

**Group Health Insurance**  
**[UIN: CHOHLGP21307V022021]**

CHOLAMANDALAM MS GENERAL INSURANCE COMPANY Ltd.

ADDRESS: AURANGABAD BRANCH OFFICE  
Shop No- 4, Plot No- 33, Rokdiya Hanuman Colony,  
Opp. LMS Jeweller Jalna road, Aurangabad - 431005

KRANTI CHOWK S.O

CITY: AURANGABAD STATE: MAHARASHTRA

GSTIN: 27AABCC6633K1ZJ

Branch / Regional office : AURANGABAD BRANCH OFFICE

GST Invoice No.:2825471734672

DATE: 04/10/2023

PAN: AABCC6633K

SAC Code: 997133

SAC Description: Accident and health insurance services

**Endorsement No** : 2825/00107721/003/02

**Attached to Policy No** : 2825/00107721/000/02

**Name & Address of the Insured** : ANNAPURNA COTEX PVT LTD  
GUT NO 237 5,PAITHAN ROAD, SHEVGAON,SHEVGAON S.O  
GST No.: 27AAHCA0876A1ZZ  
AHMED NAGAR  
MAHARASHTRA  
414502

**Premium Paid** : Rs. 126.605.00 . + CGST (9%) 1,229.49 + SGST (9%) 1,229.49 + IGST (0%) .00

**Premium for Current Endorsement** : Rs. 2,447.00 + CGST (9%) 220.00 + SGST (9%) 220.00 + IGST (0%) .00

**Premium After Endorsement** : Rs. 129.052.00 . + CGST (9%) . 1,449.49 + SGST (9%) . 1,449.49 + IGST (0%) . .00

**Policy Period** : From 30/07/2023 To 29/07/2024

**Effective Date Of This Endorsement** : 25/09/2023

**Type of Endorsement** : Financial

**Reason for Endorsement** : Addition Of Employee

**Total No of Lives (Insured)** : 31

Notwithstanding anything contained herein to the contrary under the within mentioned policy schedule,it is hereby declared and agreed that, at the request of the insured following changes are made to the Policy.

1Persons have been included in the policy, as per the list enclosed.

Hence an amount of Rs.2887 has been collected from the insured.

All other terms, conditions, exclusions and warranties of the policy remain unaltered.

Place : CHENNAI

CHOLAMANDALAM MS GENERAL INSURANCE CO. LTD

Date : 04/10/2023

Authorised Signatory

CHOLA MS

**Schedule - Group Health Policy**  
**Attached To and Forming part of Policy No 2825/00107721/003/02**  
**ANNAPURNA COTEX PVT LTD**

**Addition Of Persons**

SNo	Emp ID	Company Name	Location	Grade	Name Of Insured	Relation ship	Date Of birth	Age	Sex	Effective Date	Sum Insured
1	76	ANNAPURNA COTEX PVT LTD	AURANGABAD BRANCH OFFICE		GURUWINDAR SING	SELF	18/02/1997	26	M	25/09/2023	300000

Whether tax is payable under reverse charge basis - No.

Place : CHENNAI

Date : 04/10/2023

Regd.&Head Office:Dare House, 2nd Floor, No.2, N.S.C Bose Road, Chennai-600 001, India  
CIN: U66030TN2001PLC047977 | IRDAI Reg. No. 123

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CHEOLA MS