



ORIENTAL MEDICLAIM INSURANCE POLICY(INDIVIDUAL) POLICY SCHEDULE

IRDA UIN NO.:OICHLIP23084V042223

Policy No. : 182100/48/2024/2586	Prev. Policy No. : 182100/48/2023/2802
Cover Note No. : -	Cover Note Date : -
Insured's Code : 117392969	Issue Office Code : 182100
Insured Name : USHA DINESH KABRE (GSTIN: 0)	Issue Office Name : BO CHIKAL THANA AURANGABAD (GSTIN: 27AAACT0627R4ZW)
Address : 2012, GANPATI PRASAD A/P/- MARWADI GALLI, AT-ERANDOL, DIST-JALGOAN, JALGAON MAHARASHTRA 425109	Address : OFFICE NO.1 AND 2 [P] 3RD FLOOR, ABC EAST, BESIDE PROZONE MALL, MIDC AREA, CHIKALTHANA AURANGABAD MAHARASHTRA 431003
Tel./Fax/Email : / / 8421191130 / svrplerandol@gmail.com	Tel./Fax/Email : 0240-2331985, 2332454 / 0240-- 2332454 / santosh.k@orientalinsurance.co.in

Agent/Broker Details

Dev.Off.Code :
Agent/Broker : LC0000000281 M/S JAINUINE INSURANCE BROKERS PVT LTD
Address : 4th Floor Office No. E-5, Aurangabad Business Centre, Kesarsingpura
Adalat,,AURANGABAD MAHARASHTRA -431001,AURANGABAD,MAHARASHTRA,431001
Tel/Fax/Email : 02572225747/8888841491//

Period of Insurance : FROM 00:00 ON 24/10/2023 TO MIDNIGHT OF 23/10/2024

Collection No. & Dt. : CC 8718002597 - 09/10/2023 GST INVOICE NO :272217773 UIN :0

Gross Premium : 25,635 Service Tax : 4,614 Stamp Duty : .5 Total : 30,249

Co-insurance Details : Nil

Channel of Sale	Yes/No
1.Online	YES
2.Fresh	NO
3.Renewal	YES

TPA Details :

TPA ID : YA0000000370
TPA Name : Ericson Insurance TPA Pvt. Ltd.
Address : 4th Floor, New Vijay Cinema Building S.T.Road, Chembur Mumbai - 400 071 (MH)
MUMBAI 400071 Toll Free No. : 1800222034
Telephone No : 022 - 25280280 FAX No. :

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

Place : AURANGABAD



IRDA-REGNO-556

Date : 09/10/2023

For and on behalf of
The Oriental Insurance Company Limited

This is an electronically generated document (Policy Schedule)..The Policy document duly stamped will be sent by

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

Page 1 of 3

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 182100/48/2024/2586

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	MRS USHA D KABRE	F	27/01/1952	71	Self	NO	3,00,000		

Nominee Details

Name Of the Nominee	Relationship With the Insured	Age Of the Nominee	M/F/TG*
MR. PRASAD D KABRE	Dependant Child	31	M

Total Premium in words : Indian Rupees Thirty Thousand Two Hundred Forty-Nine 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 BO CHIKAL THANA AURANGABAD (GSTIN: 27AAACT0627R4ZW) on 09-OCT-23.

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
182100/48/2019/3258	22-OCT-18	21-OCT-19	OIC DO II A'BAD	

Place : AURANGABAD

Date : 09/10/2023



IRDA-REGNO-556

For and on behalf of
The Oriental Insurance Company Limited

This is an electronically generated document (Policy Schedule)..The Policy document duly stamped will be sent by

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

Page 2 of 3

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 182100/48/2024/2586

182100/48/2020/3559	24-OCT-19	23-OCT-20	The Oriental Insurance Company Ltd.	8,00,000
182100/48/2021/5292	24-OCT-20	23-OCT-21	The Oriental Insurance Company Ltd.	3,00,000
182100/48/2022/3247	24-OCT-21	23-OCT-22	The Oriental Insurance Company Ltd.	3,00,000
182100/48/2023/2802	24-OCT-22	23-OCT-23	The Oriental Insurance Company Ltd.	3,00,000

Claim History Data

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

"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 : LC0000000281

Authorised Signatory

Place : AURANGABAD



IRDA-REGNO-556

Date : 09/10/2023

For and on behalf of
The Oriental Insurance Company Limited

This is an electronically generated document (Policy Schedule)..The Policy document duly stamped will be sent by

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

Page 3 of 3

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