



Mr Harish Kumar Agrawal

-PLOTNO 55 RAVINDRA NAGAR MOHADI ROAD JALGAON JALGAON MAHARASHTRA - 425001 Contact No.: 99XXXXXX9 Email: vaxxxxxxnd@rxxxxxxx.com

Policy No : 2805 2036 3847 3504 000

| Intermediary Code | Intermediary Name                             | Intermediary Contact Number |
|-------------------|---|-----------------------------|
| 21038464          | BROKER : JAINUINE INSURANCE<br>BROKER PVT LTD | -                           |

#### **Renewal of Your Optima Restore Floater Insurance Policy**

Dear Mr Harish Kumar 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 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.

Proposer details have been updated basis the information present in the KYC documents. If you find any detail which needs to be corrected, request you to create/ modify the eKYC ID and place a request for endorsement.

Soft copy of the policy is valid for all purposes including claims.

Warm Regards,

Sharmo

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 MR. HARISH KUMAR AGRAWAL has paid Rs. 40214 (Rupees Forty Thousand Two Hundred Fourteen And Zero Paise Only) towards premium for Optima Restore Floater Policy No. 2805203638473504000 issued to MR. HARISH KUMAR AGRAWAL for period of 14/04/2024 to 13/04/2025.

For and on behalf of HDFC ERGO General Insurance Company Limited

Location: Mumbai Date: 04/04/2024

Location: Mumbai

Date: 04/04/2024

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 203   | 6 3847 3504 000                                   |                            |       |   |               |            |            |
|---|-----------------------------|--|---|----------------------------|-------|---|---------------|------------|------------|
| Policy Holder's Name  |                             |  | n Kumar Agrawal                                   |                            |       |   |               |            |            |
| Policy Holder's Address   |                             | PLOTN  | IO 55 RAVINDRA NA                                 | GAR MOHADI ROA             | AD J  | JALGAON JALGAON                                 | MAHARA        | SHTRA - 4  | 25001      |
| Policy Holder State Name & C  | ode                         | Maharash   |   |                            |       | e of Supply                                     |               | MAHARAS    |            |
| GSTIN/ UIN (if any) of Policy H   |                             |  |   | I                          |       |   |               | 1          |            |
| First policy inception date   |                             | 31/03/201  | 16  | ŀ                          | Polic | cy Issuance Date                                |               | 04/04/202  | 24         |
| Policy Period   |                             | From 00  | :01 hrs on 14/04/2024                             | 1 To 24:00 hrs o           | on 13 | 3/04/2025                                       |               |            |            |
| Issuing/Servicing Office  |                             |  | or , Malpani s obe<br>Oad, Aurangabad             |                            |       |   |               |            |            |
| GSTIN   |                             | 27AABCL  | .5045N1Z8   |                            |       |   |               |            |            |
| EIA Number  |                             | Not provid   |   |                            |       |   |               |            |            |
| Intermediary Name   |                             | BROKER : JAINUINE INSURANCE BROKER Intermediary Contact No - |   |                            |       |   |               |            |            |
| Intermediary Code   |                             | 21038464   | ŀ   |                            |       | cription/ Harmonized S<br>nenclature Code       | System Of     | Accident a |            |
| Insured Person Details  |                             |  |   |                            |       |   |               |            | 5571       |
|   | Mem                         | per 1  | Member 2  | Member 3                   |       | Member 4  | Memt          | ber 5      | Member 6   |
| Particulars / Member ID   | HARISH<br>AGRA<br>20200926  | KUMAR<br>WAL /   | Mrs Bhavna Harish<br>Agrawal /<br>202009262819137 | CHIRAYU HARIS<br>AGRAWAI / |       | rishita harish<br>agrawal /<br>2021110008033464 |               |            |            |
| Date of Birth (Age)   | 13/11/19                    | 976 (47)   | 08/10/1978 (45)                                   | 07/03/2003 (21)            | )     | 15/10/2004 (19)                                 | -             |            | -          |
| Relationship to Policy Holder   | Se                          | elf  | Wife  | Son                        |       | Daughter  | -             |            | -          |
| Base Sum Insured (₹)  |                             |  |   | 1                          | 000   | 0000  |               |            |            |
| Multiplier Benefit SI (₹)   |                             |  |   |                            | -     |   |               |            |            |
| Protector Rider   |                             |  |   |                            |       |   |               |            |            |
| Sum Insured (₹)   |                             |  |   |                            | -     |   |               |            |            |
| Total Sum Insured (₹)   |                             |  |   | 1                          | 000   | 000   |               |            |            |
| Other Riders and Benefits (   | ₹)                          |  |   |                            |       |   |               |            |            |
| Protector Rider /<br>HDHHLIP21335V022021  | .,                          |  |   |                            | -     |   |               |            |            |
| Hospital Daily Cash Rider SI<br>(Max. 30 days) /<br>HDHHLIP21344V022021                             |                             |  |   |                            | -     |   |               |            |            |
| Critical Advantage Rider SI<br>(\$) /<br>HDHHLIP21342V022021  | -                           |  | -   | -                          |       | -   | -             |            | -          |
| IPA Rider SII /   | -                           |  | -   | -                          |       | -   | -             | -          | -          |
| APOPAIP19004V011920 my: health Critical Illness   |                             |  |   | [                          |       |   |               |            |            |
| Sum Insured (Rs.)   |                             |  |   |                            |       |   |               |            |            |
| my: health Critical Illness<br>Plan   |                             |  |   |                            |       |   |               |            |            |
| Unlimited Restore Benefit   |                             |  |   |                            | N     | 0   |               |            |            |
| Nominee Details   |                             |  |   |                            |       |   |               |            |            |
| Nominee Name : Mrs Bhavna   | Harish Agra                 | awal   |   |                            | Rela  | ationship to Policyhold                         | der: Wife     |            |            |
| The nominee must be an imme   | ediate relati               | ve of the p  | olicyholder. For all oth                          | er Insured Persons         | s the | e policy holder shall be                        | the nomin     | ee.        |            |
| Premium Calculation (₹)   |                             |  |   |                            |       |   |               |            | -          |
| Net Premium   |                             |  |   | CGST@9%                    |       |   |               |            | 3067       |
| Discounts   |                             |  |   | SGST/UTGST@                | 9%    |   |               |            | 3067       |
| Loadings  |                             |  |   | 0 IGST@18%                 | _     |   |               |            | 0          |
| Taxable Premium   |                             |  |   | Any other Cess o           | or Ta | axes  |               |            | 0          |
| Gross Premium   |                             |  | 40214   |                            |       |   |               |            |            |
| Gross Premium (in words)  |                             |  | nousand Two Hundred                               |                            |       |   | 0.4.000000000 |            | 07/10/0000 |
| The stamp duty of Rs. 1/- ( Ru<br>I/ We hereby declare that thou<br>sub-rule (4) of rule 48, we are | gh our aggi<br>not required | regate turn<br>d to prepar                                   | over in any preceding                             | financial year from        | 201   | 7-18 onwards is more                            |               |            |            |
| Original for Recipient/ Duplicat  |                             |  |   |                            |       |   |               |            |            |
| Whether tax is payable on reve  | erse charge                 | e basis: No  |   |                            |       |   |               |            |            |

For declared and accepted pre-exiting medical conditions, waiting period (s) shall apply per policy terms and conditions from 1st policy inception date of the policy, fresh waiting period (s) shall apply on enhanced sum insured.



## Policy Schedule - Optima Restore Floater

| Exclusion(s) / Spec | ial Condition(s) (Refer the lea | aflet attached in the policy | document w          | .r.t. exclusions) : |                                  |  |
|---------------------|---------------------------------|------------------------------|---------------------|---------------------|----------------------------------|--|
| Member ID No.       | Name                            | Exclusion Type               | Applicable<br>on SI |                     | Exclusion<br>Duration<br>(Years) | Portability/ Renewal Benefit   |
| 202009262819136     | HARISH KUMAR<br>AGRAWAL         |                              |                     |                     | , <u> </u>                       | For Rs 700000(Rupees Seven Lakhs)<br>Sec C1 (i) of the policy wording is<br>waived and Sec C1 (ii) is reduced to 1<br>year and Sec C1 (iii) is reduced to 2<br>years |
|                     |                                 |                              |                     |                     |                                  | For Rs 25000(Rupees Twenty-Five<br>Thousand) Sec C1 (i) and Sec C1 (ii)<br>Sec C1 (iii) of the policy wording is<br>waived.  |
|                     |                                 |                              |                     |                     |                                  | For Rs 700000(Rupees Seven Lakhs)<br>Sec C1 (i) and Sec C1 (ii) of the<br>policy wording is waived and Sec C1<br>(iii) is reduced to 1 year.                         |
|                     |                                 |                              |                     |                     |                                  | For Rs 75000(Rupees Seventy-Five<br>Thousand) Sec C1 (i) and Sec C1 (ii)<br>Sec C1 (iii) of the policy wording is<br>waived.   |
|                     |                                 |                              |                     |                     |                                  | For Rs 200000(Rupees Two Lakhs)<br>Sec C1 (i) and Sec C1 (ii) Sec C1 (iii)<br>of the policy wording is waived.   |
|                     |                                 |                              |                     |                     |                                  | For Rs 200000(Rupees Two Lakhs)<br>Sec C1 (i) and Sec C1 (ii) Sec C1 (iii)<br>of the policy wording is waived.   |
| 202009262819137     | Mrs Bhavna Harish Agrawal       |                              |                     |                     |                                  | For Rs 700000(Rupees Seven Lakhs)<br>Sec C1 (i) of the policy wording is<br>waived and Sec C1 (ii) is reduced to 1<br>year and Sec C1 (iii) is reduced to 2<br>years |
|                     |                                 |                              |                     |                     |                                  | For Rs 700000(Rupees Seven Lakhs)<br>Sec C1 (i) and Sec C1 (ii) of the<br>policy wording is waived and Sec C1<br>(iii) is reduced to 1 year.                         |
|                     |                                 |                              |                     |                     |                                  | For Rs 50000(Rupees Fifty<br>Thousand) Sec C1 (i) and Sec C1 (ii)<br>Sec C1 (iii) of the policy wording is<br>waived.  |
|                     |                                 |                              |                     |                     |                                  | For Rs 25000(Rupees Twenty-Five<br>Thousand) Sec C1 (i) and Sec C1 (ii)<br>Sec C1 (iii) of the policy wording is<br>waived.  |
|                     |                                 |                              |                     |                     |                                  | For Rs 225000(Rupees Two Lakhs<br>Twenty-Five Thousand) Sec C1 (i)<br>and Sec C1 (ii) Sec C1 (iii) of the<br>policy wording is waived.                               |
|                     |                                 |                              |                     |                     |                                  | For Rs 200000(Rupees Two Lakhs)<br>Sec C1 (i) and Sec C1 (ii) Sec C1 (iii)<br>of the policy wording is waived.   |
| 2021110008033463    | CHIRAYU HARISH<br>AGRAWAI       |                              |                     |                     |                                  | For Rs 500000(Rupees Five Lakhs)<br>Sec C1 (i) and Sec C1 (ii) of the<br>policy wording is waived and Sec C1<br>(iii) is reduced to 1 year.                          |
|                     |                                 |                              |                     |                     |                                  | For Rs 500000(Rupees Five Lakhs)<br>Sec C1 (i) and Sec C1 (ii) Sec C1 (iii)<br>of the policy wording is waived.  |



#### Policy Schedule - Optima Restore Floater

| Exclusion(s) / Special               | Condition(s) (Refer the le                   | aflet attached in the policy  | document w          | .r.t. exclusions) :                 |                                  |   |
|--------------------------------------|--|-------------------------------|---------------------|-------------------------------------|----------------------------------|---|
| Member ID No.                        | Name   | Exclusion Type                | Applicable<br>on SI | Health Condition                    | Exclusion<br>Duration<br>(Years) | Portability/ Renewal Benefit  |
| 2021110008033464                     | rishita harish agrawal                       |                               |                     |                                     |                                  | For Rs 500000(Rupees Five Lakhs)<br>Sec C1 (i) and Sec C1 (ii) of the<br>policy wording is waived and Sec C1<br>(iii) is reduced to 1 year. |
|                                      |  |                               |                     |                                     |                                  | For Rs 500000(Rupees Five Lakhs)<br>Sec C1 (i) and Sec C1 (ii) Sec C1 (iii)<br>of the policy wording is waived.                             |
| Claim Administrator : H              | DFC ERGO General Insura                      | nce Company Ltd               | For                 | and on behalf of H                  | DFC ERGO                         | ) General Insurance Company Limited   |
|                                      |  |                               |                     |                                     |                                  | Asharma   |
| Location: Mumbai<br>Date: 04/04/2024 |  |                               |                     |                                     |                                  | Authorized Signatory  |
| Explore any of                       | our advanced digital                         | options below and get         | quick assis         | tance for your p                    | oolicy se                        | rvicing queries.  |
|                                      | https://selfhelp.hdfce<br>our "Help" section | rgo.com                       |                     | Live C                              | hat with                         | DIA on www.hdfcergo.com   |
| Send us                              | 'Hi' on our WhatsApp                         | Number 8169 500 500           | D                   | Down                                | load the                         | app by HDFC ERGO  |
| "For detailed policy term            | ns and conditions please visit               | our website https://www.hdfce |                     | nload/policy-wordin                 | <u>gs</u> "                      |   |
|                                      |  | SCHEDULE                      | OF BENEFITS         | 11.1. 1000000                       |                                  |   |
|                                      | t Treatment pitalization                     |                               |                     | Upto 1000000<br>Upto 1000000 for 60 | dovo                             |   |
|                                      | spitalization                                |                               |                     | Upto 1000000 for 180                |                                  |   |
|                                      | Procedures                                   |                               |                     | Upto 1000000                        | uuys                             |   |
|                                      | y Treatment                                  |                               |                     | Upto 1000000                        |                                  |   |
|                                      | n Donor                                      |                               |                     | Upto 1000000                        |                                  |   |
| Daily Cash for choosing              | g Shared Accommodation                       |                               | Rs.8                | 00 per day, Maximum                 | Rs.4,800                         |   |
| Ambulance (per l                     | hospitalization limit)                       |                               | Up                  | to Rs.2,000 per Hospi               | talization                       |   |
| Emergency Air                        | Ambulance Cover                              | Covered upto r                | s. 2.5 Lacs per     | hospitalization and ma              | aximum upto                      | sum insured in an year  |
| E-Opinion in respe                   | ect of a Critical Illness                    |                               |                     | One per policy yea                  | ar                               | -   |
| Restor                               | e Benefit                                    |                               | 100% of Basic       | SI (for any illness or a            | any insured p                    | person)   |
|                                      | erBenefit                                    |                               |                     | reduced by 50%                      | •                                | In case of claim, accumulated bonus will be   |
| Preventive Health                    | Check-up (Floater)                           | Upto a m                      | aximum of Rs.       | 5,000 per policy, at the            | e end of each                    | n year at renewal.  |



# HDFC ERGO

Policy No.: 2805203638473504000

| 009262819136<br>009262819137<br>110008033463 | 13/11/1976<br>08/10/1978 | M<br>F                  |
|--|--------------------------|-------------------------|
|  |                          | F                       |
| 1100000000160                                |                          |                         |
| 110000000000000000000000000000000000000      | 07/03/2003               | М                       |
| 110008033464                                 | 15/10/2004               | F                       |
|  |                          |                         |
|  |                          |                         |
|  |                          |                         |
|  | 110008033464             | 110008033464 15/10/2004 |

#### 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.