 1000000(Rupees Ten Lakhs) Sec C1 (i) and Sec C1 (ii) Sec C1 (iii) of the policy wording is waived. |
| 202009252816055 | Baby Priyanshi Shyam Agrawal | | | | | For Rs 1000000(Rupees Ten Lakhs) Sec C1 (i) and Sec C1 (ii) Sec C1 (iii) of the policy wording is waived. |

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 |
| 202009252816054 | Master Naman Shyam Agrawal | | | | | For Rs 1000000(Rupees Ten Lakhs) Sec C1 (i) and Sec C1 (ii) Sec C1 (iii) of the policy wording is waived. |
| 202009252816053 | Mrs Sangeeta Shyam Agrawal | | | | | For Rs 1000000(Rupees Ten Lakhs) Sec C1 (i) and Sec C1 (ii) Sec C1 (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: 13/05/2023



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 1500000 |
| Pre-Hospitalization | Upto 1500000 for 60 days |
| Post-Hospitalization | Upto 1500000 for 180 days |
| Day Care Procedures | Upto 1500000 |
| Domiciliary Treatment | Upto 1500000 |
| Organ Donor | Upto 1500000 |
| 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. |



Policy No.: 2805203636575103000

| Insured Name | Gender |
|------------------------------|--------|
| Shyam Trilokchand Agrawal | Male |
| Baby Priyanshi Shyam Agrawal | Female |
| Master Naman Shyam Agrawal | Male |
| Mrs Sangeeta Shyam Agrawal | Female |

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.